

FOCUS GROUP & SURVEY REPORT COMMUNITY HEALTHCARE ASSESSMENT

Freeman Regional Health Services (FRHS)
December 16, 2019

Introduction

The purpose of this report is to present the information obtained from a focus group of stakeholders in Freeman Regional Health Services and from a community health survey open to the public. The document is divided into three sections:

- ✓ Organization and Setting
- ✓ Specific Responses in the Focus Group and Community Health Survey
- ✓ Takeaways

This report provides an accurate representation of the focus group process and outcomes. The process followed a typical focus group format.

- Participants were invited to attend a session that best fit their schedule.
- Participants were limited to a number that would allow for a manageable discussion (less than 12 persons). A total of 10 persons were involved in the process.
- Participants were asked a limited number of questions.
- Participants were encouraged to respond based upon their own experiences.
- The focus group was conducted on December 3, 2019 in the Freeman Regional Health Services Conference Room.

Organization & Setting

Focus Group

Date/Time: 12/3/19; 12:00pm
Location: FRHS Conference Room
Number of Participants: 9
Facilitators: Eric Ambroson
Refreshments: Lunch

Community Health Survey

Date/Time: 11/15/19
Location: Lion's Club Pancake Breakfast
Number of Participants: 140
Facilitators: Eric Ambroson
Refreshments: Breakfast

Demographic Data

Focus Group

Date/Time: 12/3/19; 12:00pm

Participant	Sex	Age
1	F	GG
2	F	BB
3	F	GX
4	F	GG
5	M	BB
6	F	BB
7	M	GG
8	F	GG
9	M	GG
10	M	GX

GX – Generation X

BB – Baby Boomers

GG – Greatest Generation

Male: 40% Female: 60%

Generation X: 2 (20%)

Baby Boom: 3 (30%)

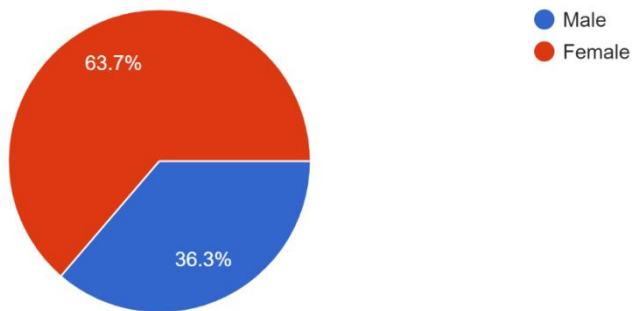
Greatest Generation: 5 (50%)

Survey Respondents

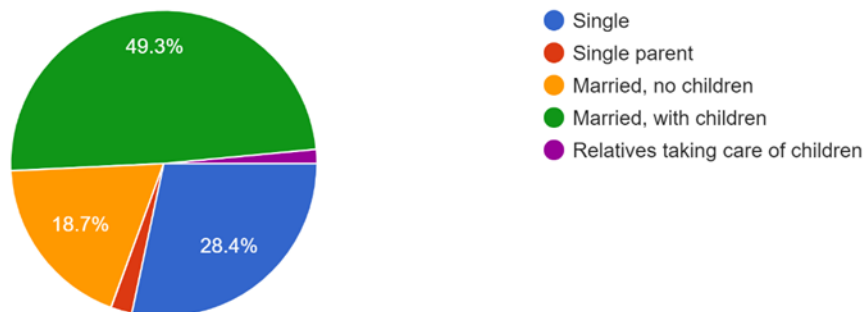
Date/Time: 11/15/19

Number of Respondents: 140

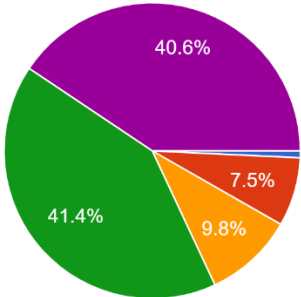
Gender of Respondents



Household Living Arrangement

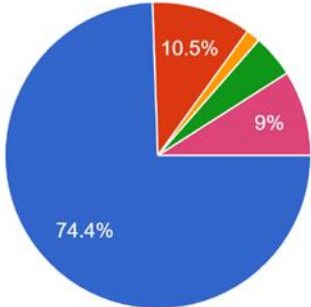


Age Group/Generation of Respondents



- Post - Millennials / Generation Z (born after 1997)
- Millennials / Generation Y (born between 1981 - 1996)
- Generation X (born between 1965 - 1980)
- Baby Boomers (born between 1946 - 1964)
- The Greatest Generation (born before 1945)

Place of Residence



- Freeman
- Rural area just outside of Freeman
- Marion
- Menno
- Parker
- Bridgewater
- Farm country (Hutchinson, Turner, McCook, Hanson Counties, etc.)

Specific Responses

Freeman Regional Health Services

Community Health Needs Assessment

Focus Group Results: 12:00pm Group; December 3, 2019

1. What is your vision of a healthy community? What is healthy about Freeman? What is unhealthy?
 - We are privileged to have what we have
 - Transit brings people from out of town
 - Scale of nursing homes (concern)
 - Diverse community
 - Manufacturing
 - Retail
 - Services
 - Availability of housing!
 - Good care at nursing home
 - Availability of staffing
 - Good corps of physicians
 - Is there a plan for services?
 - Need jobs for spouses
 - Activities/programs for family
 - Other towns are very progressive

2. What is your perception of the Hospital? How is FRHS serving the community well? How could it serve the community better?
 - Partnering with other entities
 - Provides needed services
 - Still independent (still feasible in the future?)
 - Nursing home overlap?
 - 24/7 – 365 service – patient loyalty
 - Home health services (“house calls”)
 - Expanded surgical services / area

3. What is the most pressing health care related need in the community? In what ways can FRHS address these needs?
 - Affordable health care
 - The more primary care physicians can do, the more affordable care will be
 - Live / work balance for physicians
 - Is health of Freeman better because of independence? Or, would affiliation be healthier?
 - Better access to resources
 - Cardiologist / cardiology? Stress testing?
 - ENTs / partnerships
 - Health care is always changing
 - Baby steps! Whatever you (FRHS) do, do it well
 - Technology plays a bigger part in health care services today

Freeman Regional Health Services

Community Health Needs Assessment

Participants' Written Comments; December 3, 2019

1. What is healthy about our community? Healthy Vision? What is Unhealthy?
 - Healthy – a privileged diversity in Freeman. Need willingness to make changes as needed.
 - Unhealthy – lack of housing. Lack of jobs for spouses
 - Enjoying life and interested in everything
 - Living together without marriage
2. What is your overall perception of the hospital? In what ways does it serve the community well? In what ways could it serve the community better?
 - Could be better – offer labor and delivery, prenatal care
 - Saves lives when time is important
 - Excellent – keeps up with improvements
3. What is the most pressing health care related need facing you , your family, or our community? In what ways do you think the hospital addresses this need?
 - Continue emergency medical services
4. Any other comments?
 - We are just lucky here!

Survey Summary

The following includes the facilitator's review of the Community Health Survey conducted on November 15, 2019. Overall there were 140 people who took the survey. The questionnaires were distributed at the Freeman Lion's Club Pancake Feed in Freeman. The Demographic section of this report illustrated "who" responded to the survey. Two thirds of the respondents were female. Nearly half of those who took the survey said they were married with children (or had children who are grown and living on their own). The majority of the respondents were split between the Baby Boom generation, those born between 1946 and 1964, (41.6%) and the Greatest Generation, who were born prior to 1945 (40.6%). The vast majority of the people (84.9%) lived in or right outside of Freeman.

The structure of the survey was divided into four general sections:

- Health Services
- Health Education and Information Services
- Additional Community Support, and
- Quality of Life.

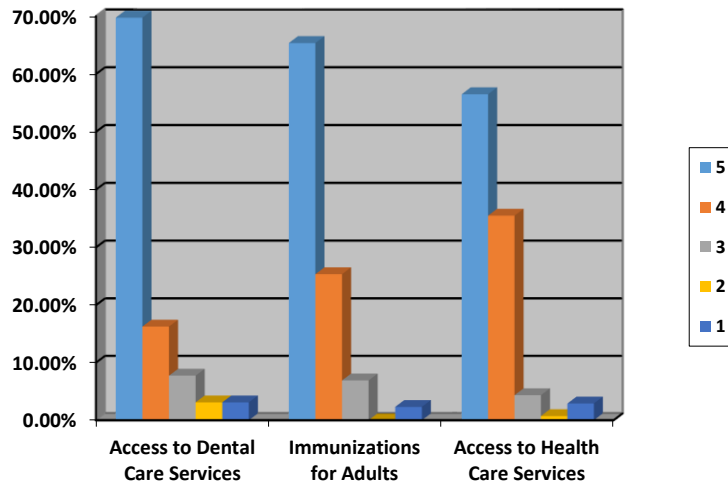
Each section had several categories or issues to which the respondents were asked to rate their satisfaction. A score of "5" was the highest satisfaction rating; while a "1" was the lowest rating. The final question asked respondents what they believed to be the most important issue in the community.

In the **Health Services Section**, respondents were asked to rate their satisfaction with a number of issues related to the type or amount of health care services provided in Freeman. The complete list includes the following:

1. Access to health care services
2. Access to dental care services
3. Weight management services/nutrition counseling
4. Immunizations for adults
5. Cancer prevention, screening, treatment
6. Cardiovascular disease prevention, screening, treatment
7. Diabetes prevention, screening, treatment
8. STD and HIV/AIDS screening and treatment
9. Smoking cessation
10. Mental health services and counseling
11. Alcohol/drug abuse prevention and treatment
12. Domestic abuse shelter and services
13. Violence/injury prevention programs
14. Prenatal, delivery, postpartum care and support
15. Family planning
16. Child preventive and immunization services
17. Breastfeeding support
18. Protection against environmental hazards
19. Prevention of epidemics and spread of disease
20. Preparation, response, recovery from public health emergencies

On average, 95 responses were registered with each item; with a maximum of 138 responses to “Access to health care services” and a low response rate of 62 to “Breastfeeding support.” Those that took the survey may have been unfamiliar or uncomfortable with some of the issues; thus a lower response rate.

The clearest “Satisfaction” ratings were given to “Access to Dental Services,” “Immunizations for Adults,” and “Access to Health Care Services.” The chart below illustrates issues receiving the most ratings of 5. “Child Preventive and Immunization Services” had a distinguished average rating of 4.17.



Most items in the Health Services Section received an average satisfaction rating of 3.79, which would be considered “generally satisfied.” The lowest rated issues were “Prenatal, Delivery, Postpartum Care and Support,” “Family Planning,” and “Domestic Abuse Shelter and Services” with scores of 3.25. The score still registers as a “neutral” to slightly “satisfied” concern, but survey participants may be unaware of available services or have an aversion to some issues.

In the **Health Education and Information Resources Section**, respondents were asked to rate their satisfaction with the level of information or educational resources available in Freeman. The complete list includes the following:

21. Information on how and where to find health care services
22. Information related to health maintenance and disease prevention
23. Facts about diseases, disorders, conditions
24. Health education for adolescents, including issues concerning sexuality
25. Assistance to navigate health care and information systems

This section elicited a few more responses on average among the participants, averaging about 104 responses. Eighty percent of those surveyed were at least satisfied to completely satisfied with “Information on How and Where to Find Health Care Services.” They were, in general, satisfied with “Information related to health maintenance and disease prevention” and “Facts about Diseases, Disorders, and Conditions,” with about 46% of

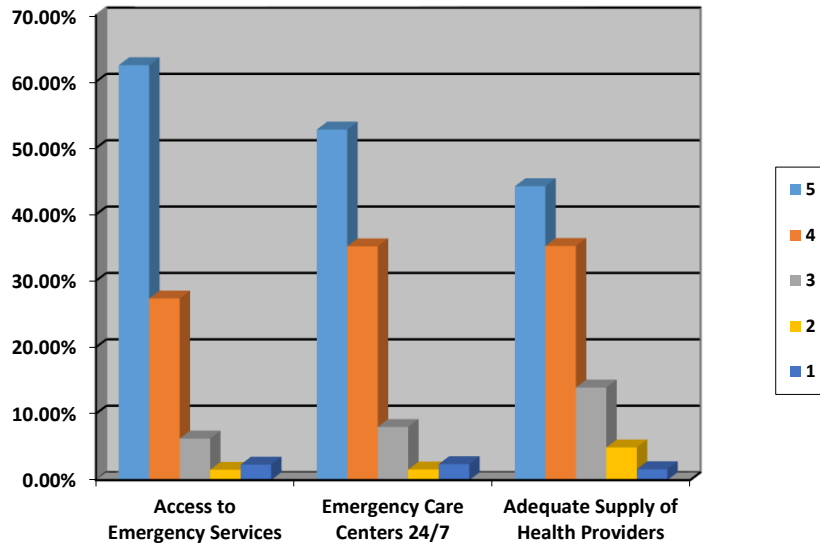
the respondents rating each at least a “4.” Participants were a little bit neutral with “Health Education for Adolescents, Including Issues Concerning Sexuality.” Again, the neutrality of this issues may be due to the lack of knowledge or the sensitivity of the subject. Responses in the Health Education and Information Resources Section averaged 3.83, which is a healthy “satisfied” rating.

The **Additional Community Support Section** asked participants to rate sixteen services or facilities in the community that are considered vital support systems to community health. The list included the following:

26. Quality of child care services
27. Quality of elder care services
28. Public area accessibility by disabled individuals
29. Public policies discouraging discrimination of age, sex, gender, religion, race/ethnicity or sexual orientation
30. Racially/ethnically diverse health care workforce and services
31. Cultural competency training for local health care workforce
32. Safe recreational areas, parks, walking/bike paths
33. Access to wellness and exercise facilities
34. Local higher education options with open-admissions policies
35. Emergency care centers available 7 days a week/24 hours a day
36. Responsive public officials and justice system
37. Air and water quality within safe limits
38. Job training opportunities
39. Access to public transportation
40. Access to emergency medical services
41. Adequate supply of health providers

More respondents gave ratings in the Additional Community Support Section; with 108 responses per question (on average). On average, 95 responses were registered with each item; with a maximum of 128 responses to “Access to emergency medical services” and a low response rate of 84 to “Local higher education options with open-admissions policies.” The point of the question may have been somewhat obscure leading several to leave it blank.

The most “Completely Satisfied” ratings were given to “Access to emergency medical services,” “Emergency care centers available 7 days a week/24 hours a day,” and “Adequate Supply of Health Providers.” The chart below illustrates issues receiving the most ratings of 5. Other notable services included “Safe recreational areas, parks, walking/bike paths,” (average rating of 4.15) and “quality of elder care services” (average rating of 4.13).



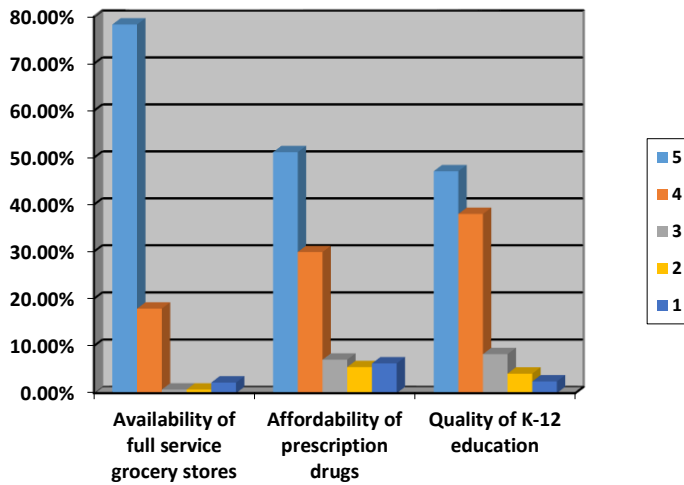
Most items in the Additional Community Support Section received an average satisfaction rating of 3.91, which would be considered “generally satisfied.” The lowest rated issues were “Local higher education options with open-admissions policies,” (3.47) “Job training opportunities,” (3.53) and “Public policies discouraging discrimination age, sex, gender, religion, race/ethnicity or sexual orientation” (3.57). The scores still register as a “neutral” to slightly “satisfied” concern, but survey participants may be unaware of available services or are sensitive to some issues.

The **Quality of Life Section** of the survey asked respondents to rate their satisfaction with various issues and services that contribute to a vibrant community. The issues presented to the participants included:

42. Availability of full service grocery stores
43. Availability of affordable daycare centers
44. Affordability of prescription drugs
45. Quality of K-12 education
46. Safety at schools
47. Affordability of medical services
48. Response time of police to emergency calls
49. Availability of employment opportunities
50. Opportunity for civic/community involvement
51. Availability of supervised after school activities
52. Access to affordable housing
53. Access to information about city, county & state provided resources
54. Access to information about community provided resources
55. Opportunity for small businesses in the community
56. Availability of agencies providing services to adults
57. Availability of agencies providing services to youth

On average, 111 responses were registered with each item; with a maximum of 134 responses to “Availability of full service grocery stores” and a low response rate of 84 to “Availability of affordable daycare centers.” Considering the average generational group that the respondents belonged to, they may not be aware of the availability of day care services in town any more.

The clearest “Completely Satisfied” rating was given to “Availability of full service grocery stores.” “Affordability of prescription drugs,” and “Quality of K-12 education” received a noticeably lower level of “Completely Satisfied” ratings, but still more than the rest. The chart below illustrates issues receiving the most ratings of 5. “Opportunity for civic/community involvement” had a distinguished average rating of 4.14.



Most items in the Quality of Life Section received an average satisfaction rating of 3.83, which would be considered “satisfied.” The lowest rated issues were “Availability of agencies providing services to youth,” (3.21) “Availability of supervised after school activities,” (3.33) and “Access to affordable housing” (3.38). The score still registers as a “neutral” to slightly “satisfied” concern, but survey participants may be unaware of available services.

Focus Group Takeaways

The following includes the facilitator's review of the focus group; the themes, unique comments, and overall impressions.

What is Healthy?

The group believes that Freeman is privileged to have a health care resource such as Freeman Regional Health Services. The community is diverse in its economy; offering jobs in manufacturing, retail, and services. The group thought that the transit service is a useful service which brings people to town.

The availability of the services at the hospital is also a healthy aspect of Freeman. The group believed that there is a good corps of physicians at Freeman Regional Health Services. There is also good care at the nursing home.

What is Unhealthy?

One concern that was noted was the scale of the nursing home. Will it continue to operate in today's environment of nursing home closings? The group agreed that the availability of housing is a concern (which is consistent with the survey responses).

There is a concern with the availability of staffing for the hospital, clinic, and nursing home. This ties in with the lack of affordable housing in town. It also connects to the concern that when candidates are looking for a job in Freeman, the question about a job for their spouse remains unanswered.

Some voiced the opinion that Freeman is lacking in the level and types of activities and programs for the families in the community. Also, there is a perception among the group that other towns in the region are more progressive (development-oriented) than Freeman.

How FRHS Serves the Community Well

The group is impressed with the hospital in general. They agree that FRHS does a good job at partnering with other entities such as Avera. Even with the partnership with Avera, the group is complimentary that FRHS is still an independent facility. The medical staff is excellent and the equipment and telemedicine used by the hospital is useful. The group appreciates the fact that doctors are available pretty much all of the time and are willing to make house calls.

Ways FRHS Can Improve the Way it Serves the Community

The group questioned whether the nursing home provides "overlapping" services with the Salem Mennonite Home in town. This may warrant an analysis of the nursing home to ensure that services are being provided in an efficient, cost-effective manner. The group believed that the expanded surgical services area will provide better health care for residents in the region and provide the ability to get more of the care they need in Freeman without having to travel to larger centers such as Sioux Falls, Mitchell, or Yankton for care.

The early group believed that the "big two" health systems in the State of South Dakota have such a presence that it is difficult to brand FRHS as a competitor in the rural health care market. So while the group applauded

the efforts of the hospital as an independent hospital, the feasibility of remaining independent remains uncertain.

Most Pressing Need

The group focused on specific services and the affordability of health care as the primary needs in Freeman. The more that primary care physicians can do, the more affordable care will become. Currently, primary physicians aren't going beyond the basic care that they provide to their patients. The legal risk of "specializing" in too many services makes it hard for primary care physicians to provide a broader spectrum of services. This issue is not specific to Freeman, but also to health care across the region.

New physicians are striving to achieve a greater work-life balance than doctors in previous generations. The commitment to "round-the-clock" care may not be as prevalent as it was in the past, but physicians in Freeman are starting with a positive attitude and are personable with the patients and are getting to know them.

FRHS has had a relationship with Avera in recent years. An affiliation with Avera may provide better access to more health care resources. Technology is playing an ever-increasing role in health care today. FRHS may be able to tap into more services and opportunities as an affiliate member of a larger network.

One of the participants in the group summed it up the best, "Health care is always changing. Take baby steps! Whatever you do, do it well!!"

Conclusion

The major theme that emerged from the focus group meeting and the community health survey is Access to Health Care Services in Freeman. This theme ties in to other "sub-themes" such as access to job opportunities and job training and the availability of affordable housing.

There are training resources available in the region that can produce a skilled health care workforce, particularly in the nursing and lab tech professions. By partnering with educational entities, Freeman can attract a skilled workforce. Similar training has been done in the manufacturing industry with welding and computer-numeric controlled (CNC) machining and robotics with the Regional Technical Education Center in Yankton. This provided a trained labor force for manufacturing firms in the area.

A larger, more skilled workforce needs a place to live. The lack of affordable housing in Freeman was noted in the focus group and in the survey. A supply of decent housing in the community should help attract and retain people in Freeman. There are efforts in the community to develop a range of affordable housing options. FRHS should support the local housing effort by providing information about available housing options to its employees.

COMMUNITY HEALTH NEEDS ASSESSMENT IMPLEMENTATION STRATEGY

The Community Healthcare Needs Assessment was presented to the Freeman Regional Health Services Board of Trustees for their review and discussion on January 22, 2020. Upon their review and after hearing the recommendations of Administration, the following five priority areas were established:

CONTINUE EFFORTS TO PROMOTE HEALTH AND WELLNESS THROUGHOUT THE COMMUNITY.

Freeman Regional Health Services remains committed to promoting health and wellness and will continue efforts on meeting the needs of the community. To this end, FRHS will work towards the following:

- *Continue to promote community-based education programs which focus on health-related topics of interest and which target specific common interest groups and the community as a whole.*
- *Continue to work with the Wellmark Blue Cross and Blue Shield collaborative on an effort to make Freeman a cohesive, high energy community with an infrastructure that connects residents to other people, places and healthy foods so that residents can live active, healthy lifestyles.*

CONTINUE TO FOSTER AND PROMOTE COMMUNITY OUTREACH AND VOLUNTEERISM.

FRHS recognizes the importance of community outreach and the value our organization and its employees bring to the community. To promote community outreach and volunteerism, FRHS commits to the following:

- *FRHS will continue to undertake community outreach initiatives aimed at benefiting our communities. We will continue to evaluate unmet community needs and will organize efforts, when possible, to address those needs.*
- *As a means to encourage community volunteerism, FRHS will continue to support and advocate to its employees the value and importance of being involved in their communities. FRHS will encourage volunteerism by its employees and will continually explore opportunities that serve as a benefit to the community.*

POSITION FRHS TO MEET THE CHANGING NEEDS OF THE SURROUNDING POPULATION.

FRHS recognizes the changing dynamics of the diverse population within our service area. We remain committed to providing services aimed directly at meeting the changing needs of the communities we serve. Our efforts will include:

- *Continue to update and remodel our facility to meet the needs and preferences of incoming patients and residents.*
- *Develop collaborative efforts with the Salem Mennonite Home to provide programs and services focused specifically on the needs and interests of the elderly.*

PROVIDE ACCESS TO COMMUNITY BASED QUALITY CARE.

The mission of FRHS is to provide accessible, community based quality care that is competent, creative and compassionate. To meet these needs, FRHS will:

- *Continue to recruit and employ quality providers who are competent and compassionate to meet the health care needs of those within our services area.*
- *Provide primary care services that are appropriate for our rural setting.*

ADDRESS ISSUES RELATING TO WORK FORCE SHORTAGES.

FRHS recognizes the increasing difficulty in finding the resources required to staff the various departments of the hospital, clinic and nursing home. To meet these needs FRHS will:

- *Continue to work with local schools and churches to promote an interest in healthcare careers.*
- *Promote FRHS to the public as an excellent place to work and to receive services.*
- *Conduct community related health activities that attract people to the community.*
- *Collaborate with the local community to promote affordable housing for the required workforce.*

Through the engagement of staff and our community, FRHS will explore and pursue opportunities aimed at meeting the needs of our communities. Staff and public input will be critical to ensuring our efforts are successfully planned, initiated and produce the intended outcomes.