

# CHI Oakes Hospital

## 2019 Community Health Implementation Strategy






**Adopted June 2019**



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## At-a-Glance Summary

<b>Community Served</b> 	<p>Dickey County, primarily an agricultural community, found in southeastern North Dakota. According to the 2010 U.S. Census, Dickey County had a population of 5,289. Its two largest communities have 3,250 of those residents: Ellendale, the county seat, had a population of 1,394, and Oakes had a population of 1,856.</p>	
<b>Significant Community Health Needs Being Addressed</b> 	<p>Significant community health needs the hospital is helping to address, and that form the basis of this document, were named in the hospital's most recent Community Health Needs Assessment (CHNA). Needs being addressed by strategies and programs are:</p> <ul style="list-style-type: none"> <li>• Availability of mental health/substance abuse treatment services</li> <li>• Not enough jobs with livable wages</li> <li>• Attracting and keeping young families</li> <li>• Having enough child daycare services</li> </ul>	<ul style="list-style-type: none"> <li>• Cost of health insurance</li> <li>• Availability of resources to help elderly stay in their homes</li> <li>• Assisted living options</li> <li>• Availability of specialists</li> <li>• Domestic/intimate partner violence</li> <li>• Availability of transportation for seniors</li> </ul>
<b>Strategies and Programs to Address Needs</b> 		<p>The hospital intends to take actions and to dedicate resources to address these needs, including:</p> <ul style="list-style-type: none"> <li>• Availability of mental health/substance abuse treatment services</li> <li>• Domestic/intimate partner violence</li> <li>• Availability of specialists</li> </ul>
<b>Anticipated Impact</b> 	<p>Anticipated impact on the focused needs assessment areas are:</p> <ul style="list-style-type: none"> <li>• Increased availability of mental health/substance abuse resource availability to the communities served</li> <li>• Increased awareness and ease of reporting domestic/intimate partner violence, including all ages of the communities served</li> <li>• An increased availability of healthcare specialty services in the communities served such as dermatology, oncology and cardiology</li> </ul>	
<b>Planned Collaboration</b> 	<p>CHI Oakes Hospital, through the use of tele-psych system and mental health/substance abuse screening, can assist patient in locating necessary services. We will continue to support efforts to decrease domestic/intimate partner violence through training of medical personnel dealing with at risk populations and using grant money received to acquire more education for Sexual Assault Nurse Examiners and equipment. CHI Oakes Hospital currently has a visiting specialist of orthopedics, podiatry, audiology, general surgery, ophthalmology along with an employed internal medicine doctor and certified Advanced Trauma Life Support emergency room providers.</p>	

This document is publicly available online at <http://www.oakeshospital.com/>

Written comments pertaining to this report can be submitted to the CHI Oakes Hospital, Attn: Community Health Assessment, 1200 North 7<sup>th</sup> Street, Oakes, ND 58474 or by e-mail to [RebeccaThompson2@CatholicHealth.net](mailto:RebeccaThompson2@CatholicHealth.net)

## CHI Oakes Hospital

CHI Oakes Hospital is a member of Catholic Health Initiatives, which is a part of Common Spirit Health.

Oakes Community Hospital, dba CHI Oakes Hospital, began delivering its healthcare mission in 1923 as the St. Anthony Hospital. In 1950, the Sisters of St. Francis of the Immaculate Heart of Mary bought the hospital and eventually opened a new facility. The Sisters of St. Francis transferred the sponsorship of the Oakes Community Hospital to Catholic Health Initiatives in 1998.

CHI Oakes Hospital is a 20-bed critical access hospital that provides various inpatient and outpatient services to approximately 14,000 people in southeastern North Dakota. It is also a 24-Hour Emergency Level V Trauma Center. The hospital building was newly-constructed in 2007, replacing a 50-year-old building, and in 2010, Oakes Community Clinic was opened within the hospital building. The hospital is part of a larger values-based organization, Catholic Health Initiatives (CHI).

Catholic Health Initiatives (CHI), a nonprofit, faith-based health system formed in 1996 through the consolidation of four Catholic health systems, expresses its mission each day by creating and nurturing healthy communities in the hundreds of sites across the nation where we provide care. CHI is based in Englewood, Colorado and is one of the nation's largest nonprofit health systems. The organization operates in 18 states and is comprised of 101 hospitals, including two academic health centers and major teaching hospitals, as well as 29 critical-access facilities; community health-services organizations; accredited nursing colleges; home-health agencies; living communities; and other facilities and services that span the inpatient and outpatient continuum of care. In fiscal year 2017, CHI provided more than \$1.2 billion in financial assistance and community benefits for programs and services for the poor, free clinics, education and research. Financial assistance and community benefits totaled approximately \$2.1 billion with the inclusion of the unpaid costs of Medicare. The health system, which generated operating revenues of \$15.5 billion in fiscal year 2017, has total assets of \$22 billion.

## Our Mission

The mission of Catholic Health Initiatives is to nurture the healing ministry of the Church, supported by education and research. Fidelity to the Gospel urges us to emphasize human dignity and social justice as we create healthier communities.

## Core Values

- **Reverence** - Profound respect and awe for all of creation, the foundation that shapes spirituality, our relationships with others and our journey to God.
- **Integrity** - Moral wholeness, soundness, fidelity, trust, truthfulness in all we do.

- **Compassion** - Solidarity with one another, capacity to enter into another's joy and sorrow.
- **Excellence** - Preeminent performance, becoming the benchmark, putting forth our personal and professional best.

## Vision

### Live up to our name as One CHI:

- **Catholic** - Living our Mission and Core Values.
- **Health** - Improving the health of the people and communities we serve.
- **Initiatives** - Pioneering models and systems of care to enhance care delivery.

## Financial Assistance for Medically Necessary Care

CHI Oakes Hospital delivers compassionate, high quality, affordable health care and advocates for members of our community who are poor and disenfranchised. In furtherance of this mission, the hospital provides financial assistance to eligible patients who do not have the capacity to pay for medically necessary health care services, and who otherwise may not be able to receive these services. The financial assistance policy and a plain language summary of the policy are on the hospital's web site at:

<http://www.oakeshospital.com/>

## Description of the Community Served

Dickey County is located in southeastern North Dakota, along the border of South Dakota. Along with the hospital, agriculture and industry supply the economic base for the county. According to the 2010 U.S. Census, Dickey County had a population of 5,289. Its two largest communities have 3,250 of those residents: Ellendale, the county seat, had a population of 1,394, and Oakes had a population of 1,856.

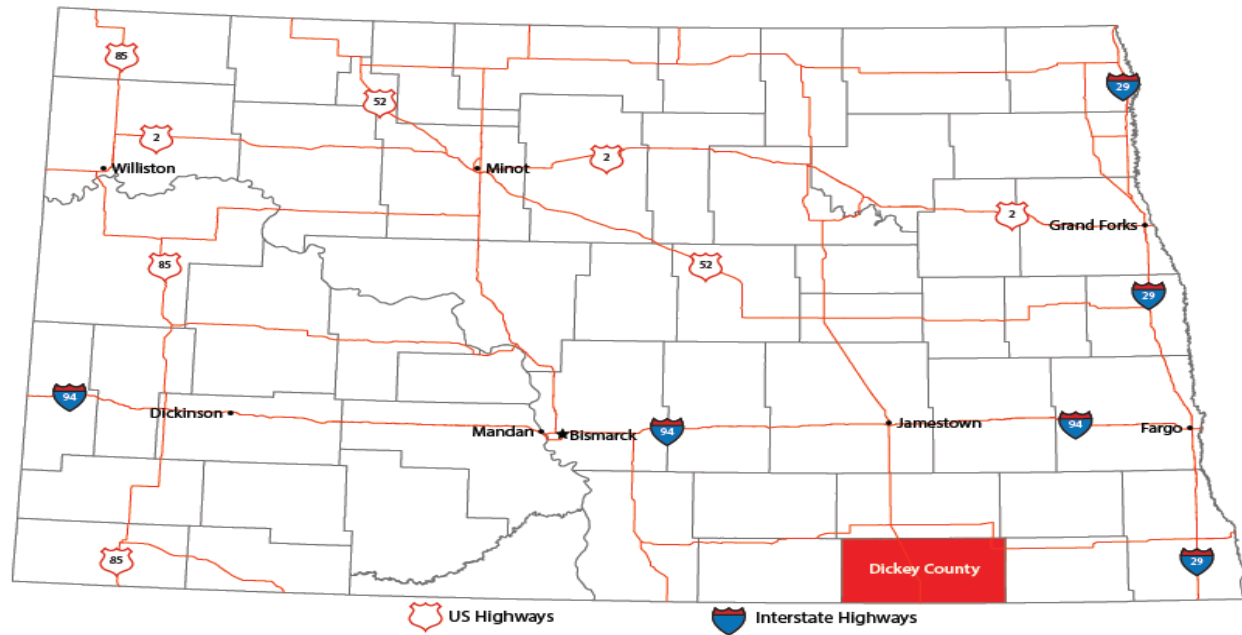
Primarily an agricultural area, Dickey County is a farm and ranch community with many acres of corn and soybeans produced each year. Oakes is proud to have two 110-car grain elevator facilities. Both Oakes and Ellendale boast a large industrial sector, as well as progressive main streets with a variety of businesses available.

The medical facilities in the county are like none other in rural North Dakota, with well-established clinics, dental offices, optometrist, chiropractors, ambulance service, pharmacies, all levels of retirement living, access to home health and hospice services, and of course, hospital. Education is highly-valued, as shown by the modernized K-12 public school systems in both Oakes and Ellendale, Trinity Bible College, and the Southeast Region Career and Technology Center.

Dickey County has several community assets and resources, including modern swimming pools, park facilities, fitness center, grocery stores, walking paths, hotels, tennis courts, golf courses, and movie theatre. Hunting and fishing opportunities abound.



Figure 1: Location of County



## Community Assessment and Significant Needs

The hospital engages in multiple activities to conduct its community health improvement planning process. These include, but are not limited to, conducting a Community Health Needs Assessment with community input at least every three years, naming collaborating community stakeholder organizations, describing anticipated impacts of program activities and measuring program indicators.

## Community Health Needs Assessment

The health issues that form the basis of the hospital's community health implementation strategy and programs were found in the most recent CHNA report, which was adopted in June 2019. The CHNA contains several key elements, including:

- Description of the assessed community served by the hospital;
- Description of assessment processes and methods;
- Presentation of data, information and findings, including significant community health needs;
- Community resources potentially available to help address identified needs; and
- Discussion of impacts of actions taken by the hospital since the preceding CHNA.

Additional detail about the needs assessment process and findings can be found in the CHNA report, which is publicly available at <http://www.oakeshospital.com/> or upon request at the hospital's Healthy Communities or Community Benefit office.

## Significant Health Needs

The community health needs assessment found the following significant community health needs:

Prevalent concerns voiced by residents on availability and delivery of healthcare services regarding no insurance, limited insurance or not affordable insurance, not enough evening or weekend hours for healthcare visits, not enough specialists and distance from healthcare facility. Concerns of health insurance being too expensive, lack of confidence in local professionals, limited appointment slots available, and long wait time at some clinics were also voiced.

Not enough jobs with livable wages, attracting and keeping young families, having adequate daycare, not enough affordable housing, not enough public transportation and changes in population size were also voiced as community health concerns. Environmental health concerns were voiced as water and air quality, recycling and littering.

Bullying/cyberbullying, not having enough quality school resources, not enough places for exercise and wellness activities, crime and safety were also listed as other health concerns in the communities served.

### Significant Needs the Hospital Does Not Intend to Address

No insurance, limited insurance or not affordable insurance will not be addressed by CHI Oakes Hospital. This decision is based upon the limited local resources of the Patient Access staff and financial assistance coordinator in aiding and referring patients to find potential healthcare coverage.

Not enough jobs with livable wages, attracting and keeping young families, having enough childcare services, not enough public transportation, changes in population size and not enough affordable housing will not be addressed by the CHI Oakes Hospital. These items are not within the scope of our work as a hospital and no resources are available to go outside the current mission.

Bullying/cyberbullying, not having enough quality school resources, not enough places for exercise and wellness activities, crime and safety is not within the scope of our work as a hospital and no resources are available to go outside the current mission. We will, however, continue to collaborate with local law enforcement to support their efforts in reducing these incidents. The hospital currently takes part in yearly training on violence in the workplace and violence prevention.

## 2019 Implementation Strategy

This section presents strategies and program activities the hospital intends to deliver, fund or collaborate with others to address significant community health needs over the next three years. It summarizes



planned activities with statements on anticipated impacts and planned collaboration. Program Digests provide additional detail on select programs.

## Creating the Implementation Strategy

CHI OAKES HOSPITAL is dedicated to improving community health and delivering community benefit with the engagement of its management team, board, clinicians and staff, and in collaboration with community partners.



To gather feedback from the community, residents of the area were given the opportunity to participate in a survey. There were 442 CHI Oakes Hospital service area residents who completed the survey. Additional information was collected through eight key informant interviews with community members. The input from the residents, who primarily reside in Dickey County, represented the broad interests of the communities in the service area. Together with secondary data gathered from a wide range of sources, the survey presents a snapshot of the health needs and concerns in the community.

Questions about the health and well-being of the community, similar to those posed in the survey, were explored during key informant interviews by members of the steering committee with community leaders, health professionals and also with the community group. Together with secondary data gathered from a wide range of sources, the survey presents a snapshot of the health needs and concerns in the community.

Community representatives met regularly in-person, by telephone conference, and email. A CHNA liaison was selected locally, who served as the main point of contact between the University of North Dakota, Center for Rural Health and Oakes. A small steering committee was formed that handled the planning and implementation process locally. Representatives from the Center for Rural Health met and corresponded regularly by teleconference and/or via the eToolkit with the CHNA liaison. The community group supplied in-depth information and informed the assessment process in community perceptions, community resources, community needs, and ideas for improving the health of the population and healthcare services. Eighteen people, representing a cross-section of demographics, attended the focus group meeting. The meeting was highly interactive with good participation. CHI Oakes Hospital staff and board members were in attendance as well, but played a role of listening and learning.

## Strategy by Health Need

The tables below present strategies and program activities the hospital intends to deliver to help address significant health needs identified in the CHNA report.

They are organized by health need and include statements of the strategies' anticipated impact and any planned collaboration with other organizations in our community.





## Health Need: Availability of mental health/substance abuse treatment services

Strategy or Program Name	Summary Description
CHI Oakes Hospital	<ul style="list-style-type: none"><li>• Expand relationship with Avera e-Emergency group to assist in placements of patients needing inpatient behavioral health services.</li><li>• Depression screenings on all clinic patients and hospital patients with referrals as needed.</li><li>• Potential expansion of counseling services through existing agencies or local schools</li></ul>
CHI Oakes Clinic	<ul style="list-style-type: none"><li>• Depression screenings on all clinic patients and hospital patients with referrals as needed.</li><li>• Establishment of outpatient services in the clinic through use of Carrington Health services</li><li>• Promotion of outpatient service availability.</li></ul>
Prairie St. Johns Hospital in Fargo ND	<ul style="list-style-type: none"><li>• Additional education to providers in hospital and clinic through Prairie St. John's in Fargo.</li></ul>

### Anticipated Impact:

- To provide increased awareness of needs and expand mental health resources for patients in our ministry area.
- Increased traffic to clinic inside hospital, and added services provided through this program.
- Allows area residents access to needed services without the expense, time and energy to travel out of town. It also creates an economic impact on community with more patients visiting Oakes and the retail area.
- Included with this priority will be the concerns related to alcohol and drug use and abuse.
- All narcotic-use patients in Oakes Clinic to sign contract regarding their prescriptions.

**Planned Collaboration:** CHI Oakes Hospital will work with CHI Oakes Clinic, Prairie St. John's of Fargo and Avera E-emergency of Sioux Falls, SD to support patients with mental health/substance abuse issues, proper placement and physical and psychological help as needed.



## Health Need: Domestic/intimate partner violence

Strategy or Program Name	Summary Description
CHI Oakes Hospital	The hospital will continue to support those efforts through education, training of medical and community personnel dealing with at risk populations, and assistance in other areas as possible.
Violence Prevention Coalition	The partnership with other CHI facilities with grant funding from the CHI Mission & Ministry fund.

STOP Violence Against Women Grant

With the grant funding received from the STOP Violence Against Women Grant, the hospital will send nurses to a Sexual Assault Nurse Examiner (SANE) course to certify nurses in the ability to perform exams in the emergency room. The grant will also supply a colposcope and camera for the SANE staff to use.

**Anticipated Impact:** The hospital will be able to support women that have been involved in domestic/intimate partner violence upon arrival to the hospital.

**Planned Collaboration:** The hospital, along with continued partnership with the CHI Mission & Ministry fund and the STOP Violence Against Women grant will work together to educate SANE nurses and make available resources to aid in preventing or caring for domestic/intimate partner violence victims.



### Health Need: Availability of specialists

Strategy or Program Name	Summary Description
CHI Oakes Hospital	Community hospitals, with low volumes and limited budgets, usually don't have specialists such as, neurologists and cardiologists on staff. When they are on staff, there are often too few to ensure constant coverage. Patients are often transferred to distant acute care centers to receive specialized care. Currently, CHI Oakes Hospital partners with several area healthcare entities to provide specialty care to the patients visiting the facility. The hospital will look at bringing specialty providers to the facility in an as need basis.
	Current specialty services provide: <ul style="list-style-type: none"><li>• Orthopedic</li><li>• Sleep Study</li><li>• General surgery</li><li>• Audiology</li><li>• Podiatry</li><li>• Ophthalmology</li></ul>

**Anticipated Impact:** As the need for specialty services becomes apparent, the hospital will contact area healthcare entities to pursue the possibility of adding the services to the facility either with in-person visits or telehealth visits. With added specialty services, community members will have the choice to stay in the area, as opposed to traveling to larger facilities to have appointments with specialty providers.

The use of telehealth for specialty situations will also be a benefit to the facility and community members. With the use of telehealth, patients receive expert treatment locally without the added risk and cost of a transfer to a bigger healthcare facility. The hospital retains vital revenue and enhanced services. Community members receive better care centered on evidence-based best practices. Health care is better overall.

**Planned Collaboration:** CHI Oakes Hospital, along with the Oakes Community Clinic will work with other healthcare entities such as Avera St. Luke's, Aberdeen, SD and Essentia Health, Fargo ND to bring needed specialty providers to the facility either in person or over telehealth.

## Program Digests

The following pages include Program Digests describing key programs and initiatives that address one or more significant health needs in the most recent CHNA report. The digests include program descriptions and intervention actions, statements of which health needs are being addressed, any planned collaboration, and program goals and measurable objectives.



### Availability of mental health/substance abuse treatment services

Significant Health Needs Addressed	<ul style="list-style-type: none"> <li>❑ Lack of mental/behavioral health services/psychologists</li> <li>❑ Depression/anxiety – youth</li> <li>❑ Depression/anxiety – adult</li> <li>❑ Alcohol use and abuse – adult</li> <li>❑ Alcohol use and abuse – youth</li> <li>❑ Availability of substance use disorder/treatment services</li> </ul>
Program Description	To provide mental/behavioral health resources for patients in our area. Expand relationship with Avera e-Emergency group to aid in the placement of patients needing inpatient behavioral health services. Establishment of outpatient services in the clinic through use of Carrington Health services, potential expansion of counseling services through existing agencies or local schools
Community Benefit Category	A2. Community-based clinical services
<b>Planned Actions for 2019 - 2021</b>	
Program Goal / Anticipated Impact	Allows area residents access to needed services without the expense, time and energy to travel out of town. It also creates an economic impact on community with more patients visiting Oakes and the retail area. A decrease in the number of out of town visits needed to be made by area residents for mental/behavioral health services.
Measurable Objective(s) with Indicator(s)	<p>Patient Depression Questionnaire (PHQ-2) screening to be completed on all clinic and hospital patients, with referrals as needed. The impact of this screen will aid in determining if the presence of a depressed mood and a loss of interest or pleasure in routine activities, leads to further questioning using the Patient Depression Questionnaire (PHQ-9) to address major depressive symptoms.</p> <p>The detection of self-reported depression symptoms will aid with providers determining, referring and/or treating patients with mental</p>

	health issues such as depression, addictive behaviors or thoughts of self-harm.
<b>Intervention Actions for Achieving Goal</b>	<ul style="list-style-type: none"> <li>• Complete Patient Depression Questionnaire on all patients.</li> <li>• Mental health and addiction referrals made appropriately to psychiatry or counseling agencies.</li> <li>• All narcotic-use patients in Oakes Clinic to sign contract for their narcotic prescriptions.</li> </ul>
<b>Planned Collaboration</b>	CHI Oakes Hospital will work with CHI Oakes Community Clinic, Prairie St. John's of Fargo and Avera E-emergency of Sioux Falls, SD to support patients with mental health/substance abuse issues, proper placement and physical and psychological help as needed.



### Domestic/intimate partner violence

<b>Significant Health Needs Addressed</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Emotional abuse (isolation, verbal threats, economic abuse)</li> <li><input type="checkbox"/> Verbal threats</li> <li><input type="checkbox"/> Violence against children</li> <li><input type="checkbox"/> Physical abuse</li> <li><input type="checkbox"/> Sexual abuse/assault</li> <li><input type="checkbox"/> Stalking</li> <li><input type="checkbox"/> Violence against women</li> <li><input type="checkbox"/> Dating violence</li> <li><input type="checkbox"/> Violence against men</li> </ul>
<b>Program Description</b>	The hospital will support efforts to reduce domestic/intimate partner violence. This support will be through education, training of medical and community personnel on treating and helping with the at-risk populations, and aid in other areas where possible.
<b>Community Benefit Category</b>	A2. Community-based clinical services

### Planned Actions for 2019 - 2021

<b>Program Goal / Anticipated Impact</b>	With the grant funding received from the STOP Violence Against Women Grant, the hospital will send nurses to a Sexual Assault Nurse Examiner (SANE) course certifying them in the ability to perform SANE exams in the emergency room. The grant will also supply a colposcope and camera for the SANE staff to use. With the addition of certified SANE nurses', victims of sexual assault will not need to travel to other facilities to have examinations completed.
<b>Measurable Objective(s) with Indicator(s)</b>	The rate of reported cases of domestic/intimate partner violence will initially have an increase in cases as more education to the public is given on support and reporting of violence situations. Once the education

	and aid to the public is complete, the goal will be to see a decrease in violence cases in the community.
<b>Intervention Actions for Achieving Goal</b>	The hospital will be able to support women that have been involved in domestic/intimate partner violence upon arrival to the hospital. Public awareness regarding domestic/intimate partner violence will be given out during public gatherings such as school sporting events, church events and hospital celebrations.
<b>Planned Collaboration</b>	The hospital, along with continued partnership with the CHI Mission & Ministry fund and the STOP Violence Against Women grant will work together to educate SANE nurses and make available resources to aid in preventing or caring for domestic/intimate partner violence victims.



#### Availability of specialists

<b>Significant Health Needs Addressed</b>	Community hospitals, with low volumes and limited budgets, usually don't have specialists like, neurologists and cardiologists on staff. And even when they do, there are often too few to ensure constant coverage. Patients are often transferred to distant acute care centers to receive specialized care.
<b>Program Description</b>	Currently, CHI Oakes Hospital partners with several area healthcare entities to provide specialty care to the patients visiting the facility. The hospital will look at bringing specialty providers to the facility on an as-needed basis. As the need for specialty services develops, the hospital will contact area healthcare entities to pursue the possibility of adding the services to the facility either with in-person visits or telehealth visits. With added specialty services, community members will have the choice to stay in the area, rather than traveling to larger facilities to have appointments with specialty providers.
<b>Community Benefit Category</b>	A2. Community-based clinical services

#### Planned Actions for 2019 - 2021

<b>Program Goal / Anticipated Impact</b>	The use of telehealth for specialty situations will be a benefit to the facility and community members. With the use of telehealth, patients receive expert treatment locally without the added risk and cost of a transfer to a bigger healthcare facility. The hospital retains vital revenue and enhanced services. Community members receive better care centered on evidence-based best practices. Health care is better overall.
<b>Measurable Objective(s) with Indicator(s)</b>	With the decreased need to travel to distant healthcare facilities, the hospital will see an increase in patient visits to the clinic to see the visiting specialist. The hospital will also see an increase in ancillary

	services such as laboratory and radiology testing. The hospital will look to increase ancillary testing by 10% yearly.
<b>Intervention Actions for Achieving Goal</b>	<p>As specialty services are added, community members will have the choice to stay in the area, rather than traveling to larger facilities. The hospital keeps vital revenue and enhanced services.</p> <p>Current specialty services provided:</p> <ul style="list-style-type: none"> <li>• Orthopedic</li> <li>• Sleep Study</li> <li>• General Surgery</li> <li>• Audiology</li> <li>• Podiatry</li> <li>• Ophthalmology</li> </ul>
<b>Planned Collaboration</b>	CHI Oakes Hospital, along with the Oakes Community Clinic will work with other healthcare entities such as Avera St. Luke's, Aberdeen, SD and Essentia Health, Fargo ND to bring needed specialty providers to the facility either in person or over telehealth.

## Hospital Board and Committee Rosters

### HOSPITAL BOARD

Lorraine Ptacek - Board Chair  
Red Iverson – Board Vice Chair  
Beth Smith, Board Treasurer  
LuAnn Anderson, Board Member  
Jeff Drop, Senior Vice President Fargo Division  
Sister Anne Marie Friederichs, O.S.F  
Sister Mary Louise Jundt, O.S.F  
Cindy Klapperich- Board Member - Quality Committee Chair  
Jean Schmaltz, Board Member - ACC Committee Chair  
Becki Thompson, President – Board Member  
Harvey Wolff, Board Member

### STEERING COMMITTEE

Becki Thompson – President, CHI Oakes Hospital  
Julie Entzminger – Human Resources Director and Mission Coordinator, CHI Oakes Hospital  
Roxanne Holm – Administrator, Dickey County Health District  
Addie Thompson – Program Project Manager, Dickey County Health District  
Alison Peterson – Clinic Manager, CHI Oakes Hospital  
Jean Schmaltz – Outreach Coordinator, Oakes Senior Citizen Center

