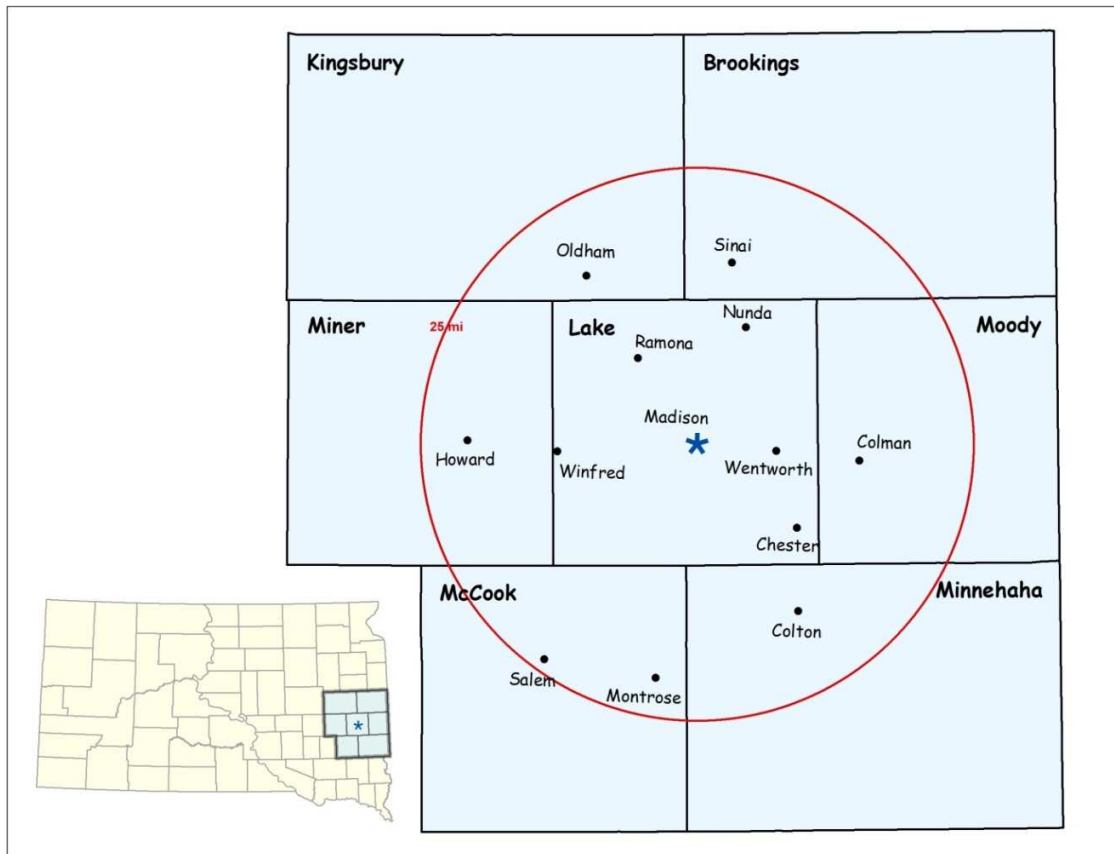




**Madison Community Hospital – Community Health Needs Assessment**

**City of Madison, South Dakota**

**2013**



**Prepared by: First District Association of Local Governments – Watertown, South Dakota**

The Madison Community Hospital (MCH) operates a state-licensed hospital facility located in the City of Madison, South Dakota. This assessment will not pertain to multiple hospital facilities as the MCH operates only one hospital facility. The MCH is currently in the planning and design stages of constructing a new hospital facility that will also be located in the City of Madison, South Dakota.

The community served by the MCH facility includes all of Lake County and portions of Brookings, Kingsbury, McCook, Miner, Minnehaha and Moody Counties as well as the municipalities of Chester, Colman, Colton, Howard, Madison, Montrose, Nunda, Oldham, Ramona, Salem, Sinai, Wentworth and Winfred. A Demographic & Market Analysis conducted in December of 2010 by Voyager Consultants of Plymouth, Minnesota offers the following service area definition for the MCH.

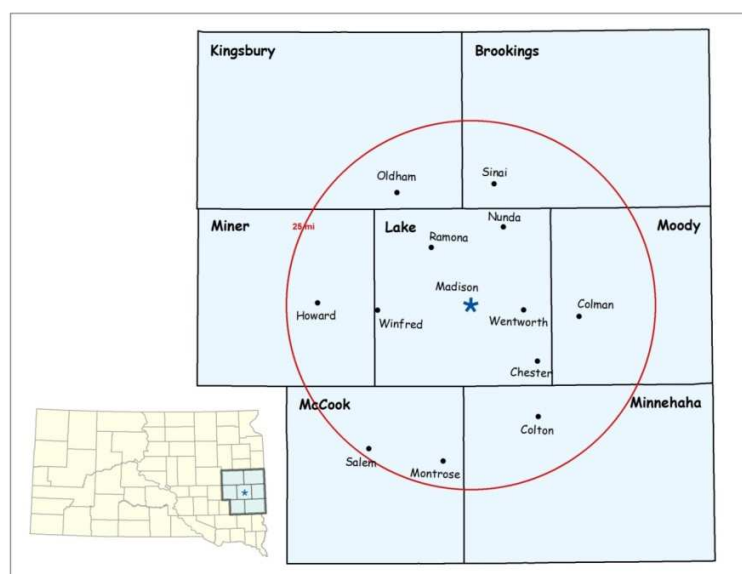
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*The primary service area for the Madison Community Hospital consists of fourteen zip code communities surrounding the City of Madison. The area has a radius of approximately 20 miles.*

*Service areas for healthcare organizations are generally defined as the geographical area in which at least 80% of the hospital's patients reside. 2008 and 2009 admission data was reviewed to identify the residential zip code of patients. The fourteen zip code communities included in MCH's defined service area accounted for 89% of total inpatient admissions, 81% of emergency room visits, and 92% of outpatient services at the hospital. The population and market analysis focuses on the characteristics and utilization behavior of this patient constituency.*

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MCH Service Area Map



The MCH collaborated with the First District Association of Local Governments (First District) in conducting this Community Health Needs Assessment (CHNA) beginning in January of 2013.

First District is a voluntary association of local governments working cooperatively for the benefit of East Central South Dakota. Established in 1971, First District's purpose was the encouragement of a regional approach to planning and development, the improvement of the quality of governmental services, and the attainment of great savings from the technical assistance the District would provide. First District was the first of six districts to be started in South Dakota and originally served a ten county area. Today the District serves 11 counties and 75 communities within the counties of Brookings, Clark, Codington, Deuel, Grant, Hamlin, Kingsbury, Lake, Miner, Moody, and Roberts.

Over the years, First District has been involved in numerous projects from planning, zoning, and community project development to housing development, geographic information systems, and direct loans for businesses. As the needs of the District's counties and communities change, so does the work direction of the District. First District's professional staff is available to assist local officials and concerned citizens explore ways to make their communities and counties a better place to live, through professional development, planning, and management services.

A review of the Demographic & Market Analysis (December 2010) conducted by Voyager Consultants was conducted in January of 2013 to gather background information pertaining to the MCH. The health needs of the community served by the hospital were identified through survey responses gathered in February and March of 2013.

The survey used to gather the information contained within this assessment was not intended to be a scientific or statistically valid sampling of the population. Rather, the survey was designed to be a tool for collecting qualitative data from the community at large – specifically, information related to community-perceived health needs.

The survey distributed to two primary audiences: 1--community members and 2--health care professionals. Community members received notice of the survey through electronic communications, the Madison Daily Leader newspaper and local radio stations. Health care professionals received notice of the survey during mandatory staff meetings at the Madison Community Hospital in February 2013.

Respondents were given two options for survey completion: 1—online response and 2—hand written response. All surveys were considered anonymous and identities of survey takers were not recorded. Survey work was completed in February and March 2013. Community members and health care professionals were given the option of either completing a paper copy of the survey or completing the survey online. 139 of the surveys were completed online and 17 paper copies were completed. 156 survey responses were collected in total.

Input was received from persons representing broad interests of the community served by the hospital through online and paper surveys conducted in February and March of 2013. Healthcare employees provided the best representation of persons with special knowledge of or expertise in public health and were informed of the community health needs assessment on February 20, 2013 during mandatory employee meetings and were asked at that time to participate in the survey process. 72 of the 156 people responding to the survey were employed in the healthcare field.

Education and government employees provided the best representation of federal, tribal, regional, State, or local health or other departments or agencies, with current data or other information relevant to the health needs of the community served by the hospital facility. 22 of the 156 people responding to the survey were employed in the fields of education or government.

Leaders, representatives, or members of medically underserved, low-income, and minority populations, and populations with chronic disease needs, in the community served by the hospital facility were also invited to participate in the survey process. These groups were notified of the survey through direct contact, a newspaper article about the survey or radio ads about the survey. 62 of the 156 people responding to the survey represent the aforementioned groups. The following table provides employment sector data from all survey respondents:

<b>Job Sector</b>	<b>Responses</b>
Manufacturing	6
Education	16
Government	6
Retail	7
Healthcare	72
Restaurant	3
Service Sector	17
Retired	6
Other (please specify)	23
<b>Total</b>	<b>156</b>

This community health needs assessment was conducted between January and April of 2013 by the MCH and First District. The implementation strategy was adopted by the MCH Board of Trustees in May of 2013. The written report of findings was made widely available to the public in June of 2013 when the final CHNA was posted on the MCH website for public consumption.

Employment types included under the heading “Other (please specify)” included the following: non-profit, attorney, Service provider, financial, self, electric cooperative, sales, marketing, finance, utility, farmer, organization management, religious, housing, and insurance.

This CHNA was conducted by the MCH and the First District. A copy of the Voyager Consultants Demographics & Market Analysis (December 2010) was provided by the MCH for review and was used to determine the community served by the hospital facility. Surveys were prepared by the First District and made available to persons within the community served by the hospital facility. Survey responses were compiled, reviewed, and prioritized to determine the health needs of the community. An implementation strategy was developed by the MCH and adopted by the hospital’s Board of Trustees.

The Madison Community Hospital shall maintain a link to electronic versions of this CHNA on their website ([www.madisonhospital.com](http://www.madisonhospital.com)). Paper copies of this CHNA will be made available to the public as requested.

### **Implementation Strategy**

The following community health needs have been identified through the community health needs assessment survey for the Madison Community Hospital. This listing of community health needs represent the most common responses contained within the survey results. All of the following needs will be addressed in order of priority from highest to lowest with the highest priority need at the top of the list:

- Orthopedics
- OB/GYN
- Marketing
- Cost
- Customer Service

The Madison Community Hospital will meet the health needs identified through the community health needs assessment process and has developed the following implementation strategies to address each need on an individual basis. Implementation strategies will be enacted in the most efficient and timely manner possible.

#### Orthopedics implementation strategy

Goal: Providing orthopedic services that will meet the needs of hospital patrons.

Objective: Increase availability and awareness of orthopedic services available at the MCH.

Action: Market existing orthopedic services offered at the MCH.

Action: Expand the number of orthopedic specialists offering services at the MCH.

#### OB/GYN implementation strategy

Goal: Providing OB/GYN services that will meet the needs of hospital patrons.

Objective: Increase availability and awareness of OB/GYN services available at the MCH.

Action: Market existing OB/GYN services offered at the MCH.

Action: Expand the OB/GYN services offered at the MCH

Action: Hire a dedicated OB/GYN at the MCH.

#### Marketing implementation strategy

Goal: Effectively market the healthcare offerings of the Madison Community Hospital.

Objective: Maintain and improve marketing efforts to increase the awareness of community members that are unaware of services available at the MCH.

Action: Include descriptions of the existing services at the MCH in future marketing efforts.

Action: Target marketing efforts toward communities within the MCH service area.

Action: Promote positive hospital experiences in marketing campaigns.

#### Cost implementation strategy

Goal: Offer access to healthcare services at an affordable price.

Objective: Determine if fees at the MCH are reasonable and in line with other area hospitals.

Action: Conduct an internal cost survey of existing hospital fees.

Action: Compare and contrast MCH fees with fees from other hospital facilities in the region.

#### Customer service implementation strategy

Goal: Create an atmosphere of positive customer service at the Madison Community Hospital.

Objective: Constantly strive to improve customer service at the MCH.

Action: Provide customer service training opportunities for all MCH employees.

Action: Include customer service training as a portion of future employee meetings.

### **How and when the implementation strategy was adopted**

The CHNA and implementation strategy was adopted by the Madison Community Hospital Board of Trustees at their May 2013 meeting.

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Madison Community Hospital  
917 Washington Avenue North  
Madison, SD 57042  
[www.madisonhospital.com](http://www.madisonhospital.com)  
(605) 256-6551

First District Association of Local Governments  
PO Box 1207  
Watertown, SD 57201  
[www.1stdistrict.org](http://www.1stdistrict.org)  
(605) 882-5115