



NORTHERN INYO HEALTHCARE DISTRICT
One Team. One Goal. Your Health.

Northern Inyo Healthcare District 2022 *Community Health Needs Assessment*



Community Health Needs Assessment (CHNA) Overview

CHNA Purpose

A CHNA is part of the required hospital documentation of “Community Benefit” under the Affordable Care Act for 501(c)(3) hospitals. It provides comprehensive information about the community’s current health status, needs, and disparities and offers a targeted action plan to address these areas, including programmatic development and partnerships.



Strategic Benefits

- Identify health disparities and social determinants to inform future outreach strategies
- Identify key service delivery gaps
- Develop an understanding of community member perceptions of healthcare in the region
- Target community organizations for collaborations

The CHNA Process



Methods of Identifying Health Needs

Collect & Analyze

Analyze existing data and collect new data



737 indicators collected from data sources



643 surveys completed by community members

Evaluate

Evaluate indicators based on the following factors:



Worse than benchmark



Identified by the community



Impact on health disparities



Feasibility of being addressed

Develop

Develop an implementation plan for top priorities



Over 30 NIHD and community leaders gathered to discuss services, resources, and partnerships to address each health priority

Community Disparities

Available Resources

Potential Partners

Implementation Plan

Evaluation & Selection Process

Worse than Benchmark Measure 	Identified by the Community 	Feasibility of Being Addressed 	Impact on Health Disparities 
<p>Health needs were deemed “worse than the benchmark” if the supported county data was worse than the state and/or US averages</p>	<p>Health needs expressed in the online survey and/or mentioned frequently by community members</p>	<p>Growing health needs where interventions are feasible and the District could make an impact</p>	<p>Health needs that disproportionately affect vulnerable populations and can impact health equity if addressed</p>

Health Need Evaluation

	Worse than Benchmark	Identified by the Community	Feasibility	Impact on Health Disparities
Mental Health	✓	✓	✓	✓
Affordable Housing		✓		✓
Healthcare Services: Affordability	✓	✓	✓	✓
Healthcare Services: Physical Presence	✓	✓	✓	✓
Cancer	✓	✓	✓	✓
Drug/Substance Abuse	✓	✓	✓	✓
Access to Childcare	✓	✓		✓
Diabetes		✓	✓	✓
Access to Senior Services	✓	✓	✓	✓
Livable Wage	✓	✓		✓

2022 Top Health Priorities for Inyo County

Behavioral Health



Mental Health

- Mental health provider ratio: **201:1** (CA: 244:1)
- Suicide death rate (per 100,000): **17.6** (CA: 10.0)

Drug/Substance Abuse

- Drug overdose mortality rate (per 100,000): **40.7** (CA: 17.3)
- Any opioid overdose ED visits (per 100,000): **85.1** (CA: 40.9)



Access to Healthcare Services



Healthcare Services: Affordability

- Uninsured: **6.7%** (CA: 7.2%)
- Median household income: **\$59,990** (CA: \$88,930)

Healthcare Services: Physical Presence

- Primary care physician ratio: **1,061:1** (CA: 1,240:1)
- Dentist ratio: **1,505:1** (CA: 1,132:1)



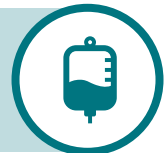
Access to Senior Services

- Population 65+: **24.1%** (CA: 15.4%)
- Medicare annual wellness visits: **15%** (CA: 20%)

Chronic Disease Management

Cancer

- Cancer mortality (per 100,000): **159.3** (CA: 130.3)
- Cancer incidence (per 100,000): **433.3** (CA: 402.4)



Diabetes

- Diabetes mortality (per 100,000): **16.4** (CA: 25.4)
- Adult obesity: **28%** (CA: 26%)