

South Lyon Medical Center

Community Health Needs Assessment

2022 - 2024



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About South Lyon Medical Center

First opened in 1953, South Lyon Medical Center (SLMC) is a 25-bed Critical Access Hospital (CAH) located in Yerington, Nevada. SLMC serves as a public hospital district for Lyon County and is operated by South Lyon Health Center, Inc.

Our Mission

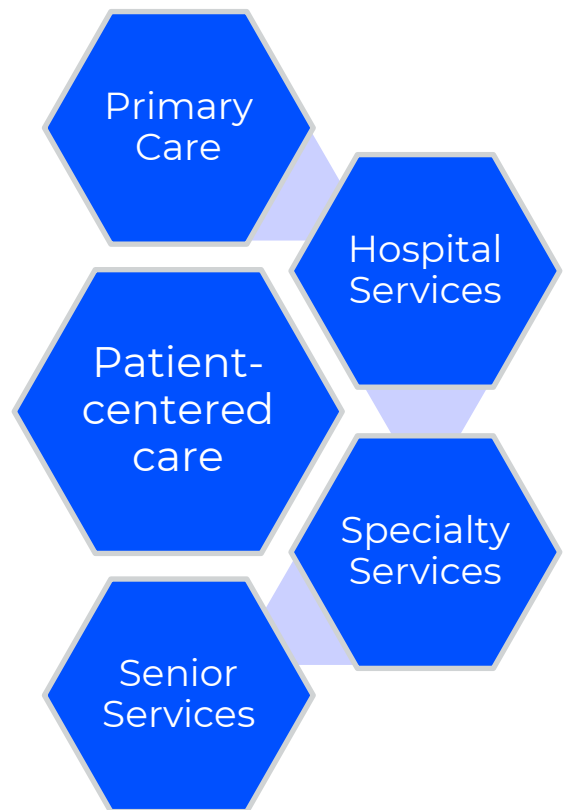
Our mission is to provide access to quality healthcare services needed by the community.

Our Services

SLMC provides a variety of inpatient and outpatient services, including emergency medicine, rehabilitation, primary care, imaging, and laboratory services, and also operates as a 49-bed long-term skilled nursing facility. The medical providers employed by SLMC consist of a mix of primary care medical doctors and advanced practice clinicians. SLMC also contracts with outreach specialists to provide specialty care in Lyon County.

As a CAH, SLMC serves as the sole provider of care to a rural community with limited access to healthcare services. Every three years, SLMC conducts a community health needs assessment (CHNA) to assess the health of our community and to identify unmet health needs based on population trends, health indicators, and socioeconomic factors.

To learn more about South Lyon Medical Center, visit www.slmcnv.org.

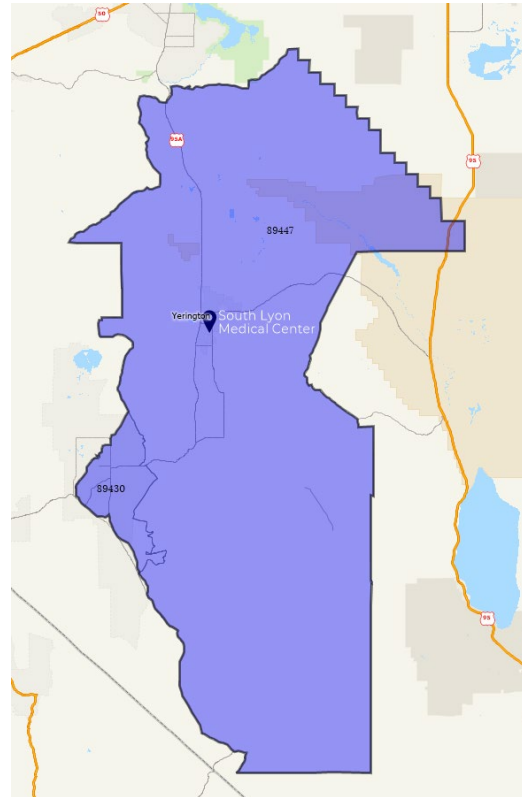


Our Community

SLMC is located in Yerington, Nevada. The community served by SLMC was determined by analyzing where patients who receive services at the hospital originate. The majority of our patients originate from our primary service area, which consists of Yerington (89447) and Smith (89430). The majority of communities in our service area reside within Lyon County, Nevada.

Primary Service Area

89447 (Yerington) 89430 (Smith)

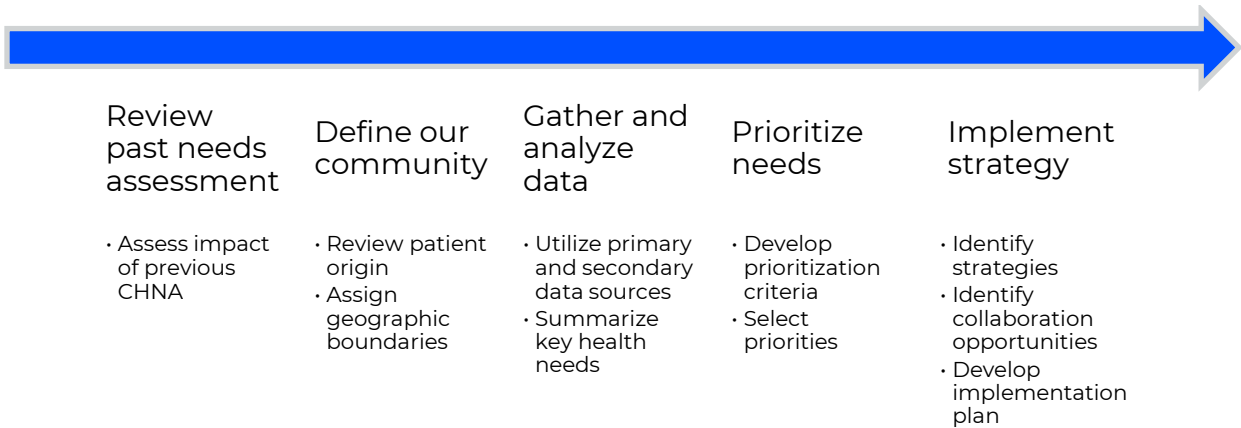


- 📍 South Lyon Medical Center
- Primary Service Area (PSA)

Methodology

Our Process

SLMC engaged Wipfli LLP (“Wipfli”) to assist in conducting the CHNA. Wipfli utilized the following process to analyze the health needs of the community and develop the priorities of the needs assessment:



This process was overseen by the CHNA Advisory Committee (the “Advisory Committee”), which consists of leadership from SLMC who represent the broad interests of the community. Committee member were selected based on their knowledge of and role within the community, as well as the skills and qualifications needed to execute the steps of the CHNA process.

The committee consists of the following members:

- TONI INSERRA, CHIEF EXECUTIVE OFFICER**
- DAVID BEZARD, CHIEF FINANCIAL OFFICER**
- LORI WHATLEY, CHIEF NURSING OFFICER**
- MARISON HERNANDEZ, LONG-TERM CARE DIRECTOR OF NURSING**
- TOM ARD, DIRECTOR OF INFORMATION TECHNOLOGY**
- BILLY OGDEN, DIRECTOR OF FACILITIES**
- CATHY WILSON, DIRECTOR OF ACTIVITIES**
- DONNA LARSEN, ADMINISTRATIVE ASSISTANT**

The process that Wipfli and the Advisory Committee used to complete the needs assessment is in compliance with Section 501(r)(3) of the Internal Revenue Code. The needs assessment was approved by the Advisory Committee and the SLMC Board of Directors.

Data Collection

Information was collected from primary and secondary data sources to identify unmet health needs within the community. Information from these sources was summarized into themes that represent the community's unmet health needs, which serve as the basis of the CHNA.

PRIMARY DATA

Primary data represents information collected firsthand from stakeholders within SLMC's community. This data was collected to validate secondary data findings that pertain to SLMC's service area, identify issues that were not represented in the secondary data, and understand what specific subgroups of the community may face additional challenges or disparities.

Interviews were conducted with community stakeholders who best represented the broad interests, experiences, and needs of SLMC's community, particularly people who represent medically underserved and vulnerable populations. A community health survey was also distributed to ensure that each person had the opportunity to participate and be heard in this process. A complete list of the community stakeholders can be found in the References and Acknowledgments.

The interviews and surveys were designed to solicit information pertaining to the following topics:

- ▶ Significant healthcare issues or needs
- ▶ Social, behavioral, and environmental factors that contribute to health needs
- ▶ Barriers to care within the community
- ▶ Vulnerable populations who experience disparities

- ▶ Suggestions or ideas to address the community's needs
- ▶ Potential resources or infrastructure to support health, social, behavioral, or environmental needs
- ▶ Areas for collaboration to address health needs

SECONDARY DATA

Secondary data was collected from statistical data sources available at the local, regional, state, and national level. This data provides a profile of the demographic, social, economic, and health characteristics of SLMC's community. To the extent possible data was collected at the local level, and compared to regional, state, or national benchmarks when determining health needs.

Sources of secondary data include:

- ▶ American Community Survey
- ▶ Behavioral Risk Factor Surveillance System
- ▶ Center for Disease Control and Prevention
- ▶ County Health Rankings
- ▶ ESRI Business Information Solutions
- ▶ Healthiest Communities, a collaboration between U.S. News and the University of Missouri Extension Center for Applied Research and Engagement Systems
- ▶ U.S. Census Bureau

Prioritization of Community Needs

Once the primary and secondary data was gathered, the data was collectively analyzed to identify key themes that represented the unmet health needs within the community. The Advisory Committee convened as a group to rate the unmet health needs to determine which needs would be prioritized by SLMC over the next three years. The Advisory Committee rated the unmet health needs based on the following criteria:

Scope

- How many individuals are touched by this issue?

Significance

- How significantly does the issue impact those touched by it?

Impact

- How much of an impact can SLMC have on addressing this issue?

Limitations

SLMC has engaged in an extensive process to develop a CHNA that is rooted in the most detailed information available at the time of the writing of this report.

However, SLMC recognizes that the responses reflected in the community stakeholder interviews represent the opinions of those interviewed and may not reflect the actual needs of the community. While every effort was made to recruit a set of diverse and representative perspectives, no guarantee exists that the perspectives of these participants are fully representative of those in the community served by SLMC. County-level data is featured in this report when more local data pertaining to SLMC’s service area was not available. The extent to which local needs vary from county, state, or national trends cannot be ascertained with any degree of certainty.

SLMC’s emphasis on recruiting a set of diverse perspectives and using local or regional data when available to determine the health needs of the community demonstrates SLMC’s commitment to understanding and meeting the needs of its service area.

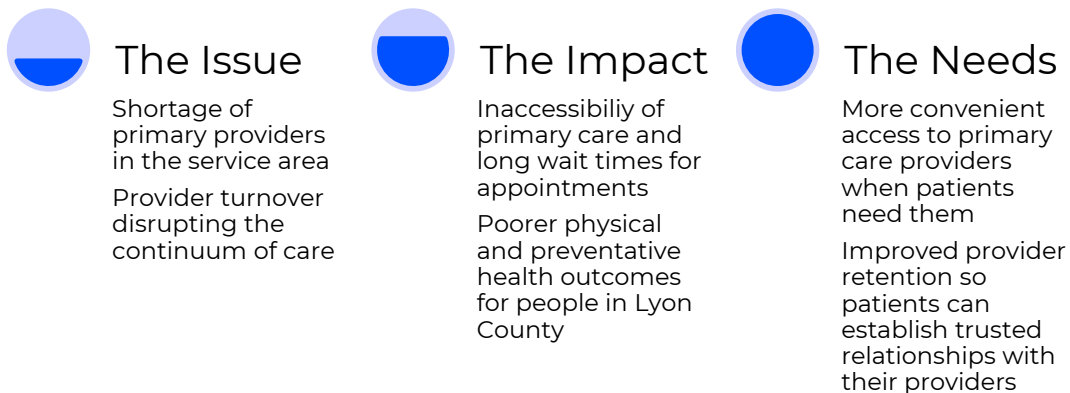
Community Health Priorities

The 2022-2024 community health priorities, in no particular order, are:



Additional context regarding the selection of these health needs as priorities for SLMC is provided below:

Access to Primary Care



Access to primary care is a significant healthcare need in the community, 67% of community stakeholders and 78% of survey respondents indicated. Approximately 28% of respondents indicated that they have had to leave Yerington/Lyon County to access primary care and/or urgent care services. Inaccessibility to primary care in the service area is driven by both a lack of providers to meet the community's needs, as well as provider turnover. Provider shortages are persistent in Lyon County, where the number of people per primary care physician (6,200) is over three times the ratio observed at the state level (County Health Rankings, 2021). A lack of providers creates access challenges for patients who cannot conveniently access their provider when they need to: 28% of survey respondents indicated that they have had to leave Yerington/Lyon County to access healthcare services because they had difficulty getting an appointment or because the wait time was too long. In cases where patients cannot access primary care services locally,

patients may have to travel elsewhere to access the care they need, resulting in further challenge for patients who lack reliable transportation.

Stakeholders also reported that provider turnover disrupts the continuum of care for patients, resulting in patients not establishing care with a provider or developing preventative health routines. When primary care is inaccessible, patients tend to not seek or receive necessary preventative health services, such as annual check-ups/physicals, vaccinations, or preventative health screenings for diseases. While a majority of adults (71%) in Lyon County report receiving a preventative care visit in the past year (Healthiest Communities, 2021), older adults in Lyon County exhibit significantly lower rates of preventative mammography screens (35%) and flu vaccinations (38%) compared to national benchmarks (County Health Rankings, 2021).

Lack of preventative healthcare over a long period of time plays a profound role on physical health: adults in Lyon County report higher rates of poor or fair health (21% of adults) and more physically unhealthy days (5.0 days) over a month-long period compared to state and national benchmarks (County Health Rankings, 2021). In addition, rate of preventable hospitalizations can also increase as health issues become recurring or heightened over time due to lack of management or treatment: the rate of preventable hospital stays for older adults in Lyon County is 1.3 times greater than the national benchmark, resulting in about 3,464 preventable hospital stays per 100,000 older adults per year (County Health Rankings, 2021).

Access to Specialty Care



The Issue

Lack of access to medical and surgical specialty providers in the service area
Transportation barriers to accessing specialty care



The Impact

Inaccessibility of specialty care, causing patients to defer needed healthcare services
Poorer physical health outcomes for people in Lyon County



The Needs

More convenient access to specialty care at SLMC
Transportation resources to support traveling to Reno and Carson City for care

Access to specialty care is a significant healthcare need in the community 67% of community stakeholders and 44% of survey respondents indicated. Inaccessibility to specialty care in the community is largely driven by a lack of specialists in Lyon County. While SLMC does provide access to specialty services, including cardiology, gastroenterology, orthopedics, obstetrics/gynecology, and general surgery, access is only provided one to two days per month per specialty or via telehealth. While SLMC has attempted to recruit specialty providers to work at SLMC in the past, both financial and

building constraints have limited the services that can be offered at SLMC. Most specialty programs have been financially unsustainable given the small population of the community served by SLMC, and the lack of a surgery department in the hospital inhibits SLMC's ability to recruit surgical specialists to Yerington.

According to Medicare data, most patients who have to leave SLMC for services out-migrate for oncology/chemotherapy, cardiology, and musculoskeletal/orthopedic services. When asked what services they or someone they know had to leave Yerington/Lyon County for, the most prominent specialty mentioned by survey respondents was cardiology (61% of respondents). Heart care is an important need in the community given that 6.8% of adults in Lyon County have been diagnosed heart disease (Healthiest Communities, 2021). Cancer care is also significant need in Lyon County given the older age composition of the population, which results in a higher rate of new cancer diagnoses (434.2 people per 100,000 population) compared to national benchmarks (Healthiest Communities, 2021).

In cases where patients cannot access specialty services locally, patients may have to travel to either Reno or Carson City, Nevada, an over one hour drive each way, to access the services they need. All survey respondents indicated that they have had to leave Yerington/Lyon County to access needed healthcare services, and 83% of respondents indicated they had to do so because services were not available at SLMC. Patients who lack the time or ability to travel for healthcare are disproportionately burdened by the lack of specialty care in Lyon County. While a local organization in the community, Helping Hands, helps alleviate challenges by providing transportation services both to and from medical appointments outside Lyon County, this all-volunteer group lacks resources to meet the growing need for their services.

Mental Health and Substance Use



The Issue

Shortage of behavioral health providers in the service area
Stigmatization of mental health and substance use disorders



The Impact

Inaccessibility and stigmatization of care, causing patients to defer needed mental health services
Poorer mental health and substance abuse outcomes for people in Lyon County



The Needs

More convenient accessibility to behavioral health providers when patients need them

One community stakeholder and 44% of survey respondents indicated that mental health and substance use services (collectively behavioral health services) are a significant

healthcare need in the community. Inaccessibility to behavioral healthcare is largely driven by a lack of behavioral health providers in Lyon County and northern Nevada. The community served by SLMC lacks access to mental health services, including mental health services such as counseling, therapy, and intensive outpatient treatment, as well as substance abuse services and treatment programs. Barriers to accessing services include long wait times for appointments, challenges with finding a behavioral health provider in the patient's insurance network, or having to travel elsewhere to access services.

Notably, the COVID-19 pandemic has significantly exacerbated mental health issues and trauma, particularly child abuse and neglect as children have spent more time in the home. Families have experienced many significant life events throughout the pandemic, such as losing their loved ones, their jobs, or their homes, and are lacking the support they need to cope with and respond to these challenges. People may also face stigmatization for seeking help for their behavioral health needs, which may prevent them from seeking care.

Behavioral health disorders play a significant role in the well-being of those afflicted, significantly impacting quality of life and the ability to work and play in the community. Chronic mental distress affects 16% of adults in Lyon County, and adults in Lyon County also report more mentally unhealthy days (5.0 days) over a month-long period compared to state and national benchmarks (County Health Rankings, 2021). When left untreated, mental health and substance use disorders can lead to long-term impacts within a community, including higher rates of suicide, alcohol-related disease, and drug overdoses: approximately 60.3 deaths per 100,000 people in Lyon County each year are driven by these "deaths of despair," a rate that is 1.3 times greater than the national benchmarks (Healthiest Communities, 2021).

CHNA Implementation Plan

In collaboration with Wipfli and the Advisory Committee, SLMC developed an implementation plan to address the prioritized health needs. SLMC will explore the following strategic objectives and tactics to address the prioritized health needs:

Access to Primary Care

Strategic Objectives

- Reduce appointment wait times to create better accessibility for patients
- Improve provider productivity to create better accessibility for patients
- Improve accessibility for Spanish-speaking patients
- Right-size number of providers employed by SLMC to align supply with demand

Tactics

- Implement and advertise a two-week appointment guarantee within the community
- Develop an advertisement strategy to reach the Hispanic population and increase recruitment of bi-lingual employees
- Conduct a clinical operational assessment to analyze provider throughput and productivity and other factors impacting the patient experience at SLMC
- Explore implementing productivity-based compensation agreements to improve provider productivity
- Conduct an assessment to determine number of primary care providers needed to support community demand
- Continue supporting partnerships/affiliations with rural resident training programs to recruit more primary care providers committed to rural health to SLMC

Access to Specialty Care

Strategic Objectives

- Explore feasibility of offering new specialty services at SLMC
- Right-size number of providers employed or contracted by SLMC to align supply with demand
- Improve advertisement of services available at SLMC, including diagnostic and outreach/visiting specialty services
- Reduce transportation barriers for patients who need to access specialty services

Tactics

- Explore feasibility of implementing a cardiac echo program to support patients with heart disease
- Implement provider education for telehealth specialty referrals
- Hire a social media coordinator to improve social media presence and improve advertisement of services within the community, including the Hispanic population
- Explore collaboration with Helping Hands to provide financial/operational support

Mental Health and Substance Use

Strategic Objectives

- Improve accessibility to mental health and substance use services at SLMC
- Recruit or contract with more behavioral health providers to improve outpatient and emergency response services
- Improve advertisement of behavioral health services available at SLMC

Tactics

- Continue providing accessibility to tele-mental health services with Renown, and explore virtual prescribing capabilities for medication-assisted treatment
- Explore need for and barriers to tele-mental health adoption and utilization in SLMC patients
- Explore contracting with Behavioral Health Solutions to provide behavioral health services to patients
- Explore contracting with a licensed clinical social worker to provide emergency behavioral health case management services

Evaluation of Previous CHNA Implementation Plan (2019 - 2021)

Previous CHNA Priorities

SLMC conducts a CHNA every three years as part of our ongoing efforts to address our community’s most significant health needs. Our previous CHNA identified the following prioritization areas:

- ▶ Customer service
- ▶ Access to specialty care
- ▶ Affordability of care

Impact Evaluation

The following summarizes SLMC’s effort in addressing the previous health priorities identified in the CHNA:

Customer service

- SLMC developed a new customer service training program to promote improved customer service facility wide, which included both mandatory telephone scripting and in-service training for employees.
- Beginning in March 2020, SLMC reduced the number of in-person encounters due to the COVID-19 pandemic. This has impacted the ability to measure meaningful improvements in customer service as a result of the training program.

Access to specialty care

- SLMC currently offers telehealth services for over 20 specialties through a partnership with Renown Health. SLMC has also partnered with Renown to upgrade telehealth infrastructure at SLMC in order to continue facilitating access to telehealth services.
- SLMC has also partnered with Renown Health to provide outreach specialty services in Yerington. Access to specialty services was impacted due to the COVID-19 pandemic as providers stopped coming to SLMC. However, visiting specialists have begun providing services at SLMC again.

Affordability of care

- SLMC hired a full-time bilingual financial counselor to assist patients in accessing healthcare services, particularly sliding fee services and other discounted services.
- SLMC simplified its financial assistance application to streamline the process of applying for assistance for patients and their families.
- SLMC has partnered with local businesses to ensure their employer-sponsored health insurance product is in network with SLMC.
- SLMC continues to provide charity care and discounted care to patients who cannot afford their medical bills.

References and Acknowledgments

Primary Data Sources

This report was made possible through the contribution of the following organizations who participated as stakeholders in the community input process of this needs assessment:

- ▶ City of Yerington
- ▶ Lyon County School District
- ▶ Mason Valley Boys and Girls Club
- ▶ South Lyon Medical Center

Secondary Data Sources

Secondary data regarding the community served by SLMC was referenced from the following sources:

- ▶ American Community Survey
- ▶ Behavioral Risk Factor Surveillance System
- ▶ Center for Disease Control and Prevention
- ▶ County Health Rankings
- ▶ ESRI Business Information Solutions
- ▶ Healthiest Communities, a collaboration between U.S. News and the University of Missouri Extension Center for Applied Research and Engagement Systems
- ▶ U.S. Census Bureau

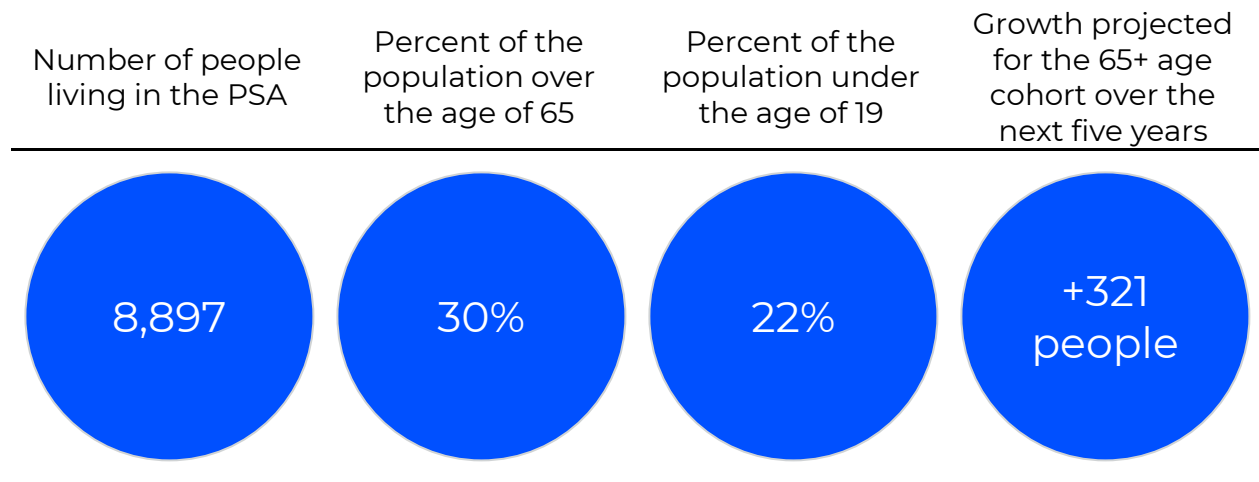
Consulting Expertise

Wipfli LLP, a national certified public accounting and consulting firm, assisted SLMC with all stages of this assessment, including collection and analysis of primary and secondary data, identification of community health needs, direction of the prioritization process, and compilation of this report.

Community Profile

Demographic Indicators

COMMUNITY PROFILE AT-A-GLANCE

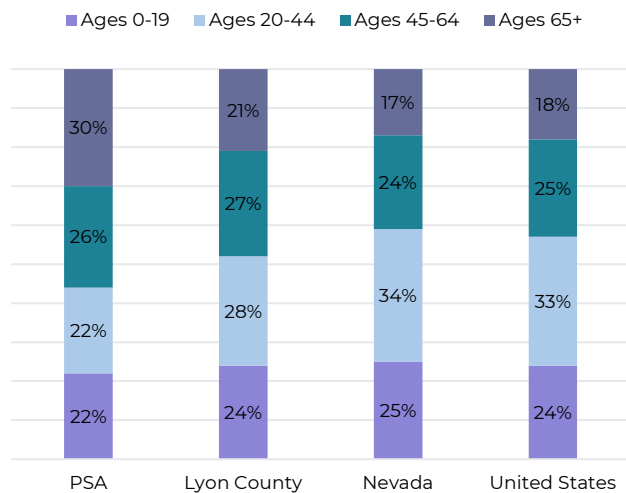


Source: ESRI Business Information Solutions, 2021

As of 2021, the population of the PSA is 8,897, with projections estimating that the PSA is anticipated to grow by 3% over the next five years, or by about 286 people.

The age distribution of the population also impacts the need for healthcare services. The community served by SLMC trends significantly older than state and national benchmarks, with 30% of the population consisting of people over the age of 65. This age cohort is anticipated to contribute to a majority of the growth projected in the PSA over the next five years (321 people).

Population distribution by age category

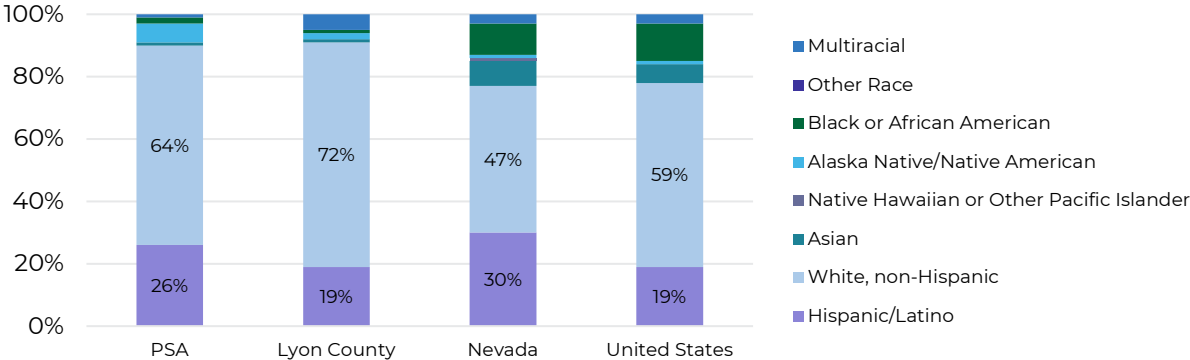


Source: ESRI Business Information Solutions, 2021

RACE AND ETHNICITY

SLMC's PSA is predominantly white, with 64% of the population consisting of individuals who identify as white, non-Hispanic. Approximately 26% of the population identifies as Hispanic, higher than the national benchmark of 19%. Overall, SLMC's service area is less racially and ethnically diverse compared to state and national benchmarks.

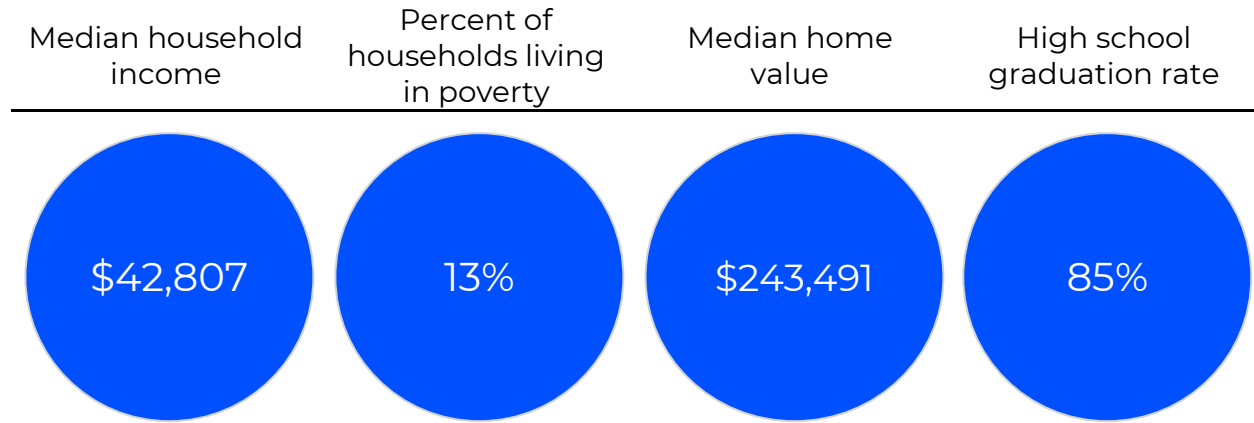
Population by race/ethnicity



Source: ESRI Business Information Solutions, 2021

Socioeconomic Indicators

COMMUNITY PROFILE AT-A-GLANCE



Source: ESRI Business Information Solutions; American Community Survey 5-year estimates, 2015-2019; County Health Rankings, 2021

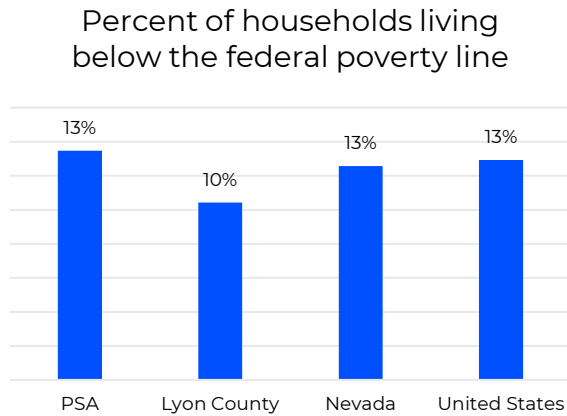
INCOME AND POVERTY

Income is one of the most important social determinants of health, impacting not only education and living conditions, but also physical health, mental health, and health-related behaviors such as diet and exercise. Household income in the PSA trends significantly lower than county, state, and national benchmarks, with 38% of households in the PSA reporting a household income below \$35,000, compared to 29% of households in Lyon County. This indicates that SLMC's PSA is significantly less affluent.

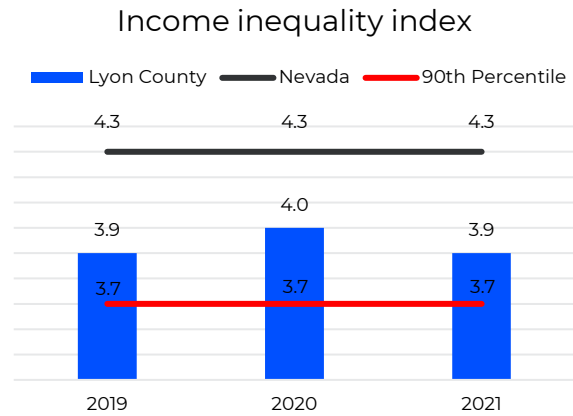
	PSA	Lyon County	Nevada	United States
% of Total Households				
Under \$15,000	16%	11%	10%	10%
\$15,000 - \$34,999	22%	18%	16%	17%
\$35,000 - \$74,999	36%	34%	32%	29%
\$75,000 - \$99,999	10%	15%	14%	13%
\$100,000 and Greater	16%	22%	28%	31%
Total	100%	100%	100%	100%
% of households under \$35,000	38%	29%	26%	27%

Source: ESRI Business Information Solutions, 2021

Financial insecurity has a significant impact on community health and wellness. People who live in poverty often lack the ability to access resources such as education, healthcare, and employment. In line with state and national benchmarks, 13% of households in the PSA are living below the federal poverty line. Income inequality has remained stagnant over the past three years, with rates observed in Lyon County slightly higher than the national 90th percentile benchmark.



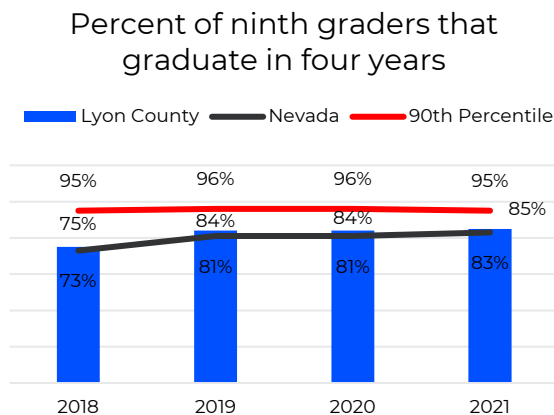
Source: American Community Survey 5-year estimates, 2015-2019



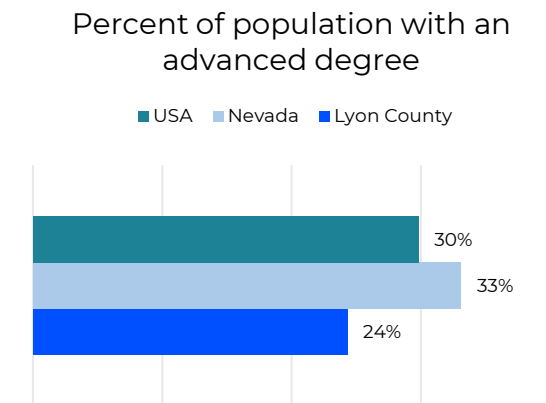
Source: County Health Rankings
Metric: Measures the ratio of household income at the 80th percentile to income at the 20th percentile.

EDUCATIONAL ATTAINMENT

Education provides people with the resources and security to improve their socioeconomic circumstance and live healthier lives. Generally, a lower percentage of people in Lyon County graduate from high school or obtain an advanced degree compared to national benchmarks. Approximately 85% of high schoolers in Lyon County graduate in four years, while 24% of the adult population goes on to secure some kind advanced degree.



Source: County Health Rankings
Metric: Percentage of ninth-grade cohort that graduates in four years.

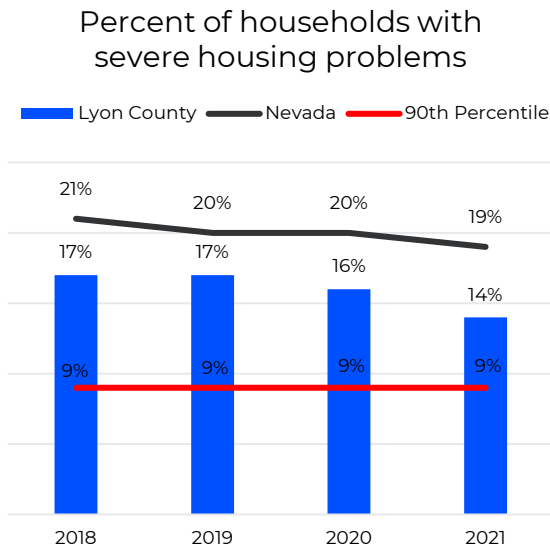


Source: Healthiest Communities, 2021
Metric: Percentage of the population age 25 and older with an associate, bachelor's, master's, professional or doctorate degree.

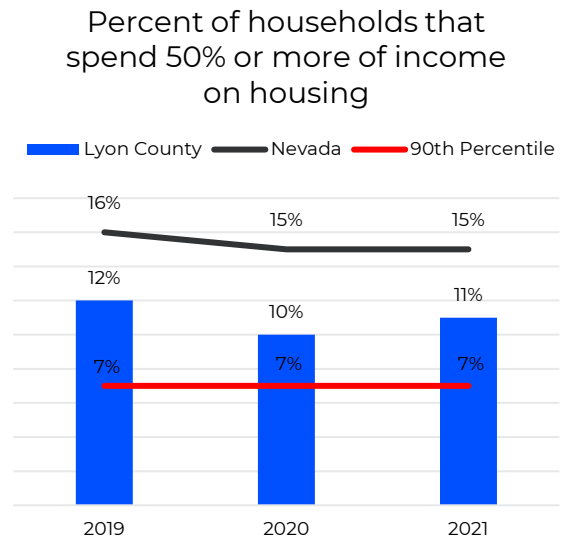
AFFORDABLE HOUSING

Housing is also an important social determinant of health. Access to affordable housing increases the availability of household resources to pay for other things, including healthcare and healthy food.

The American Community Survey reports that approximately 33% of vacant housing units in the PSA are available to rent or buy, which indicates that housing options are accessible. However, 12% of households in Lyon County spend more than 50% of their income on housing, and 14% of households in Lyon County report some type of severe housing problem, such as overcrowding, high housing costs, or lack of kitchen or bathroom facilities. Collectively, these statistics indicate that housing in Lyon County is generally less affordable and of lower quality compared to housing observed statewide or nationally.



Source: County Health Rankings
 Metric: Measures percent of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities.

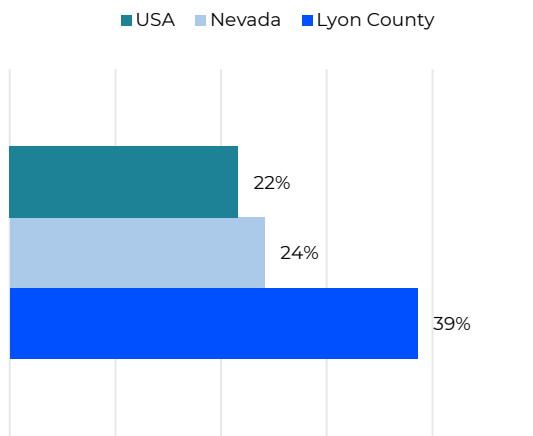


Source: County Health Rankings
 Metric: Measures percent of households that spend 50% or more of their household income on housing.

FOOD SECURITY

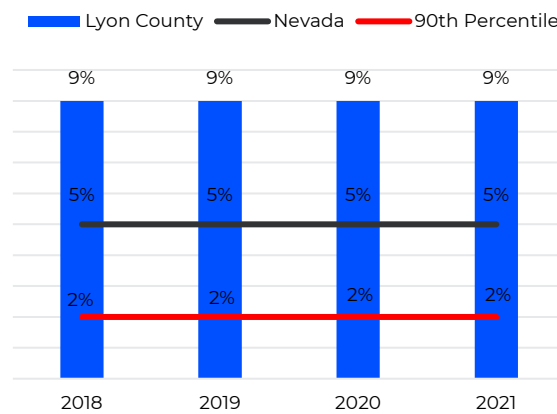
Eating healthy foods is associated with lower rates of chronic disease and better physical health, but the ability to eat healthy foods is contingent on having access to affordable healthy food options in one’s community. Lyon County exhibits higher rates of food insecurity compared to national benchmarks: 39% of the population lacks access to a large grocery store, and 9% of the population is both low-income and lacks convenient access to a grocery store.

Percent of population without access to a large grocery store



Source: Healthiest Communities, 2021
Metric: Percentage of population without access to a large grocery store.

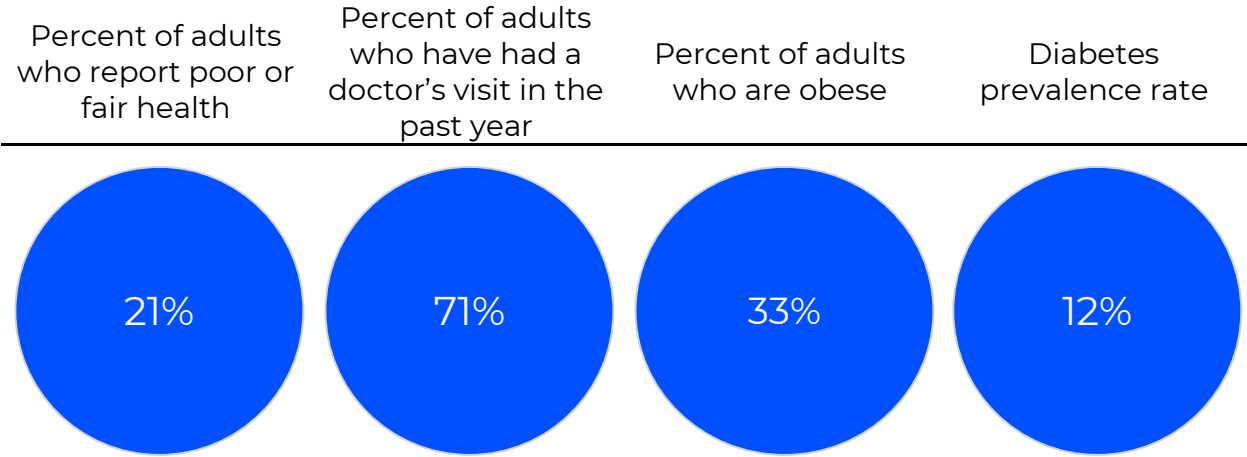
Percent of population who are low-income and do not live close to a grocery store



Source: County Health Rankings
Metric: Percentage of population who are low-income and do not live close to a grocery store.

Health and Disease Indicators

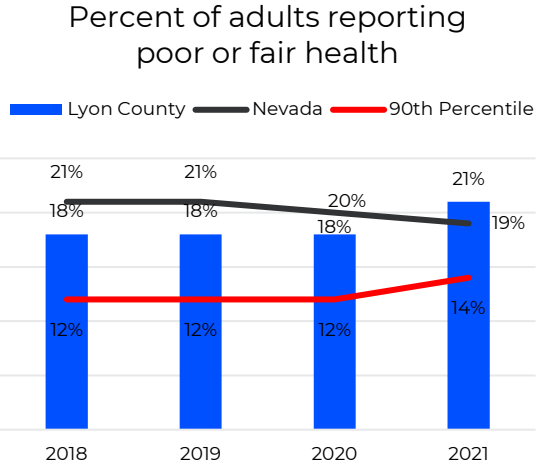
COMMUNITY PROFILE AT-A-GLANCE



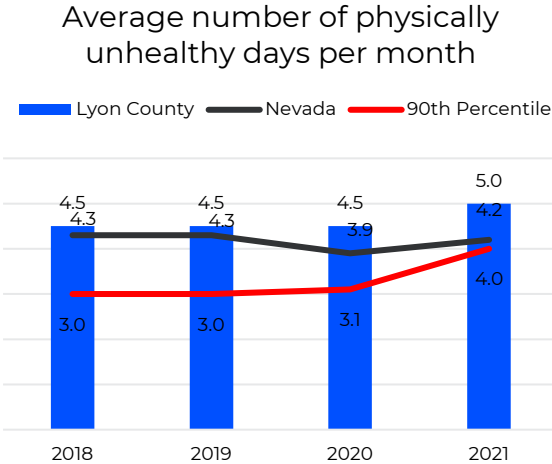
Source: County Health Rankings, 2021; Healthiest Communities, 2021

POPULATION HEALTH AND CHRONIC DISEASE

Physical health is impacted by a multitude of factors, including age, gender, race, socioeconomic status, physical activity, and chronic disease. Adults in Lyon County generally report poorer rates of physical health compared to state and national benchmarks. Similarly, adults in Lyon County report an average of five days where they felt physically unhealthy in the past month, one day more than national benchmarks.

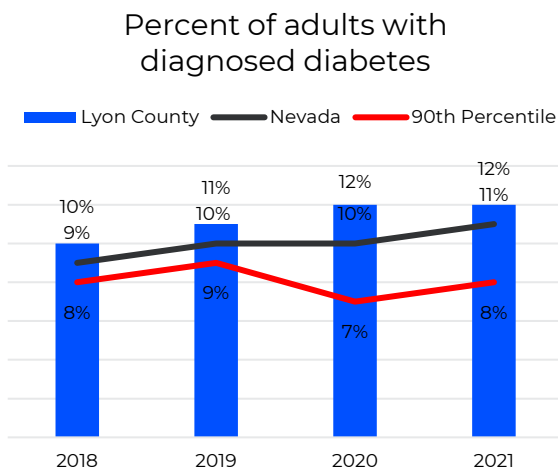


Source: County Health Rankings
Metric: Percentage of adults reporting fair or poor health (age-adjusted).

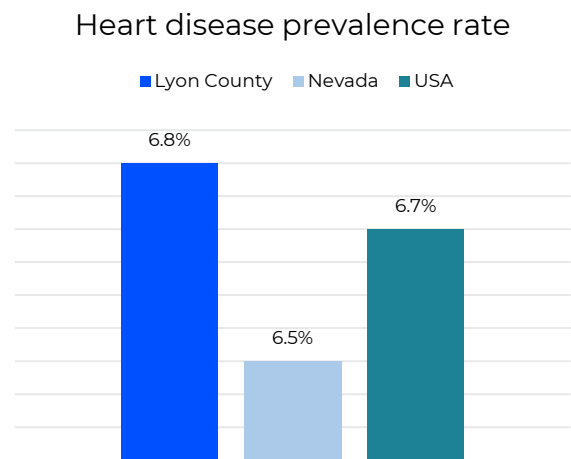


Source: County Health Rankings
Metric: Average number of physically unhealthy days reported in past 30 days (age-adjusted).

According to the Center for Disease Control and Prevention (CDC), chronic disease is one of the most preventable leading causes of death in the United States, often stemming from unhealthy lifestyles, such as lack of physical activity, poor nutrition, obesity, and risky health-related behaviors such as smoking. Chronic disease negatively impacts the health and wellbeing of SLMC’s community, who may experience limitations in their ability to live, work, and play in the community. Overall, the prevalence rate for chronic disease, such as diabetes and heart disease, are higher in Lyon County compared to state and national benchmarks. Diabetes prevalence in Lyon County adults has increased steadily over the past four years, with 12% of adults having a diabetes diagnosis in 2021. According to County Health Rankings, in 2021, heart disease was the second leading cause of premature death in Lyon County, while diabetes was the fifth.



Source: County Health Rankings
Metric: Percentage of adults aged 20 and above with diagnosed diabetes.

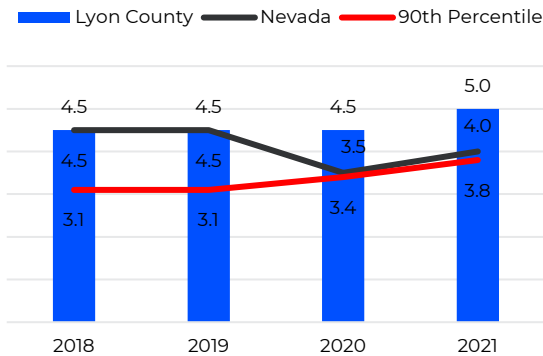


Source: Healthiest Communities, 2021
Metric: Percentage of adults who report ever being told by a health professional that they had angina or coronary heart disease.

MENTAL HEALTH AND SUBSTANCE USE

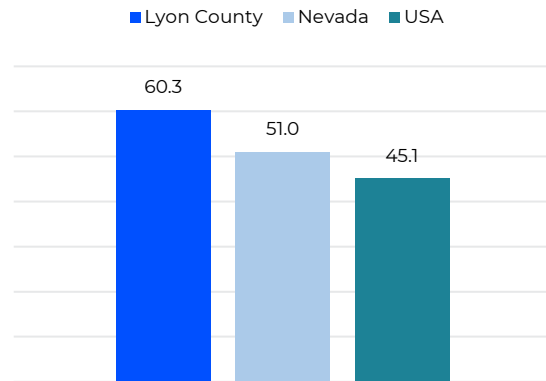
Just like physical health, mental health can play a profound role in quality of life. Adults in Lyon County generally report a higher number of mentally unhealthy days over the past month compared to state and national benchmarks. Poor mental health can result in higher rates of “deaths of despair” in a community, which include deaths due to suicide, alcohol-related diseases, and drug overdoses. According to the National Alliance on Mental Illness, approximately 46% of people who die by suicide have some form of underlying mental health condition. In 2021, an estimated 60.3 deaths per 100,000 population in Lyon County were deaths of despair, significantly higher than state and national rates.

Average number of mentally unhealthy days reported in the past month



Source: County Health Rankings
Metric: Average number of mentally unhealthy days reported in past 30 days (age-adjusted).

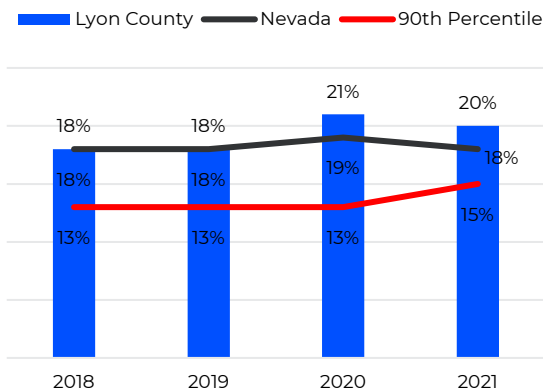
Number of deaths of despair per 100,000 population



Source: Healthiest Communities, 2021
Metric: Rate of deaths due to suicide, alcohol-related disease, and drug overdoses per 100,000 population.

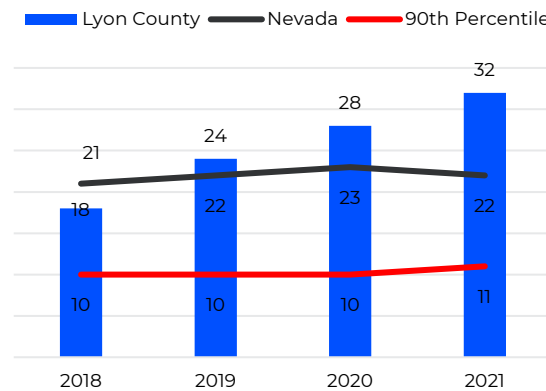
Substance use and addiction can contribute to the development of mental health conditions, and vice versa. These disorders tend to co-occur with one another, which produces a more significant negative impact on overall health and wellbeing. Adults in Lyon County report higher rates of excessive drinking, a precursor to alcohol-related disease. Similarly, Lyon County exhibits a higher rate of alcohol-impaired driving deaths compared to state and national benchmarks, with 39% of driving deaths involving some kind of alcohol in 2021. Lyon County also exhibits higher rates of drug overdose deaths per 100,000 population compared to state and national benchmarks, a rate which has significantly increased since 2018.

Percent of adults reporting excessive drinking



Source: County Health Rankings
Metric: Percentage of adults reporting binge or heavy drinking (age-adjusted).

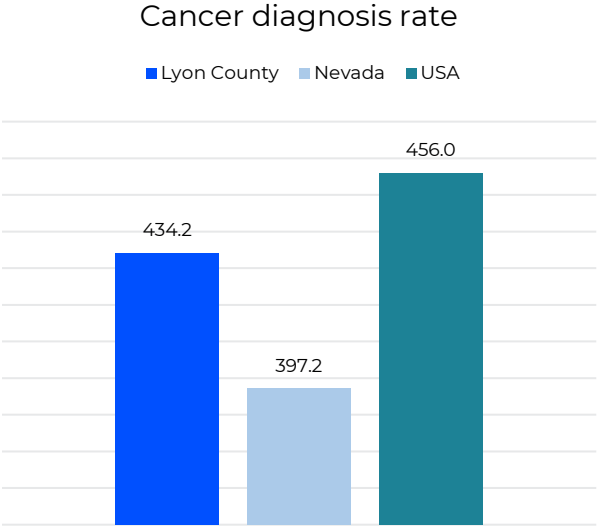
Number of drug overdose deaths per 100,000 population



Source: County Health Rankings
Metric: Number of drug poisoning deaths per 100,000 population.

CANCER

Cancer is the leading cause of premature death in Lyon County, resulting in about 233 deaths per year, or about 88.4 deaths per 100,000 population. Lyon County also has a higher rate of cancer diagnoses compared to state benchmarks; 434.2 people per 100,000 population are diagnosed with cancer each year, which translates to about 39 people in the PSA and 258 people in Lyon County based on the estimated population in 2021.



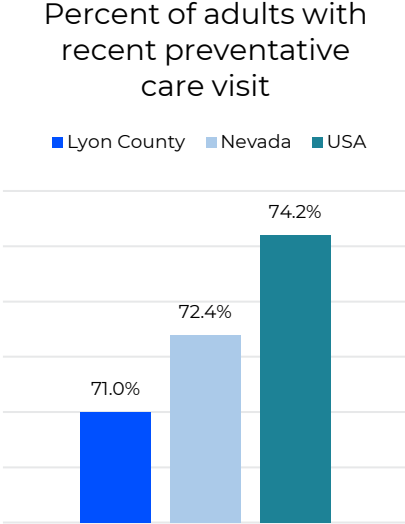
Source: Healthiest Communities, 2021

Metric: Average annual age-adjusted incidence rate of new cancer diagnoses per 100,000 population.

Preventative Health and Wellness Indicators

PREVENTATIVE HEALTH

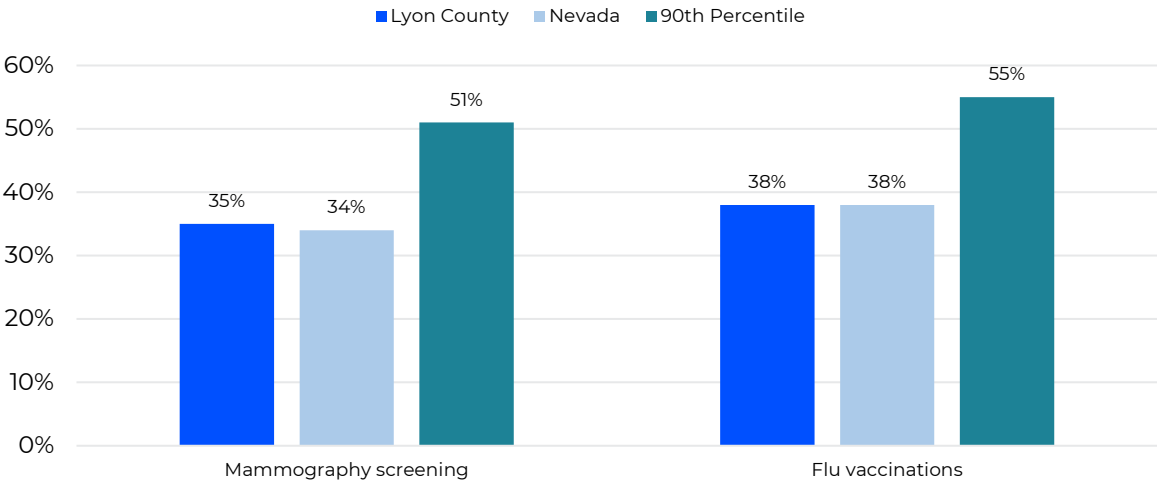
Preventative health behaviors, such as getting annual checkups and recommended vaccinations and preventative health screenings, play an important role in minimizing the prevalence of chronic disease as well as maintaining one’s overall health and wellness. In the past year, 71.0% of adults in Lyon County have received a routine medical checkup, slightly lower than state and national benchmarks. In addition, a lower percentage of Medicare enrollees in Lyon County receive recommended preventative services, such as recommended health screenings and vaccinations, compared to national benchmarks, indicating that the people of Lyon County engage in fewer preventative health behaviors.



Lack of preventative care tends to result in higher hospitalization rates for preventable health issues: in 2021, 3,464 hospital stays per 100,000 Medicare enrollees in Lyon County were for ambulatory-care sensitive conditions, significantly higher than the national rate of 2,565.

Source: Healthiest Communities, 2021
Metric: Percentage of adults who report having been to a doctor for a routine checkup in the previous year.

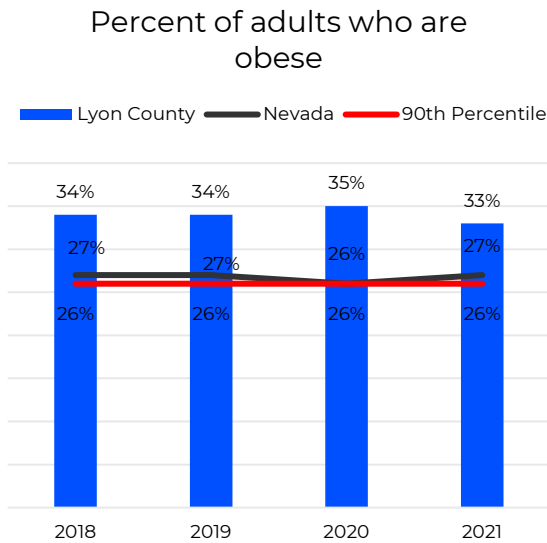
Preventative health screening/vaccination rates



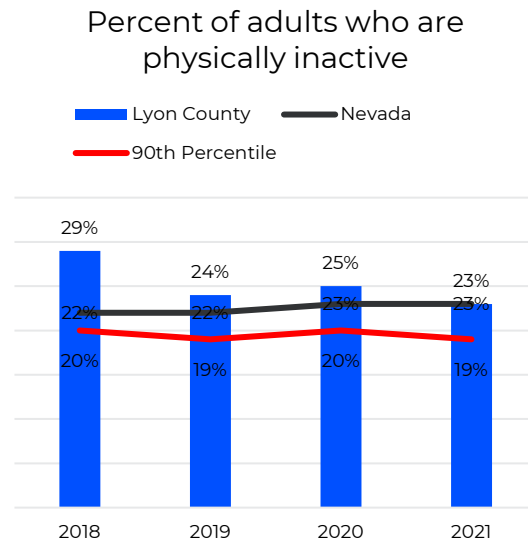
Source: County Health Rankings, 2021
Metric: Mammography screening measures the percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening. Flu vaccination rate measures the percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination.

ADULT OBESITY AND PHYSICAL ACTIVITY

Obesity and limited physical activity are two lifestyle factors that are known to contribute to chronic disease given their impact on both blood pressure and cholesterol levels. While the rate of physical inactivity has declined for adults in Lyon County since 2018, the rate of obesity has remained stagnant: 33% of adults in Lyon County are classified as obese, comparable to county and national trends.



Source: County Health Rankings
Metric: Percentage of the adult population who are obese according to the Body Mass Index.

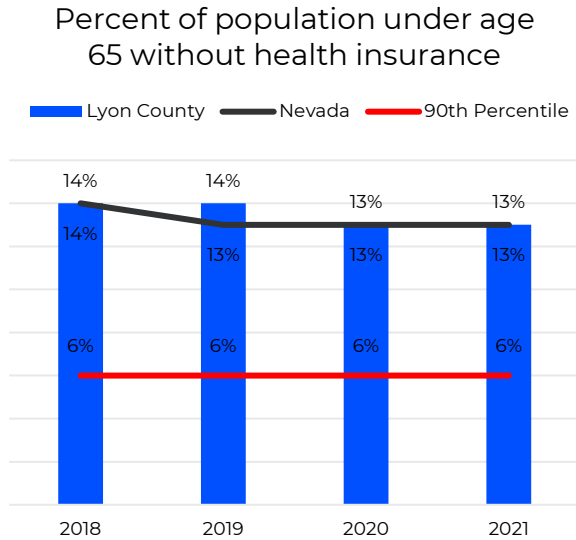


Source: County Health Rankings
Metric: Percentage of adults age 20 and over reporting no leisure-time physical activity.

Accessibility of Care Indicators

INSURANCE

Lack of health insurance is one of the biggest barriers to accessing healthcare services. Individuals without health insurance often forego care due to high costs, which can impact the likelihood of receiving preventative health services and of developing chronic disease or other health issues later in life. Overall, adults in Lyon County are less likely to have access to health insurance compared to national benchmarks, with 13% of the population under the age of 65 in Lyon County lacking health insurance in 2021.



Source: County Health Rankings

Metric: Percentage of population under age 65 without any kind of health insurance.

PROVIDER ACCESSIBILITY

Number of people in Lyon County per ...

Primary care provider



Higher than state benchmarks
Higher than 90th percentile national benchmark

Dentist



Higher than state benchmarks
Higher than 90th percentile national benchmark

Mental health provider



Higher than state benchmarks
Higher than 90th percentile national benchmark

Source: County Health Rankings, 2021

Convenient access to healthcare ensures people can access the care they need when they need it. When there is a shortage of providers in a community, people may not be able to access the healthcare services they need, resulting in poorer health outcomes. The number of people per primary care provider, dentist, and mental health provider is significantly higher in Lyon County compared to state and national benchmarks, indicating a shortage of providers.

Existing Healthcare and Community Resources

Medical Providers

Name	Address	Phone	Description of services
South Lyon Medical Center	213 S. Whitacre St, Yerington, NV 89447	(775) 463-2348	Hospital, emergency, imaging, lab, physical therapy, and primary care services
Yerington Paiute Tribal Health Clinic	171 Campbell Ln, Yerington, NV 89447	(775) 783-0222	Primary care services

Dental Providers

Name	Address	Phone	Description of services
Healthy Smiles Family Dentist	513 W. Bridge St, Yerington, NV 89447	(775) 463-1800	Preventative and general dentistry services
Mason Valley Family Dental	20 NV-208, Yerington, NV 89447	(775)-463-3171	Preventative, general, and specialty dentistry services
Smith Valley Smiles	2311 NV-208, Smith, NV 89430	(775) 465-2388	Preventative, general, specialty, and surgical dentistry services

Vision Providers

Name	Address	Phone	Description of services
Robertson and Koenig Optometry	233 Main St, Yerington, NV 89447	(775) 463-2020	Optometry services

Behavioral Health Providers

Name	Address	Phone	Description of services
Yerington Mental Health Center	215 W. Bridge St #5, Yerington, NV 89447	(775) 463-3191	Outpatient behavioral health services

This report was completed in compliance with the IRS requirements described in section 501(r)(3) of the Internal Revenue Code.

Prepared by South Lyon Medical Center

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