Community Health Needs Assessment (CHNA) Report





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Date Revised: August 27, 2018

Promote Healthy Living Assessment

includes topics such as addictive behaviors (tobacco, alcohol, drugs, gambling), chronic disease (mental health, cardiovascular disease, cancer, asthma, diabetes, arthritis, etc.), elderly wellness, family planning, infant, child & family health, nutrition and healthy food options, oral health, physical activity, pregnancy & birth, and wellness.

	Healthy Living Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed	d in the HIP, reason(s) why:
L	Chronic Disease Prevention and Screening	According to the 2014 Iowa Public Health Tracking Portal and a local survey the: Top causes of death for all ages in 2014 were Heart Disease and Stroke, Cancer, Alzheimer's Disease and COPD. Top causes for hospitalizations were Diabetes, Osteoarthritis, Respiratory infections, and Mental Health conditions. According to 2015 County Health Rankings, 31% of adults are obese, which is higher than Iowa and highest in group of 6 regional counties. According to local BMI studies, 34% of elementary students and 37% of high school students > 85th percentile. 2018 According to Stewart Memorial Community Hospital (SMCH) assessment survey, 47% respondents stated weight control was a challenge. This correlates with County Health Rankings for obesity at 34%, an increase from 2015 data.	Yes	Other priorities rated higher Existing programs already address problem/need Lack of human resources/ staff Other	Community partners do not exist Lead organization does not exist Lack of financial resources

	Healthy Living Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	d in the HIP, reason(s) why:
2	Addictive Behaviors in Adults	2015 County Health Rankings report: 22% of Calhoun County adults smoke tobacco which exceeds Iowa's 18% and is 2nd highest in group of 6 regional counties; 27% of adults report binge or heavy drinking, an increase from 18% in 2010, exceeds Iowa's report of 20% and the U.S report of 16%, and ranks highest in group of 6 regional counties.	Yes	Other priorities rated higher Existing programs already address problem/need Lack of human resources/ staff	Community partners do not exist Lead organization does not exist Lack of financial resources
		2018 According to SMCH assessment survey, tobacco use was a high concern at 48%. Respondents reported services available and meets needs at 71%. The 2018 County Health rankings indicate that adult smoking was at 16%, below lowa's reported		Other	

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use of 17%; excessive drinking is reported by 19% of adults, a decrease from 22% in 2015.

	Healthy Living Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed	d in the HIP, reason(s) why:
-	Addictive Behaviors in Children	2014 Iowa Youth Survey reports: *82% of Calhoun 11th graders report easy access to illegal substances; 72% in Iowa *6th & 8th grade alcohol usage (more than few sips) 33%, up from 28% in 2012; 11th graders 49% compared to Iowa's 30%. *Youth reports if ever gambled for money 31%, up from 29% in 2012. 2018 The Iowa Youth Survey is completed every two years, most recently in 2016. Results are that 14% of 6th graders, 39% of 8th graders and 41% of 11th graders report alcohol usage, indicating an improvement.	Yes	Other priorities rated higher Existing programs already address problem/need Lack of human resources/ staff Other	Community partners do not exist Lead organization does not exist Lack of financial resources

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Prevent Injuries & Violence Assessment

includes topics such as brain injury, disability, EMS trauma & system development, intentional injuries (violent & abusive behavior, suicide), occupational health & safety, and unintentional injuries (motor vehicle crashes, falls, poisoning, drowning, etc.).

	Injuries & Violence Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	d in the HIP, reason(s) why:
1	Unintentional injury rates for adults	According to Iowa's Public Health Tracking Portal and CDC's Community Health Status Indicators, motor vehicle accidents and unintentional injuries from falls, are #3 in the Top 5 causes of death, #8 and #10 in the Top 10 county hospitalizations, and #1 in the Top 10 reasons for local Emergency Department visits; local injury rates (79) exceed Iowa's (59). Calhoun's injury hospitalization rate is #1 highest rate in region of 6; ED visit rate is #3 highest in region of 6; motor vehicle accident death rate is #3 highest in region of 6; unintentional injury death rate is #2 highest in region of 6. 2018 County Health Rankings report 20 motor vehicle crash deaths in Calhoun County which is higher than the Iowa county average of 11. In Calhoun county 38% of motor vehicle deaths are alcohol related, which is higher than the Iowa average of 27%.	Yes	Other priorities rated higher Existing programs already address problem/need Lack of human resources/ staff Other	Community partners do not exist Lead organization does not exist Lack of financial resources

Injuries & Violence Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	d in the HIP, reason(s) why:
Unintentional injury rates for children	According to 2014 Fact Sheet from the National Children's Center for Rural and Agricultural Health and Safety, the leading	Yes	Other priorities rated higher	Community partners do not exist
	sources of nonfatal injuries for childhood agricultural injuries are surfaces (falls), animals and vehicles. Children are exposed		Existing programs already address problem/need	Lead organization does not exist
	to injuries through sports or recreation that include riding or driving on- and off-road 2- and 4-wheeled vehicles, water activities, and non-compliant / out-dated car safety seats.		Lack of human resources/ staff	Lack of financial resources
		I	Other	

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Injuries & Violence Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	d in the HIP, reason(s) why:
3 Child abuse and neglect rates	According to lowa Dept of Human Service Reports, 106 confirmed or founded events of child abuse and neglect occurred in 2014, involving 3 types of abuse: 26 Denials of critical care (neglect), 4 Physical abuse, 2 Sexual Abuse; 1 Allowed access by registered sex offender. The age range for child victims of confirmed or founded abuse or neglect in 2014 was: <5 years - 7(29.2%); 6-10 years – 12; >11 years - 5. 2018 65% of respondents to the SMCH survey stated that child abuse is a high concern, with only 27% stating that available service meets needs.	Yes	Other priorities rated higher Existing programs already address problem/need Lack of human resources/ staff Other	Community partners do not exist Lead organization does not exist Lack of financial resources
Injuries & Violence Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	d in the HIP, reason(s) why:
4 Bullying	According to 2014 Iowa Youth Survey, 70% of female students and 54% of males in 6th through 11th grade report being bullied 1 or more times in the past 30 days. 2018 75% of SMCH survey respondents state that bullying is an issue of concern; 21% feel that services to address bullying are available and meet needs.	Yes	Other priorities rated higher Existing programs already address problem/need Lack of human resources/ staff	Community partners do not exist Lead organization does not exist Lack of financial resources

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Protect Against Environmental Hazards Assessment

includes topics such as drinking water protection, food waste, food safety, fluoridation, hazardous materials, hazardous waste, healthy homes, impaired waterways, lead poisoning, nuisances, on site wastewater systems, radon, radiological health, soil erosion, and vector control.

	Environmental Hazards Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
1	Healthy Living Environment	Local Public Health receives frequent requests from renters re lack of adequate plumbing and heating in Calhoun County rental properties. No housing assessment, written minimum housing standards or ordinances, or written agreement between landlord and renter to assure basic provisions prior to habitation. No routine access to smoke detectors or fire extinguishers. Local Public Health receives frequent requests from concerned citizens / city officials re hoarding / nuisances in or around homes that create safety hazards for inhabitants, neighbors and emergency responders. Inconsistent enforcement of inadequate policies have been ineffective to eliminate recurring public complaint. 2018 SMCH and Calhoun County Public Health (CCPH) staff participated in a housing needs assessment involving multiple counties. Results have not been published as of the date of this report.	Yes	Other priorities rated higher Community partners do not exist Existing programs already address problem/need not exist Lack of human resources/ staff Other
	Environmental Hazards Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
2	Surface and ground water quality	Calhoun County is 1 of 3 being sued by Des Moines Waterworks for high nitrate runoff. Calhoun County hosts large and small animal confinements that utilize surface distribution methods to dispose of manure. Field run-off creates potential hazards for water quality and soil erosion. These is no long-term routine public monitoring of surface water.	Yes	Other priorities rated higher Community partners do not exist Existing programs already address problem/need Lack of human resources/ staff Other

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	Environmental Hazards Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	d in the HIP, reason(s) why:
3	Food Safety and hazardous waste disposal	Buena Vista County assumed all Food inspections for Calhoun County in October 2015. Calhoun County EH maintains a Household Hazardous Waste site in collaboration with Metro Waste Authority.	No	Other priorities rated higher Existing programs already address problem/need	Community partners do not exist Lead organization does not exist
		2018 Only 22% of SMCH survey respondents state that food safety in a concern and 75% feel that services are available to address food safety and meets needs.		Lack of human resources/ staff Other	Lack of financial resources

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Prevent Epidemics & the Spread of Disease Assessment

includes topics such as disease investigation, control & surveillance, HIV/AIDS, immunization, reportable diseases, sexually transmitted diseases (STDs), and tuberculosis (TB).

Epidemics & Spread of Disease Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	d in the HIP, reason(s) why:
Immunization rates	According to 2014-15 Iowa Registry of Immunization Services (IRIS) and annual Iowa Dept of Public Health Reports, Calhoun County adults and children do not meet state or national goals for all available vaccine types which prevent disease. 2014 Iowa Public Health Tracking Portal reports pneumonia and influenza are in Top 5 Causes of Death and Top 10 reasons for hospitalizations; 2nd highest rank in region of 6 counties and greater than Iowa in all age-adjusted groups. 2018 48% of SMCH survey respondents had a high concern about child immunizations; 95% reported feeling that childhood immunization services are available and meet needs. According to Iowa Registry of Immunization Services (IRIS) 82% of children at age two meet state immunization requirements which exceeds the national target of 80%.	Yes	Other priorities rated higher Existing programs already address problem/need Lack of human resources/ staff Other	Community partners do not exist Lead organization does not exist Lack of financial resources

pidemics & Spread of Disease Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	d in the HIP, reason(s) why:
Infectious disease	Calhoun County Public Health staff investigated 18 reportable disease events in fiscal year 2015 that are preventable with community education. According to CDC's Community Health Status Indicators, Calhoun's chlamydia rate of 197.4 and gonorrhea rate of 10.4 falls within a moderate national category of incidence; 192 newly diagnosed chlamydia cases is an increase from 125 in 2010. Chlamydia was the highest reportable infectious disease in 2012.	Yes	Other priorities rated higher Existing programs already address problem/need Lack of human resources/ staff Other	Community partners do not exist Lead organization does not exist Lack of financial resource
	2018 equal to FY2015. County Health Rankings combine all sexually transmitted disease. Calhoun County's rate is 202.7, which is lower than lowa's rank of 388.9.			

Prepare for, Respond to, & Recover from Public Health Emergencies Assessment

includes topics such as communication networks, emergency planning, emergency response, individual preparedness, recovery planning, risk communication, and surge capacity.

	Preparedness Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	ed in the HIP, reason(s) why:
1	Human Resource Capacity	Routine and periodic education and training is needed at all community levels to assure a rapid and appropriate all-hazards response. Responders need access to supplies and equipment. 2018 CCPH and SMCH participate in the Service Area 7 Regional Disaster Coalition where training needs will be addressed for the region.	Yes	Other priorities rated higher Existing programs already address problem/need Lack of human resources/ staff Other	Community partners do not exist Lead organization does not exist Lack of financial resources
	Preparedness Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	ed in the HIP, reason(s) why:

	Preparedness Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	d in the HIP, reason(s) why:
3	Technical and Communication Capacity	Community preparedness and successful emergency notifications depend on updated and redundant methods of	Yes	Other priorities rated higher	Community partners do not exist
		communication that is tested periodically.		Existing programs already address problem/need	Lead organization does not exist
		2018 CCPH and SMCH both have HANS (Health Alert Network System) and WENS (Weather and Emergency Notification System) which are tested routinely.		Lack of human resources/ staff	Lack of financial resources
	<u>, , , , , , , , , , , , , , , , , , , </u>	[576-50-7]	I	Other	

Strengthen the Health Infrastructure Assessment

includes topics such as access to quality health services, community engagement, evaluation, food security, food systems, food and nutrition assistance (SNAP, WIC), health facilities, health insurance, medical care, organizational capacity, planning, quality improvement, social determinants (e.g., education & poverty levels), transportation, and workforce (e.g., primary care, dental, mental health, public health).

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	Health Infrastructure Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	d in the HIP, reason(s) why:		
1	Access to Quality Health Services and Support	According to 2015 County Health Rankings, the ratio of population to mental health providers is triple the ratios for lowa and U.S. Local survey respondents report they do not receive routine health care due to cost / no insurance, can't take work time off / no appointment available when convenient for patient. Providers report patients verbalize lack of reliable transportation prevents compliance to medical appointments. 2018 According to County Health Rankings, mental health providers in Calhoun County are 4,920 to 1. Through participation with Rolling Hills Mental Health Coalition, mental services are available through tele-health at SMCH.	Yes	Other priorities rated higher Existing programs already address problem/need Lack of human resources/ staff Other	Community partners do not exist Lead organization does not exist Lack of financial resources		
	Health Infrastructure Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addresse	d in the HIP, reason(s) why:		
2	Accreditation and Standardization of Health Programs and Services	According to Healthy People 2020, expanding the evidence base for community interventions and for the effective organization, administration, and financing of public health services is critical to the future development of public health infrastructure. The emerging field of public health systems and services research is planing an important role in the development of this evidence base; its role should be supported and expanded over the decade, with a strong focus	Yes	Other priorities rated higher Existing programs already address problem/need Lack of human resources/ staff Other	Community partners do not exist Lead organization does not exist Lack of financial resources		

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	Health Infrastructure Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
3	Poverty	According to 2015 County Health Rankings, 36% of Calhoun County's children live in single-parent households, compared to 29% in Iowa and 31% in U.S. According to 2014 ISU Extension Poverty and Food Needs report, 21% of families with children under 18 live in poverty compared to 15% in 2010; 36% of families with a single female parent have incomes below the poverty level, and the rate increases to 79% when incomes <185% of poverty level. 22% of individuals < 18 years live below poverty guidelines; 23% of persons >18 years live below poverty guidelines - all county levels exceed Iowa's rates. 2018 County Health Rankings state that 29% of children live in single parent households which is an improvement and equal to Iowa. In Calhoun County 16% of children live in poverty.	Yes	Other priorities rated higher Community partners of not exist Existing programs already address problem/need not exist Lack of human resources/ staff Other

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Community Health Needs Assessment SNAPSHOT



Promote Healthy Living

Priority #1 Chronic Disease Prevention and Screening

Priority #2 Addictive Behaviors in Adults

Priority #3 Addictive Behaviors in Children



Prevent Injuries & Violence

Priority #1 Unintentional injury rates for adults

Priority #2 Unintentional injury rates for children

Priority #3 Child abuse and neglect rates

Priority #4 Bullying



Protect Against Environmental Hazards

Priority #1 Healthy Living Environment

Priority #2 Surface and ground water quality

Priority #3 Food Safety and hazardous waste disposal



Prevent Epidemics & the Spread of Disease

Priority #1 Immunization rates

Priority #2 Infectious disease



Prepare for, Respond to, & Recover from Public Health Emergencies

Priority #1 Human Resource Capacity

Priority #2 Planning

Priority #3 Technical and Communication Capacity



Strengthen the Health Infrastructure

Priority #1 Access to Quality Health Services and Support

Priority #2 Accreditation and Standardization of Health Programs and Services

Priority #3 Poverty

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