

Calhoun County Health Improvement Plan

Date Updated: May 29, 2018



For additional information, CONTACT:

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Community Priority

Chronic Disease Prevention and Screening

Goal #1 Reduce the number of newly diagnosed cases of diabetes in the population.

National Alignment

D-1 Reduce the annual number of new cases of diagnosed diabetes in the population (HP2020)

State Alignment

4.1.13 Increase use of health literacy-inclusive interventions among outpatient self-management education programs (IA HIP 2015)

Objective 1-1

Increase preventive behaviors in persons at high risk for diabetes with pre-diabetes education from 0 persons in 2015 to 25 persons in 2017.

Baseline Year	Baseline Value	Target Year	Target Value
2015	0 persons	2017	25 persons

Report Date

May 30, 2017

Year

2017

Value

8

Progress on Objective

- Met, trend in right direction
- Not met, trend in right direction
- Met, no trend
- Not met, no trend
- Met, trend in wrong direction
- Not met, trend in wrong direction

Progress notes: Per conversation with Kari Jones, SMCH Chief Nursing Officer, eight hospital employees were involved in the NDPP program in the past year.

Report Date

May 30, 2018

Year

2018

Value

Progress on Objective

- Met, trend in right direction
- Not met, trend in right direction
- Met, no trend
- Not met, no trend
- Met, trend in wrong direction
- Not met, trend in wrong direction

Progress notes: Per Megan Huster, SMCH RN, 9 hospital employees and auxiliary volunteers participated in the NDPP program in the past year.

Strategy 1-1.1

Implement evidence-based National Diabetes Prevention Program (NDPP) for groups that address multiple health factors including nutrition, weight loss and physical activity.

Strategy Type

Address Social Determinant / Health Inequity

Who's Responsible

Nutritionist -Stewart Memorial Community Hospital

Target Date

Sept 1, 2016

Report Date

May 30, 2017

Progress on Strategy

- Complete
- On track
- Off track
- No progress

Progress notes: SMCH has implemented the NDPP program.

Strategy 1-1.2

Seek funding to promote and subsidize the cost of NDPP educational classes for persons who demonstrate, on a sliding fee basis, they cannot afford to pay for the course.

Strategy Type

Address Social Determinant / Health Inequity

Who's Responsible

Public Health and Stewart Memorial Community Hospital staff

Target Date

May 18, 2016

Report Date
May 30, 2017

Progress on Strategy
 Complete On track Off track No progress

Progress notes: SMCH is investigating 3rd party payment of the NDPP program.

Report Date
May 30, 2018

Progress on Strategy
 Complete On track Off track No progress

Progress notes: CPH and SMCH staff are enrolled in a webinar offered on June 13, 2018, entitled "Coverage for the National Diabetes Prevention Program: Employers and Commercial Health Insurance Plans." SMCH has applied to be a Medicare provider of the NDPP, but has not yet heard if they were approved.

Goal #2 Promote Chronic Disease Prevention and Screening

National Alignment

State Alignment

Objective 2-1

Baseline Year	Baseline Value	Target Year	Target Value
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Strategy 2-1.1

Strategy Type

Who's Responsible

Target Date

Community Priority

Addictive Behaviors in Adults & Youth

Goal #1 Reduce illness, disability and death related to tobacco products and second-hand smoke exposure.

National Alignment
TU-1 Reduce use of tobacco products by adults (HP2020)

State Alignment
3-1.8 Increase the number of Quitline participants
3-1.10 Develop a comprehensive strategy for youth tobacco prevention in Iowa (IA HIP 2015)

Objective 1-1 Decrease number of persons >18 years of age that smoke cigarettes from 22% in 2015 to 15% in 2020.

Baseline Year	Baseline Value	Target Year	Target Value
2015	22%	2020	15%

Report Date
5/23/2017

Year
2017

Value
17.6

Progress on Objective

Met, trend in right direction Not met, trend in right direction
 Met, no trend Not met, no trend
 Met, trend in wrong direction Not met, trend in wrong direction

Progress notes: Statistic from IDPH Division of Tobacco Use and Control. Presentations were given to Family First Dental Clinic, Sarah Hoban DDS, Rost Champion, Macke Motors, Nick Hildreth Memorial Clinic, Northern Iowa Acupuncture Clinic, and SMCH Cardiac / Respiratory depts. Quitline banners were placed at SMCH, NHMC, and CCPH.

Report Date
6/3/2018

Year
2018

Value
16.5

Progress on Objective

Met, trend in right direction Not met, trend in right direction
 Met, no trend Not met, no trend
 Met, trend in wrong direction Not met, trend in wrong direction

Progress notes: Statistic from IDPH Division of Tobacco Use and Control. Two Calhoun County daycares adopted nicotine free policies. Presentations were given to a 4H club and a group at the Pomeroy Public Library. Over a 1,000 individuals visited a booth promoting no use of tobacco at Kidzmaniza, an event in a local mall.

Strategy 1-1.1 Increase number of referrals to Smoking Cessation classes and/or Quitline from health providers.

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible
Public Health Tobacco Prevention Program Manager; Stewart Memorial Community Hospital clinicians; CFR Project Manager

Target Date
May 18, 2016

Report Date
May 23, 2017

Progress on Strategy

Complete On track Off track No progress

Progress notes: Quitline calls decreased from 37 in FY15 to 12 in the first 10 months of FY17. The decrease may be due to the fact medications to aid in cessation are only available to Medicaid recipients. Trinity Regional Medical Center in Fort Dodge offers smoking cessation classes but information was not available on the number of Calhoun County participants.

Report Date

Progress on Strategy

Complete On track Off track No progress

Progress notes: Quitline call decreased to 8 in FY18.

Strategy 1-1.2 Implement anti-tobacco Mass Media Campaign targeting adults and youth during Tobacco Prevention Month. Strategy Type
Long-Lasting Protective Intervention

Who's Responsible Public Health Tobacco Prevention Program Manager; Stewart Memorial Community Hospital clinicians; CFR Project Manager Target Date
May 18, 2016

Report Date Progress on Strategy
May 23, 2017 Complete On track Off track No progress

Progress notes: Anti-tobacco mass media campaign ran on local radio stations and on social media during November 2016.

Report Date Progress on Strategy
June 3, 2018 Complete On track Off track No progress

Progress notes: Anti-tobacco mass media campaign ran on local radio stations and on social media during November 2017.

Goal #2 Reduce substance abuse to protect the health safety and quality of life for all, especially children.

National Alignment

SA-2.1 Increase the proportion of at risk adolescents age 12-17 who, in the past year, refrained from using alcohol for the first time (HP2020)

State Alignment

3-1.1 Fund 12 counties with the highest need for improvement, based on indicators for underage drinking, adult binge drinking, and a combined legal consequence rate (IA HIP 2015)

Objective 2-1 Reduce the proportion of 6th and 8th-graders who report alcohol usage (more than few sips) on Iowa Youth Survey from 33% in 2015 to 25% in 2020.

Baseline Year	Baseline Value	Target Year	Target Value
2015	33%	2020	25%

Report Date Year Progress on Objective
May 23, 2017 Met, trend in right direction Not met, trend in right direction
Value Met, no trend Not met, no trend
 Met, trend in wrong direction Not met, trend in wrong direction

Progress notes: Calhoun County 2016 Iowa Youth Survey results are that 14% of 6th graders, 39% of 8th graders, and 41% of 11th graders report alcohol usage (any alcohol use).

Report Date Year Progress on Objective
May 30, 2018 Met, trend in right direction Not met, trend in right direction
Value Met, no trend Not met, no trend
 Met, trend in wrong direction Not met, trend in wrong direction

Progress notes: Iowa Youth survey is completed every 2 years.

Strategy 2-1.1 Expand participation for at risk youth in education and evidence-based substance abuse interventions. Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible
Community and Family Resources (CFR) Project Manager

Target Date
May 18, 2016

Report Date
May 30, 2017

Progress on Strategy

Complete On track Off track No progress

Progress notes: CFR presented Too Good for Drugs at PAC Elementary Schools (serving Pomeroy area 5th and 6th graders) and at Southeast Valley Middle School (serves Farnhamville, Somers, and Rinard area 5th grades.) CFR presented All Stars at MNW Elementary and at Southeast Valley Middle School (serves Farnhamville, Somers and Rinard area 6th grades).

Report Date
June 3, 2018

Progress on Strategy

Complete On track Off track No progress

Progress notes: Information was not available on participation of at-risk youth in substance abuse interventions when this report was due.

Strategy 2-1.2 Collaborate with CFR to implement alcohol abuse Mass Media Campaign in conjunction with youth-based education.

Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible
Public Health and Hospital HIP Workgroup; CFR Project Manager; Board of Health; Law Enforcement; County Attorney

Target Date
May 18, 2016

Report Date
May 25, 2017

Progress on Strategy

Complete On track Off track No progress

Progress notes:

Report Date
June 3, 2018

Progress on Strategy

Complete On track Off track No progress

Progress notes:

Objective 2-2 Reduce the proportion of persons >18 who report binge or heavy drinking from 27% in 2015 to 21% in 2020.

Baseline Year	Baseline Value	Target Year	Target Value
2015	27%	2020	21%

Report Date
May 25, 2017

Year
2017

Value
NA

Progress on Objective

Met, trend in right direction Not met, trend in right direction
 Met, no trend Not met, no trend
 Met, trend in wrong direction Not met, trend in wrong direction

Progress notes: Data available from County Health Rankings 2017 is not comparable with data from prior years.

Report Date
May 30, 2018

Year
2018

Value
19%

Progress on Objective

Met, trend in right direction Not met, trend in right direction
 Met, no trend Not met, no trend
 Met, trend in wrong direction Not met, trend in wrong direction

Progress notes: According to County Health Rankings 2018, 19% of adults report binge or heavy drinking.

Strategy 2-2.1 Collaborate with CFR to implement alcohol abuse Mass Media Campaign to the community and in conjunction with youth-based education. Strategy Type Address Social Determinant / Health Inequity

Who's Responsible Public Health and Hospital HIP Workgroup; CFR; Board of Health; Law Enforcement; County Attorney Target Date May 18, 2016

Report Date May 25, 2017 Progress on Strategy
 Complete On track Off track No progress

Progress notes:

Report Date June 3, 2018 Progress on Strategy
 Complete On track Off track No progress

Progress notes:

Community Priority

Prevent Injuries and Violence

Goal #1 Prevent unintentional injuries, deaths, and violence and reduce their consequences.

National Alignment

IVP-11 Reduce unintentional injury deaths.
IVP-12 Reduce non-fatal unintentional injuries (HP2020)

State Alignment

7-1 Decrease hospitalization rate related to falls > 65 years.
7-3 Increase seatbelt use to reduce injuires and deaths from motor vehicle crashes.
7-5 Reduce rate of all intentional and unintentional fatal injuries (IA HIP 2015)

Objective 1-1 Reduce motor vehicle crash deaths with alcohol involvement from 30% in 2015 to 15% in 2020.

Baseline Year	Baseline Value	Target Year	Target Value
2015	30%	2020	15%

Report Date

May 30, 2017

Year

2017

Value

33%

Progress on Objective

- | | |
|--|---|
| <input type="checkbox"/> Met, trend in right direction | <input type="checkbox"/> Not met, trend in right direction |
| <input type="checkbox"/> Met, no trend | <input type="checkbox"/> Not met, no trend |
| <input type="checkbox"/> Met, trend in wrong direction | <input checked="" type="checkbox"/> Not met, trend in wrong direction |

Progress notes: According to County Health Rankings, in 2017 33% of the driving deaths involved alcohol impairment.

Report Date

May 30, 2018

Year

2018

Value

38%

Progress on Objective

- | | |
|--|---|
| <input type="checkbox"/> Met, trend in right direction | <input type="checkbox"/> Not met, trend in right direction |
| <input type="checkbox"/> Met, no trend | <input type="checkbox"/> Not met, no trend |
| <input type="checkbox"/> Met, trend in wrong direction | <input checked="" type="checkbox"/> Not met, trend in wrong direction |

Progress notes: According to 2018 County Health Rankings, 38% of the driving deaths involved alcohol impairment.

Strategy 1-1.1 Implement a multi-component intervention campaign using The Community Guide to reduce alcohol-impaired driving.

Strategy Type

Address Social Determinant / Health Inequity

Who's Responsible

Public Health and Hospital HIP Workgroup; CFR; Board of Health; Law Enforcement; County Attorney

Target Date

May 18, 2016

Report Date

May 25, 2017

Progress on Strategy

- | | | | |
|-----------------------------------|-----------------------------------|------------------------------------|---|
| <input type="checkbox"/> Complete | <input type="checkbox"/> On track | <input type="checkbox"/> Off track | <input checked="" type="checkbox"/> No progress |
|-----------------------------------|-----------------------------------|------------------------------------|---|

Progress notes:

Report Date

June 3, 2018

Progress on Strategy

- | | | | |
|-----------------------------------|-----------------------------------|------------------------------------|---|
| <input type="checkbox"/> Complete | <input type="checkbox"/> On track | <input type="checkbox"/> Off track | <input checked="" type="checkbox"/> No progress |
|-----------------------------------|-----------------------------------|------------------------------------|---|

Progress notes:

Objective 1-2 Decrease local injury rate from 76 in 2015 to Iowa's rate of 59 by 2020.

Baseline Year	Baseline Value	Target Year	Target Value
2015	76	2020	59

Report Date
May 25, 2017

Year

Value

Progress on Objective

<input type="checkbox"/> Met, trend in right direction	<input type="checkbox"/> Not met, trend in right direction
<input type="checkbox"/> Met, no trend	<input type="checkbox"/> Not met, no trend
<input type="checkbox"/> Met, trend in wrong direction	<input checked="" type="checkbox"/> Not met, trend in wrong direction

Progress notes: In 2016, the local injury rate was 78; in 2017 the local injury rate is 87.

Report Date
May 30, 2018

Year

Value

Progress on Objective

<input type="checkbox"/> Met, trend in right direction	<input type="checkbox"/> Not met, trend in right direction
<input type="checkbox"/> Met, no trend	<input type="checkbox"/> Not met, no trend
<input type="checkbox"/> Met, trend in wrong direction	<input checked="" type="checkbox"/> Not met, trend in wrong direction

Progress notes: According to 2018 County Health Rankings, Calhoun County's injury death rate per 100,000 is 93.

Strategy 1-2.1 Increase participation in current evidence-based fall prevention programs through referral partnerships with clinicians and Elderbridge AAA.

Strategy Type
Environmental / Policy / Systems Change

Who's Responsible
Public Health Matter of Balance staff; Board of Health; CHNA&HIP work group; SMCH clinicians; Elderbridge AAA

Target Date
Mar 16, 2016

Report Date
May 25, 2017

Progress on Strategy

<input type="checkbox"/> Complete	<input checked="" type="checkbox"/> On track	<input type="checkbox"/> Off track	<input type="checkbox"/> No progress
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Progress notes: CCPH continues to offer two evidence-based fall prevention programs (MOB) per year. 31 individuals attended the class in FY 16 and 19 individuals attended the classes in FY 17. SMCH provides occupational and physical therapy guest speakers as required by the program model. None of the participants reported being referred by a clinician. Elderbridge AAA provided funding, support and continued training to the coaches.

Report Date
May 30, 2018

Progress on Strategy

<input type="checkbox"/> Complete	<input checked="" type="checkbox"/> On track	<input type="checkbox"/> Off track	<input type="checkbox"/> No progress
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Progress notes: CCPH continues to offer two Matter of Balance classes per year. In FY18, 16 individuals participated in Matter of Balance. In FY16 and FY17, one of the two classes was offered at a residential facility. In FY18, neither of the classes were offered at a residential facility, which may explain the decreased attendance. SMCH started offering Tai Chi in 2015, and to date have had 30 participants.

Strategy 1-2.2 Research and implement Safety & Health Communication and Social Marketing Campaigns from The Community Guide, with focus on machinery, motor vehicles, and water safety, including investments and distribution of safety supplies and equipment.

Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible
Public Health Injury and Violence Prevention staff; ISU Extension

Target Date
Mar 16, 2016

Report Date
May 25, 2017

Progress on Strategy

Complete On track Off track No progress

Progress notes:

Report Date
May 30, 2018

Progress on Strategy

Complete On track Off track No progress

Progress notes: Animal Safety and Bite Prevention presentations were given to 25 individuals at the Pomeroy Public Library and to 60 students and 6 adults at Farm Safety Day. Sun Safety presentations were given to approximately 150 individuals. 350 sun block chap sticks and 250 single use sun screen packages were given at four different events. Three local swimming pools were each provided with a gallon of screen.

Objective 1-3	Reduce confirmed or founded events of child abuse and neglect from 106 in 2014 to 0 on 2020.	Baseline	Baseline	Target	Target
		Year	Value	Year	Value
		2014	106	2020	0

Report Date
May 25, 2017

Year
2017

Value
35

Progress on Objective

Met, trend in right direction Not met, trend in right direction

Met, no trend Not met, no trend

Met, trend in wrong direction Not met, trend in wrong direction

Progress notes: Although the number of confirmed or founded cases has decreased significantly, local mandatory reporters are of the opinion this is due to changes in the intake and investigation process rather than an actual decrease in events. Local staff from multiple agencies drafted a letter to Iowa Senator McCoy and had a public conversation with U.S. Senator Ernst informing them of the inadequacies of our current child abuse investigation system.

Report Date
May 30, 2018

Year
2018

Value
25

Progress on Objective

Met, trend in right direction Not met, trend in right direction

Met, no trend Not met, no trend

Met, trend in wrong direction Not met, trend in wrong direction

Progress notes: Although the number of confirmed or founded cases has decreased significantly, local mandatory reporters are of the opinion this is due to changes in the intake and investigation process rather than an actual decrease in events. Nicole McChesney, elementary principal at South Central School in Rockwell City initiated a series of meetings at various times during the year with State Representative Mike Sexton, Ryan Holberg (local DHS supervisor), Judy Phelps (service area supervisor), Vern Armstrong (Division of Administration of Field Operations), Wendy Rickman (Division of Administration of Field Operations), Merea Bentrrott (Policy Advisor) and Jerry Foxhoven (Director of Department of Human Services). Teresa Van Hulzen, SCC school social worker also participated in these meetings. The purpose of the meetings was an attempt to provide feedback from the local level regarding the effectiveness of DHS services and an effort to improve relationships between DHS and local service providers.

Strategy 1-3.1 Increase support for credentialed early childhood home visitation programs, Child Care Nurse Consultant, and informal support groups using The Community Guide and promotional opportunities with clinicians and the general public.

Strategy Type
Counseling & Education

Who's Responsible
Family Foundations Program Manager; SMCH OB clinicians; MOMs leader;

Target Date
Mar 16, 2016

Report Date
May 26, 2017

Progress on Strategy
 Complete On track Off track No progress

Progress notes: Family Foundations completed the Expedited Renewal Credentialing Process in April of 2016. This program is at capacity. The MOMs informal support group is no longer being offered. Currently, Child Care Nurse Consultant services to Calhoun County are being provided through Webster County Public Health.

Report Date
May 30, 2018

Progress on Strategy
 Complete On track Off track No progress

Progress notes: Family Foundations continues to be at capacity. Linking Families and Communities, our Early Childhood Area, awarded additional funding so that Family Foundations could continue to accept referrals. Webster County Dept of Health provides Child Care Nurse Consultant (CCNC) services to Calhoun County. In the past year, 11 child care providers received CCNC services. Informational brochures, monthly newsletters and trainings are used to promote health and safety to child care homes and centers.

Strategy 1-3.2 Increase coordination of care for at risk families among Calhoun County Interagency Council members.

Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible
Family Foundations Program Manager and Family Service Workers; Child Care Nurse Consultant; Calhoun County Interagency Council

Target Date
Mar 16, 2016

Report Date
May 30, 2015

Progress on Strategy
 Complete On track Off track No progress

Progress notes: Beginning January 2017, Interagency Council members reviewed complex case stories omitting identifying information, to gain input from other professionals on how to help families and coordinate care.

Report Date
May 30, 2015

Progress on Strategy
 Complete On track Off track No progress

Progress notes: Interagency Council continues to review complex cases.

Objective 1-4 Reduce the the percent of 6th through 11th grade students who report being bullied 1 or more times in the past 30 days from 70% of females and 54% of males in 2014 to 45% in 2020.

Baseline Year	Baseline Value	Target Year	Target Value
2014	70% females; 54% males	2020	45%

Report Date
May 30, 2017

Year
2017

Value
31.9%

Progress on Objective
 Met, trend in right direction Not met, trend in right direction
 Met, no trend Not met, no trend
 Met, trend in wrong direction Not met, trend in wrong direction

Progress notes: According to Iowa Youth Survey 2016 County Reports, 31.9% of students 6th through 11th

grades, both male and female, report being bullied one or more times in the past 30 days.

Report Date
May 30, 2018

Year
2018

Value

Progress on Objective

<input type="checkbox"/> Met, trend in right direction	<input type="checkbox"/> Not met, trend in right direction
<input type="checkbox"/> Met, no trend	<input type="checkbox"/> Not met, no trend
<input type="checkbox"/> Met, trend in wrong direction	<input type="checkbox"/> Not met, trend in wrong direction

Progress notes: Iowa Youth survey is completed every 2 years.

Strategy 1-4.1 Research resources through Healthy People 2020 and associated links for social media messages and determine multiple methods of communication to the general public.

Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible
Public Health Injury and Violence Prevention staff; Board of Health;
CHNA&HIP work group; School officials

Target Date
Mar 16, 2016

Report Date
May 26, 2017

Progress on Strategy

<input type="checkbox"/> Complete	<input type="checkbox"/> On track	<input type="checkbox"/> Off track	<input checked="" type="checkbox"/> No progress
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Progress notes:

Report Date
May 30, 2018

Progress on Strategy

<input type="checkbox"/> Complete	<input type="checkbox"/> On track	<input type="checkbox"/> Off track	<input checked="" type="checkbox"/> No progress
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Progress notes:

Community Priority

Protect Against Environmental Hazards

Goal #1 Promote health for all through a healthy environment.

National Alignment

EH-19 Reduce the proportion of occupied housing units that have moderate or severe physical problems (HP2020)

State Alignment

5-1.2 Continue developing viable lowa communities with decent housing and suitable living environment and expanding economic opportunities primarily for persons of low and moderate incomes
5-1.4 Develop understanding of radon data quality and communicate radon health risks(IA HIP 2015)

Objective 1-1 Expand Healthy Homes Program to include rental agreements that assure decent housing and suitable living environment prior to habitation. Baseline: No current system in Calhoun County towns

Baseline Year	Baseline Value	Target Year	Target Value
2015	0 ordinances	2020	3 ordinances

Report Date

Year

May 25, 2017

2017

Value

Progress on Objective

- | | |
|---|--|
| <input type="checkbox"/> Met, trend in right direction | <input type="checkbox"/> Not met, trend in right direction |
| <input type="checkbox"/> Met, no trend | <input type="checkbox"/> Not met, no trend |
| <input checked="" type="checkbox"/> Met, trend in wrong direction | <input type="checkbox"/> Not met, trend in wrong direction |

Progress notes: Shelly Schossow, Environmental Health, met three times with MIDAS, Economic Development and city representatives and presented model housing ordinances. It is appropriate to assist cities to adopt housing ordinances, but not in conjunction with the Healthy Homes project.

Report Date

Year

May 30, 2018

2018

Value

Progress on Objective

- | | |
|--|---|
| <input type="checkbox"/> Met, trend in right direction | <input checked="" type="checkbox"/> Not met, trend in right direction |
| <input type="checkbox"/> Met, no trend | <input type="checkbox"/> Not met, no trend |
| <input type="checkbox"/> Met, trend in wrong direction | <input type="checkbox"/> Not met, trend in wrong direction |

Progress notes: MIDAS has hired a new housing inspector but housing ordinances have not yet been adopted in Calhoun County.

Strategy 1-1.1 Start dialogue with City Councils for adoption of written minimum housing standards, ordinances or written agreements between landlord and renter that assures basic living environment expectations & compliance from both parties prior to habitation.

Strategy Type

Environmental / Policy / Systems Change

Who's Responsible

Public Environmental Health Program Manager; Board of Health; Calhoun County Economic Development; City Councils

Target Date

Mar 16, 2016

Report Date

May 25, 2017

Progress on Strategy

- | | | | |
|-----------------------------------|--|------------------------------------|--------------------------------------|
| <input type="checkbox"/> Complete | <input checked="" type="checkbox"/> On track | <input type="checkbox"/> Off track | <input type="checkbox"/> No progress |
|-----------------------------------|--|------------------------------------|--------------------------------------|

Progress notes: Shelly Schossow, Environmental Health, met three times with MIDAS, Economic Development and city representatives and presented model ordinances. MIDAS plans to hire an housing inspector. The cities decided to hold up until the inspector is hired.

Report Date
May 30, 2018

Progress on Strategy
 Complete On track Off track No progress

Progress notes: Jill Heisterkamp, Calhoun County Economic Director, is working with multiple counties to conduct a Housing Needs Assessment. Survey results will provide City Councils with information supporting needs for housing ordinances and additional housing development.

Strategy 1-1.2 Increase the number of homes with functioning smoke detectors by 100 homes. Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible
Public Environmental Health Program Manager and designated staff; Fire Departments

Target Date
Mar 16, 2016

Report Date
May 25, 2017

Progress on Strategy
 Complete On track Off track No progress

Progress notes: Grant for smoke detectors was not funded.

Report Date
June 3, 2018

Progress on Strategy
 Complete On track Off track No progress

Progress notes:

Strategy 1-1.3 Communicate radon and/or carbon monoxide health risks and distribute test kits to the general public; assist persons with high radon results and/or CO risk factors with remediation options. Distribute Healthy Homes booklet to City Halls and other distribution points. Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible
Public Health Environmental Program Manager and designated staff;

Target Date
Mar 16, 2016

Report Date
May 25, 2017

Progress on Strategy
 Complete On track Off track No progress

Progress notes: Radon health risks were communicated to the general public via a January 2017 radio ad. 30 radon kits were distributed to the general public. Assisted persons requesting information on high results with remediations steps. Due to resident's privacy concerns, results were tracked aggregately by zip code, therefore not all high results were contacted. Healthy Homes booklets are not yet distributed to City Halls and other distribution points.

Report Date
May 30, 2018

Progress on Strategy
 Complete On track Off track No progress

Progress notes: 38 radon tests were completed by county residents this past year. During the month of January, the dangers of radon and information on testing procedures were posted on the Calhoun County FaceBook page one to two times per week.

Strategy 1-1.4 Continue blood lead-testing, education and environmental assessment of homes when a lead-poisoned child is identified according to MCH guidelines. Sustain the capacity to assess potential environmental exposure to

other metals if needed.

Strategy Type

Clinical Intervention

Who's Responsible

Well-child screening medical home clinicians and public health staff; MCH program partners; Public Health Environmental staff

Target Date

Feb 29, 2016

Report Date

May 25, 2017

Progress on Strategy

Complete On track Off track No progress

Progress notes: Environmental health staff completed recertification class of EBL-visual inspector, therefore program is sustainable.

Report Date

May 30, 2018

Progress on Strategy

Complete On track Off track No progress

Progress notes: In the past year there were no lead poisoned children identified, therefore no homes required a full environmental inspection. Families of children with elevated blood levels continued to receive visual inspections.

Goal #2 Surface and ground water quality.

National Alignment

EH-29 Reduce exposure to selected environmental chemicals, as measured by blood and urine concentration or their metabolites (HP2020)

State Alignment

5-1.7 Reduce exposure to elevated nitrate levels in drinking water in private wells and public water systems
5-1.8 Continue funding sewer system and water system improvements, water and waste water treatment
5-1.10 Reduce exposure to arsenic from private wells through monitoring and education (IA HIP 2015)

Objective 2-1

Retain qualified EH staff to manage and grow the Grants to Counties Program into areas of the County and region that have low or no history of water quality testing, well or septic renovation utilization by increasing the # of water samples from 202 in 2015 to 250 in 2020.

Baseline Year

2015

Baseline Value

202 Water Samples

Target Year

2020

Target Value

250 Water Samples

Report Date

May 25, 2017

Year

2017

Value

108

Progress on Objective

Met, trend in right direction Not met, trend in right direction
 Met, no trend Not met, no trend
 Met, trend in wrong direction Not met, trend in wrong direction

Progress notes: As of March of this FY, 108 water tests have been completed.

Report Date

May 30, 2018

Year

2018

Value

185

Progress on Objective

Met, trend in right direction Not met, trend in right direction
 Met, no trend Not met, no trend
 Met, trend in wrong direction Not met, trend in wrong direction

Progress notes: Grants to Counties funding is limited. Current funding will not support 250 water tests along with well renovation and well closures. Calhoun County continues to utilize all Grants to

Counties funding.

Strategy 2-1.1 Distribute mass mailings informing of water testing access; train additional staff to assist with collecting samples and counseling consumers on results. Promote well closures or renovations during water test promotions. Work with regional EH workers to expand their water quality programs. **Strategy Type**
Environmental / Policy / Systems Change

Who's Responsible Public Environmental Health Manager **Target Date** Feb 29, 2016

Report Date May 25, 2017 **Progress on Strategy**
 Complete On track Off track No progress

Progress notes: Mass mailings offering water testing are sent to residents by township on a rotation basis. Well closure and renovation information is included. Webster County Public Health was contacted to encourage arsenic testing as part of their routine water testing.

Report Date May 30, 2018 **Progress on Strategy**
 Complete On track Off track No progress

Progress notes: Mass mailings continue to be sent out to Calhoun County residents on a rotation basis by township.

Strategy 2-1.2 Train EH staff in the IOWATER Program with attendance at a IOWATER workshop to assist with the Mission of protecting and improving Iowa's water quality. **Strategy Type**
Environmental / Policy / Systems Change

Who's Responsible Public Environmental Health Manager **Target Date** Mar 16, 2016

Report Date May 25, 2017 **Progress on Strategy**
 Complete On track Off track No progress

Progress notes: EH staff attended the IOWATER workshop and has started monitoring surface water.

Report Date May 30, 2018 **Progress on Strategy**
 Complete On track Off track No progress

Progress notes: Plans are to do surface water testing around sites of new Confined Animal Feeding Operations (CAFOs) before and after they are in operation.

Community Priority

Access to Quality Health Services and Support

Goal #1 Improve access to quality health services and support

National Alignment

AHS-6 Reduce the proportion of persons who are unable to obtain or delay in obtaining necessary medical care, dental care, or prescription medications (HP2020)

State Alignment

1-3 Increase the proportion of people who have one person as a health provider (IA HIP 2020)

Objective 1-1 Reduce the number of persons who are unable to obtain or delay obtaining necessary medical care from 7% of survey respondents to 0%.

Baseline Year	Baseline Value	Target Year	Target Value
2015	7%	2020	0%

Report Date

May 25, 2017

Year

2017

Value

NA

Progress on Objective

- | | |
|--|--|
| <input type="checkbox"/> Met, trend in right direction | <input type="checkbox"/> Not met, trend in right direction |
| <input type="checkbox"/> Met, no trend | <input type="checkbox"/> Not met, no trend |
| <input type="checkbox"/> Met, trend in wrong direction | <input type="checkbox"/> Not met, trend in wrong direction |

Progress notes: Local respondents not yet surveyed.

Report Date

May 30, 2018

Year

2018

Value

NA

Progress on Objective

- | | |
|--|--|
| <input type="checkbox"/> Met, trend in right direction | <input type="checkbox"/> Not met, trend in right direction |
| <input type="checkbox"/> Met, no trend | <input type="checkbox"/> Not met, no trend |
| <input type="checkbox"/> Met, trend in wrong direction | <input type="checkbox"/> Not met, trend in wrong direction |

Progress notes: Stewart Memorial Community Hospital conducts a community needs survey every three years, with one being conducted in 2018. Results are not yet tabulated, but respondents are asked about this issue.

Strategy 1-1.1 Develop expanded hours to local clinicians at 3 local clinics.

Strategy Type

Environmental / Policy / Systems Change

Who's Responsible

Stewart Memorial Community Hospital Leadership and Clinicians

Target Date

Jul 20, 2016

Report Date

May 30, 2018

Progress on Strategy

- Complete On track Off track No progress

Progress notes: Survey results indicated a need for early morning hours. Two providers at the Lake City McCrary Rost Clinic and one at the Rockwell City McCrary Rost Clinic start at 7:30am.

Strategy 1-1.2 Develop redundant systems and services to transport persons without other means to their health and medical appointments.

Strategy Type

Environmental / Policy / Systems Change

Who's Responsible

Public Health and hospital staff; Board of Health; local business leaders

Target Date

May 18, 2016

Report Date
May 25, 2017

Progress on Strategy
 Complete On track Off track No progress

Progress notes: CCPH has assisted clients to utilize MCOs transportation reimbursement programs and linked them to local transportation providers. MIDAS is offering round trip transportation to Ft. Dodge one time a week for a cost of five dollars.

Report Date
May 30, 2018

Progress on Strategy
 Complete On track Off track No progress

Progress notes: In addition to CCPH program staff, support staff have been trained to assist clients to access MCO transportation programs.

Strategy 1-1.3 Increase utilization of Care Coordination services that link public and private resources and provide a safety net for individuals and families with complex health and social needs.

Strategy Type
Address Social Determinant / Health Inequity

Who's Responsible
Public Health and Hospital leadership and staff

Target Date
Mar 16, 2016

Report Date
May 25, 2017

Progress on Strategy
 Complete On track Off track No progress

Progress notes: Public Health meets every other week with SMCH healthcare providers and the local Coordinator of Disability Services to link those who are non-compliant with healthcare plans, frequent emergency room users, or who have uncontrolled mental illness, etc. with appropriate services.

Report Date
May 30, 2018

Progress on Strategy
 Complete On track Off track No progress

Progress notes: Public Health staff, Stewart Memorial Community Hospital staff and the local Coordinator of Disability Services continue to meet twice a month. To date, 45 SMCH patients and 145 CCPH clients have been served by the Care Coordination program.

Goal #2 Expand development of patient-centered medical home concept for all ages.

National Alignment
AHS-3 Increase the proportion of persons with a usual primary care provider (HP2020)

State Alignment
1-1.8 Continue to advance patient-centered medical homes in Iowa (IA HIP 2015)

Objective 2-1	Increase the proportion of children and youth who have a specific source of on-going care that follows well-child screening from 0 - 5 years to ages 6 - 18 years.	Baseline Year	Baseline Value	Target Year	Target Value
		2015	0-5 years	2020	6-18 years

Report Date
May 30, 2017

Year
2017

Value
unknown

Progress on Objective
 Met, trend in right direction Not met, trend in right direction
 Met, no trend Not met, no trend
 Met, trend in wrong direction Not met, trend in wrong direction

Progress notes: SMCH is focusing on increasing well child visits for those 6-18 years old. McCrary Rost Clinics is educating parents on the benefits of well child exams versus sport physicals. SMCH/ McCrary Rost Clinics has contacted Analisa Pearson, IDPH, about forming a partnership to

work on increasing well child visits, 6-18 years of age.

Report Date

June 3, 2018

Year

2018

Value

unknown

Progress on Objective

- | | |
|--|--|
| <input type="checkbox"/> Met, trend in right direction | <input type="checkbox"/> Not met, trend in right direction |
| <input type="checkbox"/> Met, no trend | <input checked="" type="checkbox"/> Not met, no trend |
| <input type="checkbox"/> Met, trend in wrong direction | <input type="checkbox"/> Not met, trend in wrong direction |

Progress notes: SMCH continues to focus on this objective.

Strategy 2-1.1 Utilize EHR to identify 6 - 18 year olds currently served by local clinicians and conduct outreach to recommend annual wellness exams and screenings.

Strategy Type

Environmental / Policy / Systems Change

Who's Responsible

Public Health and hospital leadership and staff

Target Date

Jul 20, 2016

Report Date

May 30, 2017

Progress on Strategy

- | | | | |
|-----------------------------------|--|------------------------------------|--------------------------------------|
| <input type="checkbox"/> Complete | <input checked="" type="checkbox"/> On track | <input type="checkbox"/> Off track | <input type="checkbox"/> No progress |
|-----------------------------------|--|------------------------------------|--------------------------------------|

Progress notes: SMCH / McCrary Rost Clinics is developing outreach procedures to use in promoting wellness exams and screenings. 375 patients, 6-18 years old, had wellness visits in 2015 and 490 had wellness exams in 2016.

Report Date

June 3, 2018

Progress on Strategy

- | | | | |
|-----------------------------------|--|------------------------------------|--------------------------------------|
| <input type="checkbox"/> Complete | <input checked="" type="checkbox"/> On track | <input type="checkbox"/> Off track | <input type="checkbox"/> No progress |
|-----------------------------------|--|------------------------------------|--------------------------------------|

Progress notes: Data was not available to be included in this report.