

COMMUNITY HEALTH NEEDS ASSESSMENT



2018

Davis County, Iowa

Community Health Needs Assessment

DAVIS COUNTY, IOWA

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EXECUTIVE SUMMARY

2018 Community Health Needs Assessment

Community Health Needs Assessments are ongoing processes that systematically evaluate the health needs of the community to improve the health of the population. After the passage of the Patient and Protection and Affordable Care Act of 2012, 501 (c)(3) hospital organizations were given four new tax requirements to begin in tax years after March 23rd, 2012 (Stall, 2012). These new tax requirements were birthed from the growing concern over non-profit hospitals not providing sufficient community benefit as required by their tax-exempt status (Principe, K., Adams, E. K., Maynard, J., & Becker, E. R, 2012). The four tax requirements included, the implementation of written financial assistance policies, the limitation of charges for emergency or necessary care, adherence to new billing and collection restrictions, and the fourth requirement mandated that non-profit hospitals perform Community Health Needs Assessments (CHNA) (Stall, 2012).

In the past Community Health Needs Assessments, the benefits for both the local health, health department and the community were stated in the following methods:

1. Identify key community health concerns, perceptions, and resources; while creating opportunity for collaboration in delivery of services.
2. Find a common understanding of and analyze community health needs, then prioritize with implementation strategies.
3. Provides guidance to the hospital and local health departments for how they can align their services and community benefit programs to best meet needs.
4. Focus organization's efforts for improvement and structure for addressing social determinates of health in building a relationship between and among stakeholders. All stakeholders can then contribute to improving the health of the community.
5. Provides rationale for current and potential funders to support efforts to improve the health of the community.

Principe, K., Adams, E. K., Maynard, J., & Becker, E. R. (2012). The impact of the individual mandate and Internal Revenue Service Form 990 Schedule H on community benefits from nonprofit hospitals. *American journal of public health, 102*(2), 229-237

Rosenbaum, S. (2013). Principles to Consider for the Implementation of Community Health Needs Assessments. *The George Washington University*. Washington, DC

Stall, E. (2012). Community Health Needs Assessment: 5 Phases to Compliance. Retrieved from <https://www.beckershospitalreview.com/legal-regulatory-issues/community-health-needs-assessment-5-phases-to-compliance.html>

Community Health Needs Assessment Strengths Identified

Davis County Hospital and Public Health Department Primary Service Area Community Health Strengths
1. Community Participants are generally satisfied with the quality and services from Davis County Hospital and Public Health
2. Participants supported both inpatient and outpatient services from Davis County Hospital and Public Health
3. Improvements over the last 3 years in the areas of senior care options, coordination between provider and agencies, access to specialty services, transportation, and rural health care delivery and access.
4. Improvements in the community's county health rankings in the hospital related areas of decrease in the number on un-insured residents, decreased preventable hospital stay (days), and hospital rating of 9 or 10 (CMS Compare Report).
5. Positive changes to the demographics within the community were residents increased in the community, those in severe housing issues decreased slightly, and high school graduation rates were strong (93%).
6. Child health vaccinations continue to improve over the last three years up to 75% (2018) from 59% in 2015.
7. Some social behavioral choices remain strong or slightly improved, including lower than state average teen births, adult smoking, alcohol impaired driving, and excessive drinking rates.

Community Health Opportunities Identified

Town Hall Outcomes - Community Health Opportunities
1. Chronic Disease management and services (Population Health, Internal and Community Services) ranking high Obesity and Diabetes, preventative services, and education
2. Teen Health (Population Health, Internal, and Community Services) ranking high mental health, pregnancy, sexually transmitted diseases, and substance abuse
3. Mental Health (Population Health, Internal and Community Services) ranking high for access, marketing/awareness of services, and training for providers
4. Public Awareness of Services (Population Health, Internal and Community Services) ranking high for patient portal access, mental health, underserved population (Amish - example), and specialty services
5. Access to Services (Population Health, Internal and Community Services) ranking high in areas of mental health, substance abuse, elder assistance, pharmacy (after-hours), urgent care, child care, and wellness services
6. Financial/Funding (Population Health, Internal and Community Services) ranking high for healthcare cost to the community, community coalition resources, service funding (substance, teen, mental health), wellness options, and provider training

Community Health Needs Assessment Survey - General Feedback

The following were general feedback sections from the Community Health Needs Assessment Survey in which 535 community participants completed the survey either via paper or electronic formats. The details of the survey process can be found later in this report.

- The percent of Davis County survey participants who would rate the overall quality of care as either Very Good or Good is 75%, up 0.5% since 2015. (2012 = 65.1%, 2015 = 74.5%)
- Davis County survey participants are satisfied with the following hospital services: Ambulance Services/ ER services, Family Practice, Home Health, Hospice, Specialty Providers, and Outpatient Services. Participants are satisfied with the following community services: Child care, Chiropractor, Eye Doctor, Pharmacy, and School Nursing.
- Davis County survey participants are NOT satisfied or neutral with the following services: Mental Health, Teen health, family planning and Nursing Home services (neutral).
- The percent of participants who have received healthcare services outside of the community over the past two years has decreased to 79.6% (from 81.2% in 2015). Of those that provided the type of service here are the services in which they traveled out of the community: Obstetrics, Dental, Surgery, Specialty (Cardiac, Urology, Orthopedics, Dermatology, Oncology, Neurology).
- Davis County participants believed there are opportunities for both health concerns and programs to combat the health concerns. The top perceptions of needs are listed in the following two tables as Results of Opportunities.

Community Health Needs Assessment Survey - Results of Opportunities

CHNA Survey – Needs for Health Concerns	
1. Mental Illness (66.9%)	2. Obesity (56.2%)
3. Teen Health (49.5%)	4. Aging (Dementia) (48.9%)
5. Abuse/Violence (44.4%)	6. Alcohol Use (43.2%)
7. Chronic Disease (41.1%)	8. Nutrition (35.5%)
9. Preventative Health (34.4%)	10. Under-insured (34.1%)
11. Tobacco Use (33.3%)	12. Pain Management (33.3%)
13. Poverty (32.3%)	14. Suicide (33.1)

CHNA Survey – Program Needs for Health Concerns (above)	
1. Mental Health access (65.9%)	2. Cancer services (46.5%)
3. After hours pharmacy (43.4%)	4. Urgent Care (36.7%)
5. Obstetrics services (36.5%)	6. Chronic disease programs (33.3%)
7. Elder assistance (32%)	8. Public awareness of services (32%)
9. Dental services (29%)	10. Public transportation (29%)
11. Family assistance (26.4%)	12. Nutrition/Healthy eating (22.7%)

Iowa Health Rankings: Davis County Hospital and Public Health

According to the 2018 Robert Wood Johnson County Health Rankings study, Davis County has the following comparisons. More details can be found in later sections of this report.

- **Demographics and Age:** Davis County has a population of 8,860 residents as of 2018, an increase of 1% since 2014. The county population consists of 17.3% at or over the ages of 65 years, a decrease of 0.2% since 2014 and the state average is 16.4%. In the under 18 age group, Davis County has a population of 28.8%, a decrease of 0.1% since 2014 and state average is 23.3%. The county is considered 100% rural.
- **Diversity:** Davis County has 1% of the population that is considered non-proficient in English as a first language. The county has approximately 1.4% Hispanic population, and 0.7% African-American, American Indian, and Asian combined. Females make up approximately 50.2% of the population.
- **Income:** Davis County median household income is \$49,600 (Iowa average of \$56,400) and unemployment is at 4.3%. Regarding the effects of income on the children in the county, 22% of the children live in poverty and 39% are eligible for free or reduced-price lunches (2015 – 33.2% were eligible and Iowa average of 41%).
- **Housing and Commutes:** The county is rated with 13% severe housing issues (Iowa overall at 12%, a decrease of 1% from 2015). For employment, 30% of the population have long commutes to work and 70% drive alone (Iowa is at 20% and 81% respectively).
- **Education:** The percent of high school graduation is at 93% and a strength in county rankings (Iowa 90%). For college education, Davis County has 64% of the population with some college (Iowa 70%). The rankings state that 27% of Davis County youth are “disconnected” (percentage of teens or young adults who were neither working or in school) and Iowa’s overall rate of 9% is significantly lower.
- **Prenatal Care:** According to Iowa Health Fact Book, as of March 2018, 149 mothers started Prenatal care in the first trimester, for a ranking of 92 out of the 99 counties in Iowa. The number of mothers that smoked during pregnancy was 40, for an Iowa rank of 90.
- **Primary Care and Hospital Services:** The ratio of population to primary care providers was slightly higher than 2015 report with 2,190 residents to 1 provider (Iowa ratio of 1,360:1, 2015 ratio was 2,172:1). The percent of patient who gave their hospital a rating of 9 or 10 (scale 0 lowest to 10 highest) was 79% on CMS Hospital Compare report. This is higher than the Iowa average of 78% and improvements (increased 13%) from 2015 report of 66%. Preventable Hospital stays were below the Iowa number, 42 and 49 respectively.
- **Insured:** The uninsured adult population rate in Davis County is 12%, slightly higher than the Iowa rate of 7%, however less than then 2015 report by 5.9%. The uninsured rate for children is 9%, higher than the Iowa rate of 4%.
- **Access:** Access to exercise opportunities is 49% (1% improvement from 2015 and well below the Iowa rate of 83%) and food insecurity is at 13% (Iowa rate is 12%). Mammography screenings is at 60% (Iowa rate is 69%), and in 2017 - 75% of children at 2 years of age are up-to-date on complete series of vaccinations, compared to 69% in 2016 and 59% in 2015 (source: Iowa Department of Public Health).

- **Health Conditions:**
 - The “Frequent Mental Distress” rate for Davis County is 12%, with an Iowa rate of 10%. According to the CDC, 7.6% of Americans over the age of 12, had depression and living at or below the poverty level people were 2.5 times more likely to have depression (source: <https://www.cdc.gov/nchs/data/databriefs/db172.htm>).
 - Diabetes prevalence is at a rate of 10% (equal to Iowa’s rate). Diabetes monitoring is 85% compared to the Iowa rate of 90%.
 - All Cardiovascular Disease rate were 78.9 hospitalizations per 1000 Medicare Beneficiaries (Iowa best county is 47.7 in the 2015 data). (source: <https://nccd.cdc.gov/DHDSPAtlas/reports.aspx?geographyType=county&state=IA&countyID=ab#report>)
 - Adult Obesity rates are at the Iowa rate of 32%, which is 1% higher than the 2015 rates.
 - Adult smoking is 18%, one percent above the Iowa rate, and a decrease of 5% since the 2015 report.
 - Physical inactivity rate is 26%, a decrease of 2% since 2015, however 1% higher than Iowa’s rate. The Access to exercise opportunities is very low at 49%, versus the Iowa rate of 83%.
 - The percent of alcohol impaired driving deaths in Davis County is 14%, almost half of the Iowa percentage of 27%. Excessive drinking percentages were also below the Iowa rate, at 19% and 22% respectively.

METHODOLOGY

Scope and Purpose

The Federal Patient Protection and Affordable Care Act requires that each registered 501(c)3 hospital conduct a Community Health Needs Assessment (CHNA) at least one every three years, share the assessment results with the community, and adopt a strategy to meet the health needs of the community.

The IRS Notice 2011-52 can be found at the following link and were followed for the purposes of this process, assessment, and report. <https://www.irs.gov/charities-non-profits/community-health-needs-assessment-for-charitable-hospital-organizations-section-501r3>

Assessing Community Health Needs

To assess the needs of the community the hospital must identify the significant health needs, prioritize those health needs, and identify resources potentially available to address them. Health needs of a community include improvement or maintenance of health status across the community, parts, neighborhoods or population with health disparities. These needs can include financial, access, illness prevention, nutrition or social, behavioral, environmental factors that influence health. Resources can include organization, facilities, and programs within the community.

Process to Complete a CHNA

The recommended requirements for the CHNA include the method of discovery, quality community needs, quantify needs, and complete data analysis and comprehensive needs assessment. Federal regulations state that the following process must be completed in order to complete a Community Health Needs Assessment (CHNA).

Community Health Needs Assessment

1. Define the community it serves (discovery)
2. Assess the health needs of that community (qualify community needs)
3. Solicit and take into account input from persons who represent board interest of the community, including those with special knowledge or expertise in public health (quantify needs)
4. Document the CHNA written report that is adopted for or by the hospital facility (complete analysis and comprehensive needs assessment)
5. Make the CHNA report widely available to the public.

Steps to Complete the CHNA

The following is the process steps with milestones was completed during the community health needs assessment development. This process and milestones follow closely with the recommendations from the American Hospital Association and are a detailed list of actions taken in the above process per the IRS requirements (Source: http://www.healthycommunities.org/Education/toolkit/index.shtml#.XC_37lxKg2x).

Steps in Process for CHNA including Timelines / Milestones

1. **Agreement and contracting** – discuss critical success factors for CHNA process (completed 7/18/18)
2. **Meeting with community leadership** – planning, methodology, and agreement of scope and services (Completed 7/20/18)
3. **Identify and engagement of key stakeholders** – define the community and methodology (7/20/18 to 8/9/18)
4. **Create and process evaluation (survey/ assessment) methods** – work with organization to develop survey that reflects the community, needs, and priorities (7/20/18 to 8/7/18)
5. **Collect and analyze the data** – including community health issues of past and future (8/7/18 to 10/30/18)
6. **Document and communicate priorities** – work with organization to define the priorities and engagement of key stakeholders including a Town Hall meeting(s) (11/1/18 to 11/28/18)
7. **Plan improvement strategies** – work with organization for final report and distribution as needed (12/1/18 to 1/31/19)
8. **Organization to implement improvement plans** – work with key stakeholders in community for best practice implementation and success (2/1/19)
9. **Evaluate progress on the key priorities and strategic alignment** – reevaluate progress and continual planning for future needs (FY2019 to FY2021)

Model for Needs Assessment Process and Steps

CLOSELY ALIGNED TO ABOVE STAGES OF THE PROCESS



Reference: Association for Community Health Improvement – American Hospital Association

Community Served / Profile Description

Davis County, Iowa, Community Profile



It was determined by the leadership of the Davis County, Iowa Community Health Needs Assessment, that those individuals that live or receive health services in Davis County, Iowa would be the overall (total) population for this process. A statistically significant sample size was achieved during the survey phase of the process and did represent both demographic, social/economic, religious, and age differences. Efforts were made to ensure that there was a broad interest represented in each of the data collection and prioritization phases.

Community Health Needs Assessment

The population of Davis County, Iowa is 8,860 residents as of 2018, an increase of 1% since 2014. The county is considered 100% rural, covering approximately 502 square miles. The population density is approximately 17.4 people per square mile (Iowa is 54.5 residents per square mile). (Source: <https://www.census.gov/quickfacts/fact/table/daviscountyiowa/HSG010217>)

The county population consists of 17.3% at or over the ages of 65 years, a decrease of 0.2% since 2014 and the state average is 16.4%. In the under 18 age group, Davis County has a population of 28.8%, a decrease of 0.1% since 2014 and state average is 23.3%.

The communities within Davis County are Bloomfield, Drakesville, Floris, Pulaski and un-incorporated West Grove. Major highways include U.S. Highway 63, Iowa Highway 2 and Iowa Highway 202 (source: https://en.wikipedia.org/wiki/Davis_County,_Iowa). Major types of employment in Davis County are healthcare and social assistance (19%), educational services (14%), retail trade (13%), manufacturing (5%), other services – except public administration (4%), financial and insurance (3%), and accommodations/food service (3%) (source: http://www.city-data.com/county/Davis_County-IA.html).

Detailed Demographics – Davis County, Iowa

Detailed Demographics		Source: http://www.city-data.com/city/Bloomfield-iowa.html																			
Davis County, Iowa																					
ZIP	Name	County	Pop 2014	Pop 2016	Change	Household	HH Ave Siz	Income Per	HH Ave In	HH \$50K+	Pop-65+	Pop<18yo	Med Age	Females	Males	White	Black	Amer Ind	Hisp		
52537	Bloomfield	Davis	7149	7289	1.9%	3479	2.7	\$24,161	\$43,574	472	1260	2099	36.8	1495	1195	7077	14	5	10		
52552	Drakesville	Davis	913	852	-6.7%	457	2.8	\$25,149	\$51,098	-	147	245	35.4	396	454	808	-	-	4		
52560	Floris	Davis	423	541	27.9%	241	2.6	\$21,281	\$48,316	-	93	155	41.7	290	251	426	-	-	1		
52584	Pulaski	Davis	444	490	10.4%	286	2.4	\$28,544	\$54,298	-	84	141	26.7	214	275	436	-	-	2		
	Iowa						2.4		\$56,247				38								

Collaborating CHNA Parties

Collaborating with several different agencies in, around, and those that serve Davis County, Iowa, the CHNA was completed. The following is a summary of key stakeholders in the CHNA process. A detailed list of individuals or organizations who have played at least one key role in the assessment are listed in Community Health Partners and Resources section of this report.

Davis County Hospital Profile

Address: 509 North Madison Street, Bloomfield, Iowa 52537

CEO: Veronica Fuhs, MHA

Mission: Davis County Hospital is committed to working together to deliver high quality, patient centered care with integrity and trust.

Vision: Our Vision will be realized when:

- Patients, family, and friends have exceptional experiences at Davis County Hospital;
- Highly qualified, engaged employees look forward to coming to work every day;
- Medical Providers voice their pride in being members of the Davis County Hospital Medical Staff;
- Our community views Davis County Hospital as an indispensable resource

About: Davis County Hospital is a 25-bed, critical access hospital located in Bloomfield, Iowa, committed to working together to deliver high-quality, patient-centered care with integrity and trust in Davis county. The knowledgeable DCH providers and team members, work alongside patients to help build better, healthier lives in the areas of primary and emergency care, ancillary services, acute care, as well as specialty services. DCH strives every day to be recognized for exceptional customer service, commitment to safety, and the incomparable care they give to each of their patients. For more information about Davis County Hospital, please visit (source:) www.DavisCountyHospital.org or <https://www.daviscountyhospital.org/about-us/>

History of Davis County Hospital: History about Davis County Hospital can be found at <https://www.daviscountyhospital.org/about-us/>

Network Affiliation: Davis County Hospital is in a management affiliation with Mercy Health Network. To find out more details about the Mercy Health Network affiliation please go to <https://www.daviscountyhospital.org/about-us/our-vision/>

Services: Davis County Hospital offers a variety of inpatient (acute/skilled) and outpatient services to the county and surrounding areas. A comprehensive list of services can be found at <https://www.daviscountyhospital.org/about-us/>. The following is a list of services provided, but not limited to at Davis County Hospital:

- Allergy and Immunology
- Allergy and Pulmonary
- Asthma
- Cardiac Rehabilitation
- Dermatology
- Ear, Nose and Throat
- Emergency Department
- Emergency Medical Services (Ambulance)
- Family Medicine
- General Surgery
- Hospice and Palliative Medicine
- Internal Medicine
- Inpatient services/Skilled Care/Swing-bed
- Laboratory
- Medical Imaging (Radiology)
- Neuromusculoskeletal Medicine
- Obstetrics & Gynecology/Pre-& Post Natal
- Orthopedics
- Pediatrics/Well-Child Clinic
- Physical and Speech Therapy
- Podiatry
- Public Health
- Pulmonology/ Pulmonary Rehab
- Respiratory
- Rheumatology
- Senior Life Solutions
- Sleep Testing
- Women's Health

Davis County Public Health (Health Department) Profile

Address: 509 North Madison Street, Bloomfield, Iowa 52537

Director: Lynn Fellingner, RN

Services: Davis County Public Health is a partnering organization with Davis County Hospital. More information can be found at: <https://www.daviscountyhospital.org/services/public-health/> . Services cover the entire county and are listed below, but not limited to the following:

- Blood Pressure clinics
- Blood draws & specimen collection
- Dressing Changes
- Drug Regimen Review

Community Health Needs Assessment

- Fall risk assessment
- Home care aid service and Homemaker services
- Immunization Clinics and Child Immunization
- Injections
- Medication Management
- Newborn baby visits
- Pain Management
- Patient Education
- Referral to community services
- Skilled Nursing visit by RN
- Skin assessment

Pavelka's Point Consulting, LLC – External Consulting Services

Address: 5832 West Mt Vernon Road, Cedar Falls, Iowa 50613

CEO: Sarah Pavelka, PhD, MHA, ORT/L, CPHQ, FNAHQ

Bibliography: Sarah Pavelka, PhD, MHA, OTR/L, CPHQ, FNAHQ has over 20 years of experience leading and coaching in organizational performance and continuous improvement in business, industry, education, and healthcare. Sarah, is the CEO/owner of Pavelka's Point Consulting, LLC; an Improvement Faculty for the Iowa Healthcare Collaborative; and an adjunct faculty member for the Healthcare Administration program at Upper Iowa University.

Dr. Pavelka has professional and academic experiences are as a 13-year faculty member for the Masters in Healthcare Administration program at Des Moines University. Her previous professional experiences include the Quality Management Director at the Iowa Foundation for Medical Care, Director of Business and Industry Relations for Pella Regional Health Center, and clinical experience as the Director of the Occupational Therapy department for Pella Regional Health Center in Pella, Iowa.

Dr. Pavelka's extensive volunteer experiences included being a six-time National Baldrige examiner, as well as, a seven-year state examiner for the Iowa Recognition for Performance Excellence. She was also the Director-at-Large for the National Association for Healthcare Quality Board from 2014 to 2016. Sarah was also the Past-president of the Iowa Association for Healthcare Quality Board; a task force member for the Iowa Hospital Association; and a member of the Des Moines University Alumni Board.

Sarah holds degrees in Biology and Psychology from Luther College; an Occupational Therapy degree from Concordia University-Wisconsin; MHA from Des Moines University, and a Ph.D. from Walden University. She is a Fellow for the National Association for Healthcare Quality (FNAHQ); a Certified Professional in Healthcare Quality (CPHQ); and has credentials in Occupational Therapy, Ergonomics, Lean, and Six Sigma Black Belt.

Community Health Needs Assessment Process

The following sections represent the process of the Community Health Needs Assessment completed with Davis County Community Leadership and Key Stakeholders. These process steps include creating purpose, defining scope and community, engagement of key leadership, survey assessment, analysis, prioritization, reporting of outcomes, and action planning.

The IRS requirements for a CHNA are a four-phase the process was represented earlier in the document (see Methodology – Scope and Purpose), and further explored in the following sections.

Agreement/Contracting/Community Leadership (CHNA Steps 1 – 3)

On, July 18, 2018 leadership from Davis County Hospital, Davis County Public Health, Community Coalition, and Pavelka's Point Consulting, LLC met and discussed contracting arrangements, critical success factors, CHNA process, timelines, and who would be key stake holders. Shortly following this initial contracting meeting, these parties met on July 20, 2018 for planning for the IRS compliant CHNA, further methodology, distribution, survey needs, agreement and scope of services. Key leadership and stakeholders were also discussed and a list of involvement was compiled in meeting minutes. It was elected at these meetings to move forward with the CHNA process and initial survey distribution would happen at the August 7, 2018 "Back to School Night" and survey conclusion on or about October 20, 2018.

Create the assessment, survey, and evaluation process (CHNA Steps 4)

Starting on July 20, 2018, a community health needs assessment survey was designed and created. The leadership from Davis County Hospital and Public Health were allowed to review the survey as it was developed. The survey questions included similar or prior questions to the 2012 and 2015 survey for comparison purposes (updates to language and current patient centered care standards were completed in questions as needed). New questions also address the actions or priorities from 2015 to 2018 completed in the communities but Davis County Hospital and Public Health, along with the partnering community entities. Questions related to Social Determinates of Health were also added as recommended by best practice. More information can be provided on Social Determinates of Health at Healthy People 2020 <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health> or Health Leads (source of survey questions) at <https://healthleadsusa.org/>.

Collect the Data (CHNA Steps 5)

Collection of survey data comprised of many forms and methods. Survey links, fliers, and paper copies were sent to local businesses and employers. Surveys were randomly sent direct mail to over 100 residents of the communities and either electronic or paper (hard) copies were allowed to be submitted. Leadership for the process also attended several community events, school events, and religious gatherings to encourage participation in the survey process. Electronic links were sent multiple times in the local newspapers, provided through the Hospital website, and patients were encouraged to complete the survey before or after healthcare services. During the process, the leadership provided translation services (i.e. vision or language), electronic and paper copies, and a brief description of purpose to those who were taking the survey. No material or monetary incentives were provided when taking the survey.

COMMUNITY PRESS RELEASE

The following was a press release that was sent to the local newspaper entities and distributed for the general awareness of the survey being conducted.



PRESS RELEASE

August 15, 2018

Devyn Pitlick
Marketing & Public Relations Coordinator
dpitlick@daviscountyhospital.org
Ph: 641-664-2145

**Davis County Hospital & Davis County Public Health Conducting
Community Health Needs Assessment**

Bloomfield, IA – Davis County Hospital and Davis County Public Health are working together to update the 2016 Community Health Needs Assessment (CHNA).

Completing a Community Health Needs Assessment (CHNA) is a federal requirement for non-profit hospitals, and must be completed at least every three years with input from the broader community, including public health. Data from this CHNA survey will help health care providers and community organizations improve the overall health and wellness of our community, and identify community needs, establish priorities for programs and services, and inform strategies to address gaps between critical needs and services.

All Davis County, Iowa residents and business leaders are encouraged to participate. Included in the 2018 CHNA surveys are questions dealing with community health regarding service delivery, fitness, nutrition, and access to care. All survey responses are anonymous and completing the survey takes less than 10 minutes.

If you would like to participate in the survey, please go to <https://goo.gl/pslign>. You may also fill out the survey in paper form by contacting Davis County Hospital at 641-664-7093. All surveys must be received by October 15, 2018.

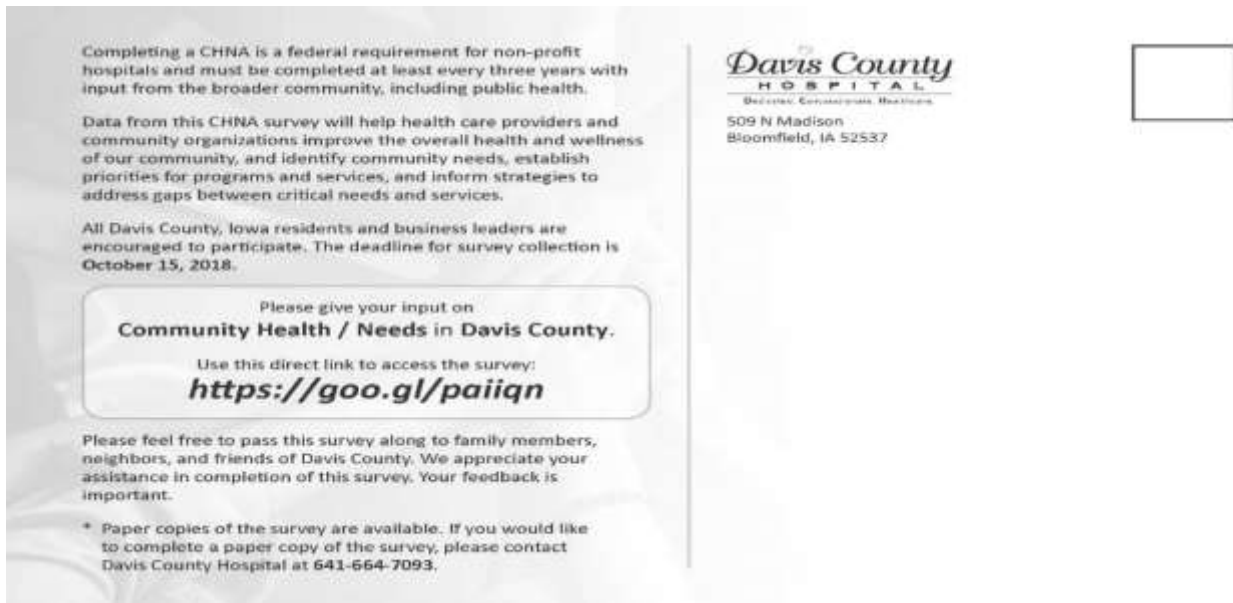
Thank you in advance for your help in completing this confidential, important survey.

If you have any questions about the survey or survey process, please call Devyn Pitlick at Davis County Hospital, 641-664-2145.

###

DIRECT MAILING POSTCARD

The following as a direct mailing postcard to a random sample of 100 residents within the county. This was also distributed in local grocery stores, places of worship, restaurants, community events, school events, and local gathering establishments.



Analyze the Data (CHNA Steps 5 continued)

During and following the community survey process, data from external sources (secondary data) were being collected and analyzed. This included data from sources such as Robert Wood Johnson County Health Rankings, City Data, Iowa Hospital Association (IPOP data), Vital Statistics, etc. Survey data was considered primary data research and collected public health needs, perceptions, satisfaction with care and services for both public, private, and governmental agencies serving the Davis County area. This data can be found in the following charts in Data Details section with both the Iowa Hospital Association data (secondary), CHNA Survey Data (detailed primary) and Town Hall meeting outcomes (primary).

Both the external, secondary data, and the initial analysis of the survey outcomes (primary data) was analyzed and presenting in the November 2018 town Hall meetings. Top initial results were presented for the key stakeholders to continue to analyze, prioritize, and support with realistic objectives for Davis County.

Town Hall Research Process (Engage & Prioritize with Key Stakeholders)

Document and Define Priorities (CHNA Steps 6)

Community leadership should always be involved with the determination and prioritization of key actions within a community. Members will not only buy-in to the mission of the actions at a higher support level, they will often provide key resources that are needed for such action; which are vital to the actions success and often cannot happen with only hospital supporting resources. Town halls are a focus group type setting were community members can provide insight, consensus, and assist with prioritization of health issues. These sessions gathered input from key stakeholders, start priorities, and encourage on-going dialog between entities.

Entities invited to the two Town Hall meetings include local hospital, public health, mental health providers, service providers, employers, local residents, faith-based leadership, school leadership, business leaders, local government officials, and those that receive care (including persons with chronic conditions, un-insured, low-income, and minority groups).

Key community stakeholder groups were invited to two November 2018 Town Hall meetings. These Town Hall meetings were held on November 27, 2018 from 6:00pm to 8:00 pm and November 28, 2018 from 11:00 am to 1:30 pm (including 30-minute lunch). At these Town Hall meetings, a short informational presentation was given, facilitation of priorities from the survey and health ranking information was completed, and key findings were determined out of two 120-minute meetings.

TOWN HALL GENERAL PUBLIC INVITE

Public notice sent to local newspaper, hospital websites, and local posting for attendance at the Town Hall meetings. All community members were invited to attend and free lunch was provided.

**Community Health Needs Assessment
Community Town Hall Meeting**

Public Announcement Notice

Davis County Hospital &
Davis County Public Health
will be sponsoring Town Hall meetings at
Southern Iowa Electric Cooperative on:

November 27th	&	November 28th
@ 6:00pm		@ 11:00am
(dinner @ 5:30pm)		(lunch @ 12:00pm)

**Community members are invited to attend one of
the meetings; the same information will be presented at both.
A meal will be provided for attendees.**

Please join us for this opportunity to share your opinions and
suggestions to improve health care delivery in Davis County.

**Please RSVP to Lisa Barrett @ 641-664-7274 by
November 21st.**

TOWN HALL LETTER / INVITE

Community letter for invite to the Town Hall meeting.



Dear Community Leader,

In November, we will be hosting two town hall meetings at the Southern Iowa Electric Cooperative Touchstone Center, that will focus on the health and well-being of Davis County residents. As a leader who shares my conviction that we need to create solutions that make it easier for people to be healthy in their own communities, I would like to invite you to attend this important event.

The focus of this event will be the recent release of the 2018 *Community Health Needs Assessment*—a collaboration between the Davis County Hospital, Davis County Community Coalition, and Davis County Public Health—that measure the health of our county, the perceptions of health services, and the resident’s thoughts on different factors that influence health. After reviewing this year’s report, you will be helping us make important decisions that will determine the direction and services provided for our community moving forward.

As you know, prevention is the most cost-effective and common-sense way to keep people healthy — too often, however, our health care system focuses more on treating preventable disease, illness, and injury after they happen. It is my hope that this town hall provides our residents with the beginning of a roadmap to building a healthier community—I hope you will join me as a partner in this effort.

We have two town hall meetings scheduled for your convenience; meals will be provided at both. Please choose the date/time that works best for your schedule:

Tuesday, November 27th	OR	Wednesday, November 28th
6:00pm (dinner @ 5:30pm)		11:00am (lunch @ 12pm)
@ SIEC		@ SIEC

If you’re able to attend one of the town hall meetings, please RSVP to Lisa Barrett by email at lbarrett@daviscountyhospital.org, by calling 641-664-2145. Please RSVP by November 21st, 2018.

Your attendance is important. We look forward to seeing you on November 27th or 28th.

Sincerely,

Sarah Pavelka, PhD, OTR/L, CPHQ, FNAHQ Pavelka’s Point Consulting, LLC	&	Sue Pankey, CNQ Davis County Hospital
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Community Health Needs Assessment is a collaboration between the Davis County Hospital, Davis County Community Coalition and the Davis County Public Health Department.

TOWN HALL AGENDA

The following Agenda and Power Point were completed at these two Town Hall meetings. At the end of the meetings, it was determined to have an initial list of community priorities from the analysis of primary and secondary research data. These initial priorities list will be further discussed with a steering committee of community leadership and represent community-based organizations which can address the health concerns. This group, considering the priority and input from these Town Hall meetings will strategies and formulate final action plans for Davis County health needs.

Community Health Needs Assessment

DAVIS COUNTY, IOWA

Town Hall Discussion

DATE/TIME: November 27, 2018 (6:00 to 8:00 pm) or November 28, 2018 (11:00 am to 1:30 pm)

LOCATION: Southern Iowa Electric, 22458 Hwy IA-2, Bloomfield, IA 52537

HOSTS: Davis County Hospital and Clinics, Davis County Public Health, & Davis County Community Coalition

Agenda

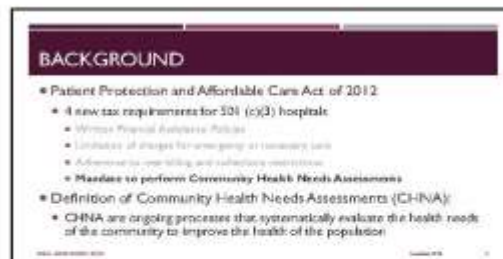
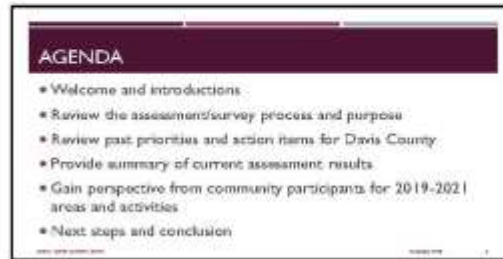
1. Welcome and Introductions – light meal provided
2. Review the assessment/survey process and purpose
3. Review past priorities and action items for Davis County
4. Provide summary of current assessment results
5. Gain perspective from community participants for 2019-2021 areas and activities
6. Next steps and conclusion

TOWN HALL POWER POINT PRESENTATION

The following power point presentation (please see image below for complete slide deck) was presented to key community stakeholder groups at the November 2018 Town Hall meetings.

Davis County Community Health Needs Assessment

11/25/2018



FEDERAL REQUIREMENTS

- Five Steps Outlined by IRS in order to complete a CHNA
 - Define the Community
 - Assess Community Health Needs
 - Include Input Representing Broad Interests of the Community
 - Document the CHNA
 - Make Reports available to Public



PAST PRIORITIES AND ACTION ITEMS

PRIORITIES – 2015 TO 2018

- Increasing the availability of mental health services (providers, options, and management options)
- Expanding senior care options
- Improving the coordination between providers and other agencies in the communities
- Providing access to specialty services
- Improving teen health (drinking, abuse, pregnancy, etc.)
- Expanding health care transportation
- Expanding rural health care delivery and access

IMPROVEMENTS – 2015 TO 2018

Priority Area	Not a Problem	Somewhat of a Problem	Still a Problem
Mental Health Services	6%	23%	40%
Senior Care Options	16%	41%	24%
Coordination between providers and agencies	19%	42%	17%
Access to specialty services	22%	41%	19%
Teen health	7%	37%	33%
Transportation	10%	39%	30%
Rural health care delivery & access	13%	42%	21%

CURRENT ASSESSMENT RESULTS

IMPROVEMENTS

- Hospital services (ER, Ambulance, Hospice, Outpatient Services)
 - Hospital Days (preventable)
- Access in Family Practice (Rural health delivery & access)
 - Uninsured access
- Access to Specialty Services
- Senior Care services
- Coordination between providers and agencies
- Transportation for health services

STATE HEALTH RANKINGS - 2018

Category	Davis County	State	Score	Rank	Score	Rank
Health Outcomes	49	49	49	49	49	49
Length of Life	13	13	13	13	13	13
Preventable	4,400	4,400	4,400	4,400	4,400	4,400
Quality of Life	89	89	89	89	89	89
Physical Health	305	305	305	305	305	305
Preventable Health Care	33	33	33	33	33	33
Preventable Health Care	34	34	34	34	34	34
Life Expectancy	65	65	65	65	65	65

Source: County Health Rankings (www.healthrankings.org)

STATE HEALTH RANKINGS - 2018 (CONT.)

Category	Davis County	State	Score	Rank	Score	Rank
Health Behaviors	87	87	87	87	87	87
Adult Smoking	10%	10%	10%	10%	10%	10%
Adult Obesity	70%	70%	70%	70%	70%	70%
Preventable Health Care	19	19	19	19	19	19
Physical Activity	30%	30%	30%	30%	30%	30%
Access to Health Insurance	80%	80%	80%	80%	80%	80%
Insurance Coverage	100%	100%	100%	100%	100%	100%
Preventable Health Care	10%	10%	10%	10%	10%	10%
Preventable Health Care	10%	10%	10%	10%	10%	10%
Health Insurance Coverage	100%	100%	100%	100%	100%	100%

Source: County Health Rankings (www.healthrankings.org)

STATE HEALTH RANKINGS - 2018 (CONT.)

Category	Davis County	State	Score	Rank	Score	Rank
Clinical Care	97	97	97	97	97	97
Uninsured	10%	10%	10%	10%	10%	10%
Preventable Health Care	2,991	2,991	2,991	2,991	2,991	2,991
Quality	4,401	4,401	4,401	4,401	4,401	4,401
Health Insurance Coverage	80%	80%	80%	80%	80%	80%
Preventable Health Care	41	41	41	41	41	41
Uninsured	10%	10%	10%	10%	10%	10%
Preventable Health Care	10%	10%	10%	10%	10%	10%

Source: County Health Rankings (www.healthrankings.org)

PERCEPTIONS OF HEALTH - 2018

Needs Attention (Programs) in the Community	Percentage Selected
Mental Health	53.9%
Obesity	54.2%
Tooth Health	49.6%
Aging (Dementia)	48.3%
Alcohol/Drugs	44.8%
Alcohol Use	43.2%
Chronic Disease	41.1%
Nutrition	35.5%
Behavioral Health	34.3%
Underinsured	24.1%
Other: Tobacco & Pan (33.3%), Poverty (33.3%), Suicide (33.3%)	33.3%

PERCEPTIONS OF HEALTH - 2018 (CONT.)

Areas - Needs Improvements	Percentage Selected
Mental Health	53.9%
Cancer	45.0%
After hours pharmacy	43.4%
Urgent Care	34.7%
Dementia	33.5%
Chronic Disease	33.3%
Elder Assistance	32%
Public Awareness of Services	32%
Dental Services	29%
Public Transportation	29%
Other: Family Assistance (24.4%), Nutrition/Healthy Eating (22.7%)	22.7%

SOCIAL DETERMINATES OF HEALTH - 2018

- Food shortage (no=98%)
- Utility shut off (billing) (no=97%)
- Loss of housing (within 2 months) (no=98%)
- Child care access (prevents working or school) (no=93%)
- Need healthcare, but avoid because of cost (no=90%)
- Lack of transportation (to key appointments/work) (no=97%)
- Reading ability (health materials or other) (no=96%)
- Safety at home (no=97%)
- Would appreciate assistance (no=95%)

2019-2021 AREAS AND ACTIVITIES

PRIORITIES AND ACTIONS

- Review current results and questions
- Define the current strengths for Davis County
 - What does it take to sustain these strengths?
- Determine top priorities and improvement areas
 - What needs to be improved or changed?
- Suggestions for actions

OBJECTIVES AND STRATEGIES

- Population Health
- Internal Hospital and Public Health
- Community and Capacity Building
- Community Orientated Education, Wellness, and Support

NEXT STEPS AND CONCLUSION



SARAH PAVELKA, PhD, MHA, OTR/L, CPHQ, FNAHQ
PAVELKA'S POINT CONSULTING, LLC
641-780-0810
PAVELKASPT@GMAIL.COM

TOWN HALL ATTENDING KEY STAKEHOLDERS (ENGAGEMENT AND PRIORITIZATION)

The following is a list of community members (identified key stakeholders and interested community members) that were able to participate in the Town Hall meetings. In all there were 30 attendees at the November 27, 2018 meeting and 35 unique attendees at the November 28, 2018 meeting.

Davis County CHNA Town Hall Meeting - November 27, 2018

<u>Name</u>	<u>Organization</u>	<u>Email</u>
Lisa Barrett	DCH	lbarrett@daviscountyhospital.org
Travis Underwood	Optimae	tunderwood@optimatelifeservices.com
Lynn Fellingner	DC Public Health	lfellingner@daviscountyhospital.org
Kendra Warning	DCH	kwarning@daviscountyhospital.org
Jackie Wells	Kincart PT	jwells@daviscountyhospital.org
Karen Kincart	Kincart PT	kkincart@daviscountyhospital.org
Mylo Wells	Wells Hometown Drug	mylowells@gmail.com
Ron Bride	DC Supervisor	ronpartsguy@netins.net
Devyn Pitlick	DCH	dpitlick@daviscountyhospital.org
Tiffany DePenning	DCH PFAC	liltiff06@gmail.com
Barb Cole	DC Fair	rodeo@netins.net
Martha Comfort	Crisis Intervention Services	marthac@stopdvsa.org
Earl Howard	City of Bloomfield	ejhowie@netins.net
Susie Warner	Susan Warner, DPM	Susancwarner@netins.net
Tom Prosapio	DCH Board	tommypro44@gmail.com
Lexis Frymoyer	DCH PFAC	lexislynch08@gmail.com
Rod Day	DCH	rday@daviscountyhospital.org
Sue Pankey	DCH	spankey@daviscountyhospital.org
Veronica Fuhs	DCH CEO	vfuhs@daviscountyhospital.org
Sarah Pavelka	Pavelka's Consulting	pavelkaspt@gmail.com
Dr. Robert Floyd	DCH	rfloyd@daviscountyhospital.org
Mari Melvin	NEST	marimel@iastate.edu
Anne Morgan	Icare	amorgan@netins.net
Lori Dixon	DC Schools	lori.dixon@dcmustangs.com
Gloria Garner	Mulberry Place	
Amy Fellingner	DCH PFAC	
Wendy Barker	DCH	wbarker@daviscountyhospital.org
Beverly Oliver, ARNP	DCH	boliver@daviscountyhospital.org
Eric Bates	DCH	ebates@daviscountyhospital.org
Pam Frazier	DCH	pfrazier@daviscountyhospital.org

Davis County CHNA Town Hall Meeting - November 28, 2018

<u>Name</u>	<u>Organization</u>	<u>Email</u>
Lisa Barrett	DCH	lbarrett@daviscountyhospital.org
Lynn Fellingner	DC Public Health	lfellingner@daviscountyhospital.org
Devyn Pitlick	DCH	dpitlick@daviscountyhospital.org

Sue Pankey	DCH	spankey@daviscountyhospital.org
Sarah Pavelka	Pavelka's Consulting	pavelkaspt@gmail.com
Eric Bates	DCH	ebates@daviscountyhospital.org
Cheryll Jones	CHSC	cheryll-jones@uiowa.edu
Christina Schark	SIMHC	cschark@simhsottumwa.org
Rochelle Phelps	Optimae	rphelps@optimatelifeservices.com
Jennifer Vitko	South Central Behavioral Health	jvitko@wapelloco.ia
Staci Veach	South Central Behavioral Health	veachs@daviscountyiowa.org
Traci Wiegand	Wigwam Daycare	wieganddaycare@yahoo.com
John Schroeder	DCDC	john@daviscounty.org
Brad McCloskey	DC Schools	
Kurt Tisdale		kurttisdale@gmail.com
Amy Tisdale		katisdale@comcast.net
Alan Yahnke	Dc Supervisor	Yahnkea@daviscountyiowa.org
Brian Burnham	Keith's Foods	Brian@keithsfoods.com
Missy Carson-Roark	DC Schools	missy.carsonroark@dcmustangs.com
Jennifer Donels	DC Schools	jennifer.donels@dcmustangs.com
Dan Maeder	DC Schools	dan.maeder@dcmustangs.com
Tierre Chickering	DCH	tchickering@daviscountyhospital.org
Karen Lauer	DC Daycare Preschool	dccdaycare@netins.net
Jo Altheide	SIEC / DCH Board	joalt@netins.net
Nancy Newman	BCC	nnewman@abcm.com
Dr. Christian Sanchez	DCH	csanchez@daviscountyhospital.org
Karen Spurgeon	Bloomfield Democrat	
Jamie Beskow	LCHD - 1st Five	jbeskow@leecountyhd.org
Becky Zesiger	DC Schools	becky.zesiger@dcmustangs.com
Kristy Miller	DC Schools	kristy.miller@dcmustangs.com
Tim Frasher	Methodist Church	pastorfrasher@gmail.com
Carleena Brown	DCH	
Amy Marlow	DCH	amarlow@daviscountyhospital.org
Cheyenne Neagle	DCH	cneagle@daviscountyhospital.org
John Harrington MD	DCH	jharrington@daviscountyhospital.org
Rachael Patterson - Rahn	LCHD	rprahn@leecountyhd.org
Ruth Teubel	DC Daycare Preschool	
Denyse Gipple	DCH	
Ashley Walkup	Lynch Law/Davis County Attorney	lynchlaw_ashley@netins.net
Pam Conder	Bloomfield Care Center	pconder@abcmcorp.com
Cassie Northup	DCH	cnorthup@daviscountyhospital.org

Town Hall Outcomes

The following were the outcomes from both November 2018 Town Hall meetings. These outcomes can be further explored in the Detailed Data/ Town Hall Meeting Outcomes. The outcomes were formulated from both primary data (survey) and secondary data (including County Health Rankings). The outcomes were compiled from large and small group round-robin brainstorming sections and then outlined into affinity groups. The following four affinity groups were seen in both meeting sessions.

Population Health	
1. Obesity / Diabetes	2. Chronic Disease (other)
3. Teen health	4. Drug/alcohol/Substance abuse
5. Mental health access available	6. Public awareness of services
7. Child care	8. Aging & elder assistance
9. Working with Amish to higher education	
Internal Hospital/Public Health	
1. Urgent care services	2. After hours pharmacy access
3. Insurance and payments for healthcare	4. Teen Health (screening and mental health)
5. Providers and services (specialty and communications – language/tele-health)	6. Patient portal access and use (communication of record)
7. Preventative health	8. Marketing of services provided (awareness)
Community & Capacity Needs	
1. Community Coalition – resources and funding	2. Teen health (services)
3. Awareness of services	4. Wellness options
Community Oriented Education Wellness & Support	
1. Education for preventative health	2. Community wellness
3. Support and awareness of services	4. Training for providers

Community Strategy Formulation and Action Planning

Planning for Improvement Strategies (CHNA Steps 7 & 8)

To complete the final steps of the process, Davis County community leadership held meetings starting December 1, 2018 to January 31, 2019. During this step of the Community Health Needs Assessment, Davis County community leadership gathered all primary and secondary data, completed a relevance and achievable check, and determined 17 SMART goals (tactics) for their improvement of the community's health. SMART goals are specific, measurable, achievable, relevant, and time-oriented action plans for improvements in the community.

This step also include distribution of the CHNA final report. Starting June 30, 2019 Davis County Hospital and Public Health department will be able to be distributed to the community. This report will be sent electronically to all participating and interested community partners for Davis County. The report will be provided, along with prior reports, on the Davis County Hospital website (<https://www.daviscountyhospital.org/>). Paper copies will be distributed to interested parties as requested to Davis County Hospital.

CHNA Implementation Plan Tactics - Davis County Hospital PSA						
Initial CHNA Health Needs Tactics, Year 3 of 3 - Starting 1/1/2019 to 12/31/2019						
CHNA Health Areas of Need	T	"Specific Actions" to Address Community Health Need or "Reasons Why Hospital Will Not" Address Need	Identified Need Lead	Identified Partners	Timeframe / Hours / \$\$	
1. Chronic Disease Management and Services – Obesity and Diabetes, Preventative Services and Education						
Obesity	1	Mutchler Center hours a issues, monthly resources on dieting, meeting with local restaurants and stores on health options, serving sizes, extension office programs, collaboration with dietician at local facilities, summer lunch program, increase length of trails, back pack buddies	Erin B, JoAnne, Cheyenne, Joni,	schools, grocery stores, Businesses, Mutchler Center	TBD	
Diabetes	2	Measures: Promote A1C monitoring / Screenings and Diabetes awareness Promote Diabetes prevention through diet, exercise and awareness as well as listed screenings.	Local Dietician and Providers as well as Health Coaches	Hospital and Public Health	TBD	
Preventive Services	3	Wellness programs and identify (HyVee) partners to share resources, connect with large employers in community, incentives to make life style changes, free activities at Drop In Center - yoga, and exercise activities, Bloomfield Recovery and Wellness Center, Develop Occupational Med services for local employers - screening flu shots, etc.	Community coalition members and DCHC	HyVee	TBD	
Education	4	Communicate programs, and insurance costs related, Extension office - growing own foods, grant funds available, Programming at Bloomfield Recovery/ and Wellness Center.	Community coalition members and DCHC	Recovery and Wellness Center	TBD	

2. Teen Health – Mental Health, Pregnancy, Sexually Transmitted Disease, and Substance Abuse					
Mental Health	1	Trauma Informed care (Schools and community) ACEs, Handle with Care in conjunction with law enforcement), Parenting education, No child eats alone (national program), Policy reviews, Awareness, Alternative partnerships (faith based), Collaboration with rational (SCBHR) on training and education on resources, therapy in schools through local partners, education on human trafficking	Lori Dixon, Becky Zegiger, Cheryll Jones,	Schools, businesses, faith community	TBD
Pregnancy/ STDs	2	Education (K-2, 3-5, 6-8, 9-12), Heartland Pregnancy Center (free services and parenting classes), Public Health Advocacy, PHP, IDPH		PHP, IDPH, Public Health, Schools, Heartland Pregnancy Center	
Substance Abuse	3	Speakers/ Trainers (community groups), SEIDA resources, Wellness Opportunities, Education (DARE lost this alternative?), Public Health/ River Hills		Public Health, River Hills, Schools	
3. Mental Health - Access, Marketing/ Awareness of services, Training for providers					
Access	1	Education on Crisis Stabilization center and Mobil Crisis and Drop in Center (Optimae), Seek out and apply for HRSA Grant, Possibility of therapist housed at DCH	Kayla Miller (SLS), Staci Veach (Davis Co CDS), Martha Comfort, Julie Robbins	SLS, Davis County CDS,	TBD
Marketing Awareness	2	Ads through TV scroll, the Bridge Church, Mutcher Center, DCH TV system, Facebook, Direct contact with front line staff. Regional patient and family advisory committee in each county, Suicide Awareness Walk (5K/ Education, LBGT Awareness/ Education	DCH Marketing community Coalition	Davis County Schools, Local New outlets	
Training Providers	3	HRSA Grant: that will offer trainings to PCP's on MH (April 24th), Specialty providers, Law enforcement staff, ACES education for school, hospital and clinics	Local providers of services	University of Iowa	
4. Awareness and Access to Services – Patient Portal Access, Mental Health, Underserved Population (Amish) and Specialty Services – Mental Health, Substance Abuse, Elder Assistance, Pharmacy (after hours), Urgent Care, Child Care & Wellness Services					
Awareness	1	Enhancing relationship with Amish community (also medical- high user groups)	CCC	Those close to Amish community, newspaper, Lord Cupboard, PFAC	Entire length of strategic Plan - TBD Next School year 2019-2020
Awareness	2	Monitor feedback on Rx after hours and see if there are still unmet needs (look at vending machines, etc.)	DCH Pharmacies	Wells Pharmacies	
Access	3	Public efforts by other partners throughout our facility and to public	Main street, Young professionals	CCC members, DCH Marketing	

Access	5	Case management at all levels of care (not just inpatient) (Follow-up care from discharge follow-up checks, EMS, health coach, follow-up process consistently, no calling on Optimea and Care Center	PH, Optima	Continue to build partners
Access	6	Before and after School Program -	Sieda, Mutchler Grant	IA extension (kids camps), FFA, 4H, boy-girl scouts
Access	7	SHIPP representative		

PRIOR ASSESSMENT ACTION PLANS

During the years of 2016 to 2018, Davis County Hospital, Public Health and Community Coalition along with key community partners worked on improving seven (7) strategic tactics for the improvement of the community’s health. For details of the 2016 to 2018 Community Health Needs Assessment tactical (action) planning, please see the detail in the Details Data section of the report.

Actions for improvements included but not limited to creation of a community resource guide (posted on the website), coordination of events and care models with community resources, recruitment of primary and specialty providers, and agreement with Senior Life Solutions (proving services for elder in the community).

There were improvements in five (5) of the seven (7) areas. The improvements did not move the issues to “not a problem”; however, did move the issues to “Somewhat of a Problem” in a majority of the participants taking the survey and during Town Hall prioritization (CHNA steps 5 and 6). In the chart below was provided to the participants at the Town Hall meeting (November 2018) and signifies that Mental Health Services and Teen Health still remain a concern for the survey participants. The four (4) other areas were significantly improved in their ratings.

IMPROVEMENTS – 2015 TO 2018

Priority Area	Not a Problem	Somewhat of a Problem	Still a Problem
Mental Health Services	6%	25%	48%
Senior Care Options	16%	41%	24%
Coordination between providers and agencies	19%	42%	17%
Access to specialty services	22%	41%	19%
Teen health	7%	37%	33%
Transportation	16%	39%	20%
Rural health care delivery & access	15%	42%	21%

Evaluation of Progress on Key Priorities and Strategic Alignment (CHNA Step 9)

Davis County Hospital and Public Health departments will continually monitor the action plans for changes and adjustments as key findings present within three years. This assessment and findings will be incorporated into future strategic planning efforts and include a systematic cycle of improvement. Improvements will be completed using performance excellence tools, including but not limited to the Plan, Do, Study, Act improvement cycle and will include as many community partners, agencies, and interested individuals as possible for best outcomes and sustainability.

COMMUNITY HEALTH STATUS

Primary Research Findings

In late fall of 2018, Davis County Hospital sponsored/conducted primary research (survey) to all area residents residing or receiving services in their primary service area (PSA), with 535 individual replies.

Community Health Needs: Survey Results 2018

REPLIES BY ZIP

Davis County CHNA 2018 (Round #3) Sample by PSA Zips					
#	Zips	County	Population	Returns (% of Total)	%
1	Bloomfield, IA - 52537	DAVIS	7289	401 (75%)	5.5%
2	Drakesville, IA- 52552	DAVIS	852	30 (5.6%)	3.5%
3	Pulaski, IA - 52584	DAVIS	490	19 (3.6%)	3.9%
4	Floris, IA- 52560	DAVIS	541	17 (3.2%)	3.1%
	ZIPs Inside Davis Co		8860	467 (87.3%)	6.1%
	ZIPs Outside Davis Co		NA	68 (12.7%)	NA
	Totals			535 (100%)	

OVERALL QUALITY OF SERVICES IN THE COMMUNITY

Community Healthcare Needs Assessment 2018				
In general, how would you rate the overall quality of the healthcare delivered to your community?	Davis Co 2018 N=535	Davis Co 2015 N=357	Davis Co 2013 N=280	Trend
Top 2 Boxes	74.8%	74.5%	65.1%	+0.3%
Very Good	28.6%	22.7%	18.2%	+5.9%
Good	46.2%	51.8%	46.9%	-5.6%
Fair	20.0%	22.1%	26.7%	-2.1%
Poor	4.3%	2.2%	7.0%	+2.1%
Very Poor	0.9%	1.1%	1.2%	-0.2%
Bottom 2 Boxes	5.2%	3.3%	8.2%	+1.9%
Totals	100.0%	100.0%	100.0%	

RATING OF HEALTH SERVICES

Community Healthcare Needs Assessment 2018	
	Poor / Very Poor %

How would you rate the following health services?	Davis Co 2018 N=535	Davis Co 2015 N=357	Davis Co 2013 N=280	Trend
Ambulance Service	0.9%	2.3%	3.2%	-1.4%
Child Care	5.6%	6.1%	12.0%	-0.5%
Chiropractor	5.6%	4.7%	7.0%	+0.9%
Dentists	15.5%	16.7%	14.0%	-1.7%
Emergency Room	6.0%	6.3%	10.0%	-0.3%
Eye Doctor / Optometrist	11.4%	14.3%	15.7%	-2.9%
Family Planning Services	14.8%	32.3%	31.1%	-17.5%
Home Health	7.5%	10.3%	14.2%	-2.8%
Hospice	3.0%	3.0%	5.9%	0%
Hospital Inpatient Services	5.8%	3.1%	7.0%	+2.7%
Mental Health Services	30.0%	61.1%	58.8%	-31.1%
Nursing Home	10.3%	13.3%	14.8%	-3.0%
Outpatient Services (lab, radiology, etc.)	3.6%	3.2%	4.6%	+0.4%
Pharmacy	3.6%	1.4%	3.7%	+2.2%
Primary Care Doctors	2.8%	3.9%	5.8%	-1.1%
Public Health Department	4.3%	6.5%	10.7%	-2.2%
School Nurse	3.2%	5.0%	11.3%	-1.8%
Specialist Physician care	8.0%	5.7%	15.3%	+2.3%
Teen Health (drinking, abuse, safety, pregnancy)	16.1%			

CAUSES OF DISEASE OR DISABILITY IN THE COMMUNITY

Community Healthcare Needs Assessment 2018				
In your opinion, how much of a problem are the following causes of diseases or disability in your community?	Major Problem %			
	Davis Co 2018 N=535	Davis Co 2015 N=357	Davis Co 2013 N=280	Trend
Cancer	43.9%	59.8%	68.1%	-15.9%
Diabetes	45.6%	59.9%	58.5%	-14.3%
Substance Abuse	43.0%	51.2%	46.1%	-8.2%
Heart Disease	29.7%	54.8%	50.5%	-25.1%
Sexually Transmitted Diseases	6.5%	9.4%	6.8%	-2.9%
Mental Disorders	35.7%	50.7%	31.9%	-15.0%

Obesity	47.3%	62.9%	62.0%	-15.6%
Pneumonia / Flu	9.9%	16.3%	22.1%	-6.4%
Respiratory Disease	12.3%	23.8%	24.7%	-11.5%
Stroke	10.8%	24.8%	23.8%	-14.0%
Suicide	11.6%	24.4%	22.7%	-12.8%
Trauma	10.1%	15.6%	10.5%	-5.5%

HEALTH NEEDS BY AGE

Community Healthcare Needs Assessment 2018				
How well do you feel our local health care providers are doing in addressing the health needs of the following age groups?	Poor / Very Poor %			
	Davis Co 2018 N=535	Davis Co 2015 N=257	Davis Co 2013 N=280	Trend
Infants	7.1%	13.6%	23.8%	-6.5%
Age 1 - 12	6.4%	9.3%	16.9%	-2.9%
Age 13 -17	5.6%	7.1%	10.6%	-1.5%
Age 18 - 44	8.2%	6.3%	7.4%	+1.9%
Age 45 - 64	4.1%	5.3%	7.7%	-1.2%
Age 65 - 84	4.3%	10.8%	9.3%	-6.5%
Over 85	5.4%	10.0%	15.5%	-4.6%

HEALTH SERVICES OUTSIDE OF THE COUNTY

Community Health Needs Assessment 2018				
Over the past 2 years, did you or your household receive health care services outside of your county?	Davis Co 2018 N=535	Davis Co 2015 N=357	Davis Co 2013 N=280	Trend
Yes	79.6%	81.4%	74.7%	-1.8%
No	20.4%	18.6%	25.3%	+1.8%
Totals	100%	100.0%	100.0%	
Please list the health care services you or your household member(s) have received outside of your county:	# of Replies	*data not available for 2015	*data not available for 2013	
Dental/Dental Specialties	86	--	--	

OBGYN/Family Planning	84	--	--	
Optometry/Ophthalmology	71	--	--	
Cardiology/Cardiac Surgery	56	--	--	
Orthopedics/Podiatry	39	--	--	
Oncology/Cancer Services	32	--	--	
Urology	24	--	--	
Psychiatry/Mental Health	24	--	--	
General Surgery	20	--	--	
Emergency Services	19	--	--	
If offered, would you have received the services locally?	% of Replies	--	--	
Yes	33.8%	--	--	
Maybe	32.5%	--	--	
No	10.5%	--	--	
Unanswered	23.7%	--	--	
<i>Total</i>	100%	--	--	

ADDITIONAL HEALTHCARE PROVIDERS

Community Health Needs Assessment 2018				
Does our community need any additional healthcare providers?	Davis Co 2018 N=535	Davis Co 2015 N=357	Davis Co 2013 N=280	Trend
Yes (See detail Section V)	66.4%	76.2%	71.1%	-9.8%
No	24.1%	23.8%	28.9%	+0.3%
<i>Totals</i>	90.5%	100.0%	100.0%	
If you feel more providers need to be added, please specify what type is needed:	# of Replies	Data not available	Data not available	
General/Family Practitioner	81	--	--	
Psychiatry/Mental Health Provider	65	--	--	
OBGYN	46	--	--	
Pediatrician	32	--	--	
Urologist	29	--	--	
Oncologist	24	--	--	
Surgeon	19	--	--	
Dentist	18	--	--	
Cardiologist	16	--	--	
Optometrist/Ophthalmologist	15	--	--	

Orthopedic Surgeon	13	--	--	
Neurologist	12	--	--	
Geriatrician	11	--	--	
Pulmonologist	7	--	--	
Nephrologist/Dialysis	7	--	--	
Emergency/Trauma	6	--	--	
Pain Specialist	4	--	--	
Dermatologist	4	--	--	
Rheumatologist	3	--	--	
Bariatrics	3	--	--	
Dietician	3	--	--	
All Providers	2	--	--	
Gastroenterologist	2	--	--	
Endocrinologist	2	--	--	
Chiropractor	1	--	--	
Allergist	1	--	--	
ENT	1	--	--	
Sports Medicine	1	--	--	

IMPROVEMENT OF SERVICES

Community Health Needs Assessment 2018			
Are there health care services in your community or neighborhood that you feel need to be improved and or changed? (Please be specific)			
Rank	Services	# Replies	% of Replies
1	Mental Health Services/Drugs/Alcohol	27	19.42%
2	Transfer to another hospital	18	12.95%
3	Access/After Hours Services/Walk in Clinic	13	9.35%
4	Cost of healthcare services	10	7.19%
5	Access to GPs/FPs	7	5.04%
6	Child Care/Teen Services/Peds	6	4.32%
6	Home Health	6	4.32%
8	ED/Trauma	5	3.60%
8	OBGYN	5	3.60%
10	Surgical Availability	4	2.88%
10	Dental Care	4	2.88%
10	Optometry/Ophthalmology	4	2.88%
10	Family Planning	4	2.88%
14	Access to Specialists	3	2.16%
14	Geriatrics	3	2.16%

Community Health Needs Assessment

14	Urology	3	2.16%
14	Nutrition/Obesity/Diabetes	3	2.16%
18	EMS Services	2	1.44%
18	Transportation to Health Visits	2	1.44%
18	Medicare/Medicaid Services	2	1.44%
18	Awareness & Education	2	1.44%
22	Acute Care Services	1	0.72%
22	School Nurse	1	0.72%
22	Orthopedics	1	0.72%
22	Diabetes Education	1	0.72%
22	Oncology	1	0.72%
22	Lab Services	1	0.72%
	Total	139	100.00%

THREE YEAR ACTION PLAN IMPROVEMENTS

Community Health Needs Assessments 2018			
Are the following Areas Still a Concern for your community? Area	Not a Problem	Somewhat of a Problem	Still a Problem
Mental Health Services	6%	25%	48%
Senior Care Options	16%	41%	24%
Coordination between providers	19%	42%	17%
Access to specialty care services	22%	41%	19%
Teen health	7%	37%	33%
Transportation	16%	39%	20%
Rural healthcare access and delivery	15%	42%	21%

PRESSING ISSUES FOR TODAY'S IMPROVEMENTS

Rank	Health Needs	# Replies	% of Total Replies
1	Mental Health/Counseling	329	13.0%
2	Cancer services	229	9.1%
3	After hours pharmacy services	214	8.5%
4	Access to urgent care services	183	7.2%
5	Obstetrics services	181	7.2%
6	Chronic disease prevention (example diabetes or heart failure)	164	6.5%
7	Public awareness of healthcare services	158	6.3%

8	Elder assistance programs	153	6.1%
9	Dental services	146	5.8%
9	Public transportation for healthcare	146	5.8%
11	Family assistance programs	123	4.9%
12	Nutritional education	114	4.5%
13	Wellness options	107	4.2%
13	Healthy eating options	107	4.2%
15	Home health / Hospice options	104	4.1%
16	Care transitions (movement from one healthcare setting to another or home)	69	2.7%
	Total	2527	

COMBINED EFFORTS

Care Transitions + Public Transportation	215	8.5%	Would be tied for 3rd
Nutrition Education + Healthy Eating Options	221	8.7%	Would be 3rd
Nutrition + Healthy Eating + Wellness (Exercise) Options	328	13.0%	Would be tied for 1st
(Must consider that the same people who voted for one category may have also voted for the other)			

RATING OF SERVICES FOR COMMUNITY

Community Health Needs Assessment 2018 (only available in 2018)									
How would you rate each of the following in your community?	Very Poor	Poor	Fair	Good	Very Good	Not Aware	Total	Very Poor + Poor	Good + Very Good
Caregiver training programs	1.5%	6.7%	22.1%	15.6%	3.2%	50.9%	100%	8.2%	18.7%
Early childhood development programs	0.8%	4.0%	20.4%	28.0%	5.9%	40.8%	100%	4.9%	34.0%
Emergency preparedness	1.5%	5.1%	21.0%	36.0%	10.0%	26.5%	100%	6.6%	46.0%
Food and nutrition services (WIC programs)	1.3%	3.6%	22.8%	34.2%	7.6%	30.4%	100%	4.9%	41.9%
Health screenings access	0.6%	3.2%	23.6%	42.1%	12.0%	18.5%	100%	3.8%	54.1%
Obesity prevention and treatment	5.3%	14.8%	27.4%	11.2%	2.1%	39.2%	100%	20.0%	13.3%
Spiritual health support	2.5%	6.6%	23.3%	25.8%	7.8%	33.9%	100%	9.1%	33.7%
Prenatal / child health programs	4.5%	6.7%	27.0%	21.8%	2.6%	37.4%	100%	11.2%	24.4%
Sexually transmitted disease testing	3.5%	7.6%	22.7%	11.0%	1.5%	53.8%	100%	11.0%	12.5%
Substance use and treatment programs	6.0%	14.5%	24.3%	8.7%	1.1%	45.5%	100%	20.4%	9.8%
Tobacco prevention / cessation programs	4.3%	12.9%	21.9%	13.1%	2.1%	45.7%	100%	17.2%	15.2%
Violence prevention	4.6%	13.0%	21.9%	7.8%	2.4%	50.3%	100%	17.6%	10.2%

Community Health Needs Assessment

Women's wellness programs	4.3%	7.9%	23.7%	21.4%	3.8%	38.9%	100%	12.2%	25.2%
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Personal Health Needs: Survey Results

PERSONAL HEALTH NEEDS: HEALTH DESCRIPTION

Community Healthcare Needs Assessment 2018				
In general, how would you best describe your health? (Choose one)	Davis Co 2018 N=535	Davis Co 2015 N=357	Davis Co 2013 N=280	Trend
Top 2 Boxes	74.4%	79.0%	75.8%	-4.6%
Very Good	17.8%	18.7%	18.5%	-0.9%
Good	56.6%	60.3%	57.3%	-3.7%
Fair	20.6%	19.4%	21.4%	+1.2%
Poor	2.8%	1.3%	2.0%	+1.5%
Very Poor	0.0%	0.3%	0.8%	-0.3%
Bottom 2 Boxes	2.8%	1.6%	2.8%	+1.2%
Totals	97.8%	100.0%	100.0%	

PERSONAL HEALTH NEEDS: OVERALL HEALTH – 2 YEAR COMPARISON

Community Healthcare Needs Assessment 2018				
Compared to a year ago, how would you rate your overall health in general now?	Davis Co 2018 N=535	Davis Co 2015 N=357	Davis Co 2013 N=280	Trend
Much better than a year ago	12.0%	13.7%	7.3%	-1.7%
About the same	81.7%	83.1%	87.9%	-1.4%
Much Worse than a year ago	3.7%	3.2%	4.8%	+0.5%
Totals	97.4%	100.0%	100.0%	

PERSONAL HEALTH NEEDS: SOCIAL DETERMINATES OF HEALTH

Community Health Needs Assessment 2018				
Social Determinates of Health – questions for need:	No %	Yes %	(blank) %	Total %
In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food?	88.2%	7.5%	4.3%	100.0%
In the last 12 months, has your utility company shut off your service for not paying your bills?	93.8%	2.4%	3.7%	100.0%
Are you worried that in the next 2 months, you may not have housing?	93.6%	2.1%	4.3%	100.0%

Do problems getting child care make it difficult for you to work or study? (leave blank if you do not have children)	71.8%	4.7%	23.6%	100.0%
In the last 12 months, have you needed to see a doctor, but could not because of cost?	85.8%	9.2%	5.0%	100.0%
In the last 12 months, have you ever had to go without health care because you didn't have a way to get there?	92.3%	2.8%	4.9%	100.0%
Do you ever need help reading hospital materials?	92.0%	3.9%	4.1%	100.0%
Are you afraid you might be hurt in your apartment building or house?	92.9%	2.4%	4.7%	100.0%
If you checked YES to any boxes above, would you like to receive assistance with any of these needs?	61.9%	3.6%	34.6%	100.0%

PERSONAL HEALTH NEEDS: USE OF PRIMARY CARE PROVIDER

Community Healthcare Needs Assessment 2018				
Does your household have a provider you use for Primary Care?	Davis Co 2018 N=535	Davis Co 2015 N=357	Davis Co 2013 N=280	Trend
Yes (See detail Section V)	80.9%	86.5%	84.6%	-5.6%
No	16.1%	13.5%	15.4%	+2.6%
Totals	97.0%	100.0%	100.0%	

PERSONAL HEALTH NEEDS: PHYSICAL IN THE LAST 12 MONTHS

Community Healthcare Needs Assessment 2018				
Have you had a physical in the past 12 months?	Davis Co 2018 N=535	Davis Co 2015 N=357	Davis Co 2013 N=280	Trend
Yes	65.8%	74.1%	62.1%	-8.3%
No	32.0%	25.9%	37.9%	+6.1%
Totals	97.8%	100.0%	100.0%	
If you have not had a physical, please provide the specific reason:	# of Replies	*data not available for 2015	*data not available for 2013	
No need/Haven't Thought About It/ Feel Healthy	96	--	--	
Cost Reasons	15	--	--	
Insurance Reasons	6	--	--	
Alternative/Naturopathic Medicine	5	--	--	
Can't Miss Work	2	--	--	
No Available Providers	2	--	--	
Transportation Reasons	2	--	--	

PERSONAL HEALTH NEEDS: HEALTH PRACTICES

Community Healthcare Needs Assessment 2018				
Do you follow these health practices?	Davis Co 2018 N=535	Davis Co 2015 N=357	Davis Co 2013 N=280	Trend
If over 50, have you had a colonoscopy?	60.3%	63.1%	58.4%	-2.8%
If male over 50, do you have annual prostate exams?	41.1%	47.6%	45.7%	-6.5%
If female over 40, do you have annual mammograms?	69.8%	75.0%	60.4%	-5.2%
If female, do you have a pap smear every other year?	50.6%	67.3%	52.2%	-16.7%
Do you get 2.5 hours a week of moderately intense physical activity?	62.4%	60.6%	57.3%	+1.8%

PERSONAL HEALTH NEEDS: HEALTH PRACTICES

Community Health Needs Assessment 2018					
Please complete sentence below - "Are you..."	No %	N/A %	Yes %	(blank)	Total %
Eating right (Daily, 5 servings of fruits, vegetables, wheat)	40.9%	1.9%	53.1%	4.1%	100.0%
Using tobacco products weekly	79.8%	6.2%	11.0%	3.0%	100.0%
Exercising 2-3 times weekly	32.0%	2.2%	61.5%	4.3%	100.0%
Consuming alcohol (more than 1 drink daily)	86.4%	6.2%	3.9%	3.6%	100.0%
Receiving an annual flu shot	35.1%	0.7%	60.7%	3.4%	100.0%

Primary Data (Survey) Demographics of Participants

AGE

What is your age?	# of Replies	% of Total
17 and under	3	0.6%
18 to 25	29	5.5%
26 to 44	162	30.9%
44 to 64	178	34.0%
65 to 84	133	25.4%
85 and over	19	3.6%
Total	524	100.0%

GENDER

What is your gender?	# of Replies	% of Total
Female	373	69.7%
Male	137	25.6%
Prefer not to say	13	2.4%
(blank)	12	2.2%
Total	535	100.0%

IDENTITY

How would you identify yourself?	# of Replies	% of Total
African American / Black	1	0.2%
Amish	2	0.4%
Asian / Pacific Islander	1	0.2%
Caucasian / White	512	99.0%
Latino / Hispanic	1	0.2%
Total	517	100.0%

HOUSEHOLD

How would you describe your household? (Please select all that apply)	# of Replies	% of Total
Total	535	100.0%
Married	154	28.8%
Married; Parent / Guardian with children at home	94	17.6%
Married with children no longer at home	57	10.7%
Single	51	9.5%
Parent / Guardian with children at home	49	9.2%
Married; Married with children no longer at home	38	7.1%
Divorced	27	5.0%
Widow	23	4.3%
Single; Parent / Guardian with children at home	11	2.05%
(blank)	19	3.6%
Married; Parent / Guardian with children at home and with children no longer at home	5	0.9%
Living with Significant other (Partner)	3	0.6%
Single; Married; Parent / Guardian with children at home	2	0.4%
College student living at home	1	0.2%
Living with my parents	1	0.2%

INSURANCE

What type of health insurance coverage is your primary plan?	# of Replies	% of Total
Partially covered by employer (you and employer share cost)	149	27.9%
Medicare	129	24.1%
No coverage (uninsured)	84	15.7%
Covered by employer (employer pays total cost)	73	13.6%
Private Insurance you purchased	44	8.2%
Medicaid	35	6.5%
(blank)	21	3.9%
Total	535	100.0%

INVOLVEMENT IN COMMUNITY

Rank	For reporting purposes, are you involved in or are you a... (Please check all that apply) (some did not fill in "other")	# of Replies	% of Total
1	Consumer of healthcare services	129	15.1%
2	Farmer / Rancher	109	12.7%
3	Parent / Caregiver	108	12.6%
4	Hospital or Clinic employee	95	11.1%
5	Business / Merchant	64	7.5%
6	Board member (local)	48	5.6%
7	Education official / Teacher	45	5.3%
8	Civic club member	40	4.7%
9	Labor	39	4.6%
10	Retired	36	4.2%
11	Construction / Housing / Builder	23	2.7%
12	Veteran	19	2.2%
13	Clergy / Congregational Leader	18	2.1%
13	Dentist / Healthcare Provider	18	2.1%
15	College / University student	16	1.9%
15	Law Enforcement	16	1.9%
17	Health Department	8	0.9%
18	Economic Development	6	0.7%
19	Machinist	5	0.6%
20	Government employee	4	0.5%
21	Disabled	3	0.4%
22	Social Worker	2	0.2%
22	Amish	2	0.2%
24	Public service	1	0.1%
24	Not employed	1	0.1%
	Total (multiples could be selected)	855	100.0%

CHNA Open Question – Health Needs in the Community



Davis County
CHNA_Open ended c

Secondary Research Findings

OVERALL STATE HEALTH RANKINGS

#	IA Rank of 99 Counties	Definitions	Davis Co 2018	Davis Co 2015	TREND
1	Physical Environment	Environmental quality	17	16	
2	Health Factors		86	96	
3	Clinical Care	Access to care / Quality of Care	97	99	
4	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	75	87	
5	Health Outcomes		49	37	
6	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	87	87	
7	Morbidity	Quality of life	89	4	
8	Mortality	Length of life	13	68	
http://www.countyhealthrankings.org, released 2018					

DEMOGRAPHIC DETAILS: POPULATION AGE, GENDER, ETHIC AFFILIATION (1A)

	Health Indicator	Davis Co 2018	Davis Co (prior yrs)	Trend	State of Iowa
1a	Population, Estimate	8,860	8,781 (2014)		3,156,145
1a	Population, 2010		8,753		3,046,355
1a	Persons Under 5 years, Percent	8.4%	8.0% (2014)		6.3%
1a	Persons Under 18 years, Percent	29.0%	28.9% (2014)		23.3%
1a	Persons 65 Years and Over, Percent	17.7%	17.5% (2014)		16.7%
1a	Female Persons, Percent	50.5%	50.6% (2014)		50.3%
1a	White Alone, Percent	98.2%	98.3% (2014)		91.1%
1a	Black or African American Alone, Percent	0.2%	0.2% (2014)		3.8%
1a	Hispanic or Latino, Percent	1.5%	1.2% (2014)		6.0%
1a	Foreign Born Persons, Percent	0.8% (2013-17)	0.8% (2009-13)		5.0%
1a	Language Other than English Spoken at Home, Percent, Age 5+	16.7% (2013-17)	14.4% (2009-13)		7.6%

Source: US Census – Quick Facts

<https://www.census.gov/quickfacts/fact/table/daviscountyiowa,ia/PST045218>

DEMOGRAPHIC DETAILS: POPULATION STATUS (1B)

	Health Indicator	Davis Co 2018	Davis Co (prior years)	Trend	State of Iowa
1b	Veterans	531	717 (2009-13)		193,451
1b	Living in Same House 1 Year & Over, Percent	91.4% (2013-17)	89.3% (2009-13)		84.7%
1b	Persons per Square Mile	17.4	17.4 (2010)		54.5
1b	Children in Single-Parent Households, percent (County Health Rankings)	27%	20.% (2013)		29.0%
1b	Poverty Levels, (Iowa Health Fact Book)	12%	15. % (2011)		12.7%
1b	Limited Access to Healthy Foods, 2015 (County Health Rankings)	6%	5.% (2015)		6.0%
1b	People 65+ with Low Access to a Grocery Store, (US Dept of Agriculture- Food Atlas)	2.4% (2015)	2.3% (2010)		3.6%
1b	Voter Turnout, percent (Iowa Secretary of State)	61.28% (2018)	57.2% (2012)		61.55%

Source: Unless stated source: US Census – Quick Facts

<https://www.census.gov/quickfacts/fact/table/daviscountyiowa,ia/PST045218>

ECONOMIC DETAILS (2)

	Health Indicator	Davis Co (2018)	Davis Co prior yrs	Trend	State of Iowa
2	Per Capita Money Income in Past 12 Months (2017 dollars)	\$25,747	\$22,210 (2009-13)		\$30,063
2	Housing Units in Multi-Unit Structures, Percent	NA	6.4% (2009-13)		18.4%
2	Persons per Household	2.68	2.8 (2009-13)		2.41
2	Severe Housing Problems, (County Health Rankings)	13%	14% (2015)		12.0%
2	Retail Sales per Capita (Business Quick Facts)	\$7,163	\$8,351 (2007)		\$14,607
2	Total Number of Firms (Business Quick Facts)	826	848 (2007)		259,121
2	Unemployment (County Health Rankings)	4.3%	5.8% (2015)		3.7%%
2	Child Food Insecurity Rate, 2013 (Feeding America)	13.2%	10.7% (2013)		10%
2	Grocery stores / 1,000 pop (US Department of Agriculture- Food Atlas)	.22	0.2 (2012)		0.3
2	Low-Income and Low Access to a Grocery Store, (US Department of Agriculture – Food Atlas)	2.3%	2.3% (2010)		3.6%
2	SNAP participants (% eligible pop) (US Department of Agriculture – Food Atlas)	80.8%	88.0% (2010)		88.0%
2	Mean Travel Time to Work (Minutes), Workers Age 16+	22.9	22.8 (2009-13)		18.0
2	Long Commute - Driving Alone (County Health Rankings)	30%	34.0% (2009-13)		20.0%

Source: Unless stated source: US Census – Quick Facts

<https://www.census.gov/quickfacts/fact/table/daviscountyiowa,ia/PST045218>

PUBLIC SCHOOLS HEALTH DELIVERY (3A AND 3B)

Currently school districts are providing on site primary health screenings and basic care.

	Health Indicator	Davis Co (2018)	Davis Co prior yrs	Trend	State of Iowa
3a	Students Eligible for Free Lunch (%) (US Department of Agriculture – Food Atlas)	28% (2014)	33.2% (2010)		30.0%
3a	% Eligible for Free or Reduced-Price Lunch, Davis County Community High School (IA Department of Education)	40.4% (2017)	39.3% (2013-14)		NA
3a	% Eligible for Free or Reduced-Price Lunch, Davis County Elementary (IA Department of Education)	46.9% (2017)	43.5% (2013-14)		NA
3a	% Eligible for Free or Reduced-Price Lunch, Davis County Middle School (IA Department of Education)	42.6% (2017)	47.3% (2013-14)		NA
3a	4-Year High School Graduation Rates (Quick Facts)	93%	90% (2011-12)		90%
3a	Bachelor's Degree or Higher, Percent of Persons Age 25+, (Quick Facts)	17.8%	16.4% (2009-13)		27.7%

	Indicators	Davis Co Community School District (2018)	Davis Co Community School District (2016)
1	Number of Public School Nurses	1	1
2	School Wellness Plan in Place (Active)	Yes	Yes
3	VISION: Number Screened / Referred to Prof / Seen by Professional	Yes	211 (PK, K , 3) 18 referred 39 professional
4	HEARING: Number Screened / Referred to Prof / Seen by Professional	Yes, services provided through AEA	AEA
5	ORAL HEALTH: Number Screened / Referred to Prof / Seen by Professional	No, through Lee County Health Department	258 54 referred 104 DDS
6	SCOLIOSIS: Screened / Referred to Prof / Seen by Professional	No	No
7	Students Served with No Identified Chronic Health Concerns		1,100
8	Students Served with Identified Chronic Health Concerns		Approx. 183
9	Tdap Vaccine Provided to Children Age 10-18		664/1127 students
10	School has a Suicide Prevention Program	Yes	Yes
11	Compliance on Required Vaccinations <ul style="list-style-type: none"> 2-year-old benchmark (DTaP, HepB, MMR, Hib, Polio, Varicella, Pneumo.) Adolescent benchmark (TdapTd, HepB, MMR, Varicella, Meningo) Adolescent HPV benchmark 	100%	79/112 (71%) 344/715 (48%) 133/716 (19%)

MATERNAL AND INFANT HEATH (4A AND 4B)

Tracking maternal and infant care patterns are vital in understanding the foundation of family health.

	Health Indicator	Davis Co 2018	Davis Co (prior yrs)	Trend	State of Iowa
4a	Mothers Who Began Prenatal Care in First Trimester (Iowa Health Fact Book)	149	160 (2010-11)		Rank 77
4a	Annual Birth Outcome % Preterm (IA Department of Public Health)	8.3% (2015)	8.3% (2012)		9.2%
4a	Low Birth Weight (<2500 Grams) (Iowa Health Fact Book)	22	13 (2010-11)		Rank 47
4a	Mothers Who Smoked During Pregnancy (Iowa Health Fact Book)	40	33 (2010-11)		Rank 85
4a	Mothers under Age 20 (Iowa Health Fact Book)	9	15 (2010-11)		Rank 72
4a	Out-of-Wedlock Births (Iowa Health Fact Book)	52	41 (2010-11)		Rank 89
4a	Average Monthly WIC Participation (https://datacenter.kidscount.org)	6.0% (2017)	6.9% (2015)		26.9% (2017)

Source: Iowa Health Fact Book

LIVE BIRTHS (4B)

	Vital Statistics	Davis County	Trend	State of Iowa
4	Total Live Births, 2007	136		40,835
4	Total Live Births, 2009	142		39,662
4	Total Live Births, 2011	134		38,204
4	Total Live Births, 2013	126		39,013
4	Total Live Births, 2015	125		39,482
4	Total Live Births, 2017	147		38,408

Source: Iowa Health Fact Book

HOSPITAL SPECIFIC DETAILS (5)

Understanding provider access and disease patterns are fundamental in healthcare delivery.

	Health Indicator	Davis Co 2018	Davis Co prior yrs	Trend	State of Iowa
5	Primary Care Physicians per 1 (County Health Rankings)	2,190	2,172 (2015)		1,360
5	Preventable Hospital Stays (County Health Rankings)	42	58 (2015)		49
5	Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest) (CMS Hospital Compare)	79%	66.0% (2014)		78.0%

5	Patients Who Reported Yes, They Would Definitely Recommend the Hospital (CMS Hospital Compare)	78%	72.0% (2014)		72.0%
5	Average Time Patients Spent in the Emer Depart Before They Were Seen by a Healthcare Professional (CMS Hospital Compare)	NA	NA		18
5	Medicare Hospital Spending per Patient (Medicare Spending per Beneficiary) (CMS Hospital Compare)	NR	NA		\$0.92
5	Unplanned Readmission Rate (new 2018) (CMS Hospital Compare)	15.3%	NR		15.3% (national)

BEHAVIORAL AND MENTAL HEALTH PROFILE

	Health Indicator	Davis Co 2018	Davis Co prior yrs	Trend	State of Iowa
6	Depression: Medicare Population (Center for Medicare and Medicaid Services)	10.2% (2015)	11.6% (2012)		13.8%
6	Alcohol-Impaired Driving Deaths, (3 of 6 Total Driving Deaths) (County Health Rankings)	14%	50.0% (2015)		27%
6	Poor Mental Health Days (County Health Rankings)	3.6	2.5		3.3

HEALTH BEHAVIORS PROFILE (7A)

Knowing community health risk factors and disease patterns can aid in the understanding next steps to improve health.

	Health Indicator	Davis Co 2018	Davis Co (2015)	Trend	State of Iowa
7a	Adult Obesity	32%	31.0%		32%
7a	Adult Smoking	18%	23.0%		17%
7a	Excessive Drinking	19%	19.0%		22%
7a	Physical Inactivity	26%	28.0%		25%
7a	Poor Physical Health Days	3.5	2.2		2.9
7a	Sexually Transmitted Infections	261.9	242		388.9

Source: County Health Ranking (7A)

CHRONIC HEALTH PROFILE (7B)

	Health Indicator – Medicare Population	Davis Co 2017	Davis Co (2015)	Trend	State of Iowa
7b	Asthma:	5.3%	3.5%		6.0%
7b	Atrial Fibrillation:	NA	7.9%		9.9%
7b	Cancer:	NA	6.6%		7.8%
7b	Chronic Kidney Disease:	14.7%	12.1%		15.9

Community Health Needs Assessment

7b	COPD:	7.8%	9.0%		10.5%
7b	Diabetes	26.8%	NR		23.7%
7b	Heart Failure:	14.2%	16.5%		12.9%
7b	Hyperlipidemia:	35.9%	33.5%		40.2%
7b	Hypertension:	49.1%	46.0%		53.7%
7b	Osteoporosis:	NA	4.0%		5.8%
7b	Stroke:	NA	2.8%		3.2%

Source: Center for Medicare and Medicaid Services (7B)

MORTALITY PROFILES

The leading causes of county deaths are listed below.

	Health Indicator	Davis Co 2017	Davis Co prior yrs	Trend	State of Iowa
9	Life Expectancy for Females, y/o (Institute for Health Metrics and Evaluation)	82.2	80.4		81.9
9	Life Expectancy for Males, y/o (Institute for Health Metrics and Evaluation)	77.6	75.2 (2009)		77.5
9	Infant Deaths (Iowa Health Fact Book)	NA	NA (2007-11)		NA
9	Heart Disease Mortality (2010-2014) (Iowa Health Fact Book)	98	114 (2006-10)		Rank 96
9	Chronic Obstructive Pulmonary Disease Mortality (2010-2014) (Iowa Health Fact Book)	24	24 (2006-10)		Rank 90
9	Suicides, (2010-2014) (Iowa Health Fact Book)	9	6		Rank 52

CAUSE OF DEATH

#	Causes of Death by County of Residence, Iowa Health Fact Book	Davis Co 2010-14	Davis Co 2009-13	Trend (2014)	State of Iowa Rank
	All Causes	423	407		
1	Heart Disease	98	114		96
2	All Cancer	94	76		92
3	Stroke	26	28		84
4	Chronic Obstructive Pulmonary Disease	24	24		90
5	Pneumonia/Influenza	22	31		49
6	Lung Cancer	20	15		93
7	Accidents and Adverse Effects	17	16		94
8	Diabetes Mellitus	16	15		80
9	Alzheimer's Disease	13	10		92
10	Firearms	9	6		30
11	Suicide	9	6		52
12	All Transportation	7	8		77
13	Motor Vehicle Traffic	NR	8		
14	Falls	NR	7		

PREVENTATIVE HEALTH

	Health Indicator	Davis Co 2018	Davis Co (2015)	Trend	State of Iowa
10	Access to Exercise Opportunities	49%	50.0%		83%
10	2-Year-Old Coverage of Individual Vaccines and Selected Vaccination Series, (Iowa Immunization Program)	98%	45.0%		71.0%
10	Diabetic Monitoring	85%	84.0%		90%
10	Mammography Screening	60%	50.0%		69%
10	Limited Access to Healthy Food	6.0%	5.0%		6.0%
10	Percent Annual Check-Up Visit with PCP		NA		NA
10	Percent Annual Check-Up Visit with Dentist		NA		NA
10	Percent Annual Check-Up Visit with Eye Doctor		NA		NA

Source: County Health Rankings

UNINSURED PROFILES

	Health Indicator	Davis Co 2018	Davis Co (2015)	Trend	State of Iowa
8	Uninsured (Under 65), 2010	11%	17.9%		6%

Source: Iowa Health Fact Book

BAD DEBT AMOUNT

	Davis County Hospital	YR12	YR13	YR14	YR15 (7/1/14-6/30/15)	YR16	YR17	TREND
8	Bad Debt	\$892,189	\$968,656	\$938,414	\$639,061			
8	Charity Care	\$63,735	\$178,399	\$149,604	\$85,864			

INVENTORY OF EXISTING COUNTY RESOURCES

Community Health Partners – Detailed List

CHILD DEVELOPMENT

Amanda Tillman
Child Development Specialist
200 N. East Street
Bloomfield, IA 52537
6416641735

Michele Masden
Center Supervisor
Davis County Head Start
200 N. East, Suite 2
Bloomfield, IA 52537
6416641735

Karen Lauer
Davis County Day Care
200 N. East Street
Bloomfield, IA 52537
6416643130

Erin Hall
Parents As Teachers
300 East South
Bloomfield, IA 52537
6416642916
www.sieda.org

Traci Wiegand
Wigam Dy Care & Preschool
200 W Locust
Bloomfield, IA 52537
6416643091

Tracy Emmons
Rainbow & Friends Christian Preschool
403 E North Street
Bloomfield, IA 52537
6416641606

CHIROPRACTORS DC

Lloyd A Mietzner DC
Doctor Who LLC
308 N Washington St
Bloomfield, IA 52537
6416643345

Rich Fetcho DC
Fetcho Family Chiropractic
105 E Franklin St # 1
Bloomfield, IA 52537
6416642423

J.L. Stogdill
Stogdill Chiropractic
102 W. Jefferson St.
Bloomfield, IA 52537
6416641749

CHURCHES

Bloomfield Christian Church
Erin Harrington, Office Administrator
107 N Davis
Bloomfield, IA 52537
6416642181

Pulaski Mennonite Church
Darrell Zook, Pastor
22280 Mallard Ave
Bloomfield, IA 52537
6416641289

Bloomfield Methodist Church
Tim Frasher
401 E North Street
Bloomfield, IA 52537
6416643206

Church Of The Open Bible
206 E Chestnut
Bloomfield, IA 52537
6416643210

Dunnville Baptist Church
15356 Nuthatch Ave
Bloomfield, IA 52537
6414593301

First Baptist Church
401 Crestview Circle
Bloomfield, IA 52537
6416642240

Good Shephard Lutheran Church
19419 Lilac Avenue
Bloomfield, IA 52537
6416643242

Grace Pointe Church Of The Nazarene
20444 Hwy 2
Bloomfield, IA 52537
6416642585

Mark Baptist Church
16011 276th Street
Bloomfield, IA 52537
6419293233

Midway Calvary Baptist Church
22605 138 Th Street
Bloomfield, IA 52537
6414593324

St Mary Magdalen Catholic Church
108 Weaver Road
Bloomfield, IA 52537
6416642553

Stiles Christian Church
Kramer Smith
28286 Peach Ave
Bloomfield, IA 52537
6416753456

Tabernacle Baptist Church
106 N Buckeye
Bloomfield, IA 52537
6416642255

Word Of Life Fellowship
22586 195th Street
Bloomfield, IA 52537
6416641745

Pulaski Mennonite Church
28026 270th Street
Pulaski, IA 52584
6416753845

CLINICS - PHYSICIANS

Bloomfield Anesthetist Group
505 West Jefferson Street
Bloomfield, IA 52537
6416643602

Margaret Scott, Secretary
Amanda McKinle, CRNA
Dustin Bozwell, CRNA
Jay R Brewer, CRNA
Jessica K Henderson, CRNA
Melissa Mahon, CRNA
Valerie K Mc Kinley, CRNA

Marty J Owen, CRNA
Jill Ferrell, CRNA
Jennifer Cook, CRNA

Davis County Medial Associates Clinic
Davis County Hospital
509 N Madison St
Bloomfield, IA 52537
6416643832

Beverly Oliver ARNP
Mary Graeff MD
Trina Settles DO
Robert Floyd DO
Christian Sanchez, MD
Haleigh Skaggs, ARNP

Specialty Clinic Providers
Davis County Hospital
509 N Madison St
Bloomfield, IA 52537
6416643832

Robert Jackson, DO (Rheumatology)
Lary Clesemier, DO (Allergy & Immuno)
Shalya Snaders, ARNP (Rheumatology)
John Harrington, MD (General Surgery)
Kathy Ayers, ARNP (Diabetic)
Joseph Whitman, DO (ENT)
Deborah Holt, DMP (Podiatry)
Lloyd Cleaver, DO (Dermatology)
Ralph Boling, DO (Obstetrics/Gynecolo)
Johnathon Cleaver, DO (Dermatology)
Melissa Gingrich, ARNP (Women's Hlth)
David Cleaver, DO (Dermatology)
Ron Graeff, MD (Allergy and Pulm.)
Linda Schilling, ARNP (Dermatology)
Shehada Homedan MD (Ortho Surgery)
Dee Dorsett, ARNP (Cadiology)

Donald R Wirtanen DO
202 N Madison St
Bloomfield, IA 52537
6416641400

Dorothy Cline-Campbell DO
Osteopathic Medical Ctr
Po Box 67
Bloomfield, IA 52537
6416643621

DENTISTS

Truman Johnson, DDS
Davis County Dental
107 South Pine
Bloomfield, IA 52537
6416641121

Dr. Rollman, DDS
Davis County Dental
107 South Pine
Bloomfield, IA 52537
6416641121

FITNESS

Taylor Helton, Manager
Mutchler Rec Center
900 E North Street
Bloomfield, IA 52537
6416643939

Kelly Jackson, Manager
Perfect Touch Wellness Center
102 E Jefferson
Bloomfield, IA 52537
6416641100

HOME HEALTH & HOSPICE

Ruth Finch ResCare Homecare
712 S West St # 3
Bloomfield, IA 52537
6416641839

HOSPITAL

Veronica Fuhs, MHA
Davis County Hospital
509 N Madison St
Bloomfield, IA 52537
6416642145

MENTAL HEALTH

Optimae Life Services
712 S. West Street, Suite 3
Bloomfield, IA 52537
6416641839

Stacy Veatch
Community Services Director
General Assistance Director
712 S West Street
Bloomfield, IA 51537
6416641993

Diane Buss
Central Point Coordinator
100 Court Square
Bloomfield, IA 52537
6418951690

Paula Gordy, LiSW LLC
207 E Franklin
Bloomfield, IA 52537
6416642490

SIEDA Neighborhood Resource Center
300 E. South Street
Bloomfield, IA 52537
6416641911

OPTOMETRISTS OD

Thomas G Juhl OD
116 N Dodge Street
Bloomfield, IA 52537
6416642325

PODIATRISTS

Susan C Warner DPM
110 N Dodge Street
Bloomfield, IA 52537
6416643667

PUBLIC HEALTH

Lynn Fellingner
Davis County Hospital Public Health
509 N Madison
Bloomfield, IA 52537
6416643629

SENIOR LIVING

Nancy Newman
Bloomfield Care Ctr
800 N Davis St
Bloomfield, IA 52537
6416642699

Robert Shephard
Bloomfield Senior Housing
403 E South Street
Bloomfield, IA 52537
6416641819

Gloria Garner
Mulberry Place
11 Deborah Dr.
Bloomfield, IA 52537
6416642523

Dawn McCarty
Optimae Live Services
22425 Overland Ave
Bloomfield, IA 52537
6416643202

SUPPORT SERVICES

Dave Schooley Crosslines
307 Parkview Drive
Bloomfield, IA 52537
6416643974

Dee Altheide
Lords Cupboard
108 S Howard Street
Bloomfield, IA 52537
6416642181

Barb Mulgrave
Sieda Resource Center
203 S Madison Street
Bloomfield, IA 52537
6416641911

United Way of Wapello County Iowa
221 2nd St.
Ottumwa, IA 52537
6416821264

ADLM/Environmental Health
12307 Hwy. 5
Moravia, IA 525372
6417243511

Community Resources – Inventory of Services

Inventory of Health Services – Davis County, Iowa

Cat	HC Services Offered in the County: Yes/No	Hospital	Public Health	Other
Clinic	Primary Care	Yes	no	
Hosp	Alzheimer Center	no	no	
Hosp	Ambulatory Surgery Centers	Yes	no	
Hosp	Arthritis Treatment (We offer rheumatology clinic services, it is not a stand-alone Arthritis Center)	no	no	
Hosp	Bariatric/Weight Control Services	no	no	
Hosp	Birthing/LDR/LDRP Room	no	no	
Hosp	Breast Cancer (do offer mammography)	yes	no	
Hosp	Burn Care	no	no	
Hosp	Cardiac Rehabilitation	yes	no	
Hosp	Cardiac Surgery	no	no	
Hosp	Cardiology Services	yes	no	
Hosp	Case Management	yes	yes	
Hosp	Chaplaincy/Pastoral Care Services	no	no	yes
Hosp	Chemotherapy	no	no	
Hosp	Colonoscopy	yes	no	
Hosp	Crisis Prevention (Served by Wapello County)	no	no	yes
Hosp	CT Scanner	yes	no	
Hosp	Diagnostic Radioisotope Facility	yes	no	
Hosp	Diagnostic/Invasive Catheterization	no	no	
Hosp	Electron Beam Computed Tomography (EBCT)	no	no	
Hosp	Enrollment Assistance Services	yes	no	
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)	no	no	
Hosp	Fertility Clinic	no	no	
Hosp	Full Field Digital Mammography (FFDM)	yes	no	
Hosp	Genetic Testing/Counseling	no	no	
Hosp	Geriatric Services	yes	yes	
Hosp	Heart services (Cardiology visiting)	yes	no	
Hosp	Hemodialysis	no	no	

Hosp	HIV/AIDS Services	no	no	
Hosp	Image-Guided Radiation Therapy (IGRT)	no	no	
Hosp	Inpatient Acute Care - Hospital Services	yes	no	
Hosp	Intensity-Modulated Radiation Therapy (IMRT) 161	no	no	
Hosp	Intensive Care Unit	no	no	
Hosp	Intermediate Care Unit	no	no	
Hosp	Interventional Cardiac Catheterization	no	no	
Hosp	Isolation room	yes	no	
Hosp	Kidney services (nephrology)	no	no	
Hosp	Liver	no	no	
Hosp	Lung (offer pulmonary)	yes	no	
Hosp	Magnetic Resonance Imaging (MRI)	yes	no	
Hosp	Mammograms	yes	no	
Hosp	Mobile Health Services	No	no	
Hosp	Multi-slice Spiral Computed Tomography (<64 slice CT)	yes	no	
Hosp	Multi-slice Spiral Computed Tomography (<64+ slice CT)	no	no	
Hosp	Neonatal (We do Labor and Delivery and local physicians follow-up)	no	no	
Hosp	Neurological services	no	no	
Cat	HC Services Offered in County: Yes / No	Hospital	Health Dept	Other
Hosp	Obstetrics (delivery)	no	no	
Hosp	Occupational Health Services	yes	no	
Hosp	Oncology Services	Yes	no	
Hosp	Orthopedic Services	yes	no	
Hosp	Outpatient Surgery	yes	no	
Hosp	Pain Management	yes	yes	
Hosp	Palliative Care Program	no	yes	yes
Hosp	Pediatric (Family Practice)	yes	yes	
Hosp	Physical Rehabilitation (PT Services)	yes	no	yes
Hosp	Positron Emission Tomography (PET)	no	no	
Hosp	Positron Emission Tomography/CT (PET/CT)	no	no	
Hosp	Psychiatric Services	no	no	Yes
Hosp	Radiology, Diagnostic	yes	no	

Hosp	Radiology, Therapeutic	no	no	
Hosp	Reproductive Health (Public Health with Family Planning in Ottumwa)	Yes	yes	
Hosp	Robotic Surgery	no	no	
Hosp	Senior Health Solutions	Yes	no	
Hosp	Shaped Beam Radiation System 161	no	no	
Hosp	Single Photon Emission Computerized Tomography	no	no	
Hosp	Sleep Center	yes	no	
Hosp	Social Work Services	Yes	yes	
Hosp	Sports Medicine	No	no	
Hosp	Stereotactic Radiosurgery	No	no	
Hosp	Swing Bed Services	Yes	no	
Hosp	Transplant Services	No	no	
Hosp	Trauma Center -Level IV	No	no	
Hosp	Ultrasound	Yes	no	
Hosp	Women's Health Services	Yes	no	
Hosp	Wound Care	Yes	yes	
Comm	Adult Day Care Program	No	no	yes
Comm	Assisted Living	no	no	yes
Comm	Home Health Services	no	Yes	yes
Comm	Hospice	yes	Yes	yes
Comm	Long-Term Care	no	no	Yes
Comm	Nursing Home Services	no	Yes	yes
Comm	Retirement Housing	no	no	yes
Comm	Skilled Nursing Care	yes	no	yes
ER	Emergency Services	yes	no	
ER	Urgent Care Center	no	no	
ER	Ambulance Services	yes	no	
SERV	Alcoholism-Drug Abuse	no	no	
SERV	Blood Donor Center	no	no	yes
SERV	Chiropractic Services	no	no	yes
SERV	Complementary Medicine Services	no	no	
SERV	Dental Services	yes	no	Yes
Cat	HC Services Offered in County: Yes / No	Hospital	Health Dept	Other

SERV	Fitness Center	No	no	yes
SERV	Health Education Classes	yes	yes	
SERV	Health Fair (Annual)	yes	yes	
SERV	Health Information Center	no	no	
SERV	Health Screenings	yes	yes	
SERV	Meals on Wheels	No	yes	yes
SERV	Mental Health services	no	no	yes
SERV	Nutrition Programs	yes	yes	Yes
SERV	Patient Education Center	yes	no	
SERV	Support Groups	yes	no	yes
SERV	Teen Outreach Services	no	no	yes
SERV	Tobacco Treatment/Cessation Program	yes	yes	yes
SERV	Transportation to Health Facilities	no	no	yes
SERV	Wellness Program (The hospital supports local businesses with health fairs and lab screenings annually)	Yes	no	yes

Providers Delivering Care – Davis County Iowa

CARE DELIVERY

Care Providers			
	FTE Physicians		FTE Allied Staff
# of FTE Providers working in county	PSA Based DRs	Visiting DRs *	PSA Based PA / NP
Primary Care:			
Family Practice	4.0	1.0	3.0
Internal Medicine/Geriatrician	1.0		
Obstetrics/Gynecology	1.0	1.0	
Pediatrics	1.0		
Medicine Specialists/ Visiting Specialist:			
Allergy/Immunology	1.0	1.0	
Cardiology		1.0	

Dermatology		2.0	
Endocrinology			
ENT (Ear/Nose/Throat)	1.0		
Gastroenterology			
Oncology/Radiology			
Orthopedics / Surgery	1.0		
Infectious Diseases			
Neonatal/Perinatal			
Nephrology			
Neurology			
Occupational Medicine			
Physical Medicine/Rehab			
Podiatry	1.0		
Psychiatry			
Pulmonary	1.0		
Rheumatology	1.0		0.5
Surgery Specialists:			
General Surgery/Colon/Oral	1.0		
Neurosurgery			
Ophthalmology			
Orthopedics	1.0		
Otolaryngology (ENT)		0.3	
Plastic/Reconstructive			
Thoracic/Cardiovascular/Vascular			
Urology			
Women's Health			1.0
Hospital Based:			
Anesthesia/Pain			8.0
Emergency	1.0		2.0
Radiology		3.0	
Pathology		2.0	

Hospitalist			
Non-Hospital Based (Community):			
Chiropractor	3.0		
Optometrist	1.0		
Dentist	2.0		
TOTALS	22	11.3	14.5

Service Directory

EMERGENCY NUMBERS

Police/ Sheriff	911
Fire	911
Ambulance	911

NON-EMERGENCY / MUNICIPAL NUMBERS (BLOOMFIELD)

Davis County Sheriff (Police)	641-664-2385
Davis County Hospital EMS	641-664-2145
Fire	641-664-1147

QUICK REFERENCE PHONE GUIDE

Action Now	1-800-622-5168
Al-Anon "Free to Be Me"	(515) 462-4253
Alcoholics Anonymous	(515) 282-8550
Alzheimer's Disease Helpline	1-800-272-3900
American Cancer Society	1-800-227-2345
American Red Cross	1-800-887-2988
Arthritis Foundation	1-866-378-0636
Battered Women	1-800-433-SAFE
Child Abuse Hotline	1-800-795-9606
Dependent Adult Abuse Hotline	1-800-362-2178
Dependent Adult and Child Abuse	1-800-652-9516
Domestic Abuse Hotline	1-800-942-0333
First Call for Help	(515) 246-6555
Foundation Through Crisis	1-800-332-4224
Gambling Hotline	1-800-238-7633
Iowa Arson/Crime Hotline	1-800-532-1459
Iowa Child Abuse Reporting Hotline	1-800-362-2178
Iowa State Patrol Emergency	1-800-525-5555
Medicare	1-800-MEDICARE
Mental Health Information and Referral	1-800-562-4944
National Alcohol Hotline	1-800-252-6465
National Center for Missing and Exploited Children	1-800-THE LOST
National Institute on Drugs	1-800-662-4537

Poison Control	1-800-222-1222
Senior Health Insurance Info Program (SHIIP)	1-800-351-4664
Substance Abuse Information & Treatment	1-800-662-HELP
Suicide Prevention Hotline	1-800-SUICIDE
Teen Line (Red Cross)	1-800-443-8336

GENERAL ONLINE HEALTH RESOURCES

Doctors and Dentists—General

[AMA Physician Select: Online Doctor Finder](#) (American Medical Association) [DocFinder](#) (Administrators in Medicine) [Find a Dentist](#) (Academy of General Dentistry) [Find a Dentist: ADA Member Directory](#) (American Dental Association) [Physician Compare](#) (Centers for Medicare & Medicaid Services)

Hospitals and Clinics—General

[Find a Health Center](#) (Health Resources and Services Administration) [Find a Provider: TRICARE Provider Directories](#) (TRICARE Management Activity) [Hospital Quality Compare](#) (Centers for Medicare & Medicaid Services)

Doctors and Dentists—Specialists

[ACOG's Physician Directory](#) (American College of Obstetricians and Gynecologists) [ACR: Geographic Membership Directory](#) (American College of Rheumatology) [American College of Surgeons Membership Directory](#) (American College of Surgeons) [American Osteopathic Association D.O. Database](#) (American Osteopathic Association) [ASGE: Find a Doctor](#) (American Society for Gastrointestinal Endoscopy) [Cancer Genetics Services Directory](#) (National Cancer Institute) [Child and Adolescent Psychiatrist Finder](#) (American Academy of Child and Adolescent Psychiatry) [Dystonia: Find a Health Care Professional](#) (Dystonia Medical Research Foundation) [Expert Locator: Immunologists](#) (Jeffrey Modell Foundation) [Find a Dermatologic Surgeon](#) (American Society for Dermatologic Surgery) [Find a Dermatologist](#) (American Academy of Dermatology) [Find a Gastroenterologist](#) (American College of Gastroenterology) [Find a Gynecologic Oncologist](#) (Society of Gynecologic Oncologists) [Find a Hand Surgeon](#) (American Society for Surgery of the Hand) [Find a Hematologist](#) (American Society of Hematology) [Find a Neurologist](#) (American Academy of Neurology) [Find a Pediatric Dentist](#) (American Academy of Pediatric Dentistry) [Find a Pediatrician or Pediatric Specialist](#) (American Academy of Pediatrics) [Find a Periodontist](#) (American Academy of Periodontology) [Find a Physical Medicine & Rehabilitation Physician](#) (American Academy of Physical Medicine and Rehabilitation) [Find a Plastic Surgeon](#) (American Society of Plastic Surgeons) [Find a Podiatrist](#) (American Podiatric Medical Association) [Find a Thyroid Specialist](#) (American Thyroid Association) [Find a Urologist](#) (American Urological Association) [Find an ACFAS Physician](#) (American College of Foot and Ankle Surgeons) [Find an Allergist/Immunologist: Search](#) (American Academy of Allergy, Asthma, and Immunology) [Find an Endocrinologist](#) (Hormone Health Network) [Find an Eye M.D.](#) (American Academy of Ophthalmology) [Find an Interventional Radiologist](#) (Society of Interventional Radiology) [Find an Oncologist](#) (American Society of Clinical Oncology) [Find an Oral and Maxillofacial Surgeon](#) (American Association of Oral and Maxillofacial Surgeons) [Find an Orthopedic Foot and Ankle MD](#) (American Orthopedic Foot and Ankle Society) [Find an Otolaryngologist \(ENT\)](#) (American Academy of Otolaryngology--Head and Neck Surgery) [Finding an Eye Care Professional](#) (National Eye Institute) [GI Locator Service](#) (American Gastroenterological Association)

Other Healthcare Providers

[AMTA's Find a Massage Therapist](#) (American Massage Therapy Association) [Cancer Genetics Services Directory](#) (National Cancer Institute) [Find a Diabetes Educator](#) (American Association of Diabetes Educators) [Find a Genetic Counselor](#) (National Society of Genetic Counselors) [Find a Midwife](#) (American College of Nurse-Midwives) [Find a Nurse Practitioner](#) (American Academy of Nurse Practitioners) [Find a Physical Therapist](#) (American Physical Therapy Association) [Find a Professional: Online Directory of Audiology and Speech-Language Pathology Programs](#) (American Speech-Language-Hearing Association) [Find a Registered Dietitian](#) (Academy of Nutrition and Dietetics) [Find a Therapist](#) (Anxiety Disorders Association of America) [Find an Audiologist](#) (American Academy of Audiology) [Manual Lymphatic Drainage Therapists](#) (National Lymphedema Network) [National Register of Health Service Providers in Psychology](#) (National Register of Health Service Providers in Psychology) [NCCAOM: Find Nationally Certified Practitioners](#) (National Certification Commission for Acupuncture and Oriental Medicine) [Search for an Emergency Contraception Provider in the United States](#) (Princeton University, Office of Population Research)

Hospitals and Clinics—Specialized

[Accredited Birth Centers](#) (Commission for the Accreditation of Birth Centers) [Alzheimer's Disease Research Centers](#) (National Institute on Aging) [Cystic Fibrosis Foundation: Find a Chapter](#) (Cystic Fibrosis Foundation) [Cystic Fibrosis Foundation: Find an Accredited Care Center](#) (Cystic Fibrosis

Foundation) [Dialysis Facility Compare](#) (Centers for Medicare & Medicaid Services) [FDA Certified Mammography Facilities](#) (Food and Drug Administration) [Find a Free Clinic](#) (National Association of Free Clinics) [Find an Indian Health Service Facility](#) (Indian Health Service) [Find Treatment Centers](#) (American Cancer Society) [Genetics Clinic Directory Search](#) (University of Washington) [Locate a Sleep Center in the United States by Zip Code](#) (American Academy of Sleep Medicine) [MDA ALS Centers](#) (Muscular Dystrophy Association) [Mental Health Services Locator](#) (Substance Abuse and Mental Health Services Administration) [NCI Designated Cancer Centers](#) (National Cancer Institute) [Neurofibromatosis Specialists](#) (Children's Tumor Foundation) [Post-Polio Directory 2011: Post-Polio Clinics, Health Professionals, Support Groups](#) (Post-Polio Health International including International Ventilator Users Network) [Spina Bifida Clinic Directory](#) (Spina Bifida Association of America) [Substance Abuse Treatment Facility Locator](#) (Substance Abuse and Mental Health Services Administration) [Transplant Center Search Form](#) (BMT InfoNet) [U.S. NMDP Transplant Centers](#) (National Marrow Donor Program) [VA Health Care Facilities Locator & Directory](#) (Veterans Health Administration) [Where to Donate Blood](#) (AABB) [Where to Donate Cord Blood](#) (National Marrow Donor Program)

Other Healthcare Facilities and Services

[Alzheimer's Disease Resource Locator](#) (Fisher Center for Alzheimer's Research Foundation) [American College of Radiology Accredited Facility Search](#) (American College of Radiology) [APA District Branch / State Association Directory](#) (American Psychiatric Association) [Directory of Organizations \(Deafness and Communication Disorders\)](#) (National Institute on Deafness and Other Communication Disorders) [Dog Guide Schools in the United States](#) (American Foundation for the Blind) [Eldercare Locator](#) (Dept. of Health and Human Services) [Find a Hospice or Palliative Care Program](#) (National Hospice and Palliative Care Organization) [Find Services \(for People with Vision Loss\)](#) (American Foundation for the Blind) [Find Urgent Care Centers by State](#) (Urgent Care Association of America) [Genetic Testing Laboratory Directory](#) (University of Washington) [Home Health Compare](#) (Centers for Medicare & Medicaid Services) [Medicare: Helpful Contacts](#) (Centers for Medicare & Medicaid Services) [Muscular Dystrophy Association Clinics and Services](#) (Muscular Dystrophy Association) [National Foster Care and Adoption Directory Search](#) (Children's Bureau) [Nursing Home Compare](#) (Centers for Medicare & Medicaid Services) [Organizations That Offer Support Services](#) (National Cancer Institute) [Poison Control Centers](#) (American Association of Poison Control Centers) [Resources and Information for Parents about Braille](#) (American Foundation for the Blind) [State-Based Physical Activity Program Directory](#) (Centers for Disease Control and Prevention) [TSA Chapters in the USA](#) (Tourette Syndrome Association) [Violence against Women: Resources by State](#) (Dept. of Health and Human Services, Office on Women's Health) [Where to Find Hair Loss Accessories and Breast Cancer Products](#) (American Cancer Society)


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DATA DETAILS

Plan Tactics for Davis County – 2016 to 2018


Initial CHNA Health Needs Tactics, Year 3 of 3 - Starting 1/1/2016 to 12/31/2018							
	CHNA Health Areas of Need	T	"Specific Actions" to Address Community Health Need or "Reasons Why Hospital Will Not" Address Need	Identified Need Lead	Identified Partners	Timeframe	Hospital Resources (Hours)
1	Increase mental health care delivery (add providers, increase placement options and manage dual-diagnosis).	1	Create a Resource sheet (phone #, hours) to distribute and educate all potential access points for MH clients.	South Central Behavioral Health (SCBH), Davis County Hospital (DCH)	Law Enforcement	2016	Pediatric Provider
		2	Increase collaboration between services via Community. Coalition, South Central Behavioral Health and other community MH service providers	SCBH, DCH	Law Enforcement, Representative from Courts	2017	
		3	Educate community of MH services	SCBH, DCH	SCBH, DCH	2017	
		4	Recruit Mental Health provider(s) to meet specific -inventory need identified.	DCH		2018	
2	Expand senior care options.	1	Analyze and Improve Home Health Care solutions in Davis County.	ABCM (Kristal Phillips), DCH (Tierre Chickering)	Bloomfield Care Center, Davis County Hospital	2016	Time, Funding
3	Improve care coordination between county providers and agencies.	1	Make all providers aware and encourage them to register with Service Registry (211)	Community Coalition Group	Patients, Senior Care Agencies, Providers in Area	2016	IT, Time
		2	Create a comprehensive medical provider registry for Davis County	Community Coalition Group	Patients, Senior Care Agencies, Providers in Area	2017	
4	Provide access to oncology services.	1	Hospital will review possibility of adding oncology services.	DCH			
5	Improve teen health (drinking, abuse, pregnancy, etc.).	1	Improve education on drinking and drug abuse.	School Nurse, Public Health, School Counselors	DHS, Public Safety, Pediatrician/Providers, Child Abuse Council, SIEDA	On-Going	Mental Health Services
6	Expand healthcare transportation.	1	Better Access & Hours for transportation	Gloria Garner, Patricia Quail	10 15 Transit	2016	Time
		2	Additional Drivers for transportation	Gloria Garner, Patricia Quail	TMS		
7	Expand rural health care delivery access (miles, cost, hours).	1	Hospital continues to work on increasing providers to expand specialty and primary care services.	DCH	DCH	2018	Staff Hours

Iowa Hospital Data (Secondary Research)




Patient Type: Inpatient
Template Name: Market and Facility
Report Name: Inpatient Marketshare 2014 - Q218
Facility: Davis County Hospital
Market Area: Surrounding Counties
Time Period: 2014 Q1 through 2018 Q2

State/County/Zip	Surrounding Counties					Davis County Hospital					Market Share
	Discharges	% of Col.	LOS	ALOS	Avg. Charges	Discharges	% of Col.	LOS	ALOS	Avg. Charges	
Iowa											
Davis											
52537	3,004	8.2	14,001	4.66	\$32,658	806	69.7	3,351	4.16	\$16,661	26.8
52552	273	0.7	1,520	5.57	\$41,765	48	4.1	176	3.67	\$18,711	17.6
52560	267	0.7	1,150	4.31	\$32,998	35	3.0	137	3.91	\$15,941	13.1
52584	124	0.3	501	4.04	\$29,974	25	2.2	75	3.00	\$14,221	20.2
Davis Total	3,668	10.0	17,172	4.68	\$33,269	914	79.0	3,739	4.09	\$16,681	24.9



Patient Type: Outpatient
Place of Service: ER
Template Name: Market and Facility
Report Name: Outpatient ER Marketshare 2014-Q218
Facility: Davis County Hospital
Market Area: Surrounding Counties
Time Period: 2014 Q1 through 2018 Q2

State/County/Zip	Surrounding Counties			Davis County Hospital			Market Share
	Measures	% of Col.	Avg. Charges	Measures	% of Col.	Avg. Charges	
Iowa							
Davis							
52537	10,625	7.5	\$2,537	8,132	60.7	\$2,149	76.5
52552	669	0.6	\$2,783	589	4.4	\$2,236	67.8
52560	772	0.5	\$2,496	434	3.2	\$2,180	56.2
52584	439	0.3	\$2,421	314	2.3	\$1,961	71.5
Davis Total	12,705	9.0	\$2,547	9,469	70.7	\$2,151	74.5





Patient Type: Outpatient
Place of Service: Amb Surgery
Template Name: Market and Facility
Report Name: Outpatient Amb Surgery 2014 - Q218
Facility: Davis County Hospital
Market Area: Surrounding Counties
Time Period: 2014 Q1 through 2018 Q2

State/County/Zip	Surrounding Counties			Davis County Hospital			Market Share
	Measures	% of Col.	Avg. Charges	Measures	% of Col.	Avg. Charges	
Davis							
52537	4,952	9.1	\$9,486	1,465	55.4	\$6,026	29.6
52552	477	0.9	\$9,064	117	4.4	\$5,944	24.5
52560	360	0.7	\$9,589	99	3.7	\$5,671	27.5
52584	241	0.4	\$9,407	59	2.2	\$6,025	24.5
Davis Total	6,030	11.1	\$9,457	1,740	65.8	\$6,000	28.9

State/County/Zip	Surrounding Counties			Davis County Hospital			Market Share
	Measures	% of Col.	Avg. Charges	Measures	% of Col.	Avg. Charges	
Iowa							
Davis							
52537	42,583	12.4	\$969	30,588	66.2	\$586	71.8
52552	3,728	1.1	\$1,059	2,406	5.2	\$686	64.5
52560	2,932	0.9	\$928	1,410	3.1	\$603	48.1
52584	2,102	0.8	\$876	1,270	2.7	\$630	60.4
Davis Total	51,345	15.0	\$969	35,674	77.2	\$595	69.5

State/County/Zip	Surrounding Counties			Davis County Hospital			Market Share
	Measures	% of Col.	Avg. Charges	Measures	% of Col.	Avg. Charges	
Iowa							
Davis							
52537	145	5.5	\$4,093	28	56.0	\$5,384	18.8
52552	9	0.3	\$3,985				
52560	16	0.6	\$6,852	2	4.0	\$4,225	12.5
52584	3	0.1	\$8,677	1	2.0	\$3,112	33.3
Davis Total	177	6.5	\$4,397	31	62.0	\$5,235	17.5

State/County/Zip	Surrounding Counties			Davis County Hospital			Market Share
	Measures	% of Col.	Avg. Charges	Measures	% of Col.	Avg. Charges	
Iowa							
Davis							
52537	5,050	15.3	\$1,554	4,148	66.8	\$1,476	82.1
52552	514	1.6	\$1,517	388	6.3	\$1,530	75.5
52560	350	1.1	\$1,348	227	3.7	\$1,345	64.9
52584	266	0.8	\$1,239	203	3.3	\$1,231	76.3
Davis Total	6,180	18.7	\$1,526	4,966	80.0	\$1,464	80.4

							
Patient Type:	Outpatient						
Place of Service:	Other outpatient						
Template Name:	Market and Facility						
Report Name:	Outpatient Marketshare 2014 - Q218						
Facility:	Davis County Hospital						
Market Area:	Surrounding Counties						
Time Period:	2014 Q1 through 2018 Q2						
State/County/Zip	Surrounding Counties			Davis County Hospital			Market Share
	Measures	% of Col.	Avg. Charges	Measures	% of Col.	Avg. Charges	
Iowa							
Davis							
52537	8,549	11.8	\$468	5,274	57.6	\$203	61.7
52552	712	1.0	\$703	434	4.7	\$170	61.0
52560	596	0.8	\$323	284	3.1	\$166	47.7
52584	395	0.5	\$406	207	2.3	\$181	52.4
Davis Total	10,252	14.1	\$473	6,199	67.7	\$198	60.5

CHNA Survey Detailed Survey Questions (Primary Research)

HEALTHCARE PERCEPTIONS & SATISFACTION for DAVIS COUNTY, IOWA

The leadership of Davis County Hospital, Davis County Community Care Coalition, and Davis County Public Health invite you to help improve the care and services of our community. Please help by answering these few short questions. Please answer honestly and your responses will be kept confidential.

* Required

1. In general, how would you rate the overall quality of the healthcare delivered to your community? *

Mark only one oval per row.

	Very Good	Good	Fair	Poor	Very Poor
Overall quality of care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. How would you rate the following healthcare services? (Please select one box for each row)

Mark only one oval per row.

	Very Good	Good	Fair	Poor	Very Poor	Not Applicable (NA)
Ambulance Service	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chiropractor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dentists	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eye Doctor / Optometrist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family Planning Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Home Care Agencies / Home Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmacy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School Nurse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teen health (drinking, abuse, safety, pregnancy)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. How would you rate the following healthcare services? (Please select one box in each row)

Mark only one oval per row.

	Very Good	Good	Fair	Poor	Very Poor	Not Applicable (NA)
Emergency Room	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family Practice (clinic) services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospital services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nursing Home services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outpatient services (lab, radiology, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Davis County Public Health services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specialist Physician care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. In your opinion, how much of a problem are the following causes of poor health in your community? (Please select on box for each row)

Mark only one oval per row.

	Not a problem	Somewhat of a problem	Major problem	Don't know
Cancer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diabetes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance Abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Heart Disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual Transmitted Diseases	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Disorders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obesity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pneumonia / Flu	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respiratory Disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stroke	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suicide	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trauma	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. Other health problems in your community not listed above?

6. How do you feel your local health care providers are doing in addressing the health needs of the following age groups? (Please select one box for each row)

Mark only one oval per row.

	Very Good	Good	Fair	Poor	Very Poor	Not Applicable (NA)
Infants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Age 1 - 12	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Age 13 - 17	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Age 18 - 25	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Age 26 - 44	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Age 45 - 64	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Age 65 - 84	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Over 85	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. In your opinion, what areas need additional education or attention in our community? (Please select all that apply)

Check all that apply.

- Abuse / Violence
- Aging (Dementia)
- Alcohol
- Alternative Medicine
- Child Care
- Chronic Diseases (example Diabetes or Heart Failure)
- Family Planning / Birth Control
- Lead Exposure
- Mental Illness
- Neglect
- Nutrition
- Obesity
- Ozone / Air Quality
- Pain Management
- Poverty
- Preventative Health
- Sexually Transmitted Diseases
- Suicide
- Teen health (drinking, abuse, safety, pregnancy)
- Tobacco Use
- Uninsured / Underinsured
- Vaccinations
- Water Quality
- Wellness Education
- Other: _____

8. Does our community need any additional healthcare providers?

Mark only one oval.

- Yes
- No

9. If you feel more providers need to be added, please specify what type is needed:

10. Are there health care services in your community or neighborhood that you feel need to be improved and or changed? (Please be specific)

11. Over the past 2 years, did you or someone from your household, receive health care services outside of your county? *

Mark only one oval.

- Yes Skip to question 12.
- No Skip to question 14.

Additional County Services

12. Please list the health care services you or your household member(s) have received outside of your county.

13. If offered, would you have received the services locally?

Mark only one oval.

- Yes
- No
- Maybe

CHANGES TO HEALTH SERVICES

Over the last few years, Davis County Hospital, Davis County Community Care Coalition, and Davis County Public Health have been working to provide ongoing valuable services to the community.

14. Please rate the following areas for your community

Mark only one oval per row.

	Not a problem anymore	Somewhat a problem	Still a problem
Increasing the availability of mental health services (providers, options, and management options)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Expanding senior care options	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Improving the coordination between providers and other agencies in the communities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Providing access to specialty services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Improving teen health (drinking, abuse, pregnancy, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Expanding healthcare transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Expanding rural health care delivery and access	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. Which health needs are most pressing TODAY and are in need of improvement?

Check all that apply.

- Wellness options
- Public awareness of healthcare services
- Mental Health / Counseling services
- Public transportation for healthcare
- After hours pharmacy services
- Nutritional education
- Home health / Hospice options
- Dental services
- Obstetrics services
- Access to urgent care services
- Healthy eating options
- Cancer services
- Chronic disease prevention (example diabetes or heart failure)
- Elder assistance programs
- Family assistance programs
- Care transitions (movement from one healthcare setting to another or home)
- Other: _____

16. How would you rate each of the following in your community?

Mark only one oval per row.

	Very Good	Good	Fair	Poor	Very Poor	Not aware of the services
Caregiver training programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Early childhood development programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency preparedness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food and nutrition services (WIC programs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health screenings access	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obesity prevention and treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Spiritual health support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prenatal / child health programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexually transmitted disease testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance use and treatment programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco prevention / cessation programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Violence prevention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Women's wellness programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

YOUR HEALTH

17. In general, how would you best describe your health? (Please select only one)

Mark only one oval per row.

	Very Good	Good	Fair	Poor	Very Poor
Description of your personal health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. Compared to a year ago, how would you rate your overall health now?

Mark only one oval per row.

	Much better than a year ago	About the same	Much worse than a year ago
Change in health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19. Does your household have a provider you use for primary care (clinic visits)?

Mark only one oval.

- Yes
- No

20. If yes, please give the physician's name, specialty, and city

21. **Have you had a physical in the past 12 months?**

Mark only one oval.

- Yes
 No

22. **If you have not had a physical, please provide the specific reason.**

23. **Do you follow these health practices? (Please select one box for each row)**

Mark only one oval per row.

	Yes	No	Not Applicable (NA)
Do you get 2.5 hours of moderately intense physical activity each week	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If female, do you have a pap smear every other year	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If female and over 40, do you have annual mammograms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If male and over 50, do you have annual an prostate exam	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If over 50, have you had a colonoscopy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

24. **Please complete sentence below - "Are you..."**

Mark only one oval per row.

	Yes	No	Not Applicable (NA)
Eating right (Daily, 5 servings of fruits, vegetables, wheat)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using tobacco products weekly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exercising 2-3 times weekly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consuming alcohol (more than 1 drink daily)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Receiving an annual flu shot	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

25. Please mark if you have ever felt...

Mark only one oval per row.

	Yes	No
In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food?	<input type="radio"/>	<input type="radio"/>
In the last 12 months, has your utility company shut off your service for not paying your bills?	<input type="radio"/>	<input type="radio"/>
Are you worried that in the next 2 months, you may not have housing?	<input type="radio"/>	<input type="radio"/>
Do problems getting child care make it difficult for you to work or study? (leave blank if you do not have children)	<input type="radio"/>	<input type="radio"/>
In the last 12 months, have you needed to see a doctor, but could not because of cost?	<input type="radio"/>	<input type="radio"/>
In the last 12 months, have you ever had to go without health care because you didn't have a way to get there?	<input type="radio"/>	<input type="radio"/>
Do you ever need help reading hospital materials?	<input type="radio"/>	<input type="radio"/>
Are you afraid you might be hurt in your apartment building or house?	<input type="radio"/>	<input type="radio"/>
If you checked YES to any boxes above, would you like to receive assistance with any of these needs?	<input type="radio"/>	<input type="radio"/>

ABOUT YOU

Please provide a bit more information about who you are so we can better serve the community.

26. What is your age?

Mark only one oval.

- 17 and under
- 18 to 25
- 26 to 44
- 44 to 64
- 65 to 84
- 85 and over

27. Your gender

Mark only one oval.

- Female
- Male
- Prefer not to say

28. How would you identify yourself?

Mark only one oval.

- Caucasian / White
- African American / Black
- Latino / Hispanic
- Indian / Native Alaskan
- Asian / Pacific Islander
- Multicultural / Multiracial
- Other: _____

29. How would you describe your household? (Please select all that apply)

Check all that apply.

- Single
- Married
- Parent / Gardian with children at home
- Married with children no longer at home
- Divorced
- Other: _____

30. Regarding you health insurance coverage, what type of health coverage is your primary plan? (Choose one)

Mark only one oval.

- Private Insurance you purchased
- Covered by employer (employer pays total cost)
- Partially covered by employer (you and employer share cost)
- Medicare
- Medicaid
- No coverage (uninsured)

31. For reporting purposes, are you involved in or are you a... (Please check all that apply)

Check all that apply.

- Board member (local)
- Business / Merchant
- Civic club member
- Clergy / Congregational Leader
- College / University student
- Construction / Housing / Builder
- Consumer of healthcare services
- Dentist / Healthcare Provider
- Economic Development
- Education official / Teacher
- Farmer / Rancher
- Health Department
- Hospital or Clinic employee
- Insurance industry
- Labor
- Law Enforcement
- Parent / Caregiver
- Veteran
- Other: _____

32. What is your home 5 digit zip code? *

THANK YOU

If filling this with a paper form, please return the complete survey with enclosed business reply envelope.

33. Please provide today's date.

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Town Hall Meeting Outcomes (Primary Research)

Population Health

- **Obesity / Diabetes**
 - Obesity and nutrition
 - Obesity: restaurants lower portion sizes
 - Obesity Grocery store tours? Cardiac rehab to educate, children's tours
- **Chronic Disease (other)**
 - Oncology services (hospital services)
- **Teen health**
 - Drug/opioid education, activities (obesity)
 - STD's, mental health (depression, anxiety, suicide)
 - Access to financial assistance, sex education
 - Need funding for children's mental health
 - Preventative health, nutrition, exercise
- **Drug/alcohol/Substance abuse**
 - Substance use- meth specifically
- **Mental health access available**
 - Access to MH providers especially when in time of crisis
 - Mental health access, education and coordination
 - Mental illness/health
 - Emotional impacts of illness (children with cancer, chronic disease)
 - Mental illness – school age
- **Public awareness of services**
 - Preventative health
 - Education with services
 - Health screenings, business screenings (education/services)
 - Health coaches
- **Child care**
- **Aging & elder assistance**
- **Working with Amish to higher education**

Internal Hospital/Public Health

- **Urgent care**
- **After hours pharmacy access**
- **Insurance and Payments**
 - SHIP (information and insurance program)
 - Underinsured
- **Teen health**
 - Screening mental health (parents/confident)
 - Child mental health therapist and prescribers
 - *possible through University of Iowa's grants
- **Providers and services**
 - Special Providers/ F.P. recruitment
 - Bilingual provider
 - Cancer/oncology
 - Services, education

- Substance abuse provider/services
- Tele-psychiatry availability
 - Looking at mental health prescriber for meds
- **Patient portal (records)**
- **Preventative health**
 - Discharge planning- Public following/ health coaches
 - Wellness screening
 - Community programs/ wellness (host, available) partner
 - Support Groups and Education
 - Diabetes education group
 - Nutrition
 - Aging/dementia
- **Marketing** of existing resources- as it relates to the “public awareness of services”
 - Community coalition group
 - More variety discounted screenings – advertised
 - Public health: knowing what services provided
 - The more we can get people to visit hospital without doctor visits

Community & Capacity Needs

- **Community (County) Coalition**
 - Resource direct awareness/knowledge about participation
 - Funding sources for collaboration
- **Teen health**
 - Hotline (available)
 - Social teen health- more organized activities w/transportation
- **Service awareness-** avail. (around county)
 - Pharmacy needs/hours (Medication Reconciliation between entities)
 - Public transportation
 - Transportation to get kids to & from activities
 - Marketing of available transportation
 - More senior housing options (waiting list)
 - Aging (dementia) – BCC has hourly/daily respite
- **Wellness** – Within the communities (county)
 - Walks/bike rides- begin at early ages
 - More exercise classes offered at Mutchler center & indoor pool
 - AA/NA meetings- alcohol abuse, drinking/driving
 - Obesity education services
 - Obesity, having 1-2 point of contact person to point others to right resources
 - Farmer’s market/gardening/ISU extension/schools-nutrition (obesity) (build a nutrition coalition) Mari Melmen
 - High-quality low-cost foods/canning workshops

Community Oriented Education Wellness & Support

- **Education**
 - Speakers “Stop the bleed”,
 - Opioid
 - CPR
 - Preventative health education/services
 - Children: Car seats, helmets

- Community education in March to educate on programs, i.e. Scouts, 4-H, youth track & cross country, football,
- Sex trafficking (monthly awareness avail)
- Abuse/violence education: what does it look like- how can we educate?
- **Community wellness and Preventative health**
 - Nutrition
 - Resume cooking club for children
 - Dietician in school (share with Hospital) HyVee Pharmacy
 - Shared recipes in newspaper
 - Obesity and nutrition
 - Teen health, support groups, pregnancy
 - Failing health
 - Wellness and walks
 - Discounts/scholarships for low income for REC center
 - Domestic violence
 - Child abuse-sexual abuse/trafficking,
 - Elder abuse and dementia
 - Child health specialty clinics- 3-year HRSA grant to do this
 - Substance abuse, teen health, mental illness,
 - Mental health solutions training for crisis mental health intervention (for educators) for schools-
 - “Educators”- what does specific mental health diagnosis look like and how to handle-
 - Region will pay for- 2-day training- Jennifer has talked to presenters and they will reach out to Dan Maedar
- **Support within Community**
 - Awareness of services in communities (county)
 - Marketing of existing services and transportation
 - Papers involved
 - Patient family involved
 - One-stop-shop for community information/resources
 - Access to information, education, and coordination between entities
 - Training for providers- Increase Diagnosis- diabetics and Mental Health interventions
 - Insurance- Education hotlines
 - Partnership with law enforcement and rotary, etc. to provide DARE to 9th grade

CONTACT INFORMATION AND QUESTIONS

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-----End of Report-----