



# Community Health Needs Assessment Decatur County Hospital – an affiliate of MercyOne Decatur County, Iowa



*Community Health Centers  
of Southern Iowa*  
an iowahealthcenter



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*Decatur County*  
**PUBLIC HEALTH**  
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## May 2019

VVV Consultants LLC  
Olathe, KS

# Community Health Needs Assessment

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# I. Executive Summary

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# I. Executive Summary

## Decatur County Hospital – an affiliate of MercyOne – Decatur County, IA - 2019 Community Health Needs Assessment (CHNA) Wave #3

Creating healthy communities requires a high level of mutual understanding and collaboration among community leaders. The development of this assessment brings together community health leaders and providers, along with the local residents, to research and prioritize county health needs and document community health delivery success. This health assessment will serve as the foundation for community health improvement efforts for the next three years.

Decatur Co, IA previous CHNA was completed in 2016. (Note: The Patient Protection and Affordable Care Act (ACA) require not-for-profit hospitals to conduct a CHNA every three years and adopt an implementation strategy to meet the needs identified by the CHNA). Wave #3 Decatur County CHNA assessment began January 2019 and was facilitated / created by VVV Consultants, LLC (Olathe, KS) staff under the direction of Vince Vandehaar, MBA.

**Important community CHNA Benefits** for both the local hospital and the health department, are as follows: 1) Increases knowledge of community health needs and resources 2) Creates common understanding of the priorities of the community’s health needs 3) Enhances relationships and mutual understanding between and among stakeholders 4) Provides a basis upon which community stakeholders can make decisions about how they can 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 6) Creates opportunities for collaboration in delivery of services to the community and 7) Provides guidance to the hospital and local health department for how they can align their services and community benefit programs to best meet needs, and 8) fulfills Hospital “Mission” to deliver quality health care.

### a) County Health Area of Future Focus

#### Decatur County CHNA Town Hall - “Community Health Improvements Needs”

2019 CHNA Health Priorities - Decatur County (IA)				
CHNA Wave #3 Town Hall (22 Attendees, 88 Votes)				
Decatur County Hospital PSA				
#	Community Health Needs to Change and/or Improve	Votes	%	Accum
1	Economic Development / Employment Readiness	17	19.3%	19.3%
2	Substance Abuse (Alcohol / Drugs)	13	14.8%	34.1%
3	Mental Health (Counseling / Therapists / Treatments)	10	11.4%	45.5%
4	Child Care Services	9	10.2%	55.7%
5	Eye Doctors	7	8.0%	63.6%
6	Visiting Specialists (OBGYN, NEU, RHE, ORTH, PEDS)	6	6.8%	70.5%
7	Public Healthcare Perception (Encourage patients to seek care in Decatur Co.)	6	6.8%	77.3%
8	Healthcare Transportation	5	5.7%	83.0%
<b>Total Votes:</b>		<b>88</b>	<b>100.0%</b>	
Other Items receiving votes: Suicide, Obesity (Nutrition / Exercise), Primary Care, Medicaid Enrollment, Housing, Amish (No Insurance or Vaccinations), Poverty, Dentists.				

## b) Town Hall CHNA Findings: Areas of Strengths

### Decatur County CHNA Town Hall - “Community Health Areas of Strengths”

Decatur County - Community Health Strengths			
#	Topic	#	Topic
1	Collaboration in Community	7	Nutrition / Wellness support services for Food Insecurity
2	ER Services	8	Pharmacy 340B Program
3	Extended Clinic Hours	9	Public Health Services
4	Facilities	10	School Nurses
5	Mental Health Access	11	Senior Life Solutions
6	New Providers	12	Summer Outdoor Activities

### Key CHNA Wave#3 Secondary Research Conclusions are as follows:

**IOWA HEALTH RANKINGS:** According to the 2018 Robert Wood Johnson County Health Rankings, Decatur County IA was ranked 97<sup>th</sup> in Health Outcomes, 94<sup>th</sup> in Health Factors, and 53<sup>rd</sup> in Physical Environmental Quality out of the 99 Counties.

**TAB 1.** Decatur County’s population is 7,950 (based on 2017), with a population per square mile (based on 2010) of 15.9 persons. Six percent (6.4%) of the population is under the age of 5 and 19.4% is over 65 years old. Hispanic or Latinos make up 2.9% of the population and there are 6.4% of Decatur County citizens that speak a language other than English at home. In Decatur County, children in single parent households make up 29%. There are 517 Veterans living in Decatur County.

**TAB 2.** The per capita income in Decatur County is \$21,110, and 17.1% of the population is in poverty. There is a severe housing problem of 15%. There is an unemployment rate of 3.3%. Food insecurity is high at 15%, and limited access to a store (healthy foods) at 4%. 25% percent of individuals have a long commute to work.

**TAB 3.** Children eligible for a free or reduced-price lunch is at 62% and 86% of students graduate high school while 21.5% of students get their bachelor’s degree or higher in Decatur County.

**TAB 4.** The percent of births where prenatal care started in the first trimester is 70.5%. 27.9% of births in Decatur County occur to unmarried women. Births where mothers have smoked during the pregnancy is at high at 21.6% and the percent of babies up to 2 years old that receive vaccines is only 56%.

**TAB 5.** There is one primary care physician per 2,740 people in Decatur County. Patients who gave their hospital a rating of 9 or 10 out 10 are 85% and there are 83% of patients who reported Yes, They Would Definitely Recommend the Hospital.

**TAB 6.** Medicare population getting treated for depression in Decatur County is 12%. There are 3.7 days out of the year that are poor mental health days. Decatur County has a 54.2 opioid prescription rate out of 100 prescriptions written in 2017.

**TAB 7.** Thirty-seven percent of adults in Decatur County are obese (based on 2014), with 29% of the population physically inactive. 19% of adults drink excessively and 18% smoke. Hypertension risk is at 49%, while Hyperlipidemia is at 26.5%. Osteoporosis is 3.7% while Heart Failure (13.6%) and Atrial Fibrillation (9.3%) are higher than the comparative norm.

**TAB 8.** The adult uninsured rate for Decatur County is 8%.

**TAB 9.** The life expectancy rate in Decatur County is 75.5 for Males and 81.2 for Females. Heart Disease Mortality rate (per 100K) is high at 196.7 and the Cancer Mortality rate is high at 215.2. The age-adjusted Chronic Lower Respiratory Morality rate is high at 54.5, compared to the norm.

**TAB 10.** 77% of Decatur County has access to exercise opportunities and as high as 91% monitor diabetes. 51% of women in Decatur County get annual mammography screenings (based on 2014).

**Key 2018 Community Feedback Conclusions: Stakeholder feedback from residents, community leaders and providers (N=133) provided the following community insights via an online perception survey:**

- Using a Likert scale, 70.7% of Decatur County stakeholders would rate the overall quality of healthcare delivery in their community as either Very Good or Good.
- Decatur County stakeholders are satisfied with the following services: Ambulance Services, Chiropractors, Home Health, Hospice, Outpatient Services, Pharmacy, Physician Clinics, Public Health, School Nurse, and Specialists.
- When considering past CHNA needs: Poverty, Mental Health Services, Drugs, Economic Development, Obesity / Nutrition Education, and Healthcare Transportation came up.

CHNA Wave #3		Decatur Co N=133			
Past CHNAs health needs identified		Ongoing Problem			Pressing
#	Topic	Votes	%	Trend	RANK
1	Poverty	61	55.5%		3
2	Mental Health Services	57	51.8%		1
3	Drugs	55	50.0%		2
4	Economic Development	51	46.4%		4
5	Obesity / Nutrition Education	50	45.5%		6
6	Healthcare Transportation	47	42.7%		5
7	Eye Doctors	44	40.0%		9
8	Youth Wellness Programs	43	39.1%		8
9	Pediatric Mental Health	38	34.6%		7
10	DHS Office Access	30	27.3%		13
11	Preventative Healthcare	29	26.4%		11
12	Adult Day Care Services	27	24.6%		12
13	Access to Primary Care	25	22.7%		10
14	Tobacco	25	22.7%		15
15	Amish Healthcare Services	10	9.1%		14

# II. Methodology

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## II. Methodology

### a) CHNA Scope and Purpose

The federal Patient Protection and Affordable Care Act (ACA) requires that each registered 501(c)3 hospital conduct a Community Health Needs Assessment (CHNA) at least once every three years and adopt a strategy to meet community health needs. Any hospital who has filed a 990 is required to conduct a CHNA. IRS Notice 2011-52 was released in late fall of 2011 to give notice and request comments.

#### **JOB #1: Meet/Report IRS 990 Required Documentation**

1. A description of the community served by the facility and how the community was determined;
2. A description of the process and methods used to conduct the CHNA;
3. The identity of any and all organizations with which the organization collaborated and third parties that it engaged to assist with the CHNA;
4. A description of how the organization considered the input of persons representing the community (e.g., through meetings, focus groups, interviews, etc.), who those persons are, and their qualifications;
5. A prioritized description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and
6. A description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

Section 501(r) provides that a CHNA must take into account input from persons who represent the broad interests of the community served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: Government agencies with current information relevant to the health needs of the community and representatives or members in the community that are medically underserved, low-income, minority populations, and populations with chronic disease needs. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility's defined community (e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc.).

#### **JOB #2: Making a CHNA Widely Available to the Public**

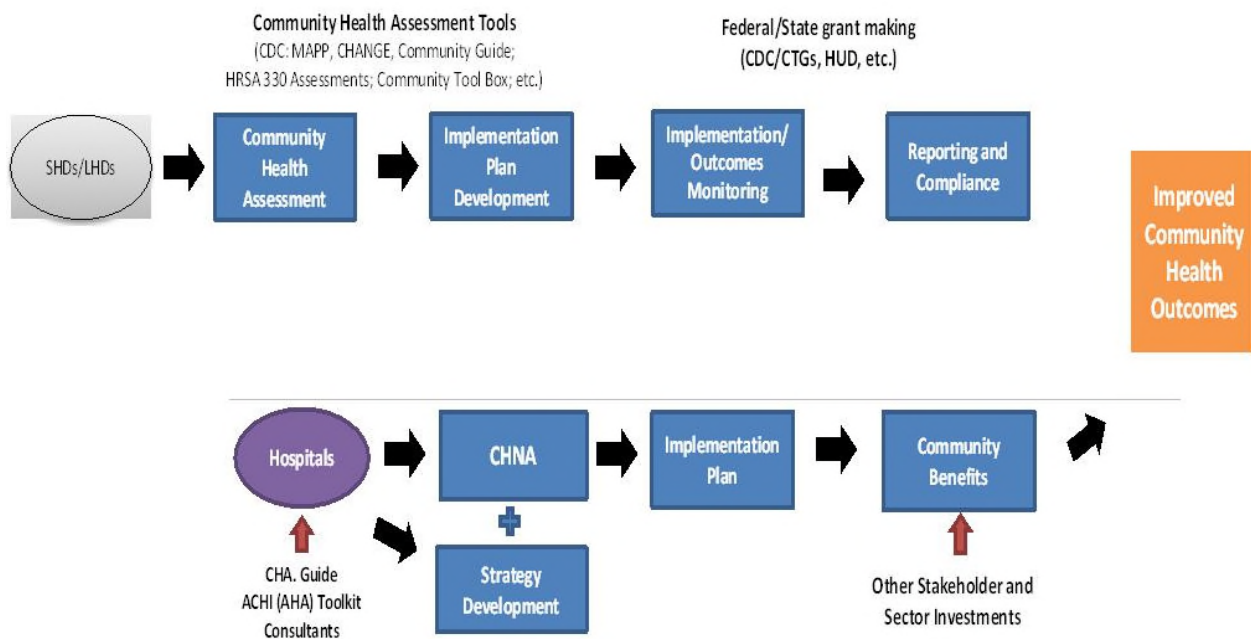
The Notice provides that a CHNA will be considered to be "conducted" in the taxable year that the written report of the CHNA findings is made widely available to the public. The Notice also indicates that the IRS intends to pattern its rules for **making a CHNA "widely available to the public"** after the rules currently in effect for Form 990. Accordingly, an organization would make a **facility's written report** widely available by posting the final report on its website either in the form of (1) the report itself, in a readily accessible format or (2) a link to another organization's website, along with instructions for accessing the report on that website. *The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.*



### **JOB #3: Adopt an Implementation Strategy by Hospital**

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. The Notice defines an “implementation strategy” as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it. A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

Great emphasis has been given to work hand-in-hand with leaders from hospitals, the state health department and the local health department. A common approach has been adopted to create the CHNA, leading to aligned implementation plans and community reporting.



## **IRS Notice 2011-52 Overview**

### Notice and Request for Comments Regarding the Community Health Needs Assessment Requirements for Tax-exempt Hospitals

#### **Applicability of CHNA Requirements to “Hospital Organizations”**

The CHNA requirements apply to “hospital organizations,” which are defined in Section 501(r) to include (1) organizations that operate one or more state-licensed hospital facilities, and (2) any other organization that the Treasury Secretary determines is providing hospital care as its principal function or basis for exemption.

#### **How and When to Conduct a CHNA**

Under Section 501(r), a hospital organization is required to conduct a CHNA for each of its hospital facilities once every three taxable years. ***The CHNA must take into account input from persons representing the community served by the hospital facility and must be made widely available to the public. The CHNA requirements are effective for taxable years beginning after March 23, 2012.*** As a result, a hospital organization with a June 30 fiscal year end must conduct an initial CHNA for each of its hospital facilities by June 30, 2013, either during the fiscal year ending June 30, 2013 or during either of the two previous fiscal years.

#### **Determining the Community Served**

A CHNA must identify and assess the health needs of the **community served** by the hospital facility. Although the Notice suggests that geographic location should be the primary basis for defining the community served, it provides that the organization may also take into account the target populations served by the facility (e.g., children, women, or the aged) and/or the facility’s principal functions (e.g., specialty area or targeted disease). *A hospital organization, however, will not be permitted to define the community served in a way that would effectively circumvent the CHNA requirements (e.g., by excluding medically underserved populations, low-income persons, minority groups, or those with chronic disease needs).*

#### **Persons Representing the Community Served**

Section 501(r) provides that a CHNA must take into account input from **persons who represent the broad interests of the community** served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: (1) government agencies with current information relevant to the health needs of the community and (2) representatives or members of medically underserved, low-income, and minority populations, and populations with chronic disease needs, in the community. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility’s defined community (e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc).

## Required Documentation

The Notice provides that a hospital organization will be required to separately document the CHNA for each of its hospital facilities in a **written report** that includes the following information: 1) a description of the community served by the facility and how the community was determined; 2) a description of the process and methods used to conduct the CHNA; 3) the identity of any and all organizations with which the organization collaborated and third parties that it engaged to assist with the CHNA; 4) a description of how the organization considered the input of persons representing the community (e.g., through meetings, focus groups, interviews, etc.), who those persons are, and their qualifications; 5) a prioritized description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and 6) a description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

## Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be **“conducted”** in the taxable year that the written report of the CHNA findings is made **widely available to the public**. The Notice also indicates that the IRS intends to pattern its rules for making a CHNA “widely available to the public” after the rules currently in effect for Forms 990. *Accordingly, an organization would make a facility’s written report widely available by posting on its website either (1) the report itself, in a readily accessible format, or (2) a link to another organization’s website, along with instructions for accessing the report on that website. The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.*

## How and When to Adopt an Implementation Strategy

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. **The Notice defines an “implementation strategy” as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need, or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it.** A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

Under the Notice, an implementation strategy is considered to be “adopted” on the date the strategy is approved by the organization’s board of directors or by a committee of the board or other parties legally authorized by the board to act on its behalf. Further, the formal adoption of the implementation strategy must occur by the end of the same taxable year in which the written report of the CHNA findings was made available to the public. For hospital organizations with a June 30 fiscal year end, that effectively means that the organization must complete and appropriately post its first CHNA no later than its fiscal year ending June 30, 2013, and formally adopt a related implementation strategy by the end of the same tax year. *This final requirement may come as a surprise to many charitable hospitals, considering Section 501(r) contains no deadline for the adoption of the implementation strategy.*

## IRS and Treasury Finalize Patient Protection Rules for Tax-Exempt Hospitals

ACCOUNTING TODAY 1/2/15

The Internal Revenue Service and the Treasury Department have issued **final regulations** under the Affordable Care Act to protect patients in tax-exempt hospitals from aggressive debt collection practices and to provide other rules for charitable hospitals.

Under the **final regulations**, each Section 501(c)(3) hospital organization is required to meet four general requirements on a facility-by-facility basis: establish written financial assistance and emergency medical care policies; limit the amounts charged for emergency or other medically necessary care to individuals eligible for assistance under the hospital's financial assistance policy; make reasonable efforts to determine whether an individual is eligible for assistance under the hospital's financial assistance policy before engaging in extraordinary collection actions against the individual; and conduct a community health needs assessment, or CHNA, and adopt an implementation strategy at least once every three years. The first three requirements are effective for tax years beginning after March 23, 2010 and the CHNA requirements are effective for tax years beginning after March 23, 2012.

The ACA also added a new Section 4959, which imposes an excise tax for failure to meet the CHNA requirements, and added reporting requirements. These final regulations provide guidance on the entities that must meet these requirements, the reporting obligations relating to these requirements and the consequences for failing to satisfy the requirements.

"Charitable hospitals represent more than half of the nation's hospitals and play a key role in improving the health of the communities they serve," wrote Emily McMahon, Deputy Assistant Secretary for Tax Policy at the U.S. Department of the Treasury, in a blog post Monday explaining the requirements. "But reports that some charitable hospitals have used aggressive debt collection practices, including allowing debt collectors to pursue collections in emergency rooms, have highlighted the need for clear rules to protect patients. For hospitals to be tax-exempt, they should be held to a higher standard. That is why the Affordable Care Act included additional consumer protection requirements for charitable hospitals, so that patients are protected from abusive collections practices and have access to information about financial assistance at all tax-exempt hospitals."

She noted that as a condition of their tax-exempt status, charitable hospitals must take an active role in improving the health of the communities they serve, establish billing and collections protections for patients eligible for financial assistance, and provide patients with the information they need to apply for such assistance. "These final rules adopt the same framework of proposed regulations but simplify the compliance process for charitable hospitals, while continuing to provide meaningful guidance on protections for patients and requirements to assess community health needs," she added.

Under the new rules, hospitals cannot charge individuals eligible for financial assistance more for emergency or other medically necessary care than the amounts generally billed to patients with insurance (including Medicare, Medicaid, or private commercial insurance). In addition, every tax-exempt hospital must establish and widely publicize a financial assistance policy that clearly describes to patients the eligibility criteria for obtaining financial assistance and the method for applying for financial assistance.

Charitable hospitals are also prohibited from engaging in certain collection methods (for example, reporting a debt to a credit agency or garnishing wages) until they make reasonable efforts to determine whether an individual is eligible for assistance under the hospital's financial assistance policy.

In addition, each charitable hospital needs to conduct and publish a community health needs assessment at least once every three years and disclose on the tax form that it files on an annual basis the steps it is taking to address the health needs identified in the assessment.

Many of the requirements have been in place since the Affordable Care Act passed in 2010, but in response to comments on the proposed regulations, the final rules also expand access to translations for patients, by lowering the threshold for having translations of financial assistance policies available from 10 percent of the community served as proposed, to five percent of the community served or population expected to be encountered by the hospital facility, or 1000 persons, whichever is less, according to McMahon. "The final rules also revise the notification requirements to maintain important protections for patients while making it easier for hospitals to comply with them," she wrote. "General notifications regarding a hospital's financial assistance policy must appear on bills and in the hospital. However, individual written and oral notifications of the hospital's financial assistance policy are now only required when a hospital plans to use extraordinary collections actions, such as reporting a debt to a credit bureau, selling the debt to a third party or garnishing wages."

While charitable hospitals must continue to make a good-faith effort to comply, the rules provide charitable hospitals with time to fully update their policies and programming to implement the changes. But if a charitable hospital fails to meet the consumer protection provisions required by the law, the hospital could have its tax-exempt status revoked. If a hospital fails to properly conduct a community health needs assessment or adopt an implementation strategy, an excise tax will apply, McMahon noted. "However, if a hospital fails to meet a requirement, but the failure is neither willful nor egregious, the hospital can correct and publicly disclose the error to have it excused, thus avoiding revocation of tax-exempt status, but the excise tax would still apply," she wrote.

# CHNA NEWS: IRS Makes First Revocation of Hospital Not-for-Profit Status Under 501(r)

RICH DALY, HFMA SENIOR WRITER/EDITOR

**Aug. 15, 2017**—Charity-care reporting requirements under the healthcare reform law may have gone into effect only last October, but already one hospital has lost its not-for-profit tax status as a result. The first-time tax-status revocation under Affordable Care Act (ACA) 501(r) requirements applied to a “dual-status” 501(c)(3) hospital operated by a “local county governmental agency” and was confirmed by a redacted copy of the [tax status letter](#), which was dated Feb. 14, 2017, and posted to the IRS website in August. Neither an IRS spokeswoman nor the redacted letter identified the hospital. Loss of the 501(c)(3) exemptions eliminates the ability of hospitals to use certain employee benefit plans; likely subjects hospitals to income, property, and other taxes; bars receipt of tax-deductible contributions; and disallows use of tax-exempt bonds.

The 501(r) requirements on performing community health needs assessments (CHNAs) and offering financial assistance became effective for tax years beginning on or after Dec. 29, 2015, meaning tax-exempt hospitals operating on the calendar had to be in compliance by Jan. 1, 2016, and those with a different fiscal-year end had to be in compliance by Oct. 1, 2016.

The only enforcement information previously released by the IRS was a June 2016 letter to Sen. Charles Grassley (R-Iowa), which noted that at that point the IRS had completed 2,482 compliance reviews under 501(r). Additionally, 163 hospitals were assigned for “examination” as a result of those compliance reviews, but no further actions were identified.

The ACA requires the IRS to review the community-benefit activities of about 3,000 tax-exempt hospitals at least once every three years. This was the first time that Keith Hearle, president, Verité Healthcare Consulting, LLC, Alexandria, Va., had heard of an instance in which a hospital lost its not-for-profit status over 501(r) requirements. He has heard of several others that incurred the \$50,000 excise tax for failing to meet the CHNA requirement.

“I would be surprised if it is a one-off,” said Hearle, who has been expecting more IRS enforcement after his own reviews indicated widespread hospital vulnerability due to poor compliance.

## Reasons for Revocation

Hospital 501(r) requirements include:

- Conducting a CHNA at least once every three years
- Making the CHNA publicly available on a website
- Adopting an implementation strategy to meet the needs identified in the CHNA
- Adopting a financial assistance policy and publicizing the policy, including by posting it on a website
- Limiting the amounts charged to individuals who are eligible for financial assistance
- Making individuals aware of the financial assistance policy prior to engaging in certain collection actions

Among the reasons for the IRS action against the county government hospital was its finding that the hospital did not make the CHNA widely available to the public through a website, although it had paper copies available on request. “The hospital indicated to the IRS that it might have acted on some of the recommendations included in the Implementation Strategy Report, but that a separate written implementation policy was neither drafted nor adopted,” the IRS letter stated.

Officials at the small rural hospital said they lacked the staffing to comply with 501(r) requirements. They also said they “really did not need, actually have any use for, or want their tax-exempt status under Section 501(c)(3),” according to the IRS letter. The hospital believed its tax-exempt status somehow prevented its involvement in certain payment arrangements. It had maintained 501(c)(3) status “only in case any liabilities arose relating to the prior management company that had originally obtained that status from the IRS.”

The IRS deemed the hospital’s failure “egregious” because its leaders had “neither the will, the resources, nor the staff to follow through with the” 501(r) requirements.

### Widespread Vulnerability

Industry advisers worry that many hospitals could be vulnerable to IRS enforcement—if not tax-status revocation—under the new requirements. “A lot of them just assume that what they have, in terms of policy and procedure, suffices under the final regulations and have not done a lot,” said Andrew Kloeckner, a partner for Omaha-based law firm Baird Holm.

Even hospitals that have taken steps to become compliant with the requirements can face downsides, including complications with their collection efforts, which in turn can delay cash flow, Kloeckner said.

Jan Smith, a tax senior manager in Crowe Horwath’s Healthcare practice, indicated that the likelihood of a similar penalty or the likelihood of this determination setting a precedent at other hospitals may be limited. This is due to the unusual position taken by the revoked hospital’s officials that they didn’t need or want charitable status (in addition to governmental status).

“If hospitals are making a good-faith effort to comply, I would be surprised if the IRS would revoke their tax status at this stage of 501(r) examinations,” Smith said in an interview. However, she is aware of several health systems that the IRS is seeking to penalize under the CHNA tax provision.

The IRS’s 501(r) compliance reviews include the agency’s analysis of hospital websites and “other information designed to identify the hospitals with the highest likelihood of non-compliance,” IRS Commissioner John Koskinen stated in his 2016 letter to Grassley.

Justin Lowe, senior manager with the Exempt Organizations Tax Practice at Ernst & Young, underscored that hospital websites are among the publicly available information that the IRS reviews. He urged hospitals to make sure that all required documents, including the CHNA and financial assistance policy, are on the website and easily findable. Insufficient approaches to 501(r) compliance, Kloeckner said, include instances when hospitals purchase financial assistance policy templates that are provided by a consultant and not submitted for legal review, potentially leaving audit vulnerabilities. Kloeckner also urged attention on practices and procedures outside of the policies.

Small government-operated hospitals are among the most vulnerable to enforcement, Hearle said, because they may not be required to file Form 990, which provides reminders about 501(r) compliance requirements. “It’s a group of hospitals I’m concerned about,” Hearle said.

Among the financial assistance requirements with which hospitals are most likely to struggle, Hearle said, is making available lists of physicians who are associated with the hospital and who utilize the same charity care policies.

“Patients obtaining charity care from a hospital want to find physician groups through which they can get the same charity care, as opposed to some group that doesn’t offer charity care,” Hearle said.

# Public Health Criteria:

## **Domain 1: Conduct and disseminate assessments focused on population health status and public health issues facing the community.**

Domain 1 focuses on the assessment of the health of the population in the jurisdiction served by the health department. The domain includes: systematic monitoring of health status; collection, analysis, and dissemination of data; use of data to inform public health policies, processes, and interventions; and participation in a process for the development of a shared, comprehensive health assessment of the community.

### **DOMAIN 1 includes 4 STANDARDS:**

- **Standard 1.1** - Participate in or Conduct a Collaborative Process Resulting in a Comprehensive Community Health Assessment
- **Standard 1.2** - Collect and Maintain Reliable, Comparable, and Valid Data That Provide Information on Conditions of Public Health Importance and on the Health Status of the Population
- **Standard 1.3** - Analyze Public Health Data to Identify Trends in Health Problems, Environmental Public Health Hazards, and Social and Economic Factors That Affect the Public's Health
- **Standard 1.4** - Provide and Use the Results of Health Data Analysis to Develop Recommendations Regarding Public Health Policy, Processes, Programs, or Interventions

### **Required CHNA Planning Process Requirements:**

- a. Participation by a wide range of community partners.
- b. Data / information provided to participants in CHNA planning process.
- c. Evidence of community / stakeholder discussions to identify issues & themes. Community definition of a "healthy community" included along with list of issues.
- d. Community assets & resources identified.
- e. A description of CHNA process used to set priority health issues.

### **Seven Steps of Public Health Department Accreditation (PHAB):**

1. Pre-Application
2. Application
3. Document Selection and Submission
4. Site Visit
5. Accreditation Decision
6. Reports
7. Reaccreditation



## **II. Methodology**

### **b) Collaborating CHNA Parties**

Working together to improve community health takes collaboration. Listed below is an in depth profile of the local hospitals and health department CHNA partners:

#### **Decatur County Hospital**

**1405 NW Church, Leon, Iowa 50144**

**Phone: (641) 446-4871**

**CEO: Mike Johnston**

#### **About:**

Decatur County Hospital (DCH) is an 11 bed Critical Access Hospital located in south central Iowa with 24 hr emergency services and a full range of professional services. Decatur County Hospital has proudly served Decatur County and surrounding areas since 1932. The current hospital is a newly built, state of the art, Critical Access Hospital located on the site of the original hospital. Use the links at the top of this website to learn more about our services.

#### ***Mission . . .***

To deliver exceptional care close to home.

#### ***Vision . . .***

To enhance lives and improve health.

#### ***Values . . .***

**Dedication**

**Compassion**

**Honesty**

#### **DCH Services:**

- Cafeteria
- Cardiopulmonary
- Emergency Services
- Infusion Therapy
- Laboratory
- Medical/Surgical Unit
- Radiology
- Rehabilitation Services
- Skilled Care (Swing Bed)
- Surgery

## **Decatur County Public Health and Homecare**

**207 NE Idaho St. Leon, IA 50144**

**Phone: (641) 446-6518**

**Administrator: Holly Rash, RN, BSN**

**Office Hours: Monday – Friday 8:00 a.m. to 4:30 p.m. (24 hour on-call availability)**

### **About:**

We provide comprehensive public health, home care, and environmental health services for residents of Decatur County.

The **agency mission** is to promote individual and community wellness through programs based on community assessment and collaboration with other health and community organizations.

Our **vision/purpose** is dedicated to the prevention of disease and to the promotion of health and well-being.

### **Services:**

- Home Health / Care
- Emergency Preparedness and Response
- Childhood Immunizations
- Massage Therapy
- Maternal Child Health and New Mom/Safe Baby Program
- Nutrition Program
- Tobacco Control Program
- Wellness Center
- WIC / Lead

## **Community Health Centers of Southern Iowa**

**302 NE 14<sup>th</sup> Street, Leon, IA 50144**

**Phone: (641) 446-2383**

**CEO: Samantha Cannon, MBA**

### **About:**

Community Health Centers of Southern Iowa (CHCSI) was funded as a Federally Qualified Health Center (FQHC) in Decatur County, Iowa, in 2005. Today, CHCSI manages eleven locations, including three primary care sites and eight sites providing behavioral health and substance abuse services, and one providing student health services. Oral health services added in January 2011, Mammography and Vision in 2016, and Pharmacy in 2017

**Iowa Counties:** Union, Ringgold, Clarke, Decatur, Lucas, Wayne, Monroe and Appanoose.

**Missouri Counties:** Harrison and Mercer.

### **Mission Statement**

Community Health Centers of Southern Iowa is committed to serving the uninsured and underinsured in and around our service area. The mission statement of the organization is:

*"CHCSI will make high quality health care accessible to everyone in our region."*

### **Services Provided:**

**CHCSI provides a wide variety of health care services, including, but not limited to:**

- Family Medicine
- Primary Health Care
- Preventive Health Care
- Well Child Care
- Immunizations
- Referrals to Specialists
- Tobacco Cessation
- Chronic Disease Management
- Mental Health Counseling
- Behavior Health
- Substance Abuse Counseling
- Emergency Dental Care
- Primary Dental Care
- Secondary Dental Care
- Dental Rehabilitation Services
- 3D Mammography
- Vision

CHCSI also offers a sliding fee program that allows us to provide services at a discounted rate based on family size and income for those that qualify!

Community Health Centers of Southern Iowa has ten convenient locations throughout south-central Iowa to meet your health care needs.

- Leon
- Lamoni
- Graceland University – Student Health Services
- Albia
- Centerville
- Chariton
- Corydon
- Ringgold County Courthouse (Mount Ayr)
- Princeton
- Osceola

## II. Methodology

### b) Collaborating CHNA Parties Continued Consultant Qualifications



#### **VVV Consultants LLC**

Company Profile: 601 N. Mahaffie, Olathe, KS 66061 (913) 302-7264

**Vince Vandehaar MBA, Principal Consultant & Adjunct** (913) 302-7264

[VVV@VandehaarMarketing.com](mailto:VVV@VandehaarMarketing.com)

Vince provides professional business consulting services to help healthcare organizations with business strategy, research and development. Specifically, Vince facilitates strategic planning, creates proven marketing plans/tactics, prepares IRS aligned community health needs assessments and conducts both qualitative and quantitative market research studies.

Vince started his consulting firm (VVV Consultants LLC) on 1/1/2009, after working for Saint Luke's Health System of Kansas City for 16 years. (Note: Saint Luke's Hospital of KC, SLHS's largest hospital, won the Malcolm Baldrige National Quality Award in March of 2003). Prior to his experience at Saint Luke's, Vince worked in the payor and insurance industry for Blue Cross and Blue Shield of Kansas City; Tillinghast, a Tower's Perrin Actuarial Consulting Firm; and Lutheran Mutual Life Insurance Company.

Vince also is an Adjunct Professor teaching BA, MBA & MHA classes part time 20% of his time at Avila, Rockhurst and/or Webster University (Strategic Planning, Marketing, MHA Capstone, Marketing Research, Sales & Social Media classes) and consults the remainder of his time.

Vince is a Malcolm Baldrige coach and a professional focus group moderator. He is actively involved in the national Society for Healthcare Strategy & Market Development (SHSMD), KHA/MHA Marketing Associations, KC Employee Benefit Professional Association, Healthcare Executives Kansas City, the American Marketing Association KC Chapter and is a SG2 advocate.

#### **Collaborating Support:**

Tessa Taylor BBA BA - VVV Consultants LLC  
Associate Consultant

## II. Methodology

### c) CHNA and Town Hall Research Process

Wave #3 Community Health Needs Assessment (CHNA) process began in January 2019 for Decatur County, Iowa to meet IRS CHNA requirements.

In January a meeting was called by Decatur Co IA to review possible CHNA collaborative options, partnering with Decatur County Public Health and Homecare and Community Health Centers of Southern Iowa. Note: VVV Consultants LLC from Olathe, KS was asked to facilitate this discussion with the following agenda: VVV CHNA experience, review CHNA requirements (regulations) and discuss CHNA steps/options to meet IRS requirements and to discuss next steps. Outcomes from discussion lead to Decatur County Hospital requesting VVV Consultants LLC to complete a CHNA IRS aligned comprehensive report.

#### VVV CHNA Deliverables:

- Document Hospital Primary Service Area - meets the 80-20 Patient Origin Rule.
- Uncover / document basic secondary research county health data, organized by 10 tabs.
- Conduct / report CHNA Community Check-in Feedback Findings (primary research).
- Conduct a Town Hall meeting to discuss with community secondary & primary data findings leading to determining (prioritizing) county health needs.
- Prepare & publish CHNA report which meets ACA requirements.

To ensure proper PSA Town Hall representation (that meets the 80-20 Patient Origin Rule), a patient origin three-year summary was generated documenting patient draw by zips as seen below:

Leon - Decatur County Hospital	Totals 17-14	2017 CY	2016 CY	2015 CY	2014 CY
<b>TOTAL Inpatients</b>	<b>862</b>	<b>179</b>	<b>187</b>	<b>222</b>	<b>274</b>
<b>Decatur Co IA</b>	<b>772</b>	<b>158</b>	<b>165</b>	<b>195</b>	<b>254</b>
% of Total IP	<b>89.6%</b>	<b>88.3%</b>	<b>88.2%</b>	<b>87.8%</b>	<b>92.7%</b>
Wayne	<b>40</b>	<b>10</b>	<b>6</b>	<b>12</b>	<b>12</b>
Ringgold	<b>24</b>	<b>6</b>	<b>7</b>	<b>7</b>	<b>4</b>
Clarke	<b>16</b>	<b>5</b>	<b>4</b>	<b>5</b>	<b>2</b>
Union	<b>5</b>		<b>3</b>	<b>2</b>	
<b>Other Counties</b>	<b>5</b>	<b>0</b>	<b>2</b>	<b>1</b>	<b>2</b>
<b>Source IHA</b>					

Specific CHNA roles, responsibility and project timelines are document by the following calendar.

<b>Decatur County Hospital / Decatur Co IA- CHNA Work Plan</b>			
<b>Wave #3 Project Timeline &amp; Roles 2019</b>			
<b>Step</b>	<b>Date</b>	<b>Lead</b>	<b>Task</b>
1	1/1/2019	VVV	Presented CHNA Wave #3 options to NW KS Alliance Network.
2	1/14/2019	Hosp	Selected CHNA Option C. Approved / signed VVV CHNA quote.
3	1/17/2019	Both	Conduct CHNA Kickoff Conference Call (Hospital / DOH leaders).
4	1/17/2019	VVV	Send out REQCommInvite Excel file. Hospital client to fill in PSA key stakeholder names, addresses and e-mail addresses.
5	1/21/2019	VVV	Request hospital client to complete zip counts (three year historical PSA IP / OP / ED / Clinic). Use ZipPSA_3yrPOrigin.xls Patient Origin file.
6	1/21/2019	VVV	Request hospital client to send IHA Patient Origin reports for CCH to document service area for FFY 16, 17, 18.
7	1/21/2019	VVV	Prepare CHNA stakeholder feedback online link. Send test link for hospital client to review. Prepare / release PR #1 and e-mail #1 drafts.
8	1/25/2019	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming CHNA work / online survey for hospital client to place. Request public to participate.
9	On or before 1/28/2019	VVV	Launch online survey to stakeholders - Due Date Thursday <b>2/28/19</b> . Hospital client will e-mail invite to participate to all stakeholders. Client will finalize Town Hall location / food.
10	Feb-March	VVV	Assemble and complete secondary research. Find and populate 10 TABS. Create Town Hall PowerPoint for presentation.
11	On or before 3/4/2019	VVV / Hosp	Prepare / release PR story to local media announcing upcoming Town Hall. VVV will mock up PR release.
12	On or before 3/4/2019	Hosp	Prepare and send out community Town Hall invite letter and place local advertisement.
13	3/12/2019	All	Conduct Town Hall practice conference call with hospital client to review Town Hall data and flow.
14	Tuesday March 19, 2019 (5:30-7:00pm)	VVV	Conduct CHNA Town dinner session 5:30 p.m.-7:00 p.m. at Leon Country Club. Review & discuss basic health data, online feedback and rank health needs.
15	Before 5/30/2019	VVV	Complete analysis. Release draft one and seek feedback from leaders at hospital client.
16	On or before 6/1/2019	VVV	Produce and release final CHNA report. Hospital client will post CHNA online.
17	TBD	TBD	Conduct hospital client Implementation Plan meeting with PSA leadership.
18	TBD	Hosp	Hold board meetings to discuss CHNA needs, create and adopt an Implementation Plan. Communicate CHNA plan to community.

To meet IRS aligned CHNA requirements and meet Public Health accreditation criteria stated earlier, a four-phase methodology was followed:

**Phase I—Discovery:**

Conduct a 30-minute conference call with the CHNA county health department and hospital clients. Review / confirm CHNA calendar of events, explain / coach clients to complete required participant database and schedule / organize all Phase II activities.

**Phase II—Qualify Community Need:**

A) Conduct secondary research to uncover the following historical community health status for the primary service area. Use Kansas Hospital Association (KHA), Vital Statistics, Robert Wood Johnson Foundation: County Health Rankings, etc. to document current state of county health organized as follows:

<b>TAB 1. Demographic Profile</b>
<b>TAB 2. Economic/Business Profile</b>
<b>TAB 3. Educational Profile</b>
<b>TAB 4. Maternal and Infant Health Profile</b>
<b>TAB 5. Hospitalization / Providers Profile</b>
<b>TAB 6. Behavioral Health Profile</b>
<b>TAB 7. Risk Indicators &amp; Factors</b>
<b>TAB 8. Uninsured Profile</b>
<b>TAB 9. Mortality Profile</b>
<b>TAB 10. Preventative Quality Measures</b>

B) Gather primary research (stakeholder feedback) to uncover public health needs, practices and perceptions for primary service areas.

**Phase III—Quantify Community Need:**

Conduct a 90-minute town hall meeting with required community primary service area residents. At each town hall meeting, CHNA secondary data will be reviewed, facilitated group discussion will occur and a group ranking activity to determine the most important community health needs was administered.

**Phase IV—Complete Data Analysis and Create Comprehensive Community Health Needs Assessment:**

Post CHNA report findings to meet both PHAB and IRS CHNA criteria.

After consideration of CHNA stakeholders (sponsoring county health department and hospital), the CHNA Option C was selected with the following project schedule:

Phase I: Discovery.....	Jan 2019
Phase II: Secondary / Primary Research.....	Jan – Feb 2019
Phase III: Town Hall Meeting.....	Mar 19, 2019
Phase IV: Prepare / Release CHNA report.....	Apr – May 2019

Detail CHNA Development Steps Include:

<b>Development Steps to Create Comprehensive Community Health Needs Assessment</b>	
<b>Step # 1 Commitment</b>	<i>Determine interest level of area healthcare leaders (Hospital, Health Dept., Mental Health Centers, schools, churches, physicians etc.), prepare project quote.</i>
<b>Step # 2 Planning</b>	<i>Prepare brief CHNA Project Work Calendar - list goals, objectives, purpose, outcome, roles, community involvement, etc. Hold community kick-off meeting.</i>
<b>Step # 3 Secondary Research</b>	<i>Collect and report community health published facts. Gather data health practice data from published secondary research sources (i.e. census, county health records, behavioral risk factors surveillance, etc.)</i>
<b>Step # 4a Primary Research - Town Hall prep</b>	<i>Collect community opinions. (quantitative research). Gather stakeholders / community opinions regarding community health needs and healthcare practices.</i>
<b>Step # 4b Primary Research - Conduct Town Hall</b>	<i>Conduct "Conversation with Community" Town Hall (qualitative research). Review secondary &amp; primary data findings. Facilitate community conversation to build consensus; discuss opinions / identify health needs.</i>
<b>Steps # 5 Reporting</b>	<i>Prepare and present comprehensive CHNA report (to community leaders), facilitate development of CHNA Implementation Plan (actions to improve health). (Note: formal report will follow IRS Notice 2011-52 regs &amp; PHAB requirements.)</i>
VVV Consultants, LLC Olathe, KS (913) 302-7264	



## Overview of Town Hall Community Priority Setting Process

Each community has a wealth of expertise to be tapped for CHNA development. For this reason, a town hall is the perfect forum to gather community insight and provide an atmosphere to objectively consensus build and prioritize county health issues.

All Town Hall priority-setting and scoring processes involve the input of key stakeholders in attendance. Individuals and organizations attending the Town Halls were critically important to the success of the CHNA. The following list outlines partners invited to Town Hall: local hospital, public health community, mental health community, free clinics, community-based clinics, service providers, local residents, community leaders, opinion leaders, school leaders, business leaders, local government, faith-based organizations and persons (or organizations serving them), people with chronic conditions, uninsured community members, low income residents and minority groups.


Decatur County, Iowa (Decatur County Hospital in partnership with Decatur County Public Health and Homecare and Community Health Centers of Southern Iowa) town hall meeting was held on Tuesday, March 19<sup>th</sup>, 2019 from 5:30 p.m. to 7:00 p.m. at Leon Country Club. Vince Vandehaar facilitated this 1 ½ hour session with twenty-two (22) attendees. (Note: a detail roster of Town Hall attendees is listed in Section V a).

The following Town Hall agenda was conducted:

1. Welcome & Introductions
2. Review Purpose for the CHNA Town Hall & Process Roles
3. Present / Review of Historical County Health Indicators (10 TABS)
4. Facilitate Town Hall participant discussion of data (probe health strengths / concerns). Reflect on size and seriousness of any health concerns cited and discuss current community health strengths.
5. Engage Town Hall participants to rank health needs (using 4 dots to cast votes on priority issues). Tally & rank top community health concerns cited.
6. Close meeting by reflecting on the health needs / community voting results. Inform participants on “next steps.”

At the end of each Town Hall session, VVV encouraged all community members to continue to contribute ideas to both hospital / health department leaders via e-mail or personal conversations. NOTE: To review detail Town Hall discussion content, please turn to Section V for detailed notes of session and activity card content reporting strengths & items to change or improve.

**Community Health Needs Assessment  
Town Hall Meeting - Decatur County IA**  
on behalf of Decatur County Hospital  
in partnership with Decatur County Public Health and Homecare  
and Community Health Centers of Southern Iowa



**Vince Vandelaar, MBA**  
VVV Consultants LLC  
Principal / Adjunct Professor

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Olathe, Kansas 66061  
VVV@VandelaarMarketing.com  
913-302-7264

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**Community Health Needs Assessment (CHNA)  
Town Hall Discussion Agenda**

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- I. Opening / Introductions (10 mins)
- II. Review CHNA Purpose and Process (10 mins)
- III. Review Current County "Health Status"  
-Secondary Data by 10 TAB Categories  
-Review Community Feedback Research (35 mins)
- IV. Collect Community Health Perspectives  
-Hold Community Voting Activity  
-Determine Most Important Health Areas (30 mins)
- V. Close / Next Steps (5 mins)

2

**I. Introduction:**  
Background and Experience




---

**Vince Vandelaar, MBA**  
VVV Consultants LLC - Principal Consultant  
Olathe, KS 913 302-7264

- > Professional Consulting Services: Strategic Planning, Marketing Management, Business Research & Development
- > Focus: Strategy, Research, Deployment
- > 25+ years of experience with Tillinghast, BCBSKC, Saint Luke's

**Adjunct Full Professor - Marketing & MHA 31+ years**

- > Avila University
- > Webster University
- > Rockhurst University

**Tessa Taylor, BBA BA - Associate Consultant**

- > University of Wisconsin Whitewater
- > AMA Chapter President (2 years)

3

**Town Hall Participation (You)**

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- ALL attendees welcome to share
  - Parking Lot
- There are no right or wrong answers
- Only one person speaks at a time
- Please give truthful responses
- Have a little fun along the way

4

## I. Introductions: A Conversation with the Community

Community members and organizations invited to CHNA Town Hall

**Consumers:** Uninsured/underinsured people, Members of at-risk populations, Parents, caregivers and other consumers of health care in the community, and Consumer advocates.

**Community leaders and groups:** The hospital organization's board members, Local clergy and congregational leaders, Presidents or chairs of civic or service clubs -- Chamber of Commerce, veterans' organizations, Lions, Rotary, etc., Representatives from businesses -- owners/CEO's of large businesses (local or large corporations with local branches), Business people & merchants (e.g., who sell tobacco, alcohol, or other drugs), Representatives from organized labor, Political, appointed and elected officials, Foundations, United Way organizations. And other "community leaders."

**Public and other organizations:** Public health officials, Directors or staff of health and human service organizations, City/Community planners and development officials, Individuals with business and economic development experience, Welfare and social service agency staff, Housing advocates - administrators of housing programs: homeless shelters, low-income-family housing and senior housing, Education officials and staff - school superintendents, principals and teachers, Public safety officials, Staff from state and area agencies on aging, Law enforcement agencies - Chiefs of police, Local colleges and universities, Coalitions working on health or other issues.

**Other providers:** Physicians, Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services, Leaders from Catholic Charities and other faith-based service providers, Mental health providers, Oral health providers, Health insurers, Parish and congregational nursing programs, Other health professionals

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## II. Review CHNA Definition

- A Community Health Needs Assessment (CHNA) is a **systematic collection, assembly, analysis, and dissemination of information about the health of the community.** (NOTE: Some the data has already been collected / published by Local, State and Federal public health organizations. Some data will be collected today.)
- A CHNA's role is to identify factors that affect the health of a population and **determine the availability of resources** to adequately address those factors.

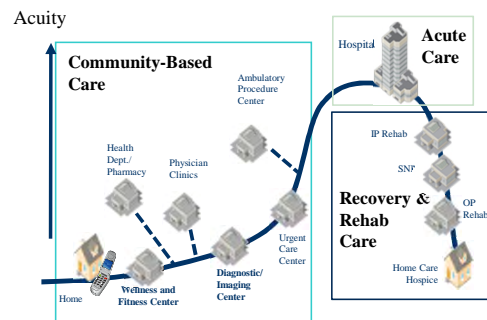
6

## Purpose—Why Conduct a CHNA?

- To determine health-related trends and issues of the community
- To understand / evaluate health delivery programs in place.
- To meet Federal requirements -- both local hospital and health department
- To develop strategies to address unmet health needs (4-6 weeks after Town Hall)

7

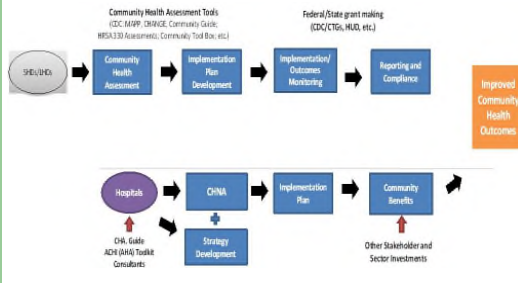
## Future System of Care—Sg2



IP = inpatient; SNF = skilled nursing facility; OP = outpatient.

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## Community Health Needs Assessment Joint Process: Hospital & Local Health Department



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## II. IRS Hospital CHNA Written Report Documentation

- a description of the community served
- a description of the CHNA process
- the identity of any and all organizations and third parties which collaborated to assist with the CHNA
- a description of how the organization considered the input of persons representing the community (e.g., through meetings, focus groups, interviews, etc.), who those persons are, and their qualifications
- a prioritized description of all of the community needs identified by the CHNA and
- a description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA

10

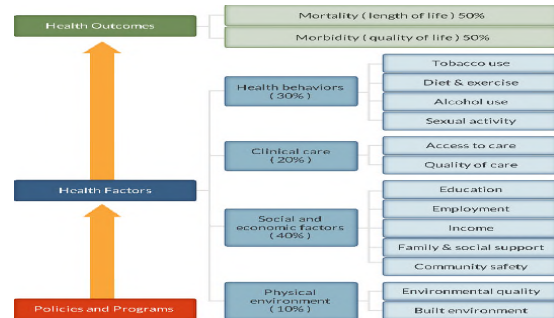
## III. Review Current County Health Status: Secondary Data by 10 Tab Categories & State Rankings

Trends: Good Same Poor

TAB 1. Demographic Profile
TAB 2. Economic/Business Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospitalization / Providers Profile
TAB 6. Behavioral Health Profile
TAB 7. Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

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## County Health Rankings - Robert Wood Johnson Foundation and University of WI Health Institute



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1. Physical Environment (40%)			2b. Social and Economic Environment (40%)		
Focus Area	Measure	Description	Focus Area	Measure	Description
Air and water quality (5%)	Particulate pollution index	The average daily measure of fine particulate matter in micrograms per cubic meter (PM2.5) in a county	Community safety (5%)	Violent crime	Violent crime rate per 100,000 population
Housing and transit (5%)	Drinking water violation	Percent of population potentially exposed to water exceeding a violation level during the past year	Injury deaths	Injury mortality	Injury mortality rate per 100,000
	Severe housing problems	Percent of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or bathroom facilities		Health Outcomes (50%)	Health Inequality
	Commuter time	Percent of the workforce that drives alone to work			
Commuter time	Among workers who commute in their car alone, the percent that commutes more than 30 minutes				
2. Chronic Care (20%)			3. Health Outcomes (50%)		
Focus Area	Measure	Description	Focus Area	Measure	Description
Access to care (10%)	Insurance	Percent of population under age 65 without health insurance	Tobacco use	Adult smoking	Percent of adults that report smoking = 100
	Primary care physicians	Ratio of population to primary care physicians	Adult obesity	Adult obesity	Percent of adults that report a BMI ≥ 30
Quality of care (10%)	Dentists	Ratio of population to dentists	Food environment index	Food environment index	Index of factors that contribute to a healthy food environment
	Mental health providers	Ratio of population to mental health providers			
	Preventable hospitalizations	Hospitalization rate for ambulatory care sensitive conditions per 1,000 Medicare enrollees	Alcohol and drug use (5%)	Alcohol-impaired driving deaths	Percent of driving deaths with alcohol involvement
	Diabetic screening	Percent of diabetic Medicare enrollees that receive diabetic screening	Sexual activity (5%)	Sexually transmitted infections	Chlamydia rate per 100,000 population
Mammography screening	Percent of female Medicare enrollees that receive mammography screening	Teen births	Teen births	Teen birth rate per 1,000 female population, ages 15-19	
2b. Social and Economic Environment (40%)			3b / 3c. Morbidity / Mortality		
Focus Area	Measure	Description	Focus Area	Measure	Description
Education (10%)	High school graduation	Percent of ninth grade cohort that graduates in 4 years	Peer or fair health	Peer or fair health	Percent of adults reporting fair or poor health
	Some college	Percent of adults aged 25-44 years with some post-secondary education		Peer physical health days	Average number of physically unhealthy days reported in past 30 days (age-adjusted)
Employment (10%)	Unemployment	Percent of population age 16+ unemployed but seeking work	Peer mental health days	Average number of mentally unhealthy days reported in past 30 days (age-adjusted)	
	Income (10%)	Children in poverty	Low birthweight	Percent of live births with low birthweight at 2000 grams	
Family and social support (5%)	Inadequate social support	Percent of adults without social/emotional support	Premature death	Years of potential life lost before age 75 per 100,000 population (age-adjusted)	
	Children in single-parent households	Percent of children that live in household headed by single parent			

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## IV. Collect Community Health Perspectives

### Ask your opinion. Your thoughts?

- 1) **Today:** What are the *strengths* of our community that contribute to health? (White card)
- 2) **Today:** Are there healthcare services in your community / neighborhood that you feel *need to be improved and / or changed*? (Color card)
- 3) **Tomorrow:** What is occurring or might occur that would affect the "health of our community?"

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## Have We Forgotten Anything?

<ul style="list-style-type: none"> <li>A. Aging Services</li> <li>B. Chronic Pain Management</li> <li>C. Dental Care/Oral Health</li> <li>D. Developmental Disabilities</li> <li>E. Domestic Violence,</li> <li>F. Early Detection &amp; Screening</li> <li>G. Environmental Health</li> <li>Q. Exercise</li> <li>H. Family Planning</li> <li>I. Food Safety</li> <li>J. Health Care Coverage</li> <li>K. Health Education</li> <li>L. Home Health</li> </ul>	<ul style="list-style-type: none"> <li>M. Hospice</li> <li>N. Hospital Services</li> <li>O. Maternal, Infant &amp; Child Health</li> <li>P. Nutrition</li> <li>R. Pharmacy Services</li> <li>S. Primary Health Care</li> <li>T. Public Health</li> <li>U. School Health</li> <li>V. Social Services</li> <li>W. Specialty Medical Care Clinics</li> <li>X. Substance Abuse</li> <li>Y. Transportation</li> <li>Z. Other _____</li> </ul>
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## Community Health Needs Assessment

# Questions; Next Steps?

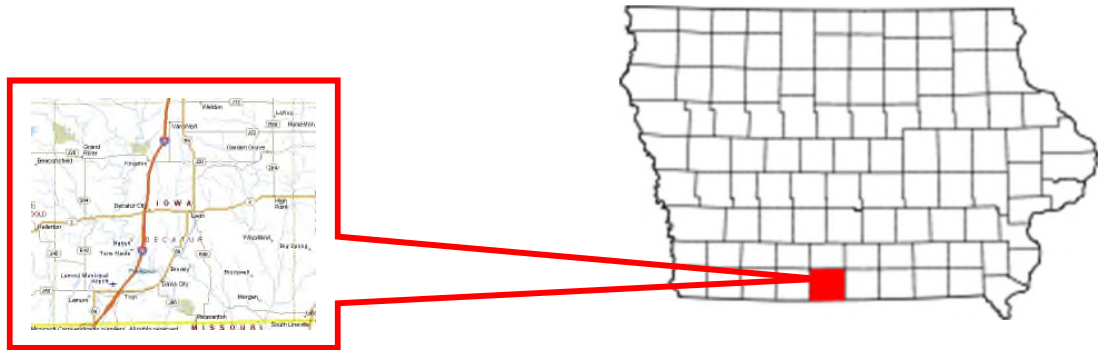
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 VVV@VandelaarMarketing.com  
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## II. Methodology

### d) Community Profile (A Description of Community Served)

#### Decatur County (IA) Community Profile



The population of Decatur County was estimated to be 8,434 citizens in 2018 and a population density of 16 persons per square mile. The major cities in Decatur County are Davis City, Decatur City, Garden Grove, Grand River, Lamoni, Le Roy, Leon, Pleasanton, Van Wert and Weldon.

#### Decatur County Pubic Airports<sup>1</sup>

Name	USGS Topo Map
Decatur County Hospital Heliport	Garden Grove SW
Lamoni Municipal Airport	Lamoni North
Solly's Strip Ultralight Flightpark	Lamoni North

#### Schools in Decatur County: Public Schools<sup>2</sup>

School	Address	Phone	Levels
Central Decatur Middle / Senior High School	1201 NE Poplar Leon, IA 50144	641-446-4816	7-12
Lamoni Elementary	202 N Walnut St Lamoni, IA 50140	641-784-3422	PK-5
Lamoni High	202 N Walnut St Lamoni, IA 50140	641-784-3351	9-12
Lamoni Middle	202 N Walnut St Lamoni, IA 50140	641-784-7299	6-8
Mormon Trail Jr-Sr High School	502 E Main St Garden Grove, IA 50103	641-443-3425	7-12
North Elementary	1203 NE Poplar St Leon, IA 50144	641-446-4452	3-6
South Elementary	201 Se 6th St Leon, IA 50144	641-446-6521	PK-2

<sup>1</sup> <https://iowa.hometownlocator.com/features/cultural,class,airport,scfips,19053.cfm>

<sup>2</sup> <https://iowa.hometownlocator.com/schools/sorted-by-county,n,decatur.cfm>

## Demographics - Decatur Co (IA)

Demographics - Decatur Co (IA)										
Zip	Name	ST	County	Population			Households			Per Capita
				YR 2018	YR 2023	Chg.	YR 2018	YR 2023	Size	Inc 18
50065	Davis City	IA	DECATUR	593	574	-3.2%	239	231	2	\$28,266
50067	Decatur	IA	DECATUR	403	388	-3.7%	161	155	3	\$24,280
50103	Garden Grove	IA	DECATUR	458	443	-3.3%	178	172	3	\$27,154
50108	Grand River	IA	DECATUR	476	460	-3.4%	208	200	2	\$26,029
50140	Lamoni	IA	DECATUR	2938	2856	-2.8%	915	878	2	\$20,083
50144	Leon	IA	DECATUR	2658	2568	-3.4%	1072	1033	2	\$20,817
50262	Van Wert	IA	DECATUR	499	503	0.8%	217	218	2	\$32,450
50264	Weldon	IA	DECATUR	487	493	1.2%	203	205	2	\$31,474
<b>Totals</b>				<b>8,512</b>	<b>8,285</b>	<b>-2.7%</b>	<b>3,193</b>	<b>3,092</b>	<b>2</b>	<b>\$26,319</b>
Zip	Name	ST	County	Pop18 65+	Pop18 <=18	Females	White	Black	Amer. Ind.	Hisp.
50065	Davis City	IA	DECATUR	142	151	293	562	1	4	13
50067	Decatur	IA	DECATUR	96	98	197	390	0	1	5
50103	Garden Grove	IA	DECATUR	92	120	213	453	1	0	1
50108	Grand River	IA	DECATUR	112	117	234	464	0	1	5
50140	Lamoni	IA	DECATUR	551	784	1462	2593	150	19	144
50144	Leon	IA	DECATUR	610	691	1364	2587	16	9	61
50262	Van Wert	IA	DECATUR	111	112	234	485	1	5	5
50264	Weldon	IA	DECATUR	102	105	230	474	1	4	6
<b>Totals</b>				<b>1,816</b>	<b>2,178</b>	<b>4,227</b>	<b>8,008</b>	<b>170</b>	<b>43</b>	<b>240</b>
<b>Percentages</b>				<b>21.3%</b>	<b>25.6%</b>	<b>49.7%</b>	<b>94.1%</b>	<b>2.0%</b>	<b>0.5%</b>	<b>2.8%</b>

# **III. Community Health Status**

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[VVV Consultants LLC]



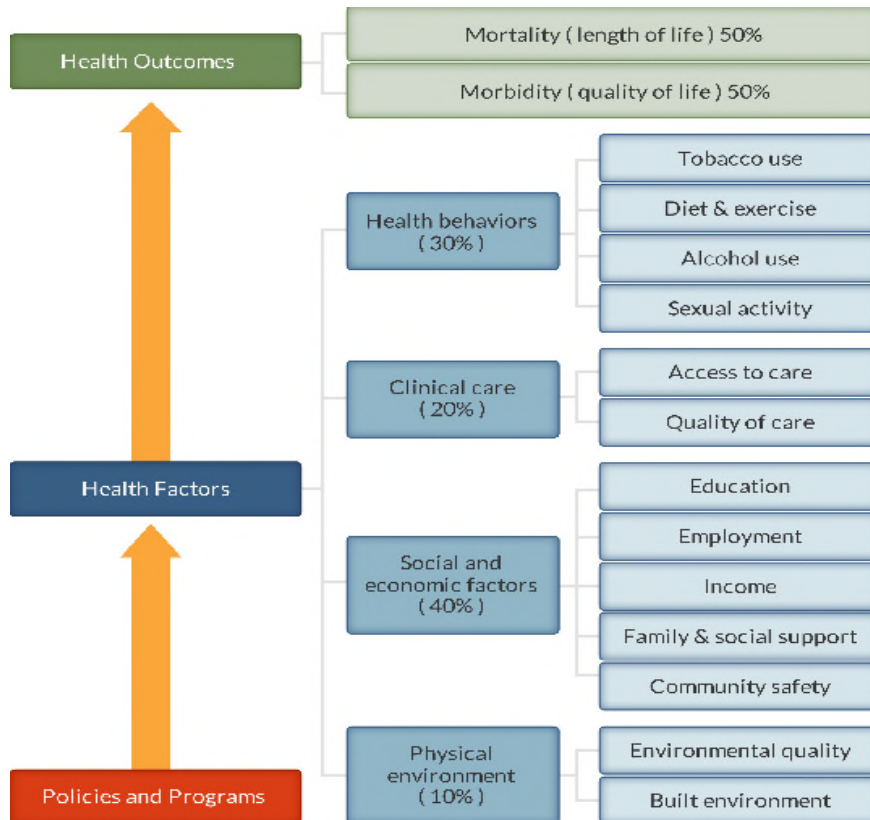
### III. Community Health Status

#### a) Historical Health Statistics- Secondary Research

#### Health Status Profile

This section of the CHNA reviews published quantitative community health indicators from public health sources and results of community primary research. To produce this profile, VVV Consultants LLC staff analyzed & trended data from multiple sources. This analysis focuses on a set of published health indicators organized by ten areas of focus (10 TABS), results from the 2018 RWJ County Health Rankings and conversations from Town Hall participants. Each table published reflects a Trend column, with GREEN denoting growing/high performance indicators, YELLOW denoting minimal change/average performance indicators and RED denoting declining/low performance indicators.

Note: The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to release annual *County Health Rankings*. As seen below, RWJ’s model use a number of health factors to rank each county.>



County Health Rankings model ©2012 UWPHI

## National Research – Year 2019 RWJ Health Rankings:

#	IA Rankings - 99 Counties	Definitions	Decatur Co IA	TREND	Rural SC IA Norm N=12
1	<b>Health Outcomes</b>		91	■	67
	Mortality	Length of Life	74		64
	Morbidity	Quality of Life	96		68
2	<b>Health Factors</b>		94	■	64
	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	96		60
	Clinical Care	Access to care / Quality of Care	86		58
	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	81	■	67
3	<b>Physical Environment</b>	Environmental quality	36	■	41
Rural SC IA Norm (N=12) includes the following counties: Appanoose, Marion, Decatur, Jasper, Poweshiek, Marshall, Davis, Monroe, Ringgold, Clarke, Wayne, Lucas.					
<a href="http://www.countyhealthrankings.org">http://www.countyhealthrankings.org</a> , released 2019					

## National Research – Year 2018 RWJ Health Rankings:

#	IA Rankings - 99 Counties	Definitions	Decatur Co IA	TREND	Rural SC IA Norm N=12
1	<b>Health Outcomes</b>		97	■	67
	Mortality	Length of Life	94		64
	Morbidity	Quality of Life	99		68
2	<b>Health Factors</b>		94	■	64
	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	94		60
	Clinical Care	Access to care / Quality of Care	78		58
	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	89	■	67
3	<b>Physical Environment</b>	Environmental quality	53	■	41
Rural SC IA Norm (N=12) includes the following counties: Appanoose, Marion, Decatur, Jasper, Poweshiek, Marshall, Davis, Monroe, Ringgold, Clarke, Wayne, Lucas.					
<a href="http://www.countyhealthrankings.org">http://www.countyhealthrankings.org</a> , released 2018					

## PSA Secondary Research:

When studying community health, it's important to document health data by topical areas for primary service area (PSA). Below is a summary of key findings organized by subject area.

### Tab 1 Demographic Profile

Understanding population and household make-up is vital to start CHNA evaluation.

Tab	Health Indicator	Decatur Co IA	Trend	State of IA	Rural SC IA Norm N=12	Source
1a	a Population estimates, July 1, 2017, (V2017)	7,950		3,145,711	16,267	People Quick Facts
	b Population, percent change - April 1, 2010 (estimates base) to July 1, 2017, (V2017)	-6.0%		3.2%	-1.5%	People Quick Facts
	c Population per square mile, 2010	15.9		54.5	29.6	People Quick Facts
	d Persons under 5 years, percent, July 1, 2017, (V2017)	6.4%		6.3%	6.3%	People Quick Facts
	e Persons 65 years and over, percent, July 1, 2017, (V2017)	19.4%		16.7%	19.9%	People Quick Facts
	f Female persons, percent, July 1, 2017, (V2017)	49.9%		50.3%	50.1%	People Quick Facts
	g White alone, percent, July 1, 2017, (V2017)	95.4%		91.1%	96.1%	People Quick Facts
	h Black or African American alone, percent, July 1, 2017, (V2017)	1.9%		3.8%	1.1%	People Quick Facts
	i Hispanic or Latino, percent, July 1, 2017, (V2017)	2.9%		6.0%	5.0%	People Quick Facts
	j Foreign born persons, percent, 2013-2017	2.1%		5.0%	3.0%	People Quick Facts
	k Language other than English spoken at home, percent of persons age 5 years+, 2013-2017	6.4%		7.6%	7.5%	People Quick Facts
	l Living in same house 1 year ago, percent of persons age 1 year+, 2013-2017	80.9%		84.7%	86.2%	People Quick Facts
	m Children in single-parent households, percent, 2012-2016	29.0%		29.0%	27.1%	County Health Rankings
	n Total Veterans, 2013-2017	517		193,451	1,084	People Quick Facts

### Tab 2 Economic Profile

Monetary resources will (at times) drive health “access” and self-care.

Tab	Health Indicator	Decatur Co IA	Trend	State of IA	Rural SC IA Norm N=12	Source
2	a Per capita income in past 12 months (in 2016 dollars), 2013-2017	\$21,110		\$30,063	\$25,903	People Quick Facts
	b Persons in poverty, percent, 2015	17.1%		12.1%	12.8%	Iowa Health Fact Book
	c Total Housing units, July 1, 2017, (V2017)	3,856		1,398,016	7,399	People Quick Facts
	d Total Persons per household, 2013-2017	2.3		2.4	2.4	People Quick Facts
	e Severe housing problems, percent, 2010-2014	15.0%		12.0%	12.3%	County Health Rankings
	f Total of All firms, 2012	762		259,121	1,393	People Quick Facts
	g Unemployment, percent, 2016	3.3%		3.7%	3.9%	County Health Rankings
	h Food insecurity, percent, 2015	15.0%		12.0%	12.1%	County Health Rankings
	i Limited access to healthy foods, percent, 2015	4.0%		6.0%	5.8%	County Health Rankings
	j Long commute - driving alone, percent, 2012-2016	25.0%		20.0%	25.8%	County Health Rankings

**Tab 3 Schools Health Delivery Profile**

Tab	Health Indicator	Decatur Co IA	Trend	State of IA	Rural SC IA Norm N=12	Source
3	a Children eligible for free or reduced price lunch, percent, 2015-2016	62.0%		41.0%	46.8%	County Health Rankings
	b High school graduate or higher, percent of persons age 25 years+, 2013-2017	86.0%		91.8%	90.0%	People Quick Facts
	c Bachelor's degree or higher, percent of persons age 25 years+, 2013-2017	21.5%		27.7%	19.0%	People Quick Facts

**Tab 4 Maternal and Infant Health Profile**

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

#	Criteria - Vital Statistics	Decatur Co IA	Trend	State of IA	Rural SC IA 12 Norm
a	Total Live Births, 2013	103		39,013	197
b	Total Live Births, 2014	97		39,685	201
c	Total Live Births, 2015	98		39,467	191
d	Total Live Births, 2016	92		39,223	208
e	Total Live Births, 2017	99		38,408	189
f	Change 2013 to 2017	-4		-605	-8
	<a href="http://www.healthdata.org/us-county-profiles">http://www.healthdata.org/us-county-profiles</a>				

**Tab 4 Maternal and Infant Health Profile (Continued)**

Tab	Health Indicator	Decatur Co IA	Trend	State of IA	Rural SC IA Norm N=12	Source
4	a Percent of Births Where Prenatal Care began in First Trimester, 2015-2016	70.5%		78.6%	74.4%	Iowa Health Fact Book
	b Percent Premature Births by County, 2017	NA		7.4%	7.9%	idph.iowa.gov
	c 2 Year-Old Coverage of Individual Vaccines, 2015	56.0%		67.0%	68.3%	idph.iowa.gov
	d Percent of Births with Low Birth Weight, 2015-2016	5.8%		6.8%	6.9%	Iowa Health Fact Book
	e Percent Ever Breastfed Over Time, 2017	81.8%		81.5%	80.4%	idph.iowa.gov
	f Percent of all Births Occurring to Teens (15-19), 2015-2016	5.3%		4.4%	5.2%	Iowa Health Fact Book
	g Percent of Births Occurring to Unmarried Women, 2015-2016	27.9%		35.1%	32.0%	Iowa Health Fact Book
	h Percent of births Where Mother Smoked During Pregnancy, 2015-2016	21.6%		18.0%	21.3%	Iowa Health Fact Book

**Tab 5 Hospitalization/Provider Profile**

Understanding provider access and disease patterns are fundamental in healthcare delivery. Listed below are several vital county statistics.

Tab	Health Indicator	Decatur Co IA	Trend	State of IA	Rural SC IA Norm N=12	Source
5	a PCP (MDs / DOs only) (Pop Coverage per) , 2015	2740 / 1		1360 / 1	1779 / 1	County Health Rankings
	b Preventable hospital stays, 2015 (lower the better)	49		49	49	County Health Rankings
	c Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)	85.0%		78.0%	20.9%	CMS Hospital Compare, 10/1/2015-9/30/2016
	d Patients Who Reported Yes, They Would Definitely Recommend the Hospital	83.0%		76.0%	19.2%	CMS Hospital Compare, 10/1/2015-9/30/2016
	e Average Time Patients Spent in the Emergency Dept. Before They Were Seen by a Healthcare Professional (in Minutes)	NA		42	47	CMS Hospital Compare, 10/1/2015-9/30/2016

**Tab 5 Hospitalization/Provider Profile (Continued)**

Decatur County IA only		Inpatient			
Hospital		YR18 3Q	YR17	YR16	YR15
<b>Report Totals:</b>		<b>592</b>	<b>837</b>	<b>834</b>	<b>827</b>
Des Moines - Mercy Medical Center		140	231	230	249
Des Moines- Iowa Meth Med Center		165	180	190	163
Leon - Decatur County Hospital		106	158	165	195
<b>% - Decatur County Hospital</b>		<b>18%</b>	<b>19%</b>	<b>20%</b>	<b>24%</b>
Decatur County IA only		Emergency			
Hospital		YR18 3Q	YR17	YR16	YR15
<b>Report Totals:</b>		<b>2,316</b>	<b>3,326</b>	<b>3,318</b>	<b>3,383</b>
Leon - Decatur County Hospital		1,558	2,221	2,247	2,329
<b>% - Decatur County Hospital</b>		<b>67%</b>	<b>67%</b>	<b>68%</b>	<b>69%</b>

Source: IHA 2019

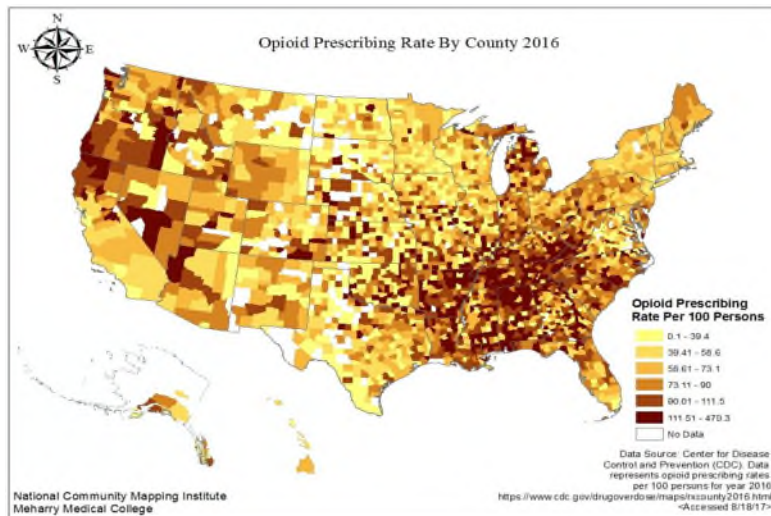
**Tab 6 Social & Rehab Services Profile**

Behavioral healthcare provides another important indicator of community health status.

Tab	Health Indicator	Decatur Co IA	Trend	State of IA	Rural SC IA Norm N=12	Source
6	a Depression: Medicare Population, percent, 2015	12.0%		16.7%	15.6%	Centers for Medicare and Medicaid Services
	b Age-adjusted Suicide Mortality Rate per 100,000 population, 2012-2016 (lower is better)	NA		13.3	16.0	Iowa Health Fact Book
	c Poor mental health days, 2016	3.7		3.3	3.4	County Health Rankings

**Tab 6 Social & Rehab Services Profile (Continued)**

Opioid Prescription Rate per 100, 2017. Decatur County = 54.2 Iowa = 56.4



**Tab 7a Health Risk Profiles**

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

Tab	Health Indicator	Decatur Co IA	Trend	State of IA	Rural SC IA Norm N=12	Source
7a	a Adult obesity, percent, 2014	37.0%		32.0%	34.0%	County Health Rankings
	b Adult smoking, percent, 2016	18.0%		17.0%	15.4%	County Health Rankings
	c Excessive drinking, percent, 2016	19.0%		22.0%	19.3%	County Health Rankings
	d Physical inactivity, percent, 2014	29.0%		25.0%	28.3%	County Health Rankings
	e Poor physical health days, 2016	3.6		2.9	3.1	County Health Rankings
	f Sexually transmitted infections, rate per 100000, 2015	181.5		388.9	261.4	County Health Rankings

**Tab 7b Health Risk Profiles (Continued)**

Tab	Health Indicator	Decatur Co IA	Trend	State of IA	Rural SC IA Norm N=12	Source
7b	a Hypertension: Medicare Population, 2015	49.0%		51.0%	50.4%	Centers for Medicare and Medicaid Services
	b Hyperlipidemia: Medicare Population, 2015	26.5%		40.1%	37.8%	Centers for Medicare and Medicaid Services
	c Heart Failure: Medicare Population, 2015	13.6%		12.2%	12.9%	Centers for Medicare and Medicaid Services
	d Chronic Kidney Disease: Medicare Pop, 2015	9.8%		15.5%	14.3%	Centers for Medicare and Medicaid Services
	e COPD: Medicare Population, 2015	9.7%		10.7%	10.2%	Centers for Medicare and Medicaid Services
	f Atrial Fibrillation: Medicare Population, 2015	9.3%		8.8%	8.7%	Centers for Medicare and Medicaid Services
	g Cancer: Medicare Population, 2015	6.8%		7.0%	6.3%	Centers for Medicare and Medicaid Services
	h Osteoporosis: Medicare Population, 2015	3.7%		5.3%	5.1%	Centers for Medicare and Medicaid Services
	i Asthma: Medicare Population, 2015	5.0%		6.5%	5.9%	Centers for Medicare and Medicaid Services
	j Stroke: Medicare Population, 2015	2.7%		3.1%	3.0%	Centers for Medicare and Medicaid Services

### Tab 8 Uninsured Profiles / Community Invest

Based on state estimations, the number of insured is documented below. Also, the amount of charity care (last three years of free care) from area providers is trended below.

Tab	Health Indicator	Decatur Co IA	Trend	State of IA	Rural SC IA Norm N=12	Source
8	a Uninsured, percent, 2015	8.0%		6.0%	7.3%	County Health Rankings

#	Decatur County Hospital - Decatur County IA	YR16	YR17	YR18
1	Bad Debt - Write off	\$377,708	\$500,155	\$515,798
2	Charity Care - Free Care Given	\$64,399	\$129,366	\$219,437

Local Health Department Community Support is as follows:

Source: Internal Records - Decatur County Health Department				
	Decatur Co IA - Health Dept Operations	YR 2016	YR 2017	YR 2018
1	Core Community Public Health	\$42,427	\$38,751	\$33,513
2	Environmental Services*	\$13,100	\$8,477	\$8,683
3	Home Health **	\$239,414	\$235,529	\$227,578
4	Immunizations/Vaccine	\$11,341	\$11,475	\$15,400
5	Tobacco Cessation	\$57,663	\$42,026	\$52,586
6	Nutrition Education	\$10,424	\$9,259	\$8,714

\*Environmental Services is the only category funded by Decatur County dollars.  
 \*\* Home Health funds come from reimbursement of Medicare, Medicaid, VA, Private Insurance, and Private pay.  
 Note: WIC is provided by MATURA and Maternal Child Health/ smile/1st Five is provided by Marion Co Public Health. All other funds come from grants from the State of Iowa

### Tab 9 Mortality Profile

The leading causes of county deaths are listed below. Areas of higher than expected are so noted.

Tab	Health Indicator	Decatur Co IA	Trend	State of IA	Rural SC IA Norm N=12	Source
9	a Life Expectancy for Males, 2014	75.5		77.5	76.2	Institute for Health Metrics and Evaluation
	b Life Expectancy for Females, 2014	81.2		81.9	81.6	Institute for Health Metrics and Evaluation
	c Age-adjusted Cancer Mortality Rate per 100,000 population, 2010-2014 (lower is better)	215.2		168.9	182.5	Iowa Health Fact Book
	d Age-adjusted Heart Disease Mortality Rate per 100,000 population, 2010-2014 (lower is better)	196.7		166.0	186.5	Iowa Health Fact Book
	e Age-adjusted Chronic Lower Respiratory Disease Mortality Rate per 100,000 population, 2010-2014 (lower is better)	54.5		46.8	46.9	Iowa Health Fact Book
	f Alcohol-impaired driving deaths, percent, 2012-2016	0.0		27.0%	20.2%	County Health Rankings

**Tab 9 Mortality Profile (Continued)**

Total IOWA by Selected Causes of Death - 2017	Decatur Co IA	%	Trend	State of IA 2017	%
Total Deaths	95	100.0%		30246	100.0%
Major Cardiovascular Diseases	23	24.2%		9,208	30.4%
Malignant Neoplasms	22	23.2%		6,418	21.2%
All Other Diseases	14	14.7%		5,284	17.5%
Chronic Lower Respiratory Diseases	8	8.4%		1,934	6.4%
Unintentional Injuries	6	6.3%		1,488	4.9%

<https://tracking.idph.iowa.gov/People-Community/Deaths/Select-Causes/Suicide>

**Tab 10 Preventive Health Profile**

The following table reflects future health of the county. This information also is an indicator of community awareness of preventative measures.

Tab	Health Indicator	Decatur Co IA	Trend	State of IA	Rural SC IA Norm N=12	Source
10 a	Access to exercise opportunities, percent, 2016	77.0%		83.0%	70.9%	County Health Rankings
b	Diabetes monitoring, percent, 2014	91.0%		90.0%	90.4%	County Health Rankings
c	Mammography screening, percent, 2014	51.0%		69.0%	62.3%	County Health Rankings
e	Percent Annual Check-Up Visit with PCP	NA		NA	NA	TBD
f	Percent Annual Check-Up Visit with Dentist	NA		NA	NA	TBD
g	Percent Annual Check-Up Visit with Eye Doctor	NA		NA	NA	TBD



## b) Online Research- Health Status

### PSA Primary Research:

For each CHNA Wave # 3 evaluation, a community stakeholder survey has been created and administered to collect “current” healthcare information for PSA. Response for Decatur County online survey equals 133 residents. Below are two charts review survey demographics.

**Chart #1 – Decatur Co IA PSA Online Feedback Response N=133**

<b>Community Health Needs Assessment Wave #3</b>			
For reporting purposes, are you involved in or are you a .... ?	Decatur Co N=133	Trend	Rural Norms 21 N=3,648
<b>Business / Merchant</b>	3.3%		9.0%
<b>Community Board Member</b>	6.6%		7.8%
<b>Case Manager / Discharge Planner</b>	2.0%		1.1%
<b>Clergy</b>	0.0%		1.1%
<b>College / University</b>	1.3%		1.9%
<b>Consumer Advocate</b>	0.0%		1.6%
<b>Dentist / Eye Doctor / Chiropractor</b>	2.6%		0.5%
<b>Elected Official - City/County</b>	0.7%		1.9%
<b>EMS / Emergency</b>	2.6%		2.3%
<b>Farmer / Rancher</b>	7.9%		5.7%
<b>Hospital / Health Dept</b>	19.9%		16.9%
<b>Housing / Builder</b>	0.7%		0.6%
<b>Insurance</b>	0.7%		1.1%
<b>Labor</b>	1.3%		2.2%
<b>Law Enforcement</b>	2.0%		1.5%
<b>Mental Health</b>	6.0%		2.1%
<b>Other Health Professional</b>	15.2%		9.4%
<b>Parent / Caregiver</b>	13.2%		14.8%
<b>Pharmacy / Clinic</b>	8.6%		2.3%
<b>Media (Paper/TV/Radio)</b>	0.7%		0.5%
<b>Senior Care</b>	0.0%		2.5%
<b>Teacher / School Admin</b>	2.0%		5.3%
<b>Veteran</b>	2.0%		2.7%
<b>Unemployed / Other</b>	0.7%		5.3%

Rural 21 Norms Include the following 17 counties: Appanoose IA, Barton, Carroll IA, Cowley, Decatur IA, Edwards, Fremont IA, Furnas NE, Hays, Sheriton, Jasper IA, Kiowa, Linn MO, Miami, Nemaha, Osborne, Page IA, Pawnee, Russell, Smith, Trego.

**Chart #2 - Quality of Healthcare Delivery Community Rating**

Community Health Needs Assessment Wave #3			
How would you rate the "Overall Quality" of healthcare delivery in our community?	Decatur Co IA N=133	Trend	Rural Norms 21 Co N=3648
Top Box %	19.5%		23.3%
Top 2 Boxes %	70.7%		68.5%
Very Poor	0.8%		1.2%
Poor	3.8%		5.0%
Average	24.8%		25.0%
Good	51.1%		45.2%
Very Good	19.5%		23.3%

**Chart #3 – Overall Community Health Quality Trend**

Community Health Needs Assessment Wave #3			
When considering "overall community health quality", is it ...	Decatur Co IA N=133	Trend	Rural Norms 21 Co N=3648
Increasing - moving up	45.9%		42.7%
Not really changing much	44.4%		39.7%
Decreasing - slipping	6.0%		9.6%

**Chart #4 – Re-evaluate Past Community Health Needs Assessment Needs**

CHNA Wave #3		Decatur Co N=133			
Past CHNAs health needs identified		Ongoing Problem			Pressing
#	Topic	Votes	%	Trend	RANK
1	Poverty	61	55.5%		3
2	Mental Health Services	57	51.8%		1
3	Drugs	55	50.0%		2
4	Economic Development	51	46.4%		4
5	Obesity / Nutrition Education	50	45.5%		6
6	Healthcare Transportation	47	42.7%		5
7	Eye Doctors	44	40.0%		9
8	Youth Wellness Programs	43	39.1%		8
9	Pediatric Mental Health	38	34.6%		7
10	DHS Office Access	30	27.3%		13
11	Preventative Healthcare	29	26.4%		11
12	Adult Day Care Services	27	24.6%		12
13	Access to Primary Care	25	22.7%		10
14	Tobacco	25	22.7%		15
15	Amish Healthcare Services	10	9.1%		14

**Chart #5 - Community Health Needs Assessment "Causes of Poor Health"**

<b>Community Health Needs Assessment Wave #3</b>			
In your opinion, what are the root causes of "poor health" in our community?	Decatur Co IA N=133	Trend	Rural Norms 21 Co N=3648
Poverty / Finance	24.0%		8.5%
Lack of awareness of existing local programs, providers, and services	15.6%		20.0%
Limited access to mental health assistance	16.5%		17.6%
Elder assistance programs	6.2%		10.5%
Lack of health & wellness education	12.1%		12.3%
Family assistance programs	6.5%		8.0%
Chronic disease prevention	9.7%		10.1%
Case management assistance	5.9%		6.8%
Other (please specify)	3.4%		6.2%

**Chart #6 – Community Rating of HC Delivery Services (Perceptions)**

<b>CHNA Wave #3</b>	Decatur Co IA N=133		Trend	Rural Norms 21 Co N=3,648	
	Top 2 boxes	Bottom 2 boxes		Top 2 boxes	Bottom 2 boxes
How would our community rate each of the following?					
Ambulance Services	89.1%	2.7%		86.0%	2.7%
Child Care	50.5%	14.7%		51.0%	12.0%
Chiropractors	74.3%	2.8%		76.9%	4.9%
Dentists	41.8%	18.2%		59.7%	17.0%
Emergency Room	73.0%	7.2%		70.1%	9.6%
Eye Doctor/Optomtrist	37.0%	33.3%		73.9%	8.0%
Family Planning Services	25.0%	34.6%		39.2%	18.3%
Home Health	62.4%	1.8%		56.4%	10.6%
Hospice	81.8%	1.8%		67.6%	7.7%
Inpatient Services	68.2%	7.3%		74.9%	5.9%
Mental Health	36.4%	36.4%		24.5%	36.2%
Nursing Home	49.1%	20.8%		47.3%	17.1%
Outpatient Services	82.4%	2.8%		75.3%	4.4%
Pharmacy	82.9%	4.5%		88.5%	2.4%
Physician Clinics	79.1%	2.7%		79.0%	4.5%
Public Health	74.3%	2.8%		63.1%	6.7%
School Nurse	74.8%	2.8%		61.3%	9.4%
Specialists	65.8%	4.5%		56.9%	13.2%

**Chart #7 – Community Health Readiness**

Community Health Needs Assessment Wave #3		Bottom 2 boxes	
Community Health Readiness is vital. How would you rate each of the following? (% Poor / Very Poor)	Decatur Co IA N=133	Trend	Rural Norms 21 Co N=3,648
Early Childhood Development Programs	9.7%	Yellow	11.8%
Emergency Preparedness	8.6%	Yellow	9.2%
Food and Nutrition Services/Education	12.4%	Red	14.1%
Health Screenings (asthma, hearing, vision, scoliosis)	17.1%	Red	14.4%
Immunization Programs	8.7%	Yellow	6.8%
Obesity Prevention & Treatment	36.2%	Red	30.4%
Prenatal / Child Health Programs	16.7%	Red	11.4%
Sexually Transmitted Disease Testing	24.0%	Red	16.4%
Spiritual Health Support	22.0%	Red	13.2%
Substance Use Treatment & Education	32.0%	Red	32.6%
Tobacco Prevention & Cessation Programs	22.3%	Red	26.7%
Violence Prevention	35.3%	Red	29.4%
Women's Wellness Programs	21.2%	Red	15.4%
WIC Nutrition Program	8.8%	Yellow	6.5%

**Chart #8 – Healthcare Delivery “Outside our Community”**

Community Health Needs Assessment Wave #3			
In the past 2 years, did you or someone you know receive HC outside of our community?	Decatur Co IA N=133	Trend	Rural Norms 21 N=3,648
Yes	86.1%	Red	80.8%
No	7.4%	Green	14.2%
I don't know	6.5%	Yellow	5.0%

**Chart #8 – Healthcare Delivery “Outside our Community” (Continued)**

Community Health Needs Assessment Wave #3				Specialties:	
Are we actively working together to address community health?	Decatur Co IA N=133	Trend	Rural Norms 21 N=3,648	SPS	CTS
Yes	55.1%	Green	48.2%	SPEC	14
No	11.2%	Yellow	11.1%	OBG	12
I don't know	33.6%	White	40.0%	PEDS	10
				SURG	9
				PRIM	8
				ORTH	7
				EYE	7
				FEM	5
				DENT	5

**Chart #9 – What HC topics need to be discussed in future Town Hall Meeting**

<b>Community Health Needs Assessment Wave #3</b>			
<b>What needs to be discussed further at our CHNA Town Hall meeting?</b>	<b>Decatur Co N=133</b>	<b>Trend</b>	<b>Rural Norms 21 N=3,648</b>
Abuse/Violence	5.2%		7.2%
Alcohol	4.8%		6.9%
Breast Feeding Friendly Workplace	1.7%		2.3%
Cancer	2.3%		5.4%
Diabetes	4.0%		5.7%
Drugs/Substance Abuse	8.6%		12.3%
Family Planning	4.0%		3.9%
Heart Disease	2.5%		4.1%
Lead Exposure	1.1%		1.2%
Mental Illness	9.2%		14.6%
Nutrition	4.8%		6.2%
Obesity	7.1%		10.9%
Environmental Health	2.3%		1.0%
Physical Exercise	5.6%		8.2%
Poverty	8.8%		9.5%
Lung Disease	1.0%		2.6%
Sexually Transmitted Diseases	3.1%		3.1%
Smoke-Free Workplace	0.8%		2.0%
Suicide	6.7%		9.6%
Teen Pregnancy	2.5%		4.3%
Tobacco Use	2.3%		4.8%
Vaccinations	3.6%		3.4%
Water Quality	4.0%		4.5%
Wellness Education	4.0%		8.3%

# **IV. Inventory of Community Health Resources**

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[VVV Consultants LLC]

<b>Inventory of Health Services in Decatur County IA - 2019</b>				
<b>Cat</b>	<b>HC Services Offered in county: Yes / No</b>	<b>Hospital</b>	<b>HLTH Dept</b>	<b>Other</b>
Clinic	Primary Care			YES
Hosp	Alzheimer Center			
Hosp	Ambulatory Surgery Centers			
Hosp	Arthritis Treatment Center			
Hosp	Bariatric/weight control services			YES
Hosp	Birthing/LDR/LDRP Room			
Hosp	Breast Cancer	YES		
Hosp	Burn Care			
Hosp	Cardiac Rehabilitation	YES		
Hosp	Cardiac Surgery			
Hosp	Cardiology services	YES		
Hosp	Case Management			
Hosp	Chaplaincy/pastoral care services			
Hosp	Chemotherapy	YES		
Hosp	Colonoscopy	YES		
Hosp	Crisis Prevention			
Hosp	CTScanner	YES		
Hosp	Diagnostic Radioisotope Facility			
Hosp	Diagnostic/Invasive Catheterization			
Hosp	Electron Beam Computed Tomography (EBCT)			
Hosp	Enrollment Assistance Services			
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)			
Hosp	Fertility Clinic			
Hosp	FullField Digital Mammography (FFDM)	YES		
Hosp	Genetic Testing/Counseling			
Hosp	Geriatric Services			
Hosp	Heart			
Hosp	Hemodialysis			
Hosp	HIV/AIDSServices			
Hosp	Image-Guided Radiation Therapy (IGRT)			
Hosp	Inpatient Acute Care - Hospital services	YES		
Hosp	Intensity-Modulated Radiation Therapy (IMRT) 161			
Hosp	Intensive Care Unit			
Hosp	Intermediate Care Unit			
Hosp	Interventional Cardiac Catherterization			
Hosp	Isolation room	YES		
Hosp	Kidney			
Hosp	Liver			
Hosp	Lung	YES		
Hosp	MagneticResonance Imaging (MRI)	YES		
Hosp	Mammograms	YES		
Hosp	Mobile Health Services			
Hosp	Multislice Spiral Computed Tomography (<64 slice CT)	YES		
Hosp	Multislice Spiral Computed Tomography (<64+ slice CT)			
Hosp	Neonatal			
Hosp	Neurological services			
Hosp	Obstetrics			
Hosp	Occupational Health Services		YES	YES
Hosp	Oncology Services	YES		
Hosp	Orthopedic services	YES		
Hosp	Outpatient Surgery	YES		
Hosp	Pain Management			
Hosp	Palliative Care Program			YES
Hosp	Pediatric			
Hosp	Physical Rehabilitation	YES	YES	YES
Hosp	Positron Emission Tomography (PET)			
Hosp	Positron Emission Tomography/CT (PET/CT)			

<b>Inventory of Health Services in Decatur County IA - 2019</b>				
<b>Cat</b>	<b>HC Services Offered in county: Yes / No</b>	<b>Hospital</b>	<b>HLTH Dept</b>	<b>Other</b>
Hosp	Psychiatric Services			YES
Hosp	Radiology, Diagnostic	YES		
Hosp	Radiology, Therapeutic	YES		
Hosp	Reproductive Health			
Hosp	Robotic Surgery			
Hosp	Shaped Beam Radiation System 161			
Hosp	Single Photon Emission Computerized Tomography			
Hosp	Sleep Center	YES		
Hosp	Social Work Services	YES		
Hosp	Sports Medicine			
Hosp	Stereotactic Radiosurgery			
Hosp	Swing Bed Services	YES		
Hosp	Transplant Services			
Hosp	Trauma Center -Level IV	YES		
Hosp	Ultrasound	YES		
Hosp	Women's Health Services		YES	YES
Hosp	Wound Care	YES		
SR	Adult Day Care Program			
SR	Assisted Living			YES
SR	Home Health Services		YES	YES
SR	Hospice			Yes
SR	LongTerm Care			YES
SR	Nursing Home Services			YES
SR	Retirement Housing			YES
SR	Skilled Nursing Care			YES
ER	Emergency Services	YES		
ER	Urgent Care Center	YES		
ER	Ambulance Services	YES		
SERV	Alcoholism-Drug Abuse			YES
SERV	Blood Donor Center			
SERV	Chiropractic Services			YES
SERV	Complementary Medicine Services			YES
SERV	Dental Services			YES
SERV	Fitness Center		YES	YES
SERV	Health Education Classes	YES	YES	YES
SERV	Health Fair (Annual)			YES
SERV	Health Information Center		YES	
SERV	Health Screenings	YES		YES
SERV	Meals on Wheels			YES
SERV	Nutrition Programs		YES	YES
SERV	Patient Education Center		YES	
SERV	Support Groups			YES
SERV	Teen Outreach Services			YES
SERV	Tobacco Treatment/Cessation Program			YES
SERV	Transportation to Health Facilities			YES
SERV	Wellness Program		YES	YES



## Providers Delivering Care in Decatur County IA - 2019

### Decatur County Hospital Primary Service Area

# of FTE Providers working in county	FTE Physicians		FTE Allied Staff
	PSA Based DRs	Visiting DRs *	PSA Based PA / NP
<b>Primary Care:</b>			
Family Practice	4.0	0.0	1.0
Internal Medicine / Geriatrician	0.0	0.0	
Obstetrics/Gynecology	0.0	0.0	
Pediatrics	0.0	0.0	
<b>Medicine Specialists:</b>			
Allergy/Immunology	0.0	0.00	
Cardiology	0.0	0.10	
Dermatology	0.0	0.05	
Endocrinology	0.0	0.00	
Gastroenterology	0.0	0.00	
Oncology/RADO	0.0	0.10	
Infectious Diseases	0.0	0.00	
Nephrology	0.0	0.00	
Neurology	0.0	0.00	
Psychiatry	0.0	0.00	
Pulmonary	0.0	0.00	
Rheumatology	0.0	0.00	
<b>Surgery Specialists:</b>			
General Surgery / Colon / Oral	0.0	0.40	
Neurosurgery	0.0	0.00	
Ophthalmology	0.0	0.00	
Orthopedics	0.0	0.00	
Otolaryngology (ENT)	0.0	0.05	
Plastic/Reconstructive	0.0	0.00	
Thoracic/Cardiovascular/Vasc	0.0	0.00	
Urology	0.0	0.00	
<b>Hospital Based:</b>			
Anesthesia/Pain	0.0	0.05	
Emergency	1.0	0.00	0.5
Radiology	0.0	0.00	
Pathology	0.0	0.00	
Hospitalist	0.0	0.00	
Neonatal/Perinatal	0.0	0.00	
Physical Medicine/Rehab	0.0	0.00	
Occ Medicine	0.0	0.00	
Audiology	0.0	0.10	
Podiatry	0.0	0.20	
<b>TOTALS</b>	<b>5.0</b>	<b>1.05</b>	<b>1.5</b>

\* Total # of FTE Specialists serving community whose office outside PSA.

## Visiting Specialists to Decatur County Hospital IA

<b>SPECIALTY</b>	<b>Physician Name/Group</b>	<b>Office Location (City/State)</b>	<b>SCHEDULE</b>	<b>Days per YR</b>
Cardiology	Joel From, MD	Iowa Heart	2x Monthly	24
Dermatology	Anne Nelson, PA-C	Des Moines, IA	Once Monthly	12
Oncology/Hemo	Zeeshan Jaws MD	Des Moines, IA	2x Monthly	24
Pulmonary	Daniel J. Barth, DO	Des Moines, IA	Once Monthly	12
ENT	Stephen Griffith	Des Moines, IA	Once Monthly	12
General Surgeon	Edwin Wehling, MD	Corydon, Iowa	8x Monthly	96
Urology	Brian Gallagher, MD	Des Moines, IA	Once Monthly	12
Audiology	Curtis Pargeon, H.I.S.	URBANDALE, IA.	2x Monthly	24
Pain Clinic	Jay Brewer, CRNA	Bloomfield, Iowa	Once Monthly	12
Pod (Foot)	Randy Metzger, DPM	Des Moines, IA	4x Monthly	48

# Decatur County Iowa Healthcare Services Directory

## Emergency Numbers

<b>Police/Sheriff</b>	<b>911</b>
<b>Fire</b>	<b>911</b>
<b>Ambulance</b>	<b>911</b>

## **Non-Emergency Numbers**

Decatur County Sheriff	(641) 446-4111
Decatur County Ambulance	(641) 446-4871

## **Municipal Non-Emergency Numbers**

	<b>Police</b>	<b>Fire</b>
Leon	(641) 446-7733	(641) 446-6221
Lamoni	(641) 784-8711	(641) 784-6791
Garden Grove		(641) 443-2463
Grand River		(641) 773-5436
Weldon		(641) 445-5637

## 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 & Exploited Children	1-800-THE LOST
National Institute on Drugs	1-800-662-4537
Poison Control	1-800-222-1222
Sr Health Ins 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 Healthcare Resources

## Quick Reference Phone Guide

<u>Affordable Healthcare – <a href="http://www.healthcare.gov">www.healthcare.gov</a></u>	1-800-318-2596
AIDS Hotline	1-800-273-AIDS
Alcoholics Anonymous	1-515-282-8550
Alzheimer's Disease Helpline	1-800-272-3900
American Association on Diabetes	1-800-232-3472
American Cancer Society	1-800-227-2345
American Council of the Blind	1-800-424-8666
American Foundation for the Blind	1-800-232-5463
American Heart Association	1-800-242-8721
American Kidney Fund	1-800-638-8299
A.R.C. (Association of Retarded Citizens of Iowa)	1-800-433-5255
American Red Cross	1-800-733-2767
Arthritis Foundation	1-844-571-HELP
<u>Better Business Bureau (BBB) – <a href="http://www.bbb.org">www.bbb.org</a></u>	1-703-276-0100
Boys Town National Hotline	1-800-448-3000
Child Find of America – 2 <sup>nd</sup> Line	1-800-426-5678
Child Find of America – Parents Help Line	1-800-AWAYOUT
Child/Adult Abuse/Neglect Reporting	1-800-362-2178
Children's Wish Foundation	1-800-323-9474
COMPASS for Disabled People (Iowa)	1-800-779-2001
Deaf Iowans Against Abuse Hotline	1-319-531-7719
Office of Deaf Services of Iowa – <a href="http://www.deafservices.iowa.gov">www.deafservices.iowa.gov</a>	cell to cell text 515-661-4015 or 1-888-221-3724
<u>Dependent Adult and Child Abuse</u>	1-800-362-2178
Dependent Adult/Child Referral	1-800-362-2178
Domestic Abuse Hotline	1-800-770-1650
Dyslexia Association (International)	1-800-222-3123
Easter Seal Society of Iowa, Inc.	1-515-289-1933
Epilepsy Foundation	1-800-332-1000
Eye Care – National Help Line	1-877-887-6327
Family Planning	1-800-452-3365
Family Violence (Crisis Intervention Services)	1-800-270-1620
Farm – On (Iowa Concern Hotline)	1-800-447-1985
<u>Federal Insurance Consumer Help Line (Insurance Information Institute - <a href="http://www.iii.org">www.iii.org</a>)</u>	1-800-942-4242
First Call for Help (United Way 211 Line)	1-515-246-6555
Foundation Through Crisis	1-800-332-4224
Gambling Hotline	1-800-BETSOFF
G.E.D. or High School Equivalency Diploma (adult basic education)	1-800-316-6850
Hawk – I (Free or Low-Cost Health Coverage for Kids)	1-800-257-8563
Hay Hotline (Hay & Straw selling list for producers to buy from-call to add your product)	1-800-383-5079
<u>Health Information Resource Center – <a href="http://www.health.gov/nhic">www.health.gov/nhic</a></u>	1-240-453-8280
Healthy Families Hotline (ISU)	1-800-369-2229
Health and Human Services Information (Iowa Dept. of Human Services)	1-800-972-2011
Hearing & Speech Action (National Association for Hearing and Speech Action)	1-800-638-8255
Hearing Help Line (Better Hearing Institute)	1-800-EAR-WELL
Help Health Drug/Alcohol/Substance Abuse	1-800-662-HELP
Huntington's Disease Society of America	1-800-345-4372
Iowa Attorney General – Consumer Protection	1-888-777-4590
Iowa Arson/Crime Hotline	1-800-532-1459
Iowa Commission for the Blind	1-800-362-2587
Iowa Commission on the Status of Women	1-800-558-4427
Iowa Compass (disabilities resources)	TTY 1-800-735-2942
Iowa Concern Hotline (ISU)	1-800-447-1985
Iowa Child Abuse Reporting Hotline	1-800-362-2178
<u>Iowa Department of the Blind – <a href="http://www.blind.state.ia.us">www.blind.state.ia.us</a></u>	1-800-362-2587
<u>Iowa Department on Aging – <a href="http://www.iowaaging.gov">www.iowaaging.gov</a></u>	1-800-532-3213
Iowa Foundation of Medical Care (Telligen)	1-800-383-2856
<u>Iowa Legal Aid – <a href="http://www.iowalegalaid.org">www.iowalegalaid.org</a></u>	1-800-532-1275
Iowa Legal Aid (60 & older)	1-800-992-8161
Iowa Ombudsman (Report concerns on government agencies)	1-515-281-3592
Iowa One Call, 48hr notice required – <a href="http://www.iowaonecall.com">www.iowaonecall.com</a>	Call 811 or 1-800-292-8989
Iowa Sexual Assault Hotline	1-800-284-7821
Iowa Society to Prevent Blindness	515-244-4341 or 1-800-329-8782

Iowa State Bar Association (Locate a Lawyer) – <a href="http://www.iowabar.org">www.iowabar.org</a>	1-800-457-3729
Iowa State Patrol Emergency	1-800-525-5555
Iowa Victim Service Call Center      text 'iowahelp' to 20121 or <a href="http://www.survivorshelpline.org">www.survivorshelpline.org</a>	1-800-770-1650
Iowa Workforce Development	1-800-562-4692
IRS (Assistance for Individuals)	1-800-829-1040
ISU Continuing Education	1-800-262-0015
ISU Extension	1-800-854-1658
Juvenile Diabetes Foundation (International)	1-800-533-2873
Legal Aid/Legal Services Corporation of Iowa	1-800-452-0007
Living Bank Organ Donation	1-800-528-2971
Lifelong Links-Aging & Disability Resource Centers – <a href="http://www.i4a.org/lifelong-links">www.i4a.org/lifelong-links</a>	1-866-468-7887
Lupus Foundation	1-800-558-0121
Lymphedema Network (National)	1-800-541-3259
Medical Alert/Connect America – <a href="http://www.MedAlert.net">www.MedAlert.net</a>	1-800-215-4206
Medicare	1-800-633-4227 or 1-800-MEDICARE
Medicare/Social Security	1-800-772-1213
Mental Health Information and Referral (Emergency Assessment)	1-800-562-4944
Thursday's Child – <a href="http://www.thursdayschild.org">www.thursdayschild.org</a>	1-800-USA-KIDS
Motor Vehicle Information Center (Iowa DOT)	1-800-532-1121
Multiple Sclerosis Society	1-800-FIGHT MS
National Alcohol Hotline	1-800-252-6465
National Alliance for the Mentally Ill (NAMI)	1-800-950-6264
National Center of Missing and Exploited Children	1-800-THE LOST
National Council on Aging	1-571-527-3900
National Council on Alcoholism	1-800-NCA-CALL
National Down's Syndrome Society	1-800-221-4602
National Institute on Drug Abuse	1-800-729-6686
National Kidney Foundation	1-800-522-9559
National Reyes Syndrome Foundation	1-800-233-7393
Ombudsman/Iowa Citizens Aid      TTY: 515-281-3592	1-888-426-6283 or 1-515-281-3592
Parkinson's Disease (National Parkinson's Foundation)	1-800-457-6676
Poison Control	1-800-222-1222
Refugee Services	1-800-362-2780
Scleroderma Foundation	1-800-722-HOPE
Senior Health Insurance Program (SHIIP)	1-800-351-4664
SIDS American Institute – <a href="http://www.SIDS.org">www.SIDS.org</a>	1-239-431-5425
Substance Abuse Information & Mental Health Treatment Referral	1-800-662-4357
State Civil Rights	1-800-457-4416
STI (STD) Resource Center Hotline	1-800-227-8922
Suicide Prevention Hotline	1-800-273-TALK
Teen Line (ISU extension)	1-800-443-8336
Venereal Disease	1-800-227-8922
Veteran's Information (National) – <a href="http://www.va.gov">www.va.gov</a>	1-800-827-1000
Vocational Rehab	1-800-532-1486
WIC (State)	1-800-532-1579

## **Decatur County Offices**

### Assessor

207 N Main St (3<sup>rd</sup> Floor)  
Leon, IA 50144  
641-446-4314

### Attorney

207 N Main St (3<sup>rd</sup> Floor)  
Leon, IA 50144  
641-446-3773

### Auditor

207 N Main St (2<sup>nd</sup> Floor)  
Leon, IA 50144  
641-446-4323

### Board of Supervisors

207 N Main St (2<sup>nd</sup> Floor)  
Leon, IA 50144  
641-446-4382

### Case Management / Waivers & Mental Health Services

201 NE Idaho St  
Leon, IA 50144  
641-446-7178

### Clerk of Court

207 N Main St (2<sup>nd</sup> Floor)  
Leon, IA 50144  
641-446-4331

### Conservation

20485 NW Little River Rd  
Leon, IA 50144  
641-446-7307

### County Fair Association

1700 NW Church St  
Leon, IA 50144  
641-446-4723

### Economic Development

207 N Main St (1<sup>st</sup> Floor)  
Leon, IA 50144  
641-446-4991

### Emergency Management

20401 NW Little River Rd  
Leon, IA 50144  
641-446-7307

### Engineer's Office

1306 S Main St  
Leon, IA 50144  
641-446-6531

### Public Health & Home Care

207 NE Idaho St  
Leon, IA 50144  
641-446-6518

### Recorder's Office

207 N Main St (2<sup>nd</sup> Floor)  
Leon, IA 50144  
641-446-4322

### Sherriff's Office

203 NE Idaho St  
Leon, IA 50144  
641-446-4111

### Treasurer's Office

207 N Main St (2<sup>nd</sup> Floor)  
Leon, IA 50144  
641-446-4321

### Veterans Affairs & General Assistance Office

207 N Main St (1<sup>st</sup> Floor)  
Leon, IA 50144  
641-446-7494

## **ABUSE & PREVENTION**

### **Alcoholics Anonymous Area 24 District 20**

Intergroup Central Office  
1620 Pleasant St. Suite 228  
Des Moines, IA 50314  
Phone: 515-282-8550

### Leon Group

Leon Community Center  
203 NE 2<sup>nd</sup> St.  
Leon, IA 50144

### Lamoni Group

Lamoni Community Center  
108 S. Locust St.  
Lamoni, IA 50140

### **Crossroads Behavioral Health Services**

405 E. McLane  
Osceola, IA 50213  
Phone: 641-342-4888

**Zion Recovery Services, Inc.**  
1500 E. 10<sup>th</sup> St.  
Atlantic, IA 50022  
Phone: 712-243-5091

**Community Health Centers of Southern Iowa (CHCSI)**

Leon Location  
302 NE 14<sup>th</sup> St.  
Leon, IA 50144  
Phone: 641-446-2383

Lamoni Location  
802 E. Ackerly St.  
Lamoni, IA 50140  
Phone: 641-784-7911

**Department of Human Services**

109 S. Main St.  
Osceola, IA 50213  
Phone: 641-342-6516  
*Child Abuse Hotline: 1-800-362-2178*

**ADVOCACY/ OUTREACH/ REFERRAL**

**Crisis Intervention & Advocacy Center**

1510 Greene St.  
Adel, IA 50003  
Phone: 515-993-4095  
*1-800-400-4884 24 hour Domestic Violence and Sexual Assault Hotline*

**Iowa Protection and Advocacy Services**

400 E. Court Ave. Suite 300  
Des Moines, IA 50309  
Phone: 515-278-2502 or 800-779-2502

**ASSISTANCE – Clothing**

**Lamoni Thrift Center**

118 S. Linden St.  
Lamoni, IA 50140  
Phone: 641-784-3821  
New 2 U  
210 N. Main St.  
Leon, IA 50144  
Phone: 641-446-7995

**ASSISTANCE – Financial**

**Child Support Recovery**

1103 S. Sumner St.  
Creston, IA 50801  
Phone: 1-866-219-9120

**Department of Human Services**

109 S. Main St.  
Osceola, IA 50213  
Income Maintenance – 641-342-6516

**ASSISTANCE – Food & Nutrition**

**Child & Adult Care Food Program**

Clarke County Extension  
154 W. Jefferson  
Osceola, IA 50213  
Phone: 641-342-3316 or 641-342-3844

**Women, Infant, & Children Program (WIC)**

MATURA  
210 Russell St.  
Creston, IA 50801  
Phone: 641-202-7114

**Meal Site**

**Leon Community Meal Site**

203 NE 2<sup>nd</sup> St.  
Leon, IA 50144  
Phone: 641-446-4433

**Food Pantries**

**Lamoni Food Pantry**

United Methodist Church  
302 N. Maple St.  
Lamoni, IA 50140  
Phone: 641-784-6868

**Decatur County SCICAP Outreach Center**

306 N. Main St. Suite 1  
Leon, IA 50144  
Phone: 641-446-4454

**ASSISTANCE – General**

**Decatur County General Assistance**

207 N. Main St.  
Leon, IA 50144  
Phone: 641-446-7494

**ASSISTANCE – Utility**

**LIHEAP & Weatherization Assistance**

Decatur County SCICAP Outreach Center  
306 N. Main St. Suite 1  
Leon, IA 50144  
Phone: 641-446-4454



## **BUSINESS & ECONOMIC DEVELOPMENT**

**Natural Resources Conservation Service**  
303 SW Lorraine St.  
Leon, IA 50144  
Phone: 641-446-4135

**USDA Farm Service Agency**  
Clarke-Decatur County  
709 Furnas Dr.  
Osceola, IA 50213  
Phone: 641-342-2162

**USDA Rural Development**  
909 E. 2<sup>nd</sup> Ave. Suite C  
Indianola, IA 50125  
Phone: 515-961-5365

**Decatur County Development**  
207 N. Main St.  
Leon, IA 50144  
Phone: 641-442-6511

**Lamoni Chamber of Commerce**  
190 S. Chestnut St.  
Lamoni, IA 50140  
Phone: 641-784-6311

**Leon Chamber of Commerce**  
207 S. Main St.  
Leon, IA 50144  
Phone: 515-446-4991

**Small Business Development Center  
(SBDC)**  
1501 W. Townline St.  
Creston, IA 50801  
Phone: 800-247-4023 Ext. 483

**Southern Iowa Council of Governments**  
101 E. Montgomery St  
PO Box 102  
Creston, IA 50801  
Phone: 641-782-8491

**CHILD CARE – Finding Care**  
**Child Care Resource & Referral**  
808 5<sup>th</sup> Ave.  
Des Moines, IA 50309  
Phone: 1-877-216-8481

**CHILD CARE – Child Care Centers**  
**Funshine Learning Center**

423 North Walnut St.  
Lamoni, IA 50140  
Phone: 641-784-7505

**CHILD CARE – Resources and Education**  
**for Child Care Providers Child Care**  
**Resource & Referral**  
808 5<sup>th</sup> Ave.  
Des Moines, IA 50309  
Phone: 1-877-216-8481

**CHIROPRACTIC**  
**Heffron Chiropractic Clinic**  
311 N. Main St.  
Leon, IA 50144  
Phone: 641-446-3131

**Lamoni Family Care Chiropractic Health  
Center**  
303 S. Linden St.  
Lamoni, IA 50140  
Phone: 641-784-6677

**CHURCHES**  
**Leon Ministerial Alliance**  
201 W. 1<sup>st</sup> St.  
Leon, IA 50144  
Phone: 641-446-7343

**Davis City**  
**New Salem Baptist Church**  
24424 207<sup>th</sup> Ave.  
Davis City, IA 50065  
Phone: 641-442-2911

**Community of Christ**  
23603 Dale Miller Rd.  
Davis City, IA 50065  
Phone: 641-442-3333

**Decatur City**  
**Trinity Christian Church**  
16773 State Hwy. 2  
Decatur City, IA 50067  
Phone: 641-446-8654

**Lamoni**  
**Community of Christ**  
531 W. Main St.  
Lamoni, IA 50140  
Phone: 641-784-4405

**Community of Christ – Bloomington  
Congregation**

25658 Elk Chapel Rd.  
Lamoni, IA 50140  
Phone: 641-784-7728

**First Baptist Church**

106 S. Cedar St.  
Lamoni, IA 50140  
Phone: 641-784-6734

**Kingdom Hall of Jehovah's Witness**

28871 163<sup>rd</sup> Ave.  
Lamoni, IA 50140  
Phone: 641-784-7878

**United Methodist Church**

302 N. Maple St.  
Lamoni, IA 50140  
Phone: 641-784-6868

**Leon**

**Assembly of God Church**

206 NE Q St.  
Leon, IA 50144  
Phone: 641-446-4390

**Calvary Baptist Church**

1302 NE Poplar St.  
Leon, IA 50144  
Phone: 641-446-6798

**Leon Bible Church**

407 SE Idaho  
Leon, IA 50144  
Phone: 641-446-4416

**Leon Brethren Church**

604 N. Main St.  
Leon, IA 50144  
Phone: 641-446-7576

**Loving Chapel United Methodist Church**

201 W. 1<sup>st</sup> St.  
Leon, IA 50144  
Phone: 641-446-7343

**Mt. Zion Mennonite Chapel**

909 W. 1<sup>st</sup> St.  
Leon, IA 50144  
Phone: 641-446-4897

**Our Saviors Lutheran Church**

709 W. 1<sup>st</sup> St.  
Leon, IA 50144

Phone: 641-446-4138

**Presbyterian Church**

301 E. 1<sup>st</sup> St.  
Leon, IA 50144  
Phone: 641-446-6179

**Saint Brendan's Catholic Church**

1001 NW Church St.  
Leon, IA 50144  
Phone: 641-446-4789

**Salem Mennonite Church**

21033 Lineville Rd.  
Leon, IA 50144  
Phone: 641-446-4537

**Van Wert**

**United Methodist Church**

305 S. Washington  
Van Wert, IA 50262  
Phone: 641-446-7343

**COMMUNITY GROUPS**

**Decatur County 4-H**

ISU Extension Office  
309 N. Main St.  
Leon, IA 50144  
Phone: 641-446-4723

**Mid-Iowa Council Boy Scouts**

6123 Scout Trail  
Des Moines, IA 50321  
Phone: 515-266-2135

**Girls Scouts of Greater Iowa**

10715 Hickman Rd.  
Des Moines, IA 50322  
Phone: 515-278-2881 or 800-342-8389

**COUNSELING & CONSULTATION SERVICES**

**Children & Families of Iowa**

105 E. McLane St. Suite 400  
Osceola, IA 50213  
Phone: 641-342-3444

**DISABILITY SERVICES**

**CROSS Mental Health**

201 NE Idaho St.  
Leon, IA 50144  
Phone: 641-446-7178

**Child Health Specialty Clinics**

904 E. Taylor St. Suite B  
Creston, IA 50801  
Phone: 641-782-9500

**Iowa Compass**

100 Hawkins Dr. Suite 295  
Iowa City, IA 52242  
Phone: 800-779-2001

**Vocational Rehabilitation**

1501 W. Townline St.  
Creston, IA 50801  
Phone: 641-782-8538

**Specialized Support Services**

119 N. Elm St.  
Creston, IA 50801  
Phone: 641-782-4119

**Social Security Administration**

906 E. Taylor St.  
Creston, IA 50801  
Phone: 866-613-2827  
TTY: 641-782-8072

**Terry Lesan, DDS**

1330 E. Main St.  
Lamoni, IA 5040  
Phone: 641-784-6059

**DISASTER ASSISTANCE****American Red Cross**

2116 Grand Ave.  
Des Moines, IA 50312  
Phone: 515-243-7681

**EDUCATION – Family Services****Children in the Middle**

Southwestern Community College  
2520 College Dr.  
Osceola, IA 50213  
Phone: 641-342-3531 or 1-800-247-4023

**Decatur County Parents as Teachers**

Clarke County Public Health  
144 W. Jefferson St.  
Osceola, IA 50213  
Phone: 641-342-3724

**Iowa State University Extension and Outreach**

309 N. Main St.  
Leon, IA 50144  
Phone: 641-446-4723

**Early Access**

Green Hills Area Education Agency  
257 Swan St.  
Creston, IA 50801  
Phone: 844-362-0503

**EDUCATION – College****Graceland University**

1 University Place  
Lamoni, IA 50140  
Phone: 641-784-5000

**Southwestern Community College**

1501 W. Townline St.  
Creston, IA 50801  
Phone: 641-782-7081 or 1-800-247-4023

**Osceola Center**

2520 College Dr.  
Osceola, IA 50213  
Phone: 641-342-3531

**EDUCATION – Preschool, Elementary, Middle, High School, & Alternative****District Offices****Central Decatur Community School District**

1201 NE Poplar St.  
Leon, IA 50144  
Phone: 641-446-4819

**Lamoni Community School District**

202 N. Walnut St.  
Lamoni, IA 50140  
Phone: 641-784-3342

**Mormon Trail Community School District**

403 S. Front St.  
Humeston, IA 50123  
Phone: 641-877-2521

**Preschool****Central Decatur Little Cards Preschool**

201 SE 6<sup>th</sup> St.  
Leon, IA 50144  
Phone: 641-446-6521

**Kids Express**

202 N. Walnut St.  
Lamoni, IA 50140  
Phone: 641-784-3422

**Elementary**

**Central Decatur South Elementary (Grades PK-2)**

201 SE 6<sup>th</sup> St.  
Leon, IA 50144  
Phone: 641-446-6521

**Central Decatur North Elementary (Grades 3-6)**

1203 NE Poplar St.  
Leon, IA 50140  
Phone: 641-446-4452

**Lamoni Elementary School (Grades K-5)**

202 N. Walnut St.  
Lamoni, IA 50140  
Phone: 641-784-3422

**Mormon Trail Elementary School (Grades K-6)**

403 S. Front St.  
Humeston, IA 50123  
Phone: 641-877-2521

**Middle School**

**Lamoni Middle School (Grades 6-8)**

202 N. Walnut St.  
Lamoni, IA 50140  
Phone: 641-784-7299

**High School**

**Central Decatur Community Schools (Grade 7-12)**

1201 NE Poplar St.  
Leon, IA 50144  
Phone: 641-784-7299

**Lamoni High School (Grades 9-12)**

202 N. Walnut St.  
Lamoni, IA 50140  
Phone: 641-784-3351

**Mormon Trail (Grades 7-12)**

502 E. Main St.  
Garden Grove, IA 50103  
Phone: 641-443-3425

**EDUCATION – Special Services  
Green Hills Area Education Agency**

257 Swan St.  
Creston, IA 50801  
Phone: 712-366-0503 or 1-844-366-0503

**SWCC Educational Talent Search**

1501 W. Townline St.  
Creston, IA 50801  
Phone: 641-782-1392

**SWCC Adult & Continuing Education**

1501 W. Townline St.  
Creston, IA 50801  
Phone: 641-782-1441 or 1-800-247-4023 ext 441

**ELECTED OFFICIALS**

**City Offices**

**Decatur City Hall**

302 NE 4<sup>th</sup> St.  
Decatur, IA 50067 Phone: 641-446-6273

**Davis City Hall**

209 N. Bridge St.  
Davis City, IA 50065 Phone: 641-442-8156

**Garden Grove City Hall**

PO Box 120  
Garden Grove, IA 50103 Phone: 641-443-2965

**Grand River City Hall**

126 Broadway St.  
PO Box 475  
Grand River, IA 50108

**Lamoni City Hall**

190 S. Chestnut St. Leon, IA 50144  
Phone: 641-784-6311

**Leon City Hall**

104 W. 1<sup>st</sup> St.  
Leon, IA 50144  
Phone: 641-446-6221

**Van Wert City Hall**

101 E. 1<sup>st</sup> St.  
Van Wert, IA 50262 Phone: 641-445-5358

**US Senators  
Senator Joni Ernst**

Des Moines Office Washington DC Office  
733 Federal Bldg

111 Russell Senate Office Bldg.  
210 Walnut St.

Washington, DC 20510  
Des Moines, IA 50309

Phone: 202-224-3254  
Phone: 515-284-4574

**Senator Chuck Grassley**  
Des Moines Office Washington DC Office  
721 Federal Bldg.

135 Hart Senate Office Bldg.  
210 Walnut St.

Washington, DC 20510  
Des Moines, IA 50309

Phone: 202-224-3744  
Phone: 515-288-1145

Fax: 202-224-6020  
Fax: 515-288-5097

**US Representative**  
**Representative David Loebsack**  
Iowa City Office Washington DC Office  
125 S. Dubuque St.

1527 Longworth House Office Bldg.  
Iowa City, IA 52240

Washington, DC 20515  
Phone: 319-351-0789

Phone: 202-225-6576

**State Senator**  
**Senator Amy Sinclair**  
1007 E. Grand Ave.  
Des Moines, IA 50319  
Phone: 515-281-3371  
Fax: 515-242-6108

**State Representative**  
**Representative Joel Fry**  
1007 E. Grand Ave.  
Des Moines, IA 50319  
Phone: 515-281-3221  
Fax: 515-281-5868

## **EMPLOYMENT SERVICES**

**Iowa Workforce Development**  
215 N. Elm St.  
Phone: 641-782-2119

## **HEALTH CARE SERVICES & MEDICAL ASSISTANCE**

**Affordable Care Act**  
Health Insurance Marketplace  
Department of Health and Humans Services  
465 Industrial Blvd.

State of Iowa  
London, KY 40750-0001

Phone: 844-368-4378  
Phone: 800-318-2596

**Department of Human Services**  
109 South Main St.  
Osceola, IA 50213  
Income Maintenance: 641-342-6516

## **HOSPICE & HOME HEALTH**

**Circle of Friends Home Care**  
1010 N. 7<sup>th</sup> St.  
Chariton, IA 50049  
Phone: 641-774-2339

**Decatur County Public Health & Home Care**  
207 NE Idaho St.  
Leon, IA 50144  
Phone: 641-446-6518

**South Central Health and Home Care**  
303 SW Lorraine St. Suite A  
Leon, IA 50144  
Phone: 641-446-8953

**Circle of Life Hospice Care**  
220 Northwestern Ave.  
Chariton, IA 50049  
Phone: 641-774-3490 or 877-574-3490

## **HCI Hospice Care Services of Southern Iowa**

Osceola Location  
715 W. McLane St. Suite 100  
Osceola, IA 50213  
Phone: 641-342-2888 or 877-642-2888

Mount Ayr Location

107 S. Fillmore St.  
Mounty Ayr, IA 50854  
Phone: 641-464-2088 or 888-464-7222

**HOSPITALS & CLINICS**

**Community Health Centers of Southern Iowa**

Leon Location

302 NE 14<sup>th</sup> St.  
Leon, IA 50144  
Phone: 641-446-2383

Lamoni Location

802 E. Ackerly St.  
Lamoni, IA 50140  
Phone: 641-784-7911

**Child Health Specialty Clinics**

904 E. Taylor Suite B  
Creston, IA 50140  
Phone: 641-782-9500

**Decatur County Hospital**

1405 NW Church St.  
Leon, IA 50144  
Phone: 641-446-4871

**HOTLINES & INFORMATION**

**2-1-1 Resources and Referral Hotline**

Phone: 2-1-1

**AIDS Information Hotline**

Phone: 800-448-0440

**AI-Anon Hotline**

Phone: 1-888-4AL-ANON (1-888-425-2666)  
Business Office: 757-563-1600

**Americans with Disabilities (ADA) Hotline**

Phone: 800-514-0301

**Gay and Lesbian National Hotline**

Phone: 888-THE-GLNH (888-843-4564)

**Central Iowa Crisis Line**

Toll-Free Crisis Line: 844-258-8858

**Iowa Compass Hotline**

Phone: 800-779-2001

**Iowa Gambling Treatment Program**

Phone: 800-BETS-OFF

**Iowa Healthy Family Hotline**

Phone: 800-369-2229

**Lawyer Referral Services Hotline**

Phone: 800-532-1108

**Medline Plus**

Website: [www.medlineplus.gov](http://www.medlineplus.gov)

**National Alliance on Mental Illness Helpline**

Phone: 800-950-6264

**National Council on Alcoholism and Drug Dependence Hope Line**

Phone: 800-622-2255

**Mental Health America**

Phone: 800-969-6642

**National Life Center**

Phone: 800-848-5683

**National Runaway Switchboard**

Phone: 800-RUNAWAY or 800-786-2929

**National Suicide Prevention Lifeline**

Phone: 800-273-TALK or 800-273-8255

**Rape, Abuse & Incest National Hotline (RAINN)**

Phone: 800-656-HOPE or 800-656-4673

**Quitline Iowa**

Phone: 800-784-8669

**HOUSING – Subsidized & Low Income**

**Westward Properties**

606 N. Main St.  
Leon, IA 0144  
Phone: 641-344-3636

**Crown Colony Housing**

200 Crown Colony  
Lamoni, IA 50140  
Phone: 641-784-7777

**Parkview Low Rent Housing**

401 SE Q St.  
Leon, IA 50144

Phone: 641-446-4163

**Southern Iowa Regional Housing Authority (SIRHA)**

219 N. Pine St.  
Creston, IA 50801  
Phone: 641-782-8585

**USDA Rural Development**

909 E. 2<sup>nd</sup> Ave. Suite C  
Indianola, IA 50125  
Phone: 515-961-7473

**Southern Iowa Council of Governments (SICOG)**

101 E. Montgomery St.  
Creston, IA 50801  
Phone: 641-782-8491

**LAW ENFORCEMENT & FIRE DEPARTMENT**

**Decatur County Sheriff**

203 NE Idaho St.  
Leon, IA 50003  
Phone: 641-446-4111

**Garden Grove Fire Department**

200 S. Jefferson St.  
Garden Grove, IA 50103  
Phone: 641-443-3135

**Grand River Fire Department**

226 E. 3<sup>rd</sup> St.  
Grand River, IA 50108  
Phone: 641-783-2514

**Iowa State Patrol Office**

1619 Truro Pavement  
Osceola, IA 50213  
Phone: 641-342-2108

**Lamoni Police Department**

135 S. Linden St.  
Lamoni, IA 50140  
Phone: 641-784-8711

**Lamoni Fire Department**

190 S. Chestnut St.  
Lamoni, IA 50140  
Phone: 641-784-6791

**Leon Fire Department**

104 W. 1<sup>st</sup> St.  
Leon, IA 50144  
Phone: 641-446-6221

**Leon Police Department**

104 W. 1<sup>st</sup> St.  
Leon, IA 50144  
Phone: 641-446-7733

**Van Wert Fire Department**

202 Main St.  
Van Wert, IA 50262  
Phone: 641-445-6277

**Weldon Fire Department**

104 N. Main St.  
Weldon, IA 50264  
Phone: 641-445-5637

**LEGAL SERVICES**

**Juvenile Court Services**

211 N. Elm St. Suite B  
Creston, IA 50801  
Phone: 641-782-2519

**Legal Aid of Iowa**

112 E. 3<sup>rd</sup> St.  
Ottumwa, IA 52501  
Phone: 800-532-1275

**MEDICAL SUPPLIES**

**Apria Healthcare**

701 W. Townline St. Suite B  
Creston, IA 50801  
Phone: 641-782-6892

**Hammer Medical Supply**

609 W. Taylor St.  
Creston, IA 50801  
Phone: 641-782-7995

**Hammer Medical Supply**

914 Court Ave.  
Chariton, IA 50049  
Phone: 641-774-4600

**NURSING HOMES, ASSISTED &**

**INDEPENDENT LIVING**

**Lamoni Assisted Living**

810 E. 3<sup>rd</sup> St.  
Lamoni, IA 50140  
Phone: 641-784-8910

**Lamoni Specialty Care**

215 S. Oak St.  
Lamoni, IA 50140  
Phone: 641-784-3388

**Terrace Park Assisted Living**  
201 SW Lorraine St.  
Leon, IA 50144  
Phone: 641-446-8396

**Westview Acres Care Center**  
203 SW Lorraine St.  
Leon, IA 50144  
Phone: 641-446-4165

### **PHARMACIES**

**Hy-Vee Pharmacy**  
1004 W. 1<sup>st</sup> St.  
Leon, IA 50144  
Phone: 641-446-4136

**Community Health Centers of Southern Iowa**  
302 NE 14<sup>th</sup> St  
Leon, IA 50144  
Phone: 641-446-4242

**Hy-Vee Pharmacy**  
101 E. Main St.  
Lamoni, IA 50140  
Phone: 641-784-6322

### **PUBLIC HEALTH PROGRAMS**

**Immunization Clinic**  
Decatur County Public Health & Home Care  
207 NE Idaho St.  
Leon, IA 50144  
Phone: 641-446-6518

**Care for Yourself Women's Health Program for Clarke, Warren, & Decatur**  
144 W. Jefferson  
Osceola, IA 50213  
Phone: 641-342-3724

**I-Smile**  
Marion County Public Health Department  
2003 N. Lincoln  
Knoxville, IA 50138  
Phone: 641-828-2238

**Maternal, Child & Adolescent Health**  
Marion County Public Health Department  
2003 N. Lincoln  
Knoxville, IA 50138  
Phone: 641-828-2238

**1st Five Program**

Marion County Public Health Department  
2003 N. Lincoln  
Knoxville, IA 50138  
Phone: 641-828-2238

**Hawk-I (Healthy & Well Kids in Iowa) & Hawk-I Dental Only**  
Marion County Public Health Department  
2003 N. Lincoln  
Knoxville, IA 50138  
Phone: 641-828-2238

### **RECREATION**

**Indoor**  
**Decatur County Wellness Center**  
(Back of Public Health Building)  
207 NE Idaho St.  
Leon, IA 50144  
Phone: 641-446-6518

**Lockdown Fitness**  
300 N. Main St.  
Leon, IA 50144  
Phone: 641-446-4336

**Doc Heff's Academy to Fitness**  
311 N. Main St.  
Leon, IA 50144  
Phone: 641-446-3131

**Coliseum Movie Theater**  
100 N. Maple St.  
Lamoni, IA 50140  
Phone: 641-784-5665

**Liberty Hall Historic Center**  
1138 W. Main St.  
Lamoni, IA 50140  
Phone: 641-784-6133

**SCIT Theater**  
208 N. Main St.  
Lamoni, IA 50140  
Phone: 446-7444

**Helene Center for the Visual Arts**  
Graceland University Campus  
1 University Pl.  
Lamoni, IA 50140  
Phone: 641-784-7288

**The Shaw Center**  
Graceland University Campus  
1 University Pl.



Lamoni, IA 50140  
Phone: 641-784-5296

**Lamoni Public Library**  
301 W. Main St.  
Lamoni, IA 50140  
Phone: 641-784-6686

**Leon Public Library**  
200 W. 1<sup>st</sup> St.  
Leon, IA 50144  
Phone: 641-446-6332

**Fredrick Madison Smith Library**  
Graceland University  
1 University Pl.  
Lamoni, IA 50140  
Phone: 641-784-5483

### **Outdoor**

#### **Decatur County Parks**

Elk Creek Wildlife Area (14265 Hwy. 2, Leon, IA 50144)  
Kobville (1368 270<sup>th</sup> St., Garden Grove, IA 50103)  
Little River Recreation Area (20401 NW Little River Rd., Lamoni, IA 50140)  
Slip Bluff Park (Slip Bluff Rd., Davis City, IA 50065)  
Shewmaker Park (13818 160<sup>th</sup> St., Grand River, IA 50108)  
Springer Woods (17401 198<sup>th</sup> St., Decatur City, IA 50067)  
Trailside Park (30308 Mormon Trail Rd., Garden Grove, IA 50103)

**Lamoni Golf & Country Club**  
932 S. Smith St.  
Lamoni, IA 50140  
Phone: 641-784-6022

**Leon Golf and Country Club**  
1204 W. 1<sup>st</sup> St.  
Leon, IA 50144  
Phone: 641-446-4529

**J&B Rolling Hills Disc Golf Course**  
US 69 & Spruce Dr.  
Lamoni, IA 50140  
Phone: 641-784-3193

**Colonel George Barrett Disc Golf Course**  
Graceland University Campus  
1 University Pl.  
Lamoni, IA 50140

Phone: 641-784-7288

**Central Park**  
West 4<sup>th</sup> St. & South Chestnut St.  
Lamoni, IA 50140

**Lamoni Parks & Rec**  
108 S. Chestnut St.  
Lamoni, IA 50140  
Phone: 641-784-6742

**Lamoni Community Pool**  
133 S. Linden St.  
Lamoni, IA 50140  
Phone: 641-784-3333

**Nine Eagles State Park**  
23678 Dale Miller Rd.  
Davis City, IA 50065  
Phone: 641-442-2855

**North Park (George Foreman Park)**  
N. Linden St.  
Lamoni, IA 50140

**Recreation Trail**  
Starting points of Iowa Gateway Welcome Center, Central Park, or Liberty Hall  
Lamoni, IA 50140

### **SENIOR SERVICES**

**Senior Health Insurance Information Program (SHIIP)**  
Decatur County Hospital  
1405 NW Church St.  
Leon, IA 50144  
Phone: 641-446-2200

**Social Security Administration**  
906 E. Taylor St.  
Creston, IA 50801  
Phone: 641-782-2779 or 866-613-2827  
TTY: 641-782-8072

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**Connections Area Agency on Aging**  
109 N. Elm St.  
Creston, IA 50801  
Phone: 800-432-9209

**AARP Reset**  
215 N. Elm St.  
Creston, IA 50801  
Phone: 641-782-2119 ext. 31

### **Housing**

**Home-In-Stead, Inc.**

1103 NW Church St.  
 Leon, IA 50144  
 Phone: 641-446-6720

**Country View Senior Housing Community**

1600 NE Poplar St.  
 Leon, IA 50144  
 Phone: 641-342-0976

**Senior Life Solutions**

504 N. Cleveland  
 Mt. Ayr, IA 50854  
 Phone: 641-464-4468

**TRANSPORTATION****Amtrak**

251 N. Main St.  
 Osceola, IA 50213  
 Phone: 1-800-872-7245

**Osceola Cab**

114 W. Logan St.  
 Osceola, IA 50213  
 Phone: 641-342-3025

**Southern Iowa Trolley**

215 E. Montgomery St.  
 Creston, IA 50801  
 Phone: 641-782-6571 or -866-782-6571

**Jefferson Bus Lines**

Amish Country Store  
 109 S. Spruce Dr.  
 Lamoni, IA 50140  
 Phone: 641-784-5300

**UTILITIES, WATER & SANITATION****Alliant Energy**

Phone: 1-800-255-4268

**Clarke Electric Cooperative**

1103 North Main St.  
 PO Box 161  
 Osceola, IA 50213  
 Phone: 641-342-2173 or 1-800-362-2154

**Lamoni Municipal Utilities**

111 S Chestnut St.  
 Lamoni, IA 50140  
 Phone: 641-784-6911

**Lamoni Trash Service**

City of Lamoni (City Hall)  
 190 S. Chestnut St.  
 Lamoni, IA 50140  
 Phone: 641-784-6311

**Leon Municipal Utilities**

104 W. 1<sup>st</sup> St.  
 Leon, IA 50144  
 Phone: 641-446-6221

**Mid-American Energy**

Customer Service: 1-888-427-5632  
 Gas Leak: 1-800-595-5325  
 Power Outage: 1-800-799-4443

**Southern Iowa Rural Water Association (SIRWA)**

1391 190<sup>th</sup> St.  
 Creston, IA 50801  
 Phone: 641-782-5744

**Southwest Iowa REC**

1502 W. South St.  
 Mount Ayr, IA 50854  
 Phone: 641-464-2369 or 1-888-220-4869

**Leon Street & Refuse Department**

105 SW Church St.  
 Leon, IA 50144  
 Phone: 641-446-6232

**VISION CARE****Community Health Centers of Southern Iowa**

302 NE 14<sup>th</sup> St.  
 Leon, IA 50144  
 Phone: 641-446-2383

**VOLUNTEER SERVICES****Retired and Senior Volunteer Program**

1 University Place  
 Lamoni, IA 50140  
 Phone: 641-784-5046

**Americorps Youth Launch**

1 University Place  
 Lamoni, IA 50140  
 Phone: 641-784-5495

# V. Detail Exhibits

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[VVV Consultants LLC]

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## a) Patient Origin Source Files

[VVV Consultants LLC]

## IHA Patient Origin Reports

Iowa Hospital Assoc Patient Origin - IP Decatur County IA	2015 CY		2016 CY		2017 CY		2018 9M	
	Disc	Days	Disc	Days	Disc	Days	Disc	Days
<b>Total</b>	<b>827</b>	<b>3,858</b>	<b>834</b>	<b>3,766</b>	<b>837</b>	<b>3,835</b>	<b>592</b>	<b>2,856</b>
Des Moines - Mercy Medical Center-Des Moines	249	1,450	230	1,205	231	1,287	140	794
Des Moines - UnityPoint Health - Iowa Meth Med Center	163	897	190	942	180	900	165	962
Leon - Decatur County Hospital	195	859	165	699	158	741	106	369
Corydon - Wayne County Hospital and Clinic System	65	153	54	114	48	93	34	65
West Des Moines - UnityPoint Health - Methodist West Hosp	41	100	47	161	41	122	31	95
West Des Moines - Mercy Medical Center-West Lakes	25	60	35	98	40	96	24	63
Des Moines - UnityPoint Health - Iowa Lutheran Hosp	20	106	11	51	20	100	21	75
Iowa City - Univ. Of Iowa Hospitals & Clinics	14	79	19	109	23	191	13	190
Osceola - Clarke County Hospital	15	45	17	74	19	43	17	46
Mount Ayr - Ringgold County Hospital	13	34	18	65	15	61	5	24
Creston - Greater Regional Health	7	24	14	51	10	22	9	24
Chariton - Lucas County Health Center	9	20	4	15	10	22	8	18
Council Bluffs - CHI Health Mercy Council Bluffs	2	9	3	11	12	45		
Des Moines - Broadlawns Medical Center			7	20	5	7	2	11
Council Bluffs - Methodist Jennie Edmundson Hospital	2	6	2	6	5	17	4	15
Ames - Mary Greeley Medical Center	1	1	7	78	2	10		
Others	6	15	11	67	18	78	13	105

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## b) Town Hall Attendees, Notes, & Feedback

[VVV Consultants LLC]

**Decatur County Hospital CHNA Town Hall March 19, 2019 N=22**

<b>Category</b>	<b>First</b>	<b>Last</b>	<b>Organization</b>	<b>Address</b>	<b>City</b>	<b>ST</b>	<b>Zip</b>
Public health officials.	Terre	Acheson	Decatur DOH & Home Care	2154 15th Street	Allerton	IA	50008
Political, appointed and elected officials.	Janelle	Anders	Lamoni	621 Lakeview Dr	Lamoni	IA	50140
Physicians.	Erike	Brown	Chief Medical Offices/DCH	1405 NW Church St	Leon	IA	50144
The organization's board members.	Samantha	Cannon	CHCSI	302 NE 14th St	Leon	IA	50144
Community member	Linda	Chastain			Leon	IA	50144
The hospital organization's board members.	Guy	Clark	Decatur Co Hospital	706 SE Q Street	Leon	IA	50144
Education officials and staff - school superintendents	Chris	Coffelt	CD Comm Schools	1201 NE Poplar	Leon	IA	50144
Leaders in other not-for-profit health care organizations	Kevin	Comer	CHCSI	302 NE 14th St	Leon	IA	50144
Leaders in other not-for-profit health care organizations	Cody	Cooper	CHCSI	302 NE 14th St	Leon	IA	50144
Community member	Bob	Fleming			Leon	IA	50144
Community member	Jane	Fleming			Leon	IA	50144
Community member	Kevin	Frost			Leon	IA	50144
Community member	Sheri	Frost			Leon	IA	50144
Leaders in other not-for-profit health care organizations	Kiley	Higdon	CHCSI	302 NE 14th St	Leon	IA	50144
Community member	Mike	Johnston	Decatur County Hospital	1405 NW Church St	Leon	IA	50144
Community member	Shirley	Kessel		12301 290th St	Lamoni	IA	50140
Leaders in other not-for-profit health care organizations	Danielle	O'Brien Day	CHCSI	221 E. State St	Centerville	IA	52544
Leaders in other not-for-profit health care organizations	Athena	Porter	CHCSI	302 NE 14th St	Leon	IA	50144
Physicians.	Larry	Richard	CHCSI	302 NE 14th St	Leon	IA	50144
Health Department	Holly	Rush	Decatur Co Health Dept		Lamoni	IA	50140
DCH Auxiliary Members	Sharon	South		1103 NW Church St.	Leon	IA	50144

## **Decatur County Town Hall Notes 5:30-7:00 pm N= 22**

Food Insecurity: Backpacks are at schools, and there are food pantries in Leon.

Reduced lunches: 60/100 students.

Drugs: Opioids, Meth, Marijuana.

The Amish are important to the community.

Mental Health Access Center opens Nov 1<sup>st</sup> 2019 and will be in Osceola (Diagnosis, Treatment and Aftercare services).

Manufacturing factory will be opening in Wade County and offering jobs in area.

Lamoni is working on survey for fitness and wellness in Decatur County.

### Strengths:

- Collaboration in community
- Senior Life Solutions
- ER services
- New providers
- Facilities
- Pharmacy 340B program
- Outdoor activities in summer
- Clinic extended hours
- Nutrition and wellness support services for food insecurity
- Mental Health Access
- Mammography screening services
- Public Health services
- School nurses

### Things to Improve:

- Specialty Doctors: OBGYN, Neur, Rhum, Orth, Peds
- Primary Care Doctors
- Pediatric Mental Health Counseling
- Suicides
- Amish (No insurance, Preventative Care, Vaccinations)
- Eye doctors
- Dentists
- Mental Health therapists
- Substance Abuse: Alcohol
- Drugs
- Public Perception
- Child Care Services
- Housing
- Economic Development
- Obesity (nutrition and exercise)
- Healthcare Transportation
- Access to Medicaid
- Poverty



# Wave #3 CHNA - Decatur Co.

## Town Hall Conversation - Strengths (Color Cards) N= 22

Card #	C1	Today: What are the strengths of our community that contribute to health?	Card #	C1	Today: What are the strengths of our community that contribute to health?
2	ACC	Access to local healthcare	3	DOCS	Rating of health care providers
4	ACC	Services programs have increased	15	DOCS	PCPs like NP + PA available
5	ACC	MH access Center	16	DOCS	Great providers (primary & specialists)
9	ACC	Good FQHC with expanded hours	3	DOH	Public health
12	ACC	New service lines at hospital	10	DOH	Good public health
14	ACC	Walk-in access vs ER	11	DOH	Good public health
15	ACC	Growing & expanding office locations (clinic)	6	EDU	Education system
17	ACC	Lots of assistance provided to those in need	7	EDU	Schools - center of community, promotes sense of community
4	ADMIN	Good administration	3	EMER	ER department
9	AGE	Senior life services - outpatient, meanth health, therapy for seniors	13	EMER	Critical access - providing ER
10	AGE	Senior life	6	EMS	EMS
13	AGE	Senior life solutions	8	EMS	EMS - ER - OP services
8	ALL	Healthcare we have in place	9	EMS	Excellent EMS coverage + service
17	ALL	Good quality healthcare	2	FIT	Feasibility Study for new fitness center
18	ALL	Medical Care	4	FIT	Areas to exercise
3	BH	Mental health access	5	FIT	Fitness / wellness center
4	BH	Mental health care opening	14	FIT	Walking trail
7	BH	Mental health specialists & services - services opening in Osecola	17	FIT	Bike trail
8	BH	Mental health issues being addressed	15	HH	Home health
9	BH	Mental health accesscenter in Osceola	19	HH	Home health
12	BH	New mental health initiatives by CHCSI	1	HOSP	services available through hospital
13	BH	Increase of mental health services at CHCSI	2	HOSP	New hospital & clinic facilities
17	BH	Access to mental health services	6	HOSP	Decatur Co. hospital
6	CHSCI	CHCSI - community health center	7	HOSP	Hospital & clinic in country that provides health care with access to specialists
8	CHSCI	CHCSI - community health center	9	HOSP	New hospital bringing new physicians on board
10	CHSCI	CHCSI - mental health access center	11	HOSP	Good hospital - continually improving
10	CHSCI	CHCSI - hours expanded available	14	MAMO	Mammography
11	CLIN	Good clinic several docs/NPs + locations	15	MAMO	Mammography
19	CLIN	Walk in clinic hours	19	MAMO	Mammography available
2	COLLAB	Healthcare working together	12	NUTR	School providers food pantry
3	COLLAB	Work together - PH , FQHC, DCH	9	OP	New outpatient services - opening a urogynology clinic at the hospital in April or May
7	COLLAB	Partnerships between community/county entities	19	OP	Outpatient services
9	COLLAB	Improving relationships between hospital, FQHC, and health department, etc	17	OTHR	Quality of life
11	COLLAB	Survey respondents feel we are "actively working together"	10	PHARM	Pharmacy 340B
12	COLLAB	3 entities working together	10	PHARM	Pharmacy access
13	COLLAB	Partners willing to work together	11	PHARM	Good pharmacy access
14	COLLAB	Collaboration	14	PHARM	340B Pharmacy
15	COLLAB	Collaboration between hospital, clinic, & public health	15	PHARM	Pharmacy
16	COLLAB	Collaboration efforts between healthcare & organizations	16	PHARM	340B Pharmacy
19	COLLAB	Collaboration between health partners	17	PHARM	340B Pharmacy
10	COMM	Better/improved commuincation between exisiting healthcare entities	19	PHARM	340B Pharmacy
1	CONSER	Conservation department	1	REC	Recreation activities (pool - Little River Lake)

## Wave #3 CHNA - Decatur Co.

### Town Hall Conversation - Strengths (Color Cards) N= 22

Card #	C1	Today: What are the strengths of our community that contribute to health?	Card #	C1	Today: What are the strengths of our community that contribute to health?
10	CONSER	Conservation activities	7	REC	Recreation/natural resources of area
13	CONSER	Conservation boards	9	REC	Excellent outdoor activities
1	CORP	people are willing to help each other	15	REC	Recreational trails
7	CORP	County Development Coordinator in place & committed to area coordination of services with community and county	19	REC	Recreational trails
2	DOCS	Good physicians / providers	3	SNUR	School nursing

# Wave #3 CHNA - Decatur Co.

## Town Hall Conversation - Weakness (Color Cards) N= 22

Card #	C1	Today: What are the weaknesses of our community that contribute to health?	Card #	C1	Today: What are the weaknesses of our community that contribute to health?
14	ACC	Access to affordable exercise facility services	19	KID	Childcare
15	ACC	Keeping community members in Decatur County for healthcare	20	KID	Daycare
1	AGE	More activities for over 65 to combat loneliness	22	KID	Childcare
21	AGE	Adult daycare	21	NH	Nursing home
8	ALL	Overall health (obesity/smokers/exercise)	22	NH	Nursing home
2	BH	Depression / suicide	8	NUE	Neurology
3	BH	Mental health	1	NUTR	Better / more hours of operation for food pantry
5	BH	Mental health	2	NUTR	Hunger
6	BH	Mental health services and support	4	NUTR	Nutrition Education
12	BH	Pediatric mental health	16	NUTR	Decrease food insecurity
18	BH	Mental health access	17	NUTR	More nutritional education
19	BH	MH services in schools/education	21	NUTR	Nutritional education
20	BH	More therapists @ CHCSI	3	OBES	Obesity
2	CLIN	Clinics/ providers	4	OBES	Obesity
11	COMM	Communication on existing services available	5	OBES	Obesity
6	CORP	More people need to work together with the community to develop sense of community	12	OBES	Obesity - wellness programs to improve chronic disease
9	CORP	Public perception	16	OBES	Lower obesity
14	DENT	Dentist access	8	OBG	OBGYN - peds
16	DENT	More dentists	14	OTHR	Improve case management services
7	DOCS	Need additional providers	19	OTHR	Programs & activities for beds
3	DRUG	Meth addiction	17	PED	Need a pediatrician
4	DRUG	Substance abuse	21	PED	Pediatrician
5	DRUG	Substance abuse	2	POV	Poverty
12	DRUG	Drugs/ substance abuse	4	POV	Poverty
17	DRUG	Drug abuse	5	POV	Poverty
6	ECON	Economic development	10	RESP	Public motivation
8	ECON	Economic development - more jobs / wages	10	RESP	Public perception
9	ECON	Economic opportunities	8	RHE	Rheumatology
14	ECON	Economic development	4	SMOK	Smoking
19	ECON	Economic development	13	SMOK	Smoking cessation
22	ECON	Economic development	8	SPEC	Specialist visits to local hospital
9	EYE	Eye doctor	8	SPEC	MD + DO (increase)
10	EYE	Optometry	12	SPEC	More MD/DO (less mid levels)
11	EYE	Optometrist - cataract surgery	15	SPEC	Adding speciality providers to fill needs
14	EYE	Eye doctor access	15	SPEC	Increasing physician coverage / availability at hospital for ED and Mid surgery and primary care
1	FAM	Involve parent in reaching out for guidance & raising their family	3	SUIC	Suicide
5	FIT	Physical exercise	4	SUIC	Suicide
16	FIT	Increase physical fitness	5	SUIC	Suicide
18	FIT	Physical wellness options	22	TOB	Tobacco prevention
19	FIT	Availability/access to fitness & education	11	TRANS	Transportation
2	H2O	Water quality	12	TRANS	Transportation
3	H2O	Water quality	14	TRANS	Non-emergent transportation to medical services
6	HOUS	Housing	15	TRANS	Transportation issues - affordable options
17	HOUS	Additional housing	17	TRANS	Improved transportation services
6	INFRA	Infrastructure - roads, sidewalks, safe roads to school	22	TRANS	Transportation to/from appointments

# Wave #3 CHNA - Decatur Co.

## Town Hall Conversation - Weakness (Color Cards) N= 22

Card #	C1	Today: What are the weaknesses of our community that contribute to health?	Card #	C1	Today: What are the weaknesses of our community that contribute to health?
7	INSU	Affordable healthcare - deductibles too high	7	URG	Weekend urgent care
13	INSU	How to navigate the DHS system to see about qualifying for medicaid & waivers	14	VACC	Vaccination rates
7	JOB	Need jobs	17	VACC	Amish shots
12	KID	Childcare	7	VASS	Amish - immunizations
14	KID	Access to childcare	6	WELL	Parent support /community education
15	KID	Childcare	6	WELL	At risk behaviors (suicide, opioids, physical activity)
16	KID	Childcare	15	WELL	Education (health/wellness)
17	KID	Childcare	11	WOM	Women's services

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## c) Public Notice & Requests

[VVV Consultants LLC]

**From:** Mike Johnston, CEO, [MJohnston@d-c-h.org](mailto:MJohnston@d-c-h.org)

**Date:** January 21, 2019

**To (BCC to all):** Community Leaders, Providers and Hospital Board and Staff

**Subject:** Community Health Needs Assessment Round #3 Online Survey Feedback

**Decatur County Hospital** is updating the 2016 Community Health Needs Assessment (CHNA). The goal of this assessment is to understand progress in addressing community health needs cited in the 2016 CHNA report and to collect up-to-date community health perceptions.

To accomplish this work, a short online survey has been developed:

[https://www.surveymonkey.com/r/DecaturCo\\_CHNA2019](https://www.surveymonkey.com/r/DecaturCo_CHNA2019)

All 2019 CHNA online feedback is due by Thursday, February 28<sup>th</sup>. All responses will be confidential. Thank you in advance for your time and support by participating in this important request.

Please hold **Tuesday, March 19<sup>th</sup> to attend the 2019 CHNA Town Hall** from 5:30 p.m. -7:00 p.m. at Leon Country Club. A light dinner will be provided starting at 5:00 p.m.

Sincerely,

Mike Johnston  
Chief Executive Officer





## 2019 Community Health Needs Assessment Set to Begin

Over the next three (3) months, Decatur County Hospital (DCH) will be partnering with Community Health Centers of Southern Iowa (CHCSI) and Decatur County Public Health (DCPH), to complete the 2019 Community Health Needs Assessment (CHNA). The goal of this assessment is to understand progress in addressing community health needs identified in the 2016 CHNA report and to collect up-to-date community health perceptions.

To accomplish this task, a short online survey has been developed which may be accessed via the following link: [https://www.surveymonkey.com/r/DecaturCo\\_CHNA2019](https://www.surveymonkey.com/r/DecaturCo_CHNA2019). All community residents, business leaders, and other stakeholders are encouraged to complete this survey by Thursday, February 28, 2019. Responses are anonymous.

“This work is key to determining the health direction for our county,” said Mike Johnston, Decatur County Hospital CEO. “We are pleased to be able to complete this assessment in collaboration with our local healthcare partners, Community Health Care Centers of Southern Iowa and the Decatur County Public Health Department, for the betterment of the citizens and community we are all honored to serve.” “It is our hope that all community residents and associated stakeholders will take full advantage of this opportunity to provide input into the future of healthcare delivery for Decatur County.”

**All members of the community are invited to a Town Hall/ Community Forum to be held at the Leon Country Club from 5:30pm to 7:00pm on Tuesday, March 19, 2019.** DCH will provide dinner. Please RSVP to Cheri Jensen at 641-446-2339 no later than Friday, March 8, 2019 if you plan to attend.

Vince Vandelaar, MBA of VVV Consultants, LLC (an independent research firm from Olathe, KS) has been retained to conduct this county-wide research. If you have any questions about the activities associated with the 2019 Community Health Needs Assessment, please contact Decatur County Hospital Administration at 641-446-2339.

**From:** Mike Johnston, CEO, [MJohnston@d-c-h.org](mailto:MJohnston@d-c-h.org)

**Date:** March 4, 2019

**To (BCC to all):** Community Leaders, Providers and Hospital Board and Staff

**Subject:** Community Health Needs Assessment – Town Hall Meeting

Decatur County Hospital (DCH) has partnered with Community Health Centers of Southern Iowa (CHCSI) and Decatur County Public Health (DCPH), to complete the 2019 Community Health Needs Assessment (CHNA). The goal of this assessment is to understand progress in addressing community health needs identified in the 2016 CHNA report and to collect up-to-date community health perceptions.

All members of the community are invited to a **Town Hall/ Community Forum to be held at the Leon Country Club from 5:30 p.m. to 7:00 p.m. on Tuesday, March 19<sup>th</sup>, 2019.** Leon Country Club is located at 1204 W 1st St, Leon, Iowa. DCH will provide a working dinner. Please RSVP here: [https://www.surveymonkey.com/r/DecaturCo\\_RSVP](https://www.surveymonkey.com/r/DecaturCo_RSVP)

Vince Vandehaar, MBA of VVV Consultants, LLC (an independent research firm from Olathe, KS) has been retained to conduct this county-wide research.

If you have any questions about the activities associated with the 2019 Community Health Needs Assessment, please contact Decatur County Hospital Administration at 641- 446-2339.

Sincerely,

Mike Johnston  
Chief Executive Officer





# Community Health Needs Assessment Invite Town Hall Meeting / Survey - Decatur County (IA)



in partnership with



*Community Health Centers  
of Southern Iowa*

an iowahealthcenter



*Decatur County*  
PUBLIC HEALTH  
PREVENT. PROMOTE. PROTECT.

**Public is invited to....**  
*attend Town Hall Meeting on*

Tuesday, March 19<sup>th</sup>, 2019  
from 5:30 p.m. to 7:00 p.m.  
at Leon Country Club  
(1204 W 1st St, Leon, Iowa)

**AND**

*take Decatur CHNA Online Community Survey by Friday 3/1/19*

To participate go to DCH website / Facebook page  
or enter link into your browser

[https://www.surveymonkey.com/r/DecaturCo\\_CHNA2019](https://www.surveymonkey.com/r/DecaturCo_CHNA2019)

**Thank you for your participation.**

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## d) Primary Research Detail

Neighborhood Roundtables & Online Research

[VVV Consultants LLC]

## CHNA 2019 Community Feedback - Decatur Co IA N=133

ID	Zip	Overall	Movement	c1	c2	c3	In your opinion, are there any healthcare services or delivery issues that you feel need to be improved, worked on and / or changed?
1053	50144	Good	Not really changing	ACC	WAIT	SPEC	more available ( All Specialty) in this area so people do not have to go to Des Moines
1090	50144	Good	Not really changing	ACC	FEM	ENT	Obtaining additional services to keep patients in the community such as Women's Health and Ophthalmology.
1082	50213	Very Good	Increasing	ACC	SPEC		The community still needs additional services at the hospital such as cataract removals so that patients don't have to travel so far to get these routine operations done.
1008	50140	Very Good	Increasing	ACC			The healthcare services offered in the community are very comprehensive. We have access to a wide variety of services that other smaller communities may not.
1043	50144	Average	Not really changing	ALC	DRUG		aa and NA meetings in leon
1086	50144	Average	Not really changing	ALLER	PEDS	FEM	Need more specialty doctors, allergist, pediatrician, women's health, etc. More doctors covering ER
1057	50147	Good	Increasing	BH	TRAV		Behavioral Health access in Leon - timeframe to get into a provider too long - driving not an option for patients
1125	50144	Good	Increasing	BH	CLIN		Continue to expand mental health services especially for children and families. Continue to expand walk in clinic hours
1030	50144	Good	Not really changing	BH			improved mental health availability
1095	50144	Good	Increasing	BH			Mental Health
1084		Average	Not really changing	BH			Mental Health
1078	50140	Good	Not really changing	BH	CHRON		Mental health and chronic health issues.
1101	50144	Good	Increasing	BH	WAIT		Mental health patients that present to the ER are challenging as far as getting appropriate timely services.
1107	50144	Average	Not really changing	BH	PSY	DENT	Mental health services and training for medical professionals. Psych services in person vs telehealth. Improved dental services. Training for professionals on providing dental support to people with special needs.
1110	50144	Poor	Not really changing	BH	FEM	DIAL	Mental health services, women's health specialist, dialysis services need more attention or added to local facilities for better care.
1022	50065	Very Good	Increasing	BH			Mental health, which is not only a problem in Decatur Co but everywhere. Finding beds is nearly impossible & being able to handle such individuals is difficult when the resources are not available. The Decatur Co Jail is not necessarily the place for these people but they often end up there. I don't know what the right answer is but it effects a lot of people & definitely needs addressed.
1068	50144	Very Good	Increasing	BH	COMM		Mental health. Patients that are brought in to ER should be evaluated by an on call provider that specializes in mental health. Maybe CHCSI and DCH could collaborate - on call therapist for the hospital to see mental patient that come into ER.
1073	50144	Average	Increasing	BH	HOSP		Mental health—not enough BEDS to handle our need. Hospitals are NOT appropriately structured to get paid for keeping them.
1088	50065	Average	Not really changing	BH			More mental health care locally. Big empty lot across the hiway from the hospital. A mental health facility would be great there!
1033	50065	Good	Not really changing	BILL			Payment arrangements
1032		Good	Increasing	CARD			add another cardiologist helping people who work away from home and have spouses that can't take care of themselves but don't want to go to nursing home.
1072	50147	Average	Increasing	CLIN			community health is a horrible clinic and even though it is better it is still a problem
1041	50144	Good	Increasing	CLIN			Extended hours for some services (specialty clinics)
1132	50140	Very Good	Increasing	CLIN	WAIT		Walk-in clinics available everyday, or at least Monday - Saturday to offer folks an alternative to a long drive to the city or an expensive ER bill for a walk in clinic illness.
1098	50144	Good	Increasing	COMM			better communication between clinics and hospital
1120	50144	Average	Not really changing	COMM			CHCSI and DCH need to be more integrated instead of separate
1131	50144	Good	Not really changing	COMM			Clinic and hospital need to cooperate.
1123	64673	Average	Decreasing	COMM			The clinic and hospital need to be more integrated.
1023	50144	Average	Decreasing	CORP	COMM		Entities need to work together.
1002	50108	Very Good	Increasing	CORP			more cooperation between the hospital and the local clinics
1108	52590	Average	Not really changing	DENT	EYE	SPEC	Availability Lack of non-medical health care (dentist, eye doctor)
1113	50144	Very Good	Increasing	DENT			Dental Services - need more dentists
1011		Good	Increasing	DENT			Dental Services. The Health Center has been struggling finding a dentist.
1087	50144	Good	Not really changing	DENT	ORTH	PEDS	Dental, ortho, pediatric/women's health
1119		Good	Increasing	DENT			The local dentist.
1092		Average	Not really changing	DENT			There should be a Dentist that provide denture services
1126	50144	Poor	Not really changing	DOCS	CORP		A couple providers have been in their position for a long time and will not change their opinions, they are difficult to work with. Community seems to be closed to new people/new opinions.

## CHNA 2019 Community Feedback - Decatur Co IA N=133

ID	Zip	Overall	Movement	c1	c2	c3	In your opinion, are there any healthcare services or delivery issues that you feel need to be improved, worked on and / or changed?
1024	50144	Good	Not really changing	DOCS	QUAL		I feel that at times some providers do not always look t th whole picture.
1013	50140	Good	Increasing	DOCS	EMER		Increase onsite physicians at hospital/emergency.
1099	50144	Average	Decreasing	DOCS			More local physicians
1122	50144	Poor	Decreasing	DOCS	STFF		More qualified doctors and more friendly staff
1133	50144	Average	Not really changing	DOCS	MDLV		The clinic needs more MD and DO's. They hire a lot of mid levels and its hard to get in with a actual doctor.
1003	52531	Average	Not really changing	DOCS			we need more providers
1111	50144	Average	Not really changing	DOCS	STFF		Your doctor should see you when you are in the hospital, not a Nurse Practitioner who knows nothing about you. My doctor knows me. My doctor should be the one who sees me and makes decisions if I am in the hospital. It is also concerning that Nurse Practitioners staff the ER at DCH. While there is a need for Nurse Practitioners in healthcare, they ARE NOT PHYSICIANS.
1093		Good	Increasing	EMER			ER dept
1104	50144	Average	Increasing	EYE	DENT		I think we could improve on eye, dental care.
1061	50140	Very Good	Increasing	FEM	OBG	PEDS	Women's health, including access to obstetrical care (including emergency care) also pediatric care
1083	50144	Average	Increasing	FEM			women's health vision
1130	50140	Good	Not really changing	GAS	SPEC		Would love GI at DCH specialty
1089		Average	Not really changing	HOSP			Prehospital
1121	50854	Very Poor	Decreasing	MRKT			Advertising in Ringgold County
1070		Good	Increasing	OBES			More weight loss programs to help obese!
1049	50144	Very Good	Increasing	OBG			I do feel we need infant delivery back in our community
1091	50144	Very Good	Increasing	OBG	PEDS		ob/gyn and peds
1045	52544	Good	Not really changing	OBG	BH	DRUG	OB/GYN, in patient mental/substance facilities
1019	50144	Very Good	Increasing	OBG	PEDS		Sad when we gave up OB and subsequently pediatric opportunities
1097	50144	Very Good	Increasing	OP			Outpatient general clinic like urgent care
1004	50144	Good	Not really changing	PEDS	AGE		A dedicated Pediatrician or provider with special attention to children. Great deal of emphasis placed on elderly, which makes sense, but missing a huge demographic.
1042	50144	Good	Not really changing	PEDS			Pediatric care
1077	50140	Average	Decreasing	PEDS			Pediatric care, practices have changed and doctors aren't up to date
1081		Good	Increasing	PEDS			We could really use a pediatrician
1096	50863	Average	Not really changing	PREV	FIT	NUTR	Preventative care!! Health awareness and incentives to exercise and to eat health. It starts with this hospital.
1014	50144	Good	Not really changing	QUAL			Be more patient centered
1050	50067	Good	Increasing	QUAL			Between the 2 they get patients where they need to be.
1116	50144	Average	Increasing	QUAL			Early diagnosis, not just treating symptoms
1100	50111	Very Good	Increasing	QUAL			In my opinion, Cerner has made out healthcare delivery much harder at this time, and am still hoping this will improve some.
1060	50140	Good	Increasing	QUAL	TRAV		It's really perception, that we can get better health care in a larger city. Our close proximity to Des Moines and our mobility allow people to receive medical care not just in the county.
1027		Good	Increasing	SPEC			More specialist in the area
1047	80204	Average	Not really changing	SPEC	WAIT		More specialists coming to Decatur county and more days they are available. I have waited 2 hours past my appointment time to be seen because the need was so great
1124	50144	Good	Not really changing	SPEC	TRAV		More specialty services at the hospital, and not sending everything to Des Moines.
1075	50144	Good	Not really changing	STFF			Increase training for healthcare staff in Decatur County
1018	50144	Very Good	Not really changing	TRAN	STFF		Transportation to and from appts.is not reliable. Either the trolley needs more staff/vehicles or a second service is needed.
1118	50144	Good	Not really changing	TRAV			As an elderly, blind person, it is very frustrating to coordinate travel to the hospital. Once to the hospital there is no help in getting around, situated in room, and back out to lobby. If I don't have a friend or relative available, I do not go to the hospital. My son is performing this survey with my input.
1109	50144	Good	Increasing	TRAV	AGE	ACC	It is hard for elderly to make the trip to Des Moines for services not offered in Leon so I am in favor of any service we can offer that we currently do not have.
1112	50140	Good	Increasing	VACC	KID		An improvement in getting children's immunizations that have Medicaid locally, and not having to drive to public health to do it.
1031	50125	Good	Increasing	WAIT	SPEC	BH	Less wait time to get into specialists and behavior health.
1054	52531	Good	Decreasing	WAIT	PHY		Therapist are absent often and pt's are waiting over a month to be seen

## CHNA 2019 Community Feedback - Decatur Co IA N=133

ID	Zip	Overall	Movement	c1	c2	c3	What "new" community health programs should be created to meet current community health needs? Can we partner somehow with others?
1073	50144	Average	Increasing	ALC	DRUG		There needs to be active AA and NA programs
1032		Good	Increasing	ALLER	PEDS		arthritis allergy pediatrician
1031	50125	Good	Increasing	BH			Behavior health awareness.
1069	50144	Good	Increasing	BH	EMER		Better access to Mental Health to keep them out of the ER and Jail.
							For mental health/substance abuse we need to be proactive in not only providing services for "adult addicts". We need support groups for loved ones, juveniles, parents. Persons in recovery have absolutely no support services and families have no resources for support/group support.
1041	50144	Good	Increasing	BH	DRUG		
1123	64673	Average	Decreasing	BH			Frequent assessments.
1095	50144	Good	Increasing	BH			Improved mental health
1113	50144	Very Good	Increasing	BH			Increase mental health services
1131	50144	Good	Not really changing	BH			Mental health
1020	50144	Good	Increasing	BH			Mental health needs.
1088	50065	Average	Not really changing	BH			Mental Health.
1043	50144	Average	Not really changing	BH	WAIT		more access to mental health providers! always a wait to see them
1021	50067	Good	Increasing	BH			More health screening
1122	50144	Poor	Decreasing	BH			MORE MENTAL HEALTH AWARENESS
							On-call mental health specialist to personally see mental health patients that come into DCH ER. Possibly this is something that DCH & CHCSI could work on together. Start AA/NA programs in this area, we have problems with alcohol (and drug) use. These people need peer groups. Look for different health specialist that will come into the area to see local residents; (e.g neurologist) Keep healthcare needs closer to home! More education and healthy food programs to help slow down Obesity, - start the educate with the very young to learn to eat properly/exercise etc. at a early age.
1068	50144	Very Good	Increasing	BH			
1133	50144	Average	Not really changing	CHRON	KID		More youth, family, and chronic disease management prevention .
1078	50140	Good	Not really changing	CHRON			Palliative care and chronic disease management
1072	50147	Average	Increasing	CLIN			a new clinic in the hosp
							Back to question 13. Why cannot family providers who put in patients follow them through. They are currently being treated well at the hospital but would seem more consistent to have their doctor follow them through rather than someone at the hospital who does not know them..
1087	50144	Good	Not really changing	COMM	DOCS		
							Need to partner better with our clinics - for example, labs could be done here at our hospital versus outsourcing their labs and getting them in 24-48hours.
1062	50140	Average	Not really changing	COMM	CORP		
1080	50144	Very Good	Increasing	CORP			A community-wide healthcare rewards program like Blue Zones would be cool and set us apart as a healthy community.
1061	50140	Very Good	Increasing	CORP	COMM	REC	Connections between health care agencies and community parks and recreational entities would be productive.. mutual support between community development and health care agencies
1059	52544	Average	Increasing	CORP			Strengthen Community
1014	50144	Good	Not really changing	CORP			working with others for overall wellness
1013	50140	Good	Increasing	DOCS	CLIN		Bring Wolfe Clinic physicians to Decatur Co
1077	50140	Average	Decreasing	DOH	SNUR		Check out the Harrison county health department. Over see the school nurses, Lamoni's frequently forgets to gives meds,
1048	50144	Good	Not really changing	DRUG			Drug prevention
							Better/more extensive women's health services and mental health services. Utilize some sort of assistance for those financially unable to get proper care due to no insurance or poor coverage from insurance.
1110	50144	Poor	Not really changing	FEM	BH	POV	Access to facilities like a Y type place where families can do physical exercise together.
1125	50144	Good	Increasing	FIT	REC		Exercise programs
1081		Good	Increasing	FIT	REC		Workout class with the local gym, Lockdown Fitness?
1022	50065	Very Good	Increasing	FIT	REC		Integrated health home
1035	5271	Average	Not really changing	HH			
1111	50144	Average	Not really changing	HOSP	CLIN	DOCS	The hospital needs it's own clinic and it's own physicians.
							I can't think of any. It seems we are offering a lot for a small county. Marketing what we offer is very important. Gaining confidence that small town services can be better/as good as big city services.
1060	50140	Good	Increasing	MRKT			Refresh a healthy living program to get people to improve their health. Community wide events, employer incentives to participate.
1075	50144	Good	Not really changing	NUTR	FIT	REC	
1030	50144	Good	Not really changing	OBES	DRUG	PHAR	Focus on obesity and over-prescribing of opiates

## CHNA 2019 Community Feedback - Decatur Co IA N=133

ID	Zip	Overall	Movement	c1	c2	c3	What "new" community health programs should be created to meet current community health needs? Can we partner somehow with others?
1023	50144	Average	Decreasing	OBES	NUTR	WELL	Obesity needs to be addressed at the home level. Teach people how and what to cook and how bad convenience and fast food is for them. Education on services available and appropriate use of those services.
1126	50144	Poor	Not really changing	OBES	WELL	REC	There are many great programs to help with obesity, bring in some financial classes, classes for single parents (cooking, nutrition, money, etc). Classes for our senior citizens (nutrition, budget, etc). Substance abuse counseling, Yoga in the Park once a week or more, more family friendly activities, walking school bus 5 days a week-weather permitting.
1057	50147	Good	Increasing	OBES	BH		Weight loss groups and Support Groups for Depression
1108	52590	Average	Not really changing	OBG	DRUG	POV	OB/GYN, intensive substance abuse treatment, Celebrate Recovery, food/clothing pantry's
1085	50801	Good	Increasing	POV			Helping with poverty- kids have a lot of needs in our community that parents are not providing
1083	50144	Average	Increasing	POV	NUTR		I'd like to see accountability programs for SNAP/food pantry/etc. People should have to give back to the community in some way....pick up trash, volunteer at the local thrift store...
1004	50144	Good	Not really changing	POV	SS		Something to lift entire families up out of their situations while also holding them accountable, not just giving them food and other assistance. Show them right and wrong and work to fix the mentality of their children. Case worker based to see them through total life improvement.
1096	50863	Average	Not really changing	PREV	TOB	OBES	Education on preventative care for good health. Tobacco warnings and obesity. Drug use prevention
1052	50074	Very Good	Not really changing	REC	FIT		community work out center
1036	50140	Good	Not really changing	REC			Swimming pool year around
1047	80204	Average	Not really changing	SPEC	TRAN		Bringing specialists down more often in the week and somehow providing transportation to those who cannot get themselves to specialist appointments
1009	50049	Good	Not really changing	SUIC			SUICIDE PREVENTION IN CHILDREN
1128	50833	Average	Not really changing	TRAN			Better public transportation for times other than 8 to 2
1018	50144	Very Good	Not really changing	TRAN	NUTR	KID	Partner with the trolley transportation or bring in a second service. Help Hy-Vee to have all the healthy foods that bigger ones do. Help people get Farmers Market food in the summer. Good daycare for working parents.
1099	50144	Average	Decreasing	URG			urgent care,
1091	50144	Very Good	Increasing	URG	BH		urgent care, and mental health
1132	50140	Very Good	Increasing	URG	EYE		Urgent care/walk in clinic open every day or at least Monday - Saturday A fulltime eye doctor in the area
1003	52531	Average	Not really changing	VIO			crisis management
1008	50140	Very Good	Increasing	WELL			Education & wellness
1107	50144	Average	Not really changing	WELL	CORP		Education is important, community education on what services are available as well as provider education on working with different populations.
1109	50144	Good	Increasing	WELL			I believe a Parkinson's program is being looked into that would be helpful for those who need it.

## Community Health Needs Assessment 2019- Decatur County IA

### Let Your Voice Be Heard!

Decatur County Hospital in partnership with Decatur County Public Health and Community Health Centers of Southern Iowa request your input in order to create a 2019-20 Community Health Needs Assessment (CHNA). To collect "up to date" community feedback, a short online survey has been created to uncover any current community health issues and evaluate local health delivery. Survey funded by DCH.

While your participation is voluntary and confidential, all community input is valued. Thank you for your attention! Deadline to participate is Thursday, February 28th.

## Community Health Needs Assessment 2019- Decatur County IA

**1. In your opinion, how would you rate the "Overall Quality" of healthcare delivery in our community?**

Very Poor  Poor  Average  Good  Very Good

## Community Health Needs Assessment 2019- Decatur County IA

**2. When considering "overall community health quality", is it ...**

Increasing - moving up  Decreasing - slipping downward  
 Not really changing much

Why? (please specify)

## Community Health Needs Assessment 2019- Decatur County IA

**3. In your opinion, are there any healthcare services or delivery issues that you feel need to be improved, worked on and/or changed? (Please be specific.)**

Community Health Needs Assessment 2019- Decatur County IA

**4. In your own words, what is the general community perception of healthcare providers (i.e. hospitals, doctors, public health, etc.) serving our community? (Please be specific.)**

Community Health Needs Assessment 2019- Decatur County IA

**5. From past health assessments of our community, a number of health needs were identified as priorities. Are any of these an ongoing problem for our community? Please select all that apply.**

- |  |  |
|--|--|
| <input type="checkbox"/> Access to Primary Care    | <input type="checkbox"/> Mental Health Services        |
| <input type="checkbox"/> Adult Day Care Services   | <input type="checkbox"/> Obesity / Nutrition Education |
| <input type="checkbox"/> Amish Healthcare Services | <input type="checkbox"/> Pediatric Mental Health       |
| <input type="checkbox"/> DHS Office Access         | <input type="checkbox"/> Poverty                       |
| <input type="checkbox"/> Drugs                     | <input type="checkbox"/> Preventative Healthcare       |
| <input type="checkbox"/> Economic Development      | <input type="checkbox"/> Tobacco                       |
| <input type="checkbox"/> Eye Doctors               | <input type="checkbox"/> Youth Wellness Programs       |
| <input type="checkbox"/> Healthcare Transportation |  |

Community Health Needs Assessment 2019- Decatur County IA



**6. Which past health assessment of our community need is NOW the "most pressing" for improvement?**

**Please select top THREE.**

- |  |  |
|--|--|
| <input type="checkbox"/> Access to Primary Care    | <input type="checkbox"/> Mental Health Services        |
| <input type="checkbox"/> Adult Day Care Services   | <input type="checkbox"/> Obesity / Nutrition Education |
| <input type="checkbox"/> Amish Healthcare Services | <input type="checkbox"/> Pediatric Mental Health       |
| <input type="checkbox"/> DHS Office Access         | <input type="checkbox"/> Poverty                       |
| <input type="checkbox"/> Drugs                     | <input type="checkbox"/> Preventative Healthcare       |
| <input type="checkbox"/> Economic Development      | <input type="checkbox"/> Tobacco                       |
| <input type="checkbox"/> Eye Doctors               | <input type="checkbox"/> Youth Wellness Programs       |
| <input type="checkbox"/> Healthcare Transportation |  |

**Community Health Needs Assessment 2019- Decatur County IA**

**7. In your opinion, what are the root causes of "poor health" in our community? Please select top THREE.**

- |   |  |
|---|--|
| <input type="checkbox"/> Health & Wellness Education                | <input type="checkbox"/> Elder Assistance Programs                                     |
| <input type="checkbox"/> Chronic Disease Prevention                 | <input type="checkbox"/> Family Assistance Programs                                    |
| <input type="checkbox"/> Limited Access to Mental Health Assistance | <input type="checkbox"/> Awareness of Existing Local Programs, Providers, and Services |
| <input type="checkbox"/> Case Management Assistance                 | <input type="checkbox"/> Finance / Insurance Coverage                                  |

Other (please specify)

**Community Health Needs Assessment 2019- Decatur County IA**

**8. How would our community area residents rate each of the following health services?**

	Very Good	Good	Fair	Poor	Very Poor
Ambulance Services	<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"/>
Chiropractors	<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"/>
Emergency Room	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eye Doctor/Optomtrist	<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"/>
Home Health	<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"/>

Community Health Needs Assessment 2019- Decatur County IA

**9. How would our community area residents rate each of the following health services? Continued.**

	Very Good	Good	Fair	Poor	Very Poor
Inpatient Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nursing Home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outpatient Services	<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"/>
Physician Clinics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public Health	<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"/>
Specialists/Medical Providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Community Health Needs Assessment 2019- Decatur County IA

**10. Community Health Readiness is vital. How would you rate each of the following?**

	Very Good	Good	Fair	Poor	Very Poor
Early Childhood Development Programs	<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"/>
Food and Nutrition Services/Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poverty/Financial Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health Screenings (such as asthma, hearing, vision, wellness)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Immunization Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obesity Prevention & Treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**11. Community Health Readiness is vital. How would you rate each of the following? Continued.**

	Very Good	Good	Fair	Poor	Very Poor
Spiritual Health Support	<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"/>
Sexually Transmitted Disease Testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance Use Treatment & Education	<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"/>
Violence Prevention	<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"/>
WIC Nutrition Program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Community Health Needs Assessment 2019- Decatur County IA**

**12. In the past 2 years, did you or someone you know receive healthcare services outside of our community?**

- Yes
- I don't know
- No

If YES, please specify the healthcare services received.

**Community Health Needs Assessment 2019- Decatur County IA**

**13. Are our healthcare organizations, providers and community members actively working together to address/improve health in our community?**

Yes

I don't know

No

Please explain

## Community Health Needs Assessment 2019- Decatur County IA

**14. What "new" community health programs should be created to meet current community health needs? Can we partner somehow with others?**

## Community Health Needs Assessment 2019- Decatur County IA

**15. Are there any other health needs (listed below) that need to be discussed further at our upcoming CHNA Town Hall meeting? (Please select all that apply.)**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Abuse/Violence                    | <input type="checkbox"/> Mental Illness                | <input type="checkbox"/> Suicide            |
| <input type="checkbox"/> Alcohol                           | <input type="checkbox"/> Nutrition/Access to Food      | <input type="checkbox"/> Teen Pregnancy     |
| <input type="checkbox"/> Breast Feeding Friendly Workplace | <input type="checkbox"/> Obesity                       | <input type="checkbox"/> Tobacco Use        |
| <input type="checkbox"/> Cancer                            | <input type="checkbox"/> Environmental health          | <input type="checkbox"/> Vaccinations       |
| <input type="checkbox"/> Diabetes                          | <input type="checkbox"/> Physical Exercise             | <input type="checkbox"/> Water Quality      |
| <input type="checkbox"/> Drugs/Substance Abuse             | <input type="checkbox"/> Poverty                       | <input type="checkbox"/> Wellness Education |
| <input type="checkbox"/> Family Planning                   | <input type="checkbox"/> Lung Disease                  | <input type="checkbox"/> N/A                |
| <input type="checkbox"/> Heart Disease                     | <input type="checkbox"/> Sexually Transmitted Diseases | <input type="checkbox"/> Infant Deaths      |
| <input type="checkbox"/> Lead Exposure                     | <input type="checkbox"/> Smoke-Free Workplace          | <input type="checkbox"/> Traffic Safety     |

Other (please specify)

Community Health Needs Assessment 2019- Decatur County IA

**16. For reporting purposes, are you involved in or are you a .... ? (Please select all that apply.)**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Business / Merchant                 | <input type="checkbox"/> EMS / Emergency        | <input type="checkbox"/> Other Health Professional |
| <input type="checkbox"/> Community Board Member              | <input type="checkbox"/> Farmer / Rancher       | <input type="checkbox"/> Parent / Caregiver        |
| <input type="checkbox"/> Case Manager / Discharge Planner    | <input type="checkbox"/> Hospital / Health Dept | <input type="checkbox"/> Pharmacy / Clinic         |
| <input type="checkbox"/> Clergy                              | <input type="checkbox"/> Housing / Builder      | <input type="checkbox"/> Media (Paper/TV/Radio)    |
| <input type="checkbox"/> College / University                | <input type="checkbox"/> Insurance              | <input type="checkbox"/> Senior Care               |
| <input type="checkbox"/> Consumer Advocate                   | <input type="checkbox"/> Labor                  | <input type="checkbox"/> Teacher / School Admin    |
| <input type="checkbox"/> Dentist / Eye Doctor / Chiropractor | <input type="checkbox"/> Law Enforcement        | <input type="checkbox"/> Veteran                   |
| <input type="checkbox"/> Elected Official - City/County      | <input type="checkbox"/> Mental Health          | <input type="checkbox"/> Unemployed                |

Other (please specify)

Community Health Needs Assessment 2019- Decatur County IA

**17. What is your home ZIP code? Please enter 5-digit ZIP code; for example 00544 or 95305**



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**VVV Consultants LLC** is an Olathe, KS based “boutique” healthcare consulting firm specializing in Strategy; Research and Business Development services. We partner with clients. Plan the Work; Work the Plan