

Community Health Needs Assessment

Executive Summary

Introduction

A community health needs assessment (CHNA) provides an opportunity for non-profit hospitals to identify needs and resources within the community. With the passage of the Patient Protection and Affordable Care Act (ACA) enacted on March 23, 2010, conducting a CHNA is now part of the requirement for hospitals to retain non-profit status. The CHNA must be conducted at least once every three years. As part of the CHNA, each hospital is required to collect input from individuals representing the community as well as those with public health expertise. The following report outlines the process undertaken by Hegg Memorial Health Center in Rock Valley, Iowa to fulfill these requirements. Hegg Memorial Health Center conducted this CHNA partly as a collaborative process with three other hospitals and the public health agency in Sioux County, Community Health Partners of Sioux County.

Summary of Health Needs

The following prioritized health needs were identified for all of Sioux County with the collaborative:

1. Obesity
2. Mental Health Services
3. Translation and Interpretation
4. Community Education and Support Groups
5. Recreation - Things to Do

Hegg also identified these priorities for the community of Rock Valley:

- Aquatic Center
- Community Center/Event Center
- Transportation
- Urgent Care

Summary of Method and Process

The CHNA was conducted using a collaborative planning and data collection process integrating secondary data and primary data collected from community stakeholders through focus group interviews. The following outlines, in brief, the steps taken:

1. Identify desired data indicators
2. Review, analyze and compile available data from a variety of existing data sets
3. Collect primary data through community and county focus groups
4. Create and prioritize list of community health needs at both county and community level

Introduction and Background

A community health needs assessment (CHNA) provides an opportunity for non-profit hospitals to identify needs and resources within the community. With the passage of the Patient Protection and Affordable Care Act (ACA) enacted on March 23, 2010, conducting a CHNA is now part of the requirement for hospitals to retain non-profit status. The CHNA must be conducted at least once every three years. As part of the CHNA, each hospital is required to collect input from individuals representing the community as well as those with public health expertise. The following report outlines the process undertaken by Hegg Memorial Health Center in Rock Valley, Iowa to fulfill these requirements.

Hegg Memorial Health Center includes a 25 bed inpatient facility, medical clinic, home health and home assist services, an independent living facility and a nursing home. The campus of Hegg Memorial Health Center also includes Generations Daycare (through December, 2015), a wellness center and physical therapy. The not-for-profit organization is governed by a Board of Directors and has a management agreement with Avera McKennan Hospital and University Health Center.

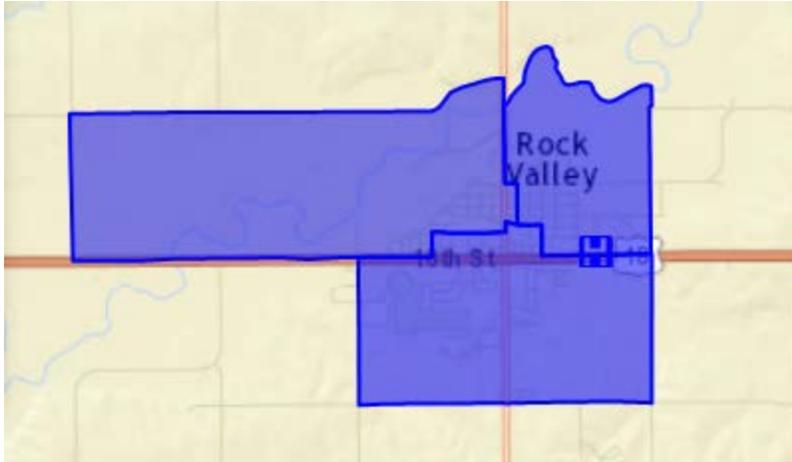
Hegg Memorial Health Center serves Rock Valley and the surrounding communities which include Hull, Doon, Inwood, Sioux Center, Rock Rapids, Alford, and George. Our mission states that “We serve together to heal body, mind and spirit, to improve the health of our community, and to be good stewards of the resources entrusted to us.” Our vision is to provide “exceptional service, extraordinary care, to every person.” By following our mission and vision on a daily basis we feel that we have the ability to help improve our community.

Hegg Memorial Health Center conducted this CHNA as part of a collaborative process with three other hospitals and the public health agency in Sioux County, Community Health Partners of Sioux County. This collaborative process included joint planning, identification of common data indicators, and design of focus groups. Although the process was collaborative, each individual hospital reviewed both community level and county level secondary data and collected primary data at both the county and community level. Hegg Memorial Health Center presents this community health needs assessment as an individual assessment and will develop an implementation plan based on this assessment.

Our Community

Hegg Memorial Health Center primarily serves the community of Rock Valley, with 60 percent of 2014 discharges coming from Rock Valley. Rock Valley is located within Sioux County, Iowa and 70 percent of discharges originate in Sioux County. Rock Valley and Sioux County demographics are described in the paragraphs below.

The community of Rock Valley includes census blocks 191670703003, 191670703005, and 191670703004.

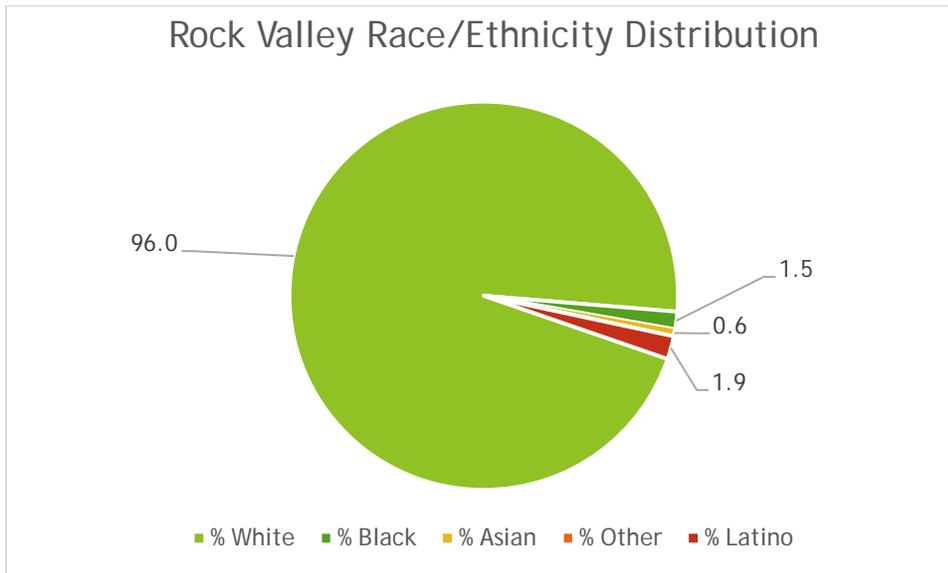


Within these census blocks, the age distribution of residents is:

Age group	Percentage
< age 5	7.5%
Age 5-17	20.3%
Age 18-64	53.9%
Age >64	18.3%

Source: IHA CHIMES maps, 5/7/2015

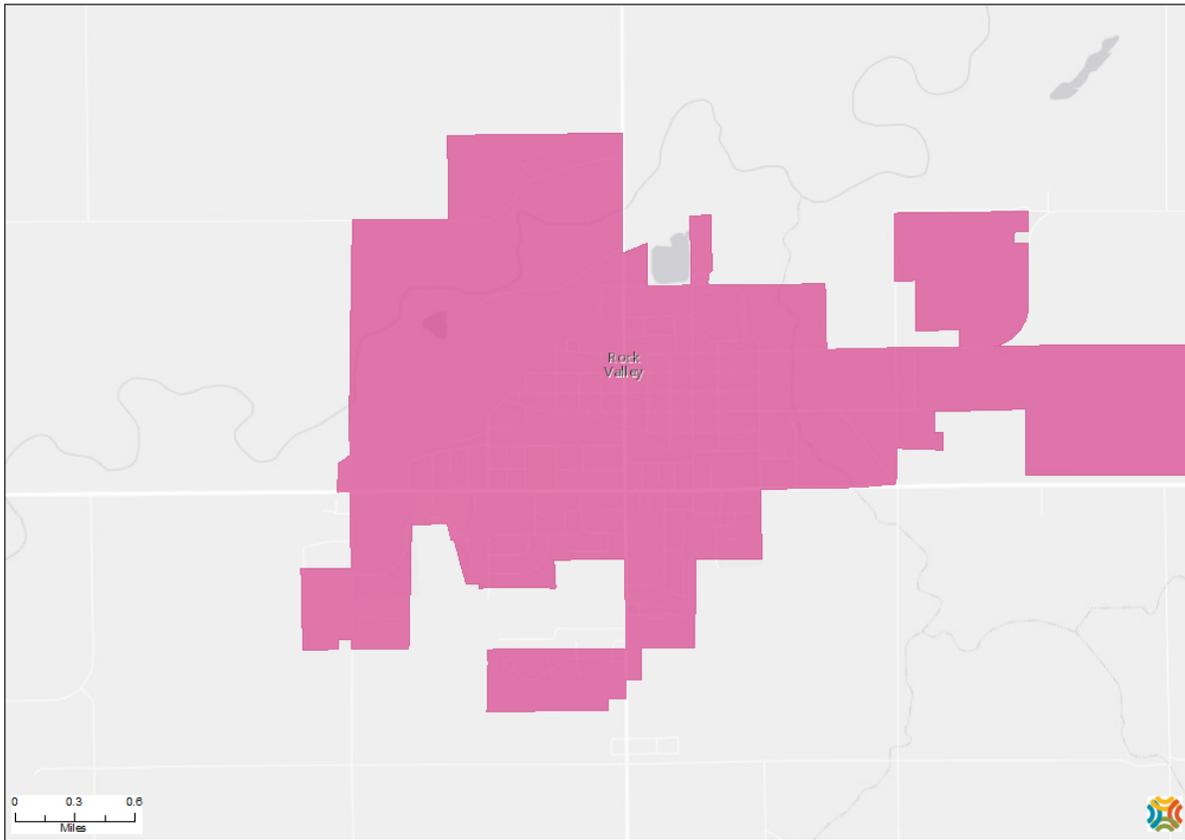
The total population of Rock Valley (based on zip code) is 4,721.



Source: IHA CHIMES maps by census block, 5/7/2015

An important consideration in identifying vulnerable populations is identifying those who live in linguistically isolated households. The following map identifies the percent population in the area around Rock Valley who live in linguistically isolated households:

RV Linguistically isolated



Map Legend

Population in Linguistically Isolated Households, Percent by Place, ACS 2009-13

- Over 3.0%
- 1.1 - 3.0%
- 0.1 - 1.1%
- No Population in Linguistically Isolated Households
- No Data or Data Suppressed

Community Commons, 5/18/2015

The median household income in Rock Valley is \$56,400 with 11.8 percent of the population below poverty. (2009-2013 American Community Survey 5-year profiles)

Process and Methods

The community health needs assessment was conducted using a modified MAPP (Mobilizing for Action through Planning and Partnerships) process through collaboration among the local public health department and the four critical access hospitals located within Sioux County, Iowa. Steps in the process included 1)planning - called “Organizing for Success and Partnership Development” in the MAPP framework, 2)Data collection - called “Assessments” in MAPP framework language, and 3)prioritization - Identify Strategic Issues in the MAPP framework.



Planning - Community Health Partners of Sioux County, the local public health agency for Sioux County, Iowa convened a group of representatives from each of the four critical access hospitals in April 2014. Partners in the collaborative planning included Hegg Memorial Health Center, Sioux Center Health, Orange City Area Health System, Hawarden Regional Healthcare, and Community Health Partners of Sioux County. This first meeting set the stage for each hospital conducting a community health needs assessment while collaborating on data collection to avoid duplication. The planning phase of the project included identifying data indicators that should be included in the data collection phase, discussion about the desired methods of collecting data (secondary and primary), and identifying community stakeholders to be included.

The collaborative group identified both county level and hospital/community level indicators with the understanding that not all desired indicators would be included in the final data report. The collaborative group decided to collect primary data using focus group interviews at both the county level and community level. Community Health Partners staff facilitated the focus groups and identified and invited participants to county-level groups including social service providers and other stakeholders who represented more than one community. Each participating hospital identified sub-groups to invite to participate in focus group interviews at the community level.

Assessment - Data indicators were reviewed and Community Health Partners identified available sources for relevant data to include. Priority was given to secondary data identified through the Iowa Department of Public Health Public Health Tracking System, County Health Rankings, U.S. Census, and compiled at CHNA.org. Other data sources included the Community Health Status Indicator (CHSI) report made available through the CDC. Community Health Partners staff selected relevant data related to selected indicators and compiled it in a “Community Health Status” report that described the health status of Sioux County through Demographics, Social Determinants of Health, Death, Injury and Illness, Mental Health, Maternal and Child Health, Environmental Health, and Health Behaviors. This Community Health Status Report was reviewed by the collaborative and areas where Sioux County was unfavorable compared to state or comparison county data were noted.

The collaborative decided to collect primary data through focus group interviews held throughout the county. Focus groups are a qualitative method of data collection that help to provide a depth of understanding from participants’ perspectives. Focus groups can help to uncover people’s attitudes and experiences in a way that might not be possible with other methods such as surveys. Focus groups

are also unique in the way they allow participants to interact with one another and with the facilitator, allowing for more depth of understanding than might be possible using other methods.

Stakeholders representing the county participated in county-wide focus groups between January and March 2015. Four county level focus groups were conducted ranging from 2 - 15 participants and lasting approximately 1 hour each. Three of the focus groups were comprised of a cross-section of providers who serve a variety of roles throughout the county including school nurses, social service providers, mental health providers, and public health providers. The fourth group was the Latina Health Coalition of Sioux County, which includes residents of several local communities who represent the Hispanic/Latino community. Stakeholders provided information and perspective about the health needs specific to the county and in some cases relevant to particular communities within Sioux County.

In addition to these county level groups, each participating hospital identified stakeholders and convened local focus groups. In Rock Valley, Hegg Memorial Health Center staff identified stakeholders that represented caregivers of older adults, the Latino community, the business community, parents of young children, and teenagers and mailed invitations to potential participants and used reminder phone calls. Groups met at the Hegg facility as well as a local restaurant meeting room.

Focus groups were facilitated by Community Health Partners staff using a standard set of interview questions focused on identifying community health needs as well as community assets. All of the focus group discussions were recorded and key quotes from the discussions were transcribed. The focus group with the Latina Health Coalition and the Rock Valley Latino stakeholder groups were interpreted by an interpreter on staff at Community Health Partners. Preliminary analysis was conducted using study notes to identify prominent themes within the groups. Next, the facilitators reviewed the prominent themes and grouped them into key categories that are presented here as the key findings. Themes were analyzed across groups and within groups and particular attention was paid to the themes that were similar in all of the groups represented. Finally, the transcribed notes were reviewed and representative quotes were chosen to illustrate the identified themes.

Each collaborative partner received a written report summarizing the themes of the focus group interviews for their community as well as a summary of the county level focus groups.

Focus group participants were chosen to represent specific demographics and groups of populations. The following table outlines participants who represented specific low-income, minority and medically underserved populations.

County Focus Groups		
Organization / Individual	Focus Group Attended	Representative Group
The Bridge	County Joint Providers	Low-income/ medically underserved
Latina Health Coalition (6 participants)	Latina Health Coalition	Minority
Family Crisis Center	County Joint Providers	Medically underserved
Mid-Sioux Opportunity	County Joint Provider, County Decategorization	Low income, medically underserved
Senior Companion Program	County Decategorization	Low-income
Compass Point	County Decategorization	Medically Underserved
Hope Haven	County Decategorization, County Joint Provider	Medically Underserved, Low income
Parent Partner Program	County Decategorization	Low income
Early Head Start	County Decategorization	Low income
Love, Inc.	County Joint Provider	Low income
RTF	County Joint Provider	Medically underserved
Habitat for Humanity	County Joint Provider	Low income
Promise Community Health	County Joint Provider	Low income, medically

Center		underserved, minority
Justice For All	County Joint Provider	Low income
Rock Valley Community Focus Groups		
Members of the Latino community in Rock Valley (3 members)	Rock Valley Focus Group	Minority
Caregivers of older adults within the Rock Valley community (7 members)	Rock Valley Focus Group	Medically underserved

Other specific groups included in focus group interviews included:

- mothers of young children
- business community
- county attorney's office
- public health staff
- mental health providers
- school nurses

Summary of Input from Community - County wide

Availability of Resources - A major theme that emerged in each of the county groups was that the county has a great number of available resources—recreational, across the life-span health, outreach, and supportive--all easily accessible, especially considering its rural location. Specific resources within health care and mental health were noted, but also a more general realization that a great variety of services are available locally without need for travel, including early childhood supports and other social services. A variety of arts and recreational activities are available throughout the county.

Agencies working together - Participants believe health and social service agencies value inter-agency relationships, in part because providers have personal relationships with each other that make agency relationships and collaboration important to service delivery. Participants stated that providers in the county work hard to get services to the people who need them, and that providers engage with people rather than a system.

Improving Social Determinants of Health - Participants indicated that access to affordable, safe and healthy housing is a county-wide need, stating that a lack of affordable housing is an issue for both purchasers and renters. Transportation emerged as a key theme for participants. Participants identified a robust system that allows for access to transportation when it is needed, at a reasonable price, and that can provide transportation between communities.

Improving Agency Collaboration - The county level focus groups included representatives from a variety of agencies who serve within the county. These participants identified a need for improved collaboration between agencies and a general sense that there are a lot of services available within the county, but agencies do not work efficiently together toward addressing larger systemic issues and do not know what other services are available county-wide.

Increasing access to and reducing cost of health care - County level groups identified the prohibitive cost of health care and difficulty accessing services as barriers to health, particularly for the uninsured, underinsured and undocumented. Participants stated that often people do not know what services are available to them, how to access the services, or how to navigate the insurance and health care systems.

Mental Health - Mental health services across the age continuum are cited as a pressing need by all focus groups. Specific identified needs include increased numbers of providers, providers who could deliver services in Spanish, more support groups for care-givers and those suffering from chronic diseases, entry points for care, care for those with co-occurring medical, substance use and mental health needs, and the need to reduce stigma for seeking help.

Recreation- more things to do - A lack of activities, specifically indoors, for both children and adults was identified by service providers and residents alike. They state there are not enough public indoor places for young people to safely gather. Children and adults need affordable indoor recreational activities.

Dental Health - All county level groups cited lack of access to dental care as a major health issue. Participants stated access to dentists is limited especially for Title 19 patients, and those requiring pediatric dental care must travel to Sioux City or Sioux Falls.

Translation and interpretation - In each of the groups, translation and interpretation needs were cited specifically in health care settings and schools. Providers and consumers alike asserted that qualified (specially trained) on-staff interpreters in hospitals and medical clinics are needed, in particular in labor and delivery and mental health.

Relationship education across the lifespan - The county level groups identified a lack of knowledge about healthy relationships in general as a major need beginning with young school-aged children and continuing through adulthood. Participants stated that community, small group, family, and individual education in the areas of sex education, women's reproductive health, healthy male role modeling and relationships, parenting, infant/child growth and development, and healthy relationships in general is needed across the county.

Maintaining or improving infrastructure - Participants identify poorly maintained or absent sidewalks as safety hazards that discourage physical activity in some communities. Participants voiced concerns that EMT services are inconsistently funded and administered and that smaller communities may not be able to maintain their emergency services.

Senior living resources - Service providers and residents see the need for assisted living facilities in communities across the county. Supportive in-home services for seniors were also identified as needs (meals, companionship, and activities) as well as intergenerational activities that bring the elderly and youth together.

Summary of input from community - Rock Valley

Increase in the number and type of things to do - In Rock Valley, participants stated a desire to increase the number and type of things to do in the community. Within this broad theme, several specific types of desired things to do were noted. In general, the high school youth want places to go that are "good, clean fun". Possibilities that were mentioned included a roller rink, ice rink, a movie theater or a mini-mall. Among all groups, improvements to the community aquatic center were desired. Also a common desire was for a recreation center, a place for families to participate in physical activity indoors throughout the year including a gym and fitness classes. Similarly, a community center was mentioned in all groups as a venue for music events and a space for weddings or community meetings.

Growth issues - While there is much that is positive about the growth that Rock Valley has experienced, participants voiced some concerns related to that growth. The first is affordable housing; there is a lack of available housing to buy or rent. An additional related challenge is to keep the community looking nice while continuing to grow.

Specific healthcare needs - While all groups are very appreciative of the medical care and services available in Rock Valley, the following health care needs were identified: more physicians, after-hours

urgent care, two clinic waiting rooms (one for sick and one for well patients), access to an outpatient neurologist, orthodontic services, and more dental and eye care options. The groups also identified specific education needs within the various community groups: diagnostic and screening health events, promotion of healthy lifestyles, caregiver support groups, and, within the Hispanic community, cultural expectations related to what to do when kids are sick and parents need to work.

Transportation - Across all groups, access to transportation emerged as a need. For some, the need for transportation is related to attending appointments, for others it is for things like summer rec and school. Several groups mentioned that it is difficult especially for those with kids because you have to drive everywhere.

Availability and affordability of childcare - Participants cited a lack of services for young children as being a significant health need. Three year old preschool, daycare access and cost, and drop off daycare were specifically discussed as gaps in service.

Prioritization - The collaborative team used the Community Health Status Report and the County Focus Group report to generate a list of health needs / issues. In order to be considered a need, the issue had to meet one of two criteria. First, it could be identified in the Community Health Status Report as being unfavorable compared to either the State of Iowa average or the peer county (Marion County). Second, the issue was considered a need if it emerged as a theme from the community input. The collaborative team considered the following criteria and then used a multi-voting technique to narrow the list of health needs/ issues to a priority list.

Criteria considered:

Size of the problem - How many individuals are affected?

Impact of the problem - How big is the impact of the problem?

Availability of resources to solve the problem

Urgency of solving the problem

The list started with 13 issues. In the first round, participants could vote for as many issues as desired. Then the list was narrowed to those issues receiving four or more votes (8 participants).

Those that were not included as priorities following the first round of voting were:

- Cost of healthcare
- Senior Resources
- Cancer
- Transportation
- Childcare

For the next round of voting, participants were able to vote for 5 issues. Again, those issues not receiving at least four votes were removed from the priority list:

- Collaboration
- Connecting people with resources
- Housing

Finally, participants were given three votes to help prioritize the remaining items. All five remaining issues are considered priority issues for the county.

Summary of Identified Needs

The prioritized needs were identified using the criteria outlined above. For the purposes of this assessment, a health need includes requisites for the improvement or maintenance of health status in both the community at large or in particular parts of the community (such as a specific group experiencing disparities). Requisites for improvements or maintenance of health status include underlying factors that influence health such as transportation or housing.

Obesity:

Description of the issue

Obesity is a health concern due to its connection to many other health outcomes. Obesity raises risk of Type 2 diabetes, stroke, poor pregnancy outcomes, and high blood pressure. In addition, obesity results in high healthcare costs and increases the burden on health systems.

Statistical Data (Secondary Data): In Sioux County, 68 percent of adults are overweight or obese, compared to 67 percent of adults in the whole of Iowa. 27 percent of Sioux County adults report a BMI of more than 30, meeting the criteria for obesity. This is slightly lower than the Iowa rate of 30 percent of adults, but has increased in Sioux County since 2004.

Related Data Indicators: Behaviors related to obesity include diet and physical activity. A healthy diet and adequate physical activity are also associated with greater health and reduced cancer risk. In Sioux County, 72 percent of adults report adequate physical activity compared to 80 percent for the State of Iowa.

Community Input (Primary Data): The issue of **Obesity** is also related to the issue **Recreation - Things to do**, specifically when talking about opportunities to increase physical activity. In focus groups, participants expressed a desire for more indoor recreation activities across the lifespan, recognizing that all Sioux County residents from young children to older adults would benefit from affordable, indoor recreational opportunities.

Potential resources to address the issue

A resource theme that emerged from CHNA focus groups was the safety of communities, indicating that community based recreation programs would not face barriers related to safety. Participants also stated that service providers in the county tend to have a broad and holistic view of health that accentuates the importance of things like a good trails system, physical activity opportunities, and community gardening to the health of individuals and communities.

Programs that exist in Sioux County to address healthy behaviors related to obesity and overweight include the following:

- Let's Go 5210, an effort of the Coalition for a Healthy Sioux County community groups to help kids develop healthy habits around eating and physical activity. They have hosted a summer activity program.
- The Sioux County Trails Council and many local communities have developed trail systems to increase access for biking, walking, and running.

In Rock Valley, these additional resources address Obesity.

- Hegg Memorial Health Center has hosted "Rock your ride", a bicycling program for youth over the last two summers.
- Hegg maintains a community wellness center and also hosts programs such as healthy freezer meals on a regular basis through their community education program.
- HANK (Healthy Active Nutritious Kids) is a program for the local community grades K-4 that provides healthy eating tips and how to stay active.

- Cooking with HANK was created based on the HANK program and provided on a quarterly basis for elementary school age students that include a healthy snack, time for activities, and teach the students ways to be healthy and active on their own. The students also cook their own meal to take home to their family.
- Rock Valley has an extensive trail system that continues to be developed
- Rock Valley summer recreation programs for children include many programs that include physical activity.

Mental Health Services

Description of the issue

Mental health is essential to personal wellbeing, family functioning, and health interpersonal relationships. People, including children and adolescents, with untreated mental health disorders are at high risk for many unhealthy and unsafe behaviors, including alcohol or drug abuse, violent or self-destructive behavior, and suicide (Healthy People 2020).

Statistical Data (Secondary Data): Secondary data supporting mental health as an issue includes results from the Iowa Youth Survey indicating that 12 percent of Sioux County youth had seriously considered killing themselves within the past 12 months, a comparable rate to the Iowa rate of 13 percent, but higher than that of Marion County at 9 percent. 11.3 percent of older adults in Sioux County are living with depression, a rate that is slightly lower than the U.S. median rate of 12.4 percent. The number of mental health service providers in Sioux County is also of concern, with a ratio of 1540:1 compared to 904:1 in the state of Iowa.

Related data indicators:

Community Input (Primary data): Mental health services across the age continuum were cited as a pressing need by all CHNA focus groups. Specific needs identified include increased numbers of providers, providers who could deliver services in Spanish, more support groups for care-givers and those suffering from chronic diseases, entry points for care, care for those with co-occurring medical, substance use and mental health needs, and the need to reduce stigma for seeking help.

Potential resources to address the issue

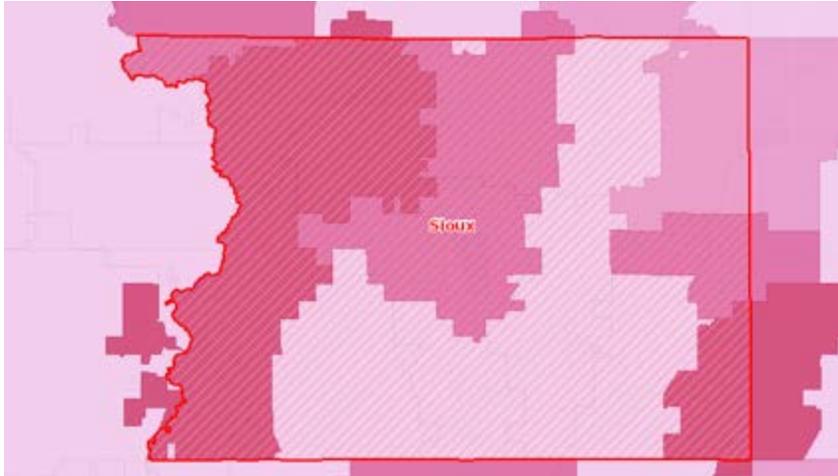
- Strong collaborative commitment to this issue.
- Area mental health providers - several sizeable agencies serve Sioux County

Translation and Interpretation

Description of the issue

Effective communication is essential to promoting health and preventing illness. Trained and qualified interpreters in medical and educational settings are necessary to ensure people for whom English is not their primary language understand their options and possible implications of their actions.

Statistical Data (Secondary data): 9.3 percent of households in Sioux County speak a language other than English at home. This is greater than the Iowa rate of 7.1 percent and the Marion County rate of 3 percent. Linguistically isolated households are found throughout the county, with more of them residing in the Western and Southeast corner of the county.



Related data indicators: The primary minority group in Sioux County is those with Hispanic/Latino ethnicity. 9.7 percent of the population is Hispanic/Latino, indicating that the primary language related to translation and interpretation needs is Spanish. However, other languages are also spoken and addressing only the needs of Spanish speakers will not address changing demographics that include other languages.

Community Input (Primary data):

In each of the CHNA focus groups, translation and interpretation needs were cited specifically in health care settings and schools. Providers and consumers alike asserted that qualified (specially trained) on-staff interpreters in hospitals and medical clinics are needed, in particular in labor and delivery and mental health.

Potential resources to address the issue:

Resources and Programs available in Sioux County to address this issue include:

- Workshops for interpreters are offered at Northwestern College in Orange City.
- CASA is an advocacy group working to welcome all cultures in Northwest Iowa
- Promise Community Health Center, Sioux Center Health, WIC and Community Health Partners have full-time interpreters on staff.

Resources and programs available in Rock Valley to address this issue include:

- E-interpreting services available at Hegg Memorial Health Center

Education and Support Groups

Health literacy is critical for successful engagement with the healthcare system and advocates for health education in schools point to the importance of educating youth regarding basic health facts, healthy behaviors, and basic life skills. Many community health education programs begin with building basic knowledge and skills about health topics. A robust community health education program can help to build healthier communities.

Statistical Data (Secondary data):

	Sioux	Iowa	Marion County (peer)
Age 25+ without high school education	11.7%	9.3%	8%

Related data indicators: None

Community Input (Primary data):

A wide variety of health topics were identified by community members as needs within the community. Topics included specific health issues as well as more general life skills. Support groups were also identified as a need, specifically for those dealing with chronic illness as a patient or caregiver.

The county level groups identified a lack of knowledge about healthy relationships in general as a major need beginning with young school-aged children and continuing through adulthood. Participants stated that community, small group, family, and individual education in the areas of sex education, women's reproductive health, healthy male role modeling and relationships, parenting, infant/child growth and development, and healthy relationships in general is needed across the county.

Potential resources to address this issue:

Resources and Programs available in Sioux County to address this issue include:

- Diabetes education programs and support groups
- Developing community partnerships through the Coalition for a Healthy Sioux County

Resources and programs available in Rock Valley to address this issue include:

- Hegg wellness center
- Health classes in schools
- Memory Loss support group
- Weight Watchers
- Project Truth school programs

Recreation - Things to Do

Statistical Data (Secondary data): 76 percent of Sioux County residents have access to exercise opportunities compared to 79 percent for the State of Iowa. This is defined by County Health Rankings as living reasonably close to a location for physical activity such as a park, gym, community center, or pool.

Related data indicators: 25 percent of adults in Sioux County report no leisure time physical activity compared to 24 percent for the State of Iowa.

Community Input (Primary data): In focus groups, participants expressed a desire for more indoor recreation activities across the lifespan, recognizing that all Sioux County residents from young children to older adults would benefit from affordable, indoor recreational opportunities.

Potential resources to address this issue:

Resources and Programs available in Sioux County to address this issue include:

- All Seasons Center in Sioux Center
- Dordt College and Northwestern College both have recreation centers
- Dance studios in Orange City and Sioux Center
- Fitness facilities in Orange City, Sioux Center, Hull, Rock Valley and Hawarden
- All local communities have a community pool

Resources and programs available in Rock Valley to address this issue include:

- Hegg Wellness Center
- Community pool

Hegg Memorial Health Center then met with the community health needs assessment team, made up of representatives from various parts of the hospital and reviewed the county level priorities, the hospital data collected, the Community Health Status report for Sioux County, and the focus group reports for both Rock Valley and Sioux County and identified the four priorities below as specific priorities for Hegg Memorial Health Center in addition to partnering to address the county priorities above.

- **Aquatic Center** / Update of the existing pool - This priority is related to the county priority of recreation and things to do, but is responding to specific need in Rock Valley identified through community input.
- **Community / Event Center** - This priority is also related to the county priority of Recreation - Things to Do in a way that specifically addresses this need in Rock Valley. Community input placed a high priority of the development of a community and event center to host meetings, events, and provide a central place for the community to gather.
- **Transportation** - Although transportation was not identified finally as a county priority, it is a high priority in the community of Rock Valley as identified through community input.
- **Urgent Care** - Focus Group Interviews in Rock Valley identified the specific need of Urgent Care services at Hegg Memorial Health Center.

Evaluation of progress from prior CHNA

A number of needs were identified in the prior CHNA that the hospital has been addressing over the past three years. The following needs were identified and the progress has been listed below:

Daycare

The hospital addressed the need for day care in the community, but the community indicated there is a need for even more day care services. The City of Rock Valley worked together with the hospital to determine if a community daycare will work in Rock Valley and how it will operate. In 2015, strides were made to combine two daycare centers into one non-profit organization. As of January 2016, the two daycare centers have combined as one business, known as Project Youth, operating out of two buildings, one which is owned by Hegg Memorial Health Center. The hospital employs the two directors and contracts them back to Project Youth. Hegg Memorial Health Center also provides the use of the building rent free along with all utilities, housekeeping, and some other uses. Project Youth plans to raise money to build a new center so both daycares can merge into one building within the next 2-3 years. Hegg Memorial Health Center will need to determine the extent of its participation and how much of a financial obligation they will assume in the future.

Urgent Care

The hospital was not able to address the need for urgent care due to a personnel shortage. The hospital has added staff within the past three years but administration is afraid of provider burnout and the demands already on the providers. Hegg Memorial Health Center only has 6 providers who work 5 days per week in the clinic and cover evening and weekend calls. The hospital would need to add additional staff to provide this service. During 2016, Hegg Memorial Health Center will lose 3 providers and only add 1 provider. There is a shortage of providers, especially in rural areas. The main concern for Hegg Memorial Health Center is to keep the hospital staffed with enough providers to cover the clinic and the emergency department. At this time, Hegg Memorial Health Center does not feel it is financially feasible to provide urgent care services.

Lack of EMTs

Hegg Memorial Health Center helps with the City of Rock Valley to find ways to recruit emergency medical personnel as needed. The hospital has helped with some advertising and brochures. They had

filled some vacancies after the initial advertising. The City and the ambulance committee are addressing this need.

Youth Activities/Programs and Obesity

Obesity and recreational activities for the youth are in constant forefront with our Wellness Manager and Community Education. We have two great healthy menu/eating programs for adults and youth that happen at least quarterly but sometimes more frequent. The hospital partnered with Avera in hosting a sports enhancement camp at our Wellness Center the summer of 2015 and will be holding another in the summer of 2016. This service helps to keep the program local for the teenagers that were traveling to Sioux Falls. We will hold our 3rd bike riding competition for elementary aged kids in June, 2016. The bike riding program started in June 2014 to help encourage kids to stay active and choosing bikes over motorized vehicles. Story Walk was also introduced in 2015 with hopes of having another story in 2016. A page or two are displayed a certain distance apart on a walking trail so that kids and families can read the story as they walk along the trail.

The community health needs assessment team reviewed the previous community health needs assessment and implementation plan from 2013. When the team evaluated current needs identified, the team recognized some recurring needs. They recognized that although activities had occurred to address the needs identified three years ago, the need had not been eliminated. Since the prior CHNA was completed, Hegg Memorial Health Center has not received any requests for copies of the report nor was there any written comments received regarding the community health needs assessment or implementation plan.

Acceptance and Publication of CHNA for Fiscal Year 2016

The Hegg Memorial Health Center Fiscal Year 2016 Community Health Needs Assessment Report was presented to the Hegg Memorial Health Center Board of Directors on June 2, 2016 for discussion and consideration. The Board of Directors approved the Hegg Memorial Health Center Fiscal Year 2016 Community Health Needs Assessment Report at that meeting.

The proposed implementation strategy report will be presented for discussion and consideration and approval to the Hegg Memorial Health Center Board of Directors prior to November 15, 2016.

The Community Health Needs Assessment report and implementation plan will be available on the Hegg Memorial Health Center website. A copy can also be obtained by contacting the CHNA Coordinator in the administrative offices at Hegg Memorial Health Center.