2019 Community Health Needs Assessment
# Table Of Contents

- Introduction – Board Action........................................................................................................... 3
- Executive Summary....................................................................................................................... 4
- Community Health Needs Assessment (CHNA)........................................................................... 5
- Sioux Center CHNA Focus Group Report.................................................................................... 22

Attached Supplemental Documents:
- Community Survey Results (Sioux Center Respondents)
- 2019 Community Health Status Report – Sioux County
- Stakeholder Meeting Report 2019
Introduction - BOARD ACTION

Sioux Center Health has developed a community health needs assessment (CHNA) as a requirement for hospitals to retain non-profit status. The process includes review and approval of the qualitative and quantitative data by the Sioux Center Health governing board. After approval in the June 13, 2019 meeting, an implementation plan will be prepared and presented for approval at the August 2019 Executive Board meeting.
Executive Summary

Purpose
The Community Health Needs Assessment (CHNA) is a federal requirement for 501(c)(3) hospitals once every three taxable years. The information must be disclosed in its annual information report to the IRS (i.e., Form 990 and related schedules). While the CHNA is a federal requirement, we must remember that assessing our communities and providing community benefit programs are more than a nonprofit obligation. Conducting a needs assessment and responding to those community health needs allows us to live our mission and make a significant difference in the communities we serve.

Methodology
Sioux Center Health, along with Community Health Partners, gathered quantitative and qualitative data to determine the best suitable health initiatives that will make a lasting impact for our communities. The data gathered includes demographic (population, race, sex, age and household) information as well as in-depth assessments from community stakeholders through focus group interviews. In order to avoid duplication of effort, the four critical access hospitals in Sioux County worked collaboratively with Community Health Partners to complete this community health needs assessment with a process that began in October of 2018.

Summary of Health Needs
The following prioritized health needs were identified for all of Sioux County with the collaborative:
1. Obesity
2. Translation and Interpretation
3. Community Education and Support Groups

Using the above identified areas and focusing on the needs of the community, Sioux Center Health decided on the following focus areas for the next three years. The four that were chosen are:
1. Obesity
2. Mental Health Services
3. Translation and Interpretation
4. Senior Adult Services

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 a list of community health needs at both the county and community level
Introduction and Background

Purpose
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) on March 23, 2010, conducting a CHNA is now part of the requirement for hospitals to retain tax exempt 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 Sioux Center Health in Sioux Center, IA to fulfill these requirements. This process will enable the health system to develop a plan to respond to community needs fitting with the mission to bring hope, health, and healing to life. Our health system is pleased to serve as a leader in promoting the health of our community.

About Sioux Center Health
Sioux Center Health is a 19-bed critical access hospital located in Sioux Center, Iowa. The not-for-profit community hospital is governed by a local Board of Directors and has a management agreement with Avera McKennan Hospital and University Health Center, which provides shared administrative support to hospitals throughout the region in Iowa, South Dakota, and Minnesota. Sioux Center Health includes the hospital, three medical clinics located in Sioux Center, Hull and Hawarden, a skilled nursing facility and independent and assisted living facilities.

Sioux Center Health conducted this Community Health Needs Assessment (CHNA) as part of a collaborative process with three other hospitals, Promise Community Health Center 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. Sioux Center Health presents this community health needs assessment as an individual assessment and will develop an implementation plan based on this assessment.

Our Community
Sioux Center Health serves the residents of Sioux County, Iowa. Nearly 90 percent of the hospital’s discharges originate from Sioux County. The majority of the hospital’s patients (75 percent) came from Sioux Center and Hull, IA in calendar year 2018. For the purposes of this community health needs assessment, the hospital service area is considered to be the entire community of Sioux Center and includes low-income and underserved populations.
Total Population and Growth
The community of Sioux Center is located in the center of Sioux County, Iowa. The 2017 population estimate for Sioux Center is 7,579 as estimated by the U. S. Census Bureau. Between 2010 and 2017, the population increased by 7.5 percent. Sioux Center’s population is predominantly white, but between 2000 and 2010 there was a decrease in the percentage of the population that identifies as White. During that time, the percentage of population that identifies as of Hispanic origin grew from 4.7 percent to 13.1 percent. 24.4 percent of the population of Sioux Center is age 17 and younger, while 22.3 percent are between age 18-24 and 13 percent are age 65 and older. The median age is 27.7 years.

Source: U.S. Census Bureau

<table>
<thead>
<tr>
<th>Age group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; age 5</td>
<td>7.7%</td>
</tr>
<tr>
<td>Age 5-17</td>
<td>16.7%</td>
</tr>
<tr>
<td>Age 18 – 24</td>
<td>13.0%</td>
</tr>
<tr>
<td>Age 25 – 44</td>
<td>21.5%</td>
</tr>
<tr>
<td>Age 45 – 64</td>
<td>18.8%</td>
</tr>
<tr>
<td>Age &gt;64</td>
<td>13.0%</td>
</tr>
</tbody>
</table>

Source: 2010 U.S. Census Bureau
The median household income in Sioux Center is $73,185, with 30.7 percent of households earning less than $50,000. There is a higher percentage of workers in management, business, science, and arts occupations than any other occupation categories.

75 percent of occupied housing units in Sioux Center are owner-occupied with 24.2 percent renter occupied at a median gross rent of $730. Nearly 33 percent of housing in Sioux Center has been built since 2000.

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.

Timeline

- **Planning**
  - August - September 2018: Initial Planning Conversations
  - October 2018: Initial Collaborative Meeting

- **Data Collection**
  - November 2018 - January 2019: Community Survey
  - January - March 2019: Focus Group Sessions

- **Prioritization**
  - April 2019: Community Health Plan Meeting
  - May 2019: Collaborative Prioritization Meeting
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 October 2018. Partners in the collaborative planning included Sioux Center Health, Hegg Memorial Health System, Orange City Area Health System, Hawarden Regional Healthcare, and Promise Community Health Center 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 decided to collect primary data using a county-wide survey as well as focus groups. The survey was designed and implemented through a contract with the Northwest Iowa Research Institute located in Sioux Center, IA. 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 the focus group at the community level.

Assessment
The county-wide survey was distributed via mail to 2000 Sioux County addresses and an online link was provided through healthcare organizations. Northwest Iowa Research Institute provided county-wide results and community-level results for all survey questions. Dr. Kristin Van De Griend presented key findings to the health care organizations and to a community stakeholder group.

Community Health Partners identified available sources for relevant data to include in a community health status report using secondary data sources. Priority was given to data identified through the Iowa Department of Public Health Public Health Tracking System, County Health Rankings, and the U.S. Census Bureau. A “Community Health Status” report 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.

Focus groups were conducted throughout Sioux County. Stakeholders representing the county participated in county-wide focus groups between January and March 2019. Four of the focus groups were representatives of the Hispanic/Latino community. Two 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, public health providers and pastors. Additional groups included older adults. Stakeholders provided information and perspective about the health needs specific to the county and in some cases relevant to particular communities within Sioux County.
A total of 9 groups were facilitated by teams from Community Health Partners and summary data reports were presented to a community stakeholder group and shared with the collaborative planning group. 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 different way than might 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.

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.

<table>
<thead>
<tr>
<th>County Focus Groups</th>
<th>Focus Group Attended</th>
<th>Representative Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sioux Center Health</td>
<td>Low-income / minority</td>
<td></td>
</tr>
<tr>
<td>Promise CHC</td>
<td>Low-income / minority</td>
<td></td>
</tr>
<tr>
<td>Hawarden Regional Healthcare</td>
<td>Low-income / minority</td>
<td></td>
</tr>
<tr>
<td>Decategorization</td>
<td>County providers</td>
<td>Low income, medically underserved</td>
</tr>
<tr>
<td>ATLAS</td>
<td>County providers</td>
<td>Low-income</td>
</tr>
<tr>
<td>Hospital volunteers</td>
<td>County Joint Provider</td>
<td>Medically underserved and older adults</td>
</tr>
<tr>
<td>Love, Inc.</td>
<td>County Joint Provider</td>
<td>Low income</td>
</tr>
<tr>
<td>Lutheran Services of Iowa</td>
<td>County providers</td>
<td>Low income</td>
</tr>
<tr>
<td>School nurses</td>
<td>County Joint Provider</td>
<td>Medically underserved</td>
</tr>
</tbody>
</table>

Stakeholder Meeting: On April 17, 2019, Community Health Partners convened a stakeholder meeting with attendees representing healthcare organizations, social service providers, mental health providers and interested community members. Participants reviewed a summary of all assessments (survey, secondary data, and focus groups) and through a facilitated process, identified and prioritized key issues and developed action plans. These identified priorities serve as additional community input for this community health needs assessment.

Summary of Survey Input from Community - County wide
Surveys were mailed to 2000 addresses in Sioux County; a link to an online survey was included as an option for completion and this link was also made available through online promotion throughout the county. A total of 537 responses were received with 506 fully completed surveys. Key results related to community perceptions of need are presented below.

When asked to identify the three most important health problems, diseases, or conditions in Sioux County, the most frequent responses were (in order of frequency): cancer, obesity/overweight, mental health, aging problems, and substance abuse. All other categories were identified by less than 30% of respondents.
Respondents were asked to identify whether services in Sioux County are adequate or inadequate. Services identified by more respondents as inadequate were childcare and teen activities. Those with similar percentages of adequate or inadequate responses were: Language services and services for older adults. Generally, more respondents chose that the following services were adequate: colleges, dental services, disability services, recreation/parks, schools, services for low-income people, services for victims / survivors of violence, and sidewalk/bike lanes.

In response to a question about the three community issues that have the greatest effect on quality of life in Sioux County, more than 20 percent of respondents chose: access to healthcare, income inequality, no affordable / poor housing, and substance abuse.

Summary of Survey Input from Community - Sioux Center

Of the 537 respondents to the survey, 160 selected Sioux Center Health as their healthcare provider. The key results related to community perceptions of need are presented below.

When asked to identify the three most important health problems, diseases, or conditions in Sioux County, the Sioux Center Health patients identified obesity/overweight, cancer, aging problems and mental health. All other categories were identified by less than 30 percent of respondents.
In response to a question about the three community issues that have the greatest effect on quality of life in Sioux County, more than 20 percent of respondents chose: access to healthcare, income inequality, no affordable / poor housing, substance abuse and transportation.

Summary of Focus Group Input from Community - County wide

**Continue to build healthcare services** - While group participants appreciate the services currently available, several areas emerged as opportunities to grow including adding services (surgical, dermatology, more OB services, psychiatric care, childhood obesity treatment/management), addressing current gaps in clinic hours and urgent care, and helping to navigate the healthcare system, including billing.

**Meeting the needs of older adults** - Participants expressed the need to continue to build services for older adults in the community including long-term care facilities, a memory unit, organized activities to help seniors stay active, and support groups such as grief counseling groups. In addition to building services, there is a recognition that there is a workforce need for these services.

**Cost of care and other services** - Cost of health care and other services emerged as a key concern for participants. In addition to concerns about the overall costs of healthcare, cost of mental health services and recreation activities were of concern. While many services may be available within the community, the cost may reduce access to services for many community members.

**Cross cultural connection** - Participants in all groups identified that in Sioux County, improving cross-cultural relationships was a need. Specific needs identified including increasing the number of interpretive services available in healthcare settings, schools, and with transportation providers, ensuring that Latino community members are able to access recreation programs, encouraging new immigrants to continue in school, providing information for newcomers about what is available and encouraging respect for cultural identities.

**Opportunities for families to connect to each other and one another** - A need for connection emerged in each of the focus groups. This included both discussion about places to connect (such as community centers or events centers that provide services) but also community events, parenting classes, support groups, prevention programs and connecting with churches. Participants also acknowledged that sometimes parents don’t want to attend events or programs because they place a priority on other things, like working or they may not be aware of the need.

**Mental health prevention services, counseling resources and crisis services** - Participants state that mental health crisis services are inadequate across the county. Specific concerns identified were the availability of inpatient mental health beds, prevention and education related to mental health, and increasing access to counseling and therapy. People do not readily seek help for mental health issues because of the stigma attached to mental illness and the need for treatment.

**Improve community services and infrastructure** - Participants expressed a desire to improve community services and infrastructure such as sidewalks and pedestrian safety, community
transportation services, addressing housing cost and quality and ensuring that resources are available to maintain or improve the look of communities.

**Improve school system(s)** - Specific needs identified within school system(s) included more space for 3-year-old preschool/Headstart students, emphasizing the importance of education, increasing the number of bilingual teachers, and supporting schools as they fulfill multiple roles in student lives.

**Awareness of resources and services** - Participants expressed appreciation for the number and variety of services available in Sioux County communities, but identified a lack of awareness and coordination of services as an issue. This gap in awareness exists at both the “professional” level and the general public.

Summary of Focus Group Input from Community - Sioux Center
There were not any additional themes identified specific to Sioux Center. Specific themes that were emphasized included:

- The need to continue to maintain community infrastructure, specifically focusing on pedestrian and street safety and maintaining Heritage Village.
- Improving community services such as fitness opportunities, transportation, parks, addressing high rent, and childcare.
- Continuing to build healthcare services including collaboration between health care organizations, addressing the gap between clinic hours and urgent care availability, and addressing the cost of care particularly for the uninsured, and helping people to navigate healthcare systems including billing.

**Prioritization**
To determine priorities that healthcare systems will address collaboratively, the collaborative team used the Community Survey Results, Community Health Status Report Focus Group report, and stakeholder meeting input to generate a list of health needs / issues. Identified issues were:

- Translation and interpretation
- Cancer
- Obesity – to include exercise, nutrition, affordability and access to facilities / resources
- Mental health
- Needs of older adults to include long-term care, memory units, and staff
- Community education to include parenting and child development
- Housing
- Childcare
- Cost of healthcare
- Transportation
- Improving understanding of resources
- Workforce issues
• Dental service need

The collaborative team considered the following criteria, scored each need / issue on these criteria and then used a multi-voting technique to narrow the list of health needs/ issues to a priority list.

Criteria considered:

1) **Can we impact the issue** – Do we have the resources to address it, including financial, human, and infrastructure?
2) **How does it fit with our mission?**
3) **Is there buy-in or passion to address this need?**

<table>
<thead>
<tr>
<th>Need/ Issue</th>
<th>Impact</th>
<th>Mission</th>
<th>Passion</th>
<th>Vote tally</th>
</tr>
</thead>
<tbody>
<tr>
<td>Translation / Interpretation</td>
<td>25</td>
<td>25</td>
<td>24</td>
<td>3*</td>
</tr>
<tr>
<td>Cancer</td>
<td>15</td>
<td>22</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td>Obesity</td>
<td>21</td>
<td>25</td>
<td>20</td>
<td>4*</td>
</tr>
<tr>
<td>Mental Health</td>
<td>17.5</td>
<td>22</td>
<td>21</td>
<td>2</td>
</tr>
<tr>
<td>Older Adults</td>
<td>23</td>
<td>25</td>
<td>20</td>
<td>1</td>
</tr>
<tr>
<td>Community Education</td>
<td>20</td>
<td>25</td>
<td>15</td>
<td>4*</td>
</tr>
<tr>
<td>Housing</td>
<td>14</td>
<td>15</td>
<td>17</td>
<td></td>
</tr>
<tr>
<td>Childcare</td>
<td>14</td>
<td>16</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>Cost of healthcare</td>
<td>15</td>
<td>22</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>Transportation</td>
<td>13</td>
<td>15</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>Resource understanding</td>
<td>20</td>
<td>25</td>
<td>19</td>
<td></td>
</tr>
<tr>
<td>Workforce issues</td>
<td>12</td>
<td>16</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td>Dental Services</td>
<td>8</td>
<td>18</td>
<td>9</td>
<td></td>
</tr>
</tbody>
</table>

*Top 3 needs

**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 connected to many health outcomes, raising risk for Type 2 diabetes, stroke, poor pregnancy outcomes, and high blood pressure. Because of these chronic conditions, obesity can result in high healthcare costs and increases the burden on healthcare systems. Risk for developing
obesity is multi-faceted including developmental factors, environmental factors and individual and behavioral factors. Thus, effective interventions will also be multi-faceted.

**Statistical Data (Secondary Data):** In Sioux County, 28 percent of adults are obese, compared to 33 percent of adults in the whole of Iowa. This rate has continued to increase in Sioux County.

**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, 81 percent of adults report adequate physical activity compared to 77 percent for the State of Iowa.

**Community Input (Primary Data):** Of community members responding to a county-wide survey, 51 percent indicated that obesity/overweight was one of the top three health problems, diseases or conditions in Sioux County. In focus groups, participants expressed a desire for more affordable recreation activities across the lifespan, recognizing that all Sioux County residents from young children to older adults would benefit from affordable, indoor recreational opportunities. Additionally, resources for childhood obesity treatment and management were a desired opportunity for growth in services.

**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 appreciated existing health and wellness resources, emphasizing a good trails system, recreation programs, and community parks.

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.
- A National Diabetes Prevention Program (NDPP) is offered periodically in each community with a health care system through a county-wide partnership.

In Sioux Center, these additional resources address Obesity.
- Sioux Center Trails Council is actively developing new trails, Sioux Center Health has worked closely with this community group and has a representative that sits on this committee to provide valuable input.
- Sioux Center has hosted a Storywalk project for kids with the local elementary schools.
- Sioux Center Health is a partner for Siouxperman Triathlon and Healthy Heros Family Fun 1K walk and 5k Run.
Sioux Center Summer Recreation programs include multiple opportunities for kids to be active.

There are several fitness facilities available in the community.

**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 11 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. And 7 percent of Sioux County youth had made a plan about how he/she would kill him/herself. Sioux County adults reported an average of 3.1 days of poor mental health over the past 30 days while overall the State of Iowa was 3.3. The number of mental health service providers in Sioux County is lower than the Iowa proportion, with a ratio of 890:1 compared to 700:1 in the state of Iowa.

**Related data indicators:** None currently

**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
- NAMI support group for mental illness
- On staff Board Certified Psychiatric-Mental Health Nurse Practitioner
- On staff Licensed Master Social Worker who specializes in behavioral health counseling for individuals, couples and families.

**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): 9.7 percent of households in Sioux County speak a language other than English at home. This is greater than the Iowa rate of 7.6 percent.

Related data indicators: The primary minority group in Sioux County is those with Hispanic/Latino ethnicity. 10.89 percent of the population identify as Hispanic or Latino. The primary language for translation and interpretation needs in Sioux County 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 and dialects.

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
- Medical provider organizations have resources to address translation and interpretation needs, primarily through interpretation. A county-wide group of interpreters meets on a regular basis and includes representatives from area healthcare organizations.

Resources and programs available in Sioux Center to address this issue include:
- On staff interpreter at Sioux Center Health
- On staff Certified Healthcare Interpreter (CHI)
- Provide classes for Healthcare Interpretation certification

Community education with focus on parenting and child development
Description of the issue
Many community health education programs begin with building basic knowledge and skills about health topics and parenting and child development lay the foundation for a lifetime of success. A robust community health education program can help to build healthier communities.

Related data indicators:

<table>
<thead>
<tr>
<th></th>
<th>Sioux</th>
<th>Iowa</th>
<th>Marion County (peer)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single parent families</td>
<td>16%</td>
<td>29%</td>
<td>21%</td>
</tr>
<tr>
<td>Births to adolescents (age 15-17, per 1000 females age 15-17)</td>
<td>7.8</td>
<td>14.0</td>
<td>10.1</td>
</tr>
<tr>
<td>Infants ever breastfed (2017)</td>
<td>82.6%</td>
<td>81.5%</td>
<td>83.9%</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-------</td>
<td>-------</td>
<td>-------</td>
</tr>
<tr>
<td>Physical Injury (rate per 1000 children)</td>
<td>1.5</td>
<td>1.9</td>
<td>1.9</td>
</tr>
<tr>
<td>Seriously thought about killing oneself in past 12 months – youth [5]</td>
<td>11%</td>
<td>13%</td>
<td>14%</td>
</tr>
</tbody>
</table>

Community Input (Primary data):
Focus group participants noted the need for resources related to parenting and child development, particularly noting that these are needed before identification of a problem and could be useful for all parents. Others noted that parent resources related to parenting teenagers could help to prevent substance use and abuse.

Potential resources to address this issue:
Resources and Programs available in Sioux County to address this issue include:
- Parent support programs such as Healthy Families of Sioux County and Early Headstart serve targeted parent groups
- Community education programs are provided by Love, Inc.
- Mothers of Preschoolers (MOPS) provides support to mothers of young children
- Strengthening Families (10-14) is offered through ISU Extension for interested schools
- Juntos is a program for Spanish speaking families to help support parent involvement in supporting high school graduation and entry into higher education.

Resources and programs available in Sioux Center to address this issue include:
- Diabetes support group
- NAMI support group for mental illness

Senior/Adult Services
Description of the issue
There is a growing population of seniors in the community and as our population ages and the boomer population seeks housing needs, healthcare services and programming.

Statistical Data (Secondary data): 15 percent of Sioux County residents are 65 or older. The total senior living need will grow by 79 beds between 2016 and 2023. Sioux Center has approximately 50 percent share of county independent and assisted living apartments and 21 percent share of nursing home beds.

Related data indicators: 28 percent of adults in Sioux County 50+ are physically active. The estimated increase in the senior population in Sioux County is expected to create a greater need for senior housing.
Community Input (Primary data): In focus groups, participants expressed a desire for a need to build services for older adults in the community including long-term care facilities, a memory unit, organized activities to help seniors stay active, and support groups such as grief counseling groups.

Potential resources to address this issue:

Resources and Programs available in Sioux County to address this issue include:
- Foster Grandparent & Senior Companion Programs
- All Seasons Center in Sioux Center
- Dordt College and Northwestern College both have recreation centers

Resources and programs available in Sioux Center to address this issue include:
- Volunteer program at Sioux Center Health
- Life after Loss support groups
- Activity programming through Senior Living Campus
- Senior Living Building Project
- Woodbridge Estates Building Project

The leadership team for Sioux Center Health met to review the county level priorities and data and identified the following priorities for Sioux Center:
- Obesity
- Mental Health Services
- Translation/ Interpretation
- Senior Adult Services

Evaluation of progress from prior CHNA

The 2016 CHNA identified three areas to expand and/or create new initiatives to address the unmet needs of the community. These included areas of obesity, mental health services and translation and interpretation services. Sioux Center Health made their CHNA report and Implementation Strategy available to the community by posting it on their website. No written comments were received on either the CHNA report or Implementation Strategy.

Obesity
Action: Provide education and services on healthy eating and encourage active lifestyles.

Through the continued collaboration with Community Health Partners, Sioux Center Health was part of two grants that were received with an obesity management focus. One, being the State Innovation Model (SIM) grant. This grant places emphasis on the obese and connecting them with the resources available to bring their weight/BMI into a healthier range further decreasing their risk of future health concerns due to excess weight. The other grant that Sioux Center Health is a part of is for the implementation of the National Diabetes Prevention Program (DPP). The DPP is a year-long weight management program aimed at those who are pre-diabetic or are at high risk of
developing diabetes sometime during their life. The county has 12 trained program instructors, with 3 of them being Sioux Center Health staff.

On a county-wide basis, since the previous CHNA, health care systems have: worked jointly to address obesity prevention through 5-2-1-0 programs, participated in the Iowa SIM Community Care Coalition project addressing diabetes prevention and management and care coordination, continued a county-wide diabetes prevention program (NDPP) and contributed to developing a resource to promote communication between landlord and tenants. Specific achievements of these efforts are described below:

5-2-1-0 Program – Since 2016, more than 100 kids per summer have participated in a weekly tracking program to track daily healthy habits (5 fruits and vegetables; 2 hours or less screen time, 1 hour or more of being active, and 0 sugary drinks).

SIM Community Care Coalition – Created a Sioux County care coordination system to connect primary care and community resources. In 2018, the project serves 267 clients and made 477 referrals.

Prevent Diabetes Northwest Iowa (NDPP) has now achieved CDC Recognition and has delivered service to 6 cohorts with 57 participants to date. Total weight loss of participants is 578 pounds with an average weight loss of 4.1 percent after 12 months.

Sioux Center Health also continued to support the community gardens by donating annually to the gardeners a gift card to purchase their seeds in an effort to provide the consumption of fresh fruits and vegetables.

Mental Health Services
Action: Increase mental health services to the community.

Sioux Center Health provides 24/7 social worker coverage as a resource for those patients needing mental health services. Along with this, Sioux Center Health utilizes ECare, which has 24 hour behavioral assessments through the use of a video camera. Should a patient need further treatment, Sioux Center Health coordinates with Care Match, a website through the Iowa Department of Public Health that keeps a list of all open beds in the state of Iowa for inpatient care.

Sioux Center Health has established relationships with local/area mental health agencies and will continue to utilize their services where appropriate.

Ongoing staff training in recognizing signs and/or treatment of mental health concerns will be provided.

Sioux Center Health also has employed a Board Certified Psychiatric-Mental Health Nurse Practitioner and a Licensed Master Social Worker who specialize in behavioral health counseling for individuals, couples and families.
Translation and Interpretation
Action: Improve translation and interpretation services

Sioux Center Health established a Cultural Diversity Advisory Committee that includes input from both internal and external constituents. The group bases business practices on the National CLAS standards which are a set of 15 action steps intended to advance health equity, improve quality, and help eliminate health care disparities by providing a blueprint for individuals and health and health care organizations to implement culturally and linguistically appropriate services.

Sioux Center Health also offers the Bridging the Gap Medical Interpreter Training Program. The Bridging the Gap is a 40-hour professional development program that prepares bilingual individuals to work as medical interpreters. It is used to train novice and experienced medical interpreters, and it is accepted by both accredited national certifying bodies, the Certification Commission for Healthcare Interpreters (CCHI) and the National Board of Certification for Medical Interpreters (NBCMI). No interpreting experience is required in order to take the class.

Collaboration with other local/area agencies who also serve those of ethnic minorities will be done in effort to provide the best care for our patients no matter what their health needs are.

Participation in the county-wide interpreter group is also a priority to continue to address the changing needs in our county.
Appendix A: Exercise Opportunities In and Around Sioux County

EXERCISE OPTIONS IN AND AROUND SIOUX COUNTY

SIOUX CENTER
- All Seasons Center 722-4386 – water aerobics, lap swimming, public swimming and ice skating
- Bike Trail – biking, walking
- Centre Mall – free indoor walking, Mon – Sat, closed Sundays
- Dordt College Rec Center 722-6302
- First Reformed Church Gym 722-1861 – free walking, basketball
- Snap Fitness (Open 24/7) – monthly single and family memberships 722-2594
- Compass Fitness & Wellness—offers group fitness, personal training and CrossFit 441-6619—(Open 24/7)
- BKN Box 441-7091—CrossFit
- Robin’s School of Dance 722-3262—Zumba, Kids Zumba, Body Pump, Yoga
- Susy Romero 441-0544—Zumba, Kids Zumba
- Karl Timmer 722-5380—Yoga
- Andrea Van Voorst—Offers private personal training and yoga at library Wed @ 5:30pm and Fri @ 9am—andreaovanvoorst@gmail.com
- Open Space Park—track, sand volleyball

DOON
- Doon Community Center, Mon – Sat, 7:00 AM – 3:00 PM, free walking

HAWARDEN
- Hospital Wellness Center 551-3100
- Lifestyle Fitness 712-304-7340 (Open 24/7)
- Bike trail
- Outdoor pool

HOSPER
- Wellness Center—open 24 hours, 1, 3, 6 and 12 month rates available. Call 752-8525 or 752-8052 for information.
- Outdoor pool

HULL
- Compass Fitness & Wellness 441-6619—(Open 24/7)
- Gymnasium – free walking, Mon – Fri, 7:30 AM – 3:00 PM
- Outdoor pool
- Walking Trail

BOYDEN
- Splash Pad in City park
- Walking Trail

IRETON
- Walking/bike Trail
- Outdoor pool

MAURICE
- Maurice Reformed Church Gymnasium — 567-4665, free walking 8 AM – 8 PM daily

ORANGE CITY
- Curves For Women (memberships available)- 737-8999
- Landseer Golf Course—golfing, free biking/walking trail- 737-3429
- Fuss Fitness Box19 (CrossFit & more) 541-4745—(Open 24/7)
- OC Area Fitness Center (memberships and classes available: Kickboxing, Zumba, Body Blast, Circuit Classes)-707-9494
- OC Physical Therapy (fitness classes available)-707-5050
- Orange City Area Health System Aquatic Center (memberships available for indoor resistance swimming pools)-737-5524
- Orange City Area Health System Downtown Campus (free walking in lower level- no registration needed. Use old ER entrance)
- Open Gym (Free. Times scheduled for adults and Preschoolers) 737-4885
- Outdoor Swimming Pool (open Memorial Day-Labor Day) 707-2500
- Puddlejumper Bike Trail—free biking/walking
- Rowenhorst Student Center, Northwestern College (fitness center/ gym/ racketball)- 737-7230
- Tennis courts at Jaycee Park (free use)
- Track at Korver Field (free walking/ running)
- Skate park at Kinderspeiland park (free use)

PRIMGHAR
- Medical Clinic – exercise equipment in basement, Mon – Fri days, Sat morning

ROCK VALLEY
- Hegg Rehab Center – 476-8080, Single and Family memberships available
- High School Gym – free walking, Mon – Fri, 6:45 – 7:30 AM,
- 4:45 – 5:30 PM
- Kiwanis Bike Trail
- Outdoor Pool
Sioux Center - CHNA Focus Group Report

Prepared by Angela Kroeze Visser, MPH, CHES
Community Health Partners of Sioux County

Introduction

This study describes community health needs and assets in Sioux County and specifically Sioux Center. The study was part of the collaborative Community Health Needs (CHNA) process in Sioux County. The report is divided into two sections: methodology and key findings. The Key Findings section describes findings in two major areas: community assets and health needs identified in the community.

Methodology

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 different way than might be possible with other methods such as surveys. Focus groups allow participants to interact with one another and with the facilitator, allowing for more depth of understanding than might be possible using other methods.

A team of CHP facilitators conducted a total of 9 focus groups in Sioux County communities during January through March 2019. The focus groups ranged from 3 – 12 participants and lasted approximately 1 hour each. Focus groups were held in Rock Valley, Sioux Center, Orange City, and Hawarden. In three of these communities, focus groups (4 total) included members of the Latino community. Two focus groups were comprised of a cross section of county-level representative providers who serve a variety of roles throughout the county including school nurses, social service providers, mental health providers, public health providers, and pastors. Three focus groups were held in Sioux Center, two with representatives from the Latino community and one comprised of older community members.

This report includes themes identified throughout the county and any additional themes specifically identified in Sioux Center.

Focus groups were facilitated by two person teams from the facilitation group: Angela Kroeze Visser, Kim Westerholm, and Kelly Reyes - Community Health Partners and Dr. Kristin Van De Griend - Northwest Iowa Research Institute using a standard set of interview questions. All focus group discussions were recorded and key quotes from the discussions were transcribed by the author. 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, representative quotes were chosen to illustrate the identified themes.
Key Findings

What do you appreciate about your community? (Community Assets)

Sioux County

Our community sticks together
Focus group participants are proud of the way that communities stick together and support each other, particularly in times of crisis or through community events. Collective events such as arts events, community celebrations, or hosting RAGBRAI represent ways that the community comes together. Also important are ways that communities care for people in need whether an entire community as in the case of the Rock Valley flooding or individual families in need. This sense that the community sticks together also contributes to a sense of safety – being able to walk places and let kids play outside.

*RAGBRAI was a neat experience. To be able to go through that and to do all of that extra work. You can be as much a part of the community as you choose to be and that’s what makes you a part of the community rather than what your background is.*

*When FEMA asked what they could do, we all just looked at him and said “what can you do? we’ve all worked together to get it done.*

*Our community is good at benefits. When people are going through a crisis, people will show up.*

*It was reciprocity and mutuality – we’re in this together and we all have needs and all have opportunities to serve each other.*

*It’s safe and calm here, kids can go where they want.*

*It’s important to carry on that feeling to be a community people and to look forward and not be negative.*

Emphasis on health and wellness / recreation
In Sioux County, there is an appreciated emphasis on health and wellness and recreation. Things like Sandy Hollow, the All Seasons Center, camp grounds, trails, parks and city recreation programs were noted as positive aspects of the community.

*We’ve been enriched by the variety of things for kids with lots of interests. Some of those non-traditional, non-school sports have been good for us.*

*Excited about a trail connection between Orange City and Sioux Center*

*The trails system. They keep trying to expand that. It’s a lovely area and has been developed beautifully.*
Good schools
Participants noted that Sioux County has good schools. In particular, several Latino group members noted that teachers are helpful for students and parents and identified schools are a critical connection point for families.

*There are good partnerships with schools, CHP, clinics – having that connection to know what each other are doing. And you know, we’re all working with the same kids.*

Good healthcare IN the community
In each community, healthcare resources and healthcare services are highly valued. Participants appreciate the health care provided, the availability of services within the community, and involvement of healthcare providers (including dentists, and eye care) in community outreach. Promise CHC was specifically mentioned as a benefit for providing care for the uninsured.

*I appreciate that some of the hospitals have added urgent care or extended office hours. It helps for not using the emergency room for things like ear infections or sinus infections.*

*Hospitals that are appealing, that have colors that are well chosen and appealing and help with healing.*

*Doctors out of town coming here – we had a friend who had to go to Sioux Falls, but we had all treatments done here.*

*The health center at the hospital; the therapy is amazing; and the classes too. We appreciate the therapy here and the outpatient people that come from Sioux Falls. And you don’t have to go there, as an older person I appreciate that.*

What health needs do you see in your community?

Continue to build healthcare services
While group participants appreciate the services currently available, several areas emerged as opportunities to build services including additional services (surgical, dermatology, more OB services, psychiatric care, childhood obesity treatment/management), addressing current gaps in clinic hours and urgent care, and helping to navigate the healthcare system, including billing.

*In order to seek care, parents need to take off work and especially if you’re looking at entry level, well, then you can only miss 3 days, then they’re like, I can’t take 5 days off work for a viral illness, but they really aren’t supposed to go back to school.*

*Someone that we could refer kids for childhood obesity, I’d love to have a professional to refer kids to. You know, I can tell parents to see their family doctors, but our primary care providers aren’t necessarily trained to deal with kids and weight. And nutrition.*
Meeting the needs of older adults
Participants expressed the need to continue to build services for older adults in the community including long-term care facilities, a memory unit, and organized activities to help seniors stay active, and support groups such as grief counseling groups. In addition to building services, there is a recognition that there is a workforce need for these services.

*Good aids go on to be good nurses - they are a foot in the doors, so somehow make it a good position, a caregiver is a really good position.*

*Aging boomers and who will take care of us. I’m concerned about who will do it. I think it used to be a passion and now I wonder if it is just more the job they can get, not as much their passion.*

Cost of care and other services
Cost of health care and other services emerged as a key concern for participants. In addition to concerns about the overall costs of healthcare, cost of mental health services and recreation activities were of concern. While many services may be available within the community, the cost may reduce access to services for many community members or make people less likely to seek services.

*The costs of healthcare are intimidating. Finding ways to make sure the costs are not running away.*

*When it costs $100 for an hour you just aren’t going to do it. At school there are not enough [mental health providers] and more assessing needs, but not a lot of one on one counseling. Even if the insurance covers, it can definitely be a hardship for most families.*

*I have a son who is overweight and there aren’t great places. You know the gyms have restrictions, if you’re an adult you have places to go, but if you’re a kid, you can’t. And like the RSC, it’s expensive and not every family can do that.*

Cross cultural connection
Participants in all groups identified that in Sioux County, improving cross-cultural relationships was a need. Specific needs identified including increasing the number of interpretive services available in healthcare settings, schools, and with transportation providers, ensuring that Latino community members are able to access recreation programs, encouraging new immigrants to continue in school, providing information for newcomers about what is available and encouraging respect for cultural identities.

*People are nice and polite and have become more welcoming to Hispanics.*

*See Hispanics as good, honest, calm people. Treat people as people, not differently because they are Hispanic.*

*To not have to use language line because it is so not personal, having certified interpreters where they know what they are doing health-wise and understand what they are relaying.*

*There are more people out there who are bilingual, so maybe language barriers are getting less. I’m thinking particularly of Spanish and English. Besides the fact that they don’t have interpreters; they really make it complicated when we need to do something at the city.*
Opportunities for families to connect to each other and one another
A need for connection emerged in each of the focus groups. This included both discussion about places to connect (such as community centers or events centers that provide services) but also community events, parenting classes, support groups, prevention programs and connecting with churches.

Participants also acknowledged that sometimes parents don’t want to attend events or programs because they place a priority on other things, like working or they may not be aware of the need.

Sometimes people (services) don’t connect with families unless there is a problem. And I think there are maybe needs with families when we want to prevent something really.

There is always a sense that everyone in society is always fine and dandy, but it isn’t always and we need to pay attention to that.

Parenting styles, or just people that have questions about it, not even those who are having a hard time but just like, for me. And even parenting teenagers, or like with ADHD. And we’ve talking about doing things for kids that are at risk, but it can't just be a school thing. It has to be a community and a church thing. And things are not just needed one, but all the time.

Mental health prevention services, counseling resources and crisis services
Participants state that mental health crisis services are inadequate across the county. Specific concerns identified were the availability of inpatient mental health beds, prevention and education related to mental health, and increasing access to counseling and therapy. People do not readily seek help for mental health issues because of the stigma attached to mental illness and the need for treatment.

Availability of mental health resources - we have a lot of counseling things, but like how to get in to them, is it during school? And family counseling is a huge need. How to parent, how to raise kids.

Maybe something about the shame around seeking mental health services. It's even hard for us to talk about it and for people to acknowledge that they are experiencing certain things, there is so much shame around it.

How to make it more available and more normal to be open about having problems with teenagers or your kids.

Lack of services for people who are having a mental health crisis. You can take someone to Sioux Falls and sit there for hours and then there is nothing they can do. And there's just nothing to do. I know it is statewide, but here too.

Mental Health - it’s becoming more a concern, and I know we have some but I just don’t know that it is enough. And when someone comes into the ER it can take hours and hours. Beds for inpatient [mental health], but also for counselors and therapists. Inpatient beds are not accessible.
Improve community services and infrastructure
Participants expressed a desire to improve community services and infrastructure such as sidewalks and pedestrian safety, community transportation services, addressing housing cost and quality and ensuring that resources are available to maintain or improve the look of communities.

*How we structure the whole environment to promote wellness, so things like sidewalks. We pay attention to these matters of how to advance wellness so our environment can promote wellness.*

*Transportation that is affordable. You might be able to get it for a medical appointment, but maybe not for anything else.*

*Rent is expensive, create more affordable housing*

Improve school system(s)
Specific needs identified within school system(s) included more space for 3-year-old preschool/Headstart students, emphasizing the importance of education, increasing the number of bilingual teachers, and supporting schools as they fulfill multiple roles in student lives.

Awareness of resources and services
Participants expressed appreciation for the number and variety of services available in Sioux County communities, but identified a lack of awareness and coordination of services as an issue. This gap in awareness exists at both the “professional” level and the general public.

*If we all knew a little more about what other groups are doing, and the general public too.*

*There are groups that are creating committees, and would there be a place that we could go to get a list of like where we should go first.*

*Better understanding of who does what, what's available, and when it is available.*

Sioux Center
There were no additional themes identified specific to Sioux Center. Specific themes that were emphasized included:

- The need to continue to maintain community infrastructure, specifically focusing on pedestrian and street safety and maintaining Heritage Village.
- Improving community services such as fitness opportunities, transportation, parks, addressing high rent, and childcare.
- Continuing to build healthcare services including collaboration between health care organizations, addressing the gap between clinic hours and urgent care availability, and addressing the cost of care particularly for the uninsured, and helping people to navigate healthcare systems including billing.