

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 Health Center in Rock Valley, IA to fulfill these requirements. Hegg Health Center conducted this community health needs assessment 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. Translation and Interpretation
3. Community education on parenting and child development

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

- Obesity
- Mental Health Services
- Translation and Interpretation

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 and a community survey. 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 and a county-wide survey
4. Convene stakeholders to identify county priorities
5. Identify health system priorities

Introduction and Background

A community health needs assessment provides an opportunity to systematically 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 Health Center in Rock Valley, Iowa to fulfill these requirements.

Hegg 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 Health Center also includes 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 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 Health Center conducted this 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, conducting a county-wide survey and design of focus groups. Although the process was collaborative, each individual hospital reviewed both community level and county level data and input. Hegg 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 Health Center primarily serves the community of Rock Valley, with 81.9 percent of 2018 discharges coming from Rock Valley. Rock Valley is located within Sioux County, Iowa and 84.8 percent of discharges originating in Sioux County. Hegg Health Center provides healthcare services in Rock Valley and other nearby communities. For the purposes of this community health needs assessment, the service community for Health Hegg Center includes Sioux County and specifically the community of Rock Valley.

The 2017 population estimate for Rock Valley is 3,746 as estimated by the U. S. Census Bureau. Between 2010 and 2017, the population increased by 10.3 percent. Rock Valley’s population is 86.5 percent white, 12.2 percent Hispanic, 0.4 percent Asian, and 0.96 percent other races. (Source: www.city-data.com/city/Rock-Valley-Iowa.html) 27.3 percent of the population of Rock Valley is age 17 and younger, while 25.3 percent are between age 18-24 and 19.9 percent are age 65 and older. The median age is 35.8 years.

The median household income in Rock Valley is \$75,179, with 13.1 percent of the population earning below poverty level. (2013-2017 American Community Survey 5-Year Estimates)

73.2 percent of occupied housing units in Rock Valley are owner-occupied with 26.8 percent renter occupied at a median gross rent of \$703.

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 Sioux County health care organizations to conduct a collaborative community health needs assessment. Partners in the collaborative process included four critical access hospitals: Hegg Health Center, Sioux Center Health, Orange City Area Health System, and Hawarden Regional Healthcare, Promise Community Health Center and Community Health Partners of Sioux County. The first meeting (October, 31, 2018) 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 (primary and secondary), 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 groups 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 in December and January 2019. 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.

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

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, 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 Input from Community

Key community survey findings:

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 percent 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.

Focus group identified themes:

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 and 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 included: increasing the number of interpretive services available in healthcare settings, schools, and with transportation providers, ensuring that Hispanic/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 event 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.

No written feedback was received on Hegg Health Center’s previous CHNA or implementation plan that needed to be incorporated into the current report.

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?**

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

*Top 3 needs

Summary of Priority 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 Rock Valley, these additional resources address Obesity.

- Hegg Health Center has hosted "Rock your Ride", a bicycling program for youth over the last 5 summers.
- Hegg maintains a community wellness center.
- 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.

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 Rock Valley to address this issue include:

- Hegg Health Center currently employs one full-time fully certified interpreter and one part-time interpreter that has completed interpreting and translation education.
- E-interpreting services are available at Hegg Health Center

Community education with focus on parenting and child development

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:

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

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.

Evaluation of Prior CHNA/Implementation Plan

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:

Obesity

Obesity is a topic that is constantly at the forefront of our Wellness Department and Community Education managers. During the last three years, Hegg Health Center has worked diligently to create, develop, modify and implement 5-2-1-0 programs within the community of Rock Valley to address obesity prevention. We hosted “Rock Your Ride,” a bike riding competition for elementary aged kids, an 8 week program where kids ride their bikes and record miles using an odometer encouraging them to stay active by using their bikes instead of motorized vehicles. This program was held each year, and continues to be popular within the community. The hospital also hosted two Story Walks, a program that displays a page or two of a story a certain distance apart on a walking trail so that children and families can read the story together as they walk.

Hegg Health Center also implemented the HANK (Healthy Active Nutritious Kids) program in the fall of 2016, which is designed for children grades K-4 and provides them with healthy eating tips and information on how to stay active. Cooking with HANK was created based on the HANK program and provided to students on a quarterly basis, in which the kids are taught how to make healthy snacks and meals on their own. The hospital partnered with local schools to hold a Screen Free week in May 2017, a program that encouraged students to not use their electronic devices and choose to be active.

Mental Health Services

Hegg Health Center has been working collaboratively with Community Health Partners of Sioux County and other mental health professionals to promote mental health and resource awareness in Sioux County. The hospital partnered with Creative Living Center to promote education and awareness of Adverse Childhood Experiences (ACEs). The health center has provided ACEs training to all staff members and the ACEs scoresheet has been placed in our patient rooms. Brochures were also created and given to our clinic staff to be handed out at well baby checkups. The hospital also increased the Social Service department hours so that if a patient is reporting high scores, referrals to Social Services can be made and additional resources provided. In January of 2019 a social media blog about ACEs was provided to the community members and a blog on mental health/depression is scheduled to run in June 2019.

Translation and Interpretation

Hegg Health Center places a high importance on the availability of translation and interpretation services within the community. After meeting with the other Sioux County hospitals and health centers, it was decided that each facility would have their own pool of interpreters. Currently Hegg Health Center employs one full-time fully certified interpreter, one part-time interpreter that has completed translation and interpreting classes, and one Per Required Need (PRN) interpreter. To ensure that interpreting and translation services are available at all times to our patients and community members, the hospital also utilizes an interpretation phone service, web-based interpretation service, and other electronic devices. Since 2016, essentially all pertinent patient information has been translated into Spanish. Additionally, our facility has added a function to the Hegg Health Center website that will change the website to Spanish, when requested.

Community Education and Support Groups

Hegg Health Center continues to strive to improve current programs, create needed programs, and discontinue unneeded programs offered through our community education department. Our facility continues to hold regular support groups for chronic pain and Alzheimer’s / Memory Loss. The

community education department of the hospital has also been involved with a community class called Matter of Balance, which is an 8 week structured group intervention that emphasizes practical strategies to reduce the fear of falling and increase activity levels in community dwelling adults. This class has been held at least annually since its inception in 2015 and has served more than 35 participants. Other community education programs hosted by the hospital during the past three years include: Josh the Otter which is a program designed to teach elementary student safety around water, prenatal/birthing classes, Babysitting Basics which teaches older children the basics on taking care of younger children, and AG Safety Day which is a program designed to teach third graders safety around farm equipment.

Urgent Care

This priority was initially identified in the 2013 CHNA, however it was found that financial and provider constraints prevented Hegg Health Center from being able to meet this need at that time. The hospital is excited to state that in October of 2017 we began offering after-hours urgent care on Wednesday evenings and Saturday mornings.

Sioux County Evaluation of Prior CHNA/Implementation Plan

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 served 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.

Housing - A team obtained funding and developed a video to promote communication between landlords and tenants. The video is presented in Spanish with English subtitles and is intended to be viewed by both landlord and tenant. To date, the video has been viewed 257 times.

No feedback was received on the previous CHNA or implementation strategy.

Acceptance and Publication of CHNA for Fiscal Year 2019

The Hegg Health Center Fiscal Year 2019 Community Health Needs Assessment Report was presented to the Hegg Health Center Board of Directors on June 20, 2019 for discussion and consideration. The Board of Directors approved the Hegg Health Center Fiscal Year 2019 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 Health Center Board of Directors prior to November 15, 2019.

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