

Winnebago County Public Health

Community Health Needs Assessment (CHNA) Report



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Winnebago County Public Health

Promote Healthy Living Assessment

includes topics such as addictive behaviors (tobacco, alcohol, drugs, gambling), chronic disease (mental health, cardiovascular disease, cancer, asthma, diabetes, arthritis, etc.), elderly wellness, family planning, infant, child & family health, nutrition and healthy food options, oral health, physical activity, pregnancy & birth, and wellness.

Healthy Living Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
<p>1 Adults Who Are Physically Active</p>	<p>According to County Health Rankings, 30% of residents are physically inactive compared to 24% of lowans. Other sources state that from 2004-2012 the percent of Winnebago County adults that have stated they are inactive has increased steadily. This increase has gone from 21% in 2004 to 28% in 2012. Winnebago County rates have consistently been higher than the state of Iowa and US and consistently rising over time.</p> <p>These rates correspond with increasing number of the adult population who state they have no leisure time physical activity (28% - compared to Iowa rates of 24% and US rates of 22%) 53% of respondents to a CHNA identified getting more physical activity is one of two healthy behaviors they would like to start or improve. This was the top survey response. The same survey notes 61% of respondents state lack of motivation as what prevents them from being healthier. 30% state recreational trails or sidewalks would help to start or maintain a healthier lifestyle.</p> <p>The CDC Health Statistics recreation access rate per 1,000 person (ratio of recreation and fitness facilities to number of residents in Winnebago County) is 0.1.</p> <p>The percent of individuals living within a half mile of a park is 23%. The US median is 14%. (CDC Health Statistics source)</p> <p>Adults who are physically active has been determined a priority due to community surveyed, as well as, it is a contributing factor in the leading cause of death of county residents. This is a community priority as regular physical activity can improve the health and quality of life of all ages, regardless of the presence of a chronic disease or disability.</p>	<p>Yes</p>	<p> <input type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input checked="" type="checkbox"/> Lack of human resources/ staff <input checked="" type="checkbox"/> Other </p> <p> <input type="checkbox"/> Community partners do not exist <input checked="" type="checkbox"/> Lead organization does not exist <input type="checkbox"/> Lack of financial resources </p> <p>No single entity can dedicate the time without funding to pursue impacting adult physical fitness activities. In addition, there is a lack of employer based support of wellness programs.</p>

Healthy Living Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
2 Rising Obesity Rates Among Youth and Adults	<p>According to the 2014 Iowa Youth Survey only 29% of youth surveyed were physically active for 60 or more minutes per day. County Health Rankings sight 33% of county residents to be obese, compared to 30% of Iowans.</p> <p>2015 agency CHNA identified healthy diets as one of three top-health concerns relative to children's health. Obesity of county residents has been determined a priority due to community surveyed, as well as, it is a contributing factor in the leading cause of death of county residents.</p> <p>Many health conditions are related to obesity such as diabetes. For Winnebago County CDC morbidity indicators show that the percent of adults living with diagnosed diabetes is 7.5%. The average rate of incidence of diabetes (2006-2012) is 5.3%-15.5% for Winnebago County compared to 7.4-7.9% for the State of Iowa.</p>	No	<input type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input checked="" type="checkbox"/> Lack of human resources/ staff <input checked="" type="checkbox"/> Other <input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input checked="" type="checkbox"/> Lack of financial resources <p>There are lead organizations available - but without funding to provide human resources this can not move forward.</p>

Healthy Living Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
3 Tobacco Use and Secondhand Smoke	<p>According to the 2014 Iowa Youth Survey - 13% of youth surveyed have smoked or used tobacco products, this is higher than the state rate of 11%. It is estimated through the Iowa Behavioral Risk Factor Surveillance System (2006-2012) that 10% of Winnebago County adults smoke and 14% of youth use tobacco products.. Both of these rates are lower than the state of Iowa.</p> <p>Tobacco use and second hand smoke has been determined a priority due to community surveyed in 2015, as well as, it is a contributing factor in the leading cause of death of county residents. Although community residents are aware that tobacco use is harmful, individual still choose to smoke. As a community the need was stated that there needs to be a focus on second hand smoke in community areas where there are others in close contact.</p>	Yes	<input type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input type="checkbox"/> Lack of human resources/ staff <input type="checkbox"/> Other <input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input type="checkbox"/> Lack of financial resources

Winnebago County Public Health

Prevent Injuries & Violence Assessment

includes topics such as brain injury, disability, EMS trauma & system development, intentional injuries (violent & abusive behavior, suicide), occupational health & safety, and unintentional injuries (motor vehicle crashes, falls, poisoning, drowning, etc.).

Injuries & Violence Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
1 Unintentional Injuries, Poisonings, Fire and Carbon Monoxide Poisoning	<p>According to the CDC (data 2008-2010), the age adjusted unintentional injury death rate (including motor vehicle) for Winnebago County is 41.6 per 100,000. The rate excluding motor vehicle is 24 per 100,000. State of Iowa rates are:</p> <p>Winnebago County has a Love Your Kids program that targets unintentional injuries, poisonings, fire, and carbon monoxide poisoning. The program reaches county residents through school district programming, as well as, home visitation programs. In addition, a home visitation program that is available families in Winnebago County targets toxins, home maintenance and health and safety. These programs have been a great addition to Winnebago County, however gaps in services that are provided occurs because these programs are fragments from each other and other providers in the community provide components of programming. Families have stated it takes too much time to meet with several different agencies for various assistance and programming.</p>	No	<input type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input checked="" type="checkbox"/> Lack of human resources/ staff <input checked="" type="checkbox"/> Other no umbrella program to encompass injuries and poisonings <input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input checked="" type="checkbox"/> Lack of financial resources staff

Injuries & Violence Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
2 Helmet Use By Children	20% of respondents to agency CHNA HIP survey identified not wearing a helmet on a bike or motorcycle as a risky behavior.	No	<input checked="" type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input checked="" type="checkbox"/> Lack of human resources/ staff <input type="checkbox"/> Other <input type="checkbox"/> Community partners do not exist <input checked="" type="checkbox"/> Lead organization does not exist <input checked="" type="checkbox"/> Lack of financial resources staff

Winnebago County Public Health

Protect Against Environmental Hazards Assessment

includes topics such as drinking water protection, food waste, food safety, fluoridation, hazardous materials, hazardous waste, healthy homes, impaired waterways, lead poisoning, nuisances, on site wastewater systems, radon, radiological health, soil erosion, and vector control.

Environmental Hazards Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
1 Childhood Lead Poisoning	<p>Winnebago County currently has NO lead poisoning prevention program. When the program was restructured several years ago, coalitions were formed around Winnebago County. This left Winnebago a stand alone county which is not eligible to apply for state/federal funding assistance for the lead poisoning prevention efforts and testing of children. Surveillance data is believed to be inaccurate for Winnebago County as there is no funded childhood lead poisoning prevention program. With national statistics that in Iowa one in 14 children is lead poisoned, county officials believe there is a large population of children that are slipping through the cracks because of a lack of a funded program in the county.</p> <p>Childhood lead testing data accuracy is questionable due to small numbers in Winnebago County data resulting in suppressed information. Winnebago County with a population of 10,866 (2010) has 2,243 homes built before 1950 and 2117 built between 1950-1979. In the recent CHNA HIP (2015) community survey process, Winnebago County identified lead poisoning prevention as one of the top environmental issues within the county that must be dealt with immediately (21% of respondents).</p>	No	<input type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input checked="" type="checkbox"/> Lack of human resources/ staff <input checked="" type="checkbox"/> Other County is not part of the statewide funded projects <input type="checkbox"/> Community partners do not exist <input checked="" type="checkbox"/> Lead organization does not exist <input checked="" type="checkbox"/> Lack of financial resources

Environmental Hazards Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
2 Indoor air quality (radon)	<p>The average indoor radon levels in Winnebago County is 8.4 pCi/L. This is much higher than the national average of 1.2 pCi/L. Sixty-three percent of the homes tested have results of 4 pCi/L and above. (Data 2014 Iowa Department of Public Health) Winnebago County currently provides minimal radon-testing kits to county residents. In the past year, they have developed a strong working relationship with community businesses to distribute radon test kits at no charge. However, the population at most risk (low income) has not been reached due to funding silos and program requirement resource constraints. In the</p>	Yes	<input type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input type="checkbox"/> Lack of human resources/ staff <input type="checkbox"/> Other <input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input type="checkbox"/> Lack of financial resources

recent CHNA HIP (2015) community survey process, Winnebago County identified radon exposure as the top environmental issues within the county (48% of respondents). Poor air quality is linked to premature death, cancer, and long-term damage to respiratory and cardiovascular systems.

Environmental Hazards Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
3 Safe Housing for County Residents	In the 2015 CHNA survey, 28% of respondents identified safe housing as one of three top environmental health issues in their community. The business sector of the county perceives housing conditions to be a serious issue in the county. According to County Health Rankings that 6% of county households have at least 1 of 4 housing problems (overcrowding, high housing costs, or lack of kitchen or plumbing facilities. (Data from 2007-2011)	No	<input type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input type="checkbox"/> Lack of human resources/ staff <input checked="" type="checkbox"/> Other <u>Lack of overall Healthy Homes Program</u> <input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input checked="" type="checkbox"/> Lack of financial resources

Environmental Hazards Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
4 Air Particulate Matter	<p>Data from County Health Rankings shows the average daily density of fine particulate matter in micro grams per cubic meter to be 12.2 in 2011 which is higher than state of Iowa and US measures/trends.</p> <p>Asthma hospitalization rate: 0-4 year olds per 100,000 is 261 compared to 149 for the state of Iowa; 35-64 year olds 38/100,000 compared to state rate of 64; ages 65+ 141 compared to state rate of 100.</p>	No	<input type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input checked="" type="checkbox"/> Lack of human resources/ staff <input type="checkbox"/> Other _____ <input type="checkbox"/> Community partners do not exist <input checked="" type="checkbox"/> Lead organization does not exist <input checked="" type="checkbox"/> Lack of financial resources

Environmental Hazards Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
5 Water Quality	Winnebago County residents and visitors access drinking water by public water supply systems or private wells. While large portions of residents and visitors access water through the public water supply, there are about 1130 known private wells in Winnebago County. However, we know this does not account for all of the wells - it is estimated that there is at least twice this number. Bacteria and nitrogen are significant risks to private wells in the county.	No	<input checked="" type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input type="checkbox"/> Lack of human resources/ staff <input checked="" type="checkbox"/> Other _____ <input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input checked="" type="checkbox"/> Lack of financial resources

Environmental Hazards Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
6 Healthy Homes Program (connection of health of the individual and the home in which they live)	County wide organization/agency assessment (2015) identified the lack of a comprehensive program that acts as an umbrella to assure all applicable public health services are offered to the populations that need them.	No	<input type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input checked="" type="checkbox"/> Lack of human resources/ staff <input type="checkbox"/> Other _____ <input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input checked="" type="checkbox"/> Lack of financial resources

Winnebago County Public Health

Prevent Epidemics & the Spread of Disease Assessment

includes topics such as disease investigation, control & surveillance, HIV/AIDS, immunization, reportable diseases, sexually transmitted diseases (STDs), and tuberculosis (TB).

Epidemics & Spread of Disease Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
1 Adolescent Immunization	29% of Winnebago adolescents have received recommended vaccination series. (3 HepB, 1 Meningitis, 2 MMR, 1 Td and 2 varicella vaccine series)	No	<input checked="" type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input type="checkbox"/> Lack of human resources/ staff <input checked="" type="checkbox"/> Other <input type="checkbox"/> Community partners do not exist <input checked="" type="checkbox"/> Lead organization does not exist <input checked="" type="checkbox"/> Lack of financial resources <p>Difficult to track adolescents and lack of parental priority - receive 1st vaccination in series from one provider and then do not return for second follow up dose. Many residents receive immunizations in MN clinics/hospital and are not part of the IRIS system.</p>

Epidemics & Spread of Disease Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
2 2 Year Old Coverage of Selected Vaccination Series	67% of Winnebago children (<2 years) have the received selected vaccination series. (4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hep B, 1 Varicella, 4 PCV vaccine series by 24 months of age.)	No	<input checked="" type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input type="checkbox"/> Lack of human resources/ staff <input checked="" type="checkbox"/> Other <input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input type="checkbox"/> Lack of financial resources <p>Many residents receive immunizations in MN clinics/hospital and are not part of the IRIS system.</p>

Winnebago County Public Health

Prepare for, Respond to, & Recover from Public Health Emergencies Assessment

includes topics such as communication networks, emergency planning, emergency response, individual preparedness, recovery planning, risk communication, and surge capacity.

Preparedness Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:	
1 Preparedness for Emergency Response	CHNA assessment (2015) identified 58% of Winnebago County residents stated that they do NOT feel they are prepared for a natural or man-made disaster. Only 19% has practiced a tornado drill and 17% practiced a fire drill. Less than 30% identified having a central meeting place in case of disaster. 25% identify needing more information about how to prepare for an emergency.	No	<input checked="" type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input checked="" type="checkbox"/> Lack of human resources/ staff <input type="checkbox"/> Other _____	<input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input type="checkbox"/> Lack of financial resources

Winnebago County Public Health

Strengthen the Health Infrastructure Assessment

includes topics such as access to quality health services, community engagement, evaluation, food security, food systems, food and nutrition assistance (SNAP, WIC), health facilities, health insurance, medical care, organizational capacity, planning, quality improvement, social determinants (e.g., education & poverty levels), transportation, and workforce (e.g., primary care, dental, mental health, public health).

Health Infrastructure Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:	
1 Availability of Needed Levels of Care / Services	There is no critical care hospital, hospital, or emergency department in the county. Specialty care providers are 50+ miles away. In addition, the ratio of residents to primary care physicians is 2,120:1 compared to the state of 1,375:1. Mental health provider ratio to the population is 10,554:1 compared to the state ration of 904:1.	No	<input checked="" type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input checked="" type="checkbox"/> Lack of human resources/ staff <input type="checkbox"/> Other	<input type="checkbox"/> Community partners do not exist <input checked="" type="checkbox"/> Lead organization does not exist <input checked="" type="checkbox"/> Lack of financial resources

Health Infrastructure Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:	
2 Navigating the Complex System of Services (adults)	Though community input and feedback to health care services, it was identified by adults that it is difficult to navigate the health care system and resources. This is due to specialty care services are not located within the county. It is difficult to link/find/navigate, health, social, mental, case management and resources for county residents.	No	<input checked="" type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input checked="" type="checkbox"/> Lack of human resources/ staff <input type="checkbox"/> Other	<input type="checkbox"/> Community partners do not exist <input checked="" type="checkbox"/> Lead organization does not exist <input checked="" type="checkbox"/> Lack of financial resources

Health Infrastructure Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:	
3 Limited Availability of Behavioral Risk Factor Data	Due to the small population that is surveyed for behavioral risk factors, the data is often skewed or nonexistent. The county needs a behavioral risk assessment that is more statistically sound.	No	<input checked="" type="checkbox"/> Other priorities rated higher <input type="checkbox"/> Existing programs already address problem/need <input checked="" type="checkbox"/> Lack of human resources/ staff <input type="checkbox"/> Other	<input type="checkbox"/> Community partners do not exist <input checked="" type="checkbox"/> Lead organization does not exist <input checked="" type="checkbox"/> Lack of financial resources

Winnebago County Public Health

JANUARY 27, 2016

COMMUNITY HEALTH NEEDS ASSESSMENT SNAPSHOT



Promote Healthy Living

- Priority #1 Adults Who Are Physically Active
- Priority #2 Rising Obesity Rates Among Youth and Adults
- Priority #3 Tobacco Use and Secondhand Smoke



Prevent Injuries & Violence

- Priority #1 Unintentional Injuries, Poisonings, Fire and Carbon Monoxide Poisoning
- Priority #2 Helmet Use By Children



Protect Against Environmental Hazards

- Priority #1 Childhood Lead Poisoning
- Priority #2 Indoor air quality (radon)
- Priority #3 Safe Housing for County Residents
- Priority #4 Air Particulate Matter
- Priority #5 Water Quality
- Priority #6 Healthy Homes Program (connection of health of the individual and the home in which they live)



Prevent Epidemics & the Spread of Disease

- Priority #1 Adolescent Immunization
- Priority #2 2 Year Old Coverage of Selected Vaccination Series



Prepare for, Respond to, & Recover from Public Health Emergencies

- Priority #1 Preparedness for Emergency Response



Strengthen the Health Infrastructure

- Priority #1 Availability of Needed Levels of Care / Services
- Priority #2 Navigating the Complex System of Services (adults)
- Priority #3 Limited Availability of Behavioral Risk Factor Data