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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:
1 Alcohol and other drugs drinking (binge drinking and lack of substance abuse programs).	2015 Iowa Health Profile indicates that 94% of youth reported not binge drinking in the last 30 days. This same report indicates an increase to above 10% once youth reach 11th grade. In contrast to youth statistics this report indicates Iowa ranking as one of the states with the highest percentage of adults who report binge drinking. Binge drinking impacts all races and income levels. The 18 to 24 year old group has the highest percentage of heavy drinkers. Community partners reported at our meeting that our community has a lack of inpatient and intensive outpatient substance abuse programs. Hospital social worker and local law enforcement report long waits for necessary treatment for substance abuse. LE also reports this wait has resulted in need for incarceration due to illegal activity.	No	<input type="checkbox"/> Other priorities rated higher <input checked="" 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

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 Mental health for adults and children.	A survey monkey sent out by BVCPH indicated that mental health, adult and children, was the highest concern of our community partners (64.58% of the respondents. They felt there was a lack of early screening and prevention resulting in illness going undetected until a crisis. IDPH tracking portal indicates BV Co suicide rate is 14.75 (per 100,000), higher than the state rate of 12.98. The 2014 Iowa Youth Survey indicates the percentage of BV Co students who have seriously thought about killing themselves has increased from 14.4% in 2012 to 16.6% in 2014. SAMHSA produced a 2014 report for the state. Pertinent statistics from that report include: 8.3% of adolescents had at least one Major Depressive Episode with the year surveyed, 48.8% of adolescents received treatment for depression, 4.2% of adults had serious thoughts of suicide with the year prior to the survey, 4.7% of adults had Serious Mental Illness within the year, 49.3% of adults with any mental illness	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

received mental health treatment or counseling (higher than the national average) and Iowa suicide rates have risen over the past 20 years. The rates are highest among males and whites. Our community partners also reported a need for increased telehealth opportunities.

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 Elderly Wellness	<p>Members of our community partner meeting report increased dollars spent on end of life care. Data collected from Community Commons report indicates that only 49.5% of BV Co residents had cancer screening of sigmoidoscopy or colonoscopy (after 50 yr). This percentage is lower than the state (over 60%) and the US (61.3%). BV Co continues to have an increased rate of colorectal cancer (51.8 per 100,000). Iowa rate is 47.2 and US is 41.9. Community Commons report also indicates that 11.1% of adults in BV Co report NOT taking prescribed medication for high blood pressure. This compares to 19.1% noncompliance in Iowa and 21.7% noncompliance in the US. Also this % is less than the state and national rate, this % would be equivalent to 1,663 people living in BV County. The Community Commons report indicates that 55.04% of BV Co residents have been told by their medical provider that they have high cholesterol. This percent is significantly higher than Iowa at 37.91% and US at 38.52%. Community Commons report indicates that 8.9% of BV Co residents have been diagnosed with diabetes (equivalent to 1,460 individuals). This percentage has increased from 7.3% in 2004. We continue to have a higher rate than the state (8.45%) and lower than US (9.11%).</p>	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 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

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:
4 Nutrition and Healthy Food Options	<p>Data from USDA Household Insecurity Report, Feeding America, Map the Meal Gap and Hunger in America reflects the presence of food insecurity in BV County. Food insecurity affects 1 in 7 households, 1 in 6 rural households, 8% of households with seniors. This is equal to over 2,300 persons in BV Co. 72% of BV County residents live in poverty compared to 63.7% of state. This statistic is also reflected in the number of students in our county who qualify for free/reduced price lunches. BV Co rates are 23% higher than the states and 13% higher than US rates. Community Commons report indicates the percent of low income population with low food access for BV Co is 5.3%</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

which is equal to 1,073 people. This report also indicates the percentage of expenditures of the total household budget that is used for fruits and vegetables is so low that the number was suppressed on the report. Iowans report 11.68% and US has 12.68% expenditure used for fruits and vegetables. Health behaviors such as poor diet contribute to poor health.

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:
5 Obesity and inactivity	45.83% of the respondents on our Survey Monkey felt this issue should be a priority (#2). Excessive weight may indicate an unhealthy lifestyle and put individuals at risk for further health issues. The Community Commons report indicated that 41.8% of BV residents over 18 were over weight. This is higher than the state rate of 35% and the US rate of 35.8%. Obesity rates are just as alarming. 30.4% of adults over 20 years in BV Co are obese. This is identical to Iowa rate of 30.4% and higher than the US rate of 27.1%. There has been a 5% increase in this rate in BV Co since 2004. Community Commons report's physical activity indicator is determined by the percent of the population with no leisure time for physical activity. 24.1% of BV Co residents report they have no leisure time for physical activity. Iowa rates are 24.2% and US rates are 22.6%. This percent has stayed consistent since 2004. Community Commons data shows BV County has a rate of 4.94 recreation and fitness facilities (per 100,000). Iowa has 11.8 rate and the US has a rate of 9.7. Rates for the county, state and US have remained consistent over the last 10 years.	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

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:
6 Oral health	The Community Commons report indicates that 25.3% of BV Co population has had NO dental exam in the last year. This is consistent with the Iowa rate of 25.6% and lower than the US rate of 30.2%.	No	<input checked="" type="checkbox"/> Other priorities rated higher <input checked="" 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

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 Emergency Medical Services Trauma System Development	A participant at a Community Partner meeting voiced concern for the need of education of our emergency crews regarding their response to mentally ill patients. A community member also voiced concern with this issue. Hospital and law enforcement did not feel there was a need, however, our group did decide to offer the opportunity to receive training at a County EMS meeting. If there is an interest, this will be provided.	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 Education will be offered if desired. <input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input type="checkbox"/> Lack of financial resources

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 Mental health--adult and children	See promote healthy living section.	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 Addressed in another section of report <input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input type="checkbox"/> Lack of financial resources

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 Drinking water protection	Our county is currently being sued by City of Des Moines due to nitrates in the Raccoon River.	No	<input type="checkbox"/> Other priorities rated higher	<input type="checkbox"/> Community partners do not exist
			<input checked="" type="checkbox"/> Existing programs already address problem/need	<input type="checkbox"/> Lead organization does not exist
			<input type="checkbox"/> Lack of human resources/ staff	<input type="checkbox"/> Lack of financial resources
			<input type="checkbox"/> Other _____	

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 Low immunization rates for adolescents	<p>Immunization Program data collected from Benchmark Reports from IRIS or IDPH Annual Immunization Report indicates that adolescents served by BV Co Public Health and Home Care had a 25% immunization rate. Fully immunized includes 1 Td/Tdap, 3 Hepatitis B, 2 MMR, 2 varicella and 1 meningococcal vaccine. The rate for all providers in BV Co is 23%. The national goal is 90%. The immunization rate of adolescents served by HHA with 3 doses of HPV is 9% (before completion of school based clinics). This percentage has increased since completion of school based HPV program in fall 2015. The immunization rate of adolescents for all providers in BV Co is 11.5%. The national goal is 90%.</p>	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 checked="" type="checkbox"/> Lack of financial resources

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 Tuberculosis in our community	<p>A health professional from local provider voiced her concern about the number of latent TB conversions she sees when screening students for a CNA class. Our agency does have an aggressive TB program and work with the schools to develop questionnaires that would indicate the need for testing. We do see a better screening done at the elementary level that at high school level.</p>	No	<input checked="" type="checkbox"/> Other priorities rated higher <input checked="" 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

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 Emergency Preparedness	Iowa gets a C+ for its overall disaster preparedness. Per capita federal disaster preparedness funds have decreased from \$7.62 to \$5.90. Areas still needing attention includes medical response plan for supplying dialysis, medical response plan for supplying psychotropic medications, real time surveillance system in place for common emergency department presentations. This data came from the 2015 Iowa Health Profile.	No	<input checked="" type="checkbox"/> Other priorities rated higher <input checked="" 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

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 Access to quality health services (mental health)	Addressed above in promote healthy living section	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 Addressed in promote healthy living section <input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input 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 Food insecurity, especially in children	Addressed in promote healthy living section	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 addressed in promote healthy living section <input type="checkbox"/> Community partners do not exist <input type="checkbox"/> Lead organization does not exist <input 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 Lacking Public Transportation	Although this topic was brought up as a concern at our Community Partner meeting, BV Co percentage of population that uses public transportation is consistent with the rate for other rural communities. The options for using Public Transportation has improved over the last 10 years, however accessibility at needed times and cost remains a barrier.	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 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

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:
4 Need for improved community resource and referral networks	<p>This need ranked #4 on our list of priorities from the Survey Monkey distributed. Providers in our community see the need for a "resource hub" in our community that could link individuals with the services they need. Many don't know where to go, how to access services or even that those services exist. A resource hub would be invaluable to the customer who is looking for assistance in navigating the system. Our community also has a large minority population. This population comes from a variety of cultures which makes this need even more pressing. Our community partners did not vote to take action on this need, however, our agency is looking for grants to support this project and has started collecting information about the different resources available in our community and state.</p>	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 checked="" type="checkbox"/> Lack of financial resources

Buena Vista County

FEBRUARY 27, 2016

COMMUNITY HEALTH NEEDS ASSESSMENT SNAPSHOT



Promote Healthy Living

- Priority #1 Alcohol and other drugs drinking (binge drinking and lack of substance abuse programs).
- Priority #2 Mental health for adults and children.
- Priority #3 Elderly Wellness
- Priority #4 Nutrition and Healthy Food Options
- Priority #5 Obesity and inactivity
- Priority #6 Oral health



Prevent Injuries & Violence

- Priority #1 Emergency Medical Services Trauma System Development
- Priority #2 Mental health--adult and children



Protect Against Environmental Hazards

- Priority #1 Drinking water protection



Prevent Epidemics & the Spread of Disease

- Priority #1 Low immunization rates for adolescents
- Priority #2 Tuberculosis in our community



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

- Priority #1 Emergency Preparedness



Strengthen the Health Infrastructure

- Priority #1 Access to quality health services (mental health)
- Priority #2 Food insecurity, especially in children
- Priority #3 Lacking Public Transportation
- Priority #4 Need for improved community resource and referral networks