

Greene County

Community Health Needs Assessment (CHNA) Report



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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 Childhood obesity in elementary children, ages 5-9 years of age	According to 2015 BMI measurements of elementary students in Greene County schools, 17.25% were obese. According to the Iowa Indicator: The Health and Well-Being of Children (2011-12), the rate of overweight or obese children aged 10-17 is 31.3% National and 28.3% State. According to the 2011 Nutrition, Physical Activity, and Obesity (NPAO) Indicators Summary, 14.5% of low-income children aged 2 to less than 5 years are obese, as compared to 14.4% Nationally. The number of children living in poverty is 20% for Greene County, as compared to 16% for Iowa (2015 County Health Rankings & Roadmaps). It is important to target the younger children to improve healthy habits and decrease onset of chronic health conditions, such as diabetes and hypertension.	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:
2 Access to mental health services	According to a review of Greene County Medical Center's health information management reports, 1/3 of all emergency room visits to Greene County Medical Center are related to mental health issues. According to the 2015 County Health Rankings & Roadmaps, the ratio of residents to mental health providers in Greene County is 1828:1, as compared to 904:1 (Iowa).	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:	
3 Substance abuse (alcohol and marijuana) in youth, 8th-11th grades	According to the 2014 Iowa Youth Survey, binge drinking incidence was 16% for 11th graders and 3% for 8th graders in Greene County. Marijuana use was 21% for 11th graders and 7% for 8th graders.	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:	
4 Access to comprehensive maternal and child health services for low-income population	According to the 2015 County Health Rankings & Roadmaps, Greene County has several areas of concern: Low birthweight rate of 8.8% (6.8% Iowa); children living in poverty 20% (Greene County), as compared to 16% (Iowa); and teen birth incidence in 2015, 35 for Greene County, as compared to 30 for Iowa.	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:	
5 Access to affordable, quality child care	According to the 2015-16 Greene County Community Health Needs Survey, 41.9% of 411 respondents identified access to affordable childcare as a priority health-related need.	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:
6 Access to dental care providers	According to the 2015-16 Greene County Community Health Needs Survey, 26.8% of 411 respondents identified access to dental care as a priority health-related need. Per the County Health Rankings & Roadmaps, The Greene County Snapshot for 2015 notes a resident to dentist ratio of 3046:1. In addition, 10% of the population is uninsured (State 10%). According to Iowa Public Health Data, in 2014, there were 85.8 emergency department visits per age adjusted rate (per 10,000) for persons seeking oral health care. Dentists often limit the number of Medicaid-eligible patients they will serve, due to decreased reimbursement. Poor dental health can cause infections, heart disease, and premature labor, to name a few.	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:
7 Access to elderly care (long-term care)	Greene County currently has two nursing home facilities (one has a memory care unit), one assisted living facility, and one independent living facility. In-home services (until no longer appropriate for care) are provided by Greene County Public Health, five Medicare-certified agencies, and two private providers. According to the 2015-16 Greene County Community Health Needs Survey, 37% of 411 respondents identified the need for improved access to elderly care (long-term care), including more options for those with memory impairment. Ability to pay for care often becomes a barrier to accessing services.	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 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

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:
8 Resources for persons with physical limitations	According to the 2015-16 Greene County Community Health Needs Survey, 26.3% of 411 respondents identified the need for improved access and knowledge of resources to assist those with physical limitations.	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

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:
9 Chronic disease: Improved cardiovascular health	Cardiovascular disease includes congestive heart failure, myocardial infarction, cerebrovascular accident (CVA), ischemic heart disease, and cardiomyopathy. According to the 2013 Iowa Health Fact Book, the number of deaths, due to heart disease, in Greene County (2006-2010) ranked 29 of 99 counties. In that time frame, 157 residents died from heart disease.	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:
10 Chronic disease: Improved diabetes management and prevention	Diabetes is associated with multiple complications, including heart disease, kidney failure, blindness, and lower extremity amputations. According to the 2013 Iowa Health Fact Book, there were 12 deaths in Greene County (2006-2010) with a rate of 13.6% adjusted for the year 2000 population. Per 2015 County Health Rankings & Roadmaps, 10% of Greene County residents have diabetes (State, 9%). Diabetes monitoring rate was 96% (State, 89%)	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:
11 Use of tobacco products	According to the 2015-16 Greene County Community Health Needs Survey, 36.7% of 411 respondents identified tobacco use as a priority health-related issue. Per 2015 Greene County Health Rankings & Roadmaps, 23% of adults smoke (State, 18%).	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:
12 Gambling addiction	According to the 2015-16 Greene County Community Health Needs Survey, 18.3% of 411 respondents identified gambling as a priority health-related issue.	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:
13 Homelessness	According to the 2015-16 Greene County Community Health Needs Survey, 24.8% of 411 respondents identified homelessness as a priority health-related issue.	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

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 Access to domestic violence and sexual assault services	According to the 2015-16 Greene County Community Health Needs Survey, of 411 respondents, 48.2% identified domestic violence/sexual assault as a priority health-related issue.	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

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 Child abuse and neglect	According to the 2015-16 Greene County Community Health Needs Survey, of 411 respondents, 51.6% identified child abuse/neglect as a priority health-related issue. Per the DHS website, the number of confirmed child abuse cases for 2014 was 4.	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

Greene County

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 Exposure to radon in homes	State Radon Officer, Rick Welke states National average radon levels for indoors = 1.3 pCi/L. Average level in Greene County = 7.5 pCi/L. According to the Environmental Protection Agency (EPA), all of Iowa is under Zone 1 of EPA Radon Zone map. Zone 1 = Counties with predicted average indoor radon levels of 4 pCi/L or greater. 4 pCi/L is the "action level".	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

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 Childhood lead poisoning	Childhood lead poisoning can affect nearly every organ system of the body. It is especially harmful to developing brains and nervous systems in children under six years of age, potentially causing learning impairments. According to the Iowa Public Health Data for annual testing of children under six years old in 2013, 293 Greene County children were tested for lead (50.78% of total number for that group). The number of confirmed cases that were >10 = 1.64%.	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

Greene County

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 human papilloma virus (HPV) vaccination	Despite school based-clinics and educating parents about the benefits of vaccine during adolescent immunization encounters, the 2015 HPV rate of vaccination (ages 13-15) by Greene County Public Health was 26.5%; rate of vaccination by all providers in Greene County was 18.7%. The National benchmark is >90%.	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

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 Influenza vaccination in adults	The number of adults vaccinated for influenza who have Greene County zip codes and were entered into IRIS was 30.7%; the 2015 benchmark was >44%. A local pharmacy who provides adult vaccines chooses not to enter influenza vaccinations into IRIS, despite administering hundreds of doses each year, resulting in skewed data indicating adults immunized for influenza.	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 engagement by local pharmacy</u> <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 Medical Reserve Corp	The Greene County Medical Reserve Corp (MRC) is in a process of volunteer recruitment and training to meet the need for increased engagement and involvement with public health activities. In 2015, 15 new volunteers attended basic training regarding Incident Command System (ICS) and roles/responsibilities of MRC members.	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

Preparedness Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
2 Redundant communication	Due to staff turnover with few remaining employees possessing strong bases of experience/knowledge in emergency preparedness concepts, and recent Greene County Medical Center facility renovation, there is a lack of multiple methods of redundant communication (Health Alert Network (HAN) radios, blast notification, use of disaster calling trees, etc.)	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

Preparedness Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:
3 Personal and family preparedness for disaster events	According to the 2015-16 Greene County Community Health Needs Survey, 17% of 411 respondents identified personal and family emergency preparedness as a health-related priority.	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

Preparedness Community Priority	Rationale / Specific Need	Is this priority in the HIP?	If the priority is not addressed in the HIP, reason(s) why:	
4 Coordinated response to mass dispensing care clinic	Need for strengthened public health response, due to a recent 50% reduction in public health staffing and lack of knowledge/experience in key response personnel, and multiple Hospital Preparedness Program/Public Health Emergency Preparedness (HPP/PHEP) grant requirements to meet capabilities through a qualified exercise.	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

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 Coordination of medical care to prevent gaps in service	According to the 2015-16 Greene County Community Health Needs Survey, of 411 respondents, 41.4% identified the need for improved coordination of medical care between providers. In 2015, a clinic provider relocation and the addition of another primary care provider to Greene County impacted the public's perception of how to access care. 30-day readmission rates are a key benchmark (State and National). In 2015, the readmission rate for Greene County Medical Center was 7.66%; State average was 8.4%.	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 checked="" type="checkbox"/> Other <u>Lack of partner engagement</u> <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 Access to transportation for medical appointments	Lower income residents cannot always afford the rate charged by Region 12 Western Iowa Transportation System (WITS), which is a Greene County-subsidized program. Medicaid-funded transportation is not user-friendly and requires several days advance notice prior to a scheduled medical appointment. One-vehicle households must rely on others for transportation if the vehicle is being used for work by another household member, or is in need of repairs.	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

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 Succession planning of workforce	Within the next 10 years, 30% of the Greene County Public Health staff will pursue retirement, including the director, office manager, and the lead RN who manages epi, emergency prep & community education.	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

Greene County

FEBRUARY 17, 2016

COMMUNITY HEALTH NEEDS ASSESSMENT SNAPSHOT



Promote Healthy Living

- Priority #1 Childhood obesity in elementary children, ages 5-9 years of age
- Priority #2 Access to mental health services
- Priority #3 Substance abuse (alcohol and marijuana) in youth, 8th-11th grades
- Priority #4 Access to comprehensive maternal and child health services for low-income population
- Priority #5 Access to affordable, quality child care
- Priority #6 Access to dental care providers
- Priority #7 Access to elderly care (long-term care)
- Priority #8 Resources for persons with physical limitations
- Priority #9 Chronic disease: Improved cardiovascular health
- Priority #10 Chronic disease: Improved diabetes management and prevention
- Priority #11 Use of tobacco products
- Priority #12 Gambling addiction
- Priority #13 Homelessness



Prevent Injuries & Violence

- Priority #1 Access to domestic violence and sexual assault services
- Priority #2 Child abuse and neglect



Protect Against Environmental Hazards

- Priority #1 Exposure to radon in homes
- Priority #2 Childhood lead poisoning



Prevent Epidemics & the Spread of Disease

- Priority #1 Adolescent human papilloma virus (HPV) vaccination
- Priority #2 Influenza vaccination in adults



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

- Priority #1 Medical Reserve Corp
- Priority #2 Redundant communication
- Priority #3 Personal and family preparedness for disaster events
- Priority #4 Coordinated response to mass dispensing care clinic



Strengthen the Health Infrastructure

- Priority #1 Coordination of medical care to prevent gaps in service
- Priority #2 Access to transportation for medical appointments
- Priority #3 Succession planning of workforce