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 Substance Abuse alcohol/drugs	Marion County has no formalized substance abuse program. There is no coordination of services, and treatment is not readily available. Services need to be readily available, coordinated, and visible in the community. The result of not having a comprehensive SA program has resulted in many individuals being arrested and sent to county jail and even prison due to habitual offenses, such as public intoxication. This is a substance abuse problem. Many of those people need treatment, not jail/prison. This also results in poor health outcomes, such as liver cancer, cirrhosis, heart problems, and other chronic diseases. Need for support groups re: prevention and recovery.	Yes	☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 Rising e-cig use	There is a rising rate of e-cig use in youth, beginning in middle school (which is defined as beginning at age 8). E-cigs are able to be used in school due to the lack of recognition of this newer technology by school personnel. Many e-cigs look like pens from a distance, and the youth have the ability to not produce cloud. Three are hundreds of flavors for e-cigs. Local vendors indicate that the best selling flavor is gummy bear flavor. Local vendors advertise the e-cig as a quit aid, however, they have a "vape bar" in the back of the store that allows individuals to try a variety of flavors. Research indicates that e-cig use among youth leads to eventual cigarette use. Another concern is that the e-cig can be used as a delivery system for other drugs. Finally, there is need for tobacco cessation locally.	Yes	☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 Mental Health	The Mental Health system is fragmented, under development, and lacks adequate personnel. Marion County was in a mental health region that was discontinued by DHS, and thus, joined a new mental health region. Marion County has little organization to the local mental health system at this time. With joining the new region, this problem is improving, however, there are large gaps in service. Coordination is under development. Marion County has a very high number of mental health commitments, normally 8-12 per month. This is in process of being resolved with bringing telepsych into the hospital EDs and jail. Often times, the result is bringing the person back to the community and engaging them in local counseling services. There is a lack of counseling service provider contracts in the county. There is need for mental health support groups, including grief, suicide, caregiver support. Like all of Iowa, there is a need for mental health services for children. There are workforce shortage issues in mental health in Marion County. Psychiatrists are not available locally, however telepsych will help. Mental health nursing is not available, and not likely to become available due to the severe under payment for home visits by Medicaid. Paraprofessional level service, ie: homemaker and SCL level workers are not available due to the low wages for that type of employee. Finally, the service delivery and payment systems for Medicaid are a mess, which has potential to push cost to the local level. This is unsustainable. The unstable Medicaid system is very problematic	Yes	☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 Cardiovascular	Like all of Iowa, there is a high rate of cardiovascular disease. All health systems are in flux. Many are contributing to wellness activities, but there is no overall coordination. For treatment, deductibles for the marketplace continue to be too high for consumers to afford, the medicaid system continues to be in development, the ACO systems continue to be undeveloped. Hospitals and clinics are now denying services unless payment is pre-arranged for some patients. Updates will be provided as systems become more stable.	Yes	☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☒ Lead organization does not exist ☒ 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 Cancer	Cancer continues to be of concern in Marion County, as Marion County rates continue to be higher than state of Iowa rates. All health systems are in flux. Many are contributing to wellness activities, but there is no overall coordination. For treatment, deductibles for the marketplace continue to be too high for consumers to afford, the medicaid system continues to be in development, the ACO systems continue to be undeveloped. Hospitals and clinics are now denying services unless payment is pre-arranged for some patients. Updates will be provided as systems become more stable.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☒ 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 Family Planning	Family Planning is not available to low income and uninsured in Marion County. The contractor for those services is Planned Parenthood, in Polk County. The office was closed in Knoxville, and when family planning referrals are made, the woman who needs the service is told to drive to a Des Moines clinic. This is not realistic for younger women. The placement of this program is unrealistic, due to the conservative nature of Marion County. Attempts have been made to try to move it to another provider without success.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 Diabetes	Marion County continues to have concerns regarding diabetes, as does all of Iowa. Marion County needs to have diabetes education that is available to all at an affordable cost.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 Obesity	Marion County continues to have issues with obesity, which contributes to chronic disease. There is a need for nutrition education, access to fresh clean, whole foods. Education about cooking nonprepared foods.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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	Services to the disabled population	Medicaid systems are in flux. Updates will be provided as systems become more stable.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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	EMS trauma and system development	The EMS trauma system needs to be carefully evaluated. Volunteers are becoming older, new volunteers are more difficult to acquire, training requirements are becoming more and more difficult for volunteers to maintain.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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:	
3	Brain Injuries	Brain injuries are not treated as part of the mental health system. The BI waiver has a very long waiting list.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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:	
4 Suicide	Locally identified concern is that Marion County has had a larger number of death by suicide than in the past. The developing mental health system has targeted this as an area of concern and services to be developed to address the needs of unidentified individuals who are hopeless.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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:	
5 Domestic violence	A locally identified concern. Domestic violence continues to be a concern in Marion County, as it is in all of Iowa. Under development.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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:	
6 Falls	Falls have been identified as a significant cause of hospitalization.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ Lack of financial resources

Marion County, Iowa

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 Recreational water quality	Marion County's recreational water quality needs improvement. Lake Red Rock's water quality has become compromised. During the summer months, beaches have been closed, due to high nitrites, bacteria, and algal blooms		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 Food safety	Food Inspections have not been completed routinely as per code. The Iowa Department of Inspections and Appeals is responsible for restaurant food inspections Some food vendors have not been inspected in years. Inspectors come to local events when the local PHD calls them and prompts their attendance		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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:	
3 Lack of lead programming	The lead program was given back to the Iowa Department of Public Health last year because of lack of funding and excessive program requirements. Since the program has become the responsibility of the IDPH, no work has been done on identified lead homes in Marion County.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 Vector Control	No assistance is available for renters or home owners who have problems with bed bugs or cockroaches. This is of particular difficulty for renters.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 Subdivision/unincorporated community septic systems	Marion County has subdivisions and unincorporated communities with older homes and inadequately planned, polluting septic systems.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ Lack of financial resources

Marion County, Iowa

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 Lack of access to free/ reduced cost for STD testing/ treatment	Marion County has no family planning services, STD testing/ treatment at family planning centers. The centers have left Marion County, and are located in Polk County, and young women who need these services must drive there for services.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 STD information	MCPHD clinic staff receives many verbal reports of symptoms of STDs from clinic participants. Staff do not have ready access to STD reports locally, as these services are provided by the state.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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	College health services program	The removal of health services and placement of that service within administration at the local college presents concerns regarding lack of preparedness to act on communicable diseases		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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	800 mhz emergency response radio	MCPHD needs a tower for the antenna The 800 mhz radio lacks reception.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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	Depth in response positions	There is an insufficient number of staff in the PHD to provide adequate depth for all response positions		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 Health Care Workforce	There are insufficient providers for many health care venues: MENTAL HEALTH: psychiatrists, mental health nurses,mid-level credentialed providers for MH social work, individual and family BHIS, paraprofessional direct care providers(ie: home care aide, homemaker, supported community living. DENTAL: Mid-Level dental providers. Need more Dental Hygienists. Need dentists who will take medicaid. NUTRITION: Need dieticians HOMECARE: Need nurses and home health aides NURSING: nursing is nomadic. Need nurses who will stay in nursing positions.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 Health Care Access	Having health care coverage does not mean health care access. Many people have coverage, and access is becoming less and less available. Dentists do not take Medicaid. People with market place coverage do not have access, because they cannot afford the deductibles People who have traditional insurance do not have access, because they are being denied care because they have past bills at hospitals and clinics.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 Medicaid Managed Care	There was inadequate planning and preparation for the change to managed care. Medicaid access to care is compromised due to fewer providers than ever are taking Medicaid. Provider contracts are not in place for MCO networks. medicaid members do not know how the system will work. The system was not built for at risk populations. Systems appear to be built by administrative people who have never worked with the populations they serve.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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 Health care coverage "churn"	medicaid has always had problems with "churn" - people falling off of coverage for a variety of reasons. It is anticipated that this problem will become much worse with the network concept needing to be managed by the Medicaid population.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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:	
5 Fractured Health Systems	Statewide and nationally the health care systems are more fractured than ever. The professionals inside the system do not know how it works; consumers of health care who are not fluent in health care struggle to understand and manage their own care		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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:	
6 Dental Care Access	Dental Care is not available for low income people. It is becoming less available to the general population due to the cost. Those with dental coverage still have very high co-pays. Most people do not have coverage. Elderly people specifically do not have coverage or access. Medicaid children have coverage, but no access.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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:	
7 Affordable Housing	There is a lack of clean, safe, and affordable housing and quality rental housing in general. Fair market value is too high for many people to reach.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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:	
8 Unemployment	Unemployment for Marion County has risen over 88.2% from 2000 to 2014, according to Iowa Kids Count.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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:	
9 Poverty Level	Children living under the poverty level has increased by 51.6% from 2000 to 2014, according to Iowa Kids Count		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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:	
10 Food Assistance	According to Iowa kids Count, individuals participating in SNAP (food assistance) has risen 202% in Marion County, and 205.2% statewide from 2000 to 2014. During that same time, WIC participation has fallen by 28.2% in Marion County, and 11.8% statewide. There is a need to change the SNAP program to be modeled like WIC, so that the program provides a prescribed food package, specifically designed to meet the nutritional needs of participating families.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ 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:	
11 Transportation	Affordable and reliable transportation is needed in Marion County. The hours of service are not adequate to meet the needs of those needing return trips home from doctor appointments in later afternoon. There is need for transportation out of town to doctor appointments in the cities (Des Moines, Iowa City). Disabled patrons of the transportation system need minor assistance boarding with walkers, groceries, etc. TMS system is not reasonable with notice requirements. The system is not friendly to people with mild dementia, disabilities, same day needs, out of town travel, late day appointments, hospital discharge, emergency room transport home.		☐ Other priorities rated higher ☐ Existing programs already address problem/need ☐ Lack of human resources/ staff ☐ Other	☐ Community partners do not exist ☐ Lead organization does not exist ☐ Lack of financial resources

Marion County, Iowa
FEBRUARY 26, 2016
COMMUNITY HEALTH NEEDS ASSESSMENT SNAPSHOT

Promote Healthy Living

Priority #1   Substance Abuse alcohol/drugs

Priority #2   Rising e-cig use

Priority #3   Mental Health

Priority #4   Cardiovascular

Priority #5   Cancer

Priority #6   Family Planning

Priority #7   Diabetes

Priority #8   Obesity

Prevent Injuries & Violence

Priority #1   Services to the disabled population

Priority #2   EMS trauma and system development

Priority #3   Brain Injuries

Priority #4   Suicide

Priority #5   Domestic violence

Priority #6   Falls

Protect Against Environmental Hazards

Priority #1   Recreational water quality

Priority #2   Food safety

Priority #3   Lack of lead programming

Priority #4   Vector Control

Priority #5   Subdivision/unincorporated community septic systems

Prevent Epidemics & the Spread of Disease

Priority #1   Lack of access to free/reduced cost for STD testing/treatment

Priority #2   STD information

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

Priority #1   College health services program

Priority #2   800 mhz emergency response radio

Priority #3   Depth in response positions

Strengthen the Health Infrastructure

Priority #1   Health Care Workforce

Priority #2   Health Care Access

Priority #3   Medicaid Managed Care

Priority #4   Health care coverage "churn"

Priority #5   Fractured Health Systems

Priority #6   Dental Care Access

Priority #7   Affordable Housing

Priority #8   Unemployment

Priority #9   Poverty Level

Priority #10   Food Assistance

Priority #11   Transportation