

Carroll County Public Health Community Health Improvement Plan

Date Updated: April 11, 2019



For additional information, CONTACT:

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Community Priority

Promote Healthy Living

Goal #1 Increase Carroll County Health Rankings in the state of Iowa as evidenced by the County Health Rankings and Road maps yearly data.

National Alignment

State Alignment

According to the 2015 County Health Rankings, Carroll County ranks 38 out of 99 counties in Health Outcomes based on indicators that include: length and quality of life, the Health Factors ranking is 16 which is based on health behaviors such as tobacco use, diet and exercise, alcohol and drug use, sexual activity along with clinical care, social and economic factors and physical environment.

Objective 1-1 Show improvement in the Health Outcomes and health factors ranking for Carroll County.

Baseline Year	Baseline Value	Target Year	Target Value
2015	HO: 38 HF: 16	2019	Improvement

Strategy 1-1.1 Work with community partners and healthcare providers to improve the health rankings for Carroll County.

Strategy Type

Long-Lasting Protective Intervention

Who's Responsible

Community, healthcare providers and Public health

Target Date

Jan 1, 2019

Report Date

Apr 1, 2016

Progress on Strategy

Complete On track Off track No progress

Progress notes: Current Health Outcomes ranking 2016 is 21 out of 99 counties and Health Factors is 13. This is a nice improvement in the rankings.

Report Date

Apr 1, 2017

Progress on Strategy

Complete On track Off track No progress

Progress notes: New 2017 data is now available. Health Outcomes ranking is now 15 and Health Factors ranking is 11 out of 99 counties.

Report Date

April 1, 2018

Progress on Strategy

Complete On track Off track No progress

Progress notes: new 2018 data is now available. Health outcomes ranking is now 14 and health factors ranking is now 10 out of 99 counties.

Report Date

April 11, 2019

Progress on Strategy

Complete On track Off track No progress

Progress notes: new 2019 data is now available. Health outcomes ranking is now 24 and health factors remains at 10.

Goal #2 Increase healthy eating and activity levels in Carroll county adults as evidenced by the County health rankings.

National Alignment

State Alignment

County Health rankings and roadmaps, County health rankings 2015 data reports 30% of adults report a BMI of 30 or greater and 22% report no leisure time activity

Objective 2-1 Work with community partners, healthcare providers and Public health to decrease BMI and increase activity levels of Carroll county residents.

Baseline Year	Baseline Value	Target Year	Target Value
2015	BMI: 30% Activity: 22%	2019	Improvement

Strategy 2-1.1 Work with the Carroll county partners, wellness coalition, providers and public health to improve overall health of Carroll county residents by decreasing BMI and increasing activity levels.

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible

Carroll county public health

Target Date

Jan 1, 2019

Report Date

Apr 1, 2016

Progress on Strategy

Complete On track Off track No progress

Progress notes: Reviewed 2016 County ranking data. BMI remains at 30% and reporting no leisure time activity rises to 25%. We will continue with efforts.

Report Date

Apr 1, 2017

Progress on Strategy

Complete On track Off track No progress

Progress notes: 2017 Health rankings data now shows BMI data at 31% and physical activity data at 27%. We will continue to encourage activity.

Report Date

April 1, 2018

Progress on Strategy

Complete On track Off track No progress

Progress notes: 2018 Health rankings data shows BMI data at 31%, this is a small increase, and physical activity data is at 32%. we will continue to encourage activity.

Report Date

April 11, 2019

Progress on Strategy

Complete On track Off track No progress

Progress notes: 2019 Health rankings data shows BMI at 33% and physical activity data is at 27%. Physical activity data-lower is better-this has shown improvement.

Community Priority

Prevent Injuries and Violence

Goal #1 Fall prevention in older adults and those with disabilities.

National Alignment

State Alignment

"Falls are one of the leading causes of injury hospitalization and deaths among older adults in Iowa. The CDC indicates that millions of adults aged 65 and older fall each year in the US alone. Falls can cause moderate to severe injuries, such as hip fractures and head traumas, and have been shown to increase the risk of early death. According to the WHO, a fall is an event which results in a person coming to rest unintentionally on the ground or floor or other lower level. One out of three older adults falls each year, but about half of those who fall never reported or discussed their fall with a healthcare provider."

Objective 1-1 Work together as a group in the CHNA meeting to provide education on falls and interventions.

Baseline Year	Baseline Value	Target Year	Target Value
2015		2019	

Strategy 1-1.1 Work with community partners to provide education for fall risk and how to avoid falls.

Strategy Type
Long-Lasting Protective Intervention

Who's Responsible

Community partners, providers and Public health.

Target Date

Jan 1, 2019

Report Date

May 10, 2017

Progress on Strategy

Complete On track Off track No progress

Progress notes: Elderbridge Agency on aging has recently hosted a stepping on class for fall prevention on Wednesdays of march and April 2017 for 7 weeks. We will continue to monitor their community education. Active bodies classes are held at St Anthony hospital by a PT and this is an ongoing class that people can join to stay active and help reduce falls.

Report Date

April 1, 2018

Progress on Strategy

Complete On track Off track No progress

Progress notes: Elderbridge Agency staff is now working on possible Tai chi classes in the area to promote balance. St Anthony hospital physical therapy offers Active bodies classes M-W-F at 10:00 and T-Th at 12:00. This is an increase in services and has been a popular class. There is also a weekly parkinsons group exercise class put on by Physical therapy called Delay the disease which is well attended.

Report Date

April 11, 2019

Progress on Strategy

Complete On track Off track No progress

Progress notes: Elderbridge continues with classes, they did host a trainer class also.

Community Priority

Prepare for, respond to, and recover from Public Health Emergencies

Goal #1 Carroll Counties ability to prepare for, withstand and recover from public health incidents

National Alignment

State Alignment

71% of those that responded on the CHNA survey cited this a priority. According to the Public Health Preparedness Capabilities, National Standards for State and Local Planning March 2011, public health threats are always present. Capability 1: Community Preparedness entails engaging and coordinating public health, emergency management, healthcare organizations (private and community-based), mental/behavioral health providers, community and faith-based partners, state, local, and territorial partners.

Objective 1-1 Sustain a preparedness coalition for Carroll County.

Baseline Year

2015

Baseline Value

Coalition exists

Target Year

2019

Target Value

Coalition sustained

Strategy 1-1.1 Monitor continued status of the preparedness coalition.

Strategy Type

Long-Lasting Protective Intervention

Who's Responsible

Hospital, public health EMA, Ambulance and Sheriff staff

Target Date

Jan 1, 2019

Report Date

May 10, 2017

Progress on Strategy

Complete On track Off track No progress

Progress notes: Continue with Carroll County preparedness coalition. Carroll County Preparedness coalition will be expanding into larger group called Service area 1A starting July 1, 2017.

Report Date

April 1, 2018

Progress on Strategy

Complete On track Off track No progress

Progress notes: Carroll county preparedness coalition remains active and we also participate in the Service area 1A-11 county preparedness coalition. Alice trainings have been completed and Stop the bleed trainings are in progress in 2018.

Report Date

April 11, 2019

Progress on Strategy

Complete On track Off track No progress

Progress notes: This group remains active with education in the community.

Community Priority

Strengthen the Health Infrastructure

Goal #1 Transportation for low income, disabled and elderly.

National Alignment

State Alignment

Lack of available transportation is frequently identified as a barrier to services. Many low-income families, disabled and elderly do not have reliable transportation. There is limited public transportation for needed destinations and appointment times.

Objective 1-1 Increase availability of transportation in the community to Elderly and disabled persons.

Baseline Year	Baseline Value	Target Year	Target Value
2015		2019	

Strategy 1-1.1 Work with community partners and insurance providers to develop ways to provide transportation to the elderly and disabled.

Strategy Type

Long-Lasting Protective Intervention

Who's Responsible

Community, Public health, insurances

Target Date

Jan 1, 2019

Report Date

May 10, 2017

Progress on Strategy

Complete On track Off track No progress

Progress notes: CHNA group discussed the medicaid MCO's and that they are able to line up transportation with patients in advance of Dr appointments and other needs and will provide this service. Pizza Ranch fund raiser for transportation for disabled and elderly was held Feb 20, 2017. Travel vouchers are available and have been distributed to local social workers and facilities.

Report Date

April 1, 2018

Progress on Strategy

Complete On track Off track No progress

Progress notes: We continue to work on transportation needs in the county. Another fundraiser was completed in feb. 2018 for travel vouchers to be distributed to local social workers and facilities as needed.

Report Date

April 11, 2019

Progress on Strategy

Complete On track Off track No progress

Progress notes: This has been sustainable, another fund raiser was done in february and PH continues to work with area Social workers and facilities.