



Decatur County IA

Community Health Needs Assessment

Decatur County Hospital - Primary Service Area



June 2013

VV Research & Development LLC
Olathe, KS

Community Health Needs Assessment

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Shaded lines note IRS requirements

I. Executive Summary

[VVV Research & Development INC]

I. Executive Summary

The following report is the Community Health Needs Assessment (CHNA) prepared on behalf of **Decatur County Hospital with defined primary service area of Decatur County, Iowa.** Creating healthy communities requires a high level of mutual understanding and collaboration with community individuals and partner groups. The development of this assessment brings together community health leaders and providers, along with local residents, to research, prioritize county health needs and to document community health delivery successes. This health assessment will serve as the foundation for community health improvement efforts for the next three years. The Patient Protection and Affordable Care Act (ACA) require non-profit hospitals to conduct a CHNA every three years and adopt an implementation strategy to meet the needs identified by the CHNA.

Year 2013 CHNA brings together a variety of health status information. This assessment was coordinated and produced by VVV Research & Development INC. from Olathe, Kansas under the direction of Vince Vandehaar, MBA. Important CHNA benefits for the sponsoring local hospital and health department, as well as for the community, are as follows: 1) Increases knowledge of community health needs and resources, 2) Creates a common understanding of the priorities of the community's health needs, 3) Enhances relationships and mutual understanding between and among stakeholders, 4) Provides a basis upon which community stakeholders can make decisions about how they can contribute to improving the health of the community, 5) Provides rationale for current and potential funders to support efforts to improve the health of the community, 6) Creates opportunities for collaboration in delivery of services to the community and 7) Provides guidance to the hospital and local health department for how they can align their services and community benefit programs to best meet needs.

CHNA "Health Priorities" Cited – Decatur County Hospital PSA:

Decatur County IA on behalf of DCH				
Town Hall Community Health Needs Priorities			Attendees = 41	
#	HC Topics cited to either change or improve	Votes	%	Accum
Total Town Hall Votes (4 per person)		128	82%	
1	Recruit Mental health providers and increase MH placement & follow-up	25	16.0%	16.0%
2	Recruit Eye doctor to community	21	13.5%	29.5%
3	Further Decatur County Economic development	20	12.8%	42.3%
4	Increase Primary Care Clinic access / availability	18	11.5%	53.8%
5	Establish local DHS office – better access	12	7.7%	61.5%
6	Increase Amish HC services / education	9	5.8%	67.3%
7	Provide Adult Day Care Services	8	5.1%	72.4%
8	Decrease Obesity with Nutrition Education	8	5.1%	77.6%
9	Provide HC Transportation between Leon and Lamoni	7	4.5%	82.1%
Note:	Other items receiving votes: Meal coordination, Expand Medicaid, Education on HC service offerings, provide Prenatal/postnatal services, offer more Assisted Living options, improve IA works, offer new parent health education and open public Lamoni fitness center.			

Town Hall Community Health Strengths Cited – Decatur County Hospital Primary Service Area (PSA)

Health Delivery Strengths - Decatur County (Iowa) N=41			
1	Assisted living services	10	Having a new hospital - DCH
2	County ambulance	11	Home Health
3	Decatur County General Assistance	12	Hospice
4	Dental clinics	13	Nursing homes
5	Good community volunteerism	14	Pharmacies
6	Good schools	15	Proactive Public Health Dept
7	340B Programs @ community health center (discount drug benefit)	16	Variety of recreational areas – trails, state parks, county conservation
8	Good visiting specialists	17	Volunteer EMS
9	Having a FQHC	18	Wellness centers

Key Community Health Needs Assessment Conclusions (Secondary Research)

- TAB 1: Decatur County’s population decreased slightly (-5.3%) from 2000-2009. Decatur County’s median household income is \$34,185, lower than state comparison norms and other Critical Access Hospital (CAH) counties. Similarly, Decatur also has a higher percentage of children living the below the poverty level (26%) and persons below the poverty level, 2007-2011 (19%).
- TAB 2: Decatur County has an unemployment rate of 6.7%, slightly higher than the state norm and other CAH counties. The percentage change of private non-farm employment has decreased from 2000-2010 (-17.7%).
- TAB 3: In Decatur County 38% of students are eligible for free or reduced lunch. The county maintains a 93% high school graduation rate.
- TAB 4: Decatur County has a high percentage of births with low birth weight (9.6%). The percentage of births where prenatal care began in the first trimester is on par the state and other CAH norms (78.8%).
- TAB 5: Total hospital inpatient discharges in Decatur County have remained steady over past 3 years as have the total hospital inpatient discharges for Decatur County Hospital specifically.
- TAB 6: The dollars spent on mental illness have increased from \$4,991.48 to \$17,925.03 from 2010-2012.
- TAB 7: Adult obesity is on par with the state average (29%) as are the percentages of physical inactivity (27%) and adult smoking (20%).
- TAB 8: Decatur County has a rate of uninsured higher than the state norm (13.2%).

- TAB 9: Cancer, heart disease and Chronic Lower Respiratory disease are the major causes of mortality for Decatur County.
- TAB 10: The percentage of adolescent immunization (9%) is significantly lower than state norms. Diabetic (86%) and mammography (72%) screenings are on par with norms.

II. Methodology

[VVV Research & Development INC]

II. Methodology

a. CHNA Scope and Purpose

The new federal Patient Protection and Affordable Care Act requires that each registered 501(c)3 hospital conduct a Community Health Needs Assessment (CHNA) at least once every three years and adopt a strategy to meet community health needs. Any hospital who has filed a 990 is required to conduct a CHNA. IRS Notice 2011-52 was released in late fall of 2011 to give notice and request comments.

JOB #1: Meet/Report IRS 990 Required Documentation

1. a description of the community served by the facility and how the community was determined;
2. a description of the process and methods used to conduct the CHNA;
3. the identity of any and all organizations with which the organization collaborated and third parties that it engaged to assist with the CHNA;
4. a description of how the organization considered the input of persons representing the community (*e.g., through meetings, focus groups, interviews, etc.*), who those persons are, and their qualifications;
5. a prioritized description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and
6. a description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

Section 501(r) provides that a CHNA must take into account input from persons who represent the broad interests of the community served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: Government agencies with current information relevant to the health needs of the community and representatives or members in the community that are medically underserved, low-income, minority populations, and populations with chronic disease needs. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility's defined community (e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc.).

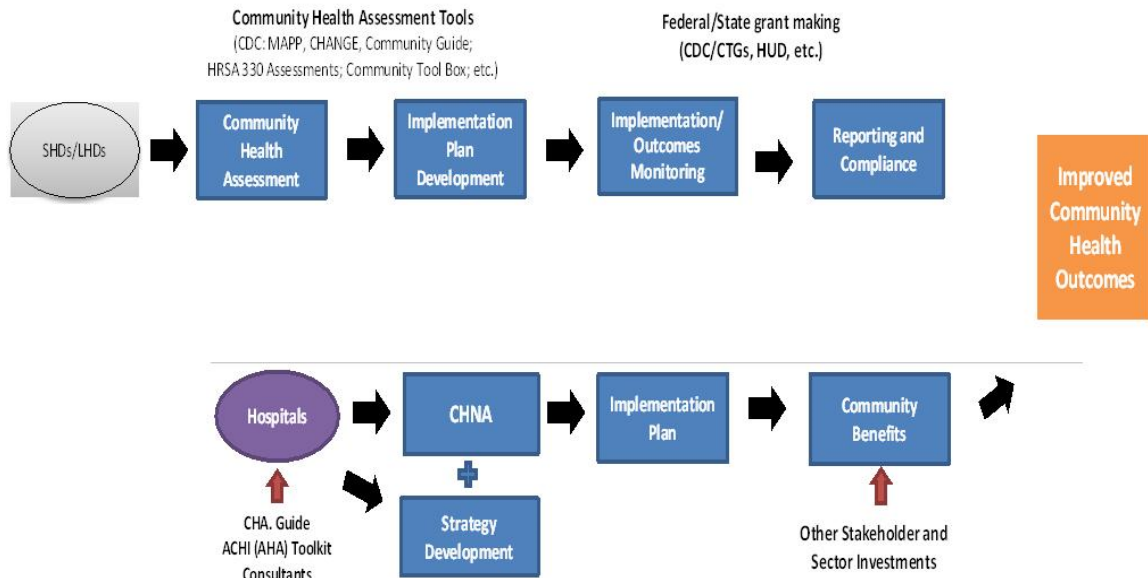
JOB #2: Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be "conducted" in the taxable year that the written report of the CHNA findings is made widely available to the public. The Notice also indicates that the IRS intends to pattern its rules for **making a CHNA "widely available to the public"** after the rules currently in effect for Form 990. Accordingly, an organization would make a **facility's written report** widely available by posting the final report on its website either in the form of (1) the report itself, in a readily accessible format, or (2) a link to another organization's website, along with instructions for accessing the report on that website. *The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.*

JOB #3: Adopt an Implementation Strategy by Hospital

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. The Notice defines an “implementation strategy” as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need, or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it. A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

Great emphasis has been given to work hand-in-hand with leaders from both hospitals and the local county health department. A common approach has been adopted to create the CHNA, leading to aligned implementation plans and community reporting.



IRS Notice 2011-52 Overview

Applicability of CHNA Requirements to “Hospital Organizations”

The CHNA requirements apply to “**hospital organizations**,” which are defined in Section 501(r) to include (1) organizations that operate one or more state-licensed hospital facilities, and (2) any other organization that the Treasury Secretary determines is providing hospital care as its principal function or basis for exemption.

Under Section 501(r), a hospital organization is required to conduct a CHNA for each of its hospital facilities once every three taxable years. *The CHNA must take into account input from persons representing the community served by the hospital facility and must be made widely available to the public.* **The CHNA requirements are effective for taxable years beginning after March 23, 2012.** As a result, a hospital organization with a June 30 fiscal year end must conduct an initial CHNA for each of its hospital facilities by June 30, 2013, either during the fiscal year ending June 30, 2013 or during either of the two previous fiscal years.

Determining the Community Served

A CHNA must identify and assess the health needs of the **community served** by the hospital facility. Although the Notice suggests that geographic location should be the primary basis for defining the community served, it provides that the organization may also take into account the target populations served by the facility (e.g., children, women, or the aged) and/or the facility’s principal functions (e.g., specialty area or targeted disease). *A hospital organization, however, will not be permitted to define the community served in a way that would effectively circumvent the CHNA requirements (e.g., by excluding medically underserved populations, low-income persons, minority groups, or those with chronic disease needs).*

Persons Representing the Community Served

Section 501(r) provides that a CHNA must take into account input from **persons who represent the broad interests of the community** served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: (1) government agencies with current information relevant to the health needs of the community and (2) representatives or members of medically underserved, low-income, and minority populations, and populations with chronic disease needs, in the community. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility’s defined community (e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc.).

Required Documentation The Notice provides that a hospital organization will be required to separately document the CHNA for each of its hospital facilities in a **written report** that includes the following information: 1) a description of the community served by the facility and how the community was determined; 2) a description of the process and methods used to conduct the CHNA; 3) the identity of any and all organizations with which the organization collaborated and third parties that it engaged to assist with the CHNA; 4) a description of how the organization considered the input of persons representing the community (e.g., through meetings, focus groups, interviews, etc.), who those persons are, and their qualifications; 5) a prioritized description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and 6) a description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be “**conducted**” in the taxable year that the written report of the CHNA findings is made **widely available to the public**. The Notice also indicates that the IRS intends to pattern its rules for making a CHNA “widely available to the public” after the rules currently in effect for Forms 990. *Accordingly, an organization would make a facility’s written report widely available by posting on its website either (1) the report itself, in a readily accessible format, or (2) a link to another organization’s website, along with instructions for accessing the report on that website. The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.*

How and When to Adopt an Implementation Strategy

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. **The Notice defines an “implementation strategy” as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need, or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it.** A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

Under the Notice, an implementation strategy is considered to be “**adopted**” on the date the strategy is approved by the organization’s board of directors or by a committee of the board or other parties legally authorized by the board to act on its behalf. Further, the formal adoption of the implementation strategy must occur by the end of the same taxable year in which the written report of the CHNA findings was made available to the public. For hospital organizations with a June 30 fiscal year end, that effectively means that the organization must complete and appropriately post its first CHNA no later than its fiscal year ending June 30, 2013, and formally adopt a related implementation strategy by the end of the same tax year. *This final requirement may come as a surprise to many charitable hospitals, considering Section 501(r) contains no deadline for the adoption of the implementation strategy.*

II Methodology

b) Collaborating CHNA parties

Working together to improve community health takes collaboration. Listed below is an in depth profile of the local hospitals & Health Department CHNA partners:

Decatur County Hospital
1405 NW Church
Leon, Iowa 50144
641-446-4871
Lynn Milnes, CEO/Administrator

Decatur County Hospital offers a complete line of services for Inpatient Acute, Skilled, Respite, Hospice and outpatient services including: Digital Mammography, Ultrasound, Mobile MRI, Iowa Mobile Diagnostics, Mobile Nuclear Medicine, and Infusion Therapy. A wide variety of specialty clinics are also available: Cardiology/Device Clinic, Orthopedics, Pulmonology, Oncology, Foot and Ankle, Urology, Dermatology, Ears, Nose, and Throat and Audiology. Emergency Medical Services are available 24 hours a day, 7 days a week. DCH provides the only emergency transport service available within Decatur County. Decatur County Hospital also serves as a clinical instruction site for the LPN and RN programs of Southwestern Community College, and other educational opportunities.

Services

Dietary

Surgery

- General surgery, as well as Ears, Nose, and Throat, Podiatry, and limited Orthopedic procedures.

Cardiac Rehabilitation

Emergency Medical Services

Inpatient Care

Infusion Therapy

- Specialization in chemotherapy and PICC line care

Laboratory

Pharmacy

Radiology

- Diagnostic imaging, CT Scanning, Digital Mammography, MRI, Nuclear Medicine

Rehabilitation Services

- Speech, Occupational, and Physical Therapy

Respiratory Therapy

Skilled Rehabilitation

Specialty Clinic Services

Decatur County Public Health
207 NE Idaho Leon, Iowa 50144
641-446-6518
tacheson@decaturph.com
Hours: Monday – Friday 8:00am to 4:30 pm

The Decatur County Public Health Nursing Agency provides a comprehensive home health care program to provide and coordinate home health care for residents of Decatur County. The agency also offers Childhood immunizations, Parents as Teachers early learning experiences, and tobacco prevention education. Decatur County's mental health services are coordinated through the agency along with environmental health programs.

Services

Home Health Care

- Skilled assessment and instruction (such as blood pressure, pulse rate, response to new medications, and health conditions)
- Wound care and dressings
- Catheter or ostomy care and instructions
- Blood draws and injections
- IV therapy
- Diabetic instruction

Immunizations

Tobacco Prevention

Environmental health

- On-site wastewater treatment and disposal system permitting and inspection
- Private well drilling permits and plugging assistance
- Radon awareness/indoor air quality
- Public health nuisance complaints

II. Methodology

b. Collaborating CHNA Parties (continue)

Consultant Qualifications



VVW Research & Development, Inc.

Company Profile: 601 N. Mahaffie, Olathe, KS 66061-6431 (913) 302-7264

VINCE VANDEHAAR, MBA

Principal Consultant & Owner of VVW Research & Development, Inc.

VVW Research & Development, Inc. was incorporated on May 28th 2009. With over 30 years of business & faculty experience in helping both providers, payors, and financial service firms obtain their strategic planning, research & development needs, Vince brings in-depth health industry knowledge, research aptitude, planning expertise, and energy. VVW Research & Development services are organized, formal processes of listening to the voice of the customer. Vince started his consulting business in May of 2009, after working for Saint Luke's Health System (SLHS) of Kansas City for 16 years. Note: Saint Luke's Hospital of Kansas City, SLHS's largest hospital, won the Malcolm Baldrige National Quality Award in March of 2003. The Baldrige examiners cited Vince's department as "Best Practice" in the areas of customer satisfaction, market research, and evaluation efforts (Kansas City Star 3/10/04).

VVW Research & Development, INC. (Olathe, KS) consultants have in-depth experience helping hospitals work with local Health Departments to engage community residents & leaders to identify gaps between existing health community resources & needs, and construct detailed strategies to meet those needs - while still adhering to the hospital's mission and budget. Over the past 20 years, Vandehaar has completed 8 comprehensive Baldrige aligned Community Health Needs Assessments for Saint Luke's of Kansas City System facilities (3 campuses) and was contracted to conduct 2 additional independent Dept. of Health consulting projects (prior to IRS 990 regs). Currently in 2012, VVW has 12 CHNA IRS aligned assessments underway for Kansas hospitals & Health Departments.

Vince Vandehaar, MBA is actively involved in the Kansas City community. He is a member the Greater Kansas City Employee Benefits Association, the Society for Healthcare Strategy & Market Development, the American Marketing Association Kansas City Chapter, and Co-Chair of the AMA Kansas City Healthcare Special Interest Group. In addition to these roles, from 2000 to 2008, Vince served as the state chairman for MHA's Data Committee and was a member of KHA's Data Taskforce.

Collaborating Consultants

Amanda Burian - VVW Research & Development, Inc.
Lead Project Coordinator & Planning Analyst

II. Methodology

c. CHNA & Town Hall Research Process

Decatur County Hospital's (DCH) Community Health Needs Assessment process began in January of 2013. At that time an inquiry was made by Jim Fitzpatrick, SVP Mercy Health Network (MHN) to VVV Research & Development to explore the possibility of conducting a comprehensive IRS aligned CHNA for hospital members. On February 15th of 2013 a meeting was held to learn more about CHNA's collaborative options. On that date VVV Research & Development INC reviewed: VVV Research & Development CHNA experience, CHNA requirements (in-depth regulations), CHNA development steps / options to meet IRS requirements, and next steps after option approval. After this review, Decatur County Hospital elected to move forward with VVV CHNA support.

VVV CHNA Deliverables:

- Confirm Decatur County Hospital service area meets 75/25 % patient origin rule,
- Uncover/Document Basic Secondary Research – Health of County. Organized by 10 TABS,
- Conduct Town Hall Meeting to discuss secondary data and uncover/prioritize county health needs,
- Report CHNA primary Research (with valid N), and
- Prepare and publish IRS-aligned CHNA report to meet requirements.

(NOTE: To ensure proper (75/25%) Town Hall representation, the following patient origin 3 years summary was generated. For DCH, all of Decatur County resident's views need to be collected and reported to determine primary service area (PSA) health needs.)

Source DCH Internal Records				
#	Total Patients	YR2010	YR2011	YR2012
1	Total Inpatient discharges (All zips)	277	253	261
	Total Inpatient discharges (Decatur Co residents only)	236	214	220
	% from PSA	85.2%	84.6%	84.3%
2	Total Emergency Visits (All zips)	2,423	2,538	2,550
	Total Emergency Visits (Decatur Co residents only)	1,964	2,076	2,014
	% from PSA	81.1%	81.8%	79.0%

The following chart (calendar of events) outlines approved Davis County Hospital's CHNA roles & responsibilities:

Decatur County Hospital IA - CHNA Work Plan			
Project Timeline & Roles 2013 as of 2/20/13			
Step	Date (Start-Finish)	LEAD	Task
1	Dec 2012	VV	Sent CHNA Overview material outlining options to CEO.
2	2/18/2013	DCH	Approval VV CHNA project quote basic plus - Email message from Lynn Milnes CEO
3	2/20/2013	VV DCH	Conducted overview CHNA conference call - Tara Spidle CFO
4	2/20/2013	VV	Request FFY 11, 10 and 09 IHA patient origin data reports to document service area. (Meet 75% rule)
5	2/20/2013	VV	Send out REQCoimmInvite Excel file plus SchoolHealthdata Excel file for DCH input.
6	2/22/2013	VV DCH	CHNA Overview Conf call with DCH/Public Health leaders.
7	2/22/2013	VV / DCH	Prepare/send out PR story to local media announcing upcoming CHNA work (general story)
8	3/25/2013	DCH	Prepare/send out Community TOWN HALL invite letter & PR notice. (Use Hosp PSA Required data file . Use VV letter sample format - hospital/DOH.)
9	4/4/2013	VV / DCH	Conduct CHNA conference call. Review Town Hall Secondary Research data (10 TABS) + Town Hall ppt.
10	THUR 4/11 Breakfast	VV	Conduct CHNA Town Hall. Time 7:30-9 am (Leon Golf club house) Review Basic CHNA info and uncover community needs.
11	on or before 5/15/2013	VV	Complete Analysis - Release Draft 1- seek feedback from County Leaders (Hospital & Health Dept.)
12	on or before 5/31/2013	VV	Produce & Release final CHNA report. Post CHNA online.
13	after 6/1 - Due 6/30/13	DCH	Hold Board Meetings discuss CHNA needs, create & adopt an implementation plan/strategy and communicate CHNA plan to community.

To meet IRS aligned CHNA requirements, a four-phase methodology was reviewed and approved as follows:

Phase I – Discovery: Conduct a 30 minute conference call with CHNA hospital client and County Health Department. Review / confirm CHNA calendar of events, explain / coach client to complete required participants database and schedule / organize all Phase II activities.

Phase II – QUALIFY Community Need:

A) Conduct secondary research to uncover the following historical community health status for PSA. Use Iowa Hospital Association (IHA), Vital Statistics, Robert Woods Johnson County Health Rankings, etc. to document “current state” of county health organized as follows:

TAB 1. Demographic Profile
TAB 2. Economic/Business Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospitalization / Providers Profile
TAB 6. Behavioral Health Profile
TAB 7. Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

B) Gather historical primary research to uncover public health needs, practices and perceptions for hospital primary service areas.

Phase III – QUANTIFY Community Need: Conduct 90 minute Town Hall meeting with required county PSA residents. (Note: At each Town Hall meeting, CHNA secondary data will be reviewed, facilitated group discussion will occur, and a group ranking activity to determine the most important community health needs will be administered.

Phase IV - Complete data analysis & create comprehensive Community Health Needs Assessment. Post CHNA report findings to meet IRS CHNA criteria.

After consideration of CHNA stakeholders (sponsoring hospital & local health department) the CHNA Basic option was selected with the following project schedule:

Phase I: Discovery.....	December 2012
Phase II: Secondary Research	Jan-Feb 2013
Phase III: Town Hall Meeting.....	April 11, 2013
Phase IV: Prepare / Release CHNA report.....	May-June 2013

Detail CHNA development steps include:

	Suggested Development Steps
Step # 1 Commitment	<i>Determine interest level of area healthcare leaders (Hospital, Health Dept, Schools, Churches, Physicians etc), hold community meeting.</i>
Step # 2 Planning	<i>Prepare brief Community Health Needs Assessment Plan - list goals, objectives, purpose, outcome, roles, community involvement, etc. Hold Community Kick-off meeting.</i>
Step # 3 Secondary Research	<i>Collect & Report Community Health Published Facts. Gather data health practice data from published secondary research sources i.e. census, county health records, behavioral risk factors surveillance, etc.</i>
Step # 4a Primary Research	<i>Conduct Community Roundtable (Qualitative Research). Review Secondary Research (Step3) with Community Stakeholders. Gather current opinions and identify health needs.</i>
Step # 4b Primary Research <Optional>	<i>Collect Community Opinions. (Quantitative Research). Gather current opinions (Valid sample size) regarding community health needs and healthcare practices. If appropriate, conduct Physician Manpower Assessment to determine FTE Physician need by specialty.</i>
Steps # 5 Reporting	<i>Prepare/Present comprehensive Community Health Needs Assessment report (to community leaders) with Recommended Actions to improve health. < Note: Formal report will follow IRS Notice 2011-52 regs ></i>
	VVV Research & Development INC 913 302-7264

Overview of Town Hall Community Priority Setting Process

Each community has a wealth of expertise to be tapped for CHNA development. For this reason, a town hall is the perfect forum to gather community insight and provide an atmosphere to objectively consensus build and prioritize county health issues.

All Town Hall priority-setting and scoring processes involve the input of key stakeholders in attendance. Individuals and organizations attending the Town Halls were critically important to the success of the CHNA. The following list outlines partners invited to Town Hall: local hospital, public health community, mental health community, free clinics, community-based clinics, service providers, local residents, community leaders, opinion leaders, school leaders, business leaders, local government, faith-based organizations and persons (or organizations serving them), people with chronic conditions, uninsured community members, low income residents, and minority groups.

Decatur County's Town Hall was held over breakfast on Thursday April 11th, 2013, at the Leon Golf club house. Vince Vandelaar and Lyndsey Ogle facilitated this 1 ½ hour session with forty one community attendees. (Note: a detail roster of Town Hall attendees is listed in Section V a.)

The following Town Hall agenda was conducted:

1. Welcome & Introductions
2. Review purpose for the CHNA Town Hall and roles in the process
3. Present / Review of historical County Health Indicators (10 TABS)
4. Facilitate Town Hall participant discussion of data (probe health strengths / concerns). Reflect on size and seriousness of any health concerns cited and discuss current community health strengths.
5. Engage Town Hall participants to rank health needs (using 4 dots to cast votes on priority issues). Tally & rank top community health concerns cited.
6. Close meeting by reflecting on the health needs / community voting results. Inform participants on "next steps".

At the end of each Town Hall session, VVW encouraged all community members to continue to contribute ideas to both hospital and health department leaders via email or personal conversations.

< NOTE: To review detail Town Hall discussion content, please turn to Section V for detail notes of session and activity card content reporting of open end comments.>

Community Health Needs Assessment Decatur County IA Town Hall Meeting on behalf of Decatur County Hospital (Leon IA)

Vince Vandelaar, MBA
VVV Marketing & Development INC.
Owner and Adjunct Marketing Professor

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913-302-7264

Community Health Needs Assessment (CHNA) Town Hall Discussion Agenda

- I. Opening / Introductions (10 mins)
- II. Review CHNA Purpose & Process (10 mins)
- III. Review Current County "Health Status" – -
Secondary Data by 10 TAB Categories (35 mins)
- IV. Collect Community Health Perspectives Hold
Community Voting Activity: Determine MOST Important Health
areas. (30 mins)
- V. Close / Next Steps (5 mins)

VVV Marketing & Development INC.

I. Introduction:

Background and Experience



Vince Vandelaar MBA, VVV Marketing & Development INC
Principal Consultant, Olathe, KS 913 302-7264

- > – Professional Consulting Services: Strategic Planning, Marketing Management, Business Research & Development Focus : Strategy , Research , Deployment
 - > – Over 25 years of experience with Tillinghast, BCBSKC, Saint Luke's
- Adjunct Professor - Marketing / Health Admin.- 24 years +**
- > Webster University (1988 – present)
 - > Rockhurst University (2010 – present)

□ **Lyndsey Ogle MA, Planning Analyst**

Town Hall Participation (You)

- ALL attendees welcome to share.
 - Parking Lot
- There are no right or wrong answers.
- Only one person speaks at a time.
- Please give truthful responses.
- Have a little fun along the way.

I. Introductions: a conversation with the community. Community members and organizations invited to CHNA Town Hall

Consumers: Uninsured/underinsured people, Members of at-risk populations, Parents, caregivers and other consumers of health care in the community, and Consumer advocates.

Community leaders and groups: The hospital organization's board members, Local clergy and congregational leaders, Presidents or chairs of civic or service clubs - Chamber of Commerce, veterans' organizations, Lions, Rotary, etc., Representatives from businesses - owners/CEO's of large businesses (local or large corporations with local branches), Business people & merchants (e.g., who sell tobacco, alcohol, or other drugs), Representatives from organized labor, Political, appointed and elected officials, Foundations, United Way organizations. And other "community leaders."

Public and other organizations: Public health officials, Directors or staff of health and human service organizations, City/Community planners and development officials, Individuals with business and economic development experience, Welfare and social service agency staff, Housing advocates - administrators of housing programs: homeless shelters, low-income-family housing and senior housing, Education officials and staff - school superintendents, principals and teachers, Public safety officials, Staff from state and area agencies on aging, Law enforcement agencies - Chiefs of police, Local colleges and universities, Coalitions working on health or other issues.

Other providers: Physicians, Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services, Leaders from Catholic Charities and other faith-based service providers, Mental health providers, Oral health providers, Health insurers, Parish and congregational nursing programs, Other health professionals

II. Purpose: Why conduct Community Health Needs Assessment?

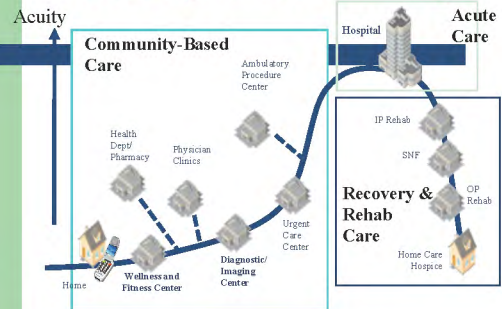
- To determine health-related trends and issues of the community.
- To understand/evaluate health delivery programs in place.
- To develop strategies to address unmet health needs.
- To meet Federal requirements – both local hospital & Health Department.

II. Review CHNA Definition

A Community Health Needs Assessment (CHNA) is a systematic collection, assembly, analysis, and dissemination of information about the health of the community. **<NOTE: Some the data has already been collected (published) by local, state and federal public health organizations. Some data will be collected today.>**

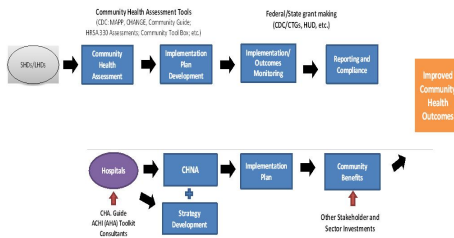
CHNA's role is to identify factors that affect the health of a population and determine the availability of resources to adequately address those factors.

Future System of CARE Sg2



IP = inpatient, SNF = skilled nursing facility, OP = outpatient

Community Health Needs Assessment Joint Process: Hospital & Health Department



II. Required Written Report IRS 990 Documentation

- a **description of the community served**
- a **description of the CHNA process**
- the **identity of any and all organizations & third parties** which collaborated to assist with the CHNA;
- a **description of how** the organization considered the input of persons representing the community (*e.g., through meetings, focus groups, interviews, etc.*), who those persons are, and their qualifications;
- a **prioritized description of all of the community needs identified by the CHNA and**
- a **description of the existing health care facilities and other resources within the community** available to meet the needs identified through the CHNA.

III. Review Current County "Health Status" – Secondary Data by 10 TAB Categories plus IA State Rankings

TAB 1. Demographic Profile
TAB 2. Economic/Business Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospitalization / Providers Profile
TAB 6. Behavioral Health Profile
TAB 7. Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

Source Files for Iowa CHNA secondary data:

- Robert Woods Johnson County Health Rankings and Roadmaps (www.countyhealthrankings.org/iowa)
- U.S. Census Quick Facts (<http://quickfacts.census.gov>)
- Iowa County Health Snapshots (<http://www.idph.state.ia.us/DWH/Snapshots.aspx>)
- 2011 Iowa Health Fact Book (PDF)
- Kids Count Data (<http://datacenter.kidscount.org/data/bystate/StateLanding.aspx?state=IA>)
- Diabetes and Obesity Data (<http://diabetes-obesity.findthedata.org/>)
- Vital Statistics: Maternal and Infant Health Profile, 2010 (PDF)
- Iowa DOH Immunization Annual Report 2011 (PDF)
- Division of Mental Health and Disability Services (MHDS) County Service Data (http://www.dhs.state.ia.us/mhdd/statistical_info/county_dataservices.html)

IV. Collect Community Health Perspectives
Ask your opinion. Your thoughts?

- 1) **Today: What are the *strengths* of our community that contribute to health**
- 2) **Today: Are there healthcare services in your community / neighborhood that you feel *need to be improved and / or changed*?**
- 3) **Tomorrow: What is occurring or might occur *that affects the health of our community*?**

V. Have we forgotten anything ?

- | | |
|--------------------------------|------------------------------------|
| a. Aging Services | m. Hospice |
| b. Chronic Pain Management | n. Hospital Services |
| c. Dental Care/Oral Health | o. Maternal, Infant & Child Health |
| d. Developmental Disabilities | p. Nutrition |
| e. Domestic Violence, | q. Pharmacy Services |
| f. Early Detection & Screening | r. Primary Health Care |
| g. Environmental Health | t. Public Health |
| h. Exercise | u. School Health |
| i. Family Planning | v. Social Services |
| l. Food Safety | w. Specialty Medical Care Clinics |
| j. Health Care Coverage | x. Substance Abuse |
| k. Health Education | y. Transportation |
| l. Home Health | z. Other _____ |

Community Health Needs Assessment

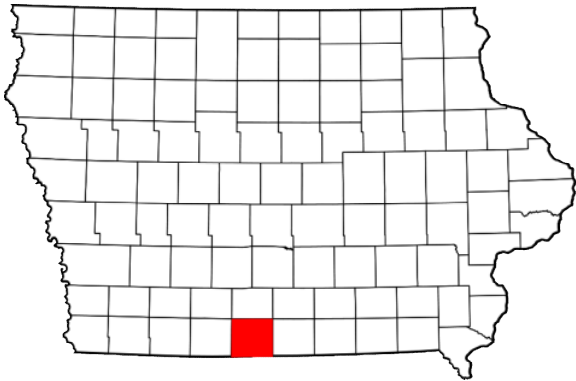
**Questions
Next Steps ?**

VVV Research & Development INC.
vmlvandehaar@aol.com
913 302-7264

II. Methodology

d. Community Profile (a description of community served)

Decatur County IA Community Profile



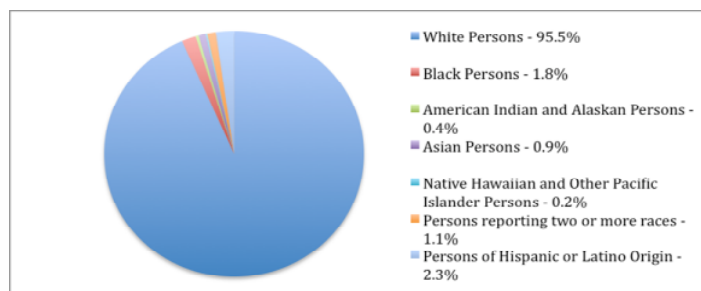
Demographics

The population of Decatur County was estimated to be 8,284 in 2011, and had a -2.0% change in population from 2010–2011.¹

The county covers 531.88 square miles and this area is home to Nine Eagles State Park, Decatur Wildlife Area and Leon Rodeo² The county has an overall population density of 15.9 persons per square mile, compared to the State average of 54.5 persons per square mile.³

The county is located in south central Iowa and its economy is based on Educational, health and social services (30.2%), Manufacturing (12.8%).⁴ The county was founded in 1846 and the county seat is Leon.⁵

Population by Race 2011⁶



¹ http://quickfacts.census.gov/qfd/maps/iowa_map.html

² <http://www.southerniowatourism.com/index.php/decatur-county.html>

³ http://quickfacts.census.gov/qfd/maps/iowa_map.html

⁴ http://www.city-data.com/county/Decatur_County-IA.html

⁵ https://en.wikipedia.org/wiki/XXXX_County,_Iowa

⁶ http://quickfacts.census.gov/qfd/maps/iowa_map.html

The major highway transportation in Decatur County is Interstate 35, U.S. Highway 69, Iowa Highway 2.⁷

Homeownership in Decatur County is 68.4% and is lower than the state average of 73.0%. Median price of an owner-occupied home in Decatur County is \$69,800 as compared to than the state median value of \$121,300.⁸

Employment in Decatur County resulted in a median household income of \$34,185 from 2007-2011 versus the state median household income of \$50,451.⁹

As of December 2012 the average unemployment rate in Decatur County was 5.10%.¹⁰

⁷ https://en.wikipedia.org/wiki/XXXX_County,_Iowa
⁸ http://quickfacts.census.gov/qfd/maps/iowa_map.html
⁹ http://quickfacts.census.gov/qfd/maps/iowa_map.html
¹⁰ www.google.com/publicdata

Detail Demographic Profile

ZIP	NAME	County	Population:			Households		Avg Size	Per Capita Income 11
			Yr2011	Yr2016	Chg	Yr2011	Yr2016		
50065	DAVIS CITY	DECATUR	762	782	2.6%	300	309	2.5	\$14,505
50067	DECATUR	DECATUR	372	334	-10.2%	147	131	2.5	\$15,722
50103	GARDEN GROVE	DECATUR	571	559	-2.1%	220	215	2.6	\$19,142
50108	GRAND RIVER	DECATUR	476	424	-10.9%	210	186	2.3	\$17,961
50140	LAMONI	DECATUR	2884	2984	3.5%	954	990	2.4	\$17,123
50144	LEON	DECATUR	2575	2559	-0.6%	1052	1038	2.4	\$14,926
50262	VAN WERT	DECATUR	417	363	-12.9%	182	158	2.3	\$21,774
50264	WELDON	DECATUR	396	359	-9.3%	164	151	2.4	\$22,433
Totals			8,453	8,364	-1.1%	3,229	3,178	2.4	\$17,948

ZIP	NAME	County	Population 2011:			GenX	MALES	FEMALES	Females Age20_35
			Yr2011	POP65p	%				
50065	DAVIS CITY	DECATUR	762	152	19.9%	132	385	377	53
50067	DECATUR	DECATUR	372	72	19.4%	76	189	183	34
50103	GARDEN GROVE	DECATUR	571	99	17.3%	113	304	267	51
50108	GRAND RIVER	DECATUR	476	92	19.3%	99	241	235	45
50140	LAMONI	DECATUR	2884	469	16.3%	1244	1441	1443	466
50144	LEON	DECATUR	2575	517	20.1%	572	1251	1324	272
50262	VAN WERT	DECATUR	417	78	18.7%	89	216	201	39
50264	WELDON	DECATUR	396	70	17.7%	82	207	189	35
Totals			8,453	1,549	18.3%	2,407	4,234	4,219	995

ZIP	NAME	County	Population 2011:				Average HH Inc11	Hholds Yr2011	HH \$50K+ Income
			White	Black	Hisp	Amer IN			
50065	DAVIS CITY	DECATUR	734	2	11	4	\$36,574	300	66
50067	DECATUR	DECATUR	364	0	3	1	\$39,787	147	30
50103	GARDEN GROVE	DECATUR	566	1	1	0	\$49,681	220	77
50108	GRAND RIVER	DECATUR	467	0	4	1	\$40,711	210	49
50140	LAMONI	DECATUR	2612	133	109	16	\$46,595	954	325
50144	LEON	DECATUR	2522	14	46	7	\$36,044	1052	254
50262	VAN WERT	DECATUR	408	1	4	3	\$49,889	182	70
50264	WELDON	DECATUR	388	1	4	2	\$54,167	164	69
Totals			8,061	152	182	34	\$44,181	3,229	940

Source: ERSA Demographics

III. Community Health Status

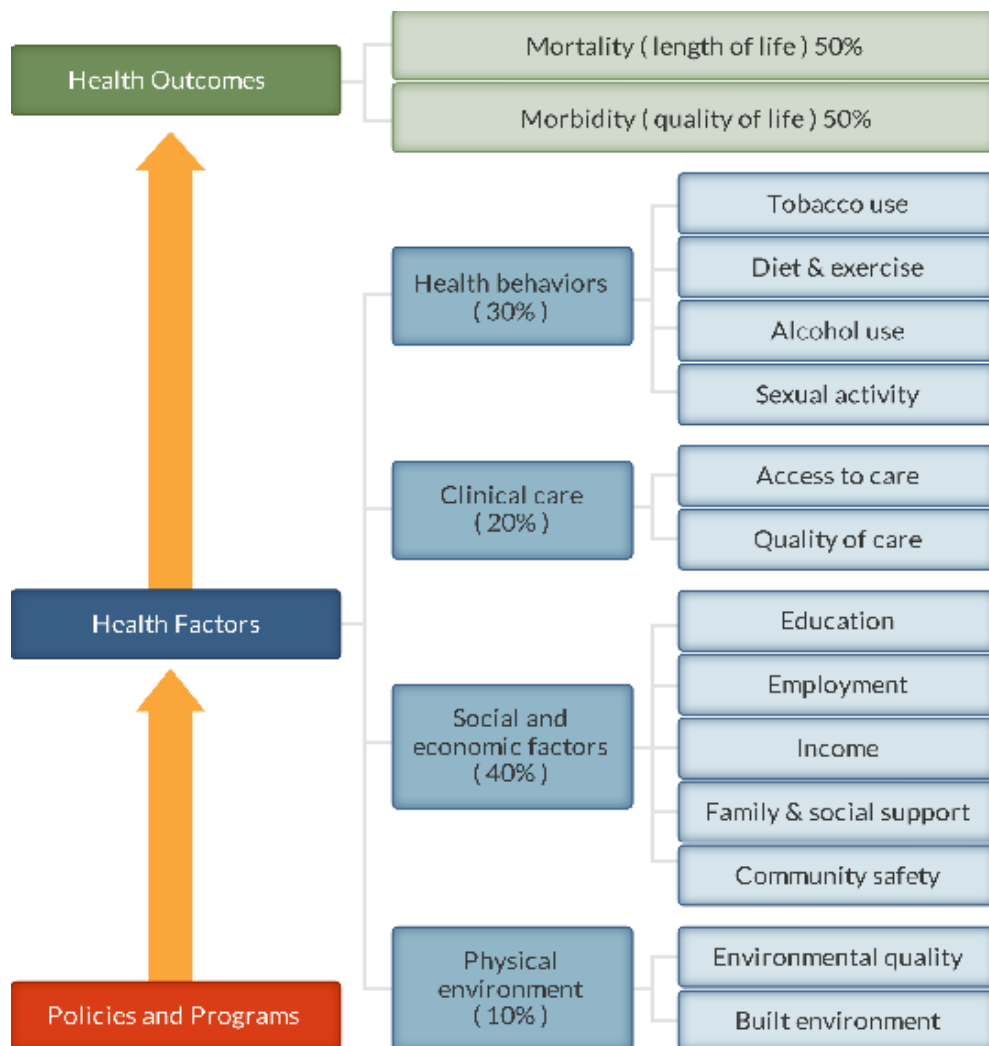
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III. Community Health Status

a. Historical Health Statistics

Health Status Profile

This section of the CHNA reviews published quantitative community health indicators and results of our recent CHNA Town Hall. To produce this profile, VVW Research & Development staff analyzed data from multiple sources. This analysis focuses on a set of published health indicators organized by ten areas of focus (10 TABS), results from the 2012 County Health Rankings and conversations from Town Hall primary research. (Note: The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to release annual *County Health Rankings*. As seen below in model, these rankings are based on a number of health factors.)



County Health Rankings model ©2012 UWPHI

National Review: State Health Rankings

#	IA Rank of 99 counties	Definitions	Decatur Co	Trend	CAH 13
1	Physical Environment	Environmental quality	68		58
2	Health Factors		82		49
	Clinical Care	Access to care / Quality of Care	96		63
	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	82		44
3	Health Outcomes		84		47
	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	35		49
	Morbidity	Quality of life	90		47
	Mortality	Length of life	70		43
http://www.countyhealthrankings.org					
Note: CAH 13 represents norm scores from 13 Rural/Critical Access hospitals located in KS / IA / MO.					

Secondary Research

When considering the state of community health, it's important to review published health data by topic area. Below is a summary of key TABS of information collected:

Tab 1 Demographic Profile.

#	Population History Vital Statistics	YR 2005	YR 2006	YR 2007	YR 2008	YR 2009	% Chg 2000-09
	Decatur County IA	8,460	8,372	8,342	8,201	8,231	-5.3%
Source: ISU Regional Economics & Community Analysis Program (2006-							
#	People QuickFacts	Decatur Co	Trend	Iowa	CAH 13		
2	Population, 2010	8,457		3,046,350	6,710		
3	Persons under 5 years, percent, 2011	6.1%		6.5%	5.90%		
4	Persons under 18 years, percent, 2011	22.5%		23.7%	22.70%		
5	Persons 65 years and over, percent, 2011	18.4%		14.9%	19.8%		
6	Persons per square mile, 2010	15.9		54.5	10.3		
7	Living in same house 1 year & over, percent, 2007-2011	80.3%		84.3%	84.7%		
8	Foreign born persons, percent, 2007-2011	1.6%		4.2%	1.5%		
9	Female persons, percent, 2011	50.1%		50.4%	49.2%		

Tab 1 Demographic Profile. (Con't)

#	People QuickFacts	Decatur Co	Trend	Iowa	CAH 13
1	Households 2011	3,224		1219137	2,587
2	Persons per household, 2007-2011	2.38		2.4	2.2
3	Per capita money income in the past 12 months (2011 dollars)	\$17,477		\$26,110	\$20,959
4	Median household income, 2007-2011	\$34,185		\$50,451	\$41,516
countyhealthrankings.org					
#	People QuickFacts	Decatur Co	Trend	Iowa	CAH 13
1	Veterans, 2006-2010	608		239,229	626
2	Mean travel time to work (minutes), workers age 16+, 2006-2010	19.7		18.6	15.9
3	Housing units, 2011	3,822		1,340,529	3076
4	Homeownership rate, 2007-2011	68.4%		73.0%	73.9%
5	Housing units in multi-unit structures, percent, 2007-2011	11.8%		18.5%	7.7%
6	Median value of owner-occupied housing units, 2007-2011	\$69,800		\$121,300	\$70,955
countyhealthrankings.org					
#	People QuickFacts	Decatur Co	Trend	Iowa	CAH 13
1	Children in single-parent households	20%		27%	23%
2	Children in poverty	26%		16%	18%
3	Persons below poverty level,% 2007-2011	19.0%		11.9%	10.4%

Tab 2 Economic Profiles.

#	Business QuickFacts	Decatur Co	Trend	Iowa	CAH 13
1	Private nonfarm establishments, 2010	143		80,801	230
2	Private nonfarm employment, 2010	1,889		1,253,095	2042
3	Private nonfarm employment, percent change, 2000-2010	-17.7		-0.9	5.7%
4	Nonemployer establishments, 2010	669		201,448	533
5	Total number of firms, 2007	869		259,931	852
countyhealthrankings.org					
#	Business QuickFacts	Decatur Co	Trend	Iowa	CAH 13
1	Unemployment	5.1%		5.0%	4.9%
2	Fast food restaurants	44%		44%	41.3%
People QuickFacts					
#	Business QuickFacts	Decatur Co	Trend	Iowa	CAH 13
1	Per capita money income in the past 12 months (2011 dollars), 2007-2011	\$17,477		\$26,110	\$20,959
2	Median household income, 2007-2011	\$34,185		\$50,451	\$41,516
3	Median value of owner-occupied housing units, 2007-2011	\$69,800		\$121,300	\$70,955

Tab 3 Public Schools Health Delivery Profile. Currently school districts are providing on site primary health screenings and basic care.

#	Indicators- Local Schools	Central Decatur	Lamoni Com		
1	Total # Public School Nurses	2	1		
2	School Wellness Plan in place (Active)	Yes	YES		
3	VISION: # Screened / Referred to Prof / Seen by Professional	292/18/13	223/15/5		
4	HEARING: # Screened / Referred to Prof / Seen by Professional	424/19/14	168/10/5		
5	ORAL HEALTH: # Screened / Referred to Prof / Seen by Professional	119/28/28	60/10/5		
6	SCOLIOSIS: # Screened / Referred to Prof / Seen by Professional	N/A	0		
7	# of Students served with no identified chronic health concerns	659	387		
8	School has a suicide prevention program	Yes	YES		
9	Compliance on required vaccinations (%)	100%	93%		
#	IA Health Categories		Trend	Iowa	CAH 13
1	Students Eligible for the Free Lunch Program (%)	38%		33%	27.7%
2	Bachelor's degree or higher, percent of persons age 25+, 2007-2011	16.8%		24.9%	18.6%
3	High School Graduation (%)	93%		89.0%	90.7%

TAB 4 Maternal and Infant Health Profile. Tracking maternal & infant care patterns are vital in understanding the foundation of family health.

#	Indicators	Decatur	Trend	Iowa	
1	Total Live Births, 2006	97		40,592	
2	Total Live Births, 2007	114		40,835	
3	Total Live Births, 2008	119		40,221	
4	Total Live Births, 2009	103		39,662	
5	Total Live Births, 2010	94		38,514	
	Births Occurring to Teens (Mothers Under 20)	9		3137	
	Number of Births Occuring to Unmarried Women	28		13,418	
	Low Weight Births (under 2,500 grams)	9		2,536	
#	Kid Counts Data (2011)	Decatur Co	Trend	Iowa	CAH
1	Births with Prenatal Care in First 3 Months	78.8%		84.8%	74.8%
2	Percentage of Mothers who Smoke Any Time During Pregnancy	NA		24.0%	18.7%
3	Percent of Births with Low Birth Weight (%)	9.6%		6.5%	8.0%
4	Percent of Births Occurring to Unmarried Women	29.8%		33.0%	30.1%
5	Children Receiving WIC (Percent) – 2011 *	28.70%		26.90%	NA

TAB 5 Hospitalization/Provider Profile Understanding provider access and disease patterns are fundamental in healthcare delivery. Listed below are several vital county statistics.

#	IA Hospital Assoc PO - IP	Decatur Co Hospital (Decatur Co only)			
		YR2009	Yr2010	Yr2011	Trend
1	Total Discharges	288	289	283	
2	Total IP Discharges-Age 0-17	14	12	12	
3	Total IP Discharges-Age 18-44	20	26	12	
4	Total IP Discharges-Age 45-64	60	51	65	
5	Total IP Discharges-Age 65-74	59	53	44	
6	Total IP Discharges-Age 75+	135	147	150	
Source: IHA, Dimensions					
#	IA Hospital Assoc PO - IP	Decatur County (Total)			
		YR2009	YR2010	YR2011	Trend
1	Total Discharges	954	922	933	
2	Total IP Discharges-Age 0-17	134	125	137	
3	Total IP Discharges-Age 18-44	178	152	130	
4	Total IP Discharges-Age 45-64	223	208	222	
5	Total IP Discharges-Age 65-74	171	156	129	
6	Total IP Discharges-Age 75+	248	281	315	
#	Decatur County Hospital (6/30)	YR2010	YR2011	YR2012	Trend
1	Total Inpatient discharges (All zips)	277	253	261	
2	Total Emergency Visits	2,423	2,538	2,550	
3	Total Outpatient Visits	11,910	12,406	12,803	
4	Total Clinic (Physician) visits	3,161	3,009	2,950	

TAB 6 Social & Rehab Services Profile. Behavioral health care provide another important indicator of community health status:

Social & Psychiatric Services - Clinical Data (LIMITED)				
Decatur County Data	2010	2011	2012	Trend
Mental Illness	\$4,991.48	\$13,150.49	\$17,925.03	
Chronic Mental Illness	\$156,306.27	\$159,545.71	\$134,185.68	
Mental Retardation	\$785,552.62	\$843,270.27	\$824,028.26	
Developmental Disability	\$1,193.31	\$15,480.81	\$16,058.22	
Total	\$948,043.68	\$1,031,447.28	\$992,197.19	

TAB 7 Health Risk Profiles. Knowing community health risk factors and disease patterns can aid in the understanding “next steps” to improve health. Being overweight/obese; smoking, drinking in excess, not exercising etc can lead to poor health.

	http://www.countyhealthrankings.org	Decatur Co	Trend	Iowa	CAH 13
1	Adult obesity	29%		29%	32%
2	Adult smoking	20%		19%	18%
3	Excessive drinking	NA		20%	12%
4	Inadequate social support	NA		16%	16%
5	Physical inactivity	27%		25%	28%
6	Poor mental health days	2.5		2.7	2.7
7	Poor physical health days	4.1		2.8	2.9
#	Indicators	Decatur Co	Trend	Iowa	CAH 13
1	Poor or Fair Health (%)	20%		12%	11%
7	Air Pollution Ozone Days	0		NA	NA
8	Water Pollution	NA		NA	NA
9	Lead Risk	NA		NA	45.7

Source: County Health Rankings, IA 2011, <http://www.countyhealthrankings.org/IA/downloads>

TAB 8 Uninsured Profiles. Based on state estimations, the number of insured is documented below. Also, the amount of charity care (last 3 years of free care) from area providers is trended below.

#	Percentages of Uninsured Population (2007)	Decatur	Trend	Iowa	CAH 13
1	% Uninsured (<65)	13.2%		10.8%	17.0%
Source: 2011 Iowa Health Fact Book					
#	Charity Care by Decatur County Hospital	YR10	YR11	YR12	Trend
1	Local Hospital Charity Care (Bad Debt - No pay)	\$395,634	\$411,322	\$414,330	
2	Local Hospital Charity Care (Free Care)	\$63,526	\$91,752	\$49,882	

TAB 9 Mortality Profile. The leading causes of county deaths are listed below. Areas of higher than expected are so noted.

Causes of Death by County of Residence, IA 2010				
Vital Stat: Selected Causes of Death (ICD-10)		Decatur Co	Trend	Iowa
	TOTALS	198		61,907
1	Major Cardiovascular Diseases	30		9,090
2	Malignant Neoplasms, Including Neoplasms of Lymphatic and Hematopoietic Tissues	24		6,394
3	Diseases of Heart	20		6,851
4	Ischemic Heart Disease	18		5,026
5	All Other Diseases	14		4,014
6	Other Forms of Chronic Ischemic Heart Disease	12		3,515
7	Chronic Lower Respiratory Diseases	9		1,692
8	Other Chronic Lower Respiratory Diseases	9		1,559
9	Cerebrovascular Diseases	8		1,515
10	Unintentional Injuries	7		1,292
11	Malignant Neoplasms of Digestive Organs and Peritoneum	6		1,615
12	Acute Myocardial Infarction	6		1,482
13	Atherosclerotic Cardiovascular Disease	6		1,049
14	All Other Forms of Chronic Ischemic Heart Disease	6		2,466
15	Malignant Neoplasms of Respiratory and Intrathoracic Organ	5		1,784
16	Malignant Neoplasms of Genital Organs	5		678
17	Symptoms, Signs and Abnormal Findings, Not Elsewhere Classified	5		436
18	Motor Vehicle Crashes	4		409
19	Suicides	4		375

TAB 10 Preventive Health Profile. The following table reflects future health of county. This information also is an indicator of community awareness of preventative measures.

	http://www.countyhealthrankings.org	Decatur	Trend	Iowa	CAH 13
1	Diabetic screening	86%		88%	82%
2	Mammography screening	72%		71%	63%
3	Limited access to healthy foods	6%		6%	10%
4	Recreational Facilities			NA	NA
#	Indicators	Decatur	Trend	Iowa	CAH 13
1	Adolescent Immunization Rate	9%		23.0%	36%
2	% of Infants Fully immunized at 24 months	49%		64.0%	82%
3	Annual check-up visit to PCP (past year)	NA		NA	NA
4	Annual check-up visit to Eye Doctor (past year)	NA		NA	NA
5	Annual check-up visit to Dentist (past year)	NA		NA	NA

IV. Inventory of Community Health Resources

[VVV Research & Development INC]

Inventory of Health Services Decatur County IA				
Cat	HC Services Offered in county: Yes / No	Hospital	HLTH Dept	Other
Clinic	Primary Care			Yes
Hosp	Alzheimer Center			
Hosp	Ambulatory Surgery Centers			
Hosp	Arthritis Treatment Center			
Hosp	Bariatric/weight control services			Yes
Hosp	Birthing/LDR/LDRP Room			
Hosp	Breast Cancer	YES		
Hosp	Burn Care			
Hosp	Cardiac Rehabilitation	YES		
Hosp	Cardiac Surgery			
Hosp	Cardiology services	YES		
Hosp	Case Management			
Hosp	Chaplaincy/pastoral care services			
Hosp	Chemotherapy	YES		
Hosp	Colonoscopy	YES		
Hosp	Crisis Prevention			
Hosp	CTScanner	YES		
Hosp	Diagnostic Radioisotope Facility			
Hosp	Diagnostic/Invasive Catheterization			
Hosp	Electron Beam Computed Tomography (EBCT)			
Hosp	Enrollment Assistance Services			
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)			
Hosp	Fertility Clinic			
Hosp	FullField Digital Mammography (FFDM)	YES		
Hosp	Genetic Testing/Counseling			
Hosp	Geriatric Services			
Hosp	Heart			
Hosp	Hemodialysis			
Hosp	HIV/AIDS Services			
Hosp	Image-Guided Radiation Therapy (IGRT)			
Hosp	Inpatient Acute Care - Hospital services	YES		
Hosp	Intensity-Modulated Radiation Therapy (IMRT) 161			
Hosp	Intensive Care Unit			
Hosp	Intermediate Care Unit			
Hosp	Interventional Cardiac Catheterization			
Hosp	Isolation room	YES		
Hosp	Kidney			
Hosp	Liver			
Hosp	Lung	YES		
Hosp	Magnetic Resonance Imaging (MRI)	YES		
Hosp	Mammograms	YES		
Hosp	Mobile Health Services			
Hosp	Multislice Spiral Computed Tomography (<64 slice CT)	YES		
Hosp	Multislice Spiral Computed Tomography (<64+ slice CT)			
Hosp	Neonatal			
Hosp	Neurological services			
Hosp	Obstetrics			
Hosp	Occupational Health Services		Yes	Yes
Hosp	Oncology Services	YES		
Hosp	Orthopedic services	YES		
Hosp	Outpatient Surgery	YES		
Hosp	Pain Management			
Hosp	Palliative Care Program			Yes
Hosp	Pediatric			
Hosp	Physical Rehabilitation	YES	Yes	Yes
Hosp	Positron Emission Tomography (PET)			
Hosp	Positron Emission Tomography/CT (PET/CT)			
Hosp	Psychiatric Services			YES

Inventory of Health Services Decatur County IA				
Cat	HC Services Offered in county: Yes / No	Hospital	HLTH Dept	Other
Hosp	Radiology, Diagnostic	YES		
Hosp	Radiology, Therapeutic	YES		
Hosp	Reproductive Health			
Hosp	Robotic Surgery			
Hosp	Shaped Beam Radiation System 161			
Hosp	Single Photon Emission Computerized Tomography			
Hosp	Sleep Center	YES		
Hosp	Social Work Services	YES		
Hosp	Sports Medicine			
Hosp	Stereotactic Radiosurgery			
Hosp	Swing Bed Services	YES		
Hosp	Transplant Services			
Hosp	Trauma Center -Level IV	YES		
Hosp	Ultrasound	YES		
Hosp	Women's Health Services		Yes	YES
Hosp	Wound Care	YES		
SR	Adult Day Care Program			
SR	Assisted Living			Yes
SR	Home Health Services		YES	Yes
SR	Hospice			Yes
SR	LongTerm Care			YES
SR	Nursing Home Services			YES
SR	Retirement Housing			YES
SR	Skilled Nursing Care			YES
ER	Emergency Services	YES		
ER	Urgent Care Center	YES		
ER	Ambulance Services	YES		
SERV	Alcoholism-Drug Abuse			Yes
SERV	Blood Donor Center			
SERV	Chiropractic Services			Yes
SERV	Complementary Medicine Services			Yes
SERV	Dental Services			Yes
SERV	Fitness Center		Yes	Yes
SERV	Health Education Classes	YES	Yes	Yes
SERV	Health Fair (Annual)			Yes
SERV	Health Information Center		Yes	
SERV	Health Screenings	YES		Yes
SERV	Meals on Wheels			Yes
SERV	Nutrition Programs		Yes	Yes
SERV	Patient Education Center		Yes	
SERV	Support Groups			Yes
SERV	Teen Outreach Services			Yes
SERV	Tobacco Treatment/Cessation Program			Yes
SERV	Transportation to Health Facilities			Yes
SERV	Wellness Program		Yes	Yes

Providers Delivering Care in Decatur County IA			
Decatur County Hospital Primary Service Area			
# of FTE Providers working in county	FTE Physicians		FTE Allied Staff
	PSA Based DRs	Visting DRs *	PSA Based PA / NP
Primary Care:			
Family Practice	4.0	0.0	1.5
Internal Medicine / Geriatrician	0.0	0.0	
Obstetrics/Gynecology	0.0	0.0	
Pediatrics	0.0	0.0	
Medicine Specialists:			
Allergy/Immunology	0.0	0.0	
Cardiology	0.0	0.1	
Dermatology	0.0	0.1	
Endocrinology	0.0	0.0	
Gastroenterology	0.0	0.0	
Oncology/RADO	0.0	0.2	
Infectious Diseases	0.0	0.0	
Nephrology	0.0	0.0	
Neurology	0.0	0.0	
Psychiatry	0.0	0.0	
Pulmonary	0.0	0.1	
Rheumatology	0.0	0.0	
Surgery Specialists:			
General Surgery / Colon / Oral	0.0	0.6	
Neurosurgery	0.0	0.0	
Ophthalmology	0.0	0.0	
Orthopedics	0.0	0.1	
Otolaryngology (ENT)	0.0	0.2	
Plastic/Reconstructive	0.0	0.0	
Thoracic/Cardiovascular/Vasc	0.0	0.0	
Urology	0.0	0.1	
Hospital Based:			
Anesthesia/Pain	0.5	0.0	
Emergency	0.0	2.0	0.5
Radiology	0.0	0.0	
Pathology	0.0	0.0	
Hospitalist	0.0	0.0	
Neonatal/Perinatal	0.0	0.0	
Physical Medicine/Rehab	0.0	0.0	
Occ Medicine	0.0	0.0	
Podiatry	0.0	0.0	
Chiropractor	0.0	1.5	
Optometrist OD	0.0	0.0	
Dentists	0.0	2.0	
TOTALS	4.5	7.0	2.0

* Total # of FTE Specialists serving community who office outside PSA.

Visiting Specialists to Decatur County IA					
SPECIALTY	Physician Name/Group	Office Location (City/State)	SCHEDULE	YR Days	LOCATION OF OUTREACH CLINIC
Cardiology -	Joel From, MD	Iowa Heart	Twice Monthly	24	Decatur County Hospital
Dermatology -	Anne Nelson, PA-C		Once Monthly	12	Decatur County Hospital
ENT	Douglas Hoisington, DO	Des Moines, IA	Twice Monthly	24	Decatur County Hospital
General Surgeon -	Dane Johnson, DO	Mt Ayr, Iowa	Four Times Monthly	48	Decatur County Hospital
General Surgeon -	William Stanley, DO	Corydon, Iowa	8 times/month	96	Decatur County Hospital
Oncology -	Robert Schreck, MD	Des Moines, IA	3 times/month	36	Decatur County Hospital
Orthopedic -	Timothy Kenney, MD	Des Moines, IA	Once Monthly	12	Decatur County Hospital
Pod (Foot)	Jill Frerichs, DPM	Des Moines, IA	Once Monthly	12	Decatur County Hospital
Pulmonary -	Daniel J. Barth, DO	Des Moines, IA	Once Monthly	12	Decatur County Hospital
Urology -	Brian Gallagher, MD	Des Moines, IA	Once Monthly	12	Decatur County Hospital

Decatur County Iowa Healthcare Services Directory

Emergency Numbers

Police/Sheriff 911

Fire 911

Ambulance 911

Non-Emergency Numbers

Decatur County Sheriff (641) 446-4111
Decatur County Ambulance (641) 446-4871

Municipal Non-Emergency Numbers

Police

Leon (641) 446-7733
Lamoni (641) 784-8711
Garden Grove
Grand River
Weldon

Fire

(641) 446-6221
(641) 784-6791
(641) 443-2463
(641) 773-5436
(641) 445-5637

QUICK REFERENCE PHONE GUIDE

Action Now	1-800-622-5168
Al-Anon "Free to Be Me"	(515) 462-4253
Alcoholics Anonymous	(515) 282-8550
Alzheimer's Disease Helpline	1-800-272-3900
American Cancer Society	1-800-227-2345
American Red Cross	1-800-887-2988
Arthritis Foundation	1-866-378-0636
Battered Women	1-800-433-SAFE
Child Abuse Hotline	1-800-795-9606
Dependent Adult Abuse Hotline	1-800-362-2178
Dependent Adult and Child Abuse	1-800-652-9516
Domestic Abuse Hotline	1-800-942-0333
First Call for Help	(515) 246-6555
Foundation Through Crisis	1-800-332-4224
Gambling Hotline	1-800-238-7633
Iowa Arson/Crime Hotline	1-800-532-1459
Iowa Child Abuse Reporting Hotline	1-800-362-2178
Iowa State Patrol Emergency	1-800-525-5555
Medicare	1-800- MEDICARE
Mental Health Information and Referral	1-800-562-4944
National Alcohol Hotline	1-800-252-6465
National Center for Missing & Exploited Children	1-800-THE LOST
National Institute on Drugs	1-800-662-4537
Poison Control	1-800-222-1222
Sr Health Ins Info Program (SHIIP)	1-800-351-4664
Substance Abuse Information & Treatment	1-800-662-HELP
Suicide Prevention Hotline	1-800-SUICIDE
Teen Line (Red Cross)	1-800-443-8336

General Online Healthcare Resources

Doctors and Dentists--General

[AMA Physician Select: Online Doctor Finder](#) (American Medical Association) [DocFinder](#) (Administrators in Medicine) [Find a Dentist](#) (Academy of General Dentistry) [Find a Dentist: ADA Member Directory](#) (American Dental Association) [Physician Compare](#) (Centers for Medicare & Medicaid Services)

Hospitals and Clinics--General

[Find a Health Center](#) (Health Resources and Services Administration) [Find a Provider: TRICARE Provider Directories](#) (TRICARE Management Activity) [Hospital Quality Compare](#) (Centers for Medicare & Medicaid Services)

Doctors and Dentists--Specialists

[ACOG's Physician Directory](#) (American College of Obstetricians and Gynecologists) [ACR: Geographic Membership Directory](#) (American College of Rheumatology) [American College of Surgeons Membership Directory](#) (American College of Surgeons) [American Osteopathic Association D.O. Database](#) (American Osteopathic Association) [ASGE: Find a Doctor](#) (American Society for Gastrointestinal Endoscopy) [Cancer Genetics Services Directory](#) (National Cancer Institute) [Child and Adolescent Psychiatrist Finder](#) (American Academy of Child and Adolescent Psychiatry) [Dystonia: Find a Health Care Professional](#) (Dystonia Medical Research Foundation) [Expert Locator: Immunologists](#) (Jeffrey Modell Foundation) [Find a Dermatologic Surgeon](#) (American Society for Dermatologic Surgery) [Find a Dermatologist](#) (American Academy of Dermatology) [Find a Gastroenterologist](#) (American College of Gastroenterology) [Find a Gynecologic Oncologist](#) (Society of Gynecologic Oncologists) [Find a Hand Surgeon](#) (American Society for Surgery of the Hand) [Find a Hematologist](#) (American Society of Hematology) [Find a Neurologist](#) (American Academy of Neurology) [Find a Pediatric Dentist](#) (American Academy of Pediatric Dentistry) [Find a Pediatrician or Pediatric Specialist](#) (American Academy of Pediatrics) [Find a Periodontist](#) (American Academy of Periodontology) [Find a Physical Medicine & Rehabilitation Physician](#) (American Academy of Physical Medicine and Rehabilitation) [Find a Plastic Surgeon](#) (American Society of Plastic Surgeons) [Find a Podiatrist](#) (American Podiatric Medical Association) [Find a Thyroid Specialist](#) (American Thyroid Association) [Find a Urologist](#) (American Urological Association) [Find an ACFAS Physician](#) (American College of Foot and Ankle Surgeons) [Find an Allergist/Immunologist: Search](#) (American Academy of Allergy, Asthma, and Immunology) [Find an Endocrinologist](#) (Hormone Health Network) [Find an Eye M.D.](#) (American Academy of Ophthalmology) [Find an Interventional Radiologist](#) (Society of Interventional Radiology) [Find an Oncologist](#) (American Society of Clinical Oncology) [Find an Oral and Maxillofacial Surgeon](#) (American Association of Oral and Maxillofacial Surgeons) [Find an Orthopaedic Foot and Ankle MD](#) (American Orthopaedic Foot and Ankle Society) [Find an Otolaryngologist \(ENT\)](#) (American Academy of Otolaryngology--Head and Neck Surgery) [Finding an Eye Care Professional](#) (National Eye Institute) [GI Locator Service](#) (American Gastroenterological Association)

Other Healthcare Providers

[AMTA's Find a Massage Therapist](#) (American Massage Therapy Association) [Cancer Genetics Services Directory](#) (National Cancer Institute) [Find a Diabetes Educator](#) (American Association of Diabetes Educators) [Find a Genetic Counselor](#) (National Society of Genetic Counselors) [Find a Midwife](#) (American College of Nurse-Midwives) [Find a Nurse Practitioner](#) (American Academy of Nurse Practitioners) [Find a Physical Therapist](#) (American Physical Therapy Association) [Find a Professional: Online Directory of Audiology and Speech-Language Pathology Programs](#) (American Speech-Language-Hearing Association) [Find a Registered Dietitian](#) (Academy of Nutrition and Dietetics) [Find a Therapist](#) (Anxiety Disorders Association of America) [Find an Audiologist](#) (American Academy of Audiology) [Manual Lymphatic Drainage Therapists](#) (National Lymphedema Network) [National Register of Health Service Providers in Psychology](#) (National Register of Health Service Providers in Psychology) [NCCAOM: Find Nationally Certified Practitioners](#) (National Certification Commission for Acupuncture and Oriental Medicine) [Search for an Emergency Contraception Provider in the United States](#) (Princeton University, Office of Population Research)

Hospitals and Clinics--Specialized

[Accredited Birth Centers](#) (Commission for the Accreditation of Birth Centers) [Alzheimer's Disease Research Centers](#) (National Institute on Aging) [Cystic Fibrosis Foundation: Find a Chapter](#) (Cystic Fibrosis Foundation) [Cystic Fibrosis Foundation: Find an Accredited Care Center](#) (Cystic Fibrosis Foundation) [Dialysis Facility Compare](#) (Centers for Medicare & Medicaid Services) [FDA Certified Mammography Facilities](#) (Food and Drug Administration) [Find a Free Clinic](#) (National Association of Free Clinics) [Find an Indian Health Service Facility](#) (Indian Health Service) [Find Treatment Centers](#) (American Cancer Society) [Genetics Clinic Directory Search](#) (University of Washington) [Locate a Sleep Center in the United States by Zip Code](#) (American Academy of Sleep Medicine) [MDA ALS Centers](#) (Muscular Dystrophy Association) [Mental Health Services Locator](#) (Substance Abuse and Mental Health Services Administration) [NCI Designated Cancer Centers](#) (National Cancer Institute) [Neurofibromatosis Specialists](#) (Children's Tumor Foundation) [Post-Polio Directory 2011: Post-Polio Clinics, Health Professionals, Support Groups](#) (Post-Polio Health International including International Ventilator Users Network) [Spina Bifida Clinic Directory](#) (Spina Bifida Association of America) [Substance Abuse Treatment Facility Locator](#) (Substance Abuse and Mental Health Services Administration) [Transplant Center Search Form](#) (BMT InfoNet) [U.S. NMDP Transplant Centers](#) (National Marrow Donor Program) [VA Health Care Facilities Locator & Directory](#) (Veterans Health Administration) [Where to Donate Blood](#) (AABB) [Where to Donate Cord Blood](#) (National Marrow Donor Program)

Other Healthcare Facilities and Services

[Alzheimer's Disease Resource Locator](#) (Fisher Center for Alzheimer's Research Foundation) [American College of Radiology Accredited Facility Search](#) (American College of Radiology) [APA District Branch / State Association Directory](#) (American Psychiatric Association) [Directory of Organizations \(Deafness and Communication Disorders\)](#) (National Institute on Deafness and Other Communication Disorders) [Dog Guide Schools in the United States](#) (American Foundation for the Blind) [Eldercare Locator](#) (Dept. of Health and Human Services) [Find a Hospice or Palliative Care Program](#) (National Hospice and Palliative Care Organization) [Find Services \(for People with Vision Loss\)](#) (American Foundation for the Blind) [Find Urgent Care Centers by State](#) (Urgent Care Association of America) [Genetic Testing Laboratory Directory](#) (University of Washington) [Home Health Compare](#) (Centers for Medicare & Medicaid Services) [Medicare: Helpful Contacts](#) (Centers for Medicare & Medicaid Services) [Muscular Dystrophy Association Clinics and Services](#) (Muscular Dystrophy Association) [National Foster Care and Adoption Directory Search](#) (Children's Bureau) [Nursing Home Compare](#) (Centers for Medicare & Medicaid Services) [Organizations That Offer Support Services](#) (National Cancer Institute) [Poison Control Centers](#) (American Association of Poison Control Centers) [Resources and Information for Parents about Braille](#) (American Foundation for the Blind) [State-Based Physical Activity Program Directory](#) (Centers for Disease Control and Prevention) [TSA Chapters in the USA](#) (Tourette Syndrome Association) [Violence against Women: Resources by State](#) (Dept. of Health and Human Services, Office on Women's Health) [Where to Find Hair Loss Accessories and Breast Cancer Products](#) (American Cancer Society)

SOURCE: MedlinePlus provides links to directories to help you find libraries, health professionals, services and facilities. NLM does not endorse or recommend the organizations that produce these directories, nor the individuals or organizations that are included in the directories.

Assisted Living

Melinda Graham
Lamoni Assisted Living
810 E 3rd St
Lamoni, IA 50140
(641)784-8910

Jonda Petty
Terrace Park Assisted Living
201 SW Lorraine St
Leon, IA 50144
(641)446-8396
www.terracepark.iowacare.com

Chiropractor

Daniel J Heffron DC
Heffron Chiropractic Leon
311 N Main St
Leon, IA 50144
(641)446-3131

Lamoni Chiropractic Center
303 S Linden St
Lamoni, IA 50140
(641)784-6677
-Charles E Manuel DC
-Bryan Nowlin DC

Clinics

Samantha Cannon, CEO
Community Health Centers of Southern
Iowa Inc
802 Ackerley St
Lamoni, IA 50140
(641)784-3371
www.chcsi.org

Samantha Cannon, CEO
Community Health Centers of Southern
Iowa Inc
302 NE 14th St

Leon, IA 50144
(641)446-2383
www.chcsi.org

Ava Eagles, ARNP
Family Health Clinic
1332 E Main St
Lamoni, IA 50140
(641)784-7526

Clinics - Physicians & Surgeons

Community Health Centers of Southern
Iowa Inc
802 Ackerley St
Lamoni, IA 50140
(641)784-3371
www.chcsi.org
- Nathan Allen, MD
- Mark Easter, DO
- Patricia K Magle MD
-Scott Mial, MD

Community Health Centers of Southern
Iowa Inc
302 NE 14th St
Leon, IA 50144
(641)446-2383
www.chcsi.org
-Nathan Allen, MD
-Patricia K Magle MD
-Scott M Mial, MD
-Larry W Richard MD
-Eugene Yoder, ARNP

Decatur County Hospital
1405 NW Church St.
Leon, IA 50144
(641)446-4871
www.decaturcountyhospital.org
-Dana Johnson, DO
-William Stanley, DO

Clinics - Physicians (Cont.)

Ava Eagles, ARNP
Family Health Clinic
1332 E Main St
Lamoni, IA 50140
(641)784-7526

College

Benna L Easter, ARNP
Graceland University
1 University Pl
Lamoni, IA 50140
(641)784-5000
www.graceland.edu

Dentist

Deepika Verma, DMD
Community Health Centers of Southern
Iowa Inc
307 NE 14th St
Leon, IA 50144
(641)446-2383
www.chcsi.org

Terry B Lesan, DDS
Lesan Dentistry
1330 E Main St
Lamoni, IA 50140
(641)784-6059

Fitness Center

Shelley Bickel
Decatur County Public Health
207 NE Idaho St
Leon, IA 50144
(641)446-6518

The Wellness Club
Lamoni Chiropractic Center
303 S Linden St
Lamoni, IA 50140
(641)784-6677

Home Health & Hospice

Care Initiatives Hospice
122 Public Square
Greenfield, IA 50849-1261
(877)577-8555
www.careinitiativeshospice.org

Sherry McDonald
Circle of Life Hospice
220 Northwestern Ave
Chariton, IA 50049
(877)574-3490
www.colhospice.org

Shelley Bickel
Decatur County Public Health
207 NE Idaho St
Leon, IA 50144
641)446-6518

Amy Mobley, RN, CHPN
HCI Care Services
107 S Fillmore St
Mt Ayr, IA 50854
(641)464-2088
www.hospiceofcentraliowa.org

Stan Birchem
South Central Home Health Care
303 SW Lorraine St
Leon, IA 50144
(641)446-8953

Hospital

Lynn Milnes, CEO
 Decatur County Hospital
 1405 NW Church St
 Leon, IA 50144
 (641)446-4871
www.decaturcountyhospital.org

Mental Health

Evelyn Conrad
 Community Health Centers of Southern
 Iowa Inc
 802 Ackerley St
 Lamoni, IA 50140
 (641)784-3371
www.chcsi.org

Community Health Centers of Southern
 Iowa Inc
 303 NE 14th St
 Leon, IA 50144
 (641)446-2383
www.chcsi.org

- Evelyn Conrad
- Susanna Funk, ARNP
- Reece Tedford
- John Young

Taylor Maedel
 Life Line Resources, LLC
 126 S Linden St
 Lamoni, IA 50140
 (641)784-8846
www.life-lineresources.com

Taylor Maedel
 Life Line Resources, LLC
 106 N Main St
 Leon, IA 50144
 (641)446-8846
www.life-lineresources.com

Newspaper

Beth Higdon
 Lamoni Chronicle
 120 N Linden St
 Lamoni, IA 50140
 (641)784-6397

Corey Lindsey
 Leon Journal Reporter
 110 N Main St
 Leon, IA 50144
 (641)446-4151

Nursing Home

Selena Humphrey
 Lamoni Nursing & Rehab Center
 215 S Oak St
 Lamoni, IA 50140
 (641)784-3388
www.careinitiatives.org

Stan Birchem
 Westview Acres Care Center
 203 SW Lorraine St
 Leon, IA 50144
 (641)446-4165
www.iowacare.com

Pharmacy

Decatur Family Pharmacy
 204 N Main
 Leon, IA 50144
 (641)446-4136

Larry Phillips
 Varsity Drug
 101 E Main St
 Lamoni, IA 50140
 (641)784-6322

Police

Shane Skinner
Lamoni City Police
135 S Linden
Lamoni, IA 50140
(641)784-8711

Ron Zeiss
Leon City Police
104 W 1st St
Leon, IA 50144
(641)446-7733

Public Health /Home Health

Shelley Bickel
Decatur County Public Health
207 NE Idaho St
Leon, IA 50144
(641)446-6518

Schools

Central Decatur Community Schools
North Elementary
1203 NE Poplar
Leon, IA 50144
(641)446-4452
www.central-decatur.k12.ia.us
-Amy Whittington-Elem Principal
-Kathay Hoyt- Elem School Nurse

Central Decatur Community Schools
Administration & High School
1201 NE Poplar
Leon, IA 50144
(641)446-4816
www.central-decatur.k12.ia.us
-Chris Coffelt-Superintendent
-Rudy Evertson- HS Principal
-Justine Buckingham- HS Nurse

Lamoni Community Schools
202 N Walnut
Lamoni, IA 50140
(641)784-3351
www.lamoni.k12.ia.us
-Chris Coffelt – Superintendent
-Ed Huenemann- HS Principal
-Pam Sherman- School Nurse

Andy Peterson- Elementary Principal
Lamoni Community Schools
202 N Walnut
Lamoni, IA 50140
(641)784-3422
www.lamoni.k12.ia.us

Support Services

Kathy Lerma
Decatur Community Services
201 NE Idaho St
Leon, IA 50144
(641)446-7178

Samantha Schaff
Veteran's Affairs
201 NE Idaho St
Leon, IA 50144
(641)446-7494

Department of Human Services-Decatur
109 S Main St
Osceola, IA 50213
(877)394-1439

Denise Elefson
Lamoni EMS
190 S Chestnut
Lamoni, IA 50140
(641)344-4870
lamoniems@yahoo.com

Support Services (Cont.)

Lamoni Food Pantry
Lamoni, IA 50140
(641)784-4762

Lamoni Ministerial Alliance
9th & Maple St
Lamoni, IA 50140
(641)784-6868

Leon Ministerial Alliance
207 N Main St
Leon, IA 50144
(641)446-7343

Elizabeth Schmidt
SIRF (Southern Iowa Resources For
Families)
1605 W 1st St
Leon, IA 50144
(641)446-6808

Southern Iowa Trolley
215 E Montgomery St
Creston, IA 50801
(866)782-6571
www.southerniowatrolley.org

V. Detail Exhibits

[VVV Research & Development INC]

Patient Origin & Access

[VVV Research & Development INC]

**Drilldown Decatur County Market - Inpatient Destination Summary Report
For January - December 2011**

		Disch	%	Discharges					Inpatient Days	%	Inpatient Days				
				<18	18-44	45-64	65-74	75+			<18	18-44	45-64	65-74	75+
				100%	137	130	222	129			315	4507	100%	373	471
1	Ames, Mary Greeley	4	0.43%	0	1	1	0	2	13	0.29%	0	1	2	0	10
2	Bloomfield, Davis Co Hosp	3	0.32%	0	0	0	0	3	17	0.38%	0	0	0	0	17
3	Chariton, Lucas Co. Hlth	8	0.86%	3	4	0	0	1	16	0.36%	6	9	0	0	1
4	Corydon, Wayne Co. Hosp	39	4.18%	16	15	1	4	3	91	2.02%	27	39	3	13	9
5	Creston, Greater Reg Med	11	1.18%	5	6	0	0	0	24	0.53%	10	14	0	0	0
6	Des Moines, IA Lutheran	9	0.96%	0	0	3	2	4	55	1.22%	0	0	6	7	42
7	Des Moines, IMMC	205	21.97%	73	34	31	16	51	956	21.21%	236	128	159	71	362
8	Des Moines, Mercy Med	240	25.72%	17	42	66	42	73	1352	30.00%	44	174	461	323	350
9	Iowa City, U of I	33	3.54%	3	5	20	3	2	204	4.53%	9	50	127	7	11
10	Leon, Decatur Co Hosp	283	30.33%	12	12	65	44	150	1418	31.46%	26	34	225	185	948
11	Mount Ayr, Ringgold Co	18	1.93%	0	0	6	1	11	87	1.93%	0	0	19	3	65
12	Osceola, Clarke Co	13	1.39%	1	0	4	2	6	49	1.09%	3	0	18	8	20
13	Ottumwa, Ottumwa Reg	1	0.11%	0	0	1	0	0	10	0.22%	0	0	10	0	0
14	Waterloo, Covenant	1	0.11%	0	1	0	0	0	3	0.07%	0	3	0	0	0
15	West Des Moines, West L	29	3.11%	0	1	15	10	3	115	2.55%	0	3	69	32	11
16	West Des Moines, Meth W	36	3.86%	7	9	9	5	6	97	2.15%	12	16	34	17	18
17															
18															

**Drilldown Decatur County Market - Inpatient Destination Summary Report
For January - December 2010**

		Disch	%	Discharges					Inpatient Days	%	Inpatient Days				
				<18	18-44	45-64	65-74	75+			<18	18-44	45-64	65-74	75+
				100%	125	152	208	156			281	4590	100%	448	425
1	Boone, Boone Co Hosp	2	0.22%	0	0	2	0	0	15	0.33%	0	0	15	0	0
2	Centerville, Mercy Med	3	0.33%	1	2	0	0	0	4	0.09%	2	2	0	0	0
3	Chariton, Lucas Co. Hlth	12	1.30%	6	4	0	0	2	28	0.61%	12	12	0	0	4
4	Corydon, Wayne Co. Hosp	37	4.01%	13	13	2	5	4	103	2.24%	29	27	3	14	30
5	Creston, Greater Reg Med	10	1.08%	3	4	0	0	3	34	0.74%	6	11	0	0	17
6	Davenport, Genesis	1	0.11%	0	1	0	0	0	3	0.07%	0	3	0	0	0
7	Des Moines, Broadlawns	3	0.33%	1	1	1	0	0	4	0.09%	1	1	2	0	0
8	Des Moines, IA Lutheran	19	2.06%	0	3	6	2	8	131	2.85%	0	4	41	16	70
9	Des Moines, IMMC	196	21.26%	52	43	33	28	40	1061	23.12%	208	145	221	189	298
10	Des Moines, Mercy Med	220	23.86%	22	38	66	41	53	1158	25.23%	103	126	323	200	406
11	Grinnell, Grinnell Reg	1	0.11%	0	0	1	0	0	4	0.09%	0	0	4	0	0
12	Iowa City, Mercy	1	0.11%	0	1	0	0	0	2	0.04%	0	2	0	0	0
13	Iowa City, U of I	36	3.90%	3	1	27	5	0	276	6.01%	31	2	175	68	0
14	Leon, Decatur Co Hosp	289	31.34%	12	26	51	53	147	1437	31.31%	31	56	230	320	800
15	Mount Ayr, Ringgold Co	16	1.74%	0	1	5	3	7	44	0.96%	0	1	14	9	20
16	Osceola, Clarke Co	16	1.74%	1	2	2	4	7	99	2.16%	2	7	6	12	72
17	Ottumwa, Ottumwa Reg	1	0.11%	0	0	1	0	0	12	0.26%	0	0	12	0	0
18	West Des Moines, West L	26	2.82%	0	1	10	8	7	93	2.03%	0	1	35	23	34
19	West Des Moines, Meth W	33	3.58%	11	11	1	7	3	82	1.79%	23	25	2	23	9

**Drilldown Decatur County Market - Inpatient Destination Summary Report
For January - December 2009**

		Disch	%	Discharges					Inpatient Days	%	Inpatient Days				
				<18	18-44	45-64	65-74	75+			<18	18-44	45-64	65-74	75+
	TOTAL	954	100%	134	178	223	171	248	4566	100%	377	630	1169	927	1463
1	Albia, Monroe Co Hosp	2	0.21%	0	2	0	0	0	7	0.15%	0	7	0	0	0
2	Ames, Mary Greeley	3	0.31%	1	1	1	0	0	12	0.26%	3	3	6	0	0
3	Cedar Rapids, Mercy	1	0.10%	0	0	1	0	0	2	0.04%	0	0	2	0	0
4	Centerville, Mercy Med	2	0.21%	1	1	0	0	0	4	0.09%	2	2	0	0	0
5	Chariton, Lucas Co. Hlth	10	1.05%	4	5	0	1	0	21	0.46%	7	10	0	4	0
6	Corydon, Wayne Co. Hosp	46	4.82%	23	21	1	1	0	85	1.86%	39	42	1	3	0
7	Council Bluffs, Alegent He	1	0.10%	0	0	0	0	1	7	0.15%	0	0	0	0	7
8	Creston, Greater Reg Med	7	0.73%	3	4	0	0	0	17	0.37%	7	10	0	0	0
9	Des Moines, Broadlawn	5	0.52%	2	3	0	0	0	7	0.15%	3	4	0	0	0
10	Des Moines, IA Lutheran	39	4.09%	1	3	15	6	14	291	6.37%	2	18	81	47	143
11	Des Moines, IMMC	202	21.17%	56	47	37	35	27	1125	24.64%	213	246	239	243	184
12	Des Moines, Mercy Med	221	23.17%	27	41	65	45	43	980	21.46%	62	111	330	241	236
13	Harlan, Myrtue Med Center	1	0.10%	1	0	0	0	0	3	0.07%	3	0	0	0	0
14	Iowa City, U of I	48	5.03%	0	20	23	5	0	281	6.15%	0	98	152	31	0
15	Leon, Decatur Co Hosp	288	30.19%	14	20	60	59	135	1381	30.25%	34	51	241	286	769
16	Mason City, Mercy Medical	2	0.21%	0	0	0	0	2	3	0.07%	0	0	0	0	3
17	Mount Ayr, Ringgold Co	20	2.10%	0	2	5	7	6	85	1.86%	0	3	24	36	22
18	Osceola, Clarke Co	36	3.77%	1	3	5	8	19	140	3.07%	2	10	13	22	93
19	Pella, Pella Reg Med Cen	1	0.10%	0	1	0	0	0	1	0.02%	0	1	0	0	0
20	Shenandoah, Shen Med Ctr	1	0.10%	0	0	0	1	0	3	0.07%	0	0	0	3	0
21	Sigourney, Keokuk Co Hlth	1	0.10%	0	0	1	0	0	41	0.90%	0	0	41	0	0
22	Waterloo, Allen Hlth Sys	1	0.10%	0	1	0	0	0	2	0.04%	0	2	0	0	0
23	Waterloo, Covenant	1	0.10%	0	0	1	0	0	18	0.39%	0	0	18	0	0
24	West Des Moines, West L	12	1.26%	0	3	5	3	1	43	0.94%	0	12	14	11	6
25	West Des Moines, Meth W	3	0.31%	0	0	3	0	0	7	0.15%	0	0	7	0	0

Town Hall Attendees Notes & Feedback

[VVV Research & Development INC]

Hospital: Decatur County Hospital CHNA Roundtable Meeting Date: 4/11/13 7:30-9 am.

ATTENDANCE = 41 of 189 invited

Category	Attend	Lastname	Firstname	Title	Organization	Address/City/ST/Zip
Public health officials.	1	Acheson	Terre		Decatur DOH & Home Care	2154 15th Street, Allerton, IA 50008
Education officials and staff - school superintendents, principals, teachers and school nurses.	1	Atwood	Manuel	Counselor	CD Comm Schools	1201 NE Poplar, Leon, IA, 50144
Public health officials.	1	Bickel	Shelly	Director	Decatur Co Public Health	207 NE Idaho, Leon, IA 50144
Political, appointed and elected officials.	1	Boswell	Gary	Supervisor		1890 E. Main St, Lamoni, IA 50140-6314
People without titles, but identified by others as "community leaders."	1	Boswell	Janeen			302 NE 14th St, Leon IA 50144
The LHC organization's board members.	1	Cannon	Samantha	CEO	CHCSI	302 NE 14th St, Leon, IA 50144
The hospital organization's board members.	1	Chastain	Lind	Board Treasurer	Decatur Co Hospital	21210 Lineville Rd, Leon, IA 50144
The hospital organization's board members.	1	Clark	Guy	Board Chair	Decatur Co Hospital	706 SE Q Street, Leon, IA 50144
Education officials and staff - school superintendents, principals, teachers and school nurses.	1	Coffelt	Chris	Superintendent	CD Comm Schools	1201 NE Poplar, Leon, IA, 50144
Political, appointed and elected officials.	1	Cornett	JR	Supervisor		208 N Main St, Leon, IA 50144
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	1	Deemer	Lisa		South Central Home Health	303 Lorraine Leon, IA
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	1	Devore	Susie		Community Health Centers of Southern Iowa	208 N. Dekalb
DCH Auxiliary Members	1	Duncan	Rachel			NW 12th Dr., Leon, IA 50144
People without titles, but identified by others as "community leaders."	1	Elefson	Denise			30277 US Hwy 69 Lamoni, IA 50140
Political, appointed and elected officials.	1	Fulton	Jim	Supervisor		PO Box 22, Decatur, IA 50067-0022
Representatives from businesses – owners/CEO's of large businesses (local or large corporations with local branches.)	1	Henderson	John		Great Western Bank	111 N Main, Leon, IA 50144
	1	Hoyt	Kathay		Central Decatur School	516 S. Teale St, Davis City, IA 50065
The hospital organization's board members.	1	Kessel	Leon	Board Member	Decatur Co Hospital	12301 290th St, Lamoni, IA 50140
People without titles, but identified by others as "community leaders."	1	Kessel	Shirley			12301 290th St, Lamoni, IA 50140
Health insurers.	1	Kofoid	Shawn	Agent	Miller Insurance Agency LTD	114 N Main, Leon, IA 50144
PRESS (Paper, TV, Radio)	1	Lindsey	Corey	Publisher/Editor	Leon Journal Reporter	110 N. Main St, Leon, IA 50144
DCH Auxiliary Members	1	Lynch	Karen			310 NW 13th Dr., Leon, IA 50144
Physicians.	1	Magle	Patricia	MD	CHCSI	303 NE 14th St , Leon, IA 50144
DCH Service Director	1	Masters	Andi	Director of Nursing	Decatur County Hospital	24276 242nd St, Leon, IA 50144
The hospital organization's board members.	1	Melcher	Carrie	Board Member	Decatur Co Hospital	510 E 10th St, Lamoni, IA 50140
DCH Service Director	1	Milnes	Lynn	Administrator	Decatur County Hospital	P.O. Box 184, Leon, IA 50144
Education officials and staff - school superintendents, principals, teachers and school nurses.	1	Peterson	Andy	Elem Sch Principal	Lamoni Comm Schools	202 N Walnut, Lamoni, IA 50140
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	1	Petty	Jonda	Administrator	Terrace Park Assisted Living	201 SW Lorraine St. Leon, IA 50144
Health Dept	1	Robinson	Shawna		Decatur Public Health	207 NE Idaho Leon IA 50144
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	1	Saxon	Sean		Community Health Centers of Southern Iowa	500 NW Church St, Leon, IN 50114
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	1	Saxton	Rose		Westview Acres	203 Lorraine Leon, IA
DCH Service Director	1	Sherman	Amy	Social Services	Decatur County Hospital	628 S. Walnut St., Lamoni, IA 50140

Hospital: Decatur County Hospital CHNA Roundtable Meeting Date: 4/11/13 7:30-9 am.
ATTENDANCE = 41 of 189 invited

Category	Attend	Lastname	Firstname	Title	Organization	Address/City/ST/Zip
DCH Service Director	1	Smith	Jo Beth	Human Resources	Decatur County Hospital	307 NE Idaho, Leon, IA 50144
Housing advocates - administrators of housing programs: homeless shelters, low-income-family housing and senior housing.	1	South	Dennis	Director		1103 NW Church, Leon, IA 50144
People without titles, but identified by others as "community leaders."	1	South	Sharon			1103 NW Church, Leon, IA 50144
DCH Service Director	1	Spidle	Tara	CFO	Decatur County Hospital	24745 242nd St, Leon, IA 50144
Education officials and staff - school superintendents, principals, teachers and school nurses.	1	Welch	Carrie	Counselor	CD Comm Schools	201 SE 6th Leon, IA 50144
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	1	Wharff	Jodi		Community Health Centers of Southern Iowa	105 NW Cedar Rdg, Leon IA 50144
Coalitions working on health or other issues.	1	White	Sandra		Decatur Community Services	
People without titles, but identified by others as "community leaders."	2	Morain	Bill & Sherry			901 W Main St, Lamoni, IA 50140

Decatur County IA on behalf of DCH				
Town Hall Community Health Needs Priorities N = 41				
#	HC Topics cited to either change or improve	Votes	%	Accum
Total Town Hall Votes		128	82%	
1	Recruit Mental health providers and increase MH placement & follow-up	25	16.0%	16.0%
2	Recruit Eye doctor to community	21	13.5%	29.5%
3	Further Decatur County Economic development	20	12.8%	42.3%
4	Increase Primary Care Clinic access / availability	18	11.5%	53.8%
5	Establish local DHS office – better access	12	7.7%	61.5%
6	Increase Amish HC services / education	9	5.8%	67.3%
7	Provide Adult Day Care Services	8	5.1%	72.4%
8	Decrease Obesity with Nutrition Education	8	5.1%	77.6%
9	Provide HC Transportation between Leon and Lamoni	7	4.5%	82.1%
Note:	Other items receiving votes: Meal coordination, Expand Medicaid, Education on HC service offerings, provide Prenatal/postnatal services, offer more Assisted Living options, improve IA works, offer new parent health education and open public Lamoni fitness center.			

**Community Health Needs Assessment
Decatur County, IA Strengths (Color cards) N= 41**

CODE1	CODE2	CODE3	Today: What are the strengths of our community that contribute to health ?
ACC	COMMU		Access; cost; services offered; quality of care; community resources
ACC	BH/DENT	MCAID/ACC	Acute care hospital; mental health services; dental services; Medicaid services; need both female and male providers
ACC	DOH	COLLAB	Availability of resources; FQHC; Public Health; Central Point Coordination
ACC	OP		Clinics available in both towns; federal qualified clinic new hospital; several OP clinics
ACC	FAC	ONC/PUL	Clinics in both Leon and Lamoni; new hospital; oncology clinic; pulmonary clinic
ACC	HH	COLLAB	Doctors come to nursing home; hospital/clinics work well
ACC	EDU	WELL	Federal support clinic; schools; school programs
ACC	BH		Health clinic; mental health
ACC	OP/EMER	HH/COMMU	Hospital service availability; good outpatient and ER; 2 home care agencies and community services; community support for people
AGE	COMMU		Vigor and engagement in community of elderly; high degree of dedication
DENT	FAC/DOH	EDU/WELL	CHCSI; dentists; new hospital; public health; school system; wellness
DOH	ACC	HH	Public health department; health clinic; home health
EDU	DOCS	INSU	HS Graduation rate; increased M.D. supply; ACA; increased insured population; interstate system
EDU	ACC/FAC	HH	School system; hospital; specialty clinics; assisted living
EDU	ACC/FAC	HH	Schools; care clinics in Leo and Lamoni; new county hospital; after school programs; assisted living
FAC	NUTR	FIT	A FQHC in our county; a new hospital with cutting edge technology and services; strong focus on eating right and physical fitness
FAC	COLLAB	EDU/AMB	CHCSI; new hospital; variety of recreation; great collaboration between agencies; community services; good school; ambulance service
FAC	ACC	NUTR/EDU/ COLLAB/DO H	Community health center of Iowa, healthcare agencies; nutrition education in schools; education; health care collaboration; nutritionist; public health
FAC	ACC/DOH	FIT/PREV	New hospital and several specialty clinics; FQHC – CHCSI; active public health; youth active in community; have resources for prevention
FAC	ACC	DOH	New hospital facility; up to date equipment and privacy; clinics in 2 locations of county; public health system
FAC	WELL	AMB	New hospital facility; wellness centers available; Lamoni EMS; county ambulance – hospital based CHCSI
FAC			New hospital; better technology

**Community Health Needs Assessment
Decatur County, IA Strengths (Color cards) N= 41**

CODE1	CODE2	CODE3	Today: What are the strengths of our community that contribute to health ?
FAC	WELL	AMB/VOL	New hospital; community health center; EMS volunteer
FAC	AMB		New Hospital; EMS based away from the hospital
FAC	AMB/ACC	HOSP/HH	New hospital; EMS services; 3 clinics; multiple home health providers; multiple hospice providers; assisted living
FAC	ACC/FIT/HH	INSU/AMB/N UTR	New hospital; sliding scale clinics; workout facilities; FQHC; home health care; 340B Special pricing; ambulance; assisted living; hospice; Weekend/summer/school lunch; ministerial alliance; affordable care act; food pantry
FAC/ACC	DOH	FIT	Hospital available; public health; exercise equipment
FIT	SPEC		Places to exercise; availability of specialty doctors
FIT	FAC	DOCS/ACC	Workout center; new hospital facility; hometown doctors coming back to the areal CHCSI providing many needed services
INSU	FAC	PHAR	CHC – sliding scale; new hospital; pharmacies
INSU	DENT/PHAR	EDU/WELL/F IT/PREV	Community Health Center provides sliding fee for uninsured and underinsured; dental and pharmacies in both towns; good school programs: food, activities, screenings
NUTR	DENT/EYE/P REV	BH/DOH/AC C	Healthy school lunches; dental and vision screening; school referral system for mental health; community support; public health program; visiting health clinics
REC	FAC		Outdoor recreation is available; new hospital
REC	EDU	HH/HOSP	Outdoor recreation; school system; assisted living; home health; hospice
REC/FIT/N UTR	HH	VOL	Recreation; fitness center; lunch program; home health care; good volunteers
WELL	NUTR	DOH/FAC	Programs for preschool children; meals at school; wellness facilities; good public health services; new hospital
WELL	BH/MCAID	DENT/COM MU/PHAR/N UTR	Wellness centers; mental health services; medical services; dental services; active citizens; lunch programs; pharmacy

**Community Health Needs Assessment
Decatur County, IA Weakness (Color cards) N= 41**

CODE1	CODE2	CODE3	Today: What are the weakness of our community that contribute to health ?
ACC	BH		Appointment wait time; appointments as schedule; better mental health care; better follow-up
ACC	EYE		Easier scheduling; expand options of available services; eye doctor
AMSH	INSU		Amish support; support for uninsured
BH	AMSH	PNEO	more mental health services; Amish access; prenatal care for more
BH	DOCS	TRANS/NUT R	Additional mental health providers; recruit additional physicians; easier access to mental health; transportation public education; healthier foods
BH	EYE	TRANS	Available DHS; difficult recruiting metal health providers; vision services in county; transportation
BH	ACC	DENT/EYE/E CO	Mental health needs; wait time at clinic; dentist; eye doctor; economic development
BH	ECON	ADAY/ACC/AMSH	Mental health services; better economic development; adult day care; wait times at clinics; Amish access
BH	EYE	INSU	Mental health system; access to eye doctor; enrollment of qualified population in Medicaid or FOHC sliding fee
COLLAB	EYE	WELL	More collaboration between entities; local eye doctor; education community regarding heath issues
COMM	BH		Education about what services are available; more mental health proviers with access to follow-up
DOCS	OBGYN/FIT	ECON/EYE/FAM	Need more doctors - OB; more physical activity for children; more jobs; eye doctor; more 2 parent homes
ECON	OBES	WELL/BH	Lack of business; lack of events/outings for younger generation; obesity; activeness; community education programs; mental health
ECON/BH	DHS	EYE/ADAY	Economic development; mental health; access to DHS; eye doctor; adult day care
EMER	EYE	ACC/IMMU/BH	Decrease ER utilization; need optometrist; vision screenings; physician availability; vaccination rate; improve utilization of mental health
EYE	ECON		Eye doctor and screenings; more grant money
EYE	HH		We need an eye doctor; we need looser requirements for home health care for elderly
EYE/MAMO	BH/ADAY/ECON	ACC/OBES/DHS	Eye care; percent of mammography; mental health provider; cross county mental health care; adult day care; local DHS office; economic development; wait times at clinics and ER use; obesity
FIT	BH		Access to fitness center; no decent place to work out after hours; walk out of mental health
HH	ADAY	ORTHO/PED	Assisted living needs; adult day care; orthopedic procedures; pediatrics
HH	DOCS	ADAY	Need more assisted living beds; need more doctors available; adult day care
IMMU	DOCS	BH/ADAY	Immunization; more providers; behavioral services – statewide; adult day care

**Community Health Needs Assessment
Decatur County, IA Weakness (Color cards) N= 41**

CODE1	CODE2	CODE3	Today: What are the weakness of our community that contribute to health ?
PREV	DOCS/AGE	AMSH/BH/T RANS	Preventative health care; number of practitioners; senior adult services; communication with Amish communities; mental health services; transportation
SPEC	ACC	DOCS	Specialty doctors to make house calls to SNF; low census at SNF; long wait and clinic – need more doctors
SUIC	DRUG/ALC/ BH/INSU/SM OK	FAM/OBGYN	Fire arm safety; suicide prevention; drug and alcohol rehab; mental health; statewide Medicaid adoption; better smoking prevention; sex education; comprehensive women's health services; effective anti-bullying program
TRANS			More supportive services (transportation) for low economic
TRANS	DOCS	COLLAB/AG E/ADAY/NU T	Transportation; more providers; collaborate between schools, public health and clinics; senior meals; adult day care

Decatur Town Hall Notes 7-8:30 am 4/11/13

In Attendance –

In Attendance:

- Parents
- Consumer advocates
- Farmers
- Small Business
- School
- Elected Officials
- Providers
- Nurses
- Home Health/Nursing Home/Hospice
- Veterans

NOTES: WHITE CARD

County Offers:

- 2 Wellness and Fitness Center: Lamonai & Leon
- Federal Qualified Clinic

Tab 1 – Demographic Trends

- Population Declining
- Veterans have to go outside of county for care

Tab 2 – Economic/Business Trends

- Higher poverty rate
- 76% Free and reduced rate
- Unemployment – Currently 4.2%

Tab 3 – Education Profile

- See an increase in school health
- Between 5-7 required vaccinations to go to school
- Healthy lunches being served at school

Tab 4 – Maternal and Infant Population

- Smoking is a key issue in community

Tab 5 – Hospitalization / Providers

- Enough physicians in county??

Tab 6 - Behavior Health Profiles

- Confusion regarding public vs. private dollars spent

Tab 7 – Risk Indicators & Factors

Tab 8 – Uninsured

Tab 9 – Mortality Profile

Tab 10 – Preventative Quality Measures
FIX INCORRECT TREND COLOR

SURVEY RESULTS

COMMUNITY PERSPECTIVE QUESTIONS:

News / Trends

Strengths (Colored Cards)

- A proactive public health
- FQHC
- New Hospital
- Variety of recreational areas – trails, state parks, county conservation
- Wellness centers
- Good community volunteerism
- Pharmacies
- Dental Clinics
- Good Visiting specialists
- Home Health
- 340B Programs at Pharmacy through community health center (discount drug benefit)
- Good Schools
- County Ambulance
- Assisted living
- Volunteer EMS
- Decatur County Community Services (general assistance)
- Nursing Homes
- Hospice

Strengths (Colored Cards)

- School Lunch program
- Summer food programs
- Backpack buddy programs (weekend)
- Collaboration of county agencies
- Strong ministerial alliances
- Financial support coalition
- Grants through Affordable care act
- Food Pantries

Weaknesses / Areas of Improvement (White Cards)

1. Mental health – providers, placement, follow-up 25
2. Eye doctor 21
3. Adult day care 8
4. Education on community services 4
5. Local DHS office – better access 12
6. Economic development 20
7. Clinic availability 18
8. Obesity, Nutrition Education 8
9. Meal site coordination 5
10. Transportation 7
11. Assisted Living Facilities 3
12. Expand Medicaid 5
13. Nighttime childcare 0
14. Local prenatal/postnatal 4
15. Iowa Works Improvement 3
16. Amish Outreach 9
17. Parental Health Education 2
18. Improve communication between communities 0
19. Fitness Center in Lamoni 2

Public Notice & Invitation

[VVV Research & Development INC]

For immediate release

Contact: Tara Spidle, CFO

Decatur County Hospital and Decatur County Public Health to host community health needs town hall meeting on Thursday, April 11th

In order to gauge the overall health needs of our community, Decatur County Hospital in conjunction with Decatur County Public Health invites the public to participate in a Community Health Needs Assessment Town Hall roundtable on **Thursday, April 11th from 7:30 – 9:00 am** at the Leon Golf & Country Club, 1204 W 1st ST, Leon, Iowa.

This event is being held to identify and prioritize the health needs of our community. Feedback from the event will also serve to fulfill both federal and state mandates.

“Our goal is to gather input from people throughout our service area regarding their perceptions of the current state of our population’s health and what they believe are the most important health needs that our communities need to address” said Lynn Milnes, Decatur County Hospital CEO. “We encourage your attendance, as your input is very valuable to build a healthy community.”

A light breakfast will be served. Vince Vandelaar, principal consultant at VV Research and Development, Inc. from Olathe, Kansas, has been hired to facilitate this meeting.

For more information, please contact Tara Spidle, Chief Financial Officer at (641) 446-2340.

##



March 21, 2013

Dear Community Member,

Decatur County Hospital and Decatur County Public Health are partnering to perform a Community Health Needs Assessment. Our goal is to gather input from people throughout our service area regarding their perceptions of the current state of our population's health and what they believe are the most important health needs that our communities need to address.

We are inviting you to attend a very important Decatur County Town Hall roundtable meeting to review basic community health needs assessment information and rank our community health priorities. We have retained the services Vince Vandelaar of VVW Research and Development, Inc. from Olathe, KS, to facilitate this meeting and prepare our report.

Your input is valuable and will be incorporated into our final health needs report. Please join us on **Thursday, April 11th, from 7:30- 9:00 am** at the Leon Golf & Country Club, 1204 W 1st St, Leon, Iowa. A light breakfast will be served that morning.

We look forward to seeing you at the Town Hall meeting, and appreciate your input.

Sincerely,

Lynn Milnes
CEO, Decatur County Hospital

Shelley Bickel
Director, Decatur County Public Health

**CHNA Report
contact :**



Vince Vandelaar, MBA
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***Adjunct Professor / Professional Healthcare
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