

Community Health Needs Assessments and Access to Care Update

Presented by the Iowa Department of Public Health
Governor's Healthcare Innovation and Visioning Roundtable
March 13, 2020

Presentation Overview



**Part 1: Community
Health Needs
Assessment, Health
Improvement Plans**

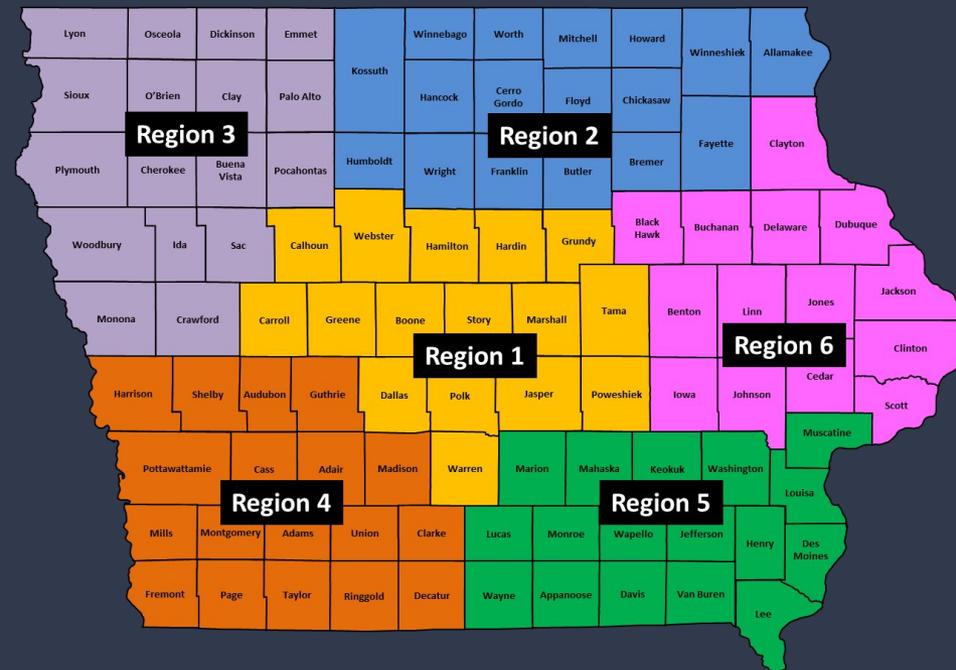
**Part 2: Access to Care
Data Tools and
Mapping**

Iowa's Public Health System

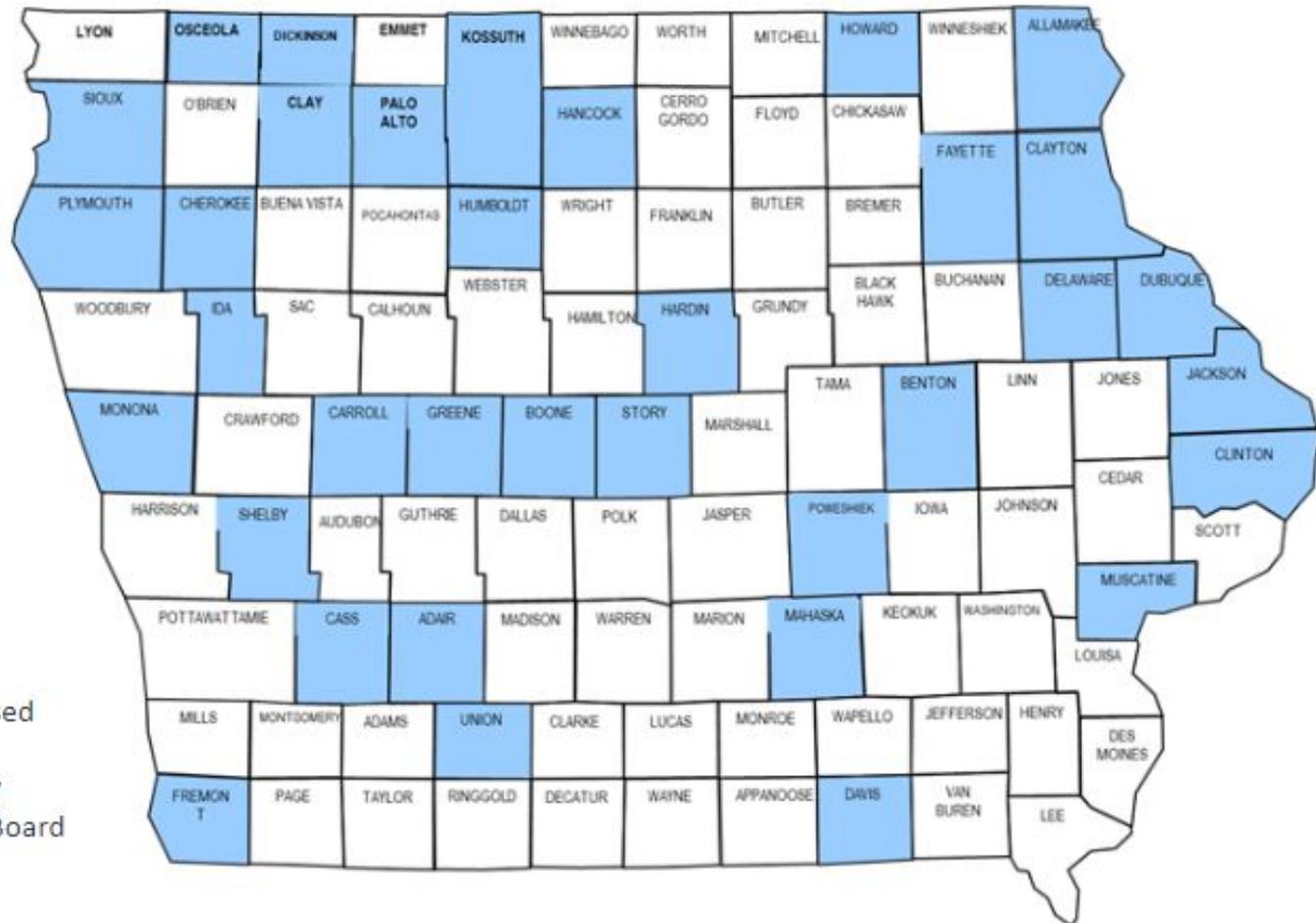
- Decentralized
 - 99 county Boards of Health
 - One city Board of Health (Ottumwa)
 - Six IDPH Regions with consultants

- Purpose

- “Jurisdiction over public health matters within its designated geographic area” - Iowa Code Chapter 137
- Serve as contractors for state and local funds
- Responsible for safeguarding the community's health. This goal is pursued through three core functions:
 - Assessment
 - Policy development
 - Assurance



Health System Based Local Public Health



 = Health System Based Local Public Health Agency/Not Directly Governed by Local Board of Health-July 2019

How does local public health assess needs?

CHNA & HIPs for 2016-2020 are posted on the IDPH website:

<https://idph.iowa.gov/chnahip/health-improvement-plans>

Due Date for next CHNA & HIP report

- Dependent on local timeline
- Most counties submit an annual evaluation and revision to IDPH (June)

- Tools include the Community Health Needs Assessment (CHNA) and the Health Improvement Plan (HIP)



- CHNA:
 - is an assessment of health needs in a community
 - sets priorities for action
- HIP sets an action plan to improve the community's health based on the CHNA priorities
- CHNA & HIP reports show what each county identifies as priorities (Iowa's top health issues)
- Local priorities are the building blocks for the state health assessment (SHA) and state health improvement plan (SHIP), known as *Healthy Iowans*

Who's participating?

- Board of Health - 85%
- Hospitals - 85%
- Local/County Gov't - 80 %
- Health Providers - 74%
- Education - 72%
- General Public - 70%
- Elected Officials - 67%
- Community Groups - 66%
- Business/Industry - 61%
- EMS - 54%
- Human Services Agencies - 52%

- Local public health agencies assure a community process takes place to assess needs and to develop and implement an action plan
- Non-profit hospitals must do a CHNA/ HIP every 3 years
- CHNA & HIP is strengthened by the engagement of community-based organizations, business and industry, elected officials, and others (e.g., the public)

Funding:

- Local Public Health Services contract funds from IDPH can be used to support CHNA & HIP activities
- Other funding from the state & county
- Partner organizations sharing costs
- Partner organizations in-kind resources such as staff and meeting sites



What are top issues identified in county CHNA/HIP?

Obesity, Nutrition & Physical Activity

Safe, Affordable Housing

Income/Poverty

Nutrition

Insurance Affordability & Coverage

Diabetes

Lack of Primary Care Services

Lack of Oral Health/Dental Services

Disaster Preparedness

Lack of Mental Health Services

Mental Health, Illness & Suicide

Water Quality

Occupational & Farm Safety

Radon

Obesity

Motor Vehicle Crashes

Transportation

Cancer

Adverse Childhood Experiences

Heart Disease

Falls

Sexually Transmitted Diseases

Flu Immunizations

Tobacco/Nicotine Use

Adolescent Immunizations

Substance Abuse

Physical Activity

Access to Health and Health Care

 Top Issues:	# of counties	# of hospitals (n=45)
Lack of Mental Health Providers/Services	69	39
Lack of Oral Health/Dental Providers/Services	42	5
Lack of Transportation to Health Services	36	8
Insurance, Uninsured, & Underinsured	31	2
Community Education--Community Awareness of Health Issues/Services Available, Health Literacy	28	19
Lack of Primary Care Providers/Services	28	14
Quality Healthcare & Services (care coordination, preventable hospitalizations, medication safety)	26	2
Lack of Providers/Services (unspecified)	23	3

What are the top issues in hospital-based CHNA/HIP?



Top Priorities by Hospital Affiliation

Top Five Avera Priority Areas (n=5)		Top Five UnityPoint Priority Areas (n=8)		Top Five Mercy Priority Areas (n=11)	
Mental health	80%	Mental health	100%	Mental health	82%
Obesity	80%	Obesity	75%	Obesity	73%
Health education	60%	Substance use	75%	Substance use	45%
Injury and abuse; Parenting skills; Translation and interpretation (tied at 40%)	40%	Tobacco use/vaping	50%	Access to specialists	36%
		Chronic illnesses; Transportation; Lack of primary care providers/services (tied at 38%)	38%	Primary care	36%

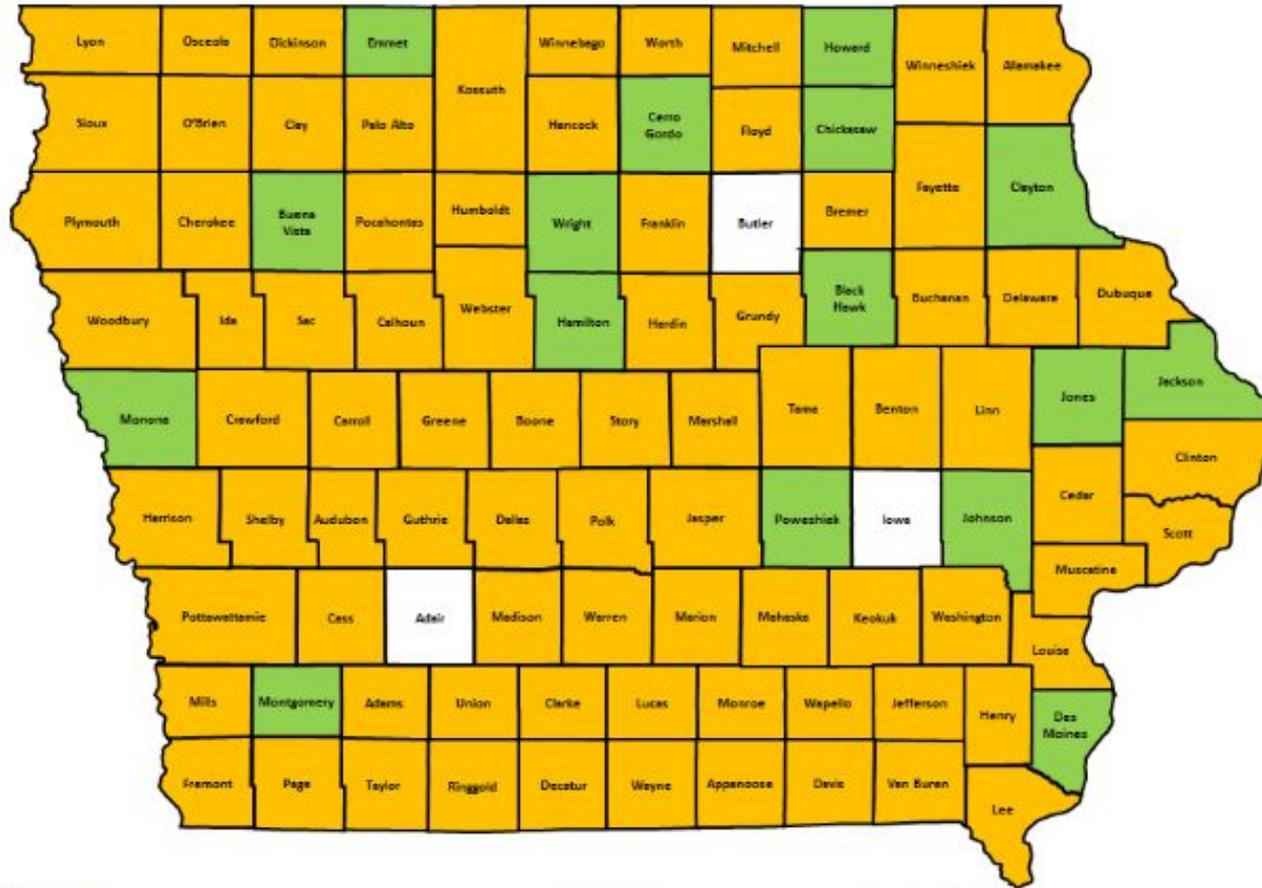
Table 3. Top 25 Health issues identified by Iowa Counties.

	HEALTH ISSUES IDENTIFIED BY 30+ COUNTIES OR TOP 20 BY POPULATION	# mentions	# counties	Population Rank
1.	NWS*: Obesity, Nutrition & Physical Activity	229	89	1
2.	Mental Health, Illness & Suicide	158	70	2
3.	SDH*: Access HS**: Mental Health (Lack of Providers and/or Facilities)	76	69	3
4.	Substance Abuse: Alcohol & Binge Drinking	96	56	6
5.	Tobacco/Nicotine Use	77	52	12
6.	SDH: Transportation	89	49	14
7.	Cancer	80	42	16
8.	SDH: Access HS: Oral Health/Dental (Lack of Providers and/or Facilities)	63	42	8
9.	Chronic Disease: Diabetes	46	42	13
10.	Substance Abuse: Prescription, Illegal, & Other Drugs	63	40	17
11.	Emergency Response: Network Infrastructure, Planning, Notification	41	40	28
12.	Income/Poverty / SDH: Economic Stability	63	38	15
13.	Immunizations - Unspecified Youth (ages 6-17) & HPV***	52	38	19
14.	Injury: Falls	46	37	23
15.	Injury: Motor Vehicle Crashes	51	37	30
16.	Environmental Health: Radon	38	37	26
17.	Environmental Health: Surface and Ground Water Quality- Drinking Water, Wells, Lakes/Rivers	38	36	21
18.	Infectious Disease: Sexually Transmitted Disease (STD)	41	35	11
19.	Chronic Disease: Heart Disease	39	34	20
20.	NWS: Access to healthy food / SDH: Economic Stability	45	32	10
21.	SDH: Access HS: Insurance, Uninsured and Underinsured	37	31	4
22.	Safe, Affordable Housing / SDH: Economic Stability	35	28	5
23.	SDH: Community Education--Community Awareness of Health Issues, Health Literacy	30	28	7
24.	SDH: Access HS: Primary Care (Lack of Providers and/or Facilities)	32	28	18
25.	NWS: Access to outlets for physical activity / SDH: Neighborhood and Built Environment	32	27	9

*Nutrition and Weight Status (NWS). **Social determinant of health (SDH). ***Health services (HS). **** Human papilloma virus (HPV).

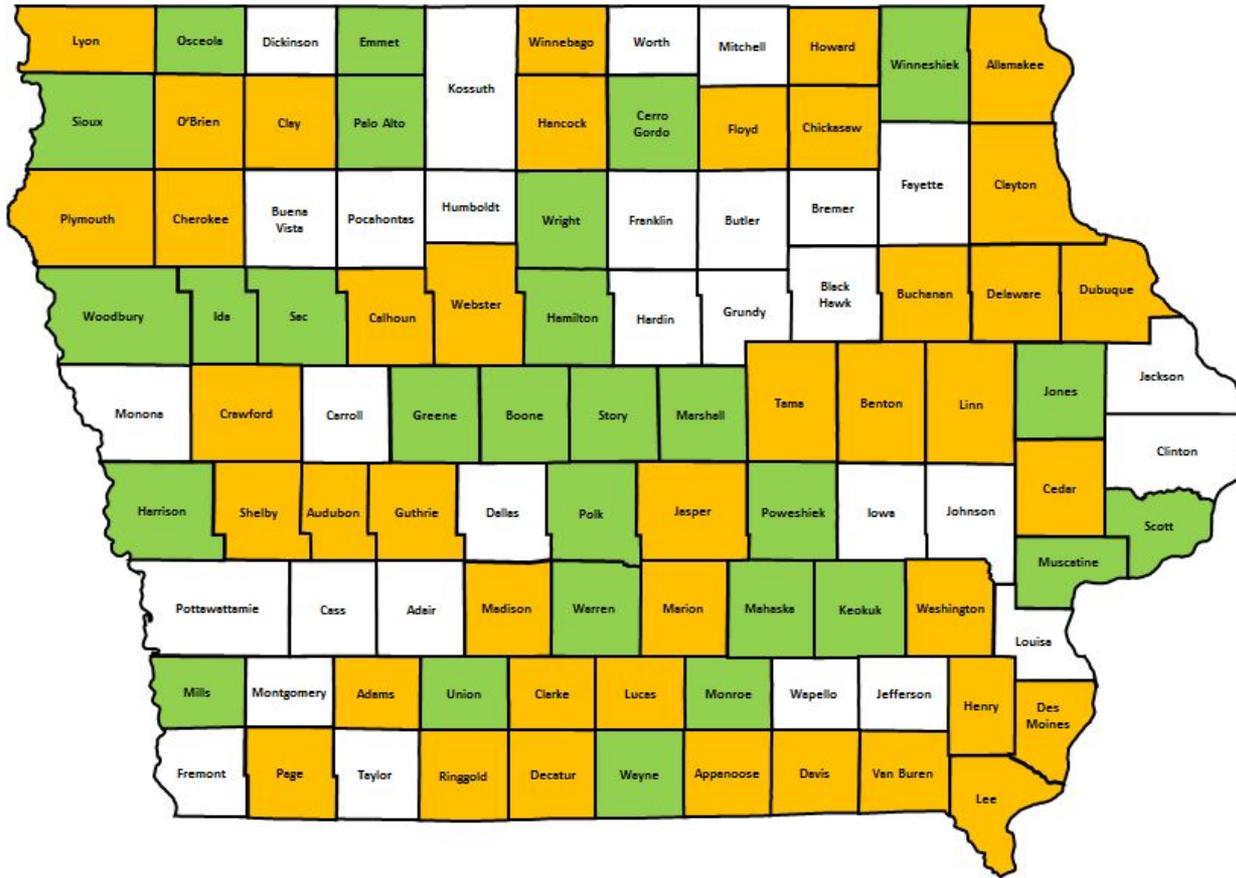
Top 20 CHNA/HIP Items By # of Counties, Population Rank

Examples



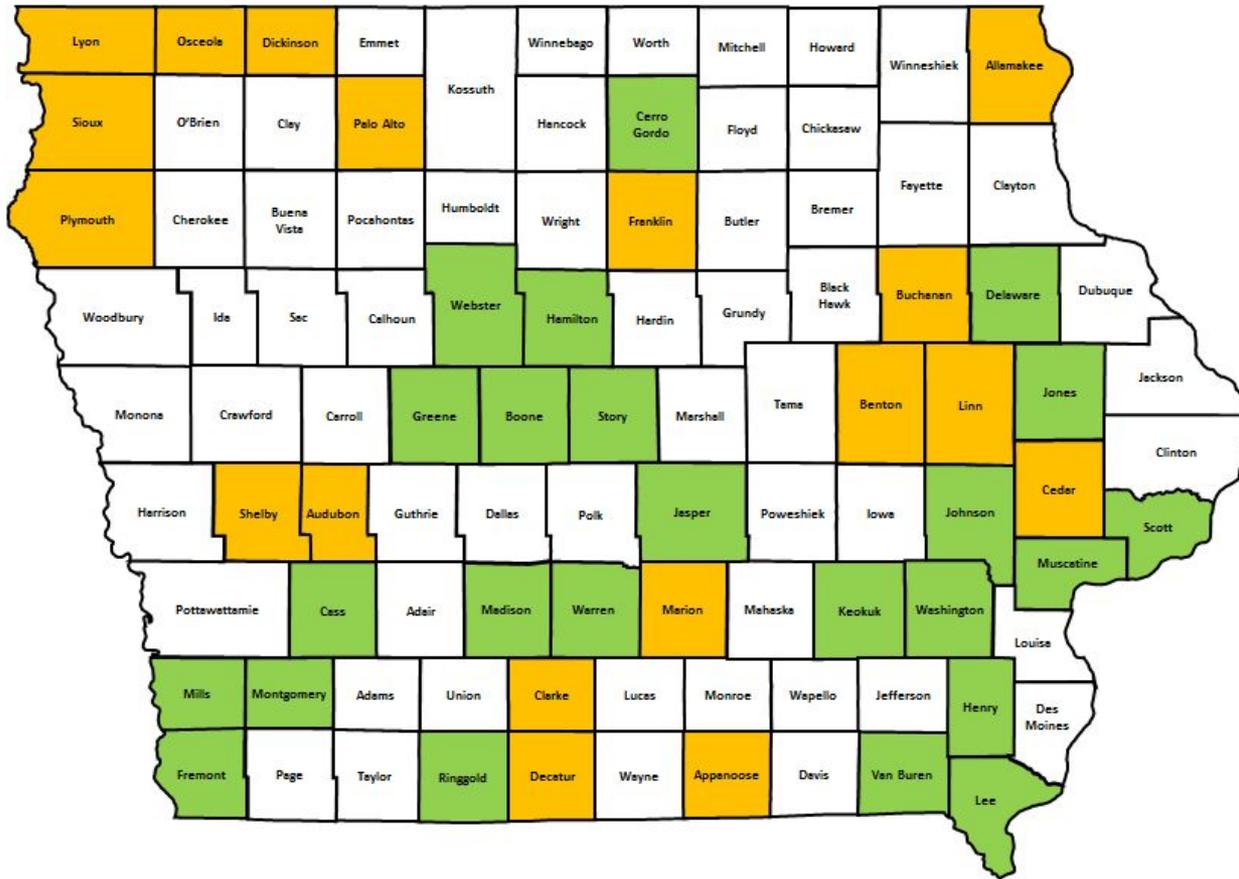
#1 in Health Infrastructure
 Identified
 Not identified

Access to Health Services or Providers



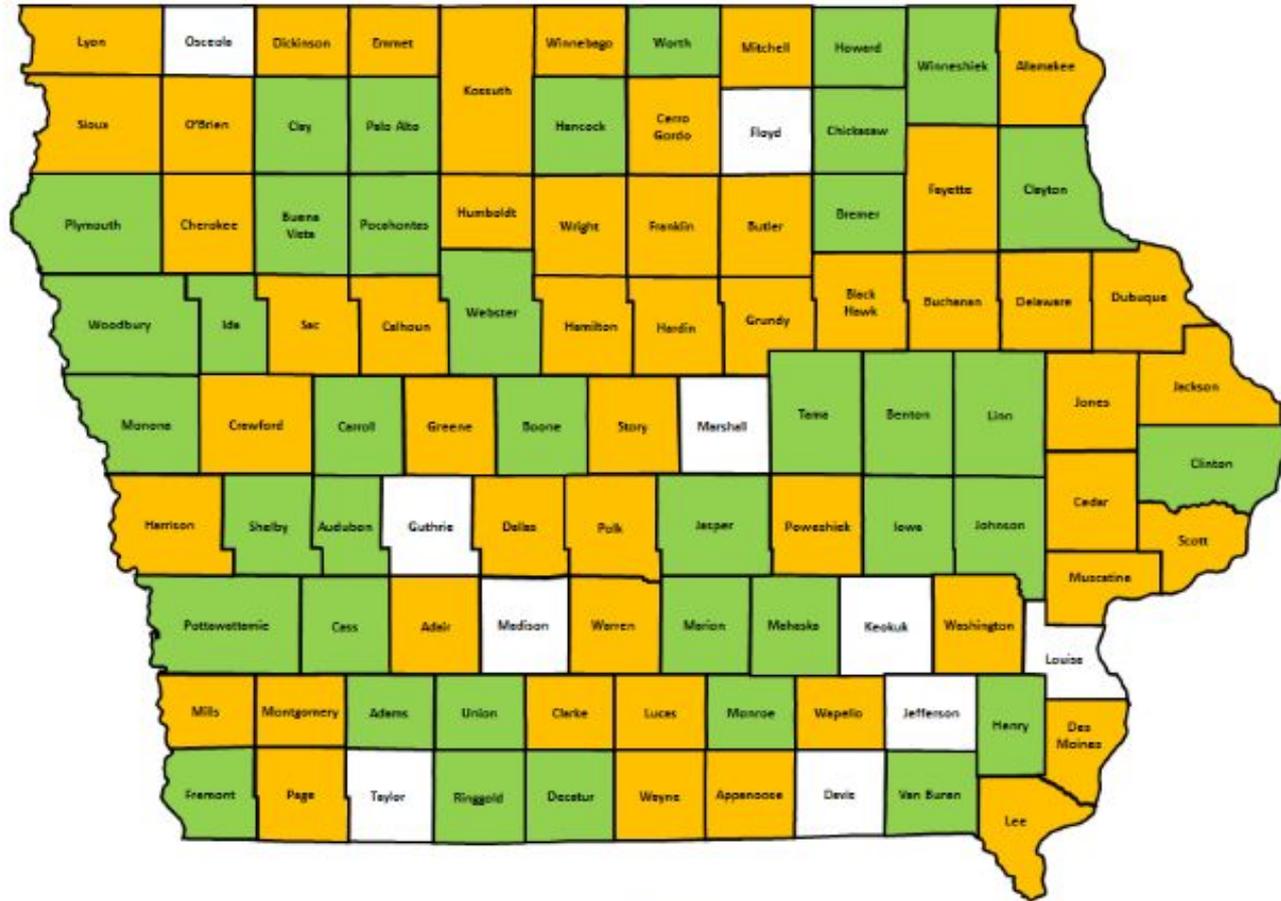
#1 in Health Infrastructure
 Identified
 Not identified

Access to Mental Health Services or Providers



#1 in Health Infrastructure
 Identified
 Not identified

Access to Dental/Oral Health Services and Providers



#1 in Healthy Living or Health Infrastructure
 Identified
 Not identified

Obesity, Nutrition and Physical Activity

Challenges for Acting on CHNA/HIP



N=70 out of 96

Getting involved with CHNA/HIP

- Contact your local public health agency
 - <https://idph.iowa.gov/lphs/local-public-health-agencies>
- Contact your local FLEX hospital
 - <https://idph.iowa.gov/policy-and-workforce-services/rural-health-primary-care/flex>
- Offer to help:
 - Coordinate meetings
 - Document progress
 - Funding



Part 2:

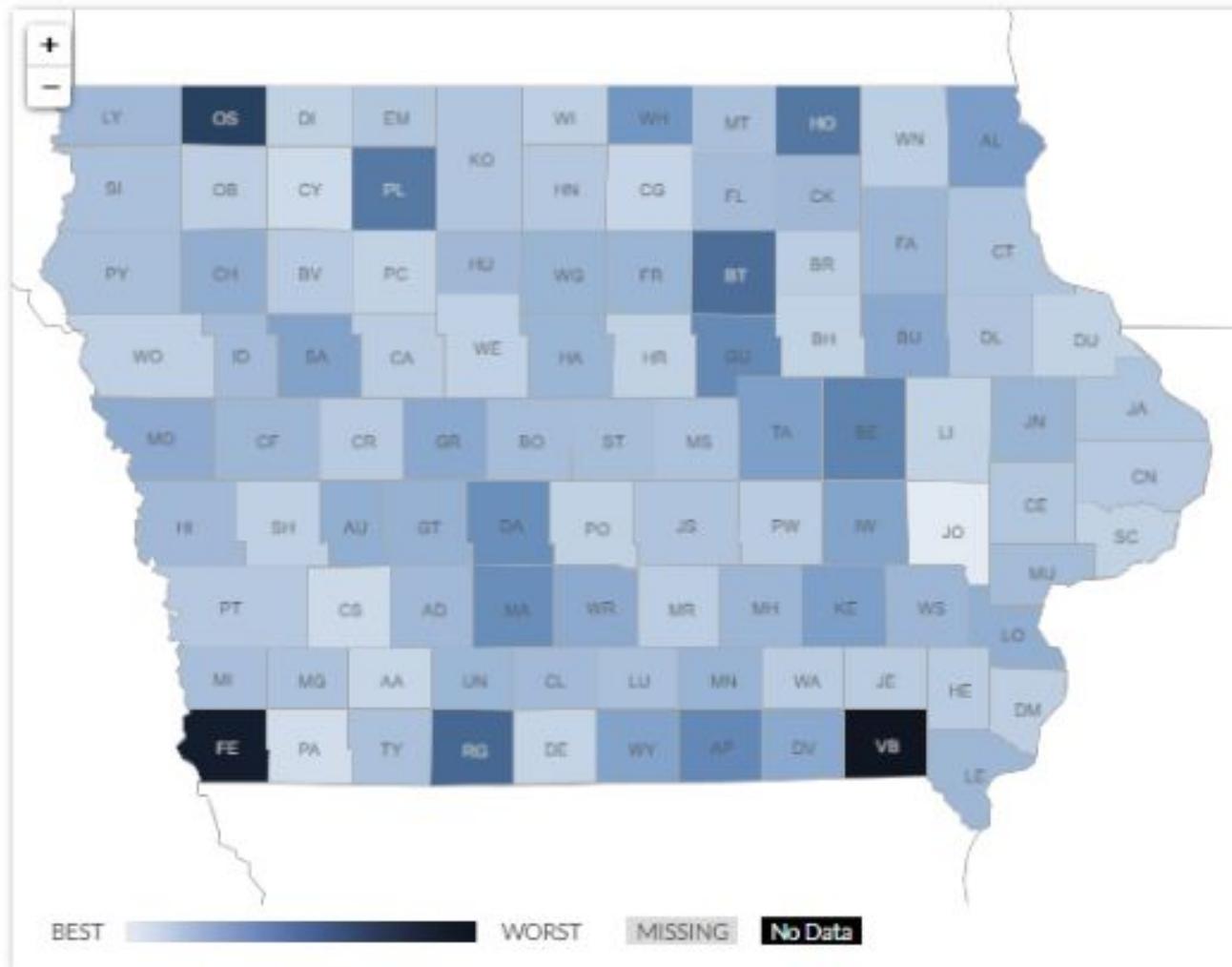
Access to Care:

Data Tools and Mapping

Primary & Dental Care Access Data



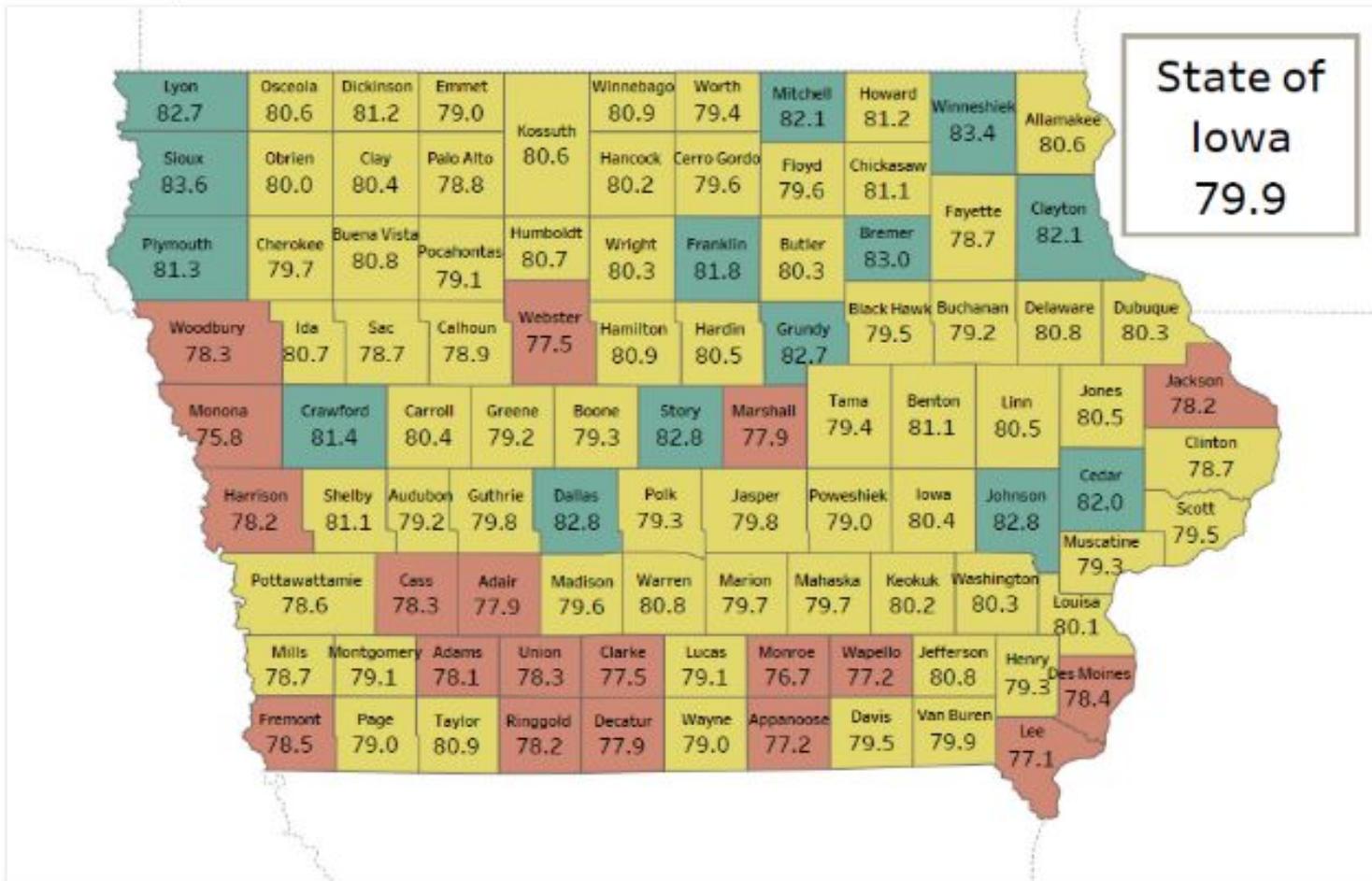
Dentists – Ratio of Population to Dentists



Birth Data



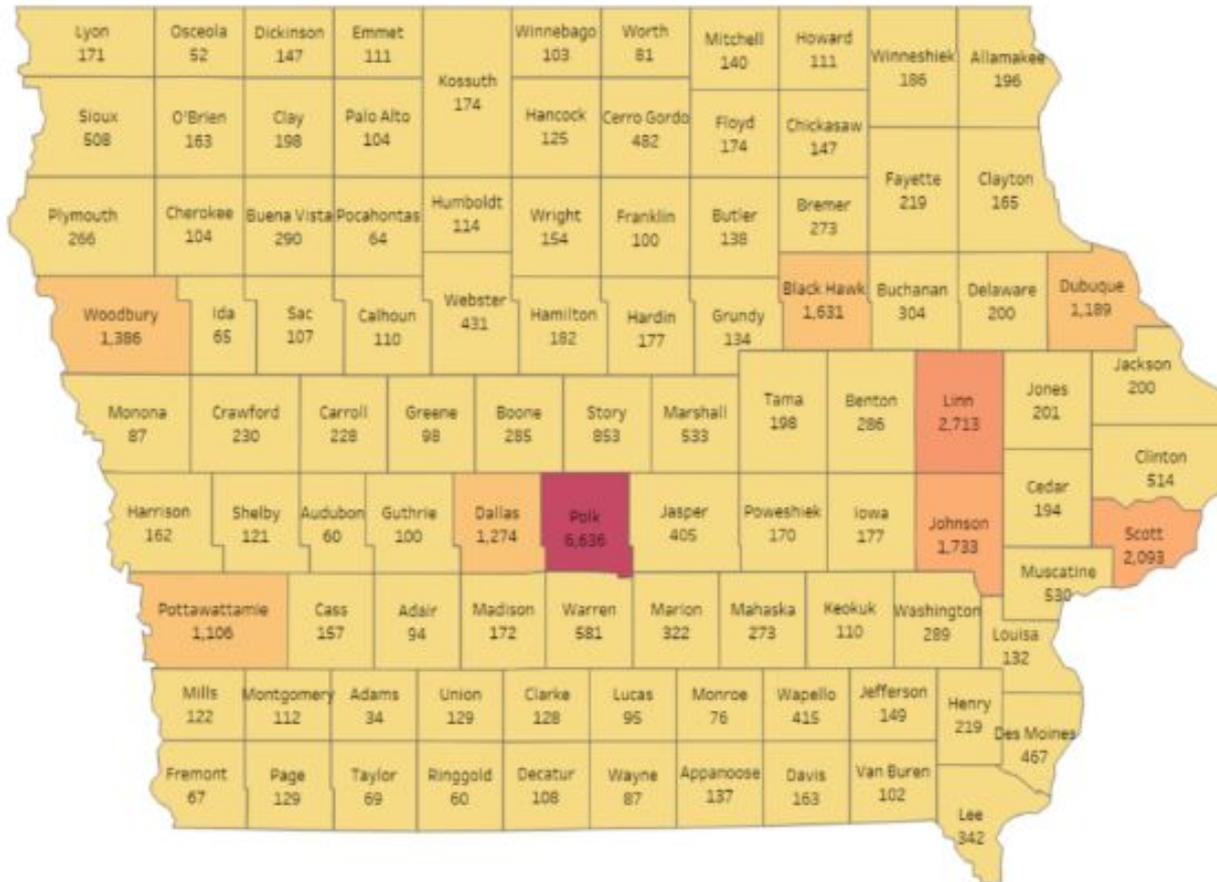
Life Expectancy at Birth



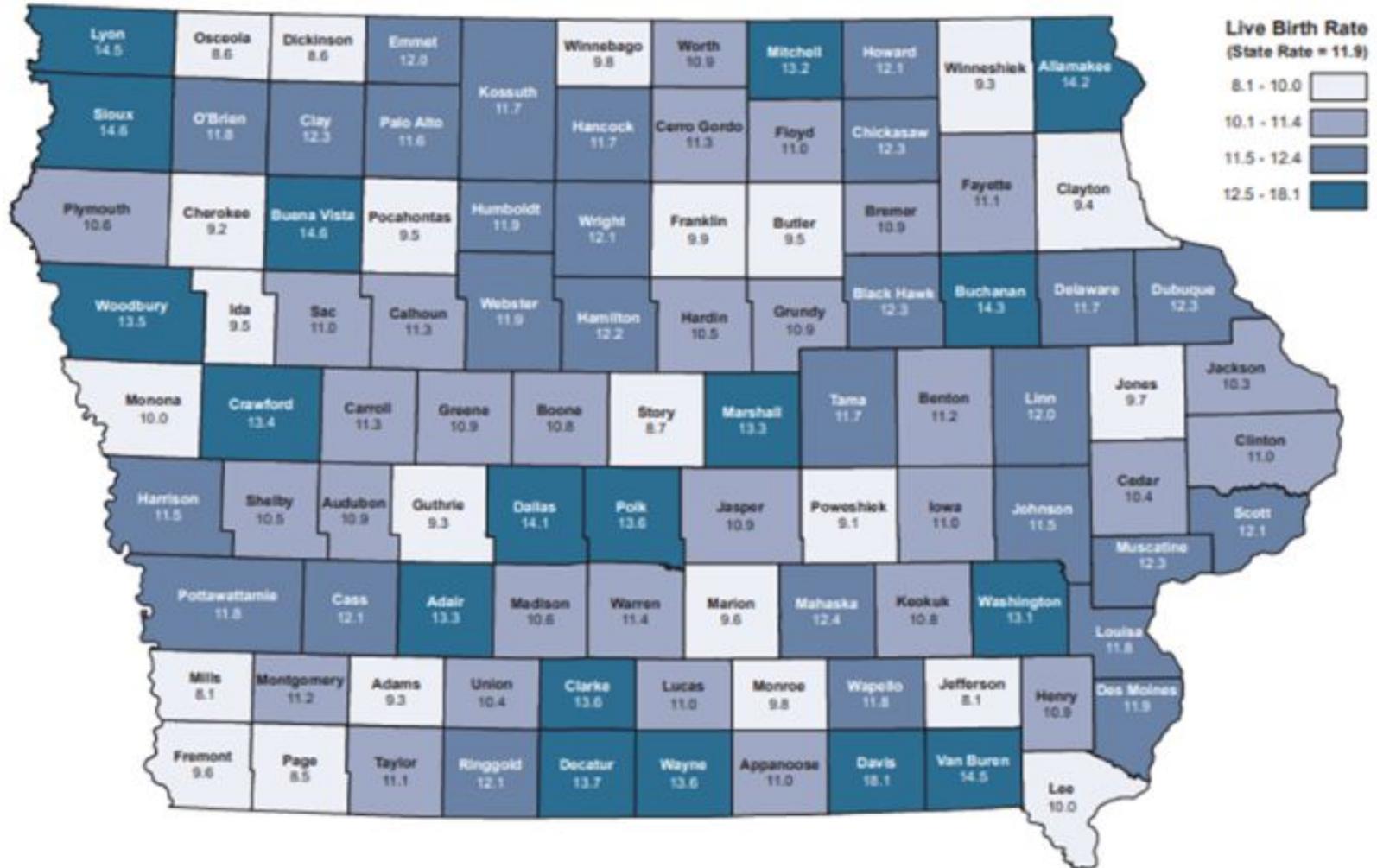
Life expectancy at birth is defined as:

'The average number of years a baby born in a particular area or population can be expected to live if it experiences the current age-specific mortality rates of that particular area or population throughout its life'

Birth Count by County

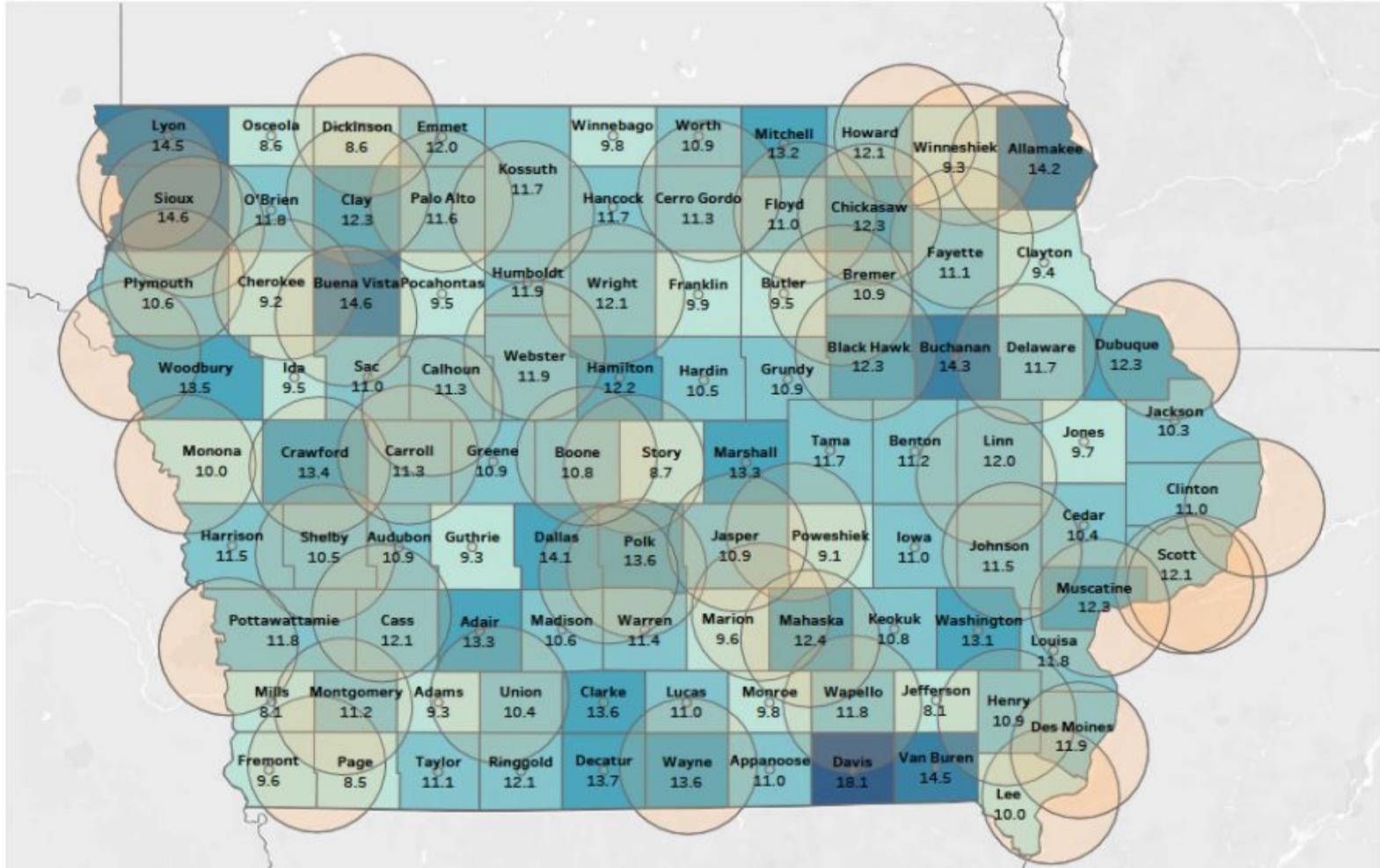


Birth Rate by County

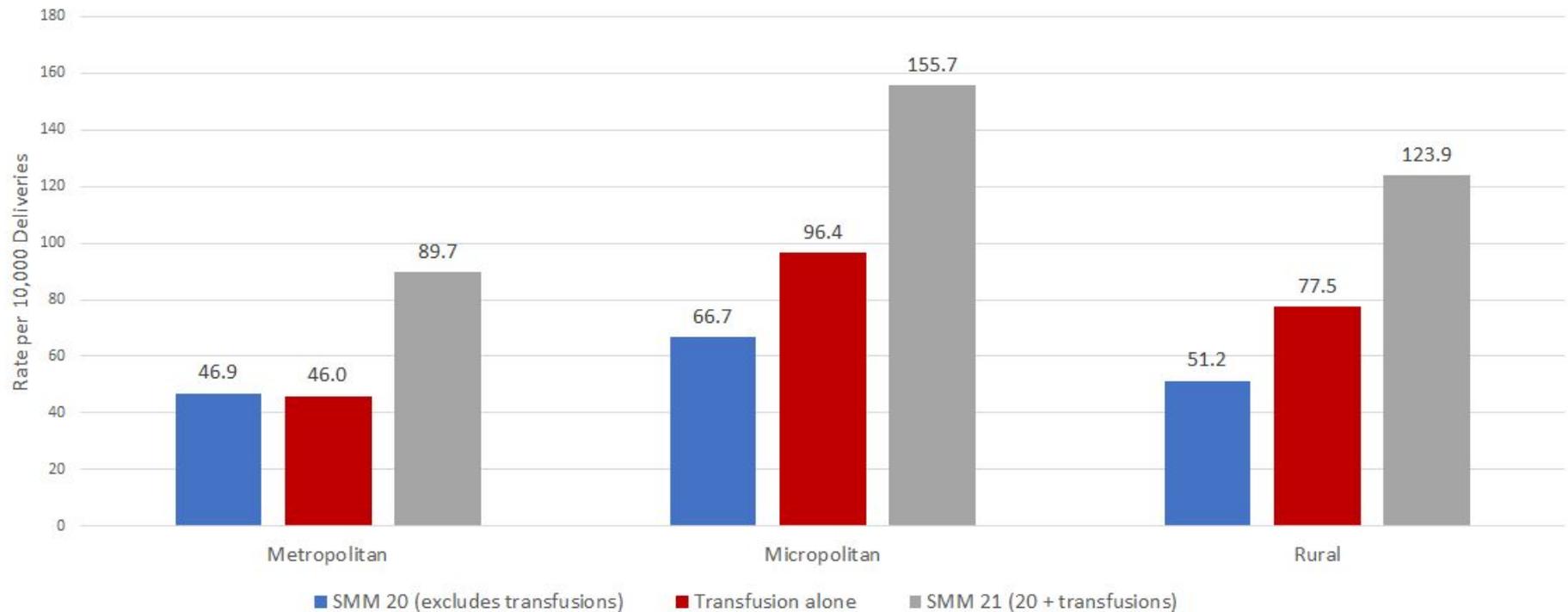


Iowa live birth rate per 1,000 population. 2018 Source: Iowa Department of Public Health

Birthing Facility 20-Mile Radius

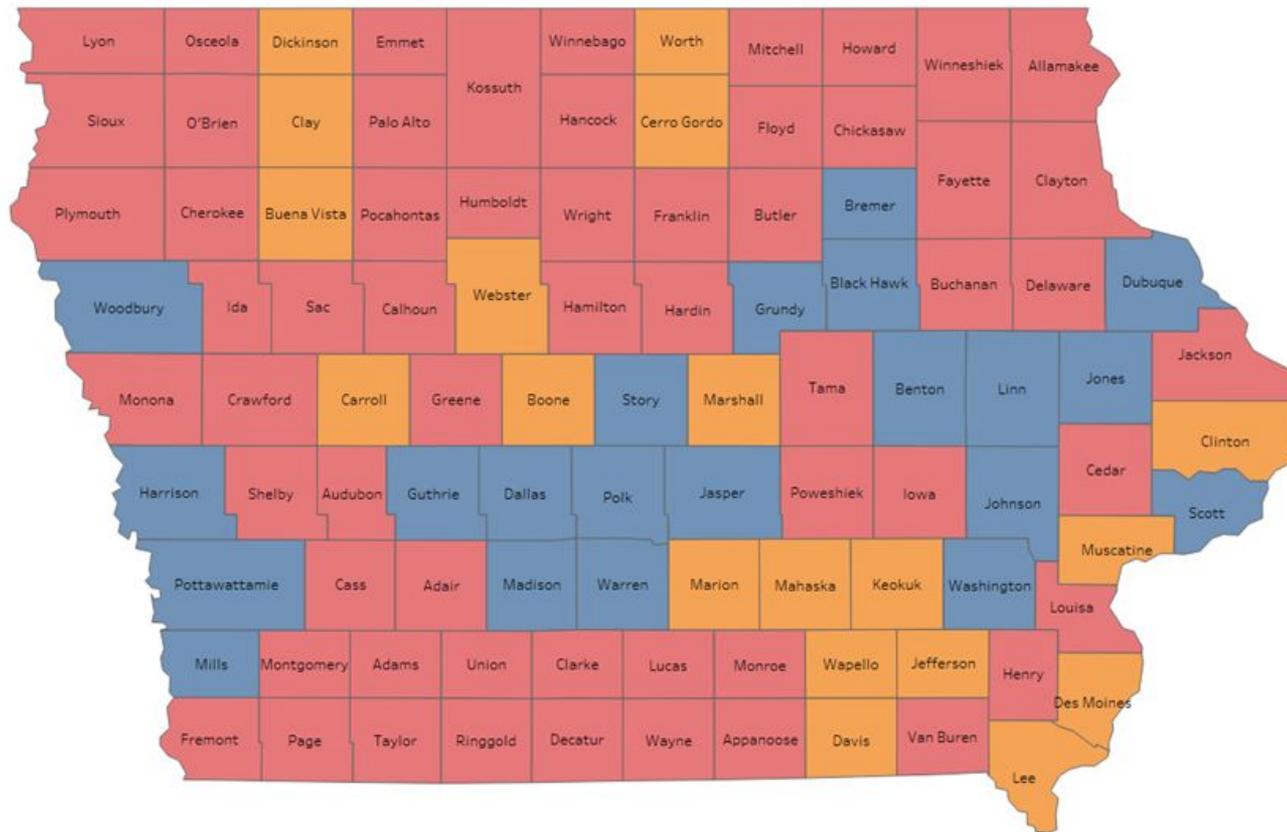


Severe Maternal Morbidity (SSM) by County Type



Iowa resident births, 2016-2018. Source: Iowa Department of Public Health

Metropolitan, Micropolitan, and Rural Counties in Iowa



© 2020 Mapbox © OpenStreetMap

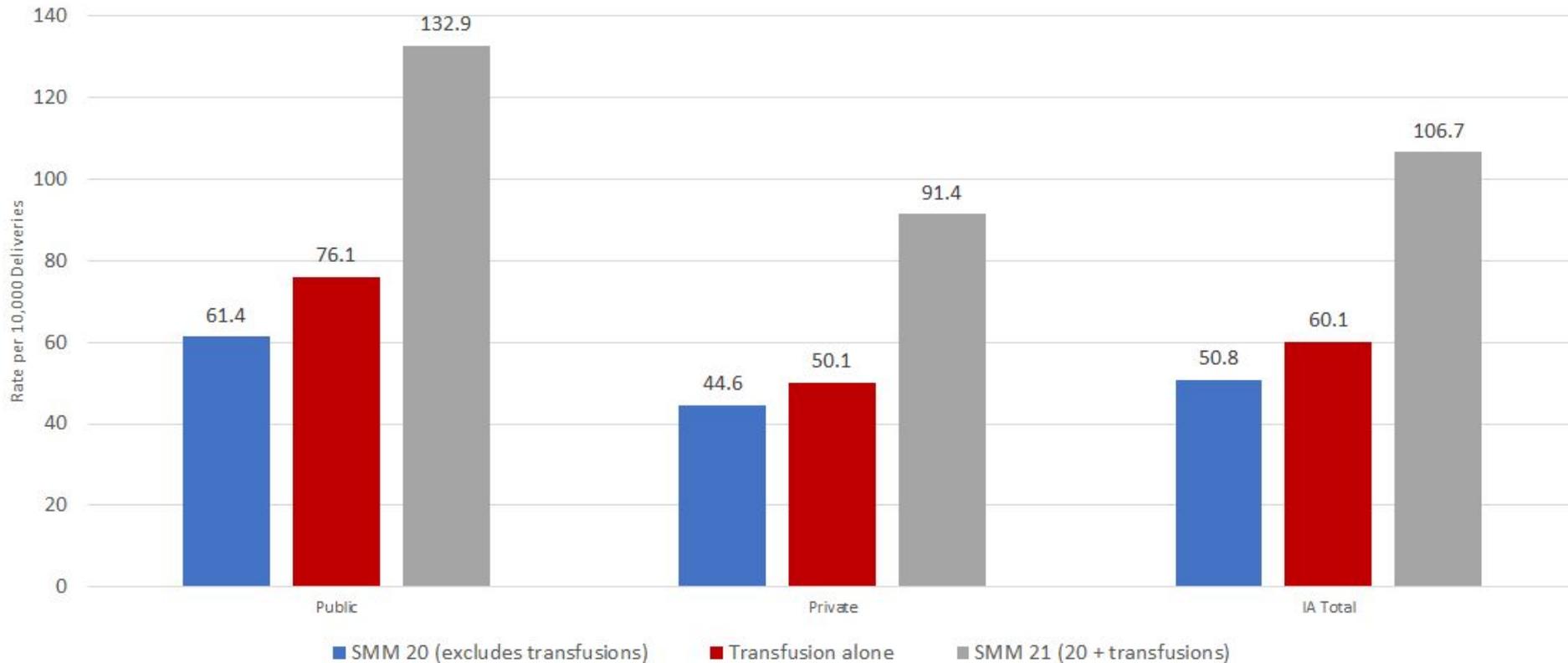
SMM_20

Metropolitan (46.9)

Micropolitan (66.7)

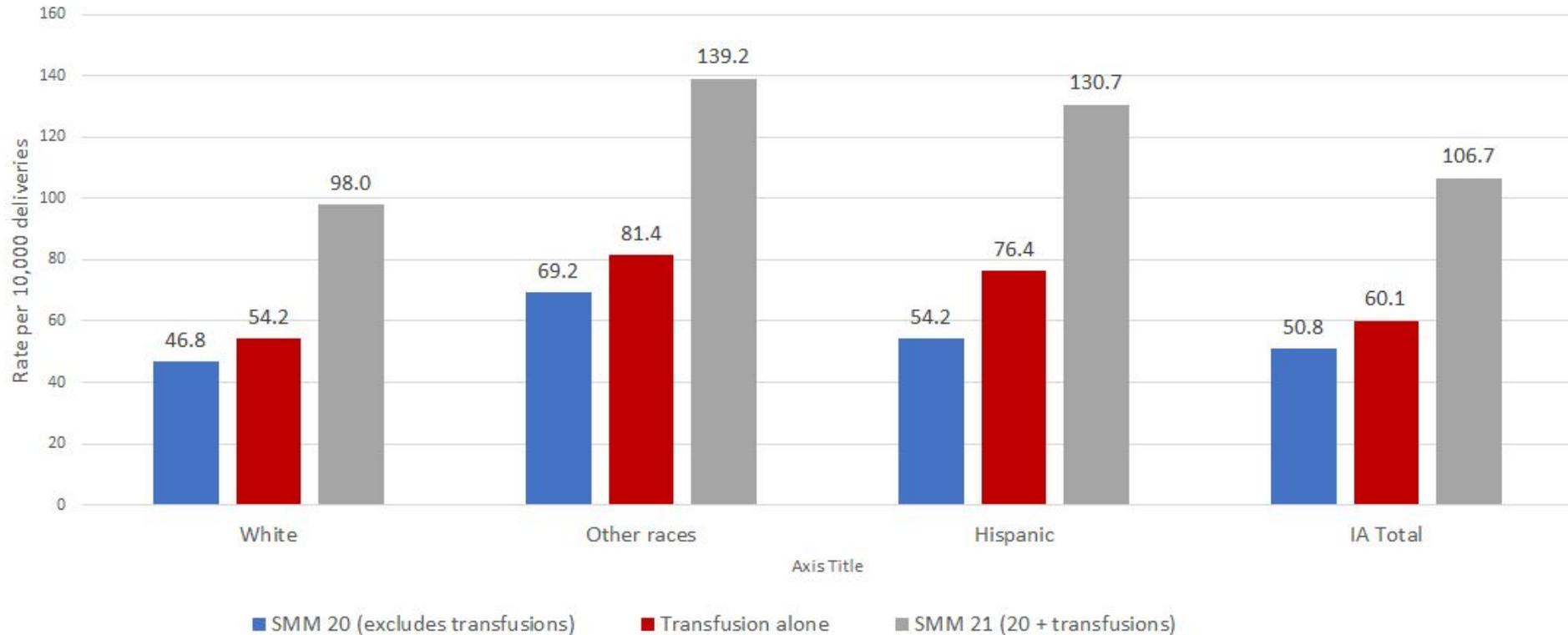
Rural (51.2)

Severe Maternal Morbidity (SMM) by Payment Source

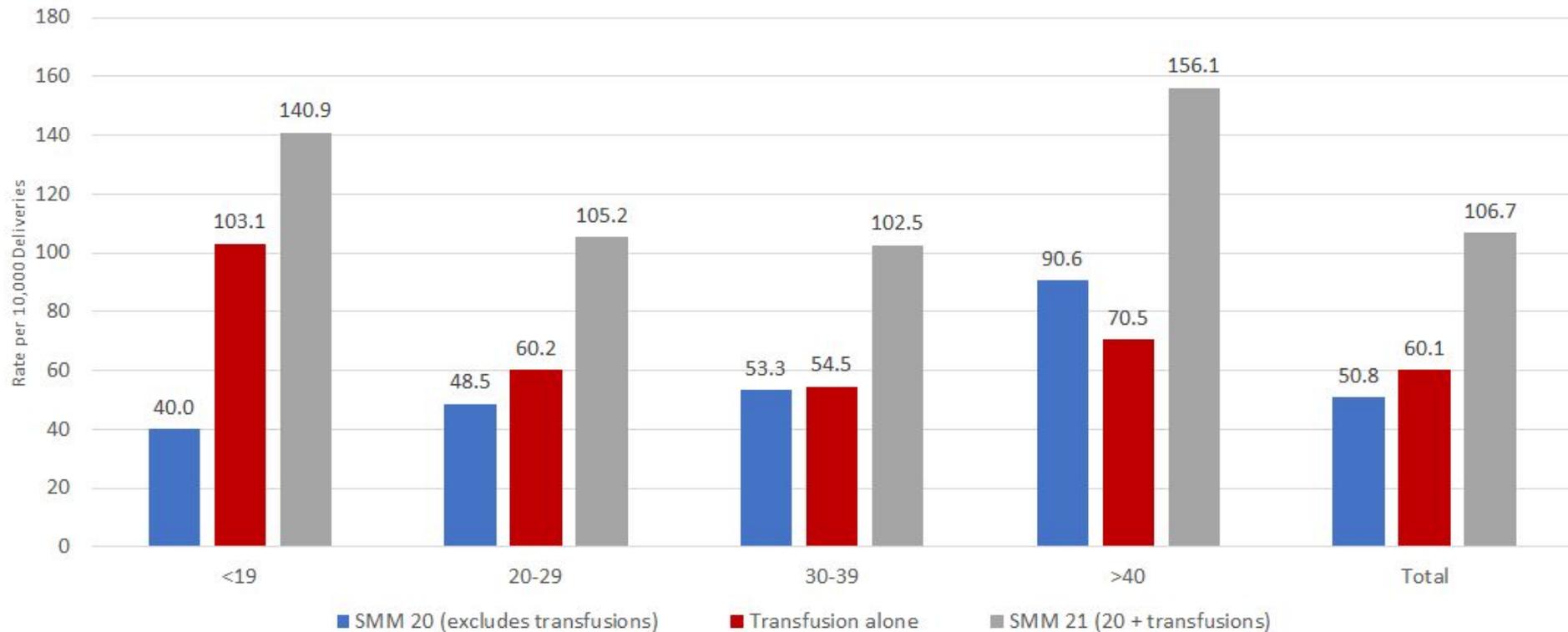


Iowa resident births, 2016-2018. Source: Iowa Department of Public Health

Severe Maternal Morbidity (SMM) by Race/Ethnicity



Severe Maternal Morbidity (SSM) by Age



Death & Hospitalization Data

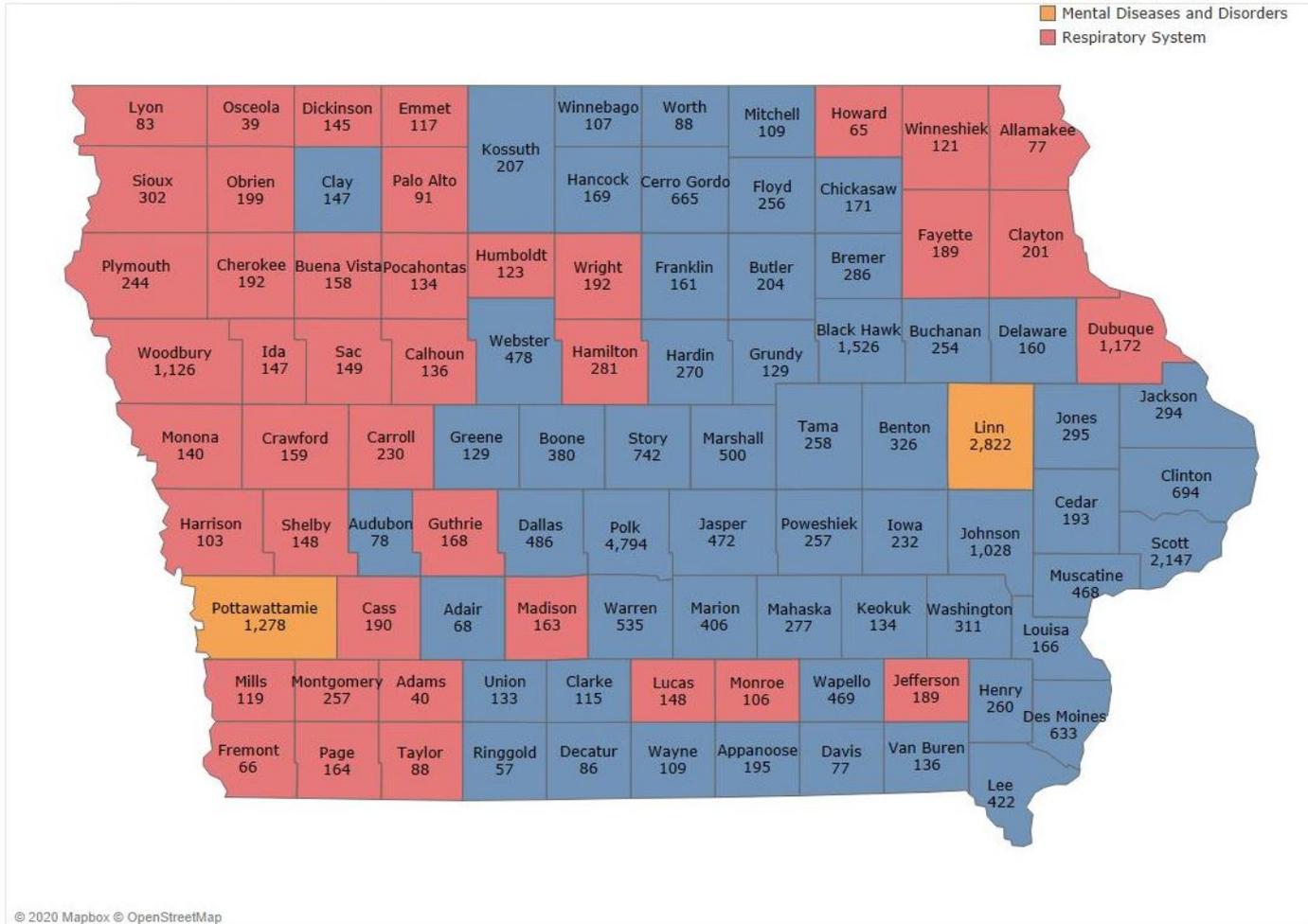


Top Cause of Inpatient Hospitalization by County

Top Cause of Inpatient Hospitalizations by County - 2018

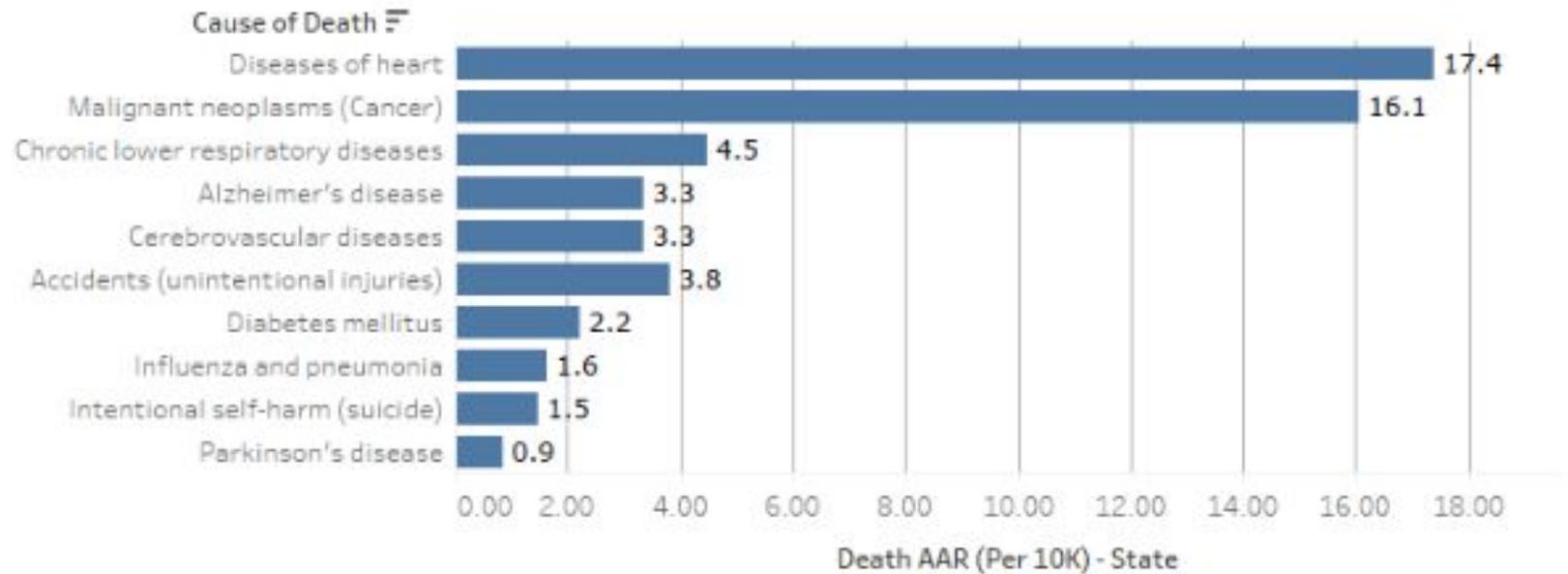
Source: IPOP (Inpatient/Outpatient Database)

- Major Diagnostic Category Label
- Circulatory System
 - Mental Diseases and Disorders
 - Respiratory System

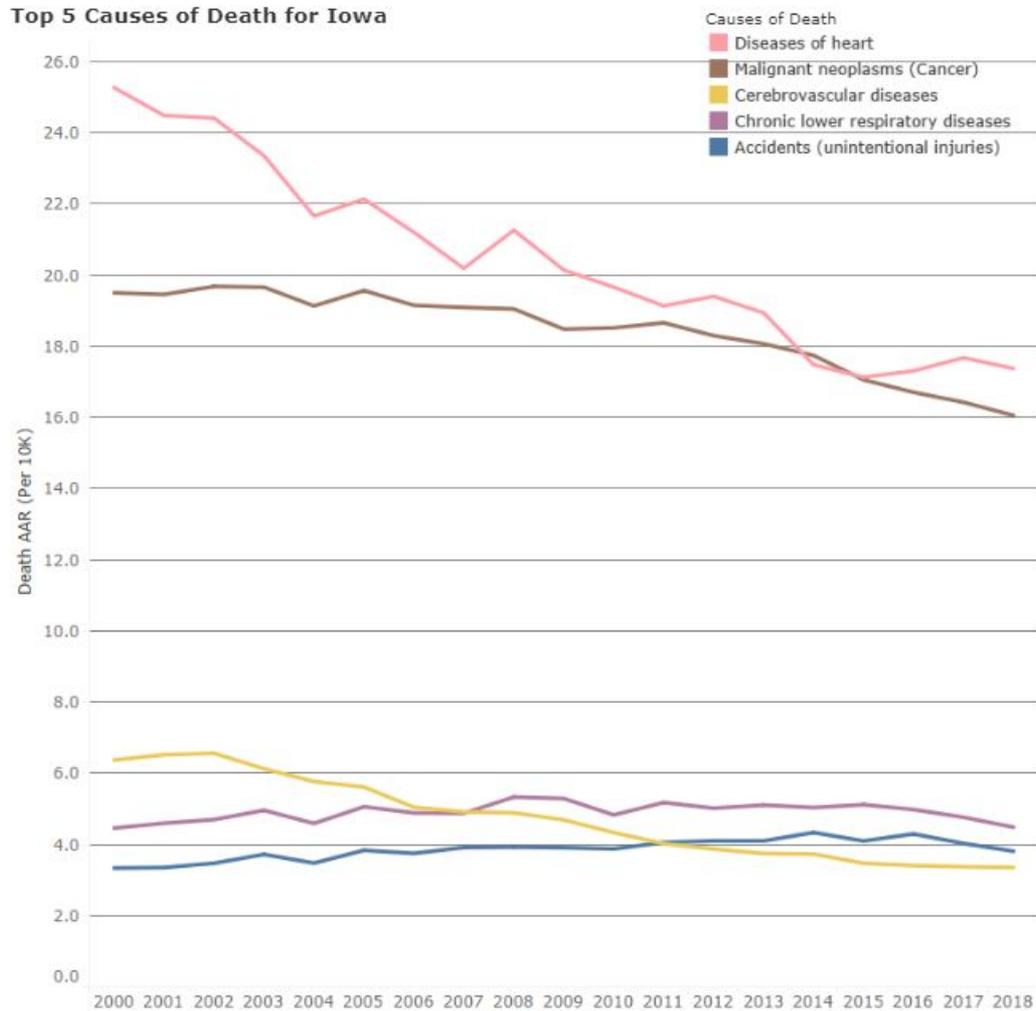


Top Causes of Death In Iowa

State Top 10 Causes - 2018

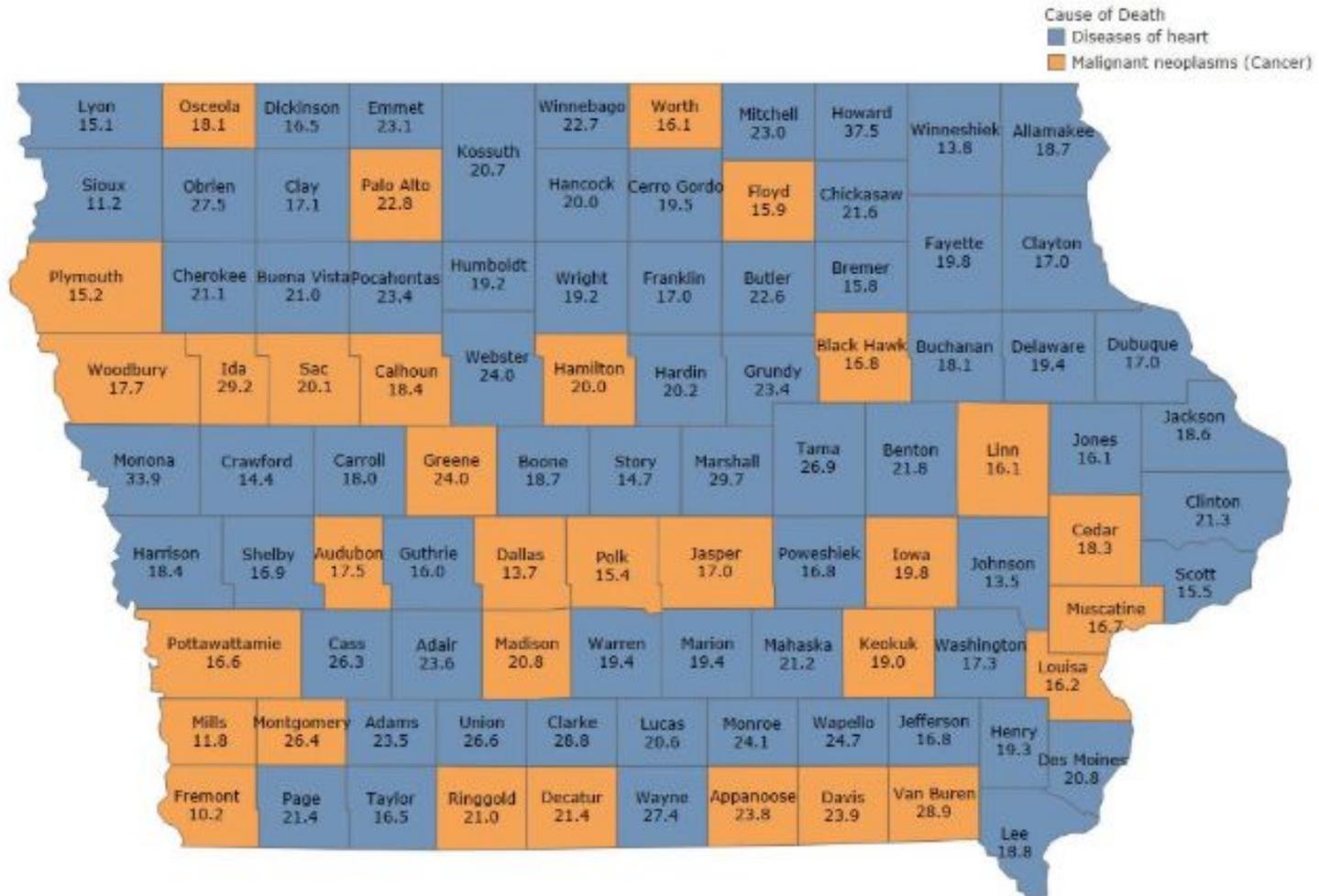


Top Causes of Death in Iowa Over Time

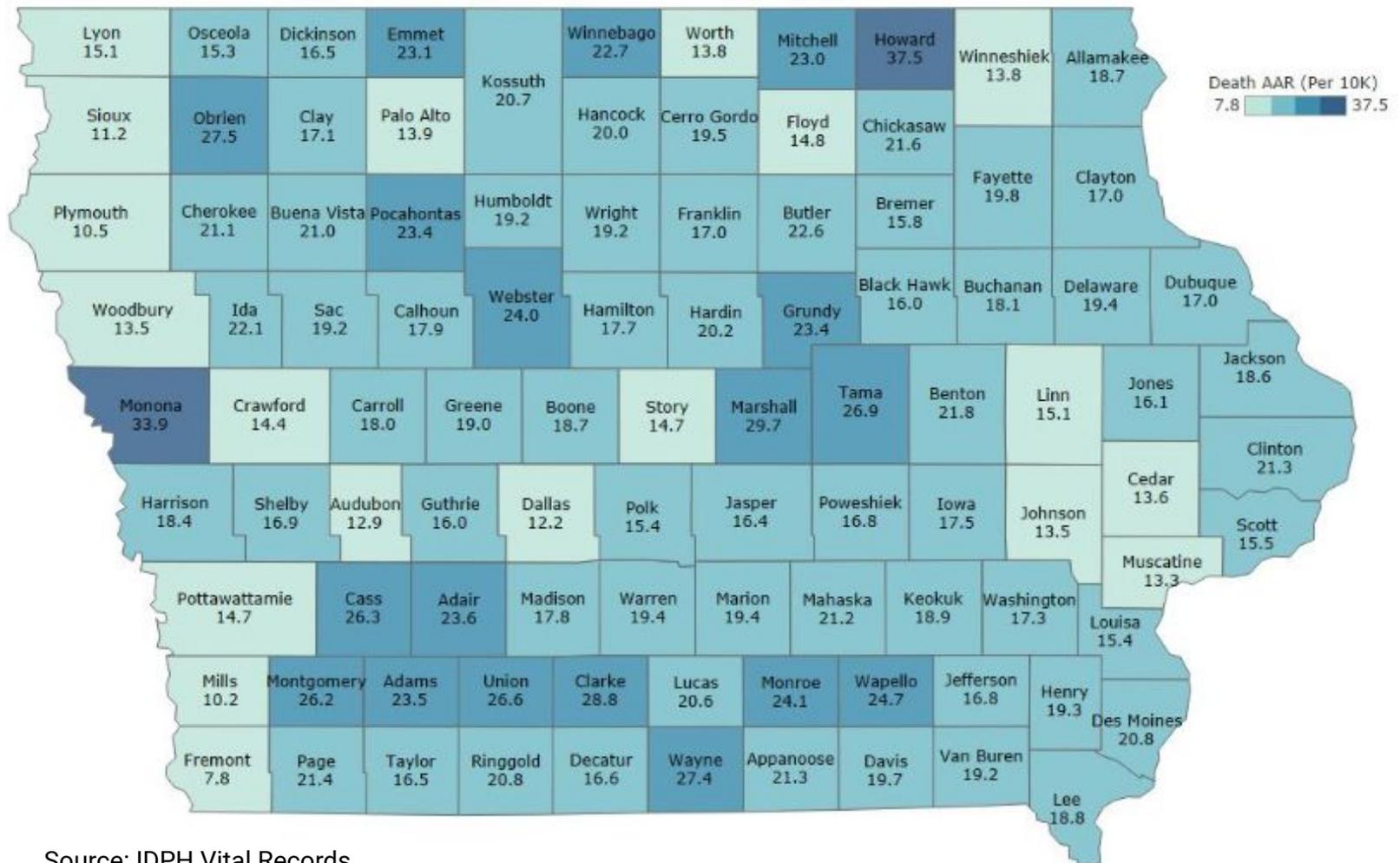


Source: Iowa Public Health Tracking Portal:
<https://tracking.idph.iowa.gov/People-Community/Deaths/Trends>

Top Cause of Death by County

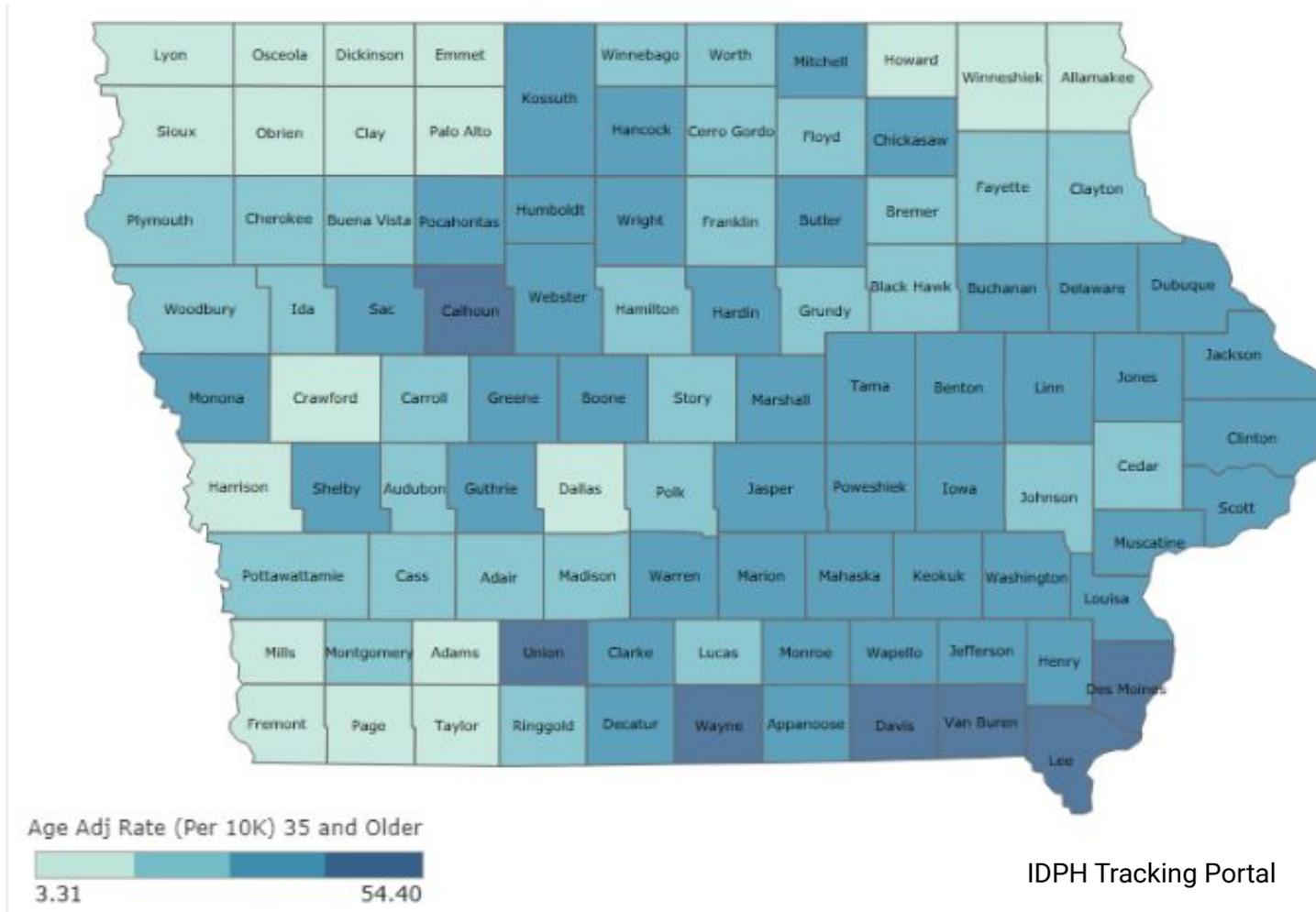


Top 10 Causes of Death by County, Diseases of Heart - 2018

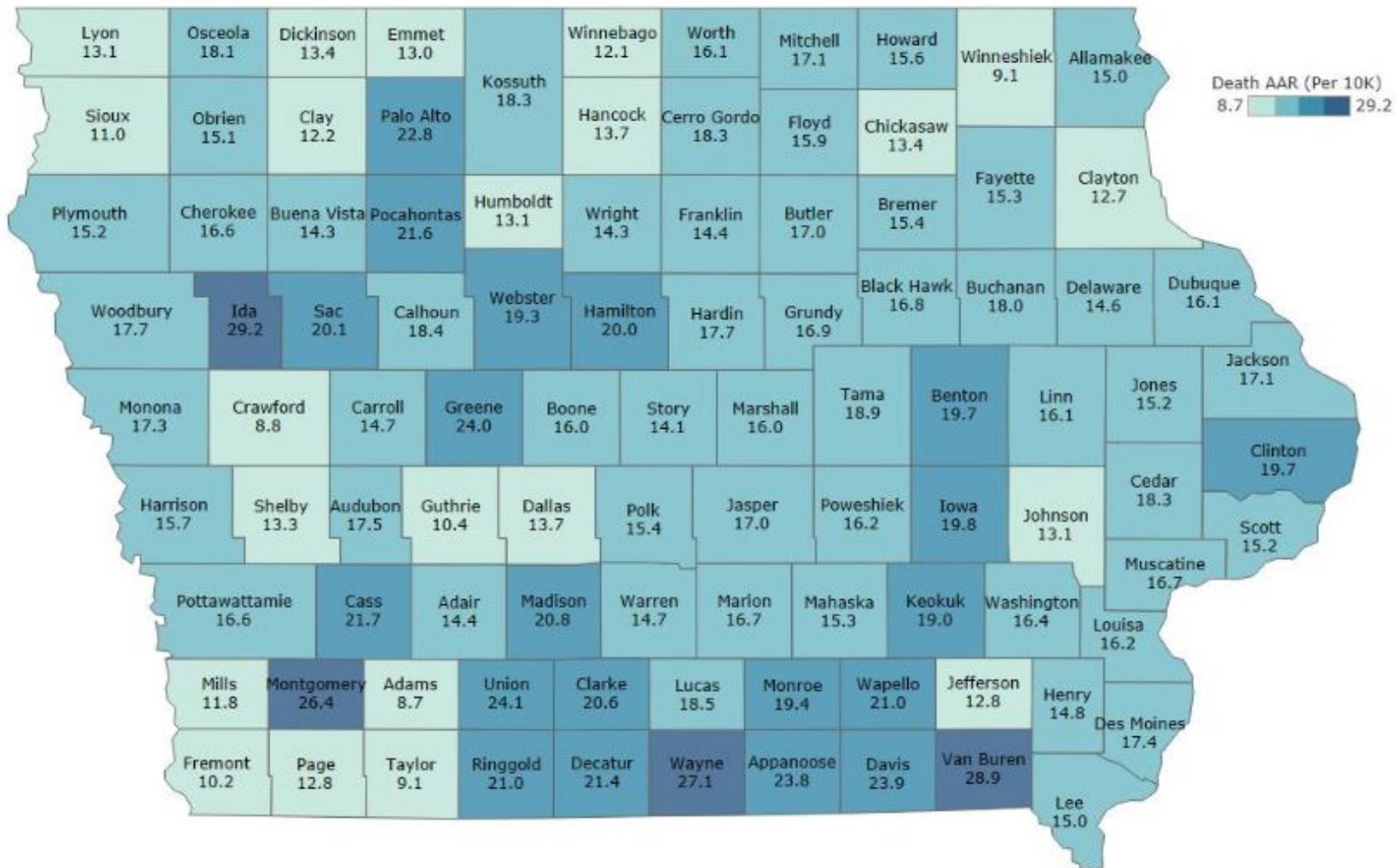


Source: IDPH Vital Records

Hospitalizations for Heart Attacks - 2018



Top 10 Causes of Death by County, Malig. Neoplasms Cancer - 2018



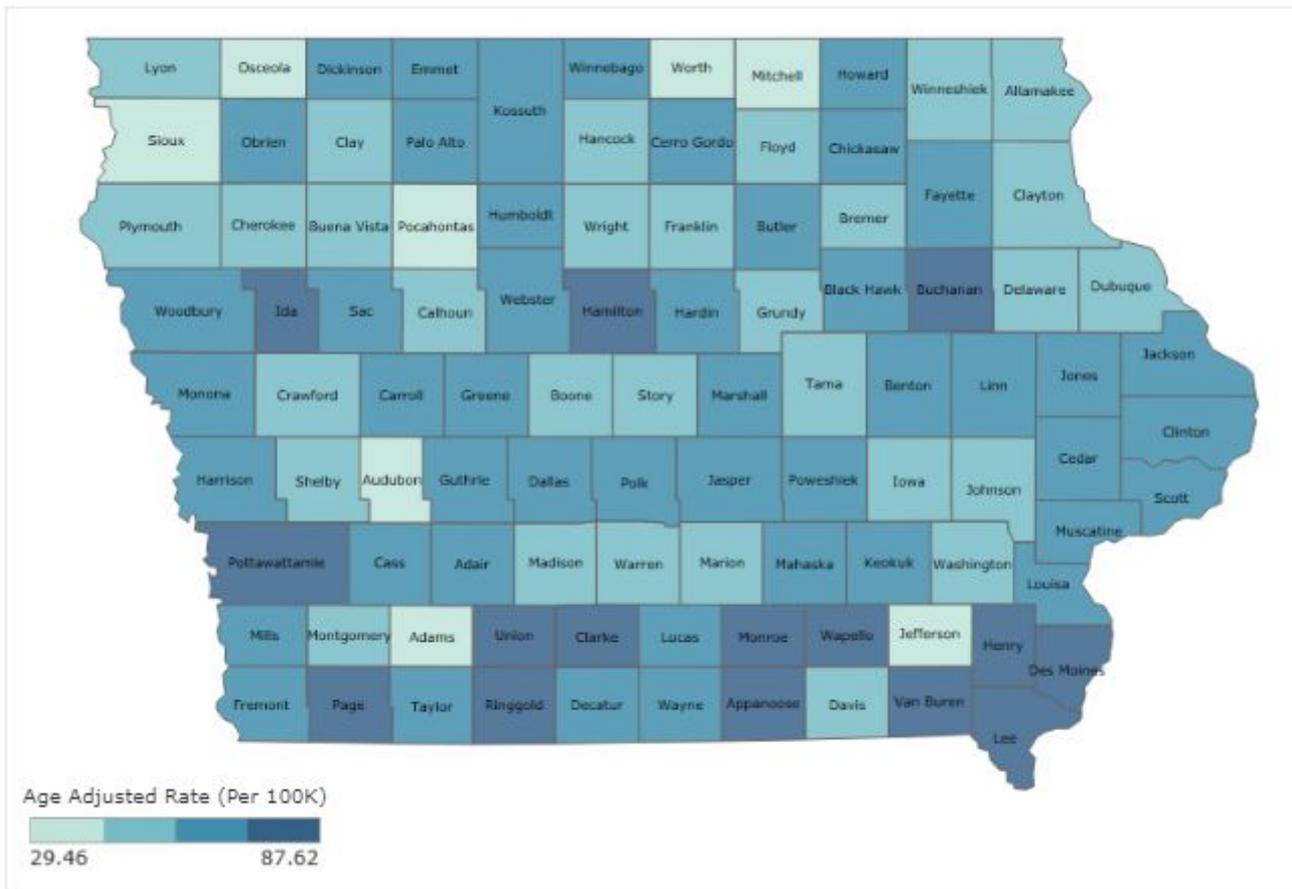
Source: IDPH Vital Records

Lung Cancer Incidence by County

Five Year Lung and Bronchus Cancer Incidence - 2012-2016

Hover over a County to see the County Name and values for that County.

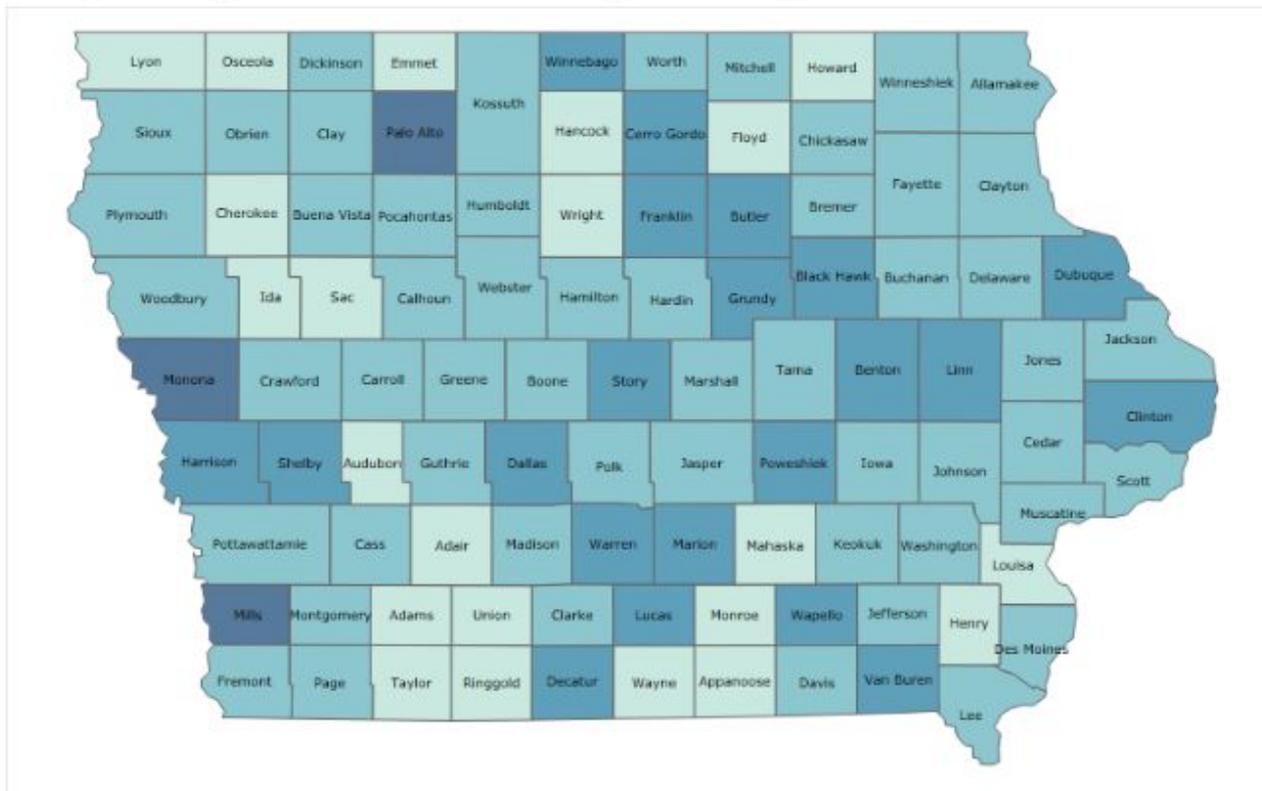
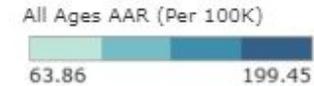
Clicking on a County will show the values for that County in the lower right.



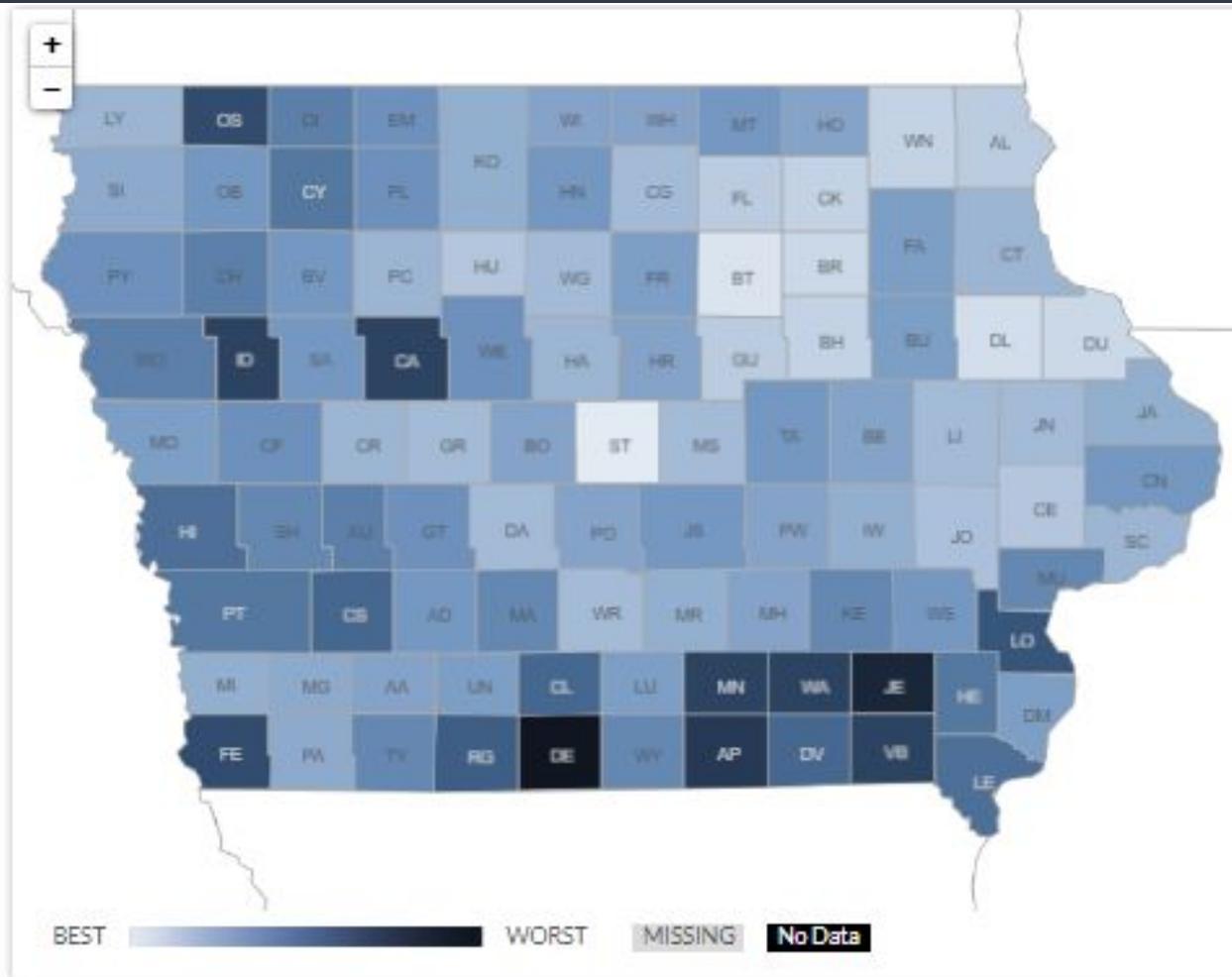
Female Breast Cancer Incidence by County

Five Year Female Breast Cancer Incidence - 2012-2016

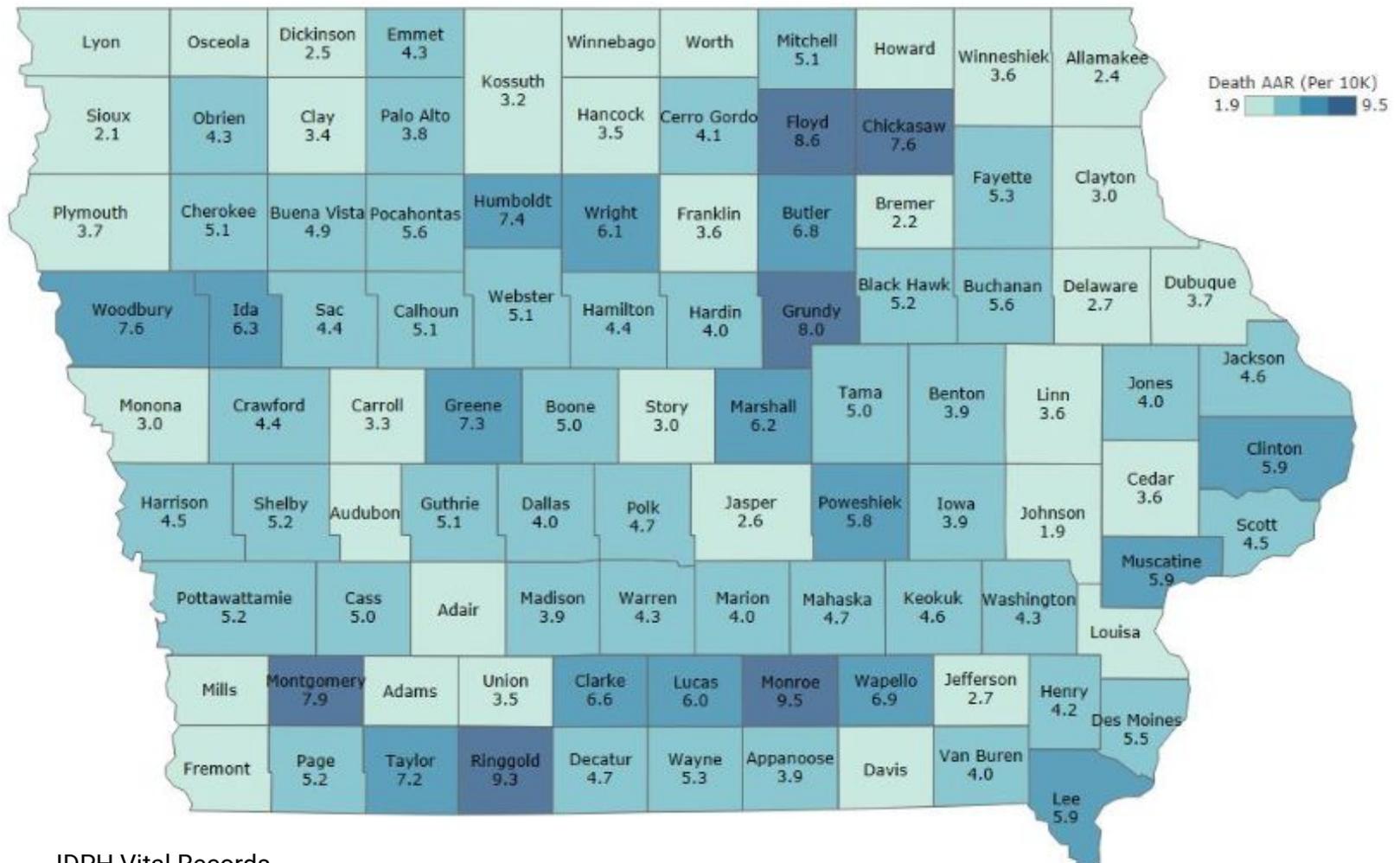
Hover over a County to see the County Name and values for that County.
Clicking on a County will show the values for that County in the lower right.



Mammography Screening (Percent Medicare enrollees age 65-74 annual screening)



Top 10 Causes of Death by County, Chronic Lower Respiratory Disease – 2018

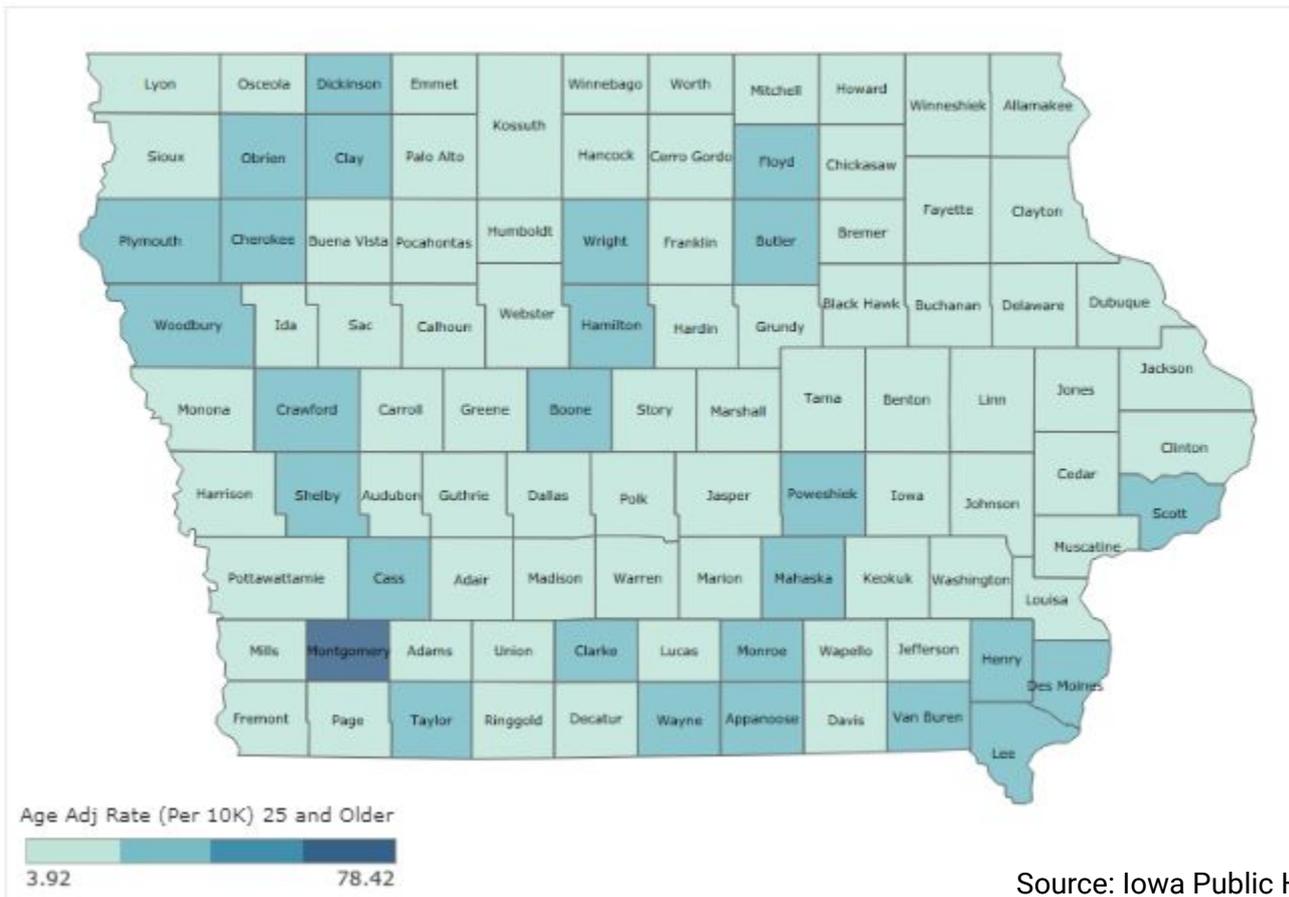


Chronic Obstructive Pulmonary Disease – 2018

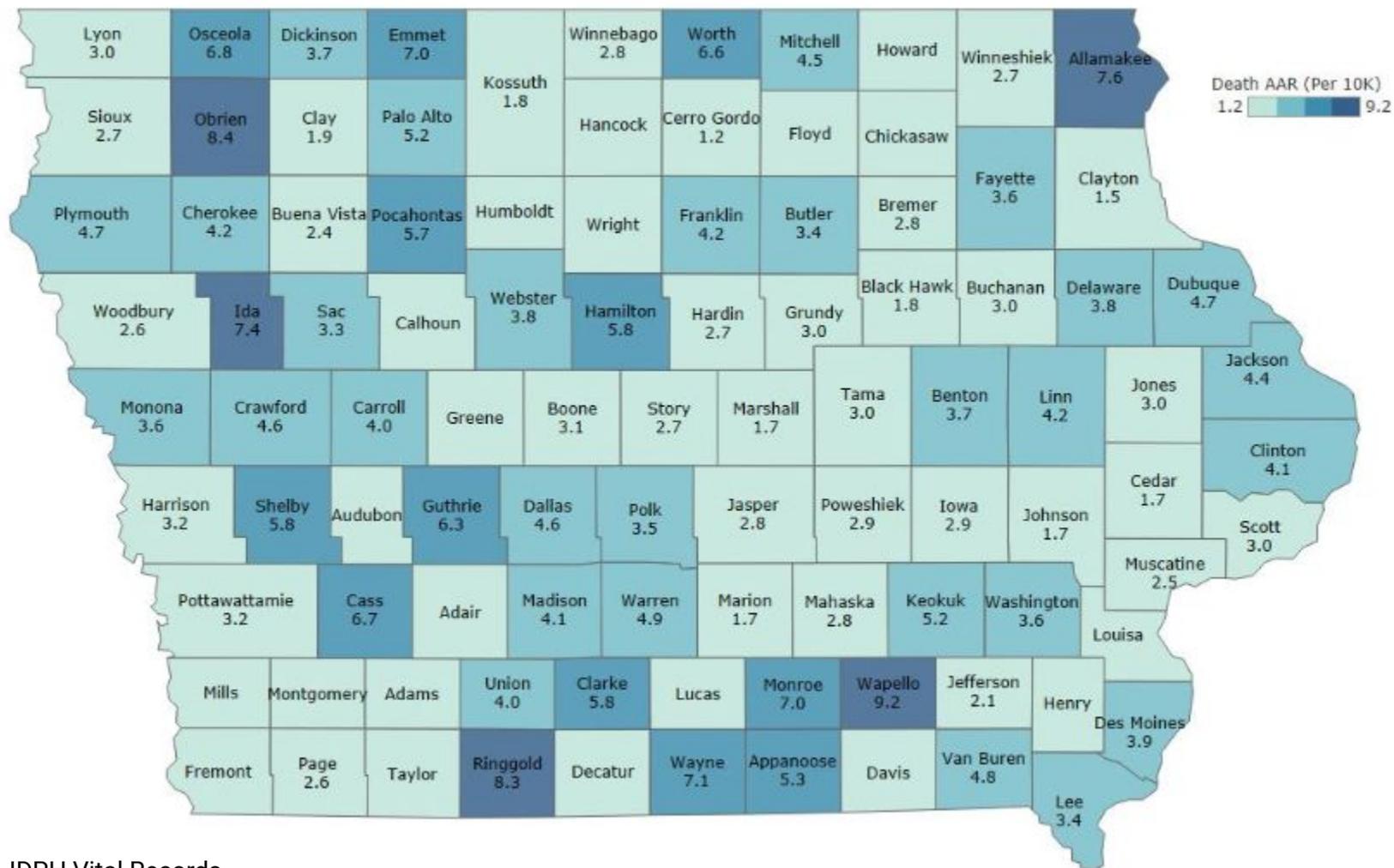
Hospitalizations for COPD - 2018

Hover over a County to see the County Name and values for that County.

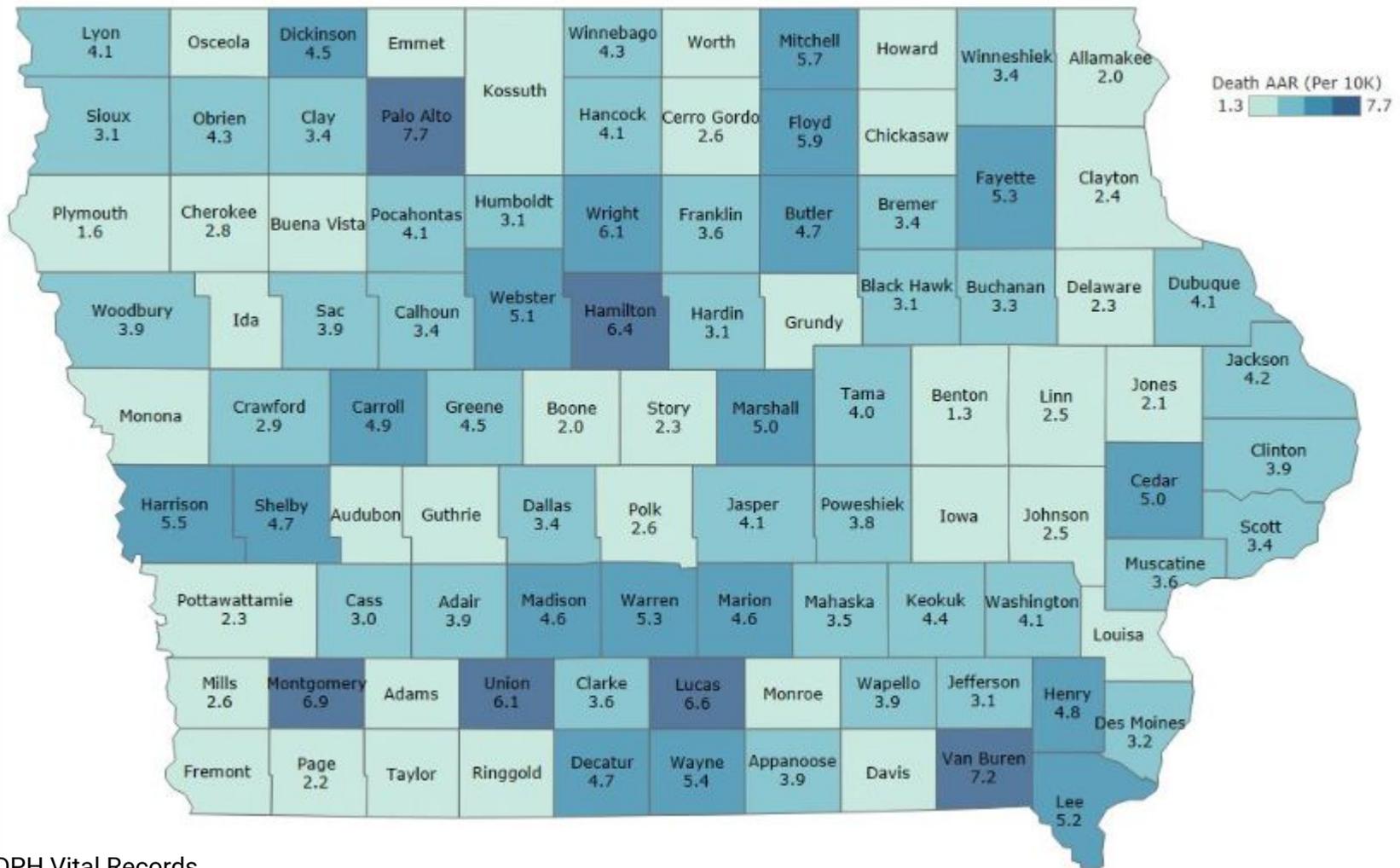
Clicking on a County will show the values for that County in the lower right.



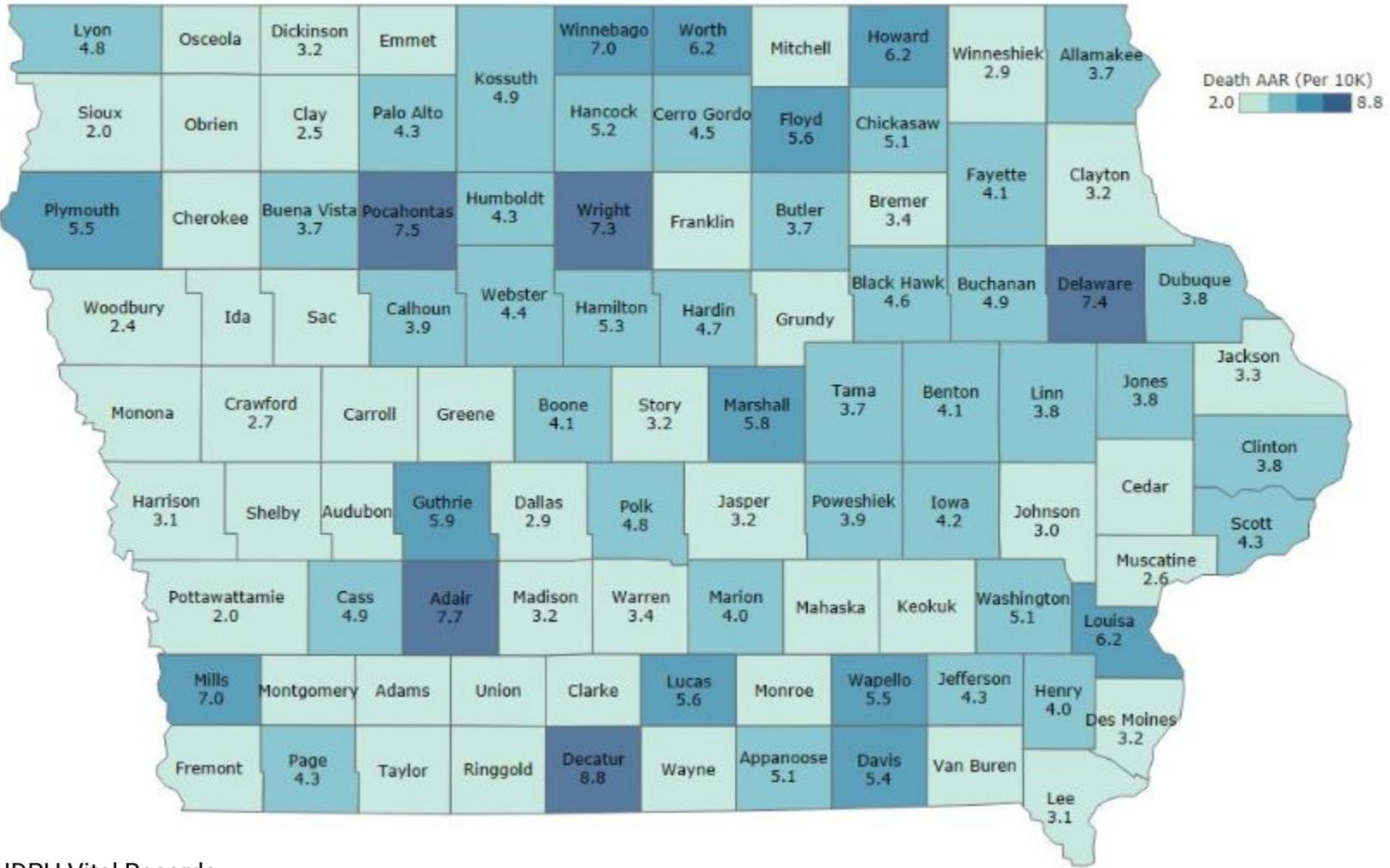
Top 10 Causes of Death by County, Alzheimer's Disease - 2018



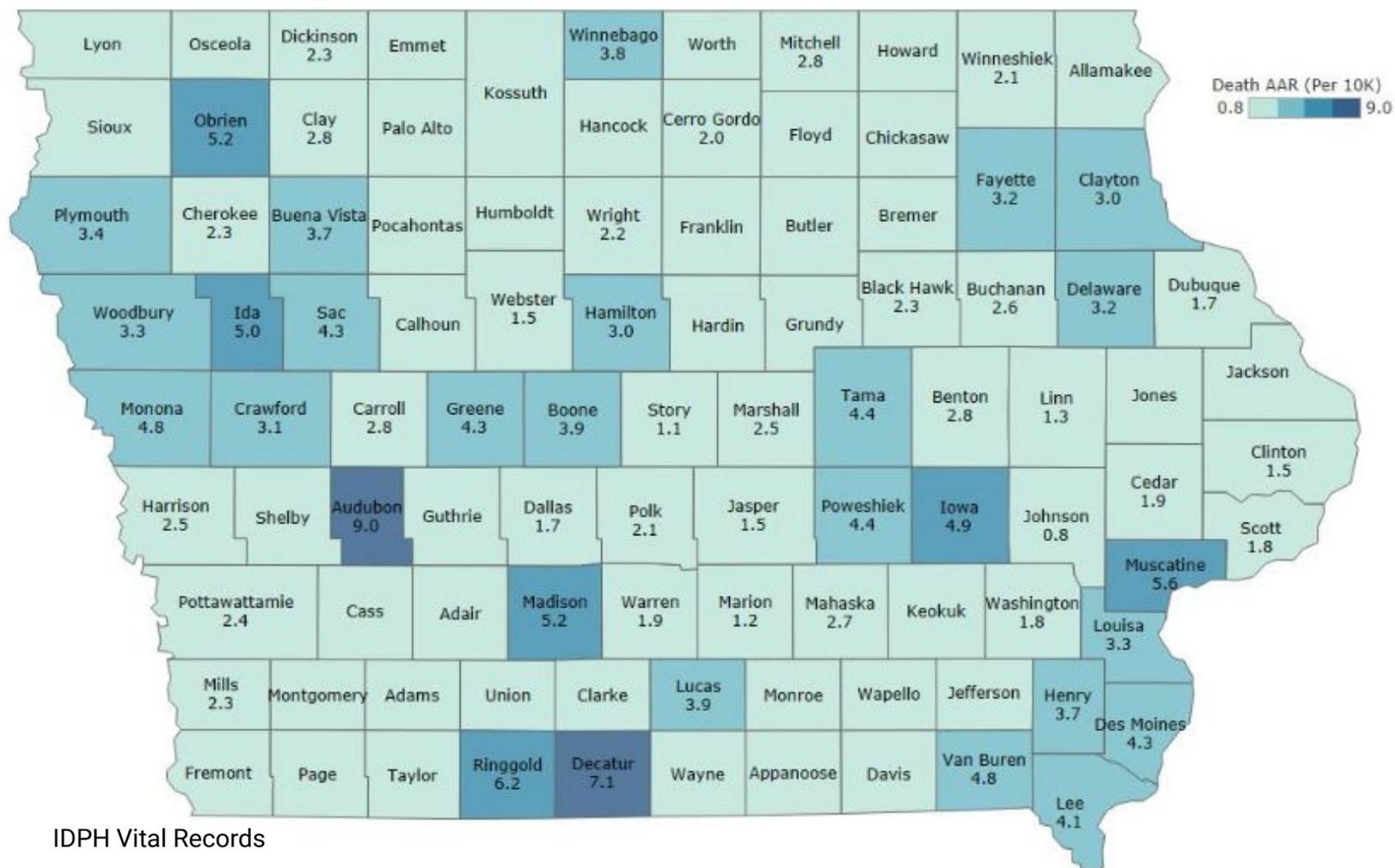
Top 10 Causes of Death by County, Cerebrovascular Diseases – 2018



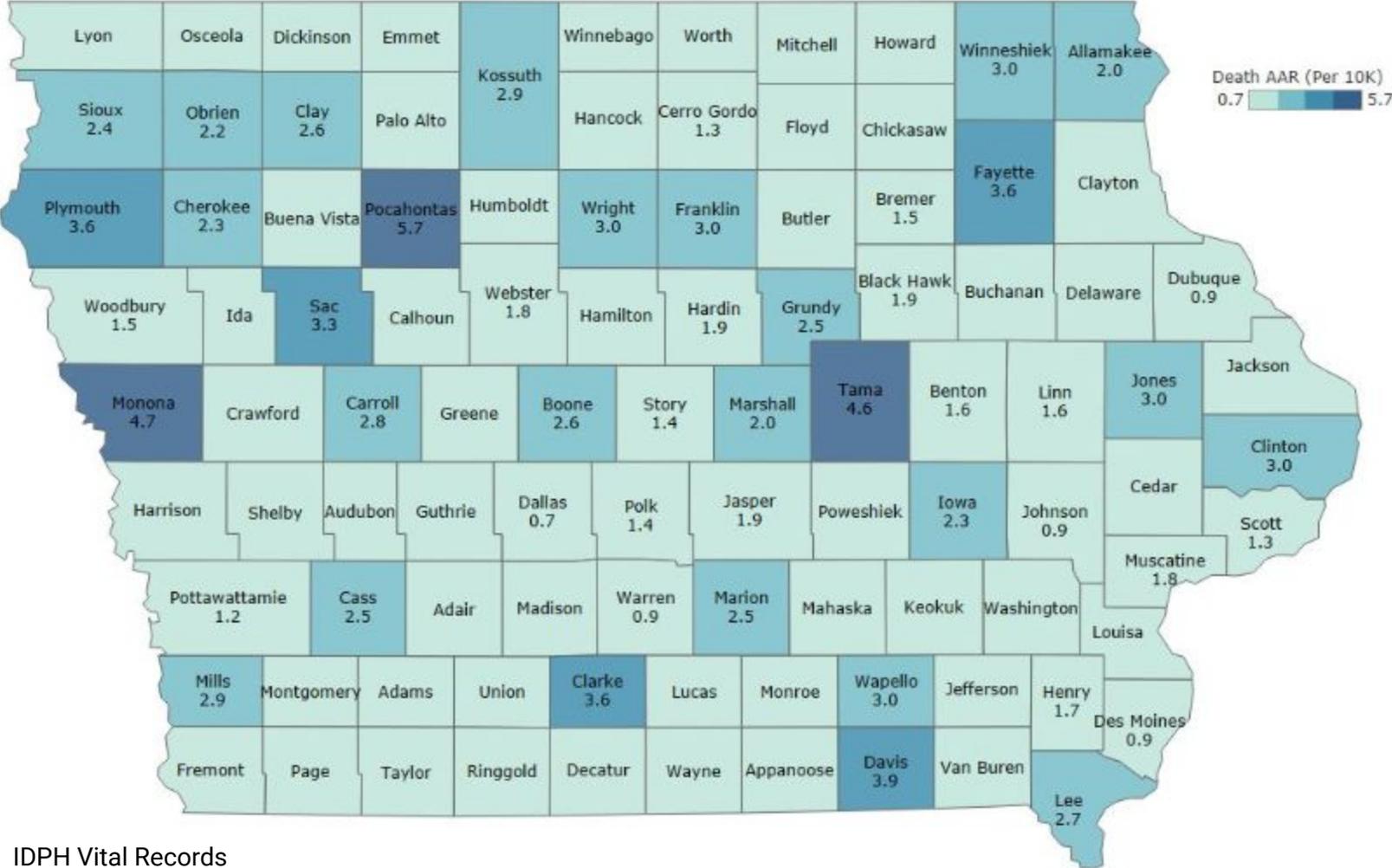
Top 10 Causes of Death by County, Accidents (Unintentional Injuries) - 2018



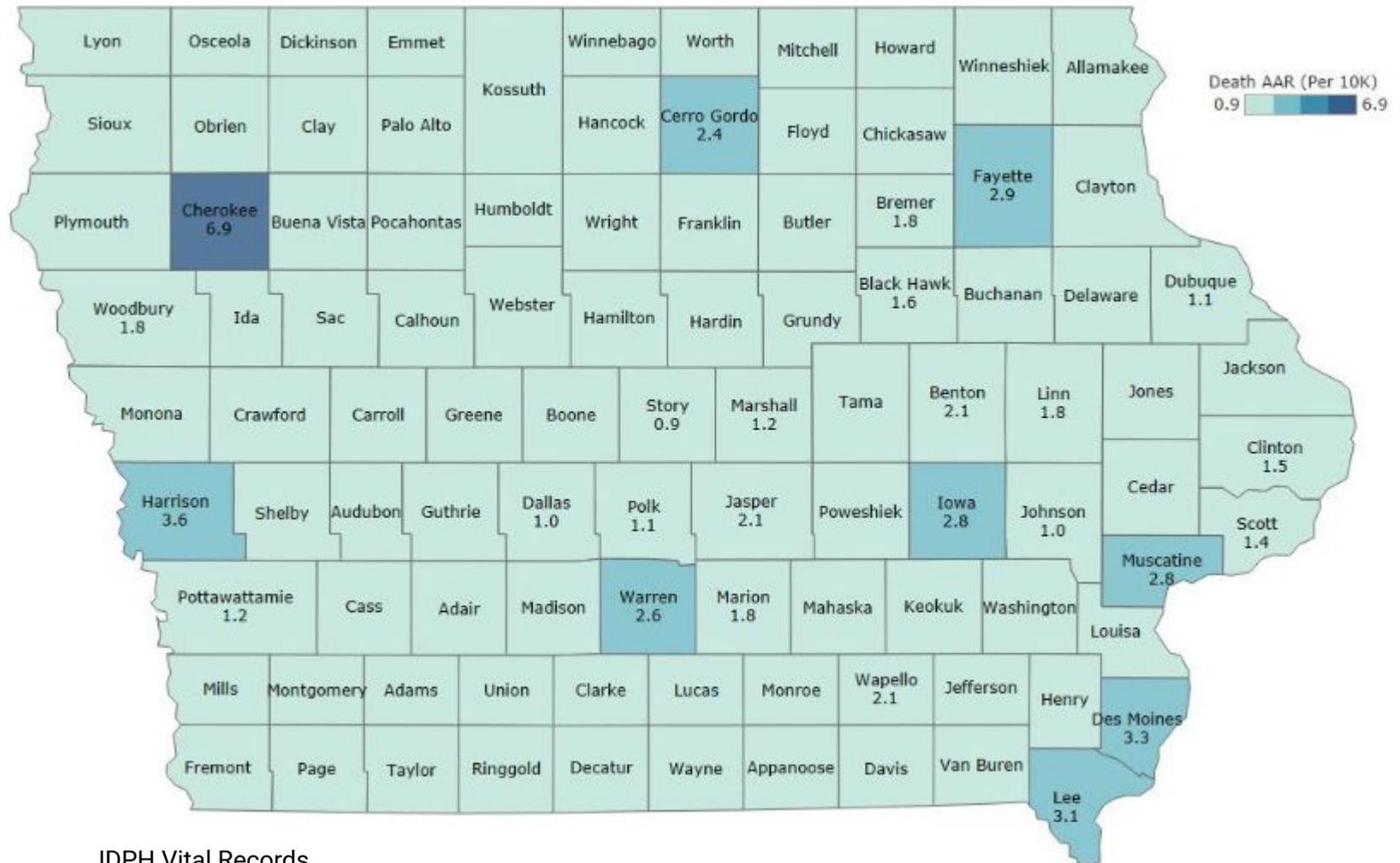
Top 10 Causes of Death by County, Diabetes Mellitus - 2018



Top 10 Causes of Death by County, Influenza and Pneumonia – 2018



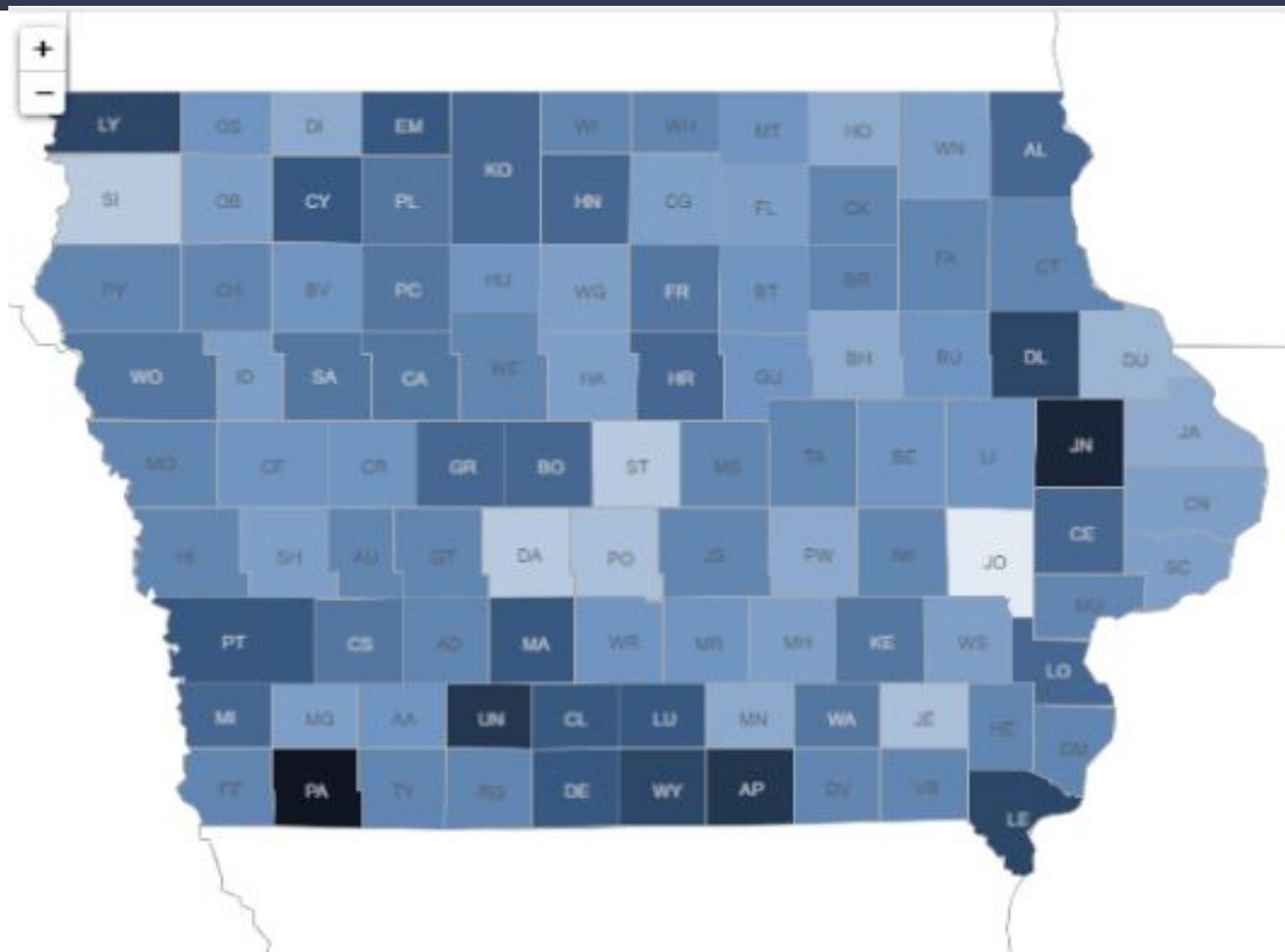
Top 10 Causes of Death by County, Intentional Self-Harm (Suicide) – 2018



Physical Activity & Obesity

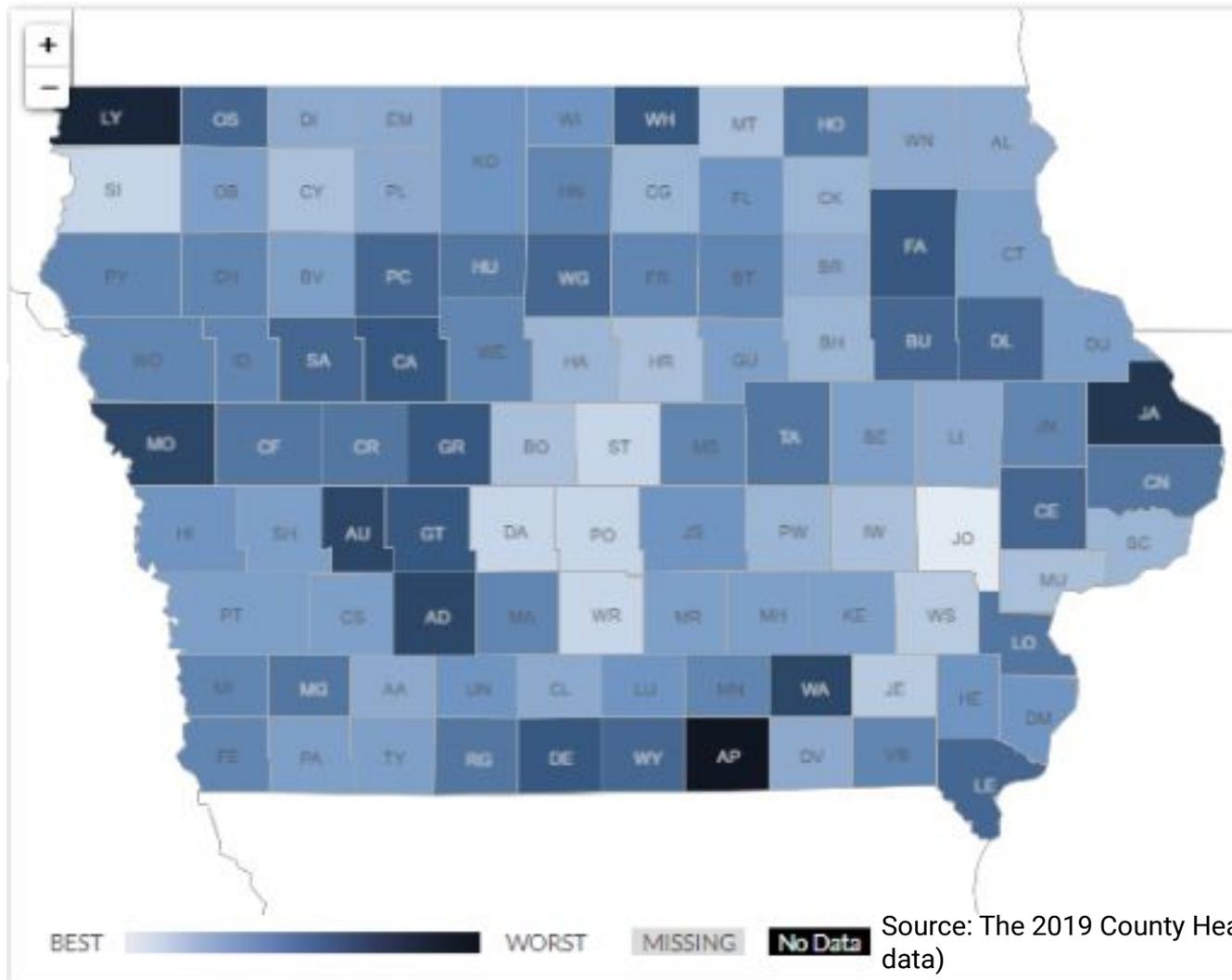


Adult Obesity – Percentage of Adult Population 20 and older that reports a BMI greater or equal to 30 kg/m²



BEST WORST MISSING No Data Source: The 2019 County Health Rankings (2015 data)

Physical Inactivity – Percentage of Adults age 20 and older reporting no leisure-time physical activity



Source: The 2019 County Health Rankings (2015 data)

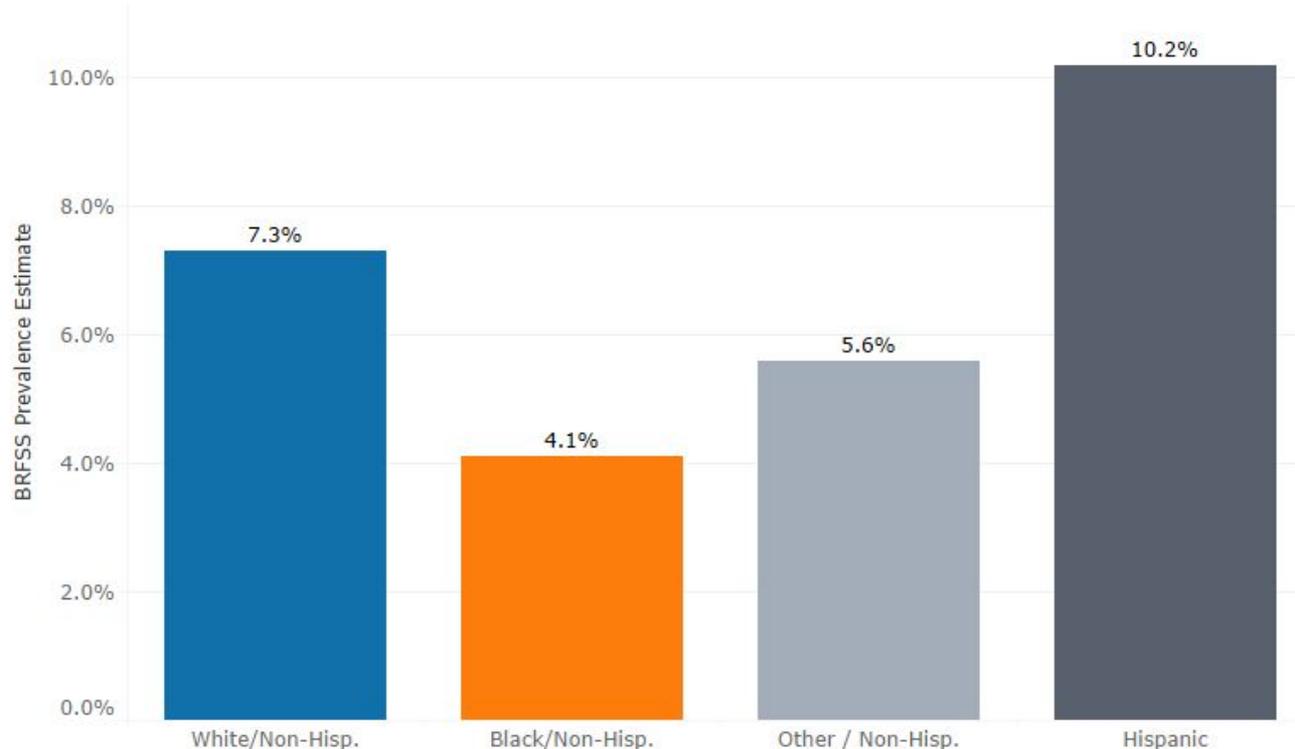
Mental Health & Substance Use Data



Adult Substance Use

Adult Heavy Drinking by Race/Ethnicity - 2017

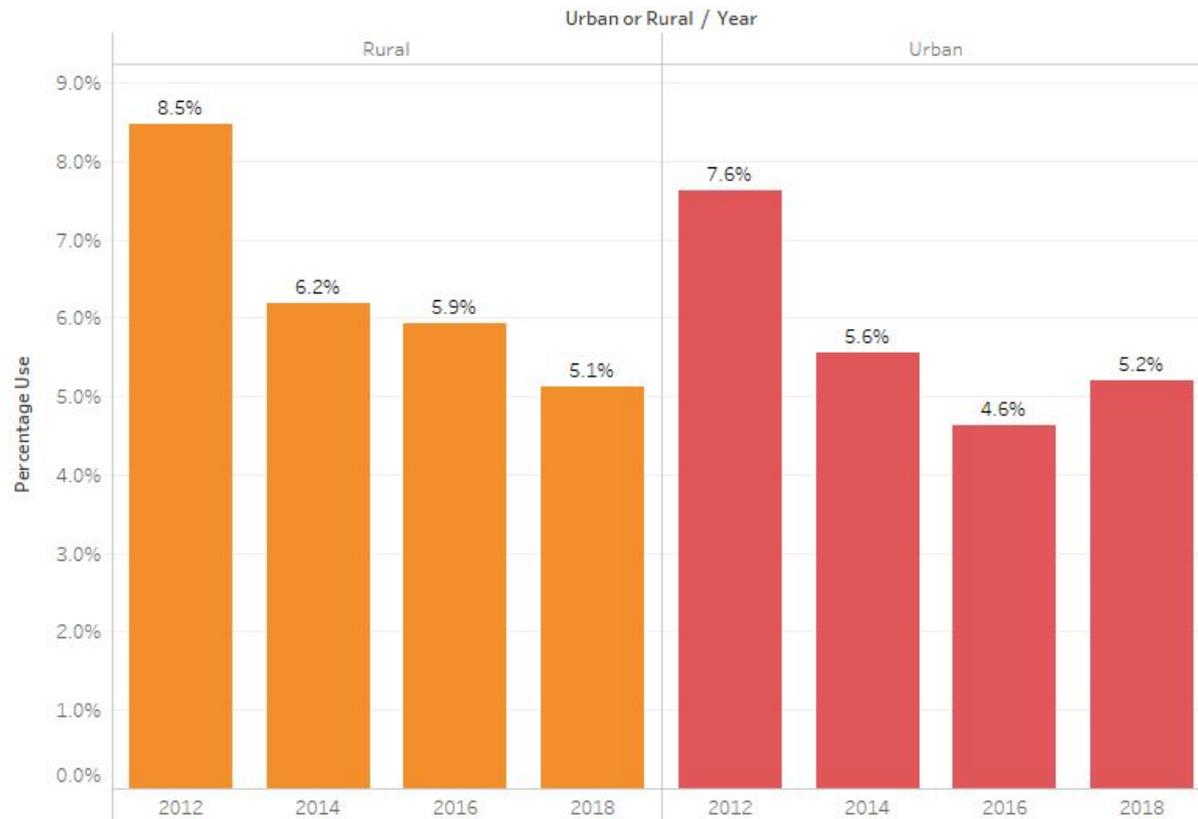
The percent of BRFSS respondents that answered yes to the question: *Heavy drinkers - Adult men having more than 14 drinks per week and adult women having more than 7 drinks per week in the past 30 days*



Youth Substance Use

Youth 30 Day Binge Drinking by Urban/Rural

The percentage of students who reported having 5 or more drinks of alcohol in a row in the last 30 days



Data Observations

- Heart disease, cancer and mental health are the top causes of morbidity and mortality in Iowa.
- Many of the health conditions faced by Iowans are driven by obesity and physical inactivity.
- Rural Iowans have access challenges with dental, mental health, and birthing services.
- Geographic variation of health status in Iowa does not follow consistent patterns.
 - There are more clear patterns related to age, poverty, race/ethnicity and gender
- Alcohol is the most common substance used by Iowans.
- Youth substance use has been declining and does not vary by rurality.

Next Steps

Additional Tools



IDPH Tracking Portal:

<https://tracking.idph.iowa.gov/Reports/Additional-Data-and-Reports> (Trainings are available on using this resource.)

County Health Rankings: <https://www.countyhealthrankings.org/>

IDPH CHNA/HIP Webpage:

<https://idph.iowa.gov/chnahip/community-health-needs>

- County Health Rankings - Dentists: <https://www.countyhealthrankings.org/app/iowa/2019/measure/factors/88/map>
- Iowa Public Health Tracking Portal - Top Causes of Death: <https://tracking.idph.iowa.gov/People-Community/Deaths/Top-Ten-Causes>
- Iowa Public Health Tracking Portal - Lung Cancer Incidence by County: <https://tracking.idph.iowa.gov/Health/Cancer/Lung-Cancer/Five-Year-Data>
- Iowa Public Health Tracking Portal - Female Breast Cancer Incidence by County: <https://tracking.idph.iowa.gov/Health/Cancer/Female-Breast-Cancer/Five-Year-Data>

- County Health Rankings - Primary Care Physicians: <https://www.countyhealthrankings.org/app/iowa/2019/measure/factors/4/map>
- County Health Rankings - Mammography Screening: <https://www.countyhealthrankings.org/app/iowa/2019/measure/factors/50/map>
- Iowa Public Health Tracking Portal - Heart Attack Hospitalizations by County: <https://tracking.idph.iowa.gov/Health/Heart-Attacks/Heart-Attack-Hospitalizations-Data>
- County Health Rankings - Adult Obesity: <https://www.countyhealthrankings.org/app/iowa/2019/measure/factors/11/map>
- County Health Rankings - Physical Inactivity: <https://www.countyhealthrankings.org/app/iowa/2019/measure/factors/70/map>
- County Health Rankings - Mental Health Providers: <https://www.countyhealthrankings.org/app/iowa/2019/measure/factors/62/map>
- Iowa Public Health Tracking Portal - Adult Heavy Drinking: <https://tracking.idph.iowa.gov/Health/Substance-Use-and-Misuse/Adult-Substance-Abuse/Adult-Heavy-Drinking-Data>
- Iowa Public Health Tracking Portal - Youth Binge Drinking: <https://tracking.idph.iowa.gov/Health/Substance-Use-and-Misuse/Youth-Substance-Abuse/Youth-Binge-Drinking-Data>

Questions

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