
Community Health Needs Assessment

UnityPoint Health-Allen Hospital

2020-2022

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I. Community Served by the Hospital

The UnityPoint Health-Allen Hospital market includes 10 counties in the Cedar Valley of Northeast Iowa: Black Hawk, Bremer, Buchanan, Butler, Chickasaw, Fayette, Franklin, Grundy, Hardin and Tama.

Black Hawk and Bremer Counties are home to 56% of the market's 280,000 people. In 2018, 76% of Allen Hospital inpatients and 82% of hospital-based outpatients lived in these two counties.

Black Hawk County is the diverse center of population, jobs, economic growth and services for the market. Its residents and agencies provided the majority of responses for this assessment.

II. 2019 Community Health Needs Assessment Process

Black Hawk County healthcare providers and allied service organizations came together as partners to write and publish two online surveys to identify the community health needs of Cedar Valley residents and social service agencies.

The online survey for residents was published from March 1-May 15, 2019, and drew 1,554 unique responses. The parallel survey for social service agencies ran concurrently and drew 41 responses. Both sets of responses were significantly larger than responses to prior community health needs surveys published in 2013 and 2016. The improved response rates speak to the diligence of the survey partnership and the broad acceptance of online polling. The online Survey Monkey for residents was supplemented by paper surveys distributed to and collected from members of minority church congregations.

Responses were tabulated by the political science department of the University of Northern Iowa using Survey Monkey analytics. Once the initial responses arrived, the partners reached out to gather additional responses from minority populations to help match the overall return to the market profile. The resident survey was extended 45 days past its original deadline to ensure additional returns.

The assessment partners who wrote the survey and shared data include:

Black Hawk County Gaming Association

- Beth Knipp, executive director

Black Hawk County Public Health Department

- Nafissa CisseEgbounye, executive director
- Gabbi DeWitt, health educator
- Terry Helinski, public health planner

Cedar Valley United Way

- Samantha Meier, director of marketing and research
- Debbie Roth, senior director of community resources

MercyOne Waterloo Medical Center

- Amy Hetherington, director of marketing and communications

Peoples Community Health Clinic of Waterloo

- Christine Kemp, CEO
- Augusta Sires, community relations specialist

SuccessLink (formerly Communities in Schools)

- Brad McAlla, executive director

UnityPoint Health-Allen Hospital

- Jim Waterbury, community relations consultant

University of Northern Iowa

- Dale Cyphert, MBA program director
- Jim Kelly, business and assistant professor of library sciences
- Christopher Larimer, professor of political science

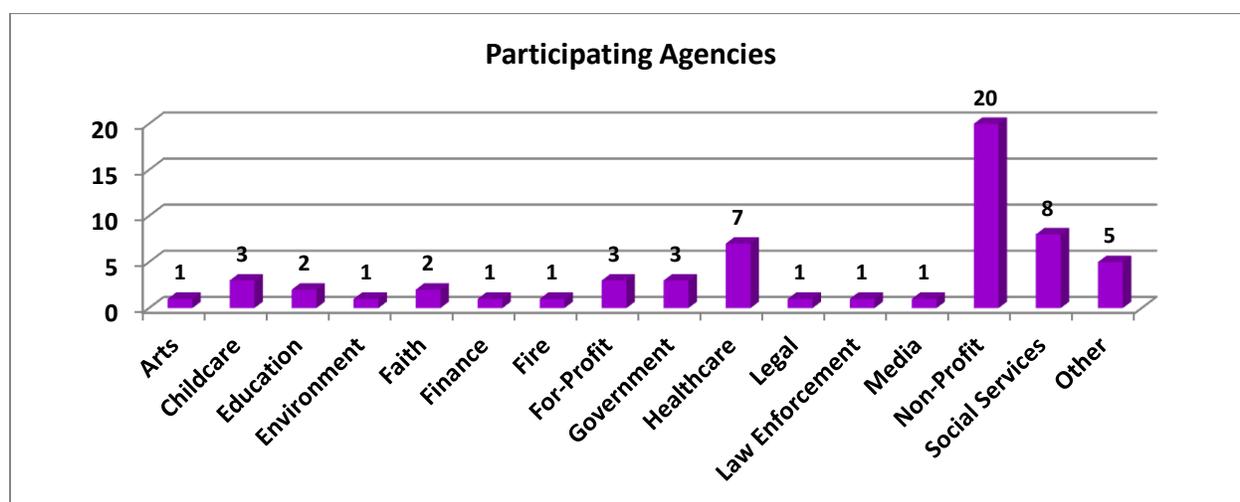
SurveyMonkey was the only outside service used in this assessment.

III. Community Input

The assessment partnership asked 68 community organizations to participate in the agency survey. Forty-one agencies completed the survey. Some identified themselves in more than one category:

Amani Community Services	Lutheran Services of Iowa
Amerigroup	Mayor of Cedar Falls, IA
Archdiocese of Dubuque	Mayor of Evansdale, IA
Area Education Agency 7	Mayor of Waterloo, IA
Aspire	MercyOne Medical Center
Bertch Cabinets	Mid-Iowa Therapy Clinic
Big Brothers Big Sisters	Northeast Iowa Food Bank
Black Hawk County Health Department	Operation Threshold
Black Hawk County Sheriff's Office	Otto Schoitz Foundation
Black Hawk County Supervisors	Pathways
Cedar Falls Schools	Peoples Community Health Clinic
Cedar Valley Hospice	Quakerdale Family Services
Cedar Valley United Way	R J McElroy Trust
Commission on Human Rights	Riverview Conference Ministries
Community Foundation	Salvation Army
Department of Human Services	Silos and Smokestacks
Domestic/Sexual Assault Outreach	Sing Me to Heaven
Eastside Ministerial Alliance	Sisters of St. Francis
EMBARC Resource Center	SuccessLink
Exceptional Persons of NE Iowa	The Job Foundation
Families First Counseling Center	Tri-County Child and Family
Family and Children's Council	United Healthcare
Family YMCA Black Hawk Co.	UnityPoint Health-Waterloo Region
Four Oaks	University of Northern Iowa
Girl Scouts of Eastern Iowa	Upper Iowa University
Grout Museum of Natural History	Veridian Credit Union
Hawkeye Community College	Veterans Affairs of Black Hawk County
House of Hope	Volunteer Center of the Cedar Valley
Iowa Courts	Waterloo Community Foundation
Iowa Legal Aid Society	Waterloo Schools
Iowa State Extension Office	Waterloo Visitors Bureau
Iowa Workforce Development	Way Point Services
Jesse Cosby Center	YWCA of Black Hawk County

Agency participants represent the interests of African American, Hispanic, Bosnian, Asian, Indian, Burmese, American Indian and Congolese populations living in the Cedar Valley, predominately in Black Hawk County. They also represent the interests of and serve residents living in poverty; women and children; women and children at-risk; pre-school children; adults 65+; the disabled; the underemployed and unemployed; the medically-underserved; residents suffering from mental illness and/or addiction; residents living with food insecurity; English language learners and the LGBTQ communities. Agency participants were recruited specifically for their knowledge and record of successful service to one or more medically-underserved, low-income and minority populations in the Cedar Valley.



IV. Prioritized Significant Community Health Needs

Identifying and prioritizing community health needs is always subjective. Answers depend entirely on respondents' definition of their own community. We know from childhood where we belong, but we seldom think about precise borders.

A community is “a unified body of individuals...with common interests living in a particular area broadly.”¹ Community boundaries are not defined by kinship, proximity or GPS coordinates. They are defined by givens and issues that determine the general welfare—the health, peace, morality and safety of its citizens.

¹ Merriam Webster abridged dictionary

Community membership requires our physical presence. We have to be there to count. It also requires emotional engagement, a much more elusive term. Community is not just where we live. Community is also what we do. It's where we feel we belong.

A community health needs assessment asks members to measure the health of their community by prioritizing problems and identifying needs. It tests for weakness, insufficiency and stress. The process is valid because while individual responses are subjective, collective responses are often surprisingly similar across demographic lines. Every community has open secrets. A health needs assessment offers its members a way to talk about them with common purpose.

Throughout this assessment, we asked participants to define their own communities. The boundaries are unimportant. What matters more is what people think about where they call home and opportunities they see to make it stronger.

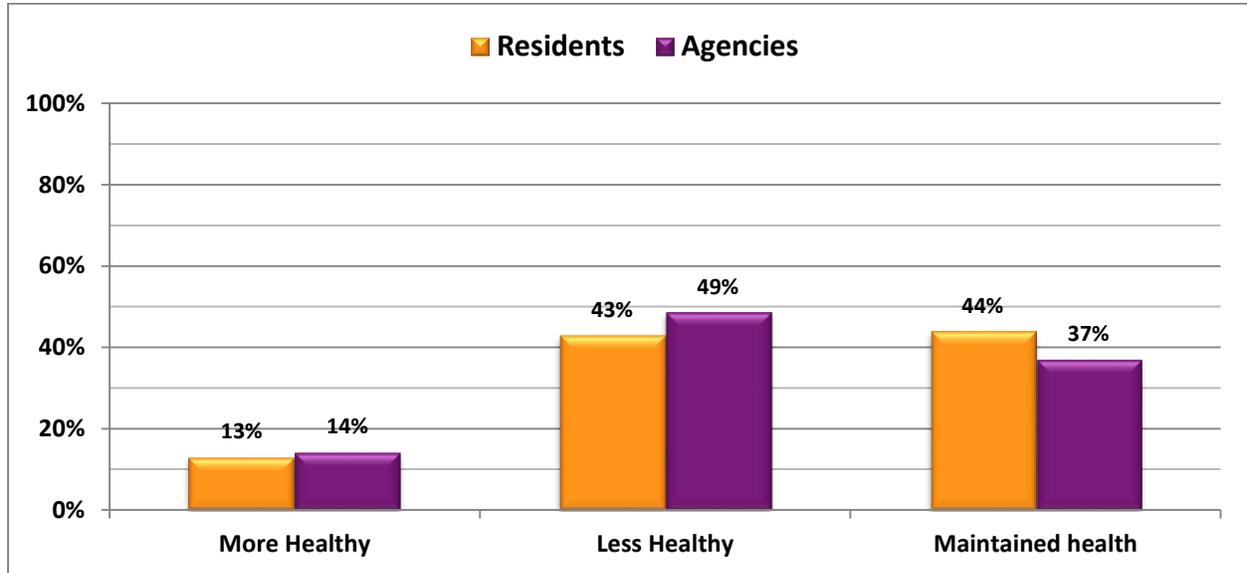
We started at the beginning, asking people to assess community health. From there, we asked them to consider their own health, their children's health, their mental health and the impact of any adverse childhood experiences (ACEs) on their health today. We surveyed both residents and agencies, and we present findings from both.

Residents speak for themselves and their families and friends. However, many minority and immigrant residents distrust surveys. Agencies speak for those residents and help represent individuals and populations who cannot or will not participate out of fear of identification or reprisal. Agency participation ensures their voices are counted too.

COMMUNITY HEALTH

1. Are people in your community healthier, less healthy or about the same over the past five years?

Resident Answered: 1,522 Skipped: 32
Agency Answered: 41 Skipped: 0



Community health needs assessments survey how people feel, not only about themselves but about their neighbors and communities. They are snapshots of a moment in time.

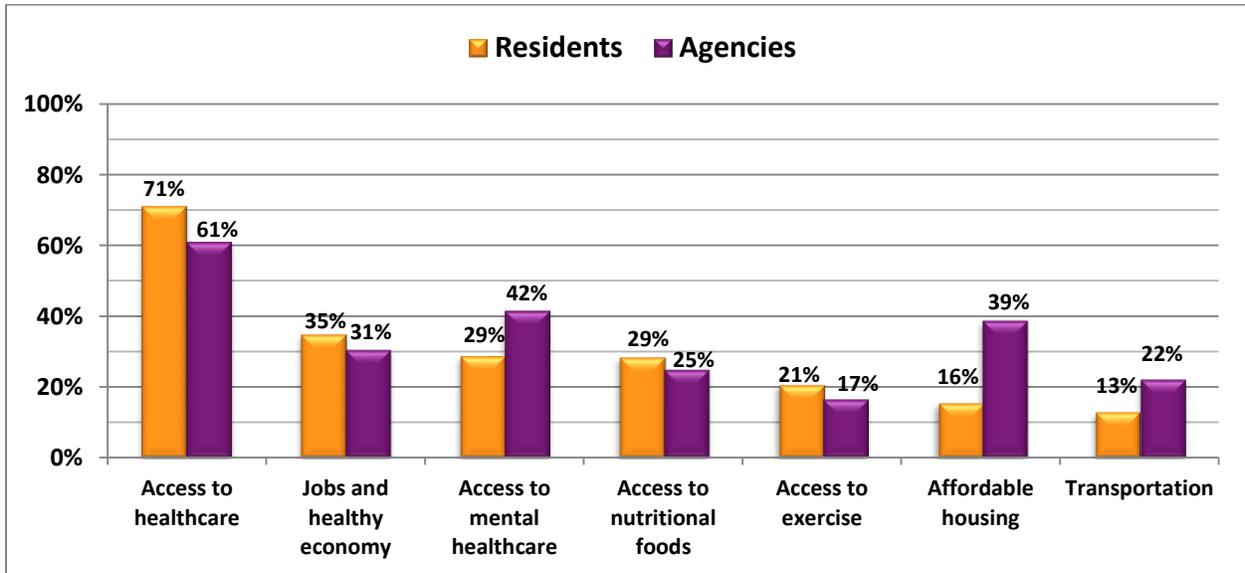
For this survey, roughly half of residents think their communities' health either remained stable or declined. Only one person in eight thinks their community is healthier today than it was in 2014.

These answers correspond well to levels of stress and sleeplessness participants note in the Personal Health (p.13) and Mental Health (p.23) sections of this assessment.

2. What three things are most important for a healthy community?

Resident Answered: 1,544 Skipped: 10

Agency Answered: 41 Skipped: 0



The top three factors for a healthy community are:

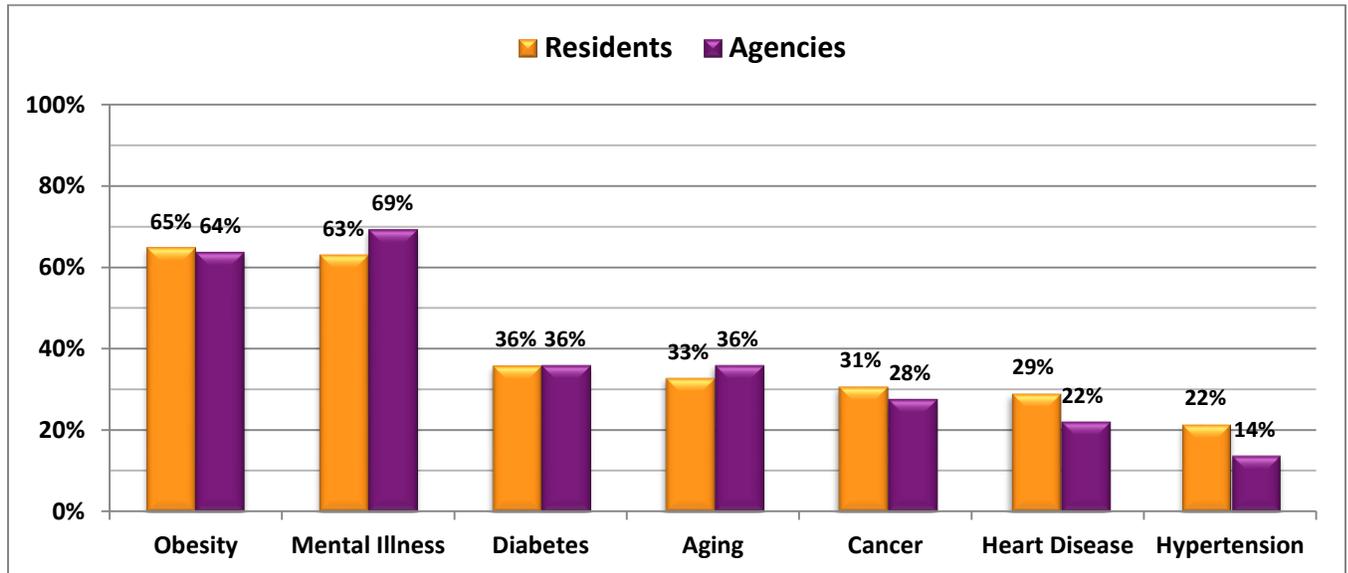
- Access to healthcare
- Jobs and a healthy economy
- Access to mental healthcare

Access does not mean simple availability. Health insurance is almost always available but all too frequently inaccessible because of cost or the health of the person seeking it. In healthcare, access means easy, dependable availability and navigation of services, when and where people need care.

Excellent healthcare access means having the right providers available in the right places at the right time for the right services. It includes having sites, services, and office and clinic hours and appointments designed to meet the needs of patients and families living online, on demand lives.

3. What are the top three health problems in your community?

Resident Answered: 1,538 Skipped: 16
Agency Answered: 35 Skipped: 6



Residents and agencies agree the top three health community health problems are:

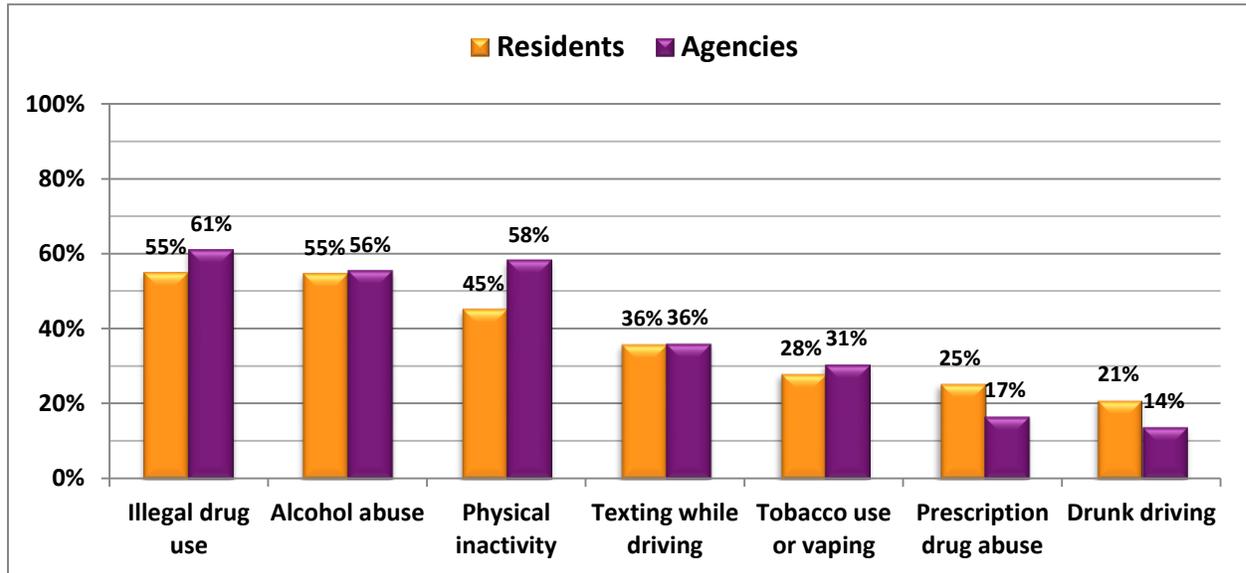
- Obesity
- Mental illness
- Diabetes

Iowa is now the fourth-heaviest state in the nation. Thirty-six percent of Iowa adults are clinically obese, with a body mass index greater than 30. Overweight starts at a body mass index greater than 25. Obesity contributes to every other condition on the chart. From 1990 -2015, obesity in Iowa doubled. So did diabetes.

Iowa and the nation have a mental health crisis, exacerbated by an acute shortage of mental health providers, outpatient clinics and inpatient beds. Mental healthcare, like women's reproductive healthcare, is a political football. Because much of both is paid for with public funds, care is seldom based on adequate funding or best practice. One in five Americans has one of more mental illnesses, a figure that includes children and teens. Most mental illness is both chronic and treatable in low-cost, outpatient settings. The crisis in our system today is the lack of providers, care settings and enough funding to even begin meeting the demand that has overwhelmed supply.

4. What are the top three risky adult behaviors in your community?

Resident Answered: 1,541 Skipped: 13
Agency Answered: 36 Skipped: 5



Four addictions make the list of the top risky adult behaviors:

- Illegal drugs
- Alcohol abuse, including binge drinking and alcoholism
- Tobacco use and vaping
- Prescription drug abuse

Two risky driving behaviors are right behind:

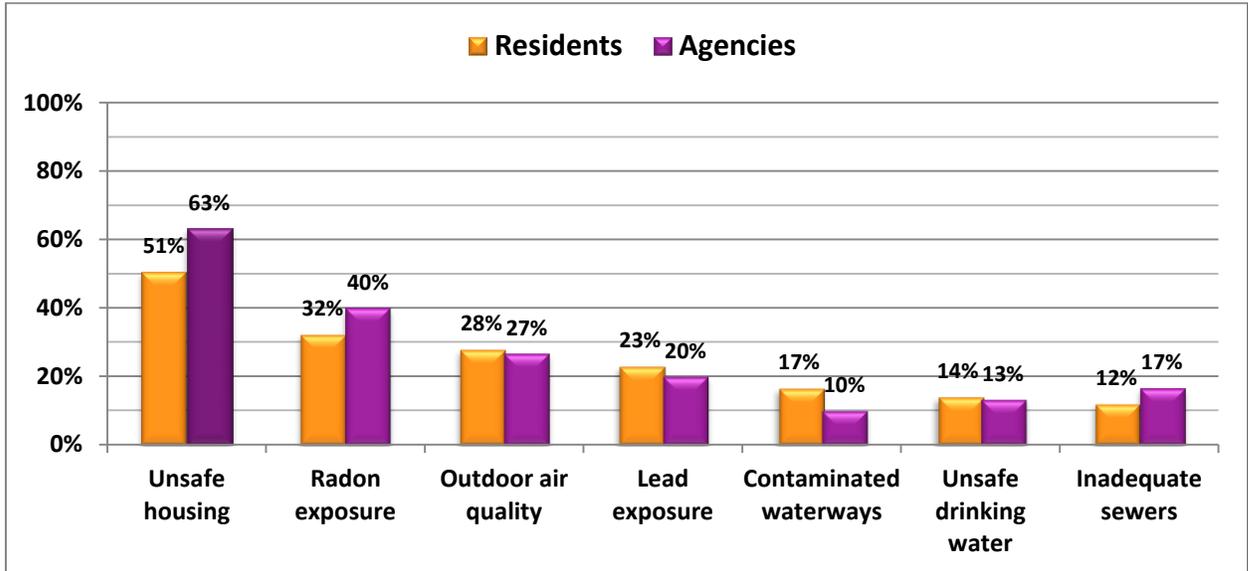
- Texting while driving
- Drunk driving

Only one risky behavior is something we don't do: using our bodies the ways they are designed to be used. Ironically, regular vigorous exercise is frequently part of substance abuse rehabilitation programs. Agency responses show a spike regarding physical inactivity, indicating many people they seek to help are not doing enough to help themselves with sufficient exercise.

5. What are the top three environmental threats to your community?

Residents Answered: 966 Skipped: 588

Agencies Answered: 30 Skipped: 11



The top three environmental treats to our communities are:

- Unsafe housing
- Radon exposure
- Outdoor air quality

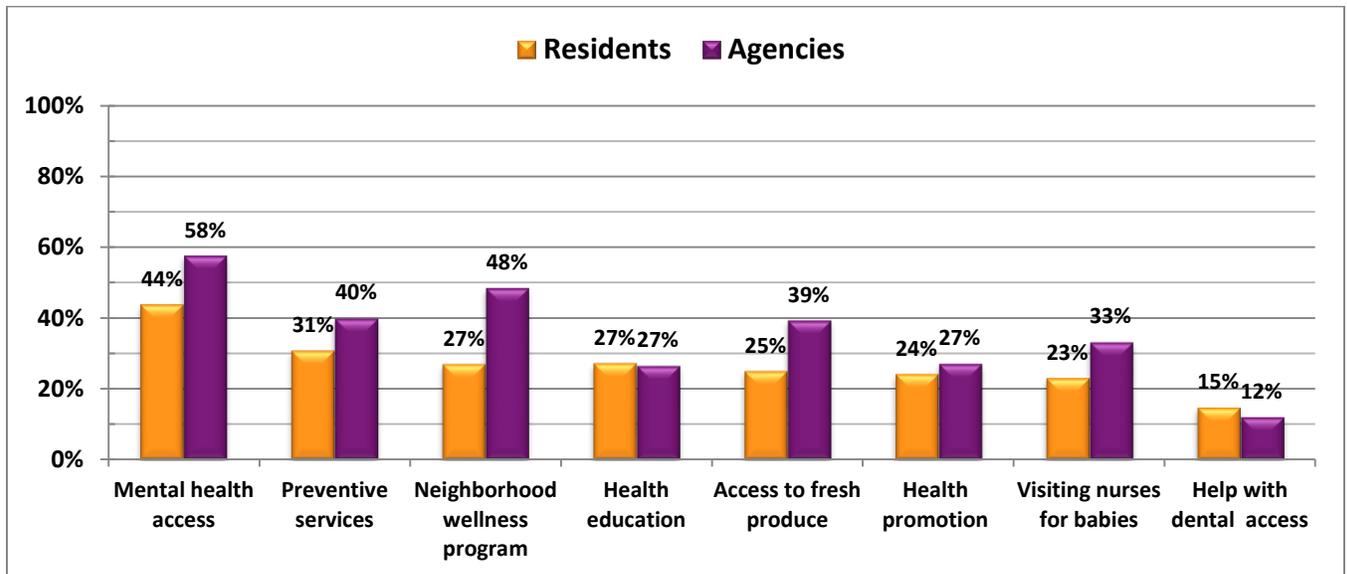
Unsafe housing is a byproduct of poverty, urban decay and the slow collapse of rural communities built for an agrarian population that moved off the farm generations ago. Communities in the Cedar Valley have all three factors.

Iowa has the highest incidence of radon in the United States. Radon is a colorless, odorless gas with a strong link to lung cancer.

Despite our open spaces and lack of heavy traffic and major metropolitan areas, Iowa ranks low in air quality. Iowa is in the bottom half of most state air quality rankings.

6. What are the top three public health services your community needs to be healthy?

Residents Answered: 1,284 Skipped: 270
 Agencies Answered: 33 Skipped: 8



Responses from residents and agencies differ across the board on this issue. Agencies make the case for better access, greater and more education. That aligns with best practice in healthcare delivery across UnityPoint Health. We recognize the wisdom, compassion and economy of preventing illness or providing early intervention rather than wait for disease to advance to a stage where it is always more expensive and often less successful to treat.

Emphasis on widespread prevention or early treatment of disease is a major shift in American thinking. We have developed a healthy focus on wellness. We have not yet understood wellness is the product of doing many things right and not doing some things at all, over a period of time. Wellness requires long-term action.

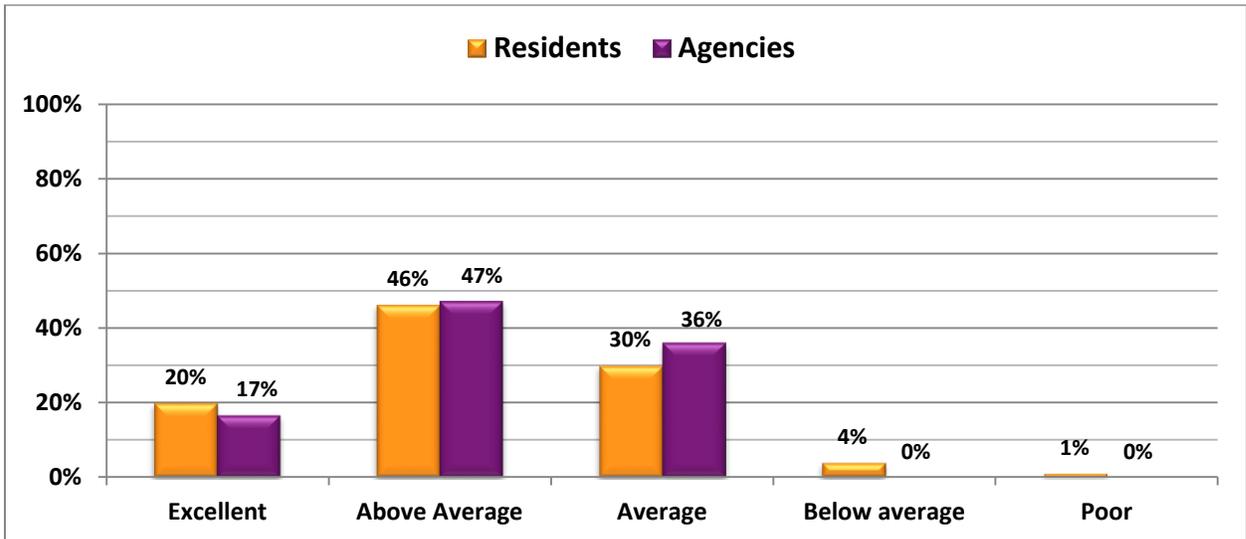
In this set of responses, agencies are leading residents' thinking. Prevention, early intervention and education are almost always better and easier than cure.

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PERSONAL HEALTH

7. How do you rate your personal health today?

Residents Answered: 1,531 Skipped: 23
Agencies Answered: 36 Skipped: 5

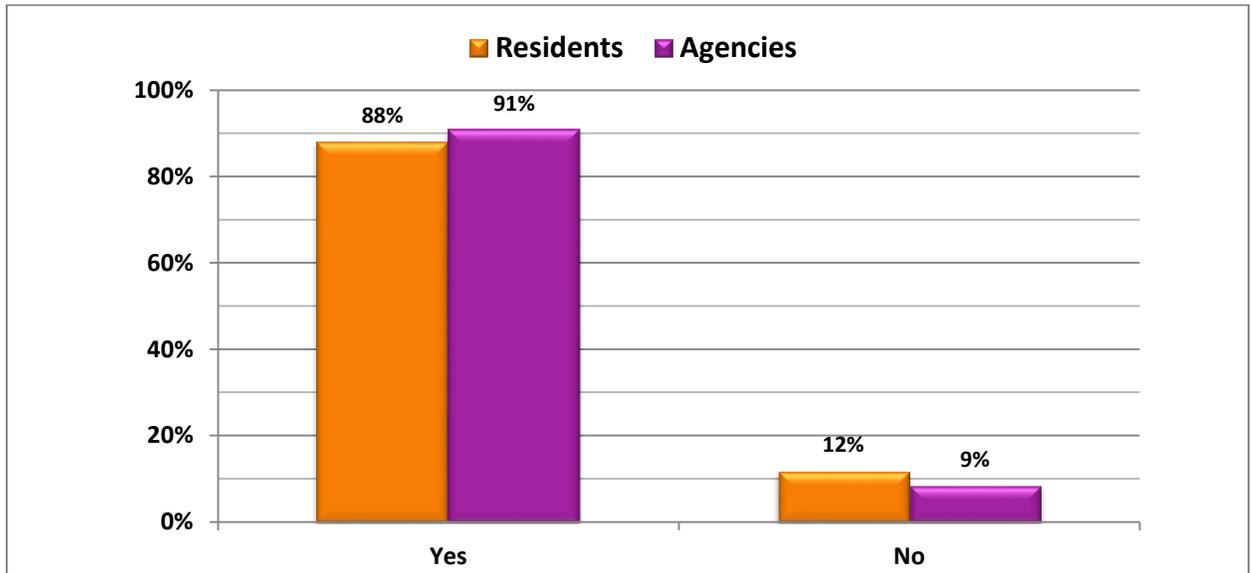


Residents and agencies both responded on the high side to this question. Statistically, only 50% of a population are apt to be average or above. In this case, 96% of respondents and 100% of agencies claimed that health status.

These self-evaluations contrast with answers to Question 1, where only 13% of respondents thought their communities are healthier than they were five years ago. It points to a common phenomenon in polling. It's easy to find fault with others and still overlook those same faults in ourselves.

8. Do you have an annual health checkup exam?

Residents Answered: 1,523 Skipped: 31
Agencies Answered: 35 Skipped: 6

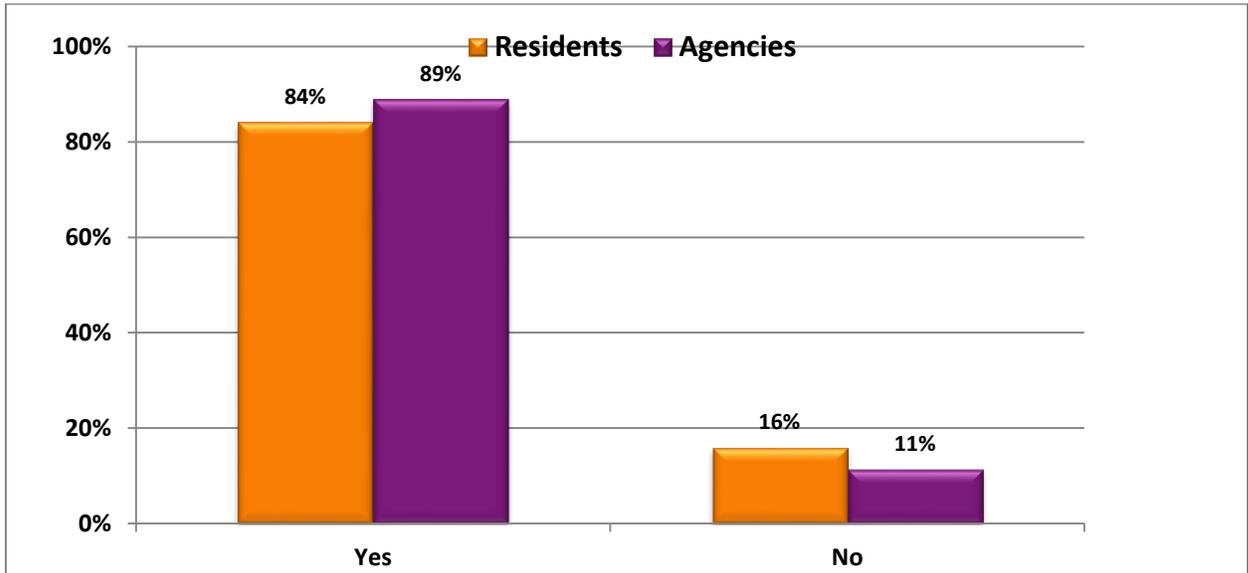


Iowa ranks slightly below the national average for primary care physicians per 100,000 residents. The national average is 157. Iowa indexes at 147.

Residents and agencies in our communities accept and complete annual health checkups. Part of that may be because these survey participants are well insured. See Question 31. The ability to pay for healthcare is an important access issue.

9. Do you have regular dental exams?

Residents Answered: 1,497 Skipped: 57
Agencies Answered: 35 Skipped: 5



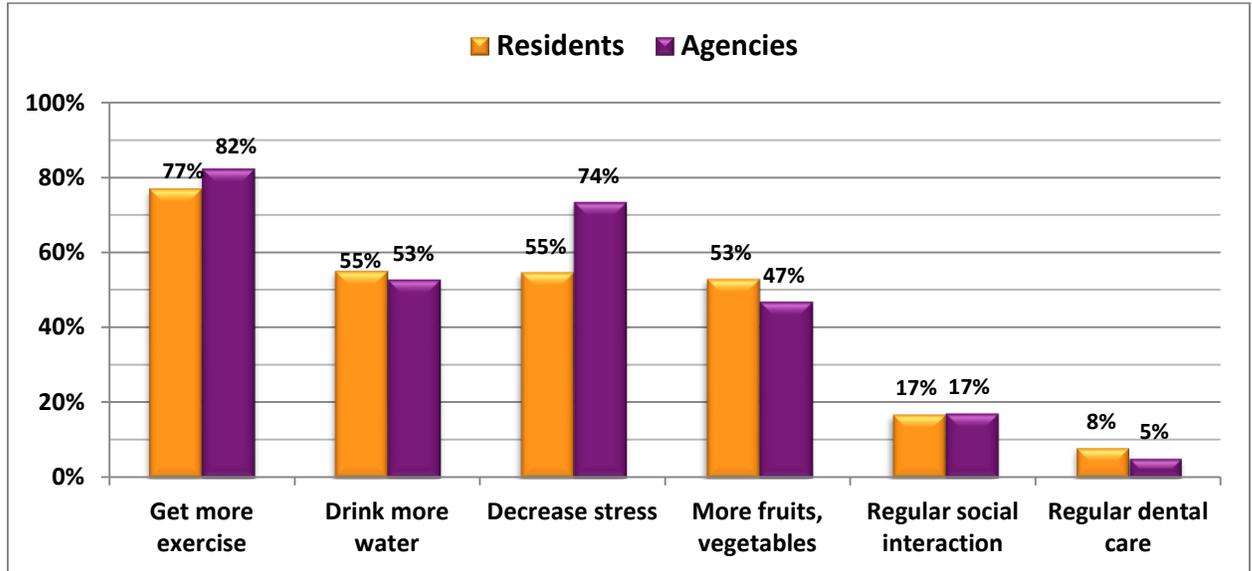
Dental care is less available in the United States than healthcare. About 75% of Americans have dental insurance, and 90% of dental insurance plans are employer-sponsored. Even with full employment, many jobs do not come with health or dental benefits.

Lack of regular dental care can cause tooth decay, tooth loss and gum disease. Poor oral care is linked to heart disease, cancer and diabetes.

Responses to this question are closer to national norms than responses to Question 8. Like good healthcare, good dental care requires lifelong patient participation, including regular brushing, flossing, checkups and restorations.

10. What three healthy behaviors would you like to start or do more often to improve your health?

Residents Answered: 1,489 Skipped: 65
Agencies Answered: 34 Skipped: 7



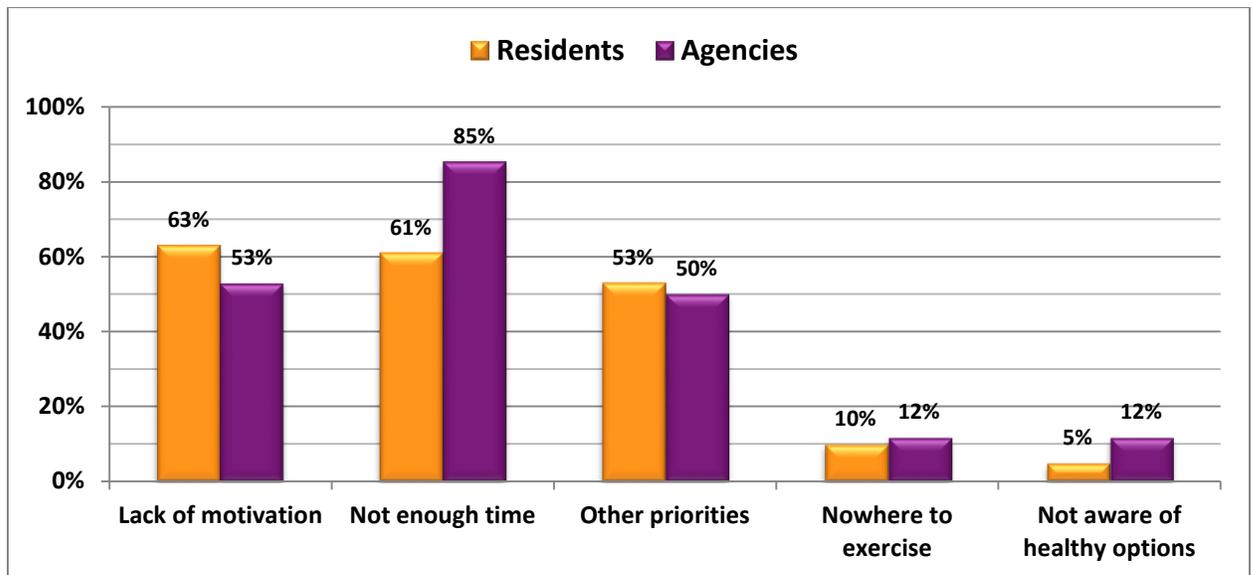
Most of us know we need more exercise. The responses here mirror responses in Question 4. Residents and agencies both identified lack of exercise as a common risky behavior for adults.

The urge to drink more water may have as much to do with good marketing as it does good health. We all need proper hydration, but the constant advertising to drink more water sells a great deal of it, mostly in bottles with exceptional profit margins. Many studies indicate that Americans already drink enough water, though much of it comes with calories and caffeine from soda, alcoholic drinks and coffee.

The need for ways to deal with stress shows up throughout this survey. See the Section VII Community Health link (p.44), *Americans Are Among the Most Stressed People In the World*.

11. What prevents you from doing healthier behaviors? Select all that apply.

Residents Answered: 1,460 Skipped: 94
Agencies Answered: 34 Skipped: 7

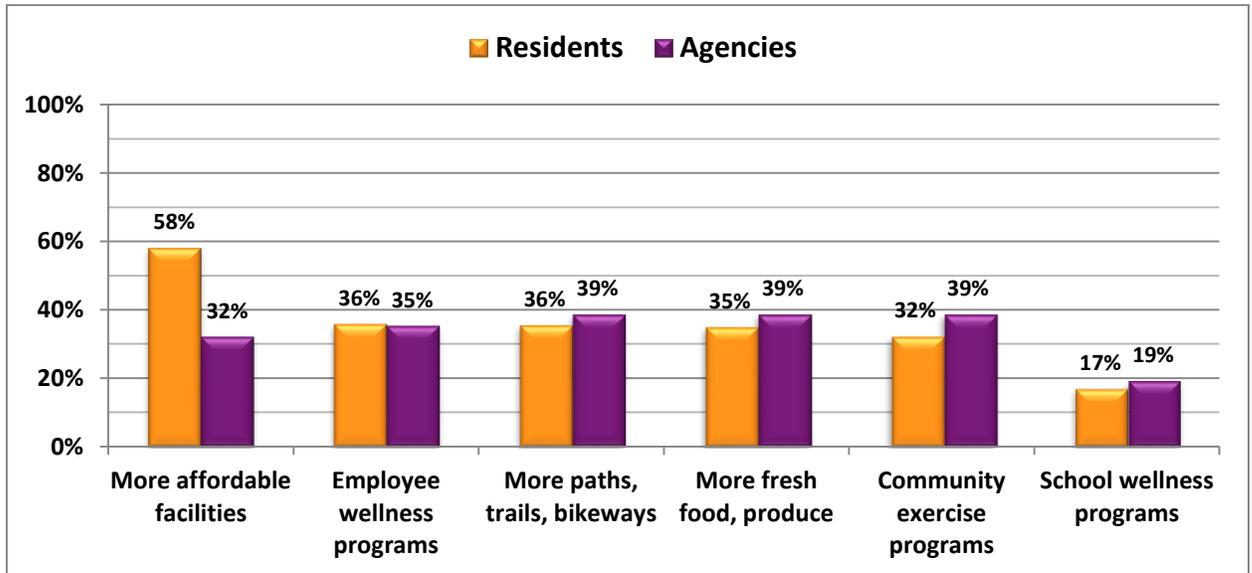


The top three responses to Question 11 say the same thing three different ways. Regular exercise is relatively rare among American adults across the age spectrum. We like sportswear, we love running shoes, but for the most part, we look the part but don't actually get much daily exercise. The Center for Disease Control estimates the average American adult gets about 15 minutes of vigorous exercise a day, less than half the recommended amount.

12. What would help you or your family members start or maintain a healthier lifestyle? Select all that apply.

Residents Answered: 1,295 Skipped: 259

Agencies Answered: 31 Skipped: 10



Responses to this question focus on programs and facilities, recognizing the social aspect of many exercise regimens.

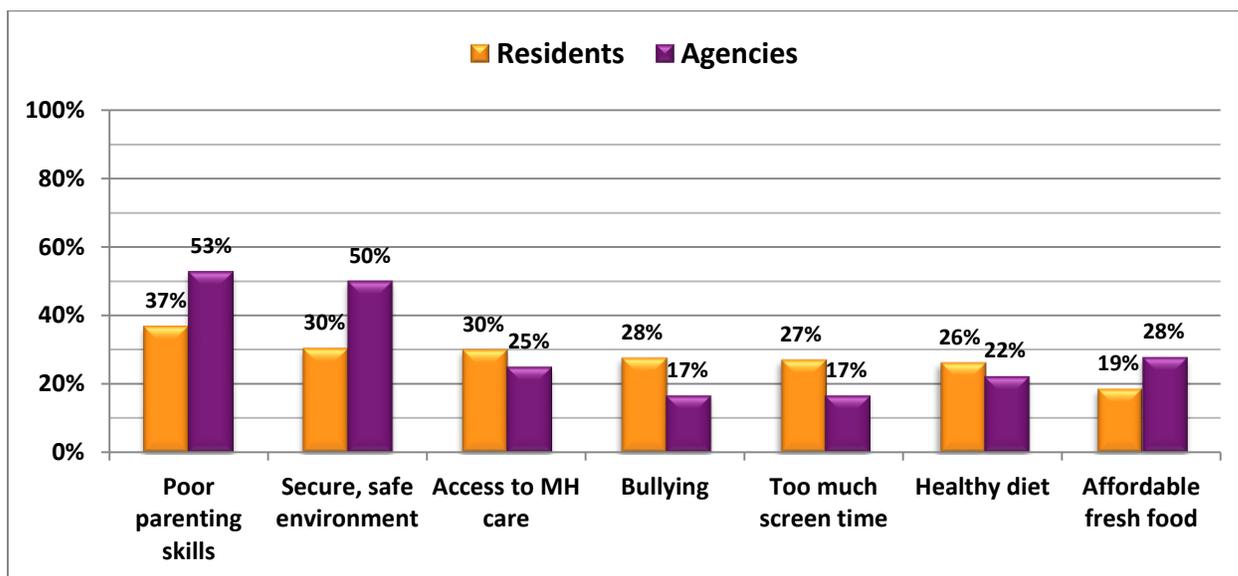
However, just having programs and facilities does not mean people will do the work necessary to attend often enough and work hard enough to make a difference. Sports gyms depend on this, selling many new memberships every January to people who stop showing up again by February. Wellness programs often run aground on a different barrier. While they are great for employees who are already exercising, wellness programs tend to help that group a lot while attracting relatively few new members.

We all need exercise at every age, and most of us need a lot more than we are getting. The common tripwire for all of us is that exercise can't be delegated. There is no health benefit for those who don't put in the work.

CHILDREN'S HEALTH

13. What are the top three health concerns relative to children's health in your community?

Residents Answered: 1,530 Skipped: 24
 Agencies Answered: 36 Skipped: 5



Poor parenting, the top children's healthcare concern of residents and agencies, also registered strongly in our 2017-2019 health needs assessment.

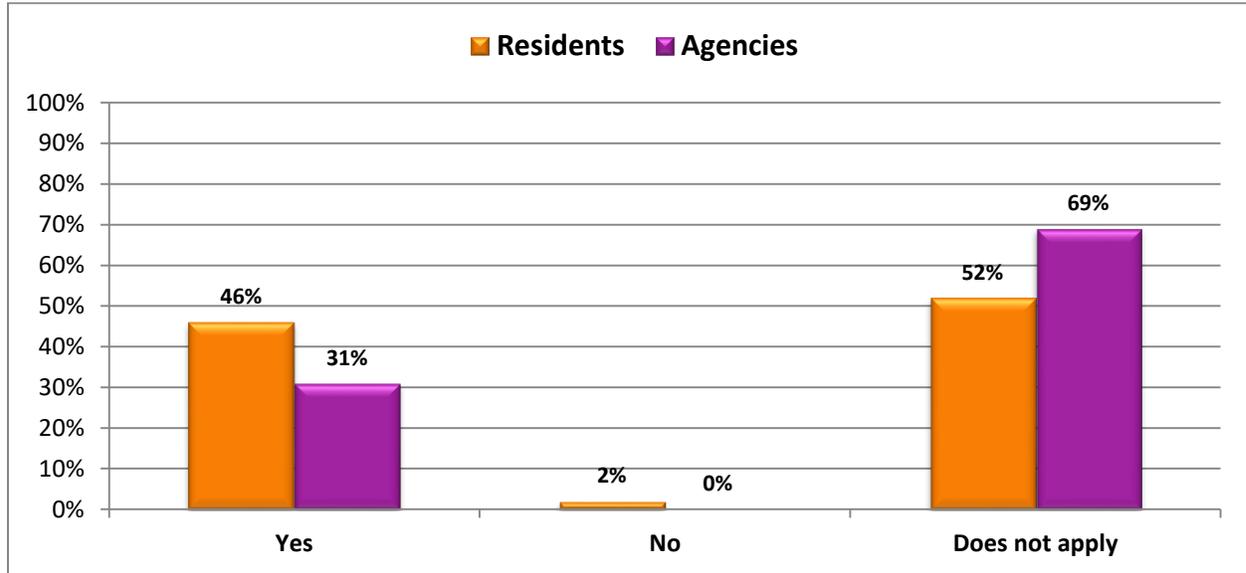
Good parenting ties to the need for children to have a safe, secure environment. That's both a personal and a community health issue. See Section IV, Adverse Childhood Experiences (ACES), starting on p.28.

Access to mental healthcare is even more difficult for children than adults. Iowa ranks 41st in psychiatrists per capita and 50th for inpatient mental health beds. Only a handful of Iowa psychiatrists specialize in children and teens.

Bullying is not new to this list, but it is gaining prominence quickly. Online bullying is particularly difficult to address. Parents often have little idea how many predators lurk online and how easy it is for them to prey on even young children.

14. Do your dependent children get regular physical exams and vaccinations?

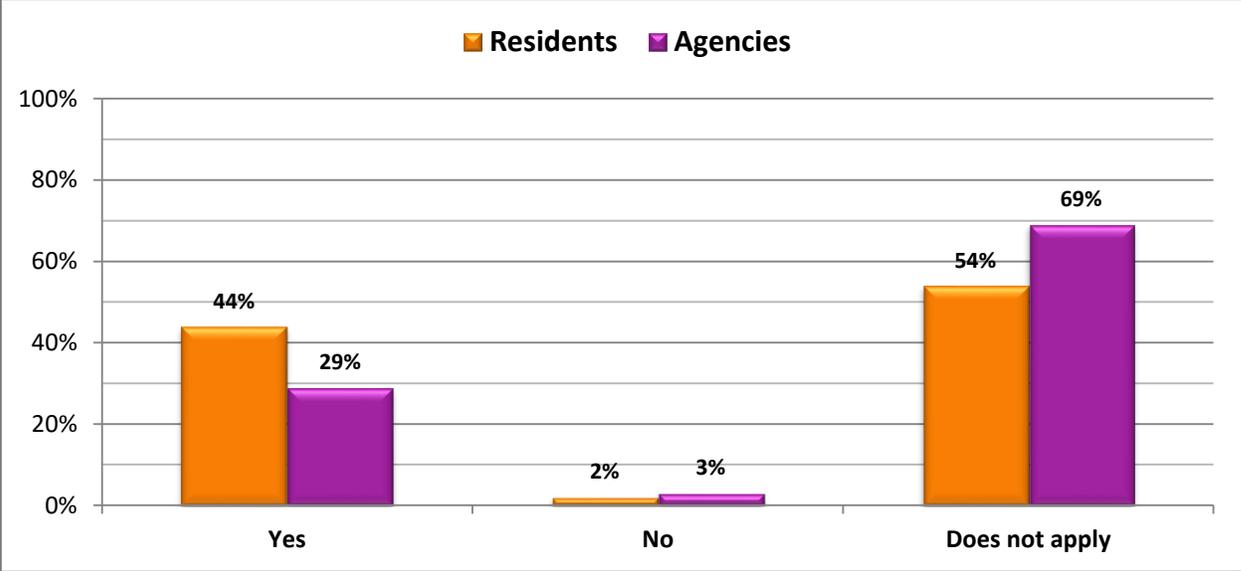
Residents Answered: 1,527 Skipped: 27
Agencies Answered: 35 Skipped: 6



This is a positive response and a credit to residents, agencies and communities.

15. Do your dependent children get regular dental exams and treatments?

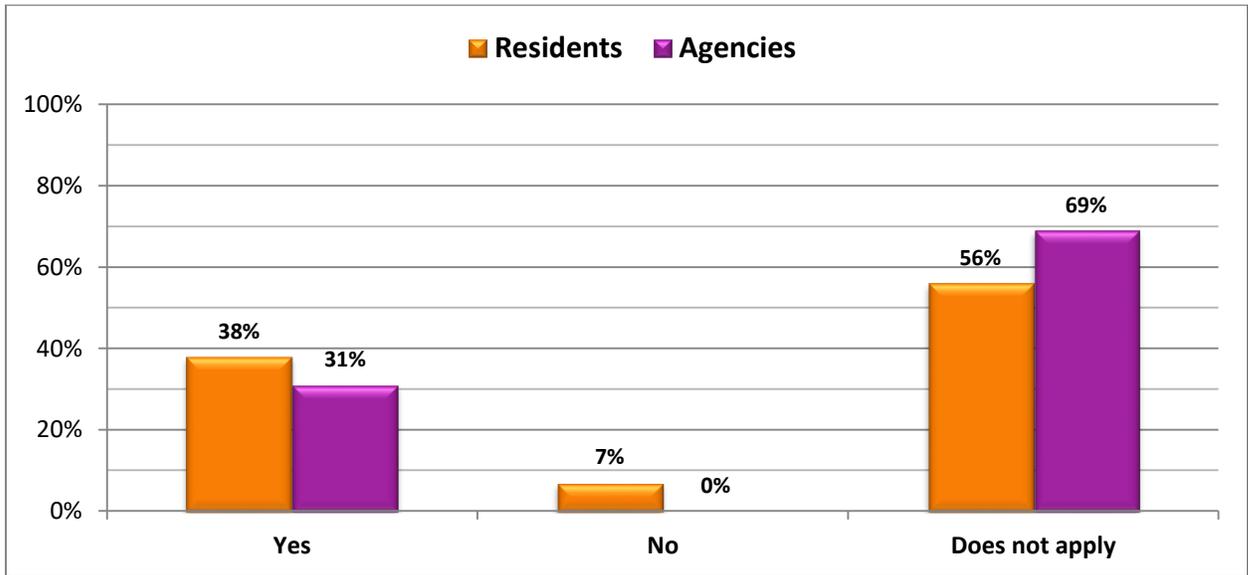
Residents Answered: 1,498 Skipped: 56
Agencies Answered: 35 Skipped: 6



Almost all respondents to the surveys have health insurance. Not all have dental insurance. With that in mind, residents in this survey are still over-performing in our communities relative to their ability to pay for dental services,

16. Do your dependent children get their eyes checked?

Residents Answered: 1,498 Skipped: 56
Agencies Answered: 35 Skipped: 6



As in Question 15, responses to this question may depend on residents' insurance status. Eye exams and glasses are not covered under most healthcare policies.

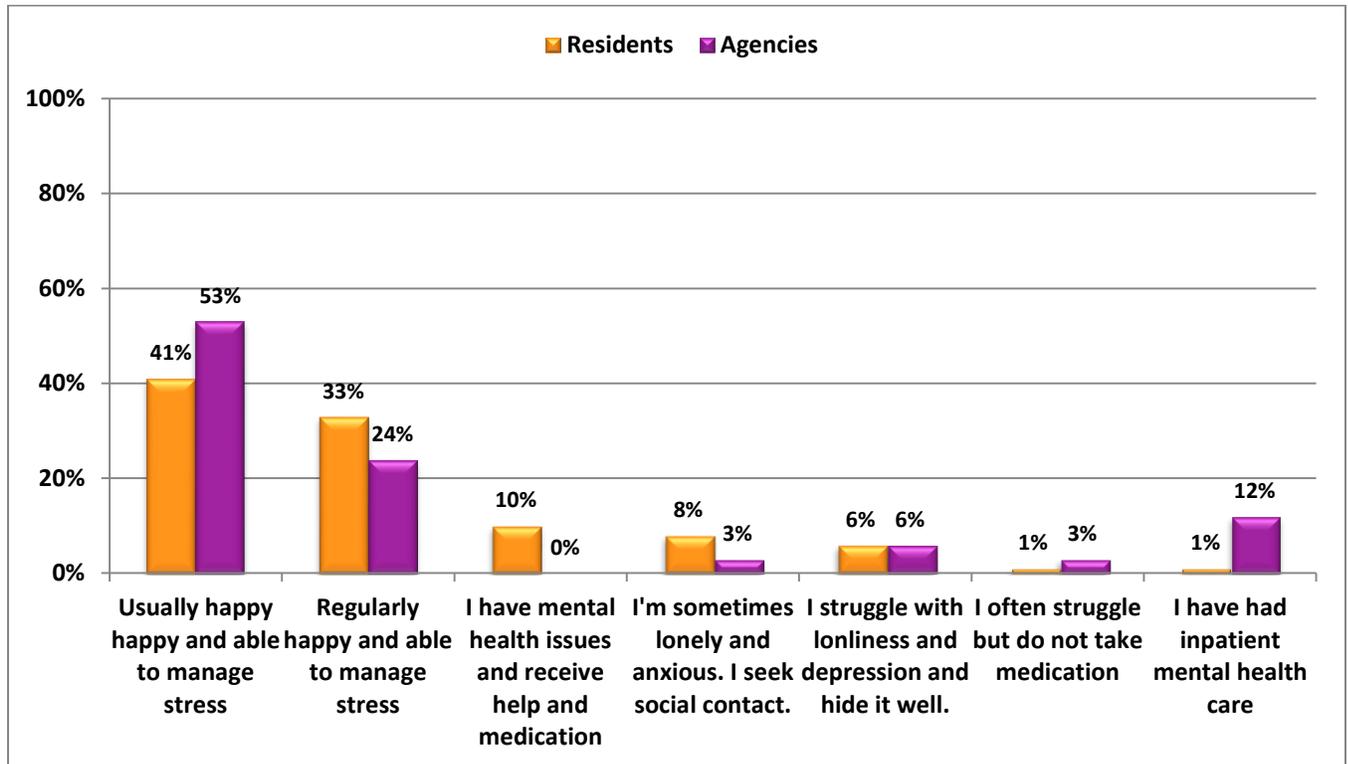
This topic deserves more attention. Nationwide, 10%-12% of primary school students have undiagnosed vision problems. The most common is myopia—nearsightedness. Undiagnosed kids who can't see well can't read well. Kids who can't read by the 4th grade are at risk of being sidelined academically for the rest of their lives.

There are several effective programs that offer kids free eye exams and glasses, but they are not yet widespread. A 2018 Vision to Learn clinic at Irving School in Waterloo identified 29 elementary students who needed and got glasses. The program is ongoing in Waterloo and Dubuque schools.

MENTAL HEALTH

17. Which statement best describes your mental health today?

Residents Answered: 1,441 Skipped: 113
 Agencies Answered: 34 Skipped: 7

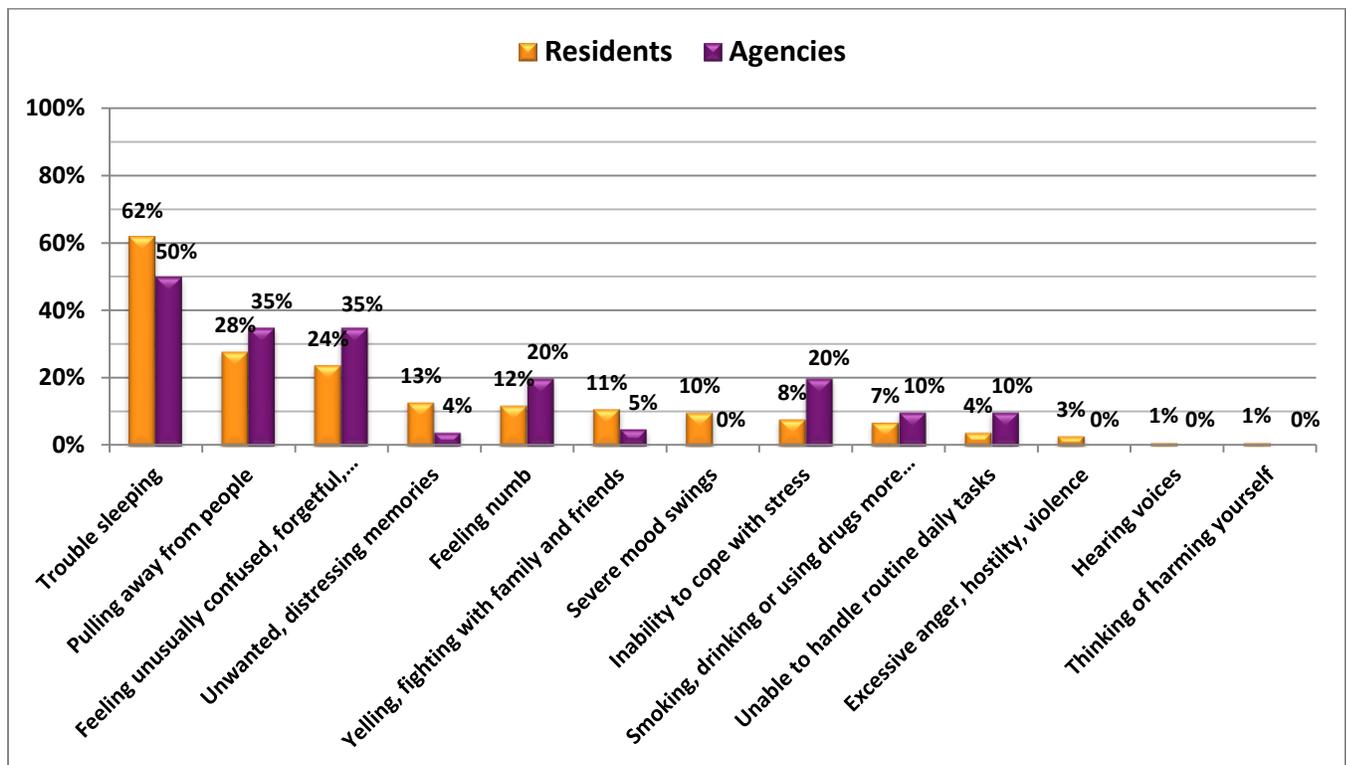


Three-quarters of residents and agencies indicated they generally are not dealing with mental health issues in their daily lives. That correlates well with national norms, which estimate one in five American adults will have one or more mental illnesses.

Mental illness still carries a powerful stigma. Not only do people not want to admit their own issues, they don't want to share them with others. Mental illness often frightens family and friends, causing them to pull away as if it were contagious. Mental illness also carries the unenviable distinction of being something patients somehow bring on themselves or can cure just by willing it away. Those common misperceptions push mental health patients and issues deeper into the shadows, away from effective treatment.

18. Are you currently experiencing any of the following? Select all that apply?

Residents Answered: 673 Skipped: 881
Agencies Answered: 20 Skipped: 21



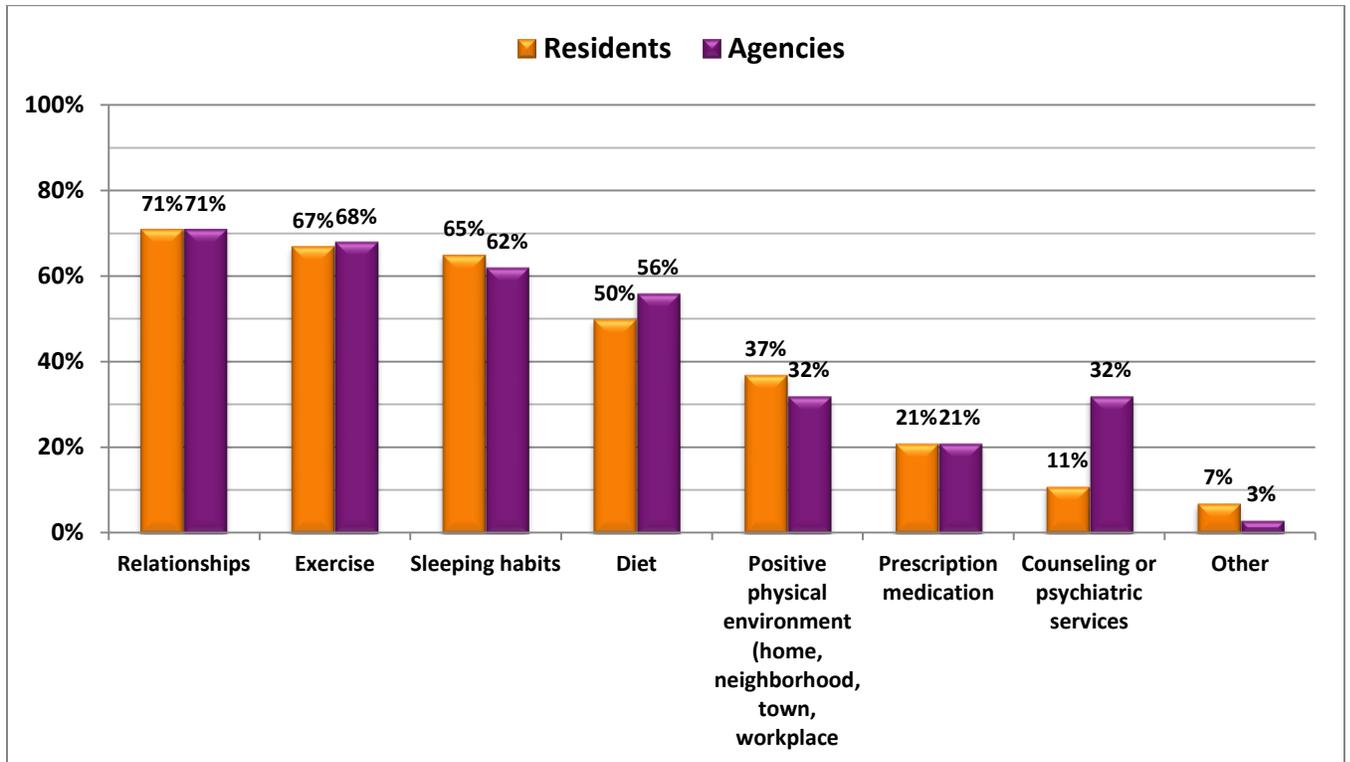
Six out of ten residents and half of agencies skipped this question, reducing the sample size. For those who responded, trouble sleeping was by far the most common issue reported.

The next two responses, pulling away from people and feeling unusually confused, are also common responses and frequent signs of emotional stress. While we did not test for it, some of these issues may be driven by too much work, too much screen time and too little time spent unplugged and free to recharge.

See Question 13 above. A significant number of residents and agencies indicate their children are spending too much time online. Children learn that by example.

19. What improves your mental health? Select all that apply.

Residents Answered: 1,400 Skipped: 154
Agencies Answered: 34 Skipped: 7

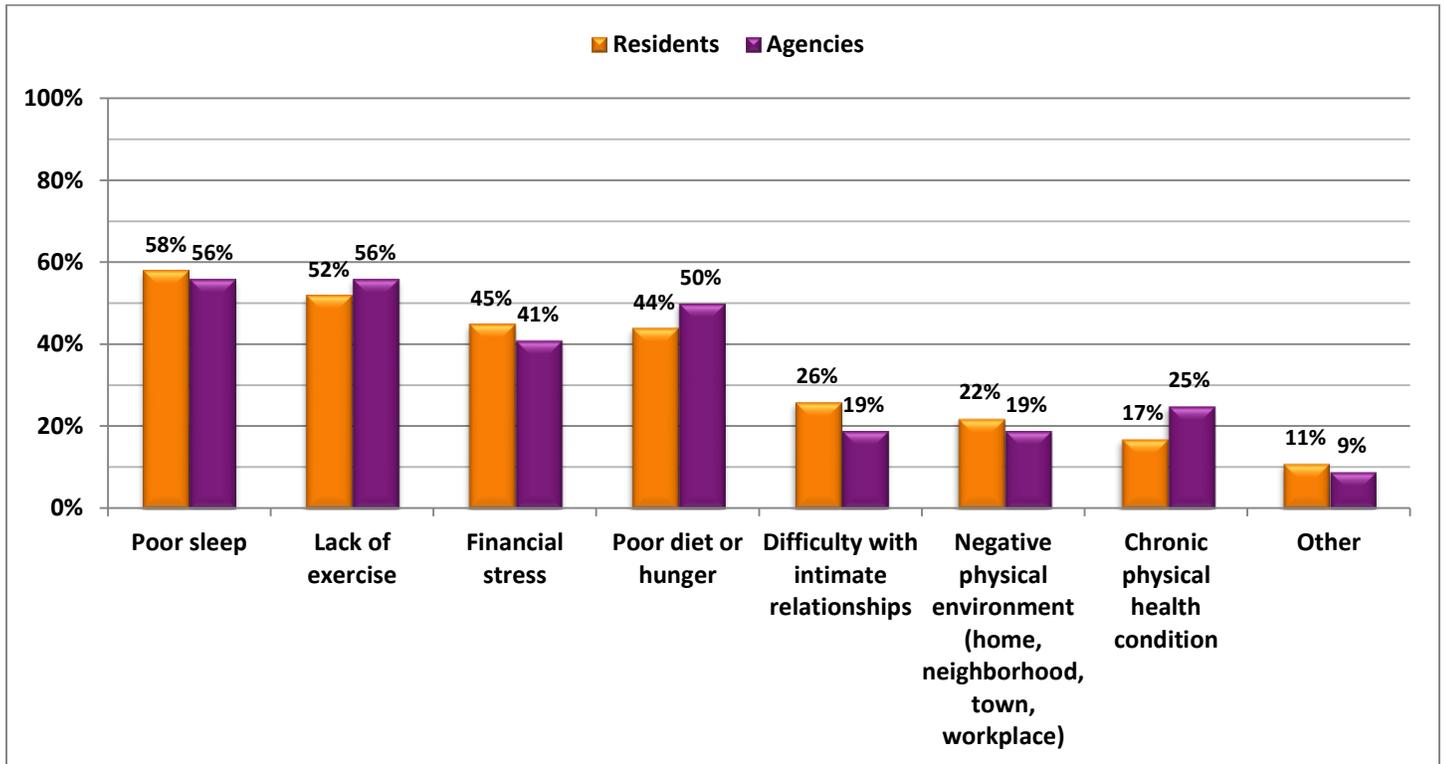


The correlation between resident and agency responses is strong here. None of these healthy activities is new or flashy. They are tested, reliable ways to re-center ourselves around home, family and our own needs.

These responses underline the social determinants of good health and healthcare. Respondents are saying that getting the basics right—family, friends, exercise, sleep and diet—is generally more effective by far than medication or counseling alone. Human beings are social animals. We need connections with other people to thrive. Things that bend those bonds stress us. Too much stress breaks us.

20. What makes your mental health worse? Select all that apply.

Residents Answered: 1,300 Skipped: 254
Agencies Answered: 32 Skipped: 9

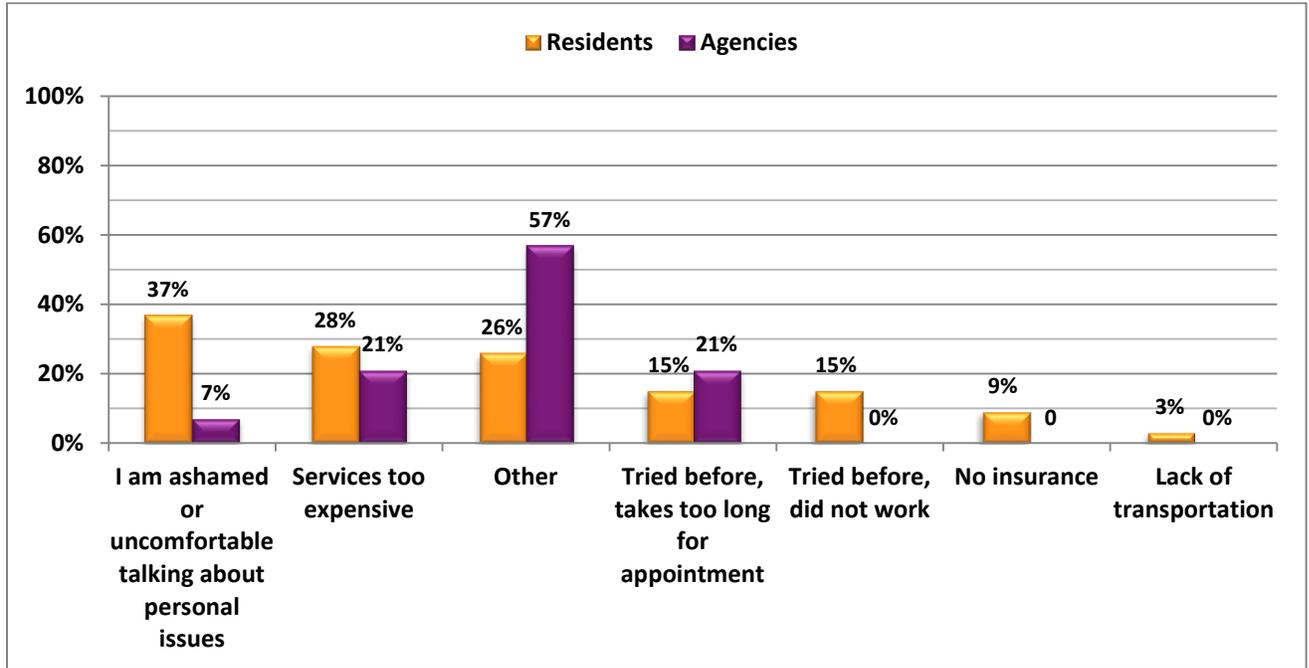


These responses validate the answers to Question 19. What makes our mental health worse is the absence of what makes our mental health better. The top five responses are the lack of things we all need: sleep, exercise, financial security, healthy diet and relationships built on affection and trust.

Chronic physical health conditions are common alongside mental health issues. They can get overlooked if they are not as obvious. Some physical health conditions drive mental illness. None make mental illness easier to treat. That's why UnityPoint Health is co-locating mental health services in physical health clinics. The best time to address both physical and mental health issues is while people are already in our clinics, talking face-to-face with providers they trust.

21. If you could benefit from mental health services you are not receiving now, why not? Select all that apply.

Residents Answered: 560 Skipped: 994
 Agencies Answered: 14 Skipped: 27



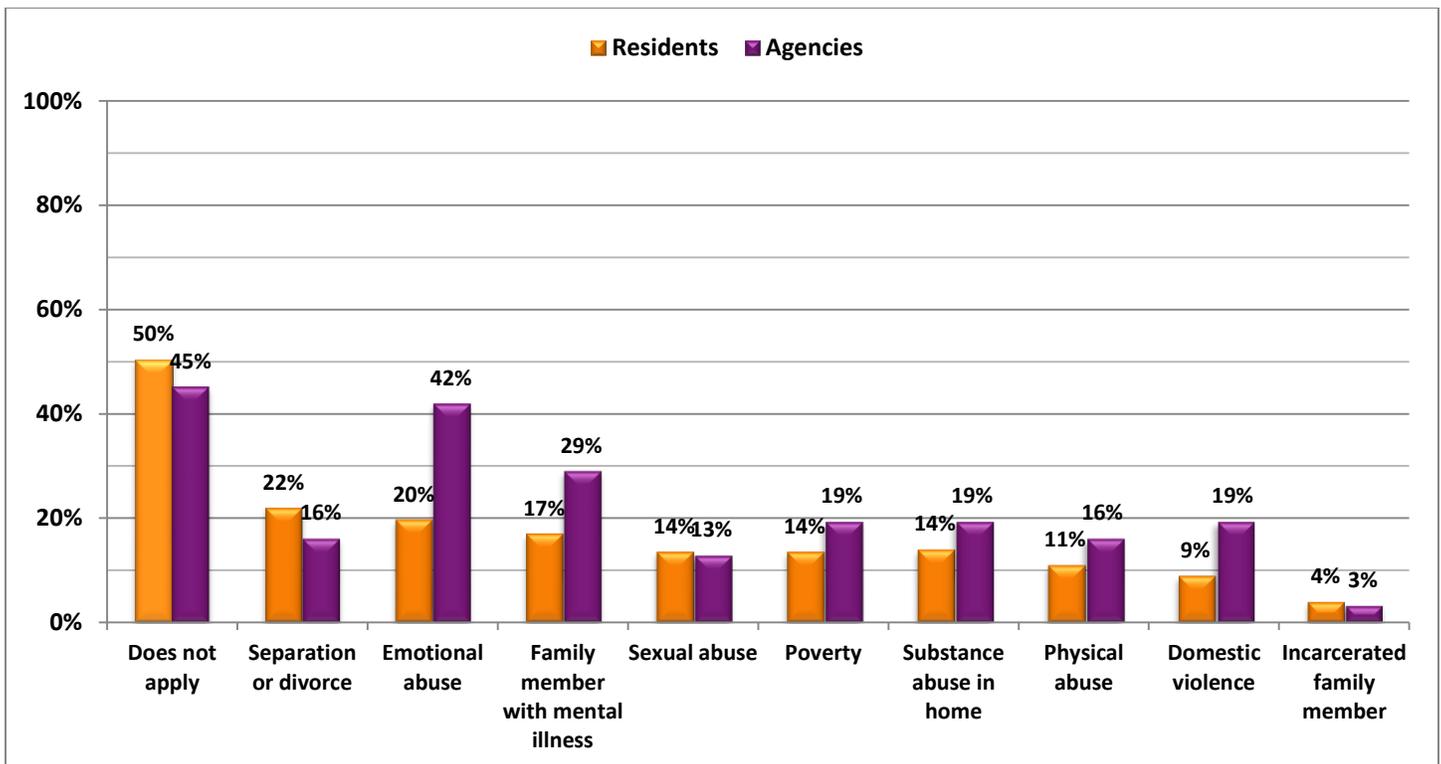
The stigma of mental illness is apparent when 37% of resident responders say they do not seek care out of shame or discomfort. Patients often avoid disclosing physical health worries and conditions for the same reason, but they are seldom as powerless as mental health patients to advocate for what they need.

Issues of cost and delay point to the enormous imbalance between the limited number of mental health providers and the large number of mental health patients needing prompt attention. This is an ongoing, long-term crisis that government at all levels has failed to address. The Kaiser Family Foundation reports that mental health providers across Iowa currently are meeting just 38% of the state's mental health needs. There is no remedy in sight.

ADVERSE CHILDHOOD EXPERIENCES (ACES)

22. Did you experience any of the following trauma as a child? Select all that apply.

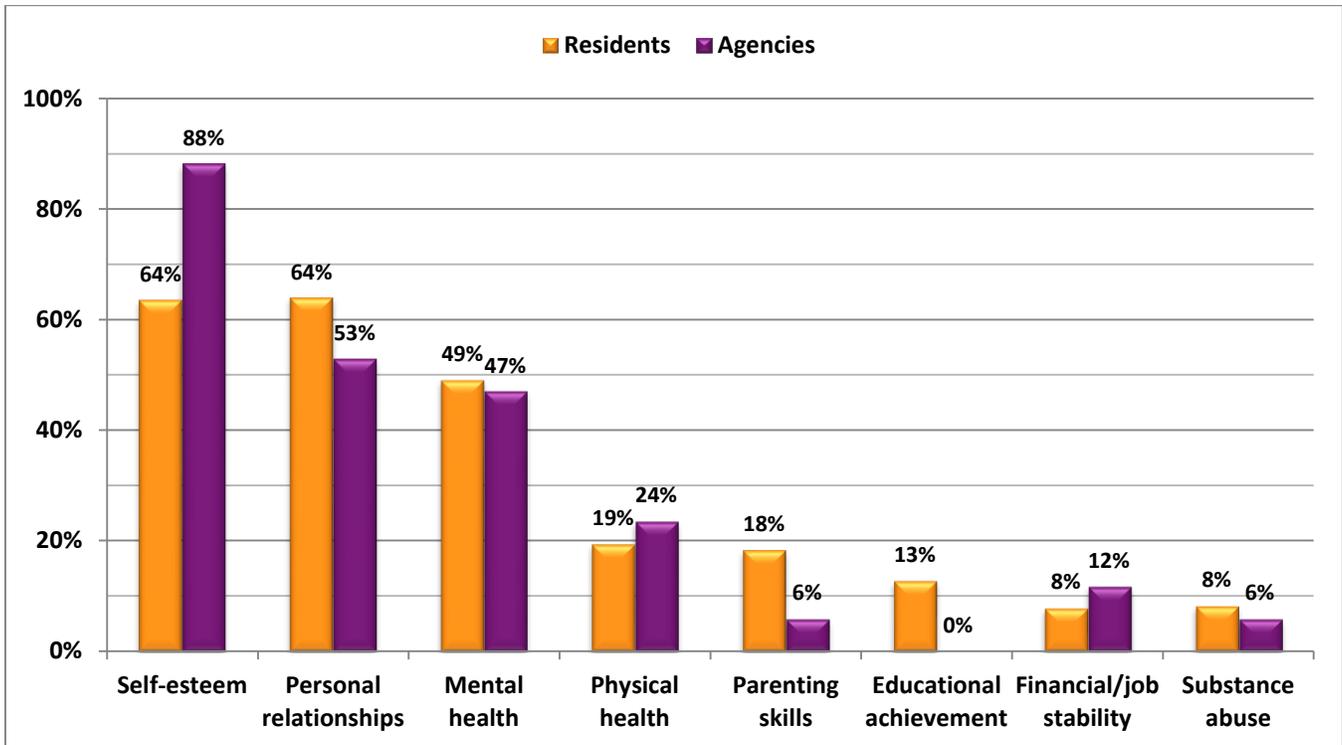
Residents Answered: 1,312 Skipped: 242
Agencies Answered: 31 Skipped: 10



There is strong correlation between adverse childhood experiences (ACES) and serious health problems when children become adults. The effect of ACES is cumulative. Adults who have had zero or one ACE as children typically live longer, healthier lives than adults who have had multiple ACES. The negative effect of multiple ACES show up in middle age as addictions, alcoholism, poor self-image, lack of self-control, and chronic disease.

23. Has childhood trauma affected you as an adult? Select the parts of your adult life that were or are now affected.

Residents Answered: 507 Skipped: 1047
Agencies Answered: 17 Skipped: 24



Six hundred fifty residents reported having one or more adverse childhood experiences (ACES) in Question 22. In Question 23, 507 residents and 14 agency respondents illustrate the link between childhood trauma and adult health.

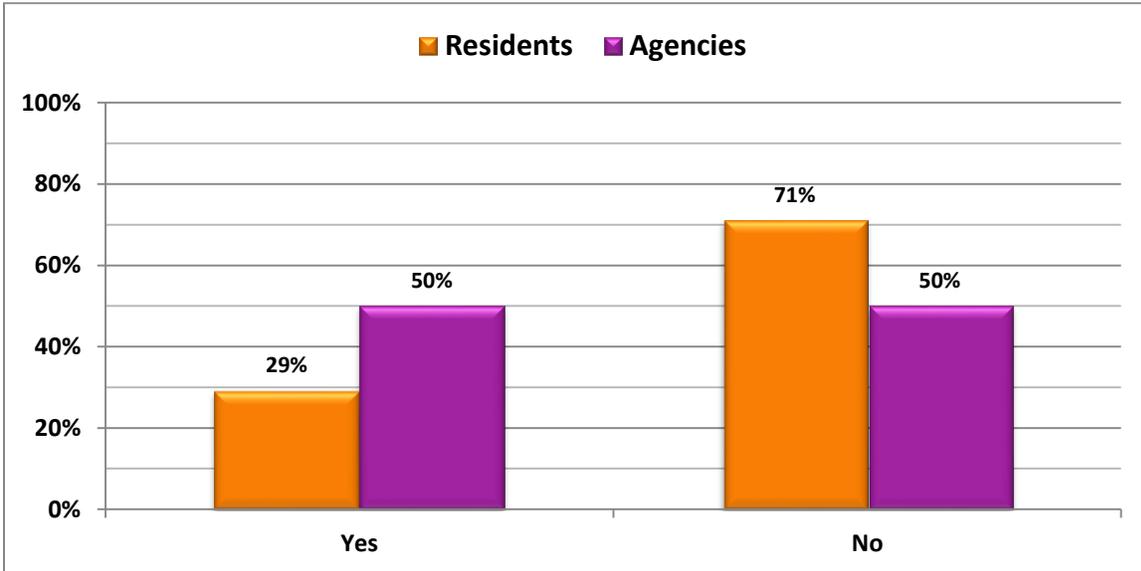
Majorities of both groups indicate ACES have affected their self-esteem and personal relationships as adults. Majorities also report ACES have affected their current mental health. Roughly a fourth of all respondents to Question 23 report childhood ACES have affected their physical health as adults.

Gathering and tracking ACES data can help communities identify and address ACES and help reduce or prevent generational cycles of negative behavior from repeating.

24. Have you had support or counseling to address childhood trauma you experienced?

Residents Answered: 676 Skipped: 878

Agencies Answered: 18 Skipped: 23

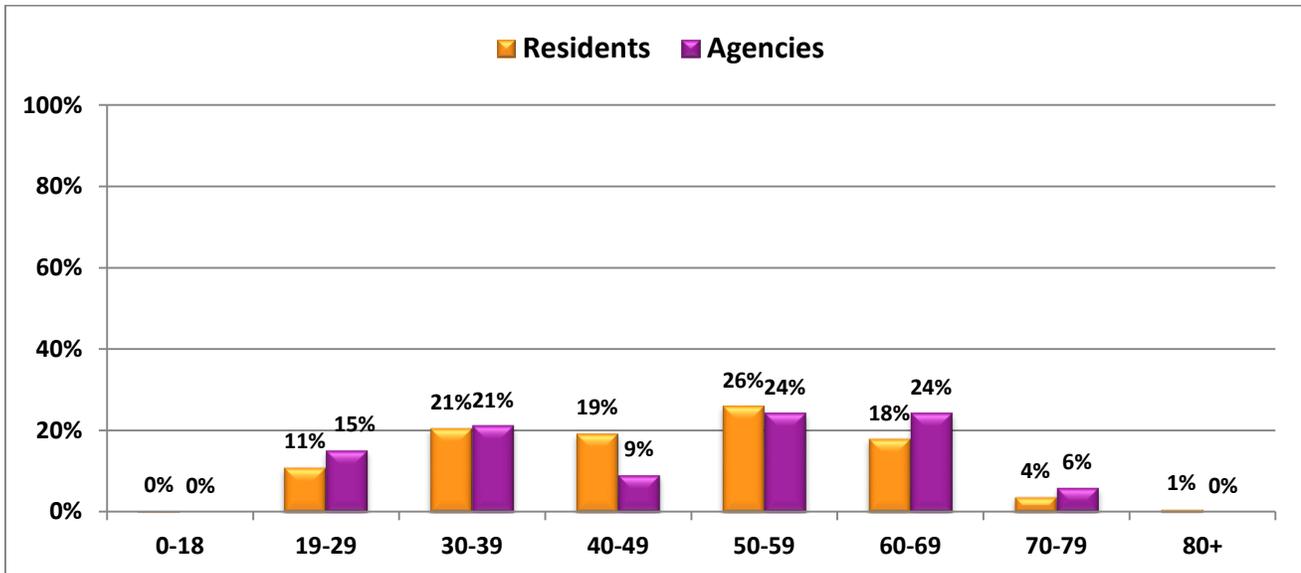


The data here is clear. Adverse childhood conditions (ACES) reported by residents and agencies in this survey have caused some 200 participants to seek counseling as adults. Communities and providers have enormous opportunity to improve population health by conducting and tracking ACES studies and acting on the results.

PARTICIPANT PROFILES

25. What is your age?

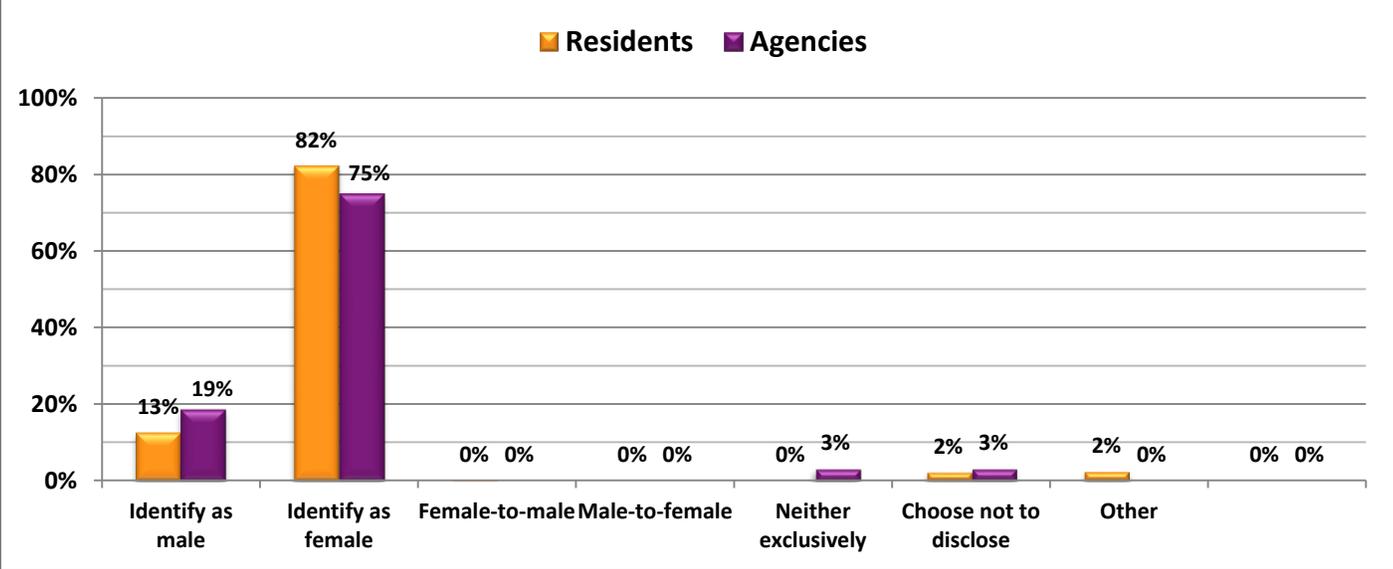
Residents Answered: 1,373 Skipped: 181
Agencies Answered: 33 Skipped: 8



This is an expected age distribution curve for online surveys. Healthcare issues are usually not serious matters to teens and young adults. Issues become more important as young people mature and raise children of their own. Healthcare becomes a priority for most adults once they reach middle age and a way of life for the frail or elderly.

26. What is your gender?

Residents Answered: 1,370 Skipped: 184
 Agencies Answered: 32 Skipped: 9

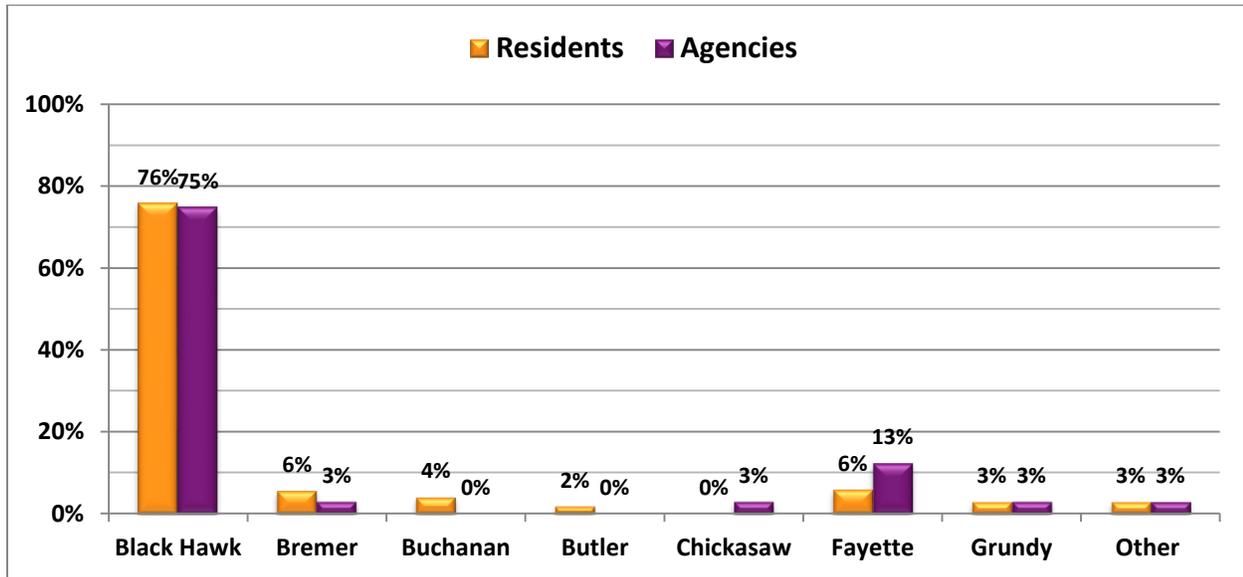


This is a valid gender distribution for healthcare issues. Women make a large majority of healthcare decisions for themselves and family members at all stages of life. Men are more apt to seek healthcare primarily for injury or illness rather than for prevention, early intervention or counseling.

The general public usually identifies just two genders. Patients, however, may identify in many ways. UnityPoint Health-Waterloo provides gender-specific care at our LGBTQ clinic at UnityPoint Clinic in Cedar Falls.

27. What is your home county?

Residents Answered: 1,341 Skipped: 213
Agencies Answered: 32 Skipped: 9

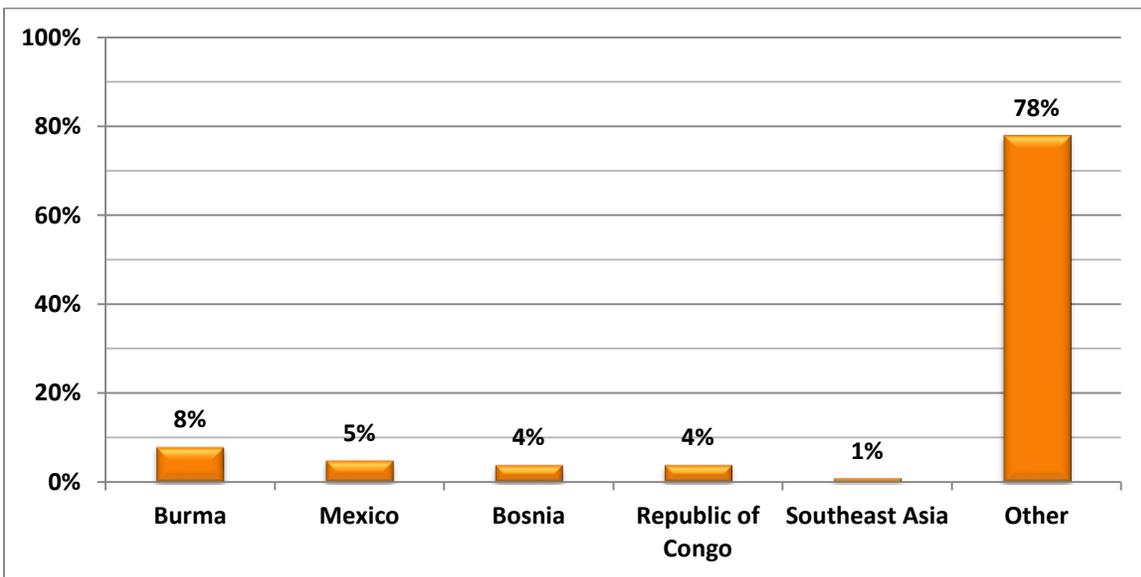


Black Hawk County residents are over-represented in this survey. Surveys are frequently passed from person to person to take. Person-to-person sharing decreases with fewer contacts in smaller communities and organizations.

Agencies typically provide services throughout the Cedar Valley, regardless of where the agencies are based.

28. What is your country of origin if you immigrated here in the last five years?

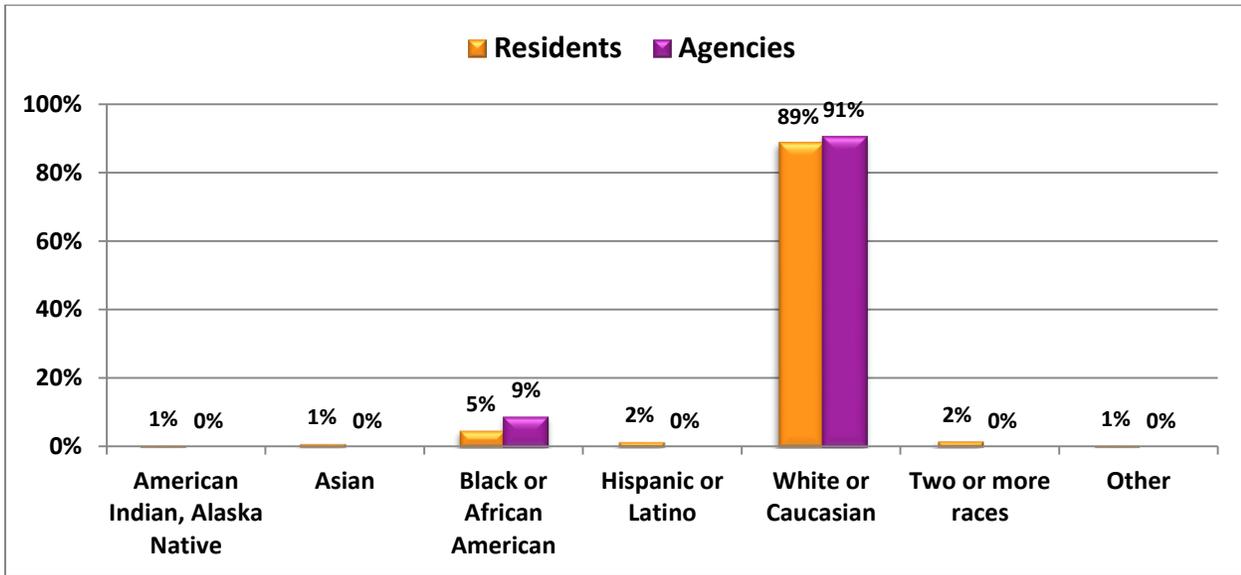
Residents Answered: 210 Skipped: 1,344



Waterloo in particular has many immigrant populations. Local immigrant data supplementing Question 28 will be available in a separate survey conducted by the EMBARC agency. It will be appended to this report when it is published in 2020.

29. What is your race or ethnicity?

Residents Answered: 1,343 Skipped: 211
Agencies Answered: 33 Skipped: 8



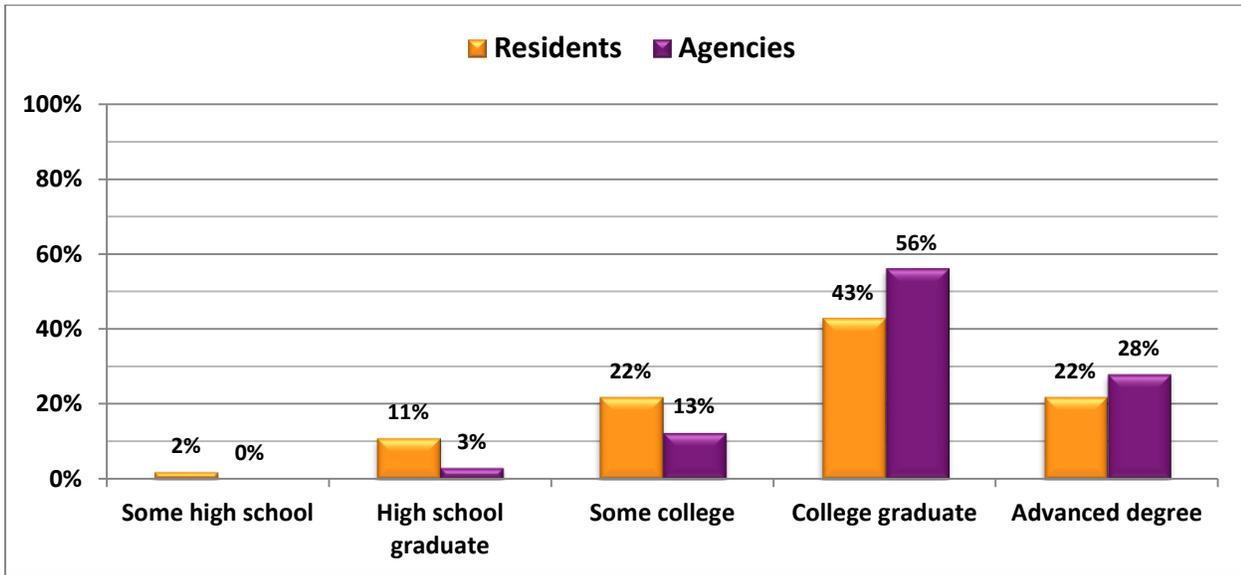
Black or African-American residents are under-represented in this survey for Black Hawk County but fairly represented for the survey area in whole.

Survey sponsors added paper surveys to the online tools and sought out additional minority responses to bring the results into better racial balance. Many black residents distrust healthcare in general and hospitals in particular. Many Hispanic residents are reluctant to be surveyed in any way because of the relentless national focus on immigration.

This is where agency responses make a difference. Agencies speak for people who cannot or will not participate in surveys themselves. Agency responses provide insider insight into community health needs based on direct experience.

30. What is your education level?

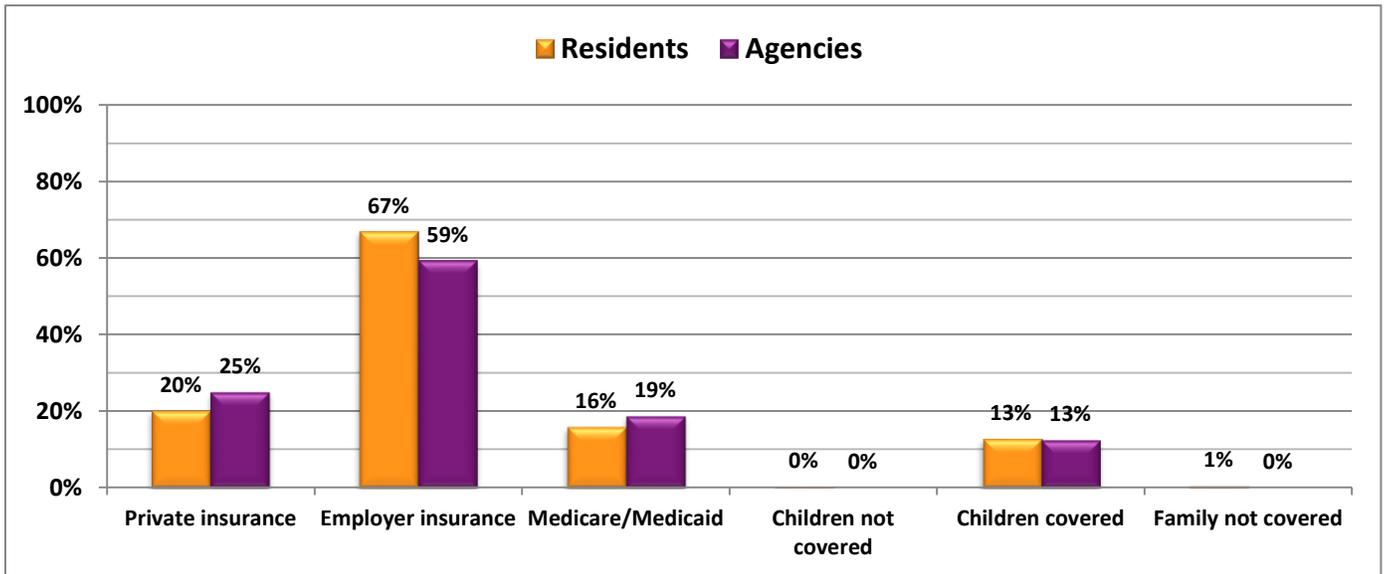
Residents Answered: 1,333 Skipped: 221
Agencies Answered: 32 Skipped: 9



The education-level distribution is heavy on residents with college degrees. That also reflects the pass-along nature of online surveys. Friends share online links, and online colleagues often share education levels. The distribution may also skew educationally upward because 221 residents chose not to reveal their status to this question.

31. What is your health insurance status?

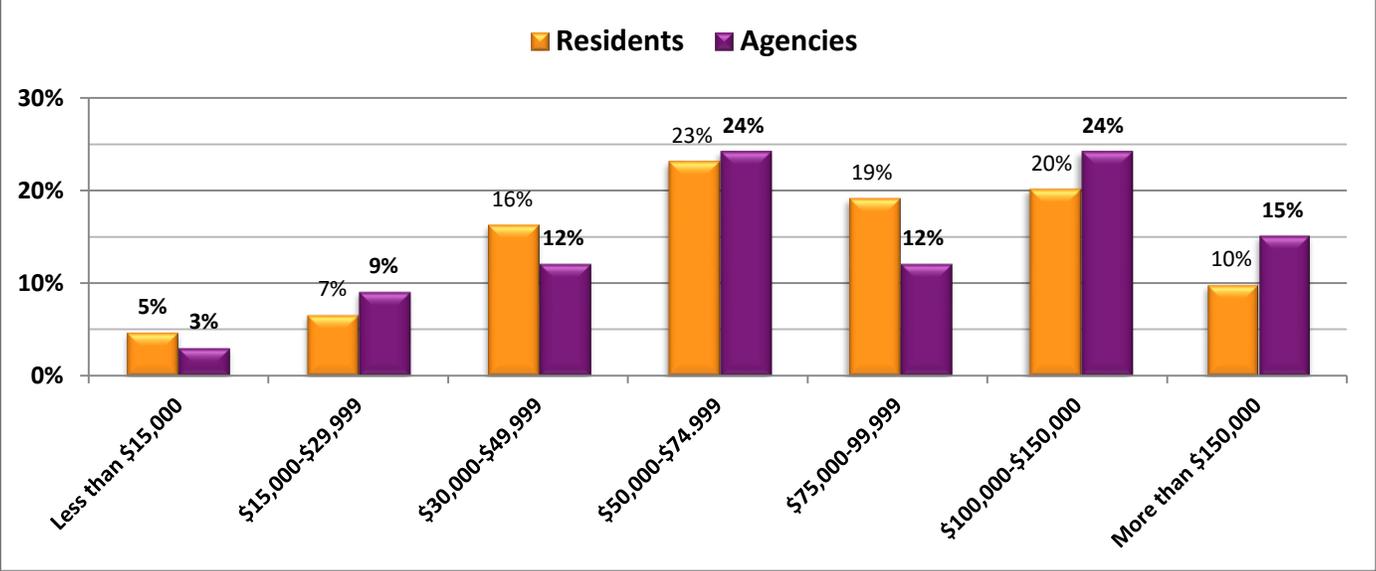
Residents Answered: 1,369 Skipped: 185
Agencies Answered: 32 Skipped: 9



This response distribution correlates with the statewide profile. Fewer than 5% of Iowa adults have no health insurance whatsoever. Prior to the Affordable Care Act, 88% of Iowans were insured. Today, that figure tops 95%.

32. What is your gross family income before taxes?

Residents Answered: 1,309 Skipped: 245
 Agencies Answered: 33 Skipped: 8

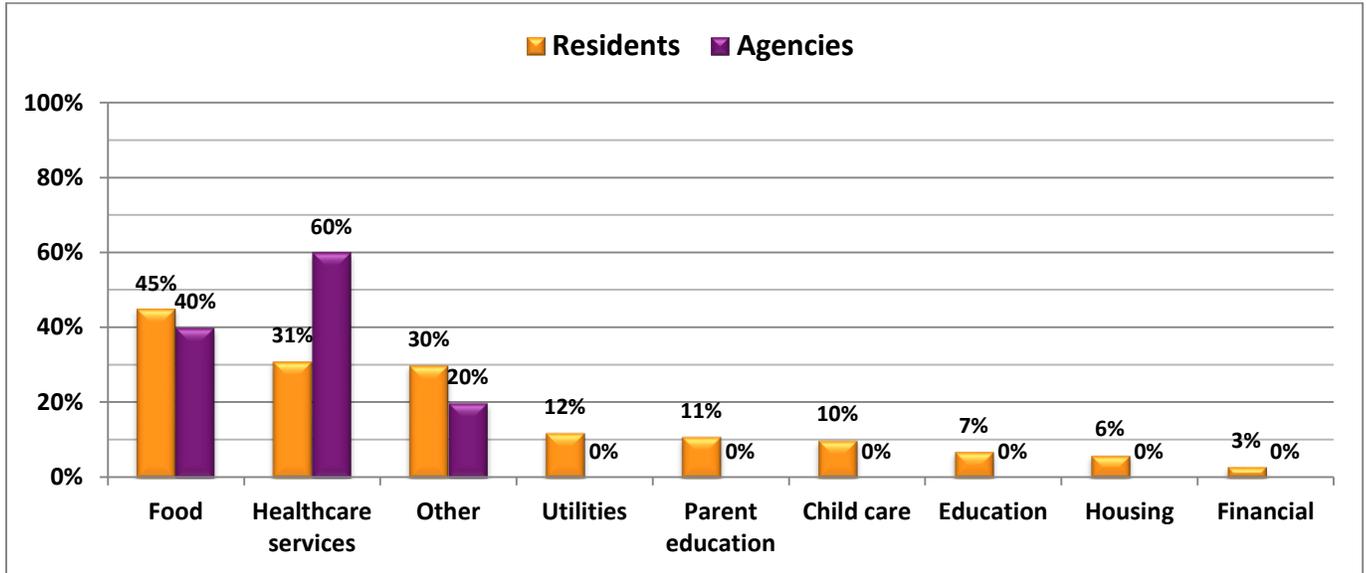


This income distribution reflects the higher education level of many respondents. However, it does not include the family income of 245 residents who chose not to share their data. The Census Bureau reports that median household income in Iowa was \$69,000 in 2017.

33. Are you currently receiving services from local aid organizations? Select all that apply.

Residents Answered: 230 Skipped: 1,324

Agencies Answered: 5 Skipped: 36



About 15% of survey residents have received food, healthcare and other forms of financial aid from local agencies. That figure tracks well with census 2018 data. The poverty rate is 12% for Iowa and 16% for Black Hawk County. Nationwide, the poverty rate is 14%. Agency response is low to this question.

V. Potentially Available Resources

Community health is inextricably tied to social health. Allen Hospital reaches out to identify the social determinants of healthcare and affect determinants in a positive way. We do that through ongoing partnerships, both formal and informal, with other organizations serving the community. Examples include:

- The Allen College Engagement Salvation Army Partnership, which provides a free, community clinic throughout the year. The clinic provides checkups, screenings, treatment of minor illness, medication assistance and referrals to 1,200 residents per year. It also provides Allen Hospital with real-time indicators of changing healthcare needs or our underserved populations.
- The Cedar Valley Adverse Childhood Experiences (ACES) coalition, in partnership with other area providers, major philanthropic foundations in our area, and the Cedar Valley United Way, the lead agency. The ACES effort is both broad and deep, reaching across the community to identify root causes of adult health problems. The goal of the work is to lessen adult health concerns by reducing ACES in area families. The area CHNA coalition included ACES questions in its 2019 survey to help advance the project.
- The Black Hawk County Child Care Coalition, which has identified child care as an absolute health, social and employment priority for the entire region. Affordable child care is particularly critical for families struggling to get out of poverty and for single-parent families.
- The Cedar Valley Mental Health Summit, a bi-annual convocation of area agencies, providers, and funders to address mental health care as an essential part of community health. Like the ACES coalition, it brings many organizations together to focus collective effort on a common problem.
- Project SEARCH, which teams Allen Hospital with the Waterloo Schools to give special needs high-school seniors on the job training and experience. The program is entering its fourth year with a graduation rate of almost 100% and an equally high placement rate into permanent jobs for graduates. Project SEARCH addresses an oft-overlooked population cohort who can be semi-independent and self-supporting with the right start and community support.
- The Cedar Valley Equity Initiative Workshop on Racism and Health. This is another initiative that focuses on root causes of healthcare outcomes, including both racial and economic disparities in primary care and consequent health issues.
- SuccessLink and health education in the Waterloo Schools. Allen Women's Health provides sex education throughout the Waterloo Schools and offers both the Together for Youth and Young Parents Together community groups to help teens and young parents navigate healthcare issues for themselves and their babies. All three programs foster frank, two-way discussion among area teens and providers and provide a clear, current look at community health needs.

VI. Evaluation of Impact

The 2017-2019 community health needs assessment identified eight health needs. Survey participants ranked them in this priority: mental health access and services; healthcare access and transportation; women and children's health; nutrition, obesity and wellness; child abuse and neglect; healthcare insurance and finance; improving high school graduation rates in Waterloo; reducing teen gun violence in Waterloo.

The Allen Hospital Board of Directors discussed eight community health needs at the March 28, 2017 board meeting. Directors then cast individual votes to decide which three needs to prioritize in the 2017-2019 community health needs implementation plan. Mental Health Access and Services and Women's and Children's Health ranked first and second, while Nutrition, Obesity and Wellness ranked third. Directors voted to emphasize three community health needs:

Mental Health: these programs and initiatives have been added in 2017-2019 to help the community meet mental health service needs:

- Stepping Up (local affiliation with national effort to keep mentally ill out of jail)
- Jail Diversion (in partnership with Stepping Up and Black Hawk County)
- Collaboration amount courts, law enforcement, substance abuse, mental health providers
- Adult Crisis Stabilization Center established and funded
- Pathways Detoxification Program established and funded
- Medication Assisted Treatment Programs established and funded
- Behavioral health consultants added to the Allen Hospital emergency department
- Broader, faster access to electronic health records to improve care coordination for mental health partners presenting to the ER or off-campus sites
- Mental Health recovery center beds added to Allen Hospital ED (separate unit)
- Crisis intervention training added for local law enforcement
- Support lent to pass changes Iowa Code Chapter 228 (disclosure of MH information)
- Support lent to pass changes to Iowa Code 229 (hospitalization of MH patients)
- Complex Needs implemented into law
- Children's Mental Health system passed into law by Governor Reynolds
- Increased MH ARNPs graduating from Allen College and practicing locally
- Continued school-based MH services, although demand outstrips supply
- Integrated MH services with UnityPoint at Home
- Added open-access scheduling to Black Hawk-Grundy Mental Health Center, serving 6,000 MH outpatients

- Added mobile crisis services with area law enforcement
- Partnering with Cedar Valley United Way to identify/address Adverse Childhood Experiences (ACEs); added ACEs survey to 2020-2022 CHNA

Women and Children's Health: these programs and initiatives have been added in 2017-2019 to help the community meet women and children's services

- Aligned Allen Women's Health, OB and NICU to care for more high-risk pregnancies;
- Placed case workers with Success Street in metropolitan schools.
- Raised funds to add three labor/delivery/recovery suites and three additional NICU suites
- Adding six postpartum rooms
- Added two new providers to meet patient demand
- Continued program to keep babies as young as 30 weeks gestation at Allen Hospital NICU, with excellent results
- Greatly expanded pediatric services to the market with the opening of Prairie Parkway in Cedar Falls
- Launched LGBTQ clinic at Prairie Parkway in Cedar Falls
- Redesigned and expanded four Urgent Care clinics in the market, with average door-to-door times of less than 30 minutes
- Added 3D Breast Tomosynthesis mammography on a walk-in basis at three locations:
Allen Hospital, United Medical Park, Prairie Parkway
- Co-Sponsored Vision to Learn to diagnose and provide glasses to Waterloo school children with vision problems (program is being expanded system-wide in 2019-2020 school year)
- Cared for 2,643 patients at Allen Women's Health in 2018
 - 79% of patients seen in 2017 live in extreme poverty (income of just \$12,000)
 - 1,752 received STD test (Black Hawk County has highest chlamydia and gonorrhea rates in Iowa)
 - 343 patients received new birth control, including 23% who asked for and received a LARC (long-acting reversible contraception)
 - Funded for 9 counties, providing services to 24
- Served 547 children from 27 counties at the Allen Child Protection Center
 - 77% were also given a medical evaluation
 - Provided 499 forensic interviews to area courts and law enforcement
 - 93% of offenders were known to the child in 2018
 - 86% of allegations were sexual abuse; 7% physical abuse; 2% neglect
 - Provided 25 community training sessions to 753 participants in 2018

Nutrition, Obesity, Wellness: these programs and initiatives have been added or expanded in 2017-2019 to help community needs regarding nutrition, obesity, and wellness:

- Added a community demonstration kitchen to new Prairie Parkway outpatient center, with periodic healthy cooking and nutrition classes
- Added Get Growing: Eating Healthy for Life hands-on, summer-long gardening and nutrition program for kids at Prairie Parkway
- Expanded Allen EAP services to contract with 60 area companies. EAP focus is on prevention and early intervention in work, family and personal issues that might otherwise derail employees and cause preventable disruption to themselves, their families and employers
- Expanded corporate/occupational health wellness services:
 - Added Occupational Health Clinic in Cedar Falls
 - Provide onsite wellness screenings
 - Provide health-risk assessments
 - Design and implement quarterly wellness challenges
 - Provide educational presentations, cooking demonstrations
 - Provide onsite weight management programs
- Expanded UnityPoint Clinic wellness therapies:
 - Exercise
 - Biofeedback
 - Mindfulness and relaxation techniques
 - Food, mood and cognition education
 - Added Intensive Behavior Therapy for Weight Management program (IBT)
 - Added Healthy Eating Active Lifestyle program (HEAL)
 - Added SculpSure to shed body fat
 - Continued nutrition services:
 - Inpatient nutrition assessment, menu, education
 - Outpatient 60-minute nutrition consultation, follow-up
 - Education specific to disease states including cardiac, celiac, diabetes, food allergies, fructose intolerance, weight loss
 - Public speaking engagements and education

The 2020-2022 Community Health Needs Assessment was adopted
by the UnityPoint Health - Allen Hospital Board of Directors
at its monthly meeting on November 26, 2019.

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VII. Additional Reading Links

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