

MercyOne Elkader Medical Center Community Health Needs Assessment



MERCYONE...

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Executive summary

MercyOne Elkader Medical Center, in collaboration with an advisory committee of community and public health partners, conducted a comprehensive Community Health Needs Assessment (CHNA) for the geographic area of Clayton County, Iowa. The CHNA was presented to and adopted by the MercyOne Elkader Medical Center Board of Directors on March 20, 2025.

Five (5) significant health needs were identified based on the information gathered through a community input survey and a review of secondary data indicators. The advisory committee then ranked the identified significant health needs based on the following criteria: number of people impacted, the risk of morbidity and mortality, impact on vulnerable populations, importance to the community and feasibility of change. The significant community health needs, ranked in order of priority, include:

- 1. Access to care
- 2. Mental health and substance misuse
- 3. Obesity, nutrition and physical inactivity
- 4. Social determinants of health (SDOH)
- 5. Preventive health services

MercyOne Elkader Medical Center will reconvene the advisory committee to develop a multi-year strategy to address identified community health and social needs.

Printed copies of this report are available upon request at MercyOne Elkader Medical Center. This report is also available electronically at <u>https://www.mercyone.org/about-us/community-health-and-well-being/</u>

Please email questions, comments and feedback to communityhealth@mercyhealth.com.



About us

Our Mission

We, MercyOne, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

Our Vision

As a mission-driven innovative health organization, we will become the national leader in improving the health of our communities and each person we serve. We will be your most trusted health partner for life.

Our Core Values

- **Reverence:** We honor the sacredness and dignity of every person.
- **Commitment to Those Experiencing Poverty:** We stand with and serve those who are experiencing poverty, especially those most vulnerable.
- **Safety**: We embrace a culture that prevents harm and nurtures a healing, safe environment for all.
- **Justice:** We foster right relationships to promote the common good, including sustainability of Earth.
- **Stewardship:** We honor our heritage and hold ourselves accountable for the human, financial and natural resources entrusted to our care.
- Integrity: We are faithful to who we say we are.

MercyOne Elkader Medical Center

MercyOne is a connected system of health care facilities and services dedicated to helping people and communities live their best lives. The system's more than 200 clinics, medical centers, hospitals and care locations are located throughout the state of Iowa and beyond. MercyOne employs more than 22,000 colleagues. MercyOne is a member of Trinity Health, based in Livonia, Michigan.

MercyOne Elkader Medical Center, a member of MercyOne, is a 25-bed critical access hospital, which provides a vital lifesaving link to rural communities in Clayton County and surrounding areas through ambulance and emergency services. MercyOne is committed to providing quality, personalized and safe health care close to home.

The MercyOne Elkader Medical Center emergency department is staffed 24 hours a day, seven days a week with board certified physicians and advanced level practitioners who are well-trained to treat emergency needs. MercyOne Elkader Medical Center is certified as a Level IV Trauma Center by the Iowa Department of Public Health and team members are certified in:

- Advanced Trauma Life Support
- Advanced Cardiac Life Support
- Pediatric Advanced Life Support
- Neonatal Advance Life Support
- Airway Management



Services and specialties available at MercyOne Elkader Medical Center include:

- Cardiopulmonary rehabilitation
- Cataract procedures
- Coagulation management
- Colon screenings
- Emergency services
- General surgery
- Hospice care
- Imaging and radiology
- Lab and wellness testing
- Occupational therapy
- Physical therapy
- Respiratory therapy
- Respite care
- Skilled care
- Speech therapy
- Podiatry

MercyOne Elkader Medical Center participates in a clinically integrated network (CIN) where providers work together to improve health, increase patient satisfaction and lower health care costs for members and the communities served.

Community partners

Thank you to our community partners for their active engagement in the community health needs assessment process:

- Clayton County Emergency Management Agency
- Clayton County Public Health and Visiting Nurses Association
- Central Community School District
- County Social Services
- Guttenberg Municipal Hospital and Clinics
- Northeast Iowa Behavioral Health
- Substance Abuse Services for Clayton County

Summary of previous needs assessment

The MercyOne Elkader Medical Center Board approved the previous Community Health Needs Assessment (CHNA) on May 26, 2022. The significant health needs identified in the previous CHNA, in order of priority, include:

- 1. Mental Health
- 2. Home Health/Skilled Care
- 3. Recruiting Providers/Access to Specialists
- 4. Health care Transportation
- 5. Obesity (Nutrition/Exercise)

- 6. Dental Services
 - 7. Drugs & Substance Abuse

A wide range of priority health and social issues emerged from the CHNA process. MercyOne Elkader Medical Center determined that it could effectively focus on only those needs which were most pressing, underaddressed and within its ability to influence. MercyOne Elkader Medical Center, in collaboration with community partners, chose to focus on initiatives addressing the following needs:

- Mental Health
- Recruiting Providers/Access to Specialists
- Dental Services

The below section highlights actions taken over the succeeding three years to address selected needs, as well as the impact of those actions:

Mental health:

Telehealth services: MercyOne Elkader contracted with Integrated Telehealth Partners/FlowState to provide consults to patients who are in crisis. This was funded by County Social Services and not billed to the patient. It was a great community benefit offered to those in crisis in the emergency department and helped get them to the next level of care.

Cash contributions: Seva Health Center for Well-Being, a 501(c), requested funding to start Seva's Peace for your Mind project, which included working with individuals to support brain health through nutrition, exercise, stress management, education, coaching and mind-body practices. The project provided wrap-around services that took place beyond the walls of the traditional clinical setting and focused on bridging the gap between the patient and their provider to improve brain health, educating and supporting individual brain health through health coaching and practice of integrative techniques that strengthen an individual's ability to improve their brain health. MercyOne Elkader Medical Center provided a \$150 cash contribution to support starting this program.

Depression screenings: MercyOne Elkader acquired the Elkader and Monona clinics on July 1, 2022, and started implementing depression screenings with patients age 12+.

Promotion of services: MercyOne Elkader continued to promote 24-hour crisis hotlines and existing mental health services, facilities and providers. The medical center also educated the community on screenings, bullying, mental health care delivery, placement process and depression.

Recruiting Providers/Access to Specialists:

Telehealth: MercyOne Elkader connected inpatients to specialists in various ways. These included using:

- Avel eEmergency and Avel eHospitalists telemedicine services.
- Avel eSane, which provided guidance when sexual assault victims presented to the hospital.
- Integrated Telehealth Partners/FlowState for brain health consults.

Cardiology: MercyOne Elkader contracted cardiologists from Medical Associates in Dubuque to travel to Elkader for in-person visits.

National Health Services Corps (NHSC) certification: MercyOne Elkader started the application process to become an approved National Health Services Corps (NHSC) site. This certification will help with provider



recruitment and retention in Elkader's rural location.

Career fairs: MercyOne Elkader promoted and advertised at surrounding area college job fairs to students and otherwise unemployed individuals within the county and encouraged area providers to help collectively recruit and identify and/or contact key providers.

Health professions education: MercyOne Elkader worked on expanding their residency programs for medical students and explored the opportunity to have a School Scholarship / Internship Program.

Dental:

Sterilization: The hospital assisted the public health department by cleaning and sterilizing dental instruments after clinics.

Community collaboration: MercyOne Elkader continued to partner with a local dentist on hospital-related dental needs.

Community served

Geographic area

The geographic area for this assessment is Clayton County, Iowa. MercyOne Elkader Medical Center is located in Elkader, Iowa, which serves as the county seat for Clayton County. MercyOne Elkader Medical Center also operates two family medicine clinics located within Clayton County. The county is 760 square miles, the fifth largest in the state. This service area does not exclude low-income or underserved populations.



Source: United States Census Bureau

Population characteristics

The total population of Clayton County, as recorded on the most recent census in 2020, is 17,043. Clayton County, along with other rural lowa communities, is experiencing population declines. The



population of Clayton County decreased by 5% between 2010 and 2020. Clayton County has an aging population with 26% of residents 65 years of age and older. Most of the population (97%) is White, and the county has seen almost no minority growth in the past 10 years (Iowa State University Extension and Outreach, Rural Iowa at a Glance 2024)

The below table summarizes the demographics of Clayton County using U.S. Census Bureau, Population Estimates Program (PEP).

Race and Hispanic Origin	
White alone	97.3%
Black or African American alone	0.8%
American Indian or Alaska Native alone	0.3%
Asian alone	0.3%
Native Hawaiian and Other Pacific Islander alone	0.1%
Two or more races	1.2%
Ethnicity	
Hispanic or Latino (of any race)	2%
White alone, not Hispanic or Latino	95%
Age	
0-17	22%
65 and older	26%
Sex	
Male	51%
Female	49%
Population characteristics	
Foreign-born population	2%
Language other than English spoken at home	7%
Veterans	999
Population with a disability under age 65 years	10%

Assessment process

Advisory committee

The CHNA Advisory Council (Advisory Council) met for the first time in May 2024. Representatives from MercyOne Elkader Medical Center, Clayton County Public Health and Visiting Nurses Association (VNA), Central Community School District, Northeast Iowa Behavioral Health (NEIBH), Clayton County Emergency Management Agency (EMA), and Guttenberg Municipal Hospital and Clinics were present. The Advisory Council reviewed the CHNA and implementation strategy (IS) from the previous cycle and designed the process for collecting community input. Sample surveys for community input were sent to the Advisory Council following the meeting for review and feedback.

The Advisory Council convened in November 2024 to review primary and secondary indicator data. Representatives from MercyOne System Office, MercyOne Elkader Medical Center, Clayton County Public Health and VNA, NEIBH, Clayton County EMA, County Social Services, and Guttenberg Municipal Hospital and Clinics were present. The Advisory Council reviewed demographic data, results from the community input survey and a summary of secondary data. The Advisory Council discussed the health indicators where Clayton County performed poorly in comparison to Iowa and/or the United Sates, areas that community members ranked as important on the community input survey and community factors that may be influencing the data. The Advisory Council discussed grouping indicators together as significant health needs.

In December 2024, representatives from MercyOne Elkader Medical Center, Clayton County Public Health and VNA, Substance Abuse Services for Clayton County, Inc., NEIBH, Clayton County EMA, and Guttenberg Municipal Hospital and Clinics participated in the prioritization process. Input was also collected regarding community resources and assets available to address identified needs.

Community input

MercyOne Elkader Medical Center collected community input through a 36-question survey. A total of 96 responses were collected between 8/2/24-9/24/24. Surveys were distributed to community members and organizations throughout Clayton County, including, but not limited to, MercyOne family medicine locations in Elkader and Monona, Cornerstone Family Practice location in Guttenberg and Clayton County Public Health and Visiting Nurses Association. The survey was also publicized though multiple social media posts. A copy of the survey is included in the Appendix. The survey was available in both paper and electronic format and in both English and Spanish.

Zip codes				
52035	52052	52135	52159	
52042	52053	52141	52162	
52047	52072	52146	52172	
52048	52076	52156	52175	
52049	52077	52157	53159	

The below zip codes are represented in survey responses.

The below table summarizes the demographics of survey respondents.

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Hispanic or Latino (of any race)	0
White (Non-Hispanic or Latino)	99%
Other (Black, Al/AN, Asian, Native Hawaiian/Pacific Islander)	1%
Age	
18-64	73%
65 and older	27%
Sex	
Male	21%
Female	79%
Household income	
Less than \$50,000	18%
\$50,000-\$74,999	30%
\$75,000+	52%
Work situation	
Full-time work	70%
Part-time or temporary work	7%
Unemployed and seeking work	2%
Unemployed but not seeking work	21%
Educational attainment	
Less than a high school diploma or equivalent	0%
High school graduate or equivalent	11%
Some college but not a degree	17%
College graduate	52%
Advanced degree	20%
Health care coverage (All that apply)	-
Employer	67%
Privately purchased	20%
Medicare	25%
Medicaid or other state program	3%
TRICARE, VA or Military	2%
Uninsured	1%
Other	1%
Dental	26%
Vision	20%

Written comments

MercyOne Elkader Medical Center did not receive any written comments regarding the previous Community Health Needs Assessment or implementation strategy. The documents continue to be available on the MercyOne website at https://www.mercyone.org/about-us/community-health-and-well-being/ and printed copies are available upon request at MercyOne Elkader Medical Center.

Quantitative data gathering

Secondary data, comparisons and benchmarks include figures and interpretation from the following sources:

- Center for Applied Research and Engagement Systems (CARES)
- Centers for Medicare and Medicaid Services
- Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System
- Centers for Disease Control and Prevention, National Vital Statistics System
- Centers for Disease Control and Prevention, National Environmental Public Health Tracking Network
- Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STC, and TB Prevention
- Feeding America
- Federal Bureau of Investigation, Uniform Crime Reports
- Federal Communications Commission, FABRIC Data
- Iowa Department of Public Health
- National Center for Health Statistics
- State Cancer Profiles
- University of Wisconsin Population Health Institute, County Health Rankings
- U.S. Census Bureau, American Community Survey
- U.S. Census Bureau, County Business Patterns
- U.S. Department of Labor, Bureau of Labor Statistics
- U.S. Department of Health and Human Services, Health Resources and Services Administration

Indicator data summary

Primary data summary table

Community Input Survey	
Access to care	
Experienced an access barrier to health care	24%
Doctor's office not open at convenient times	21%
Could not afford the cost of health care services	17%
Experienced an access barrier to dental care	9%
Could not afford the cost of dental care	11%
Experienced an access barrier to brain/mental health services	8%
Brain/mental health services too expensive	12%
Lack of anonymity	10%
Takes too long to get an appointment	7%
Income constraints	
Trouble paying for basic needs	18%
Trouble paying for housing and utilities	11%
Trouble paying for food	10%
Trouble paying for exercise opportunities	8%
Trouble paying for medications	6%
Trouble paying for childcare	4%
Trouble paying for transportation	3%
Social and community	
Afraid of violence in neighborhood	5%
Social contacts less than once a week	4%
Felt judged unfairly or treated with disrespect in a health care setting	11%
Living environment	
Unsafe drinking water	2%
Aware of well testing availability	62%
Aware of radon testing availability	31%
Issues with living arrangement (Bugs, cleanliness, drinking water, nonfunctioning	11%
appliances, leaks, mold/dampness, accessibility)	
Personal health concerns	
Overweight/obesity	46%
Heart problems	21%
Cancer	15%
Dental	13%
Brain/mental health	12%
No health concerns	29%
Health behaviors and risk factors	
Perceive substance use as a growing problem (Agree or strongly agree)	78%
Exercise 30+ minutes less than 3 times per week	51%
Consume less than the recommended fruit/vegetable intake	92%
Quality of life	
Fair or poor overall health	11
Fair or poor community health	43%
Good place to raise children (Agree or strongly agree)	88%
Good place to grow old (Agree or strongly agree)	74%

.

Most important <u>adult</u> community health concerns for adults	Count
Brain/Mental health	44
Weight/obesity	43
Cancer	38
Substance use	28
Aging issues	24
Access to specialist care	23
Most important <u>child</u> community health concerns	Count
Brain/mental health	53
Bullying	45
Screentime	37
Obesity	28
Tobacco use (vaping)24	
Greatest community strengths	Count
Low crime/Safe neighborhoods	43
Police, Fire, and Rescue Services	42
Good schools	40
Access to health care	33

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Secondary data summary table

Secondary data		Clayton County	lowa	United States
Access to care				
Insured population receiving Medicaid		23.70%	20.73%	22.34%
Uninsured population		7.11%	4.83%	8.68%
Residents with a recent primary care visit		75.6%	75.6%	74.2%
Primary care providers per 100,000 population		58.68	117.64	116.01
Mental health providers per 100,000 population		17.6	193.02	309.20
Addiction/substance use providers per 100,000 population		0	28.71	32.17
Dentists per 100,000 population		47	71	73.4
Clinical care and preventive services				
Preventable hospitalizations per 100,000 (Medicare population)		2,379	2,289	2,752
30-Day hospital readmissions (Medicare population)		12.3%	14.5%	17.8%
Diabetes management (Medicare population)		95.09%	91.25%	87.53%
Mammography screening		51%	53%	43%
Flu vaccine		28.6%	33.7%	
Childhood immunizations		65.5%	69.6%	
Mental health				
Death due to intentional harm per 100,000 population (Crude)		17.4	17.1	14.5
Depression 18+ (Age-adjusted)		19.3%	19.9%	21.1%
Poor mental health 18+ (Age-Adjusted)		16.1%	15.7%	16.4%
Economic stability				
Unemployment rate		2.7%	2.9%	4.1%
Food insecurity rate		13%	10.60%	12.88%
Median household income		\$60,441	\$70,571	\$75,149

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Population with income below 200% FPL		28.95%	27.14%	28.80%
Cost-burdened households (30% or more of household income)		21.97%	23.04%	30.51%
Head start program facilities per 10,000 children under age 5		31.55	14.21	11.26
Youth 16-19 who are not in school and not working		17.34%	5.65%	6.94%
Population age 25+ with no high school diploma		9.28%	6.97%	10.86%
Population age 25+ with bachelor's degree or higher		17.17%	30.28%	34.31%
Violence				
Violent crimes per 100,000 people		77.70	283.00	416.00
lirth outcomes				
Infant mortality per 1,000 live births		2.14	4.64	
Infants with low birth weight		5.5%	6.8%	8.3%
Health behaviors and risk factors				
Current smokers 18+ (Age-Adjusted)		16.9%	16.5%	13.2%
Binge drinking 18+ (Age-Adjusted)		23.9%	23.5%	18.0%
Obesity 18+ (BMI ≥ 30) (Age-Adjusted)		40.6%	38.7%	33.4%
Physical inactivity (Age-Adjusted)		25.7%	24.9%	23.0%
Chlamydia cases per 100,000 population		153	428	
HIV disease per 100,000 population		62.1	119.4	386.6
Teen births per 1,000		7.7	14.4	16.6
Death due to motor vehicle crash per 100,000 population		16.2	11.0	12.5
Neighborhood & physical environment				
Presence of Health-Based Drinking Water Violation		No	Yes	Yes
Median radon levels in unmitigated households (pCi/L)			8.5	1.3
Access to high-speed internet (> 25MBPS)		86.68%	95.11%	93.84%
Fast food restaurants (establishments per 100,000 people)		46.94	65.38	80.01
Grocery stores (establishments per 100,000 people)		29.34	19.28	18.90
Households with no motor vehicle		7.55%	5.61%	8.33%
Housing units with one or more substandard housing conditions		22.30%	23.41%	31.70%
Social vulnerability index (SVI)		0.28	0.30	0.58
Chronic diseases				
Cancer incidence- all sites per 100,000 population		449.3	486.8	442.3
Cancer incidence- breast per 100,000 females		120.3	134.7	127
Cancer incidence- colon & rectum per 100,000 population		39.7	40.7	36.5
Cancer incidence-prostate per 100,000 population		111.2	120.4	110.5
Cancer mortality per 100,000 population (age-adjusted)		158.7	154.3	
Diabetes 18+ (Age-Adjusted)		9.6%	9.9%	10.4%
Chronic obstructive pulmonary disease 18+ (Age-Adjusted)		6.4%	6.1%	5.9%
Lung disease morality per 100,000 population (Crude)		57.8	55.8	46.0
Coronary heart disease mortality per 100,000 population (Crude)		197.8	139.4	112.5
Alzheimer's disease (Medicare population)		7.7%	9.6%	10.8%
High blood pressure (Age-Adjusted)		29.7%	27.9%	29.6%
Heart disease (Medicare population)		19.7%	24.0%	26.8%
Heart disease mortality per 100,000 population		197.8	139.4	112.5
Current asthma 18+ (Age-Adjusted)		9.8%	9.9%	9.9%
Quality and length of life				
Poor or fair health 18+ (Age-adjusted)		14%	13%	14%
Life expectancy at birth		79.4	78.1	77.7

Significant community health needs

After analyzing primary and secondary data, along with input from the advisory committee, five (5) significant community health needs were identified.

Significant boolth	Supporting data
Significant health need	Supporting data
Access to care	Health Insurance
	 Nearly a quarter (24%) of residents are enrolled in Medicaid, which is higher than the state (21%) and national (22%) enrollment rates. Enrollment is highest in the under 18 age group (41%). Individuals receiving Medicaid are more likely to have health access, health status and social support needs. (Data Source: American Community Survey, 2018-22).
	 7% of the population does not have health insurance which is higher than the state (5%) and lower than the United States (9%). The proportion without health insurance is highest among the Hispanic or Latino population (22%). (Data Source: American Community Survey, 2018-22).
	Primary care
	• Nearly a quarter (24.5%) of respondents on the community survey reported they have not been able to easily receive all of the care they need for a health concern (Data source: Community Survey Q7).
	 21% of respondents on the community survey reported scheduling issues/conflicts with facility hours as a barrier to receiving health care services, 17% reported cost as a barrier, and 12% reported being unable to take time off work (Data source: Community Survey Q8).
	• There are only 59 primary care providers for every 100,000 people which is significantly less than both the state (118) and national (116) averages. (Data Source: CMS NPPES, 2024)
	 Part of Clayton County is a shortage area for primary care physicians (Iowa HHS)
	Mental health and substance misuse
	• 12% of respondents on the community survey reported cost as a barrier to receiving brain/mental health services,10% reported lack of anonymity as a barrier, and 7% reported it taking too long to get an appointment. (Data source: Community Survey Q9).
	• Clayton County has 17 mental health providers for every 100,000 which is significantly less than both the state (193) and national (309) averages.
	 There are no providers in Clayton County who specialize in addiction or substance abuse treatment.
	Specialists
	 Nearly 23% of Clayton residents believe access to specialists is one of the top health concerns (Data Source: Community Survey Q19).
	• When asked about additional services or resources that should be available in the community, four survey respondents submitted free text responses reading increasing access to specialty providers. (Data Source: Community Survey Q36).
	Dental

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	 10% of residents reported having trouble accessing dental care, and the primary barrier is cost. (Data source: Community Survey Q 10 & Q 11).
	• Clayton County has one (1) dental provider for every 2,128 people. This is lower than the state (1 per 1,411) and national (1 per 1,361) ratios. (Data source: HRSA, 2022)
	 Part of Clayton County is a shortage area for dental care providers (Data Source: HRSA)
	 When asked about additional services or resources that should be available in the community, four (4) survey respondents submitted free text responses reading access to dental providers. (Data Source: Community Survey Q 36).
	Skilled Nursing Facilities and Home Care
	• Although county level data for access to home health care and skilled nursing care was not found, multiple members of the Advisory Council identified this as significant community need. This was also a topic at a 2024 Clayton County Board of Health Meeting.
Mental	Mental Health
nealth and substance	 Brain/Mental health was the most reported concern for adults on the community survey. (Data Source: Community Survey Q19).
nisuse	 12% of survey respondents reported experiencing brain/mental health challenges. (Data Source: Community Survey Q6).
	 Death due to intentional harm in Clayton County (17.4 per 100,000) was high than the state (17.1) and national (14.5) rates (Data source: CDC-National Vital Statistics System, 2018-2022)
	 16% percent of adult residents report 14 or more days over the past 30 days during which their mental health was not good. This is similar to state and national averages. (Data Source: Behavioral Risk Factor Surveillance Syster 2022).
	 Brain/Mental health was the top reported health risk for children on the community survey followed by bullying (Data Source: Community Survey Q20).
	 The percentage of young people who are not in school and not working is high (17%), which can indicate social disengagement. (Data Source: American Community Survey, 2018-22).
	 When asked about additional services or resources that should be available in the community, seven (7) survey respondents submitted free text responses reading access to mental health. (Data Source: Community Survey Q 36). Substance Misuse
	 Most (78%) community survey respondents consider substance misuse a growing problem. (Data source: Community Survey Q22).
	 30% of respondents on the community survey consider substance use one of the top concerns for adults in Clayton County (Data source: Community Survey Q19).
	• Nearly a quarter (23.9%) of adults report binge drinking in the past 30 days, which is similar to the state (23.5%) and worse than the national average (18%). (Data Source: Behavioral Risk Factor Surveillance System).
	 Nearly 17% of adults smoke, which is similar to state (16.5%) and worse than the national average (13.2%). (Data Source: Behavioral Risk Factor Surveillance System).

Obesity	Obesity
	• 40% of Clayton County residents are classified as obese, which is higher than both Iowa (38.7%) and the United States (33.4%). (Data Source: CDC Behavioral Risk Factor Surveillance System, 2022).
	 More than a quarter (28%) of survey respondents report being overweight or obese. (Data source: Community Survey Q6).
	• Obesity was the second most reported concern for adults on the community survey and the fourth greatest health risk for children (Data source: Community Survey Q19 and Q20).
	Nutrition
	• Only 7% of survey respondents report eating at least 2-3 servings of fruits and vegetables each day. (Data source: Community Survey Q4).
	Physical activity
	• Just over a quarter (25.7%) of Clayton County residents report no physical activities or exercise in the past month. This is higher than the state average of 24.9% and the national average of 23%. (Data Source: Behavioral Risk Factor Surveillance System, 2022).
	 15% of survey respondents reported getting 30+ minutes of exercise 0 days each week. (Data Source: Community Survey Q3).
	 5% of survey respondents reported having trouble paying for exercise opportunities. (Data Source: Community Survey Q13).
	• Screen time was reported as the third greatest health risk for children on the community survey. (Data Source: Community Survey Q20).
Social	Food:
Determinants of Health	 10% of survey respondents reported having trouble paying for food (Data Source: Community Survey Q9).
	• An estimated 13% of residents experienced food insecurity at some point during the year, which is higher than both state and national rates. This is the highest rate in the past five years. (Data Source: Feeding America, 2022).
	 Housing: 11% of survey respondents reported having trouble paying for housing and utilities. (Data Source: Community Survey Q13).
	 11% of survey respondents reported issues with living arrangements including mold/dampness, bugs, cleanliness, drinking water, nonfunctioning appliances leaks, and accessibility. (Data Source: Community Survey Q14).
	 Nearly 22% of Clayton County residents spend 30% or more of their household income on housing. (Data Source: American Community Survey, 2018-2022).
	• Almost 23% of Clayton County housing units have one or more substandard housing conditions (Data Source: American Community Survey. 2018-22).
	Transportation:
	 5% of survey respondents reported having trouble accessing transportation (Data Source: Community Survey Q 8).
	 Almost 8% of Clayton County households do not have a motor vehicle, which is higher than Iowa (5.61%) and the United States (8.33%). (Data Source: American Community Survey, 2018-22).
	Financial Strain:
	18% percent of survey respondents reported having trouble paying for basic



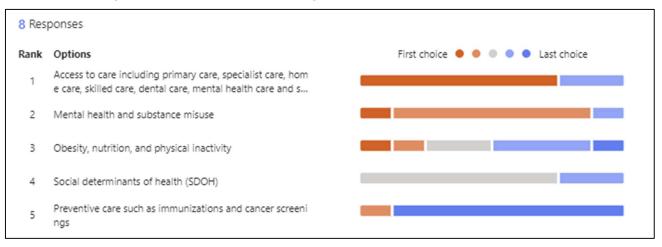
	needs such as food, housing, transportation, and childcare Data Source: Community Survey Q 13).
	 Clayton County Median household income is nearly \$60,500 which is \$10,000 less than the Iowa average and \$15,000 less than the United States average (Data Source: American Community Survey, 2018-22).
	 Nearly 29% of the Clayton County residents have an income below 200% of the FPL (Data Source: American Community Survey. 2018-22.
Preventive health services	 Mammography screening rates in Clayton County (51%) are lower than Iowa (53%). (Data Source: County Health Rankings) Both flu vaccination rates (28.6%) and childhood immunization rates (65.5%) are lower in Clayton County than Iowa. (Data Source: Iowa Public Health Tracking Portal)

Prioritized needs

Eight (8) members of the Advisory Council completed an electronic form ranking the significant health needs using the following criteria:

- Number of people impacted by the problem
- · Risk of morbidity and mortality associated with the problem
- Impact of the problem on vulnerable populations
- Importance of the problem to the community
- Feasibility of change

Below is an image of the results of the ranking exercise:



The significant community health needs, ranked in order of priority, include:

- 1. Access to care
- 2. Mental health and substance misuse
- 3. Obesity, nutrition, and physical activity
- 4. Social determinants of health (SDOH)
- 5. Preventive health services

Community assets and resources

Respondents on the community survey identified the following as the greatest community strengths:

- 1. Low crime and safe neighborhoods
- 2. Police, fire, and rescue services
- 3. Good schools

The Advisory Council identified the following community resources and assets that may be available to address the highest priority health needs.

Access to care

- MercyOne Elkader Medical Center
- Guttenberg Municipal Hospital
- Northeast Iowa Behavioral Health (NEIBH)
- Substance Abuse Services for Clayton County (SASCC)
- Local nursing homes

Mental health and substance misuse

- Elevate Mobile Crisis Response Team
- Northeast Iowa Behavioral Health (NEIBH)
- Substance Abuse Services for Clayton County (SASCC)
- Psychiatric-Mental Health Nurse Practitioners (PMHNP) and Counselors at Cornerstone Family Practice in Guttenberg, IA
- The Family Resource Center
- Primary care providers, therapists, and counselors located in Elkader, IA
- Telehealth/online behavioral health care

Obesity, nutrition, and physical activity

- Primary care providers and family practice locations
- Wellness centers, fitness centers, and recreation rooms
- Education through public health and the school system
- WIC program
- Trails and outdoor spaces for walking, hiking, biking, etc.
- Community gardens
- Local farms

Social determinants of health (SDOH)

- The Family Resource Center
- Northeast Iowa Behavioral Health (NEIBH)

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- Clayton County Department of Public Health
- Hospital Social Workers
- Local foundations and development groups

Preventive health services

- Primary care providers and family practice locations
- Clayton County Department of Public Health and Visiting Nurses Association

Next steps

The Advisory Council will reconvene to develop a multi-year strategy to address identified community health and social needs. The implementation strategy will be publicly available prior to November 15 as a separate document.

Printed copies of this report are available upon request at MercyOne Elkader Medical Center (901 Division Street, Elkader, IA 52043). This report is also available electronically at https://www.mercyone.org/about-us/community-health-and-well-being/

Please email questions, comments, and feedback to communityhealth@mercyhealth.com.

The next community needs assessment for MercyOne Elkader Medical Center will be completed in fiscal year 2028.



MercyOne Elkader Medical Center MercyOne.org/about-us/community-health-and-well-being/

Appendix

Community input survey



MercyOne Elkader Medical Center and the Clayton County Public Health/Visiting Nurses Association are conducting a Community Health Needs Assessment (CHNA). This survey helps us identify and understand changing health and social needs in your community and develop strategies to address them.



To participate:

- Complete the survey by scanning the QR Code, filling the form below or by visiting https://forms.office.com/r/8au8bFDNDv
- You must be at least 18 years of age to complete this survey.
- All answers are kept confidential.
- You may skip questions you do not wish to answer.

1.	What zip code d	o you live ir	n?			-	
2.	How would you	rate your ov	verall health?				
	Excellent				🗆 Fair		
	□ Very good				🗆 Poor		
	□ Good						
3.	How many times 3 or more 1-2 0	s per week	do you get 30	minutes or m	ore of exercis	e?	
4.	In a usual week, how many days do you eat at least 2 to 3 servings of vegetables and at least 2						
	servings of fruit	in a day?					
	□ 1	□ 2	□ 3	□ 4	□ 5	□ 6	□7
5.	How often do you to friends on the					`	
	□ Less than one	ce a week			□ 3-4 days a	week	
	□ 1-2 days a we	ek			🗆 5 or more d	lays a week	





6.	Do you h	ave any c	of the following	health concerns?	(Select all that apply.)
	~			-	

Dental
Asthma
Sexually transmitted infections
(STIs) including HIV/AIDS
Brain/Mental health challenges
No health concerns
□ Other

- 7. Have you been able to easily receive care for your health concerns?
 □ Yes
 □ I have not been able to receive care
 - \Box I have received some care, but not all that I need \Box I have no health concerns
- 8. What challenges have you faced in receiving health care services? (Select all that apply.)
 - □ No insurance
 - \Box Could not afford the cost
 - $\hfill\square$ Could not afford prescriptions
 - □ Lack of transportation
 - Nearest healthcare facility or pharmacy is too far away
 - Scheduling issues/conflicts with hours facility is open
 - □ Availability of appointments
 - □ Afraid or do not like going to the doctor
 - □ Difficulty filling out forms
 - □ I did not have childcare

- I feel uncomfortable sharing personal information with a doctor
- Feeling judged unfairly by health care professional
- Lack of anonymity (I fear people I know will see and judge me)
- I did not think anything serious was wrong/expected problem to go away
- $\hfill\square$ Too busy
- $\hfill\square$ Unable to take time off work
- \Box None
- □ Other_____
- 9. Are there any barriers preventing you from receiving brain/mental health services? (Select all that apply.)
 - I have tried brain health services and they did not work for me.
 - I have tried but it takes too long to get an appointment
 - $\hfill\square$ Services are too expensive
 - $\hfill\square$ Lack of transportation
 - I feel ashamed or uncomfortable talking about personal issues
- Lack of anonymity (I fear people I know will see and judge me)
- □ I do not know if my insurance covers brain/mental health
- □ I have not experienced any barriers. I am getting the services I need.
- \Box I do not need treatment
- □ Other_____



10. In the last 12 months, was there a time when you needed dental care but could not get it? □ Yes □ No □ Don't know/Not sure

11. If yes, what were the reasons that you could not get the dental care you needed?

- □ Afraid or do not like going to the dentist
- □ Could not afford the cost
- Could not find a dentist who would accept my insurance
- Dental office was not open at a convenient time
- □ Dental office was too far away
- □ Difficulty filling out forms

- \Box I did not have childcare
- □ I did not have transportation
- □ I did not think anything serious was wrong/expected problem to go away
- \Box Long wait time to schedule appointment
- □ Too busy
- □ Unable to take time off from work
- □ Other: _____
- 12. Within the past 12 months, have you or anyone in your household had trouble accessing any of the following? (Select all that apply.)
 - □ Childcare
 - Transportation
 - \Box Food
 - \Box Housing and utilities
 - □ Medical care
 - □ Brain/Mental health care

- □ Dental care
- $\hfill\square$ Substance use treatment
- □ Medication
- □ Exercise opportunities
- \Box None of these
- □ Other _____
- 13. Within the past 12 months, have you or anyone in your household had trouble paying for any of the following? (Select all that apply.)
 - □ Childcare
 - □ Transportation
 - □ Food
 - □ Housing and utilities
 - □ Medical care
 - □ Brain/Mental health care

- □ Dental care
- □ Substance use treatment
- $\hfill\square$ Medication
- □ Exercise opportunities
- $\hfill\square$ None of these
- Other _____
- 14. Are you experiencing any of the following issues with your current living arrangement? (Select all that apply)
 - □ Bugs (e.g. roaches, bed bugs or rodents)
 - □ General cleanliness
 - \Box Landlord disputes
 - □ Lead paint
 - □ Unsafe drinking water
 - Nonfunctioning appliances (stove, oven, refrigerator)
 - Unreliable utilities (e.g. electricity, gas, heat, water)

- □ Leaks
- Medical condition that makes it difficult to live in current home
- \Box Mold or dampness
- \Box Overcrowding
- $\hfill\square$ Threat of eviction
- □ Violence/safety concerns
- Accessibility concerns (handicap, stairs, railings)



- 15. Are you aware that take home radon test kits are available for purchase at the Visiting Nurses Association (VNA) office in Elkader?
 - \Box Yes \Box No
- 16. Are you aware that well water testing is available through the County Sanitarian at the Health and Zoning Office?
 - □ Yes □ No
- 17. In the past TWO (2) YEARS have you ever felt that the healthcare provider you saw judged you unfairly or treated you with disrespect because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, or other characteristics?
 - □ Yes □ No
- 18. If yes, what did you feel you were judged unfairly or treated disrespectfully for? (Select all that apply.)
 - □ How well you speak English
 - $\hfill\square$ Your ability to pay for care
 - □ Race/Ethnicity
 - \Box Gender
 - □ Age
 - □ Religion

- □ Physical appearance
- □ Sexual orientation
- □ Criminal background
- □ Disability
- □ Lifestyle
- □ Type of health insurance you have
- Other _____
- 19. What are your **TOP THREE (3)** health and social concerns for **ADULTS** in Clayton County? (Select three.)
 - \Box Obesity
 - \Box Cancer
 - □ Diabetes
 - □ Stroke
 - Substance use (alcohol, drug, and tobacco)
 - □ Prescription drug misuse
 - Heart problems (heart disease, high blood pressure, high cholesterol)
 - □ Access to primary care (regular doctor)
 - Access to specialist care
 - Dental health

- Sexually transmitted infections (STIs) including HIV/AIDS
- □ Aging issues (hearing loss, cataracts, dementia, falls)
- □ Brain/Mental health
- \Box Food access
- $\hfill\square$ Homelessness/Housing concerns
- □ Gambling
- Maternal health
- □ Suicide
- □ Violence (sexual assault, domestic)
- □ Other _____



20. What are your TOP THREE (3) health and social risks for CHILDREN (0-17 years old) in Clayt				
 County? (Select three.) Obesity Alcohol use Drug use Tobacco use (vaping, cigare Sexual behavior (STIs and t pregnancy) Brain/mental health Access to health care Dental health Child abuse/neglect 		 Homelessness/Housing concerns Bullying Dropping out of school Screen time Unsafe homes Gambling THC drinks Other: 		
-		_		
21. How would you rate the overall□ Excellent□ Very good	health of Clayton C □ Good □ Fair	ounty?	Poor	
22. Clayton County has a growing problem with substance use and misuse.				
□ Strongly agree	□ Neutral		□ Strongly disagree	
□ Agree	Somewhat disag	gree		
23. Clayton County is a good place□ Strongly agree□ Agree	e to raise children. □ Neutral □ Somewhat disag	gree	□ Strongly disagree	
24. Clayton County is a good place	e to grow old.			
5, 5	□ Neutral		Strongly disagree	
□ Agree	□ Somewhat disagr	ee		
25. What are the 3 greatest STREN their overall health?	NGTHS of Clayton C	county that help re	esidents maintain or improve	
□ Access to Affordable Healthy		□ Parks and Recreation		
□ Access to Alcohol/Drug Trea	tment	Police, Fire, and Rescue Services Prepared for Emergencies		
Access to Child Care Access to Healthcare		 Prepared for Emergencies Programs for Youth Outside of School 		
□ Affordable Housing		□ Religious/ Spiritual Values		
\Box Arts and Cultural Events		□ Respect toward Different Cultures/Races		
Early Childhood Services Cood Jobs & Healthy Econor	~~~~			
Good Jobs & Healthy Econol Good Schools	шу	Walkable, Bikeable Community Other:		

MERCYONE UnityPoint Health Visiting Nurse Association					
26. What is your age? □ 18-24 □ 25-34 □ 35-44	□ 45-54 □ 55-64 □ 65-74 □ 75 and over				
 27. What is your gender? □ Male □ Female 28. Do you identify as leables, gov, biss 	 Other Prefer not to answer 				
nonbinary?	exual, transgender, queer or questioning, intersex, asexual, or t to answer				
 29. What is your race/ethnicity? American Indian or Alaskan Native Asian Black or African American Hispanic or Latino 	 Middle Eastern or North African Native Hawaiian or other Pacific Islander White or Caucasian Two or more races Other, please specify 				
30. What is your preferred spoken lang	uage?				
 31. What is your highest level of educat No High School Some High School High School Graduate 	Some College				
 32. What is your current work situation □ Full time work □ Part time or temporary work □ Unemployed and seeking work 	? Otherwise unemployed but not seeking work (ex. retired, disabled, student, or unpaid primary caregiver) 				
 33. What kind of healthcare coverage d Privately purchased health insur Employer provided health insura Medicaid Medicare TRICARE, VA, or Military 	ance 🛛 Alaska Native, Indian Health Service, Tribal				



34. What is your family's gross annual income before taxes?

- □ Less than \$15,000
- □ \$15,000 to \$24,999
- □ \$25,000 to \$49,999
- □ \$50,000 to \$74,999
- 35. Where did you learn about this survey?
 - □ Social media
- □ Hospital/Clinic
- Social media
 Community event
 Church bulletin
 Newspaper
 Poster around town
- □ \$75,000 to \$99,999
- □ Over \$100,000
- □ Social service organization
- □ Other
- 36. Are there any additional services or resources that you think should be available in our community to help residents maintain or improve their overall health?

Thank you for taking the time to help us better understand the health needs of our community. Please return your completed survey by 8/31/2024