

Community Health Needs Assessment (CHNA) Implementation Strategy

Fiscal Years FY23-25



MercyOne New Hampton Medical Center completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Board of Directors on April 25, 2022. MercyOne New Hampton Medical Center performed the CHNA in adherence with applicable federal requirements for not-for-profit hospitals set forth in the Affordable Care Act (ACA) and by the Internal Revenue Service (IRS). The assessment considered a comprehensive review of secondary data analysis of patient outcomes, community health status, and social determinants of health, as well as primary data collection, including input from representatives of the community, community members and various community organizations.

The complete CHNA report is available electronically at www.mercyone.org/newhampton or printed copies are available at 308 North Maple Ave., New Hampton, Iowa, 50659.

Our Mission

MercyOne serves with fidelity to the Gospel as a compassionate, healing ministry of Jesus Christ to transform the health of our communities.

Our Hospital

MercyOne New Hampton Medical Center is a member of Trinity Health. MercyOne is a faith-based, not-for-profit community health care system that offers comprehensive health care services including:

Diabetes Management	Rehabilitation Services	Specialty Clinics
Diagnostic Imaging	- Cardiac Rehabilitation	- Cardiology
- 3D Mammography	- Physical Therapy	- Endocrinology
- Mobile MRI Services	 Occupational Therapy 	- ENT
- Nuclear Medicine	- Speech Therapy	- General Surgery
- Ultrasound	Pain Clinic	- OB Shared Care
- Bone Density/DEXA	Senior Life Solutions	- Ophthalmology
- CT	Skilled Nursing / Swing Bed	- Orthopedics
Emergency Services	Sleep Studies	- Pain Management
Family Medicine Clinic	Surgical Services	- Plastic Surgery
Health Coaching	- Cataract	- Podiatry
Health Information Management	- ENT	- Urology
Laboratory	- General Surgery	- Vascular Medicine
Wellness Programing	- Orthopedic	- Wound Care

MercyOne is licensed for 18 beds and has 20,000 outpatient visits each year. Located in New Hampton, Iowa, MercyOne serves 17,000 residents in and around Chickasaw County.





Our Community Based Services

No other facilities or community-based services are owned or operated by MercyOne New Hampton.

Our Community

Chickasaw County is predominately rural (73.5% of the population lives in a rural area) and heavily dependent on agriculture. The county's estimated population dropped 1.9% between 2017 and 2019; by comparison, lowa's population grew 3.6% over the same time period. As an indicator, population trends are relevant because a shrinking population base affects healthcare providers and the utilization of community resources.

In general, rural populations tend to have populations that are older, poorer, and less educated than their urban counterparts, with higher prevalence of chronic diseases. Chickasaw County is no exception.

The county's population is predominately white (95.3 %) with a median household income of \$60,034 which is only slightly below the Iowa state average. Of the population for whom poverty status is determined in Chickasaw County, IA, 7.43% (885 out of 11,933 people) live below the poverty line, a number that is lower than the national average of 13.1%. The largest demographic living in poverty are females 18 - 24, followed by females 75+ and then males 55 – 64.

MercyOne serves patients in bordering counties as well. Due to over 80%* of Mercy's market share coming from patients in Chickasaw County and for accuracy in data collection, Chickasaw County was the focus of this assessment. (*lowa Hospital Association Dimensions Databank Patient Origin of Chickasaw County for MercyOne New Hampton: inpatient 80.5%, ER 81.3%, lab/radiology 80.9%, therapy 89%, ambulatory surgery 79.5%.)

Patient Home Address	Zip Code	County	% Patient Origin
New Hampton	50659	Chickasaw	60.2
Lawler	52154	Chickasaw	6
Fredericksburg	50630	Chickasaw	5.1
lonia	50645	Chickasaw	5
Elma	50628	Howard	4.6
Alta Vista	50603	Chickasaw	4.3
Charles City	50616	Floyd	3.3
Waucoma	52171	Fayette	2.9
Nashua	50658	Chickasaw	1.8

Cresco	52136	Howard	1.2
Sumner	50674	Bremer	<1
Fredericka	50631	Bremer	<1
Hawkeye	52147	Fayette	<1
Riceville	50466	Mitchell	<1
Ft. Atkinson	52144	Winneshiek	<1



Chickasaw County, Iowa Demographics

People QuickFacts	
Population estimates, July 1, 2019, (V2019)	11,933
Population, percent change - April 1, 2010 (estimates base) to July 1, 2019, (V2019)	-4.1%
Population, Census, April 1, 2010	12,439
Persons under 5 years, percent	6.1%
Persons under 18 years, percent	23.4%
Persons 65 years and over, percent	21.2%
Female persons, percent	49.7%
White alone, percent	97.8%
Black or African American alone, percent	0.8%
American Indian and Alaska Native alone, percent	0.1%
Asian alone, percent	0.4%
Native Hawaiian and Other Pacific Islander alone, percent	0.0%
Two or More Races, percent	0.9%
Hispanic or Latino, percent	2.9%
White alone, not Hispanic or Latino, percent	95.3%
Veterans, 2013-2017	830
Foreign born persons, percent, 2013-2017	1.7%
Language other than English spoken at home, percent of persons age 5 years+, 2013-2017	5.8%
High school graduate or higher, percent of persons age 25 years+, 2013-2017	92.8%
Bachelor's degree or higher, percent of persons age 25 years+, 2013-2017	17.2%
With a disability, under age 65 years, percent, 2013-2017	8.9%
Persons without health insurance, under age 65 years, percent	6.7%
Median household income (in 2017 dollars), 2013-2017	\$60,034

Persons in poverty, percent

8.5%

Source U.S. Census Bureau: QuickFacts data are derived from: Population Estimates, American Community Survey, Census of Population and Housing, Current Population Survey, Small Area Health Insurance Estimates, Small Area Income and Poverty Estimates, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits. Data pulled: July 1, 2021.

Our Approach to Health Equity

While community health needs assessments (CHNA) and Implementation Strategies are required by the IRS, Trinity Health ministries have historically conducted CHNAs and developed Implementation Strategies as a way to meaningfully engage our communities and plan our Community Health & Well-Being work. Community Health & Well-Being promotes optimal health for those who are experiencing poverty or other vulnerablities in the communities we serve by connecting social and clinical care, addressing social needs, dismantling systemic racism, and reducing health inequities. Trinity Health has adopted the Robert Wood Johnson Foundation's definition of Health Equity - "Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care."

This implementation strategy was developed in partnership with community and will focus on specific populations and geographies most impacted by the needs being addressed. Racial equity principles were used throughout the development of this plan and will continue to be used during the implementation. The strategies implemented will mostly focus on policy, systems and environmental change as these systems changes are needed to dismantle racism and promote health and wellbeing for all members of the communities we serve.

Health Needs of the Community

The CHNA conducted in 2021 – 2022 identified the significant health needs within Chickasaw County. Community stakeholders then prioritized those needs during a facilitated review and analysis of the CHNA findings. The significant health needs identified, in order of priority include:

- 1. Access to Health Care
- 2. Aging Population
- 3. Emergency Medical Services
- 4. Knowledge of Health Care Resources Available Locally

Hospital Implementation Strategy

Significant health needs to be addressed

MercyOne New Hampton, in collaboration with community partners, will focus on developing and/or supporting initiatives and measure their effectiveness to improve the following health needs:

- 1 Access to Health Care CHNA pages 8 10.
- **2** Aging Population CHNA pages 8 10.
- **3** Emergency Medical Services CHNA pages 8 10.

Significant health needs that will not be addressed

MercyOne New Hampton acknowledges the wide range of priority health issues that emerged from the CHNA process and determined that it could effectively focus on only those health needs which are the most pressing, under- addressed and within its ability to influence. MercyOne New Hampton does not intend to address the following health needs:

 Knowledge of health care resources/services available locally — While not included in our CHNA, MercyOne will continue to promote and educate our community about resources available through MercyOne, county and state agencies. MercyOne launched an online Community Resource Directory which will help people fine local programs, resources, and support. It will also connect people with community programs based on their needs and preferences.

This implementation strategy specifies community health needs that the hospital, in collaboration with community partners, has determined to address. The hospital reserves the right to amend this implementation strategy as circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During these three years, other organizations in the community may decide to address certain needs, indicating that the hospital then should refocus its limited resources to best serve the community.

Access to Health Care



Hospital facility: MercyOne New Hampton

CHNA reference pages: 8 - 10

Brief description of need:

- Area residents would like to have more local access to specialists, treatment/procedures, and family physicians.
- Tech savvy generations desire the ability to schedule and register for appointments online.
- Verify that clinic access for acute appointments is meeting the needs of the community or if urgent care is needed.
- Increased access to free/reduced cost health screenings.

Equitable and Inclusive SMART Objective(s):

- Increase access to low or no cost preventative care/screenings for the underserved by offering two free mammogram screening events and four free skin cancer screenings by 2025
- 2. Increase access to specialty services and providers by adding two new service lines by 2025

Actions the hospital facility intends to take to address the health need:

	Tir	neli	ne	Hospital and Committed Partners	Committed Resources	
Strategy			<u>Y3</u>	(align to indicate committed resource)	(align by hospital/committed partner)	
				MercyOne New Hampton	Staff resources to access feasibility	
				MercyOne North Iowa	Office/exam room space for new specialists	
				Mason City Clinic		
Evaluate adding				,		
specialty services	х					
locally.				Focus location(s)	Focus Population(s)	
				Specialty Clinic Inpatient Services	Chronic Conditions, Elderly	
0 1 1	Tir	neli	ne	Hospital and Committed Partners	Committed Resources	
Strategy		_	Y3	(align to indicate committed resource)	(align by hospital/committed partner)	
				MercyOne New Hampton	Staff resources to track appointment availability	
Assess clinic same-day						
appointment availability to determine need for	x					
urgent care.				Focus location(s)	Focus Population(s)	
				MercyOne New Hampton Family Medicine	Broad Community	
Strategy	Tiı Y1	neli Y2	ne Y3	Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)	
				MercyOne New Hampton	Provider and staff time	
Provide free skin cancer						
screenings twice a year.		х				
Sorcerings twice a year.		х		Focus location(s)	Focus Population(s)	
Soroeriings twice a year.		X		Focus location(s) MercyOne New Hampton Family Medicine	Focus Population(s) Low income, uninsured	
	Tiı	x neli	ne	MercyOne New Hampton Family Medicine	,	
Strategy		neli	ne Y3	MercyOne New Hampton Family Medicine Hospital and Committed Partners (align to indicate committed resource)	Low income, uninsured Committed Resources (align by hospital/committed partner)	
		neli		MercyOne New Hampton Family Medicine Hospital and Committed Partners	Committed Resources (align by hospital/committed partner) Radiology technologists' time	
		neli		MercyOne New Hampton Family Medicine Hospital and Committed Partners (align to indicate committed resource)	Low income, uninsured Committed Resources (align by hospital/committed partner)	
Strategy Develop breast cancer		neli		MercyOne New Hampton Family Medicine Hospital and Committed Partners (align to indicate committed resource) MercyOne New Hampton	Committed Resources (align by hospital/committed partner) Radiology technologists' time Planning resources (Admin,	
Strategy Develop breast cancer awareness program to		neli Y2		MercyOne New Hampton Family Medicine Hospital and Committed Partners (align to indicate committed resource) MercyOne New Hampton Chickasaw County Public Health	Committed Resources (align by hospital/committed partner) Radiology technologists' time Planning resources (Admin,	
Strategy Develop breast cancer		neli		MercyOne New Hampton Family Medicine Hospital and Committed Partners (align to indicate committed resource) MercyOne New Hampton Chickasaw County Public Health	Committed Resources (align by hospital/committed partner) Radiology technologists' time Planning resources (Admin,	

Anticipated impact of these actions:

Impact Measures	Baseline	Target	Plan to evaluate the impact
Work with area health care partners to determine feasibility in providing specialty services at MercyOne New Hampton. Focus on: dermatology, neurology, pulmonology, general surgery, and inpatient dialysis.	0	2 service lines	Based on patient demand and market share being lost to other hospitals, MercyOne would like to add 2 new service lines.
Offer 2 skin cancer screenings per year for years 2 and 3 of this CHNA cycle.	0	4 by 2025	Number of screenings held. MercyOne will also track the number of patients served.
Free mammogram event for low-income or uninsured.	0	2 events by 2025	Number of screenings held. MercyOne will also track the number of patients served.
Create a standard % of appointments available each morning for day-of, acute appointments.	Baseline established by 1/1/2023	20%	Require reporting for 6 months to determine if patient demand is being met.

2Aging
Population



Hospital facility: MercyOne New Hampton

CHNA reference pages: 8 - 10

Brief description of need:

- In Chickasaw County, 21.2% of our population is over the age of 65.
- More support for healthy aging to encourage physical activity, nutrition, and socialization.
- With an aging population, prevention and care for chronic conditions is imperative.
- To best care for the aging population and to ensure their wishes are known, education and planning tools for living wills and advanced directives is needed.

Equitable and Inclusive SMART Objective(s):

- Reach 50% of the population in Chickasaw County over the age of 65 by 2025 with educational resources/planning tools for advanced directives and living wills.
- Reduce hunger and food insecurity while promoting socialization of older individuals by working with three area restaurants to join the Iowa Café program by 2025
- Improve blood pressure awareness and control to address unmet heart health needs of rural communities by educating 400 people on blood pressure self-monitoring program by 2024

Actions the hospital facility intends to take to address the health need:

Actions the hospital				tends to take to address the	ricaltii lieed.
Strategy	Tir Y1	meli Y2		Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
				MercyOne New Hampton	Cost to purchase 1,500 Five Wishes books (\$1,500)
				Nursing Homes/Assisted Living	Magnetic refrigerator clips for important documents (\$1,200)
Build and implement an				Hospice Agencies	Training of hospital staff
effective advance care planning program using				Funeral Homes	Speakers Bureau to present to community groups
the Five Wishes program	х	х	х	Ministerial Association	
and Iowa Physician				EMS Agencies	
Orders for Scope of				Senior Life Solutions	
Treatment (IPOST).				Focus location(s)	Focus Population(s)
				Chickasaw County, Iowa	Older population
Strategy	Tir Y1	meli Y2		Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
				MercyOne New Hampton	In-kind, staff time
Recruit local restaurants to become Iowa Café				Northeast Iowa Area Agency on Aging	
establishments, that provide 12 free meals monthly to registered	x	c x		Focus location(s)	Focus Population(s)
participants.				Chickasaw County	Over the age of 60, low-income, food insecure
Strategy	Tir Y1	meli Y2		Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
				MercyOne New Hampton	Office space for HeartCorp staff
Partner with HEARTCorps to help accelerate the				American Heart Association	In-kind, staff time to support HeartCorp (clinic, wellness coordinator, management)
implementation of				Bennett Pharmacy	
evidence-based				Public Health AmeriCorp	
interventions that	Х				
improve cardiovascular				Focus location(s)	Focus Population(s)
health, educate, and inspire community members to adopt healthy behaviors.				MercyOne New Hampton Family Medicine Chickasaw County	Chronic conditions, aging, underserved

Anticipated impact of these actions:

Impact Measures	CHNA Baseline	Target	Plan to evaluate the impact
Reach 50% of the population in Chickasaw County over the age of 65 with educational opportunities.	0	1,285 people reached by 2025 (Based on the 2020 census, there are 2,570 residents in Chickasaw County over 65 years old.)	This number will be determined based on attendance at educational programs and Five Wishes books distributed.
Number of restaurants that sign up for the program.	0	Contact restaurants with the goal of 3 to sign up by 2025	Quarterly touch-base with restaurant partners to assess use.
Number of people educated on blood pressure self-monitoring program.	0	400	Evaluate monthly contacts with patients.

3
Emergency
Medical
Services



Hospital facility: MercyOne New Hampton

CHNA reference pages: 8 - 10

Brief description of need:

- On December 31, 2022, Chickasaw County will lose the only Emergency Medical Services provider, which is a private, locally owned company.
- EMS is a vital, desirable, and expected element of healthcare and quality of life.
- MercyOne New Hampton relies on this service for interfacility transports for our patients who need a higher level of care.
- For several years, the area EMS provider has not accepted Medicaid, which meant the most vulnerable population has had reduced or delayed access to EMS.
- In addition to ambulance service, there is a decline in the number of paramedics, EMTs, and volunteer first responders in Chickasaw County.

Equitable and Inclusive SMART Objective(s):

- Decrease delays for paramedic transfers out of the ER to less than 50 delays in 2023 and less than 40 delays for in 2024.
- Increase ambulance transfer access for ER
 Medicaid patients by working with Chickasaw
 County EMS to have 1 full-time EMS service & 1
 back-up rig available by 2024.

Actions the hospital facility intends to take to address the health need:

Strategy	Tir	meli	ine	Hospital and Committed Partners	Committed Resources
Ollategy	Y1	Y2	Y3	(align to indicate committed resource)	(align by hospital/committed partner)
				MercyOne New Hampton	In-Kind, staff (Development & Public Relations Manager)
				lowa Northland Regional Council of Governments	
Provide grant				Chickasaw County Emergency	
opportunities related to emergency medical				Management	
services to the county	Х	Х	Х		
and offer assistance in				Focus location(s)	Focus Population(s)
grant writing.				i ocus location(s)	i ocus ropulation(s)
					Broad Community
	Tir	neli	ine	Hospital and Committed Partners	Committed Resources
Strategy		Y2	Y3	(align to indicate committed resource)	(align by hospital/committed partner)
				MercyOne New Hampton	In-Kind, staff (CEO, Development & Public Relations Manager)
Help establish a 501 (c)					
3 and board of directors to support the new		x			
county owned		^		Focus location(s)	Focus Population(s)
ambulance service.				· · · · · · · · · · · · · · · · · · ·	,
					Broad Community
					Droda Community
Ctratagu	Tir	neli	ine	Hospital and Committed Partners	Committed Resources
Strategy	Y1	Y2	Y3	(align to indicate committed resource)	(align by hospital/committed partner)
				MercyOne New Hampton	In-Kind, staff (CEO, Development & Public Relations Manager)
Collaborate with				Northeast Iowa Community	
Northeast Iowa				College New Hampton Community School	
Community College to				District	
enroll high school seniors in EMT	х	х			
programs and					
encourage paramedic				Focus location(s)	Focus Population(s)
careers.					Broad Community
	T:		10.5		
Strategy		meli Y2		Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
Work with MercyOne		12	10	MercyOne New Hampton	In-Kind, staff (CEO, CNO, Development & Public Relations Manager)
New Hampton RNs to					ivialiayei j
encourage and support		х	х		
involvement in the					
ambulance service.					
1				Focus location(s)	Focus Population(s)

					Broad Community
Strategy		meli		Hospital and Committed Partners	Committed Resources
on atogy	Y1	Y2	Y3	(align to indicate committed resource)	(align by hospital/committed partner)
				MercyOne New Hampton	Financial support and pharmacist services
Provide laundry					
services, cell phones, medical waste disposal,					
and medication refill					
assistance to the				Focus location(s)	Focus Population(s)
ambulance service.					Broad Community

Anticipated impact of these actions:

Impact Measures	CHNA Baseline	Target	Plan to evaluate the impact
Collaborate with community members to evaluate establishing a 501(c)3 to support EMS.	0	5 partners	
Participate in educational events to promote EMT and paramedic careers.	0	2 per year	Number of events held and the number of participates at each event.
Decrease wait time for paramedic transfers out of the ER.	2021 = 64 delays that averaged 109 minutes	Less than 50 delays in 2023 and less than 40 for in 2024.	ER staff will continue to track paramedic delays and work with Chickasaw County EMS and MercyOne administration to make improvements.
Increase ambulance transfer access for ER Medicaid patients and other under-insured patients	Currently there are zero ambulance services within 20 miles that accept these patients for transfers.	1 full-time EMS service & 1 back-up	ER staff will continue to track ambulance transfer refusals based on a patient's insurance or inability to pay.

Adoption of Implementation Strategy

On October 24, 2022, the Board of Directors for MercyOne New Hampton Medical Center voted after review of the 2023-2025 Implementation Strategy for addressing the community health needs identified in the 2022 Community Health Needs Assessment. Upon review, the Board approved this Implementation Strategy and the related budget.

Aaron Flugum, CEO

October 24, 2022

Date

