



# Davis County, IA

Community Health Needs Assessment Round #2



**December 2015**

**VVW Consultants LLC  
Olathe, KS**

# Community Health Needs Assessment

## Table of Contents

### I. Executive Summary

### II. Methodology

- a) CHNA Scope and Purpose
- b) Local Collaborating CHNA parties (The identity of any and all organizations with which the organization collaborated and third parties that engaged to assist with the CHNA)
- c) CHNA and Town Hall Research Process (A description of the process and methods used to conduct the CHNA, a description of how the organization considered the input of persons representing the community, and an explanation of the process / criteria used in prioritizing such needs)
- d) Community Profile (A description of the community served by the facility and how the community was determined)

### III. Community Health Status

- a) Town Hall CHNA Findings: Areas of Strengths and Areas to Change and/or Improve
- b) County Health Area of Future Focus (A prioritized description of all of the community needs identified by the CHNA)
- c) Historical Health Statistics

### IV. Inventory of Existing County Health Resources

- a) A description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA

### V. Detail Exhibits

- a) Patient Origin and Access to Care
- b) Town Hall Attendees, Notes and Feedback (Who attended with qualifications)
- c) Public Notice and News
- d) Primary Research Detail *Shaded lines note IRS requirements*

# I. Executive Summary

---

[VVV Consultants LLC]

# I. Executive Summary

## Davis County, IA - 2015 Community Health Needs Assessment (CHNA) Round #2

Creating healthy communities requires a high level of mutual understanding and collaboration among community leaders. The development of this assessment brings together community health leaders and providers, along with local residents, to research and prioritize county health needs and document community health delivery successes. This health assessment will serve as the foundation for community health improvement efforts for the next three years. The last CHNA for Davis County, IA was published in June of 2013. (Note: The Patient Protection and Affordable Care Act (ACA) require not-for-profit hospitals to conduct a CHNA every three years and adopt an implementation strategy to meet the needs identified by the CHNA). This assessment was coordinated and produced by VVW Consultants LLC (Olathe, Kansas) under the direction of Vince Vandehaar, MBA.

Important CHNA benefits for both the local hospital and health department, as well as for the community, are as follows: 1) Increases knowledge of community health needs and resources 2) Creates a common understanding of the priorities of the community's health needs 3) Enhances relationships and mutual understanding between and among stakeholders 4) Provides a basis upon which community stakeholders can make decisions about how they can contribute to improving the health of the community 5) Provides rationale for current and potential funders to support efforts to improve the health of the community 6) Creates opportunities for collaboration in delivery of services to the community and 7) Provides guidance to the hospital and local health department for how they can align their services and community benefit programs to best meet needs.

Town Hall "Community Health Strengths" cited for Davis County Hospital's Primary Service Area are as follows:

Davis Co, IA - Community Health "Strengths"			
#	Topic	#	Topic
1	Healthcare provider recruitment	9	Engaged community (Community Coalition)
2	Positive attitude at the hospital	10	Positive public opinion of the hospital is rising
3	Culture of the hospital is changing	11	Increased quality of care given by local providers
4	Added a pediatrician	12	Community Center and walking trail development for exercise opportunities
5	Low ER wait times	13	Added another dentist
6	Cardiac and pulmonary rehab have returned at the hospital	14	Good pharmacy services
7	Good hospital facility	15	Increased hospital transparency
8	Good physical therapy department		

Town Hall "Community Health Changes and/or Improvements Ranking" cited for Davis County Hospital's Primary Service Area are as follows:

<b>Davis County Hospital - Primary Service Area</b>				
<b>Town Hall Community Health Needs Priorities (35 Attendees, 124 votes)</b>				
<b>#</b>	<b>Health Needs to Change and/or Improve</b>	<b>Votes</b>	<b>%</b>	<b>Accum</b>
1	Increase mental health care delivery (add providers, increase placement options and manage dual-diagnosis).	27	21.8%	21.8%
2	Expand senior care options.	18	14.5%	36.3%
3	Improve care coordination between county providers and agencies.	15	12.1%	48.4%
4	Provide access to oncology services.	13	10.5%	58.9%
5	Improve teen health (drinking, abuse, pregnancy, etc.).	12	9.7%	68.5%
6	Expand healthcare transportation.	11	8.9%	77.4%
7	Expand rural health care delivery access (miles, cost, hours).	10	8.1%	85.5%
	<b>Other items receiving votes: Substance Abuse, Economic Development to fund health, Childhood Sexual Abuse, Affordable Care (Availability, Insurance), Dialysis Unit</b>			

**Key Community Health Needs Assessment Conclusions** from secondary research for Davis County Hospital's Primary Service Area are as follows:

IA HEALTH RANKINGS: According to the 2015 RWJ County Health Rankings study, Davis County's highest State of Iowa rankings (of 99 counties) were in Morbidity and Physical Environment.

- TAB 1: Davis County has a population of 8,781 residents as of 2014, a 0.3% increase. 17.5% of Davis County's population consists of the elderly (65+). 28.9% of Davis County's population is consists of person under 18 years, higher than the Iowa rural norm of 23.4%. 14.4% of households in Davis County speak a language other than English at home. There are 17.4 persons per square mile, lower than the Iowa rural norm of 25.5. The poverty level in Davis County is at 16.8%, higher than the Iowa rural norm of 12.7%.
- TAB 2: Davis County per capita income in the past 12 months equals \$22,210. 6.4% of housing units in Davis County are in multi-unit structures. 14% of Davis County residents experience severe housing problems, higher than the Iowa rural norm of 10.6%. There are 848 firms in Davis County, lower than the Iowa rural norm of 1,421. 34% of residents in Davis County experience driving a long commute alone, higher than the Iowa rural norm of 24.9%.
- TAB 3: In Davis County, 33.2% of students are eligible for the free lunch program, higher than the Iowa rural norm of 29.4%. The percent of persons (25+) with a Bachelor's degree or higher in Davis County is 16.4%.
- TAB 4: 160 mothers in Davis County began prenatal care in the first trimester, lower than the Iowa rural norm of 253. The number of mothers who smoked during pregnancy in Davis County is 33, lower than the Iowa rural norm of 62.
- TAB 5: The ratio of the population in Davis County to primary care physicians is 2,172, higher than the Iowa rural norm of 1,987. The percent of patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest) is 66%, lower than the Iowa rural norm of 74.3%.
- TAB 6: The depression rate for the Medicare population in Davis County is 11.6%, lower than the Iowa rural norm of 14%. The percent of alcohol-impaired driving deaths in Davis County is 50%, much higher than the Iowa rural norm of 22.9%.
- TAB 7: The percent of adults who are obese in Davis County is 31%. The percent of adults who smoke in Davis County is 23%, higher than the Iowa rural norm of 19%. The percent of residents who are physically inactive is 28%.
- TAB 8: The uninsured adult population rate in Davis County is 17.9%, higher than the Iowa rural norm of 12%.

- TAB 9: The heart disease mortality rate in Davis County is 114, lower than the Iowa rural norm of 215. The Chronic Obstructive Pulmonary Disorder disease mortality rate is 24, lower than the Iowa rural norm of 46.
- TAB 10: The access to exercise opportunities in Davis County is 50%, lower than the Iowa rural norm of 69.9%. The 2-year-old coverage of individual vaccines and selected vaccination series is at 45% in Davis County, lower than the Iowa rural norm of 67%. The mammography screenings are at 50% in Davis County, lower than the Iowa rural norm of 62.9%.

**Davis County residents (N=357) also provided the following community feedback insights:**

- The percent of Davis County residents who would rate the overall quality of care as either Very Good or Good is improving, increasing by nearly 10% since 2013.
- Davis County residents are satisfied with the following services: Ambulance Services, Chiropractor, Hospice, Hospital Inpatient Services, Outpatient Services, Pharmacy, Primary Care Doctors and School nurse.
- Davis County residents are not satisfied with the following services: Dentists, Eye Doctor/Optommetrist, Family Planning Services, Home Health, Mental Health Services and Nursing Home.
- The percent of Davis County residents who have received healthcare services outside of their community over the past two years has increased to 81.2%.
- Davis County residents do not perceive Sexually Transmitted Diseases as a problem cause of disease or disability in their community.
- Davis County residents perceive the following causes of disease or disability a problem in their community: Cancer, Diabetes, Substance Abuse, Heart Disease, Mental Disorders and Obesity.

# II. Methodology

---

[VVV Consultants LLC]

## II. Methodology

### a) Scope and Purpose

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

#### **JOB #1: Meet/Report IRS 990 Required Documentation**

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

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

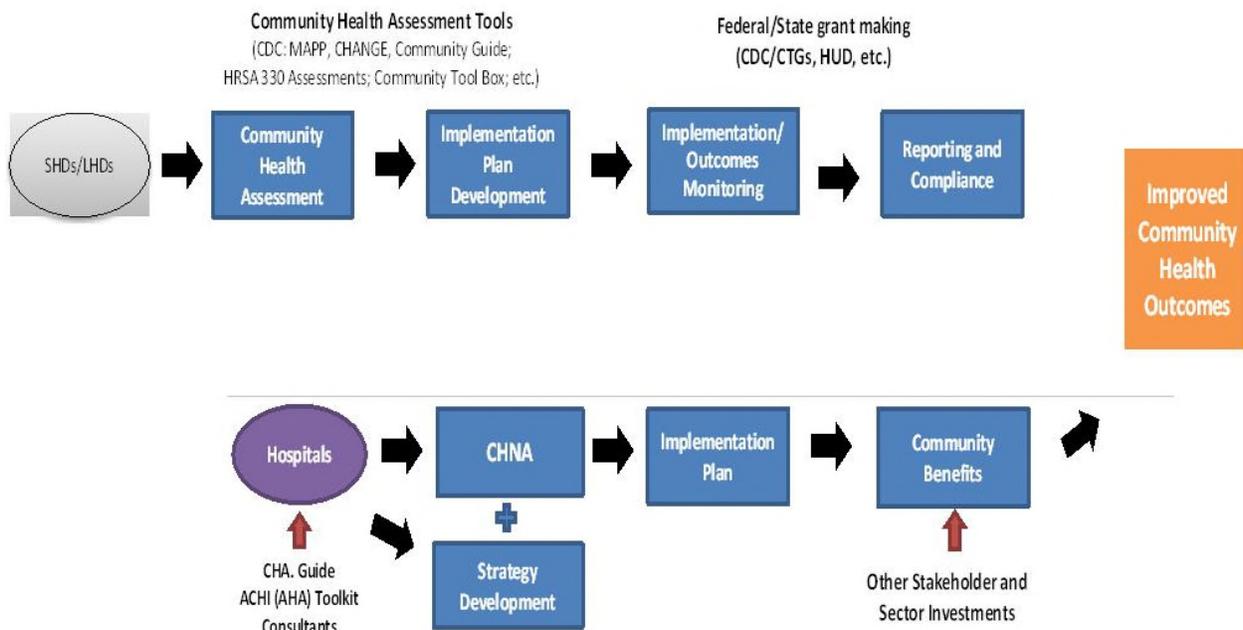
#### **JOB #2: Making a CHNA Widely Available to the Public**

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

### JOB #3: Adopt an Implementation Strategy by Hospital

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

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



## **IRS Notice 2011-52 Overview**

### Notice and Request for Comments Regarding the Community Health Needs Assessment Requirements for Tax-exempt Hospitals

#### **Applicability of CHNA Requirements to “Hospital Organizations”**

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

#### **How and When to Conduct a CHNA**

Under Section 501(r), a hospital organization is required to conduct a CHNA for each of its hospital facilities once every three taxable years. ***The CHNA must take into account input from persons representing the community served by the hospital facility and must be made widely available to the public. The CHNA requirements are effective for taxable years beginning after March 23, 2012.*** As a result, a hospital organization with a June 30 fiscal year end must conduct an initial CHNA for each of its hospital facilities by June 30, 2013, either during the fiscal year ending June 30, 2015 or during either of the two previous fiscal years.

#### **Determining the Community Served**

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

#### **Persons Representing the Community Served**

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

## Required Documentation

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

## Making a CHNA Widely Available to the Public

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

## How and When to Adopt an Implementation Strategy

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

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

## Year 2015 - IRS and Treasury Finalize Patient Protection Rules for Tax-Exempt Hospitals

ACCOUNTING TODAY 1/2/15

The Internal Revenue Service and the Treasury Department have issued **final regulations** under the Affordable Care Act to protect patients in tax-exempt hospitals from aggressive debt collection practices and to provide other rules for charitable hospitals.

Under the **final regulations**, each Section 501(c)(3) hospital organization is required to meet four general requirements on a facility-by-facility basis: establish written financial assistance and emergency medical care policies; limit the amounts charged for emergency or other medically necessary care to individuals eligible for assistance under the hospital's financial assistance policy; make reasonable efforts to determine whether an individual is eligible for assistance under the hospital's financial assistance policy before engaging in extraordinary collection actions against the individual; and conduct a community health needs assessment, or CHNA, and adopt an implementation strategy at least once every three years. The first three requirements are effective for tax years beginning after March 23, 2010 and the CHNA requirements are effective for tax years beginning after March 23, 2012.

The ACA also added a new Section 4959, which imposes an excise tax for failure to meet the CHNA requirements, and added reporting requirements. These final regulations provide guidance on the entities that must meet these requirements, the reporting obligations relating to these requirements and the consequences for failing to satisfy the requirements. "Charitable hospitals represent more than half of the nation's hospitals and play a key role in improving the health of the communities they serve," wrote Emily McMahon, Deputy Assistant Secretary for Tax Policy at the U.S. Department of the Treasury, in a **blog post** Monday explaining the requirements. "But reports that some charitable hospitals have used aggressive debt collection practices, including allowing debt collectors to pursue collections in emergency rooms, have highlighted the need for clear rules to protect patients. For hospitals to be tax-exempt, they should be held to a higher standard. That is why the Affordable Care Act included additional consumer protection requirements for charitable hospitals, so that patients are protected from abusive collections practices and have access to information about financial assistance at all tax-exempt hospitals."

She noted that as a condition of their tax-exempt status, charitable hospitals must take an active role in improving the health of the communities they serve, establish billing and collections protections for patients eligible for financial assistance, and provide patients with the information they need to apply for such assistance. "These final rules adopt the same framework of proposed regulations but simplify the compliance process for charitable hospitals, while continuing to provide meaningful guidance on protections for patients and requirements to assess community health needs," she added.

Under the new rules, hospitals cannot charge individuals eligible for financial assistance more for emergency or other medically necessary care than the amounts generally billed to patients with insurance (including Medicare, Medicaid, or private commercial insurance). In addition, every tax-exempt hospital must establish and widely publicize a financial assistance policy that clearly describes to patients the eligibility criteria for obtaining financial assistance and the method for applying for financial assistance.

Charitable hospitals are also prohibited from engaging in certain collection methods (for example, reporting a debt to a credit agency or garnishing wages) until they make reasonable efforts to determine whether an individual is eligible for assistance under the hospital's financial assistance policy.

In addition, each charitable hospital need to conduct and publish a community health needs assessment at least once every three years and disclose on the tax form that it files on an annual basis the steps it is taking to address the health needs identified in the assessment.

Many of the requirements have been in place since the Affordable Care Act passed in 2010, but in response to comments on the proposed regulations, the final rules also expand access to translations for patients, by lowering the threshold for having translations of financial assistance policies available from 10 percent of the community served as proposed, to five percent of the community served or population expected to be encountered by the hospital facility, or 1000 persons, whichever is less, according to McMahon. "The final rules also revise the notification requirements to maintain important protections for patients while making it easier for hospitals to comply with them," she wrote. "General notifications regarding a hospital's financial assistance policy must appear on bills and in the hospital. However, individual written and oral notifications of the hospital's financial assistance policy are now only required when a hospital plans to use extraordinary collections actions, such as reporting a debt to a credit bureau, selling the debt to a third party or garnishing wages."

While charitable hospitals must continue to make a good-faith effort to comply, the rules provide charitable hospitals with time to fully update their policies and programming to implement the changes. But if a charitable hospital fails to meet the consumer protection provisions required by the law, the hospital could have its tax-exempt status revoked. If a hospital fails to properly conduct a community health needs assessment or adopt an implementation strategy, an excise tax will apply, McMahon noted. "However, if a hospital fails to meet a requirement, but the failure is neither willful nor egregious, the hospital can correct and publicly disclose the error to have it excused, thus avoiding revocation of tax-exempt status, but the excise tax would still apply," she wrote.

## II. Methodology

### b) Collaborating CHNA Parties

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

#### Davis County Hospital Profile

**509 N Madison St, Bloomfield, IA 52537**  
**CEO: Kirby Johnson**

**Mission:** Davis County Hospital is committed to working together to deliver high quality, patient centered care with integrity and trust.

**Vision:**

**Our vision will be realized when:**

- Patients, family, and friends have exceptional experiences at Davis County Hospital;
- Highly qualified, engaged employees look forward to coming to work every day;
- Medical Providers voice their pride in being members of the Davis County Hospital Medical Staff;
- Our community views Davis County Hospital as an indispensable resource.

**Critical Access Hospital:** Davis County Hospital became a Critical Access Hospital in 2002. The decision to become a critical access was driven by the need to continue to provide healthcare to the community and maintain a healthy financial position to provide that care.

#### **What is the Critical Access Hospital Program?**

The Critical Access Hospital Program was created by the 1997 federal Balanced Budget Act as a safety net device, to assure Medicare beneficiaries access to health care services in rural areas. It was designed to allow more flexible staffing options relative to community need, simplify billing methods and create incentives to develop local integrated health delivery systems, including acute, primary, emergency and long-term care.

The Critical Access Hospital (CAH) Program was established to aid in the continuation of healthcare services for rural residents.

- Aids in the continuation of health care services for rural residents
- Enables hospitals to be eligible for cost-based Medicare reimbursement for inpatient and outpatient services
- With a signed Memorandum of Agreement, hospitals are eligible to receive enhanced reimbursement from Medicaid and the State Health Benefit Plan

#### **A Critical Access Hospital:**

- Can limit services and utilize physician assistants and /or nurse practitioners in an effort to reduce their expenses

- May choose to maintain its current services; however, the hospital must agree to the bed size and annual inpatient length of stay limits
- Provides small, rural hospitals with a range of opportunities for service enhancement, quality of care improvement, and certain economies of scale through network participation

### **Benefits:**

- Receive enhanced Medicare reimbursement for covered in-patient services
- Receive 100% of allowable costs for Medicaid out-patient services
- Retain any Medicaid payment for inpatient services in excess of charges
- Receive 100% of charges for outpatient services by the State Health Benefit Plan and Board of Regents Health Plan
- May enroll with State Health Benefit Plan as their group insurance provider

### **Mercy Network Affiliation**

Davis County Hospital partners with Mercy Medical Center – Des Moines through both a management agreement and a Critical Access Hospital agreement. However, the Davis County Hospital Board of Trustees, elected by the residents of Davis County, along with the Administrator, maintains complete control in all areas of Davis County Hospital operations.

Being a Mercy Network Affiliate permits Davis County Hospital, a rural, primary-care facility, to take advantage of cost savings provided to a larger, tertiary facility such as Mercy. In addition, the relationship affords Davis County Hospital the management expertise and educational offerings of a larger organization that would not otherwise be readily available.

As part of a larger network of rural facilities, there is a collegiality that allows for sharing of ideas and best practices throughout the network. Collaborating with Mercy Medical Center-Des Moines truly provides a level of support that is available to enhance all areas of service provided by Davis County Hospital!

What does the agreement mean for our patients? A highly trained staff and more dollars devoted towards continually improving patient care!

Being a Mercy Network Affiliate DOES NOT mean that our patients must use Mercy physicians if they need additional care or that our patients must be transferred to Mercy for emergent care. In fact, we are required by law to give each patient a choice on where to receive care above the scope that is offered at Davis County Hospital.

### **History:**

#### **Davis County Voters Want a Hospital**

#### **HOSPITAL Drive is extended to MAY 1, 1947**

The deadline for Davis County's Hospital drive has been extended to May 1, according to Heinrich Taylor, chairman of the Finance Council. At the present time the total of the campaign stands at \$60,135.98. Taylor reports that the Board of Trustees, the Finance Council and the project committee will meet Tuesday evening, April 1, at the courthouse. The township chairmen and workers will meet with the hospital leaders: Union, M. H. Hargrove; Fox River, H. C. Quigley; and Matson Cary; Prairie, V. L. Heskett and Mrs. Lowell Wagler; Roscoe, James Burns and Mrs.

Grace Whirrett; Soap Creek, C. C. Pitman; Grove, B. L. Daniels and Mrs. Oscar Dieffenbach; Wyacondah, Roy Davis and James Melvin; Cleveland, George Smith and A. K. Plank; Perry, Mrs. Glen Huffman and Ralph Christy; Drakesville, Earl Cary and Mrs. Bert Kirk; Fabius, J. W. Jones and Jesse Jones; Marion, Hampson Lowe; Salt Creek, Dewey Carbaugh and Carl Aeschliman; Lick Creek, W. R. Baker and Mrs. Ray McReynolds; West Grove, Mrs. Clay Harper and Mrs. Flossie Robinson; 1st Ward, Chauncey Francis; 2nd Ward, Mrs. Ray Baumgarten; 3rd Ward, Ira Wilkinson. Members of the Board of Trustees will meet with federal officials in Des Moines April 22 and at that time will learn requirements concerning the allocation of federal funds for the hospital construction. It is known, however, the the ability of the community to raise funds is used as a factor in the allocation of the funds. Therefore, it is important that the community gain the \$100,000 goal as soon as possible.

**April 1, 1947-** 32 Hospital workers, including members of the Board of Trustees, Finance Council, publicity committee and township chairmen, met at the courthouse Tuesday evening to discuss the county wide campaign to raise \$100,000 for the construction and equipping of a Davis County Hospital. Edward Burchett, chairman of the Board of Trustees, revealed that the group will meet with federal representatives in Des Moines April 22 to learn government requirements for hospitals similar to the Davis County project. At the time of the meeting, Burchett revealed it will be necessary to report the total amount raised by donations thus far in the campaign and to indicate the source for the remainder of the total. It is known that the allocating officials will be deeply interested in the community's ability to raise funds and will use this factor as a yardstick in determining the allocation of funds. It is for that reason that city and township workers are being urged to make complete solicitations of their respective districts immediately. Township chairmen present at the meeting reported that there were numerous districts of the county unsolicited and pledged their support in bringing the campaign to a close as soon as possible. C. C. Hockersmith, member of the finance council, reported that 28 contributors have provided funds for the furnishing of rooms in the proposed Hospital. Additional projects, designed to increase the momentum of the campaign, were also discussed at the meeting and will be revealed in the near future.

(Source: Bloomfield Democrat)

**Davis County Hospital offers** the following services to its community:

- Allergies and Asthma
- Allergy and Immunology
- Cardiology
- Dermatology
- Ear, Nose and Throat
- Emergency Department
- Emergency Medical Services
- Family Medicine
- Hospice and Palliative Medicine
- Internal Medicine
- Laboratory
- Neuromusculoskeletal Medicine
- Orthopedic Surgery
- Pediatrics/Well Child Clinics
- Physical Therapy
- Pulmonology
- Radiology
- Respiratory
- Rheumatology
- Surgery
- Women's Health

## **Davis County Health Department Profile**

**509 North Madison, Bloomfield, IA 52537**

At Davis County Public Health we provide:

- Skilled Nursing Visits
- Homemaker Visits
- Home Care Aide Visits
- Children's Immunization Clinics (twice per month)
- Annual Drive-Through Flu Clinic (along with several other flu clinics throughout the community)
- Meals on Wheels (delivered 365 days per year)
- Communicable Disease Follow-Up

## II. Methodology

### b) Collaborating CHNA Parties Continued

#### Consultant Qualifications



#### **VVV Consultants LLC**

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

#### **VINCE VANDEHAAR, MBA**

##### **Principal Consultant and Owner of VVV Consultants LLC**

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

**VVV Consultants LLC** consultants have in-depth experience helping hospitals work with local health departments to engage community residents and leaders to identify gaps between existing health community resources and needs and construct detailed strategies to meet those needs, while still adhering to the hospital's mission and budget. Over the past 20 years, Vandehaar has completed eight comprehensive Baldrige aligned Community Health Needs Assessments for Saint Luke's of Kansas City System facilities (3 campuses) and was contracted to conduct two additional independent department of health consulting projects (prior to IRS 990 regs). To date, VVV has completed over 50 CHNA IRS aligned assessments for Iowa, Kansas, Missouri and Nebraska hospitals and health departments.

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

#### **Collaborating Consultants**

Alexa Backman, MBA - VVV Consultants LLC  
Business Development Manager

## II. Methodology

### c) CHNA and Town Hall Research Process

Davis County Hospital's (DCH) Community Health Needs Assessment process began in May of 2015. At that time, an inquiry was made by Lynn Fellingner, RN at Davis County Public Health to VVV Consultants LLC. This inquiry was to explore the possibility of conducting a comprehensive IRS-aligned CHNA for hospital members. On May 28<sup>th</sup> of 2015, a conference call was held to learn more about DCH's CHNA options. On that date, VVV Consultants LLC reviewed: VVV Consultants LLC CHNA experience, CHNA requirements (in-depth regulations), CHNA development options to meet IRS requirements and next steps after option approval. After this review, DCH elected to move forward with VVV Consultants LLC CHNA support.

#### VVV CHNA Deliverables:

- Confirm Davis County Hospital's service area meets 80/20% patient origin rule.
- Uncover/document basic secondary research (health of county) organized by 10 tabs.
- Conduct a Town Hall meeting to discuss secondary data and uncover/prioritize county health needs.
- Report CHNA primary research with valid N.
- Prepare and publish IRS-aligned CHNA report to meet requirements.

(NOTE: To ensure proper 80/20% Town Hall representation, the following patient origin three year summary was generated. For DCH, all of Davis County and the city of Ottumwa, IA resident's views need to be collected and reported to determine primary service area health needs).

Origination of DCH Patients: PSA Defined						Inpatient			ER			OP Proc		
#	Zips	County	Total 3YR I/E/O	3YR %	Accum	2012	2013	2014	2012	2013	2014	2012	2013	2014
	DCH Totals		188,462	100.0%		457	285	320	3,311	2,956	2,893	62,023	55,413	60,804
1	Bloomfield, IA - 52537	DAVIS	108,126	57.4%	57.4%	255	179	191	1,969	1,650	1,741	34,414	32,077	35,650
2	Drakesville, IA - 52552	DAVIS	7,990	4.2%	61.6%	25	13	15	154	102	128	2,525	2,324	2,704
3	Floris, IA - 52560	DAVIS	5,606	3.0%	64.6%	18	4	4	113	92	93	1,825	1,728	1,729
4	Pulaski, IA - 52584	DAVIS	4,827	2.6%	67.1%	11	3	4	95	92	66	1,689	1,445	1,422
5	Ottumwa, IA - 52501	WAPELLO	23,131	12.3%	79.4%	40	31	35	451	483	423	6,461	7,595	7,612

The following calendar of events outlines approved Davis County Hospital's CHNA roles and responsibilities:

## Davis County Hospital CHNA Work Plan

### Project Timeline and Roles 2015

Step	Date (Start-Finish)	Lead	Task
1	5/31/2015	VVV	Sent VVV quote for review.
2	5/31/2015	Hosp	Select CHNA Option A/B/C. Approve and sign VVV CHNA quote.
3	9/1/2015	VVV	Send out REQCommInvite Excel file. Hospital and health department to fill in PSA stakeholders names, addresses and e-mails.
4	9/1/2015	VVV	Request hosp client to send KHA PO reports (PO101, 103 and TOT223E) to document service area for FFY 11, 12 and 13. In addition, request hosp to complete three year historical PSA IP/OP/ER/Clinic patient origin file (Use ZipPSA_3yrPOrigin.xls).
5	On or before 9/15/2015	VVV	Prepare CHNA Round#2 stakeholder feedback online link. Send text link for hospital review.
6	On or before 9/15/2015	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming CHNA work (general story). Hospital to place.
7	9/22/2015	VVV	Launch and conduct online survey to stakeholders. Hospital will e-mail invite to participate to all stakeholders.
8	9/22/2015	VVV / Hosp	Prepare and send out PR story to local media CHNA survey announcing online CHNA Round #2 feedback. Request public to participate.
9	On or before 10/13/2015	VVV	Assemble and complete secondary research. Find and populate 10 TABS. Create Town Hall PowerPoint for presentation.
10	10/13/2015	Hosp	Prepare and send out community Town Hall invite letter and place local ad.
11	10/13/2015	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming Town Hall. VVV will mock up PR release to media sources.
12	On or before 11/3/2015	All	Conduct conference call (time TBD) with hospita and public health to review Town Hall data and flow.
13	11/10/2015	VVV	Conduct CHNA Town Hall. Dinner 5:30-7pm at DCH. Review and discuss basic health data plus rank health needs.
14	On or before 11/30/2015	VVV	Complete analysis. Release draft one and seek feedback from leaders at hospital and health department.
15	On or before 12/11/2015	VVV	Produce and release final CHNA report. Hospital will post CHNA online.
16	On or before 12/11/15	Hosp	Conduct client implementation plan PSA leadership meeting.
17	30 days prior to end of hospital fiscal year	Hosp	Hold board meetings discuss CHNA needs, create and adopt an implementation plan. Communicate CHNA plan to community.

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

**Phase I – Discovery:**

Conduct a 30 minute conference call with CHNA hospital client and county health department. Review/confirm CHNA calendar of events, explain/coach client to complete required participant database and schedule/organize all Phase II activities.

**Phase II – Qualify Community Need:**

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

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

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

**Phase III – Quantify Community Need:**

Conduct a 90 minute Town Hall meeting with required county primary service area residents. At each Town Hall meeting, CHNA secondary data will be reviewed, a facilitated group discussion will occur, followed by a group ranking activity to determine the most important community health needs will be administered.

**Phase IV - Complete Data Analysis and Create Comprehensive Community Health Needs Assessment:**

Post CHNA report findings to meet IRS CHNA criteria.

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

Phase I: Discovery.....	Sept 2015
Phase II: Secondary/Primary Research.....	Sept-Oct 2015
Phase III: Town Hall Meeting.....	Nov 10, 2015
Phase IV: Prepare/Release CHNA Report.....	Dec 2015

Detail CHNA Development Steps Include:

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

## Overview of Town Hall Community Priority Setting Process

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

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

Davis County Hospital's Town Hall was held on Tuesday, November 10th, 2015 at Davis County Hospital. Vince Vandelaar and Alexa Backman facilitated this 1 ½ hour session with thirty five (35) attendees. (Note: a detail roster of Town Hall attendees is listed in Section V a).

The following Town Hall agenda was conducted:

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

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

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

## Community Health Needs Assessment Davis County, IA Town Hall Meeting on behalf of Davis County Hospital

**Vince Vandehaar, MBA**  
VVV Marketing & Development, LLC  
Owner and Adjunct Marketing Professor

Olathe, Kansas 66061  
[vmvandehaar@aol.com](mailto:vmvandehaar@aol.com)

[www.vandehaarmarketing.com](http://www.vandehaarmarketing.com)  
913-302-7264

## Community Health Needs Assessment (CHNA) Town Hall Discussion Agenda

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

VVV Marketing & Development, LLC

## I. Introduction:

Background and Experience



**Vince Vandehaar, MBA**  
VVV Marketing & Development, LLC Principal Consultant  
Olathe, KS 913 302-7264

- > Professional Consulting Services: Strategic Planning, Marketing Management, Business Research & Development
  - > Focus: Strategy, Research, Deployment
  - > Over 25 years of experience with Tillinghast, BCBSKC, Saint Luke's
- Adjunct Professor - Marketing / Health Admin, 26 years +**
- > Webster University (1988 – present)
  - > Rockhurst University (2010 – present)

**Alexa Backman, MBA, Business Development Manager**

## Town Hall Participation (You)

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

## I. Introductions: A Conversation with the Community

Community members and organizations invited to CHNA Town Hall

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

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

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

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

## II. Purpose: Why Conduct Community Health Needs Assessment?

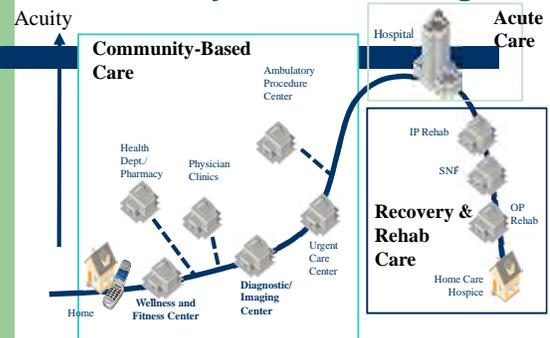
- To determine health-related trends and issues of the community.
- To understand/evaluate health delivery programs in place.
- To develop strategies to address unmet health needs.
- To meet Federal requirements -- both local hospital and health department.

## II. Review CHNA Definition

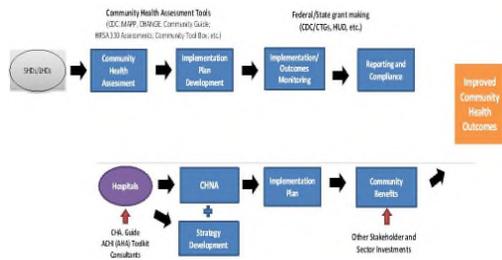
A Community Health Needs Assessment (CHNA) is a systematic collection, assembly, analysis, and dissemination of information about the health of the community. (NOTE: Some the data has already been published by local, state and federal public health organizations. Some data will be collected today).

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

## Future System of Care Sg2



## Community Health Needs Assessment Joint Process: Hospital and Health Department



## II. Required Written Report IRS 990 Documentation

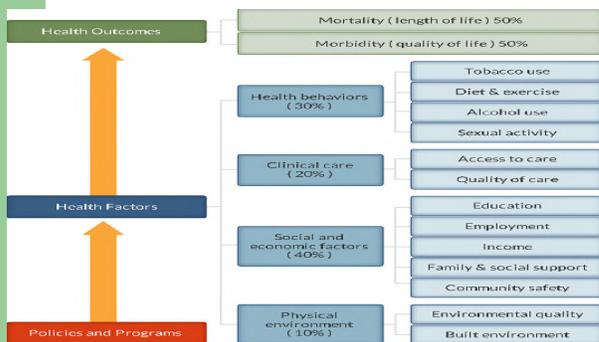
- a description of the community served
- a description of the CHNA process
- the identity of any and all organizations and third parties which collaborated to assist with the CHNA
- a description of how the organization considered the input of persons representing the community (*e.g., through meetings,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

## III. Review Current County “Health Status” Secondary Data by 10 TAB Categories plus IA State Rankings

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

## County Health Rankings

Robert Wood Johnson Foundation and University of WI Health Institute



## YR 2012 CHNA Needs

Davis County IA on behalf of DCH				
Town Hall Community Health Needs Priorities N = 76				
#	HC Topics cited to either change or improve	Votes	%	Accum
<b>Total Town Hall Votes</b>		<b>256</b>	<b>100%</b>	
1	Access to mental health providers (providers preferably M.D. and placement)	76	29.7%	29.7%
2	Continue to build HC collaborative efforts between city, county, school, hospital	18	7.0%	36.7%
3	Recruit Primary Care physicians (2 – 3)	17	6.6%	43.4%
4	Fight Obesity (Fitness & Healthy foods)	16	6.3%	49.6%
5	Provide wellness education heart disease	14	5.5%	55.1%
6	Increase Cancer Screenings	14	5.5%	60.5%
7	Increase adequate housing options	14	5.5%	66.0%
8	Further Non-farm economic development	12	4.7%	70.7%
9	Fight Childhood poverty	10	3.9%	74.6%
10	Fight Drug Abuse	10	3.9%	78.5%
11	Establish Amish Healthcare Ed programming	9	3.5%	82.0%
Note: Other items receiving votes: Water quality, Pediatric, Diabetic, Uninsured, Childcare, OB/GYN, Veterans care, ER, Sports Medicine, Smoking, Dentistry, Prenatal and Lactation.				

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

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

## V. Have we forgotten anything ?

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

## Community Health Needs Assessment

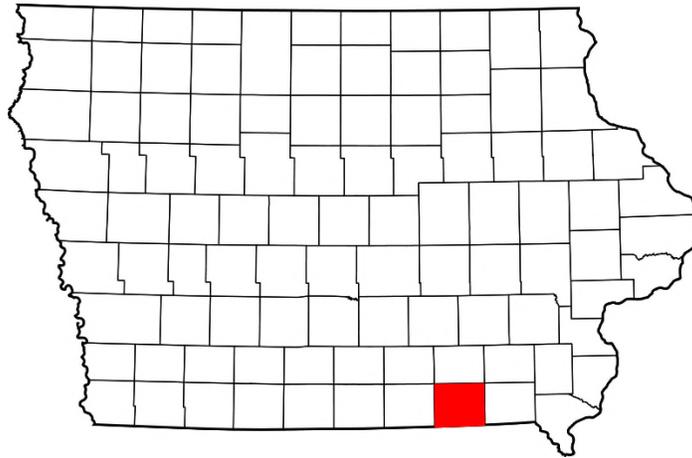
### Questions Next Steps ?

VVV Research & Development, LLC  
[vmlvandehaar@aol.com](mailto:vmlvandehaar@aol.com)  
 913 302-7264

## II. Methodology

### d) Community Profile (A Description of Community Served)

#### Davis County, IA Community Profile



#### Demographics

**The population of Davis County** was estimated to be 8,781 in 2014, and had a 0.3% change in population from 2010–2014.<sup>1</sup>

The county covers 502.19 square miles and this area is home to General Weaver House, Davis County Courthouse and Bloomfield Square Historical District.<sup>2</sup> The county has an overall population density of 17.4 persons per square mile, compared to the State average of 54.5 persons per square mile.<sup>3</sup>

The county is located in south central Iowa and its economy is based on Manufacturing (21.8%), Educational, health and social services (18.3%), Agriculture, forestry, fishing and hunting, and mining (12.5%).<sup>4</sup> The county was founded in 1843 and the county seat is Bloomfield.<sup>5</sup>

**The major highway transportation in Davis County** is U.S. Highway 63, Iowa Highway 2, Iowa Highway 202.<sup>6</sup>

---

<sup>1</sup> <http://quickfacts.census.gov/qfd/states/19/19051.html>

<sup>2</sup> [http://www.visitdaviscounty.com/index.php?option=com\\_content&view=article&id=72&Itemid=37](http://www.visitdaviscounty.com/index.php?option=com_content&view=article&id=72&Itemid=37)

<sup>3</sup> [https://en.wikipedia.org/wiki/Davis\\_County,\\_Iowa](https://en.wikipedia.org/wiki/Davis_County,_Iowa)

<sup>4</sup> [http://www.city-data.com/county/Davis\\_County-IA.html#ixzz2PtuywQ7y](http://www.city-data.com/county/Davis_County-IA.html#ixzz2PtuywQ7y)

<sup>5</sup> [https://en.wikipedia.org/wiki/XXXX\\_County,\\_Iowa](https://en.wikipedia.org/wiki/XXXX_County,_Iowa)

<sup>6</sup> [https://en.wikipedia.org/wiki/XXXX\\_County,\\_Iowa](https://en.wikipedia.org/wiki/XXXX_County,_Iowa)

<b>Detail Demographic Profile</b>									
ZIP	NAME	County	Population:			Households		HH	Per Capita
			Yr2014	Yr2019	Chg	Yr2014	Yr2019	Avg Size	Income 14
52537	Bloomfield	DAVIS	7,149	7,286	1.9%	2,630	2,665	2.7	\$21,952
52552	Drakesville	DAVIS	913	964	5.6%	322	338	2.8	\$23,650
52560	Floris	DAVIS	423	418	-1.2%	175	172	2.4	\$22,450
52584	Pulaski	DAVIS	444	441	-0.7%	160	158	2.7	\$21,808
<b>Totals</b>			<b>8,929</b>	<b>9,109</b>	<b>6.3%</b>	<b>3,287</b>	<b>3,333</b>	<b>2.7</b>	<b>\$22,465</b>

ZIP	NAME	County	Population 2014:			GenY	YR 2014		Females
			Yr2014	POP65p	KIDS<18		MALES	FEMALES	Age20_35
52537	Bloomfield	DAVIS	7,149	1,265	2,144	1,865	3,538	3,611	559
52552	Drakesville	DAVIS	913	155	306	235	444	469	73
52560	Floris	DAVIS	423	82	106	103	226	197	22
52584	Pulaski	DAVIS	444	73	140	118	223	221	37
<b>Totals</b>			<b>8,929</b>	<b>1,575</b>	<b>2,696</b>	<b>2,321</b>	<b>4,431</b>	<b>4,498</b>	<b>691</b>

ZIP	NAME	County	Population 2014:				Hisp	Aver	Hholds	HH \$50K+
			White	Black	Amer IN	HH Inc14		Yr2014		
52537	Bloomfield	DAVIS	7,007	7	18	86	\$59,469	2,630	1,167	
52552	Drakesville	DAVIS	894	1	1	8	\$66,628	322	161	
52560	Floris	DAVIS	416	0	2	3	\$54,266	175	69	
52584	Pulaski	DAVIS	440	0	1	2	\$60,085	160	78	
<b>Totals</b>			<b>8,757</b>	<b>8</b>	<b>22</b>	<b>99</b>	<b>\$60,112</b>	<b>3,287</b>	<b>1,475</b>	

Source: ERSA Demographics

# **III. Community Health Status**

---

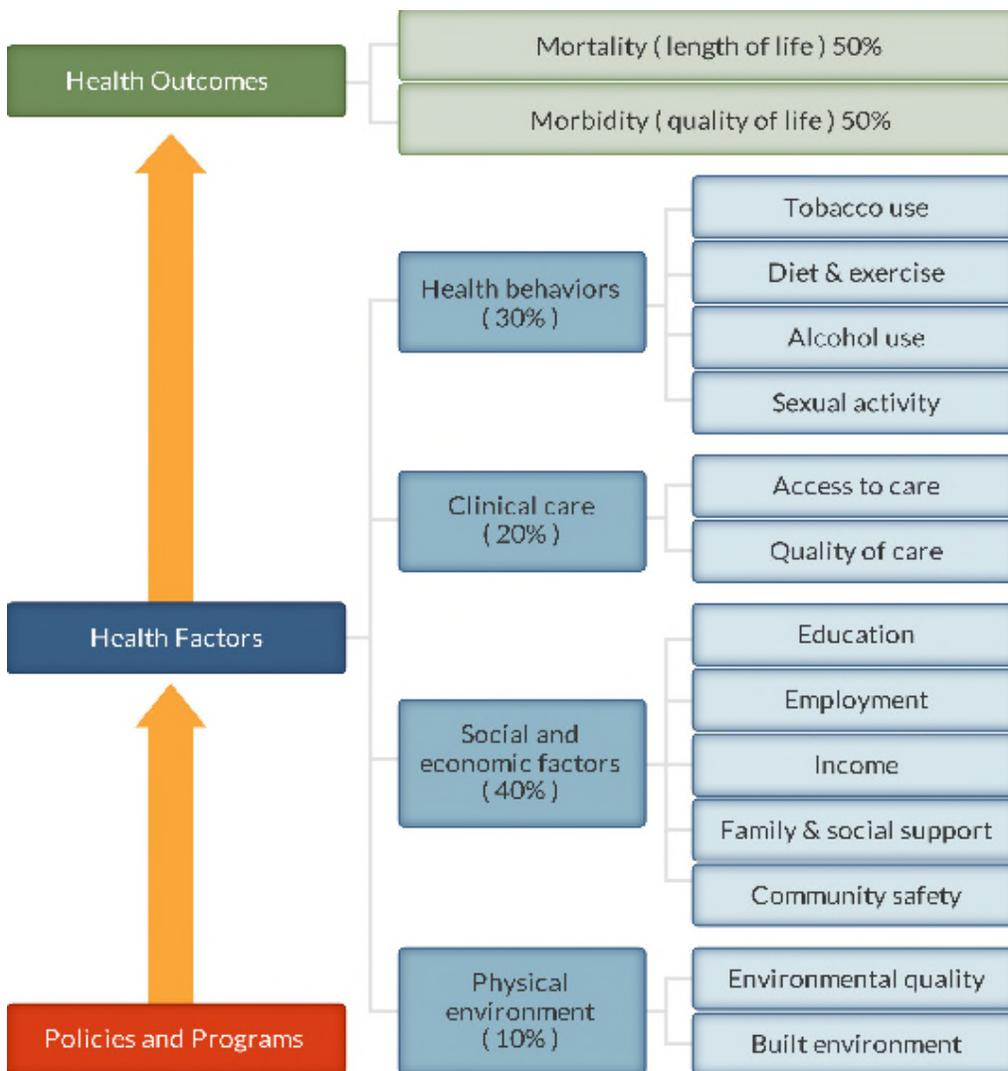
[VVV Consultants LLC]

### III. Community Health Status

#### a) Historical Health Statistics

#### Health Status Profile

This section of the CHNA reviews published quantitative community health indicators and results of our recent CHNA Town Hall. To produce this profile, VVV Consultants LLC staff analyzed data from multiple sources. This analysis focuses on a set of published health indicators organized by ten areas of focus (10 TABS), results from the 2015 County Health Rankings and conversations from Town Hall primary research. (Note: The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to release annual *County Health Rankings*. As seen below in model, these rankings are based on a number of health factors).



County Health Rankings model ©2012 UWPHI

## Secondary Research

### 2015 State Health Rankings for Davis County, IA

#	IA Rank of 99 Counties	Definitions	Davis County	TREND	IA Rural NORM N=14
1	Physical Environment	Environmental quality	16		41
2	Health Factors		96		54
2a	Clinical Care	Access to care / Quality of Care	99		64
2b	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	87		50
3	Health Outcomes		37		59
3a	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	87		52
3b	Morbidity	Quality of life	4		49
3c	Mortality	Length of life	68		62
<a href="http://www.countyhealthrankings.org">http://www.countyhealthrankings.org</a> , released 2015					
Iowa Rural Norm N=14 includes the following counties: Page, Fremont, Ida, Sac, Davis, Appanoose, Marion, Poweshiek, Tama, Madison, Ringgold, Carroll, Lucas and Clayton					

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

**Tab 1 Demographic Profile**

Tab		Health Indicator	Davis County	Trend	State of Iowa	Iowa Rural Norm (14)	Source
1a	a	Population, 2014 Estimate	8,781		3,107,126	14,153	People Quick Facts
1a	b	Population, % Change - April 1, 2010 to July 1, 2014	0.3%		2.0%	-1.7%	People Quick Facts
1a	c	Population, 2010	8,753		3,046,355	14,364	People Quick Facts
1a	d	Persons Under 5 years, Percent, 2014	8.0%		6.3%	6.0%	People Quick Facts
1a	e	Persons Under 18 years, Percent, 2014	28.9%		23.4%	23.4%	People Quick Facts
1a	f	Persons 65 Years and Over, Percent, 2014	17.5%		15.8%	20.2%	People Quick Facts
1a	g	Female Persons, Percent, 2014	50.6%		50.3%	50.3%	People Quick Facts
1a	h	White Alone, Percent, 2014	98.3%		92.1%	96.6%	People Quick Facts
1a	i	Black or African American Alone, Percent, 2014	0.2%		3.4%	0.7%	People Quick Facts
1a	j	Hispanic or Latino, Percent, 2014	1.2%		5.6%	2.5%	People Quick Facts
1a	k	Foreign Born Persons, Percent, 2009-2013	0.8%		4.5%	1.8%	People Quick Facts
1a	l	Language Other than English Spoken at Home, Pct Age 5+, 2009-2013	14.4%		7.2%	5.2%	People Quick Facts
1a	m	Living in Same House 1 Year & Over, Percent, 2009-2013	89.3%		84.8%	87.5%	People Quick Facts

**Tab 1 Demographic Profile**

Tab		Health Indicator	Davis County	Trend	State of Iowa	Iowa Rural Norm (14)	Source
1b	a	Veterans, 2009-2013	717		226,175	1,173	People Quick Facts
1b	b	Persons per Square Mile, 2010	17.4		54.5	25.5	Geography Quick Facts
1b	c	Children in Single-Parent Households, 2015	20.0%		29.0%	25.9%	County Health Rankings
1b	d	Poverty Levels, 2011	16.8%		12.7%	12.7%	Iowa Health Fact Book
1b	e	Limited Access to Healthy Foods, 2015	5.0%		6.0%	5.9%	County Health Rankings
1b	f	People 65+ with Low Access to a Grocery Store, 2010	2.3%		3.6%	3.3%	U.S. Department of Agriculture - Food Environment Atlas
1b	g	Voter Turnout, 2012	57.2%		53.3%	53.6%	Iowa Secretary of State

**Tab 2 Economic Profiles**

Tab	Health Indicator	Davis County	Trend	State of Iowa	Iowa Rural Norm (14)	Source
2	a Per Capita Money Income in Past 12 Months (2013 dollars), 2009-2013	\$22,210		\$27,027	\$24,657	People Quick Facts
2	b Housing Units in Multi-Unit Structures, Percent, 2009-2013	6.4%		18.4%	10.5%	People Quick Facts
2	c Persons per Household, 2009-2013	2.8		2.4	2.4	People Quick Facts
2	d Severe Housing Problems, 2015	14.0%		12.0%	10.6%	County Health Rankings
2	e Retail Sales per Capita, 2007	\$8,351		\$13,172	\$10,006	Business Quick Facts
2	f Total Number of Firms, 2007	848		259,931	1,421	Business Quick Facts
2	g Unemployment, 2015	5.8%		4.6%	4.8%	County Health Rankings
2	h Child Food Insecurity Rate, 2013	10.7%		12.6%	12.4%	Feeding America
2	i Grocery stores / 1,000 pop, 2012	0.2		0.3	0.3	U.S. Department of Agriculture - Food Environment Atlas
2	j Low-Income and Low Access to a Grocery Store, 2010	2.3%		3.6%	3.3%	U.S. Department of Agriculture - Food Environment Atlas
2	k SNAP participants (% eligible pop), 2010*	88.0%		88.0%	88.0%	U.S. Department of Agriculture - Food Environment Atlas
2	l Mean Travel Time to Work (Minutes), Workers Age 16+, 2009-2013	22.8		18.8	19.8	People Quick Facts
2	m Long Commute - Driving Alone, 2009-2013	34.0%		19.0%	24.9%	County Health Rankings

**Tab 3 Public Schools Health Delivery Profile**

Currently school districts are providing on site primary health screenings and basic care.

Tab	Health Indicator	Davis County	Trend	State of Iowa	Iowa Rural Norm (14)	Source
3	a Students Eligible for Free Lunch (%), 2010	33.2%		30.0%	29.4%	U.S. Department of Agriculture - Food Environment Atlas
3	b % Eligible for Free or Reduced-Price Lunch, Davis County Community High School, 2013-2014	39.3%		NA	NA	IA Department of Education
3	c % Eligible for Free or Reduced-Price Lunch, Davis County Elementary, 2013-2014	43.5%		NA	NA	IA Department of Education
3	d % Eligible for Free or Reduced-Price Lunch, Davis County MiddleSchool, 2013-2014	47.3%		NA	NA	IA Department of Education
3	e 4-Year High School Graduation Rates, 2011-2012	90		30,357	145	Iowa Health Fact Book
3	f Bachelor's Degree or Higher, Percent of Persons Age 25+, 2009-2013	16.4%		25.7%	18.7%	People Quick Facts

**Tab 3 Public Schools Health Delivery Profile**

#	Indicators	Davis County Community School District
1	Number of Public School Nurses	1
2	School Wellness Plan in Place (Active)	YES
3	VISION: Number Screened / Referred to Prof / Seen by Professional	1287 / With reduced staffing this year, we are in the process of reviewing students that need to be referred to a professional
4	HEARING: Number Screened / Referred to Prof / Seen by Professional	Yes, services provided through AEA (they do screenings and follow-up letters to parents)
5	ORAL HEALTH: Number Screened / Referred to Prof / Seen by Professional	No, the school cooperates with K and 9th grade school requirements through Lee County Health Department
6	SCOLIOSIS: Screened / Referred to Prof / Seen by Professional	No
7	Students Served with No Identified Chronic Health Concerns	1083
8	Tdap Vaccine Provided to Children Age 10-18	195
9	School has a Suicide Prevention Program	Yes
10	Students Served with Identified Chronic Health Concerns	204
11	Compliance on Required Vaccinations	100%
13	Free and Reduced-Price Lunch	40%

**TAB 4 Maternal and Infant Health Profile**

Tracking maternal and infant care patterns are vital in understanding the foundation of family health.

Tab		Health Indicator	Davis County	Trend	State of Iowa	Iowa Rural Norm (14)	Source
4	a	Mothers Who Began Prenatal Care in First Trimester, 2010-2011	160		62,857	253	Iowa Health Fact Book
4	b	Annual Birth Outcome % Preterm, 2014	5.3%		7.3%	8.3%	Iowa Department of Health and Environment
4	c	Low Birth Weight (<2500 Grams), 2010-2011	13		NA	21	Iowa Health Fact Book
4	d	Mothers Who Smoked During Pregnancy, 2010-2011	33		12,398	62	Iowa Health Fact Book
4	e	Mothers under Age 20, 2010-2011	15		5,763	28	Iowa Health Fact Book
4	f	Out-of-Wedlock Births, 2010-2011	41		26,106	104	Iowa Health Fact Book
4	g	Average Monthly WIC Participation per 1,000 Pop, 2014	55		2,318	NA	American Home Finding Association

**TAB 4 Maternal and Infant Health Profile**

Tab		Vital Statistics	Davis County	Trend	State of Iowa
4	a	Total Live Births, 2006	138		40,592
4	b	Total Live Births, 2007	136		40,835
4	c	Total Live Births, 2008	143		40,221
4	d	Total Live Births, 2009	142		39,662
4	e	Total Live Births, 2010	142		38,514
4	f	Total Live Births, 2011	134		38,204

**TAB 5 Hospitalization/Provider Profile**

Understanding provider access and disease patterns are fundamental in healthcare delivery. Listed below are several vital county statistics.

Tab		Health Indicator	Davis County	Trend	State of Iowa	Iowa Rural Norm (14)	Source
5	a	Primary Care Physicians per 1, 2015	2,172		1,375	1,987	County Health Rankings
5	b	Preventable Hospital Stays, 2015	58		56	65	County Health Rankings
5	c	Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)	66.0%		76.0%	74.3%	CMS Hospital Compare, 1/1/14-12/31/14
5	d	Patients Who Reported Yes, They Would Definitely Recommend the Hospital	72.0%		75.0%	72.6%	CMS Hospital Compare, 1/1/14-12/31/14
5	e	Average Time Patients Spent in the Emergency Department Before They Were Seen by a Healthcare Professional	NA		26	29	CMS Hospital Compare, 1/1/14-12/31/14
5	f	Medicare Hospital Spending per Patient (Medicare Spending per Beneficiary)	NA		\$0.92	\$0.85	CMS Hospital Compare, 1/1/14-12/31/14
<i>Note: CMS Hospital Compare data includes 16 hospitals within our Iowa Rural Norm (14) counties.</i>							

**TAB 5 Hospitalization/Provider Profile**

#	IA Hospital Association PO103	Davis County, IA IP			TREND
		FFY2012	FFY2013	FFY2014	
1	Total Discharges	785	717	827	
2	Total IP Discharges-Age 0-17 Ped	108	99	128	
3	Total IP Discharges-Age 18-44	122	124	165	
4	Total IP Discharges-Age 45-64	180	181	182	
5	Total IP Discharges-Age 65-74	150	116	126	
6	Total IP Discharges-Age 75+	225	197	226	
7	Psychiatric	NA	NA	NA	
8	Obstetric	NA	NA	NA	
9	Surgical %	NA	NA	NA	
#	IA Hospital Association PO103	Davis County Hospital			TREND
		FFY2012	FFY2013	FFY2014	
1	Total Discharges	309	199	214	
2	Total IP Discharges-Age 0-17 Ped	22	16	5	
3	Total IP Discharges-Age 18-44	27	19	21	
4	Total IP Discharges-Age 45-64	56	41	40	
5	Total IP Discharges-Age 65-74	64	34	45	
6	Total IP Discharges-Age 75+	140	89	103	
7	Psychiatric	NA	NA	NA	
8	Obstetric	NA	NA	NA	
9	Surgical %	NA	NA	NA	

**TAB 6 Social & Rehab Services Profile**

Behavioral health care provide another important indicator of community health status.

Tab		Health Indicator	Davis County	Trend	State of Iowa	Iowa Rural Norm (14)	Source
6	a	Depression: Medicare Population, 2012	11.6%		14.9%	14.0%	Centers for Medicare and Medicaid Services
6	b	Alcohol-Impaired Driving Deaths, 2015 (3 of 6 Total Driving Deaths)	50.0%		23.0%	22.9%	County Health Rankings
6	d	Poor Mental Health Days, 2015	2.5		2.6	2.7	County Health Rankings

**TAB 7 Health Risk Profiles**

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

Tab		Health Indicator	Davis County	Trend	State of Iowa	Iowa Rural Norm (14)	Source
7a	a	Adult Obesity, 2015	31.0%		30.0%	31.0%	County Health Rankings
7a	b	Adult Smoking, 2015	23.0%		18.0%	19.0%	County Health Rankings
7a	c	Excessive Drinking, 2015	19.0%		20.0%	19.8%	County Health Rankings
7a	f	Physical Inactivity, 2015	28.0%		24.0%	26.4%	County Health Rankings
7a	g	Poor Physical Health Days, 2015	2.2		2.8	2.9	County Health Rankings
7a	h	Sexually Transmitted Infections, 2015	242		370	226	County Health Rankings

**TAB 7 Health Risk Profiles**

Tab		Health Indicator	Davis County	Trend	State of Iowa	Iowa Rural Norm (14)	Source
7b	a	Hypertension: Medicare Population, 2012	46.0%		51.2%	52.8%	Centers for Medicare and Medicaid Services
7b	b	Hyperlipidemia: Medicare Population, 2012	33.5%		40.2%	41.0%	Centers for Medicare and Medicaid Services
7b	c	Heart Failure: Medicare Population, 2012	16.5%		12.8%	14.0%	Centers for Medicare and Medicaid Services
7b	d	Chronic Kidney Disease: Medicare Population, 2012	12.1%		13.4%	13.7%	Centers for Medicare and Medicaid Services
7b	e	COPD: Medicare Population, 2012	9.0%		10.5%	11.0%	Centers for Medicare and Medicaid Services
7b	f	Atrial Fibrillation: Medicare Population, 2012	7.9%		8.6%	8.8%	Centers for Medicare and Medicaid Services
7b	g	Cancer: Medicare Population, 2012	6.6%		7.3%	7.4%	Centers for Medicare and Medicaid Services
7b	h	Osteoporosis: Medicare Population, 2012	4.0%		5.4%	5.9%	Centers for Medicare and Medicaid Services
7b	i	Asthma: Medicare Population, 2012	3.5%		3.5%	2.7%	Centers for Medicare and Medicaid Services
7b	j	Stroke: Medicare Population, 2012	2.8%		2.6%	2.6%	Centers for Medicare and Medicaid Services

**TAB 8 Uninsured Profiles**

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

Tab		Health Indicator	Davis County	Trend	State of Iowa	Iowa Rural Norm (14)	Source
8	a	Uninsured (Under 65), 2010	17.9%		10.7%	12.0%	Iowa Health Fact Book

**TAB 8 Uninsured Profiles**

Tab		Davis County Hospital	YR12	YR13	YR14	YR15 (7/1/14-6/30/15)	TREND
8	a	Bad Debt	\$892,189	\$968,656	\$938,414	\$639,061	
8	b	Charity Care	\$63,735	\$178,399	\$149,604	\$85,864	

**TAB 9 Mortality Profile**

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

Tab		Health Indicator	Davis County	Trend	State of Iowa	Iowa Rural Norm (14)	Source
9	a	Life Expectancy for Females, 2009	80.4		82.0	81.3	Institute for Health Metrics and Evaluation
9	b	Life Expectancy for Males, 2009	75.2		77.3	76.4	Institute for Health Metrics and Evaluation
9	c	Infant Deaths, 2007-2011	NA		998	9	Iowa Health Fact Book
9	d	Heart Disease Mortality, 2006-2010	114		35154	215	Iowa Health Fact Book
9	e	Chronic Obstructive Pulmonary Disease Mortality, 2006-2010	24		NA	46	Iowa Health Fact Book
9	f	Suicides, 2007-2011	6		1843	12	Iowa Health Fact Book

**TAB 9 Mortality Profile**

#	Causes of Death by County of Residence, Iowa Health Fact Book 2013	Trend	Davis County	%	State of Iowa	%
	All Causes		407	100.0%	138,412	100.0%
1	Heart Disease	2.6%	114	28.0%	35,154	25.4%
2	All Cancer	-4.3%	76	18.7%	31,766	23.0%
3	Pneumonia/Influenza	5.0%	31	7.6%	3,569	2.6%
4	Stroke*	5.9%	28	6.9%	1,422	1.0%
5	Chronic Obstructive Pulmonary Disease*	4.6%	24	5.9%	1,824	1.3%
6	Accidents and Adverse Effects	-0.6%	16	3.9%	6,233	4.5%
7	Diabetes Mellitus	1.0%	15	3.7%	3,770	2.7%
8	Lung Cancer	-2.7%	15	3.7%	8,838	6.4%
9	Alzheimer's Disease	-2.1%	10	2.5%	6,331	4.6%
10	All Transportation	0.4%	8	2.0%	2,153	1.6%
11	Motor Vehicle Traffic	0.6%	8	2.0%	1,921	1.4%
12	Falls	0.3%	7	1.7%	2,007	1.5%
13	Firearms	0.8%	6	1.5%	1,002	0.7%
14	Suicide	0.1%	6	1.5%	1,843	1.3%

**TAB 10 Preventive Health Profile**

The following table reflects future health of county. This information also is an indicator of community awareness of preventative measures.

Tab	Health Indicator	Davis County	Trend	State of Iowa	Iowa Rural Norm (14)	Source
10 a	Access to Exercise Opportunities, 2015	50.0%		79.0%	69.9%	County Health Rankings
10 b	2-Year-Old Coverage of Individual Vaccines and Selected Vaccination Series, 2012	45.0%		71.0%	67.0%	Iowa Immunization Program
10 d	Diabetic Monitoring, 2015	84.0%		89.0%	88.4%	County Health Rankings
10 e	Mammography Screening, 2015	50.0%		66.4%	62.9%	County Health Rankings
10 f	Limited Access to Healthy Food, 2015	5.0%		6.0%	5.9%	County Health Rankings
10 g	Percent Annual Check-Up Visit with PCP	NA		NA	NA	TBD
10 h	Percent Annual Check-Up Visit with Dentist	NA		NA	NA	TBD
10 i	Percent Annual Check-Up Visit with Eye Doctor	NA		NA	NA	TBD

## Primary Research Findings

In late September of 2015, Davis County Hospital sponsored/conducted primary research to area residents residing in their primary service area. 1001 randomly selected Davis County households were sent a confidential CHNA survey, with 357 replies (35.7% response rate).

DCH CHNA Round #2 Sample by PSA Zips					
#	Zips	County	Sampled	Returns	%
1	Bloomfield, IA - 52537	DAVIS	770	258	33.5%
2	Drakesville, IA- 52552	DAVIS	111	19	17.1%
3	Floris, IA- 52560	DAVIS	65	9	13.8%
4	Pulaski, IA - 52584	DAVIS	55	8	14.5%
5	Other Zips OOA		0	13	NA
6	No Zip Given		0	50	NA
	DCH PSA Totals		1001	357	35.7%

Following are key question summaries revealing public feelings toward health delivery:

Community Healthcare Needs Assessment 2015				
In general, how would you rate the overall quality of the healthcare delivered to your community?	CHNA NORM (25) N=9836	Davis Co PSA N=280	Davis Co PSA N=357	Trend
<b>Top 2 Boxes</b>	<b>78.5%</b>	<b>65.1%</b>	<b>74.5%</b>	
Very Good	28.7%	18.2%	22.7%	
Good	49.8%	46.9%	51.8%	
Fair	17.6%	26.7%	22.1%	
Poor	3.1%	7.0%	2.2%	
Very Poor	0.8%	1.2%	1.1%	
<b>Totals</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	

## Primary Researching Findings

Community Health Needs Assessment Full Survey	Poor / Very Poor %			
How would you rate of the following health services?	CHNA NORM (25) N=9836	Davis CO 2013 N=280	Davis CO 2015 N=357	Trend
Ambulance Service	3.5%	3.2%	2.3%	
Child Care	9.9%	12.0%	6.1%	
Chiropractor	4.9%	7.0%	4.7%	
Dentists	8.4%	14.0%	16.7%	
Emergency Room	10.9%	10.0%	6.3%	
Eye Doctor / Optometrist	5.8%	15.7%	14.3%	
Family Planning Services	16.7%	31.1%	32.3%	
Home Health	7.3%	14.2%	10.3%	
Hospice	5.3%	5.9%	3.0%	
Hospital Inpatient Services	5.9%	7.0%	3.1%	
Mental Health Services	35.0%	58.8%	61.1%	
Nursing Home	13.8%	14.8%	13.3%	
Outpatient Services	4.5%	4.6%	3.2%	
Pharmacy	2.4%	3.7%	1.4%	
Primary Care Doctors	4.8%	5.8%	3.9%	
Public Health Department	6.4%	10.7%	6.5%	
School Nurse	7.9%	11.3%	5.0%	
Specialist Physician care	11.0%	15.3%	5.7%	

*\*Norm is composed of 25 CHNA community surveys from IA, KS and MO.*

## Primary Research Findings

Community Health Needs Assessment 2015				
Over the past 2 years, did you or your household receive health care services outside of your county?	CHNA NORM (25) N=9836	Davis Co PSA N=280	Davis Co PSA N=357	Trend
Yes	59.8%	74.7%	81.4%	6.7%
No	40.2%	25.3%	18.6%	-6.7%
<b>Totals</b>	<b>100%</b>	<b>100.0%</b>	<b>100.0%</b>	

## Primary Research Findings

Community Healthcare Needs Assessment 2015	Major Problem %			
In your opinion, how much of a problem are the following causes of diseases or disability in your community?	CHNA NORM (25) N=9836	Davis 2013 PSA N=280	Davis 2015 PSA N=357	Trend
Cancer	53.0%	68.1%	59.8%	Red
Diabetes	55.1%	58.5%	59.9%	Red
Substance Abuse	58.4%	46.1%	51.2%	Red
Heart Disease	46.8%	50.5%	54.8%	Red
Sexually Transmitted Diseases	21.0%	6.8%	9.4%	Green
Mental Disorders	38.3%	31.9%	50.7%	Red
Obesity	61.6%	62.0%	62.9%	Red
Pneumonia / Flu	17.3%	22.1%	16.3%	Yellow
Respiratory Disease	26.6%	24.7%	23.8%	Yellow
Stroke	22.5%	23.8%	24.8%	Yellow
Suicide	16.8%	22.7%	24.4%	Yellow
Trauma	14.8%	10.5%	15.6%	Yellow

*\*Norm is composed of 25 CHNA community surveys from IA, KS and MO.*

## Primary Research Findings

Community Healthcare Needs Assessment 2015	Poor / Very Poor %			
How well do you feel our local health care providers are doing in addressing the health needs of the following age groups?	CHNA NORM (25) N=9836	Davis 2013 PSA N=280	Davis 2015 PSA N=273	Trend
Infants	8.8%	23.8%	13.6%	Red
Age 1 - 12	7.0%	16.9%	9.3%	Yellow
Age 13 -17	6.5%	10.6%	7.1%	Yellow
Age 18 - 44	6.1%	7.4%	6.3%	Yellow
Age 45 - 64	6.8%	7.7%	5.3%	Yellow
Age 65 - 84	10.7%	9.3%	10.8%	Red
Over 85	12.9%	15.5%	10.0%	Red

*\*Norm is composed of 25 CHNA community surveys from IA, KS and MO.*

### Primary Research Findings

Does our community need any additional healthcare providers?	CHNA NORM (25) N=9836	Davis Co PSA N=280	Davis Co PSA N=357	Trend
Yes (See detail Section V)	63.2%	71.1%	76.2%	5.1%
No	36.9%	28.9%	23.8%	-5.1%
<b>Totals</b>	<b>100%</b>	<b>100.0%</b>	<b>100.0%</b>	

### Primary Research Findings

In general, how would you best describe your health? (Choose one)	CHNA NORM (25) N=9836	Davis Co PSA N=280	Davis Co PSA N=357	Trend
<b>Top 2 Boxes</b>	<b>81.4%</b>	<b>75.8%</b>	<b>79.0%</b>	
Very Good	24.0%	18.5%	18.7%	
Good	57.5%	57.3%	60.3%	
Fair	15.8%	21.4%	19.4%	
Poor	2.2%	2.0%	1.3%	
Very Poor	0.6%	0.8%	0.3%	
<b>Totals</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	

*\*Norm is composed of 25 CHNA community surveys from IA, KS and MO.*

### Primary Research Findings

Community Healthcare Needs Assessment 2015				
Compared to a year ago, how would you rate your overall health in general now?	CHNA NORM (25) N=9836	Davis Co PSA N=280	Davis Co PSA N=357	Trend
Much better than a year ago	11.9%	7.3%	13.7%	
About the same	83.8%	87.9%	83.1%	
Much Worse than a year ago	4.4%	4.8%	3.2%	
<b>Totals</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	

### Primary Research Findings

Community Healthcare Needs Assessment 2015				
Does your household have a provider you use for Primary Care?	CHNA NORM (25) N=9836	Davis CO PSA N=280	Davis Co PSA N=357	Trend
Yes (See detail Section V)	88.7%	84.6%	86.5%	1.9%
No	11.3%	15.4%	13.5%	-1.9%
<i>Totals</i>	100%	100.0%	100.0%	

### Primary Research Findings

Community Healthcare Needs Assessment 2015				
Have you had a physical in the past 12 months?	CHNA NORM (25) N=9836	Davis Co PSA N=280	Davis Co PSA N=357	Trend
Yes	76.3%	62.1%	74.1%	12.0%
No	23.7%	37.9%	25.9%	-12.0%
<i>Totals</i>	100%	100.0%	100.0%	

### Primary Research Findings

Community Healthcare Needs Assessment 2015				
Do you follow these health practices?	CHNA NORM (25) N=9836	Davis Co PSA N=280	Davis Co PSA N=357	Trend
If over 50, have you had a colonoscopy?	68.3%	58.4%	63.1%	
If male over 50, do you have annual prostate exams?	59.0%	45.7%	47.6%	
If female over 40, do you have annual mammograms?	76.3%	60.4%	75.0%	
If female, do you have a pap smear every other year?	68.0%	52.2%	67.3%	
Do you get 2.5 hours a week of moderately intense physical activity?	61.0%	57.3%	60.6%	

**From this survey, the following conclusions can be made in Davis County:**

- 74.5% of Davis County residents would rate the overall quality of healthcare delivery in Davis County as either Very Good or Good and is increasing.
- Davis County residents are happy with the following services: Ambulance Service, Chiropractor, Hospice, Hospital Inpatient Services, Outpatient Services, Pharmacy, Primary Care Doctors and School Nurse.
- Davis County residents are dissatisfied with the following services: Dentists, Eye Doctor/Optomtrist, Family Planning Services, Home Health, Mental Health Services and Nursing Home.
- The percent of Davis County residents who have received healthcare services outside of Davis County over the past two years is increasing.
- Davis County residents perceive the following causes of disease or disability as a problem in Davis County: Cancer, Diabetes, Substance Abuse, Heart Disease, Mental Disorders and Obesity.
- Davis County residents do not perceive Sexually Transmitted Diseases as a problem cause of disease or disability in Davis County.
- Local Davis County providers are perceived as not addressing the needs of the following age groups: Infants, Age 65-84 and Over 85.
- The need for additional healthcare providers in Davis County is increasing.
- 79% of Davis County residents would describe their health as either Very Good or Good and is increasing.
- 13.7% of Davis County residents would rate their overall health as much better than a year ago and is increasing.
- 86.5% of Davis County residents have a provider they use for Primary Care and is increasing.
- 74.1% of Davis County residents have had a physical in the past 12 months and is increasing.
- The percent of females in Davis County over 40 getting annual mammograms and females having a pap smear every other year are increasing.

# **IV. Inventory of Community Health Resources**

---

[VVV Consultants LLC]

<b>Inventory of Health Services Davis County, IA</b>				
<b>Cat</b>	<b>HC Services Offered in County: Yes / No</b>	<b>Hospital</b>	<b>Health Dept</b>	<b>Other</b>
Clinic	Primary Care			
Hosp	Alzheimer Center	no	no	
Hosp	Ambulatory Surgery Centers	no	no	
Hosp	Arthritis Treatment Center (We offer rheumatology clinic services, but it is not a stand alone Arthritis Treatment Center)	no	no	
Hosp	Bariatric/Weight Control Services	no	no	
Hosp	Birthing/LDR/LDRP Room	no	no	
Hosp	Breast Cancer (We offer mammography)	yes	no	
Hosp	Burn Care	no	no	
Hosp	Cardiac Rehabilitation	yes	no	
Hosp	Cardiac Surgery	no	no	
Hosp	Cardiology Services	yes	no	
Hosp	Case Management	yes	yes	
Hosp	Chaplaincy/Pastoral Care Services	no	no	
Hosp	Chemotherapy	no	no	
Hosp	Colonoscopy	yes	no	
Hosp	Crisis Prevention (Served by Wapello County)	no	no	yes
Hosp	CT Scanner	yes	no	
Hosp	Diagnostic Radioisotope Facility	yes	no	
Hosp	Diagnostic/Invasive Catheterization	no	no	
Hosp	Electron Beam Computed Tomography (EBCT)	no	no	
Hosp	Enrollment Assistance Services	yes	no	
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)	no	no	
Hosp	Fertility Clinic	no	no	
Hosp	FullField Digital Mammography (FFDM)	yes	no	
Hosp	Genetic Testing/Counseling	no	no	
Hosp	Geriatric Services	yes	yes	
Hosp	Heart	yes	no	
Hosp	Hemodialysis	no	no	
Hosp	HIV/AIDS Services	no	no	
Hosp	Image-Guided Radiation Therapy (IGRT)	no	no	
Hosp	Inpatient Acute Care - Hospital Services	yes	no	
Hosp	Intensity-Modulated Radiation Therapy (IMRT) 161	no	no	
Hosp	Intensive Care Unit	no	no	
Hosp	Intermediate Care Unit	no	no	
Hosp	Interventional Cardiac Catheterization	no	no	
Hosp	Isolation room	yes	no	
Hosp	Kidney	no	no	
Hosp	Liver	no	no	
Hosp	Lung	no	no	
Hosp	MagneticResonance Imaging (MRI)	yes	no	
Hosp	Mammograms	yes	no	
Hosp	Mobile Health Services	yes	no	
Hosp	Multislice Spiral Computed Tomography (<64 slice CT)	yes	no	
Hosp	Multislice Spiral Computed Tomography (<64+ slice CT)	no	no	
Hosp	Neonatal (We do Labor and Delivery and local physicians follow-up)	no	no	
Hosp	Neurological services	no	no	

<b>Inventory of Health Services Davis County, IA</b>				
<b>Cat</b>	<b>HC Services Offered in County: Yes / No</b>	<b>Hospital</b>	<b>Health Dept</b>	<b>Other</b>
Hosp	Obstetrics	no	no	
Hosp	Occupational Health Services	yes	no	
Hosp	Oncology Services	no	no	
Hosp	Orthopedic Services	yes	no	
Hosp	Outpatient Surgery	yes	no	
Hosp	Pain Management	yes	yes	
Hosp	Palliative Care Program (Offered by Public Health and visiting agencies)	no	yes	yes
Hosp	Pediatric (Family Practice)	yes	yes	
Hosp	Physical Rehabilitation (PT available through the county agencies at home)	yes	no	yes
Hosp	Positron Emission Tomography (PET)	no	no	
Hosp	Positron Emission Tomography/CT (PET/CT)	no	no	
Hosp	Psychiatric Services	no	no	
Hosp	Radiology, Diagnostic	yes	no	
Hosp	Radiology, Therapeutic	no	no	
Hosp	Reproductive Health (Public Health in Davis County works with Family Planning in Ottumwa)	no	yes	
Hosp	Robotic Surgery	no	no	
Hosp	Shaped Beam Radiation System 161	no	no	
Hosp	Single Photon Emission Computerized Tomography	no	no	
Hosp	Sleep Center	yes	no	
Hosp	Social Work Services	no	yes	
Hosp	Sports Medicine	no	no	
Hosp	Stereotactic Radiosurgery	no	no	
Hosp	Swing Bed Services	yes	no	
Hosp	Transplant Services	no	no	
Hosp	Trauma Center -Level IV	no	no	
Hosp	Ultrasound	yes	no	
Hosp	Women's Health Services	yes	no	
Hosp	Wound Care (PT provides and Public Health has the ability to provide)	yes	yes	
SR	Adult Day Care Program	no	no	yes
SR	Assisted Living	no	no	yes
SR	Home Health Services	no	no	yes
SR	Hospice	yes	no	yes
SR	Long-Term Care	no	no	
SR	Nursing Home Services	no	no	yes
SR	Retirement Housing	no	no	yes
SR	Skilled Nursing Care	yes	no	yes
ER	Emergency Services	yes	no	
ER	Urgent Care Center	no	no	
ER	Ambulance Services	yes	no	
SERV	Alcoholism-Drug Abuse	no	no	
SERV	Blood Donor Center	no	no	yes
SERV	Chiropractic Services	no	no	yes
SERV	Complementary Medicine Services	no	no	
SERV	Dental Services	yes	no	

<b>Inventory of Health Services Davis County, IA</b>				
<b>Cat</b>	<b>HC Services Offered in County: Yes / No</b>	<b>Hospital</b>	<b>Health Dept</b>	<b>Other</b>
SERV	Fitness Center	yes	no	
SERV	Health Education Classes	yes	no	
SERV	Health Fair (Annual)	yes	no	
SERV	Health Information Center	no	no	
SERV	Health Screenings	yes	yes	
SERV	Meals on Wheels	yes	yes	
SERV	Nutrition Programs	yes	yes	
SERV	Patient Education Center	no	no	
SERV	Support Groups	no	no	yes
SERV	Teen Outreach Services	no	no	
SERV	Tobacco Treatment/Cessation Program	no	no	yes
SERV	Transportation to Health Facilities	no	no	yes
SERV	Wellness Program (The hospital supports local businesses with health fairs and lab screenings annually)	yes	no	yes

<b>Providers Delivering Care in Davis County, IA</b>			
<b>Davis County Hospital Primary Service Area</b>			
# of FTE Providers working in county	FTE Physicians		FTE Allied Staff
	PSA Based DRs	Visting DRs *	PSA Based PA / NP
<b>Primary Care:</b>			
Family Practice	4.0		1.0
Internal Medicine/Geriatician	1.0		
Obstetrics/Gynecology			
Pediatrics	1.0		
<b>Medicine Specialists:</b>			
Allergy/Immunology	1.0	0.3	
Cardiology		0.3	
Dermatology		1.0	
Endocrinology			
Gastroenterology			
Oncology/Radiology			
Infectious Diseases			
Nephrology			
Neurology			
Psychiatry			
Pulmonary			
Rheumatology		0.5	
<b>Surgery Specialists:</b>			
General Surgery/Colon/Oral	1.0		
Neurosurgery			
Ophthalmology			
Orthopedics		1.0	
Otolaryngology (ENT)		0.3	
Plastic/Reconstructive			
Thoracic/Cardiovascular/Vascular			
Urology			
<b>Hospital Based:</b>			
Anesthesia/Pain			8.0
Emergency			2.0
Radiology		3.0	
Pathology		2.0	
Hospitalist			
Neonatal/Perinatal			
Physical Medicine/Rehab			
Occ Medicine			
Podiatry	1.0		
Chiropractor	3.0		
Optometrist	1.0		
Dentist	2.0		
<b>TOTALS</b>	<b>15.0</b>	<b>8.4</b>	<b>11.0</b>

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

## Visiting Specialists to Davis County, IA

<i>Specialty</i>	<i>Physician Name/Group</i>	<i>Office Location (City/State)</i>	<i>Schedule</i>	<i>Annual Days</i>	<i>Location of Outreach Clinic</i>
Allergy	Lary Ciesemier, D.O.	Kirkville, Mo	2nd & 4th Friday	24	Davis County Hospital
Cardiology	Mudassir Malik, M.D.	Ottumwa, Iowa	1st & 3rd Thrus.	24	Davis County Hospital
Dermatology	Lloyd Cleaver, D.O.	Kirkville, Mo	1st Monday	12	Davis County Hospital
Dermatology	Linda Shilling, ARNP		2nd & 4th Monday	24	Davis County Hospital
Orthopedic	Shehada Homedan, M.D.	Davis County Hospital	Every Wednesday	54	Davis County Hospital
Rheumatology	Robert Jackson, D.O.	Kirkville, Mo	Every Tuesday	54	Davis County Hospital
Ear, Nose & Throat	Kelly Burchette, DO	Kirkville, Mo	2nd Thursday	12	Davis County Hospital

# Davis County, Iowa Health Care Area Service Directory

## Emergency Numbers

Police/Sheriff	911
Fire	911
Ambulance	911

## Non-Emergency Numbers

Davis County Sheriff	641-664-2385
Davis County Hospital EMS	641-664-2145

## Municipal Non-Emergency Numbers

	<u>Police/Sheriff</u>	<u>Fire</u>
Bloomfield, IA	641-664-2385	641-664-1147
Ottumwa, IA	641-684-4350	641-683-0666

## QUICK REFERENCE PHONE GUIDE

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

# General Online Healthcare Resources

## Doctors and Dentists—General

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

## Hospitals and Clinics—General

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

## Doctors and Dentists—Specialists

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

## Other Healthcare Providers

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

## Hospitals and Clinics—Specialized

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

## Other Healthcare Facilities and Services

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

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

### **Child Development**

Amanda Tillman  
Child Development Specialist  
200 N. East St.  
Bloomfield, IA 52537  
6416641735

Karen Lauer  
Davis County Day Care  
200 N East Street  
Bloomfield, IA 52537  
6416641735

Molly Moore  
Parents As Teachers  
300 East South  
Bloomfield, IA 52537  
6416642916

### **Chiropractors DC**

Lloyd A Mietzner DC  
Doctor Who Llc  
308 N Washington St  
Bloomfield, IA 52537  
6416643345

Rich Fetcho DC  
Fetcho Family Chiropractic  
105 E Franklin St # 1  
Bloomfield, IA 52537  
6416642423

J.L. Stogdill  
Stogdill Chiropractic  
102 W. Jefferson St.  
Bloomfield, IA 52537  
6416641749

### **Church**

Jack Knox  
Bloomfield Christian Church  
107 N Davis  
Bloomfield, IA 52537  
6416642181

Darrell Zook  
Bloomfield Mennonite Church  
22280 Mallard Ave  
Bloomfield, IA 52537  
6416641289

Tim Frasher  
Bloomfield Methodist Church  
E North Street  
Bloomfield, IA 52537  
6416643206

Church Of The Open Bible  
206 E Chestnut  
Bloomfield, IA 52537  
6416643210

Dunville Baptist Church  
15356 Nuthatch Ave  
Bloomfield, IA 52537  
6414593301

First Baptist Church  
401 Crestview Circle  
Bloomfield, IA 52537  
6416642240

Good Shephard Lutheran Church  
19419 Lilac Avenue  
Bloomfield, IA 52537  
6416643242

Grace Point Church Of The Nazarene  
20444 Hwy 2  
Bloomfield, IA 52537  
6416642585

Mark Baptist Church  
16011 276th Street  
Bloomfield, IA 52537  
6419293233

Midway Calvaray Baptist Church  
22605 138 Th Street  
Bloomfield, IA 52537  
6414593324

St Mary Magdalen Catholic Church  
108 Weaver Road  
Bloomfield, IA 52537  
6416642553

Kramer Smith  
Stiles Christian Church  
28286 Peach Ave  
Bloomfield, IA 52537  
6416753456

Tabernacle Baptist Church  
106 N Buckeye  
Bloomfield, IA 52537  
6416642255

Word Of Life Fellowship  
22586 195th Street  
Bloomfield, IA 52537  
6416641745

Darell Zook  
Pulaski Menonite Church  
28026 270th Street  
Pulaski, IA 52584  
6416753845

**Clinics - Physicians**

Amanda McKinley  
Bloomfield Anesthesiology Grp  
509 N Madison St

Bloomfield, IA 52537  
6416642145

Dustin Bozwell  
Bloomfield Anesthesiology Grp  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Jay R Brewer  
Bloomfield Anesthesiology Grp  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Jessica K Henderson  
Bloomfield Anesthesiology Grp  
505 W Jefferson St  
Bloomfield, IA 52537  
6416642357

Melissa Mahon  
Bloomfield Anesthesiology Grp  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Sarah Mullahy  
Bloomfield Anesthesiology Grp  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Valerie K Mc Kinley  
Bloomfield Anesthesiology Grp  
505 W Jefferson St  
Bloomfield, IA 52537  
6416642357

Margaret Scott  
Bloomfield Anesthesiology Grp  
Po Box 54  
Bloomfield, IA 52537  
6416643602

Marty J Owen  
Bloomfield Anesthesiology Grp  
Po Box 54  
Bloomfield, IA 52537  
6416643602

Jill Ferrell  
Bloomfield Anesthesiology Grp  
Po Box 54  
Bloomfield, IA 52537  
6416643602

Beverly Oliver ARNP  
Davis County Hospital  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Mary Graeff Md  
Davis County Hospital  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Trina Settles Do  
Davis County Hospital  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Lawrence L Ciesmier Do  
Davis County Hospital  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Linda Schilling  
Davis County Hospital  
105 E Locust St  
Bloomfield, IA 52537  
6416643602

Ron Graeff Md  
Davis County Hospital  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Robert Floyd Do  
Davis County Hospital  
507 N Madison St  
Bloomfield, IA 52537  
6416642145

Robert Jackson Do  
Davis County Hospital  
507 N Madison St  
Bloomfield, IA 52537  
6416642145

Donald R Wirtanen Do  
202 N Madison St  
Bloomfield, IA 52537  
6416641400

Donald Wirtanen Do  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Jake Settles Do  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Kelly Burchett Do  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Lary Ciesemier Do  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Lloyd Cleaver Do  
509 N Madison St  
Bloomfield, IA 52537  
6416647091

Mudassir Malik Md  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

Dorothy Cline-Campbell Do  
Osteopathic Medical Ctr  
Po Box 67  
Bloomfield, IA 52537  
6416643621

Shehada Homedan Md  
509 N Madison St  
Bloomfield, IA 52537  
6416647091

Sean D Brodale Do  
The Country Doctor  
18754 Highway 63  
Bloomfield, IA 52537  
6416641799

### **Dentists**

Adam Schroyer, DDS  
Davis County Dental  
107 South Pine  
Bloomfield, IA 52537  
6416641121

Kirstina J. Gratz, Dds  
Davis County Dental  
107 South Pine  
Bloomfield, IA 52537  
6416641121

### **Fitness**

Taylor Helton  
Mutchler Rec Center  
900 E North Street  
Bloomfield, IA 52537  
6416643939

Rhonda Morton  
Perfect Touch Wellness Center  
102 E Jefferson  
Bloomfield, IA 52537  
6416641100

### **Home Health & Hospice**

Ruth Finch  
Rescare Homecare  
712 S West St # 3  
Bloomfield, IA 52537  
6416641839

### **Hospital**

Kirby Johnson  
Davis County Hospital  
509 N Madison St  
Bloomfield, IA 52537  
6416642145

### **Mental Health**

Diane Buss  
Central Point Coordinator  
100 Court Square  
Bloomfield, IA 52537  
6418951690

Paula Gordy, Lisw Llc  
101 E Franklin  
Bloomfield, IA 52537  
6418562688

**Optometrists OD**

Thomas G Juhl OD  
505 W Jefferson St  
Bloomfield, IA 52537  
6416642325

**Podiatrists**

Susan C Warner Dpm  
505 W Jefferson St  
Bloomfield, IA 52537  
6416643667

**Public Health**

Lynn Fellingner  
Davis County Hospital Public Health  
509 N Madison  
Bloomfield, IA 52537  
6416643629

**Senior Living**

Sarah Burch  
Bloomfield Care Ctr  
800 N Davis St  
Bloomfield, IA 52537  
6416642699

Robert Shephard  
Bloomfield Senior Housing  
403 E South Street  
Bloomfield, IA 52537  
6416641819

Gloria Garner  
Mulberry Place  
11 Deborah Dr.  
Bloomfield, IA 52537  
6416642523

Dawn McCarty  
Optimae Live Services  
22425 Overland Ave  
Bloomfield, IA 52537  
6416643202

**Support Services**

Dave Schooley  
Crosslines  
307 Parkview Drive  
Bloomfield, IA 52537  
6416643974

Dianne K Knapp  
202 N Madison St  
Bloomfield, IA 52537  
6416641400

Dee Altheide  
Lords Cupboard  
107 N Davis  
Bloomfield, IA 52537  
6416642181

Barb Mulgrave  
Sieda Resource Center  
300 East South  
Bloomfield, IA 52537  
6416641911

United Way Of Central Iowa  
221 2nd St.  
Ottumwa, IA 52537  
6416821264

Diana Husted  
ADLM/Environmental Health  
12307 Hwy. 5  
Moravia, IA 525372  
9747777512

# V. Detail Exhibits

---

[VVV Consultants LLC]

---

# Patient Origin & Access

[VVV Consultants LLC]

**Drilldown Davis County Market - Inpatient Destination Summary Report  
For Jan - Dec 2014**

	TOTAL DAVIS COUNTY	Disch	%	Discharges					Inpatient Days	%	Inpatient Days				
				<18	18-44	45-64	65-74	75+			<18	18-44	45-64	65-74	75+
1	Albia, Monroe Co Hosp	7	0.85%	0	5	1	1	0	54	1.41%	0	43	6	5	0
2	Ames, Mary Greeley	1	0.12%	0	1	0	0	0	7	0.18%	0	7	0	0	0
3	Bloomfield, Davis Co Hosp	214	25.88%	5	21	40	45	103	926	24.25%	9	53	170	198	496
4	Cedar Rapids, St Luke's	3	0.36%	0	0	0	0	3	28	0.73%	0	0	0	0	28
5	Centerville, Mercy Med	21	2.54%	9	6	1	3	2	56	1.47%	22	10	4	13	7
6	Davenport, Genesis	2	0.24%	0	1	1	0	0	77	2.02%	0	59	18	0	0
7	Des Moines, IMMC	39	4.72%	7	5	8	5	14	202	5.29%	33	17	42	21	89
8	Des Moines, Mercy Med	94	11.37%	6	13	25	22	28	759	19.88%	130	115	120	163	231
9	Fairfield, Jefferson Co	12	1.45%	0	2	4	2	4	41	1.07%	0	5	9	14	13
10	Grinnell, Grinnell Reg	8	0.97%	0	0	6	2	0	22	0.58%	0	0	17	5	0
11	Iowa City, Mercy	9	1.09%	0	0	4	3	2	39	1.02%	0	0	18	8	13
12	Iowa City, U of I Hosp	121	14.63%	23	27	42	12	17	649	17.00%	195	105	198	56	95
13	Keosauqua, Van Buren Co	25	3.02%	10	9	2	1	3	50	1.31%	15	13	6	3	13
14	Mason City, Mercy Medical	2	0.24%	0	0	0	0	2	15	0.39%	0	0	0	0	15
15	Oskaloosa, Mahaska Hlt	7	0.85%	3	3	0	0	1	26	0.68%	4	5	0	0	17
16	Ottumwa, Ottumwa Reg	226	27.33%	57	62	42	23	42	760	19.91%	138	153	177	86	206
17	Pella, Pella Reg Med Cen	23	2.78%	8	9	1	2	3	63	1.65%	18	24	3	7	11
18	West Des Moines, Meth W	9	1.09%	0	1	2	5	1	36	0.94%	0	2	14	17	3
19	West Des Moines, West L	4	0.48%	0	0	3	0	1	8	0.21%	0	0	5	0	3

**Drilldown Davis County Market - Inpatient Destination Summary Report  
For Jan - Dec 2013**

	TOTAL DAVIS COUNTY	Disch	%	Discharges					Inpatient Days	%	Inpatient Days				
				<18	18-44	45-64	65-74	75+			<18	18-44	45-64	65-74	75+
1	Albia, Monroe Co Hosp	2	0.28%	0	2	0	0	0	2	0.07%	0	2	0	0	0
2	Bloomfield, Davis Co Hosp	199	27.75%	16	19	41	34	89	854	28.58%	30	47	149	162	466
3	Cedar Rapids, Mercy	8	1.12%	0	3	4	1	0	14	0.47%	0	6	5	3	0
4	Cedar Rapids, St Luke's	1	0.14%	0	0	0	1	0	3	0.10%	0	0	0	3	0
5	Centerville, Mercy Med	16	2.23%	4	5	2	0	5	43	1.44%	5	9	8	0	21
6	Corydon, Wayne Co Hosp	1	0.14%	0	1	0	0	0	1	0.03%	0	1	0	0	0
7	Davenport, Genesis	1	0.14%	0	0	0	0	1	9	0.30%	0	0	0	0	9
8	Des Moines, Mercy Med	80	11.16%	7	8	23	27	15	472	15.80%	31	51	124	165	101
9	Des Moines, IA, Lutheran	2	0.28%	0	0	1	1	0	7	0.23%	0	0	5	2	0
10	Des Moines, IMMC	37	5.16%	3	1	9	8	16	231	7.73%	12	2	76	63	78
11	Fairfield, Jefferson Co	6	0.84%	0	0	1	0	5	24	0.80%	0	0	1	0	23
12	Grinnell, Grinnell Reg	8	1.12%	0	3	5	0	0	18	0.60%	0	4	11	0	0
13	Iowa City, Mercy	5	0.70%	0	0	2	3	0	19	0.64%	0	0	6	13	0
14	Iowa City, U of I Hosp	102	14.23%	15	16	43	14	14	471	15.76%	99	44	167	70	91
15	Keosauqua, Van Buren Co	16	2.23%	6	6	0	10	3	28	0.94%	7	8	0	2	11
16	Oskaloosa, Mahaska Hlt	2	0.28%	0	0	1	1	0	8	0.27%	0	0	4	4	0
17	Ottumwa, Ottumwa Reg	198	27.62%	45	57	37	21	38	683	22.86%	104	139	120	111	209
18	Pella, Pella Reg Med Cen	12	1.67%	3	3	1	1	4	45	1.51%	6	6	2	6	25
19	West Burlington, Grt Rrv	2	0.28%	0	0	2	0	0	4	0.13%	0	0	4	0	0
20	West Des Moines, West L	8	1.12%	0	0	5	2	1	18	0.60%	0	0	11	4	3
21	West Des Moines, Meth W	11	1.53%	0	0	4	1	6	34	1.14%	0	0	10	2	22

**Drilldown Davis County Market - Inpatient Destination Summary Report  
For Jan - Dec 2012**

	TOTAL DAVIS COUNTY	Disch	%	Discharges					Inpatient Days	%	Inpatient Days				
				<18	18-44	45-64	65-74	75+			<18	18-44	45-64	65-74	75+
1	Bloomfield, Davis Co Hosp	309	39.36%	22	27	56	64	140	1,267	37.22%	39	58	175	298	697
2	Cedar Rapids, Mercy	5	0.64%	0	0	4	0	1	11	0.32%	0	0	10	0	1
3	Centerville, Mercy Med	15	1.91%	5	3	3	0	4	35	1.03%	7	4	8	0	16
4	Des Moines, Broadlawn	3	0.38%	0	0	3	0	0	13	0.38%	0	0	13	0	0
5	Des Moines, IA, Lutheran	2	0.25%	0	0	1	1	0	6	0.18%	0	0	3	3	0
6	Des Moines, IMMC	35	4.46%	7	5	13	5	5	242	7.11%	18	55	106	43	20
7	Des Moines, Mercy Med	81	10.32%	7	13	25	20	16	374	10.99%	35	38	108	115	78
8	Fairfield, Jefferson Co	4	0.51%	2	1	0	1	0	9	0.26%	3	2	0	40	0
9	Grinnell, Grinnell Reg	4	0.51%	0	2	2	0	0	9	0.26%	0	4	5	0	0
10	Iowa City, Mercy	8	1.02%	1	1	4	2	0	18	0.53%	2	2	9	5	0
11	Iowa City, U of I Hosp	104	13.25%	15	18	41	16	14	693	20.36%	142	97	230	117	107
12	Keosauqua, Van Buren Co	25	3.18%	3	5	0	20	15	79	2.32%	6	12	0	9	52
13	Knoxville, Knoxville Hosp	2	0.25%	1	1	0	0	0	4	0.12%	2	2	0	0	0
14	Oskaloosa, Mahaska Hlt	4	0.51%	0	0	1	3	0	13	0.38%	0	0	40	9	0
15	Ottumwa, Ottumwa Reg	160	20.38%	44	44	17	32	23	550	16.16%	113	138	58	120	121
16	Pella, Pella Reg Med Cen	4	0.51%	0	1	2	0	1	11	0.32%	0	2	7	0	2
17	Washington, Wash. Co	2	0.25%	1	1	0	0	0	7	0.21%	3	4	0	0	0
18	West Burlington, Grt Rrv	3	0.38%	0	0	1	1	1	11	0.32%	0	0	2	3	6
19	West Des Moines, West L	2	0.25%	0	0	1	1	0	4	0.12%	0	0	3	1	0
20	West Des Moines, Meth W	13	1.66%	0	0	6	2	5	48	1.41%	0	0	18	7	23

---

# Town Hall Attendees Notes & Feedback

[VVV Consultants LLC]

**Davis County Hospital Town Hall Attendees N=35**  
**11/10/2015**

Last Name	First Name	Organization	Address/City/State/Zip Code
Altheide	Jo	BOT	27835 Rainbow Ave, Bloomfield, IA 52537
Barker	Wendy	DCH	509 N Madison St, Bloomfield, IA 52537
Bates	Eric	DCH	12242 48th St, Ottumwa, IA 52507
Brown	Carleena	DCH	23932 Rose Trail, Unionville, MO 63565
Chickering	Tierre	Heartland Pregnancy Center	25412 Floris Rd, Bloomfield, IA 52537
Day	Rod	DCH	509 N Madison St, Bloomfield, IA 52537
Fellinger	Lynn	DCH	
Frazier	Pam	DCH	11993 Falcon Blvd, Drakesville, IA
Garner	Gloria	Assisted Living	11 Deborah Dr, Bloomfield, IA 52537
Gipple	Denyse	DCH	1655 Rutledge Ave, New Sharon, IA 50207
Goss	Rachel		PO Box 284, Bloomfield, IA 52537
Gratz	Kristine	Davis County Dental	
Gratz	Ryan	Davis County Dental	PO Box 69, Bloomfield, IA 52537
Harris	Jane	South Central Behavioral Health	
Hopkins	Shelia		20593 212 St, Bloomfield, IA 52537
Howard	Earl	City of Bloomfield	8075 S Columbia St, Bloomfield, IA
Johnson	Kirby	DCH	
Marlow	Amy	DCH	306 E Chestnut St, Bloomfield, IA 52537
McCall	Missy	DCH	506 E Arkansas Ave, Bloomfield, IA 52537
Oliver	Beverly	DCH	509 N Madison St, Bloomfield, IA 52537
Pankey	Sue	DCH	509 N Madison St, Bloomfield, IA 52537
Phillips	Kristal	Bloomfield Care Center	800 N Davis St, Bloomfield, IA 52537
Pitlick	Devyn	DCH	
Prosapio	Tom	DCH	205 W Jefferson St, Bloomfield, IA 52537
Prosopio	Karen	TTT and PEO	
Schlarbaum	Sylvia		17352 Iris Blvd, Bloomfield, IA 52537
Schroeder	John	DC Development Corporation	111 S Washington St, Bloomfield, IA 52537
Simmons	Diana	DCH	12655 Nettle Ave, Bloomfield, IA
Smith	Shirley	DCH	18930 Iris Blvd
Spurgeon	Beverly		623 N Washington, Bloomfield, IA 52537
Spurgeon	Scott	Bloomfield Democrat	207 S Madison St, Bloomfield, IA 52537
Taylor	Dale	Davis County Board of Health	20735 212th St, Bloomfield, IA 52537
Warning	Kendra	DCH	509 N Madison St, Bloomfield, IA 52537
Woolard	Jack	City of Bloomfield	1009 E Morningside, Bloomfield, IA 52537
Young	Pam	DCH	509 N Madison St, Bloomfield, IA 52537

Davis County Community Health Needs Assessment Meeting  
11.10.15  
N=35

Community Members Present:

- Doctors and NPs
- Nurses
- Parents
- Those taking care of seniors
- Small business owners
- Elected officials (City Council)
- Health department
- No law enforcement

TAB 1: Demographic Profile

- Language other than English most spoken at home is German
- Veterans go to Des Moines to get care

TAB 2: Economic/Business Profile

- This is a “poor county”
- Per capita income number could be a red
- People are traveling out of the county for work

TAB 4: Maternal and Infant Health Profile

- “As a new father, we don’t have adequate resources for prenatal care”

TAB 8: Uninsured Profile

- The Amish population does not carry insurance

PRIMARY RESEARCH:

- “It seems odd we are green on access to primary care, public health, etc. when we are last in almost every category on RWJ rankings.”
- “Water quality is rated high as needing more attention, what is wrong with our water??”

STRENGTHS:

- Healthcare provider recruitment
- Engaged community—Community Coalition
- Attitude at the hospital is positive
- Positive public opinion of the hospital is rising
- Culture of the hospital is changing
- Quality of care given by our local providers is increasing
- Having a pediatrician
- The community center and walking trail development for exercise opportunities

- ER wait times are very low
- Added another dentist
- Cardiac and pulmonary rehab have returned back to the hospital
- Good pharmacy services
- Hospital's physical facility is good
- Increased hospital transparency
- Good physical therapy department

WEAKNESSES:

- More conversations about childhood sexual abuse
- Care coordination between agencies
- Increased technology delivery (telemedicine)
- Senior care accessibility
- Economic development
- Substance abuse
- Access to oncology services
- Mental health (providers, diagnosis, placement, dual-diagnosis)
- Access to care (miles, cost hours)
- Affordable care (insurance, availability)
- Mammographies
- Teen health (drinking, abuse, pregnancy, etc.)
- Healthcare transportation
- Dialysis unit

---

# Public Notice & Invitation

[VVV Consultants LLC]

# Davis County Hospital To Conduct Community Health Needs Assessment Survey Update

For Immediate Release: Sept 22, 2015

Davis County Hospital is working with other Davis County, Iowa health providers to update the 2012 community health needs assessment. Results of this update will be compiled and prioritized to help guide the hospital's implementation plans to address health care needs and fulfill both federal and state requirements.

Starting the week of October 9th, surveys will be mailed to 2800 randomly selected Davis County residents with a deadline of Saturday, October 31st. **If you would like to participate and do not receive a mailed survey, please go to <https://www.surveymonkey.com/r/DavisCo2015> to complete the survey online.** Copies of the paper survey will also be available for pickup at Davis County Hospital and the Davis County Health Department.

All Davis County, IA residents and business leaders are encouraged to participate. Included in the 2015 CHNA surveys are questions dealing with community health regarding service delivery, fitness, nutrition, and access to care. All survey responses are anonymous and completing the survey takes less than 10 minutes. VVV Research & Development, LLC, an independent research firm from Olathe, Kansas has been retained to conduct this countywide research.

If you have any questions about the survey or survey process, please call (641) 664-2145.

**From:** Kirby Johnson, CEO

**Date:** September 30, 2015

**To:** Community Leaders, Providers and Hospital Board and Staff

**Subject:** CHNA Round #2 Online Survey 2015

**Davis County Hospital** is partnering with other community health providers to update the 2012 Community Health Needs Assessment. (*Note:* This assessment update is a follow-up to meet final IRS regulations released on 01/02/2015, requiring all 501(c)(3) hospitals to conduct a Community Health Needs Assessment and adopt an implementation strategy at least once every three years).

Your feedback and suggestions regarding community health delivery are very important to collect in order to complete the 2015 Community Health Needs Assessment and implementation plan updates.

To accomplish this work, an online survey has been developed:

<https://www.surveymonkey.com/r/DavisCo2015>. The **CHNA Round #2 due date for survey completion is Saturday, October 31<sup>st</sup>, 2015**. All responses are confidential.

In addition, on Tuesday, November 10<sup>th</sup> from 5:30-7pm, a Davis County Town Hall will be held at Davis County Hospital to discuss survey findings and next steps. Please plan to attend and support this important community effort.

Thank you in advance for your time and support in participating with this important request.

Sincerely,  
CEO  
Kirby Johnson



# Community Health Needs Assessment Community Town Hall Meeting

## Public Announcement Notice

Davis County Hospital  
& Davis County Public Health  
will be sponsoring a  
Town Hall Meeting on November 10<sup>th</sup> 2015,  
from 5:30 to 7:00 p.m.  
at Davis County Hospital

Public is invited to attend.  
**A light dinner will be provided.**

Please join us for this opportunity to share your opinions  
and suggestions to improve health care delivery  
in Davis County, IA.

**Thank you in advance for your participation.**



## **NEWS**

**Date: Sept 22, 2015  
For Immediate Release**

In order to gauge the overall health needs of Davis County residents, Davis County Hospital is working together with other community providers to conduct a community wide healthcare needs assessment. **To ensure that all county residents have an opportunity to participant, the deadline to complete this assessment has been extended to Saturday, October 31st, 2015.**

If you would like to participate and did not receive a mailed paper survey, please complete the assessment online by entering the following link into your browser:

**<https://www.surveymonkey.com/r/DavisCo2015>**

or drop by Davis County Hospital to pick up a paper survey.

Again, it is important that all assessment surveys be completed and returned by Saturday, October 31st, 2015. All survey responses are anonymous and completing the survey takes less than 10 minutes.

In addition, a Town Hall meeting will be held on Tuesday, November 10<sup>th</sup>, 2015 at Davis County Hospital from 5:30-7pm. Persons invited to the Town Hall meeting represent all segments of Davis County's population.

---

# Detail Primary Research Primary Service Area

[VVV Consultants LLC]

# Community Health Needs Assessment Round #2 Community Feedback

## Methodology

A community feedback survey was created on behalf of the CHNA client to gather primary service area stakeholder feedback on health perception and progress in addressing previous CHNA community needs. In addition to 2500 mailed surveys, community residents were encouraged to take the survey online by entering the following address into personal browser, where 357 responses were collected: <https://www.surveymonkey.com/r/DavisCo2015>. Also, an invite letter was sent to all primary service area stakeholders (i.e. Schools, County, City, Clergy, Public Health Leaders).

Below is a summary of public response:

### Community Healthcare Needs Assessment 2015 - Demographics

	CHNA NORM (25) N=9836	%	Davis CO PSA N=280	%	Davis Co PSA N=357	%
<b>What is your age?</b>						
Under 18	11	0.1%	0	0.0%	0	0.0%
18 - 44	2,581	28.9%	74	30.5%	130	41.0%
45 - 64	4,039	45.2%	98	40.3%	115	36.3%
65 - 74	1,256	14.1%	40	16.5%	36	11.4%
Over 75	1,052	11.8%	31	12.8%	36	11.4%
<b>Totals</b>	<b>8,939</b>	<b>100.0%</b>	<b>243</b>	<b>100.0%</b>	<b>317</b>	<b>100.0%</b>
<b>Your gender?</b>						
Male	2,191	25.1%	58	24.3%	62	19.9%
Female	6,541	74.9%	181	75.7%	249	80.1%
<b>Totals</b>	<b>8,732</b>	<b>100.0%</b>	<b>239</b>	<b>100.0%</b>	<b>311</b>	<b>100.0%</b>
<b>How would you identify yourself?</b>						
Caucasian / White American	8,626	96.1%	235	97.9%	309	98.1%
African American / Black American	62	0.7%	0	0.0%	0	0.0%
Latino / Hispanic American	62	0.7%	1	0.4%	1	0.3%
American Indian / Native Alaskan	34	0.4%	2	0.8%	2	0.6%
Asian American / Pacific Islander	37	0.4%	1	0.4%	2	0.6%
Multicultural / Multiracial	42	0.5%	0	0.0%	1	0.3%
Other (please specify)	80	0.9%	1	0.4%	0	0.0%
<b>Totals</b>	<b>8,977</b>	<b>100.0%</b>	<b>240</b>	<b>100.0%</b>	<b>315</b>	<b>100.0%</b>

\* Norm is composed of 23 CHNA community surveys from IA, KS and MO.

### Community Healthcare Needs Assessment 2015 - Demographics

	CHNA NORM (25) N=9836	%	Davis CO PSA N=280	%	Davis Co PSA N=357	%
<b>How would you describe your household?</b>						
Single	1,444	16.2%	33	13.8%	31	9.7%
Married	2,022	22.6%	51	21.3%	63	19.8%
Married with children at home	2,399	26.9%	77	32.2%	125	39.3%
Married with children no longer at home	1,861	20.8%	44	18.4%	58	18.2%
Divorced	583	6.5%	18	7.5%	27	8.5%
Other	620	6.9%	16	6.7%	14	4.4%
<b>Totals</b>	<b>8,929</b>	<b>100.0%</b>	<b>239</b>	<b>100.0%</b>	<b>318</b>	<b>100.0%</b>
<b>Regarding your health insurance coverage..</b>						
Private Insurance you purchased	1,138	12.2%	39	16.7%	45	14.1%
Medicare	1,824	19.5%	54	23.2%	60	18.8%
Medicaid	182	1.9%	6	2.6%	14	4.4%
Covered by Employer (employer pays total cost)	904	9.7%	18	7.7%	29	9.1%
Covered by Employer (you & employer share cost)	4,362	46.7%	94	40.3%	150	47.0%
No Coverage (Uninsured)	346	3.7%	22	9.4%	15	4.7%
Other	579	6.2%	20	0.0%	6	1.9%
<b>Totals</b>	<b>9,335</b>	<b>100.0%</b>	<b>253</b>	<b>100.0%</b>	<b>319</b>	<b>100.0%</b>

\* Norm is composed of 23 CHNA community surveys from IA, KS and MO.

## Community Health Needs Assessment 2015 – Davis County, IA

Davis County Hospital and Davis County Public Health are conducting a comprehensive community health needs assessment update this year. In 2013, a similar community health needs survey was administered. Today, we need your assistance to gather confidential feedback. Thank you.

If you prefer, you can complete this same survey online by typing the following link into your browser:  
<https://www.surveymonkey.com/r/DavisCo2015>. Completed surveys must be received by Saturday, October 31st, 2015.

### Part I: HEALTHCARE PERCEPTIONS & SATISFACTION

#### 1. In general, how would you rate the overall quality of the healthcare delivered to your community?

	Very Good	Good	Fair	Poor	Very Poor
OVERALL Quality of Care	<input type="radio"/>				

#### 2. How would you rate the following healthcare services? (Please select one box per row)

	Very Good	Good	Fair	Poor	Very Poor	N/A
Ambulance Service:	<input type="radio"/>					
Child Care:	<input type="radio"/>					
Chiropractor:	<input type="radio"/>					
Dentists:	<input type="radio"/>					
Emergency Room:	<input type="radio"/>					
Eye Doctor / Optometrist:	<input type="radio"/>					
Family Planning Services:	<input type="radio"/>					
Home Health:	<input type="radio"/>					
Hospice:	<input type="radio"/>					

#### 3. How would you rate the following healthcare services? (Please select one box per row)

	Very Good	Good	Fair	Poor	Very Poor	N/A
Inpatient Services:	<input type="radio"/>					
Mental Health Services:	<input type="radio"/>					
Nursing Home:	<input type="radio"/>					
Outpatient Services:	<input type="radio"/>					
Pharmacy:	<input type="radio"/>					
Primary Care:	<input type="radio"/>					
Public Health Department:	<input type="radio"/>					
School Nurse:	<input type="radio"/>					
Specialist Physician Care:	<input type="radio"/>					

#### 4. Over the past 2 years, did you or your household receive health care services outside of your county?

Yes  No

If yes, please specify the healthcare services you received

**5. Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed? (Please be specific)**

**6. In your opinion, how much of a problem are the following causes of diseases or disability in your community? (Please select one box per row)**

	Not a Problem	Somewhat of a Problem	Major Problem	Don't Know
Cancer:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diabetes:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance Abuse:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Heart Disease:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual Transmitted Diseases:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Disorders:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obesity:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pneumonia / Flu:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respiratory Disease:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stroke:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suicide:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trauma:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please specify)

**7. How well do you feel our local health care providers are doing in addressing the health needs of the following age groups? (Please select one box per row)**

	Very Good	Good	Fair	Poor	Very Poor	N/A
Infants	<input type="radio"/>					
Age 1 - 12:	<input type="radio"/>					
Age 13 - 17:	<input type="radio"/>					
Age 18 - 44:	<input type="radio"/>					
Age 45 - 64:	<input type="radio"/>					
Age 65 - 84:	<input type="radio"/>					
Over 85:	<input type="radio"/>					

**8. Does our community need any additional healthcare providers?**

Yes       No

If yes, please specify what is needed:

**9. In your opinion, what areas need additional education or attention in our community? (Please select all that apply)**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Abuse / Violence                | <input type="checkbox"/> Mental Illness          | <input type="checkbox"/> Sexually Transmitted Diseases |
| <input type="checkbox"/> Aging (Dementia)                | <input type="checkbox"/> Neglect                 | <input type="checkbox"/> Suicide                       |
| <input type="checkbox"/> Alcohol                         | <input type="checkbox"/> Nutrition               | <input type="checkbox"/> Teen Pregnancy                |
| <input type="checkbox"/> Alternative Medicine            | <input type="checkbox"/> Obesity                 | <input type="checkbox"/> Tobacco Use                   |
| <input type="checkbox"/> Child Care                      | <input type="checkbox"/> Ozone                   | <input type="checkbox"/> Uninsured                     |
| <input type="checkbox"/> Chronic Diseases                | <input type="checkbox"/> Pain Management         | <input type="checkbox"/> Vaccinations                  |
| <input type="checkbox"/> Family Planning / Birth Control | <input type="checkbox"/> Poverty                 | <input type="checkbox"/> Water Quality                 |
| <input type="checkbox"/> Lead Exposure                   | <input type="checkbox"/> Preventative Healthcare | <input type="checkbox"/> Wellness Education            |

Other (please be specific)

**PART II: YOUR HEALTH PRACTICES**

**10. In general, how would you best describe your health? (Please select one)**

- Very Good     
  Good     
  Fair     
  Poor     
  Very Poor

**11. Compared to a year ago, how would you rate your overall health now?**

- Much better than a year ago     
  About the same     
  Much Worse than a year ago

**12. Does your household have a provider you use for primary care?**

- Yes     
  No

If Yes, Please give physician's name / specialty / city:

**13. Have you had a physical in the past 12 months?**

- Yes     
  No

If no, why not? (Please be specific)

**14. Do you follow these health practices? (Please select one box per row)**

	Yes	No	N/A
If over 50, have you had a colonoscopy:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If male over 50, do you have annual prostate exams:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If female over 40, do you have annual mammograms:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If female, do you have a pap smear every other year:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do you get 2.5 hours a week of moderately intense physical activity:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**15. Please complete sentence below. Are you:**

	Yes	No	N/A
Eating right (Daily5+servings-fruits/veg/wheat):	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using tobacco products weekly:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exercising 2-3 times weekly:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consuming alcohol (more than 1 drink daily):	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Receiving an annual flu shot:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Part III: A LITTLE MORE ABOUT YOU**

**16. What is your age?**

- Under 18       18 - 44       45 - 64       65 - 74       Over 75

**17. Your gender?**

- Male       Female

**18. How would you identify yourself?**

- Caucasian / White American       American Indian / Native Alaskan  
 African American / Black American       Asian American / Pacific Islander  
 Latino / Hispanic American       Multicultural / Multiracial

Other (please be specific)

**19. How would you describe your household?**

- Single       Married with children no longer at home  
 Married       Divorced  
 Married with children at home

Other (please be specific)

**20. Regarding your health insurance coverage, what type of health coverage is your primary plan? (Choose one)**

- Private Insurance you purchased       Covered by Employer (employer pays total cost)  
 Medicare       Covered by Employer (you & employer share cost)  
 Medicaid       No Coverage (Uninsured)

**21. What is your home 5 digit zip code?**

**Thank you. Please return completed survey with enclosed business reply envelope.**

KEY - CHNA Open End Comments			
CODE	Physician Specialty		
		NEUS	Neurosurgery
ALL	Allergy/Immunology	OBG	Obstetrics/Gynecology (Delivery)
AES	Anesthesia/Pain	ONC	Oncology/RADO
CARD	Cardiology	OPHTH	Ophthalmology
DERM	Dermatology	ORTH	Orthopedics
EMER	Emergency	ENT	Otolaryngology (ENT)
ENDO	Endocrinology	PATA	Pathology
FP	Family Practice (General)	PEDS	Pediatrics
GAS	Gastroenterology	PHY	Physical Medicine/Rehab
SUR	General Surgery	PLAS	Plastic/Reconstructive
GER	Gerontology	PSY	Psychiatry
IFD	Infectious Diseases	PUL	Pulmonary
IM	Internal Medicine	RAD	Radiology
NEO	Neonatal/Perinatal * ABP 06	RHE	Rheumatology
NEP	Nephrology	VAST	Thoracic/Cardiovascular/Vascular
NEU	Neurology	URL	Urology

KEY - CHNA Open End Comments			
CODE	HC Themes	CODE	HC Themes
VIO	Abuse / Violence	EMRM	Emergency Room
ACC	Access to Care	EMS	EMS
AGE	Aging (Senior Care / Assistance)	EYE	Eye Doctor / Optometrist
AIR	Air Quality	FAC	Facility
ALC	Alcohol	FAM	Family Planning Services
ALT	Alternative Medicine	FEM	Female (OBG)
ALZ	Alzheimers	FINA	Financial Aid
AMB	Ambulance Service	FIT	Fitness / Exercise
ASLV	Assisted Living	ALL	General Healthcare Improvement
AUD	Auditory	GEN	General Practitioner
BACK	Back / Spine	GOV	Government
BD	Blood Drive	HRT	Heart Care
BRST	Breastfeeding	HEM	Hematologist
CANC	Cancer	HIV	HIV / AIDS
CHEM	Chemotherapy	HH	Home Health
KID	Child Care	HSP	Hospice
CHIR	Chiropractor	HOSP	Hospital
CHRON	Chronic Diseases	MAN	Hospital Management
CLIN	Clinics (Walk-in, etc.)	INFD	Infidelity
COMM	Communication	IP	Inpatient Services
CORP	Community Lead Health Care	LEAD	Lead Exposure
CONF	Confidentiality	BIRT	Low Birth Weight
De	Dentists	LOY	Loyalty
DENT	Dentists	MAMO	Mammogram
DIAB	Diabetes	MRKT	Marketing

## KEY - CHNA Open End Comments

DIAL	Dialysis	STFF	Medical Staff
DUP	Duplication of Services	BH	Mental Health Services
ECON	Economic Development	MDLV	Mid-Levels
<b>Code</b>	<b>HC Themes</b>	SANI	Sanitary Facilities
NURSE	More Nurse Availability	SNUR	School Nurse
NEG	Neglect	STD	Sexually Transmitted Diseases
NP	Nurse Practitioner	SMOK	Smoking
NH	Nursing Home	SS	Social Services
NUTR	Nutrition	SPEC	Specialist Physician care
OBES	Obesity	SPEE	Speech Therapy
ORAL	Oral Surgery	STF	Staffing
ORTHD	Orthodontist	STRK	Stroke
OTHR	Other	DRUG	Substance Abuse (Drugs / Rx)
OP	Outpatient Services/Surgeries	SUIC	Suicide
OZON	Ozone	SURG	Surgery
PAIN	Pain Management	TPRG	Teen Pregnancy
PARK	PARKING	TEL	Telemedicine
PHAR	Pharmacy	THY	Thyroid
DOCS	Physicians	TOB	Tobacco Use
FLU	Pneumonia / Flu	TRAN	Transportation
FOOT	Podiatrist	TRAU	Trauma
POD	Podiatrist	TRAV	Travel
POV	Poverty	ALCU	Underage Drinking
PNEO	Prenatal	INSU	Uninsured/Underinsured
PREV	Preventative Healthcare	URG	Urgent Care/After Hours Clinic
PRIM	Primary Care	VACC	Vaccinations
PROS	Prostate	VETS	Veteran Care
DOH	Public Health Department	WAG	Wages
QUAL	Quality of care	WAIT	Wait Times
REC	Recreation	H2O	Water Quality
RESP	Respiratory Disease	WELL	Wellness Education/Health Fair
NO	Response "No Changes," etc.	WIC	WIC Program

**CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357**

ID	ZIP	Community Health Status	c1	c2	c3	Q4 - Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1113	52537	Fair	AA			AA should be taught in school.
1083	52537	Good	ALL			Allergist
1182	52537	Very Good	AMB	WAIT		Ambulance response times need to be quicker. Towns much larger than Bloomfield have faster response times.
1305	52537	Very Good	AWARE			attitude toward the less fortunate
1051	52537	Good	BH	ACCESS		Access to mental health services.
1166	52537	Fair	BH	ACCESS		Better access to local mental health services
1045	52537	Good	BH	AVAIL		Mental health appointment time available.
1016	52537	Very Good	BH	AVAIL		Mental health availability.
1298	52501	Good	BH	AVAIL		More mental health options/availability
1046	52537	Good	BH	AWARE		Better mental health and awareness of nutraceutical.
1356	52560	Good	BH	CARD	LAB	Mental health Cardiac labs
1005	52537	Fair	BH	CHEMO		Mental health services and chemo therapy treatment services.
1255	52537	Very Good	BH	CHILD	OBGYN	Mental health services, early childhood & prenatal care
1246	52537	Very Good	BH	CHILD		Mental health...specifically for children & adolescents
1151	52537	Good	BH	COST	LOC	Nursing home. Poor care for extremely high cost compared to all other care centers in southern Iowa/ northern/Missouri.
1157	52537	Good	BH	COST		Mental health services, low-income options
1291	52537	Fair	BH	DENT		not much mental health services in our community. not much for dental either.
1341	52537	Fair	BH	EMER	AMB	Mental Health training and emergency ambulance training
						Mental Health Services that can be provided for all people regardless of if they have Title 19 or private insurance, especially for children.
1238	52537	Good	BH	INSUR	CHILD	
1324	52572	Very Good	BH	LOC	MEDS	Need for mental health services. I drive to Oskaloosa to have a provider provide medication management.
1271	52537	Good	BH	LOC		mental health (I know someone who goes to Oskaloosa for those services - closest place)
1350	52537	Good	BH	NEURO	UROL	Mental Health, Neurology, Urology
1300	52537	Good	BH	OBGYN		Mental Health: shortage of available beds, shortage of psychiatrists or those specializing in mental health. Gynecological services
1275	52552	Very Good	BH	OBGYN		more mental health choices, gyn doctor
1337	52537	Good	BH	PRIM	WAIT	Mental health services both outpatient and inpatient services are lacking. More Primary care access for appointments earlier, over lunch and or evening and Saturday.
1049	52537	Good	BH	REF		Mental health - referring to people housed in DC just off the square.
1154	52537	Good	BH	SPEC	CHILD	Mental health care, Special needs child care
1037	52537	Very Good	BH	SUB	REHAB	Mental health, addiction rehab, substance abuse.
1023	52537	Good	BH	SUB		Mental health/substance abuse (us and all the rest of Iowa!).
1032	52537	Very Good	BH	SUB		Sustained mental health/addiction services.
1345	52537	Good	BH	UROL	LOC	Mental Health is always a concern although good things are occurring in that field in Davis County. Urology care is needed in Davis County.
1191	52537	Good	BH	VA		Need mental health services as this is a very underserved, and VA services here in this community
1321	52537	Good	BH			BETTER MENTAL HEALTH.
1165	52552	Good	BH			Davis County needs more mental health services.
1160	52537	Good	BH			Mental health
1355	52537	Good	BH			Mental Health
1362	52560	Very Good	BH			mental health
1332	52537	Good	BH			Mental Health
1076	52537	Very Good	BH			mental health professionals
1353	52537	Good	BH			Mental health services needed.
1311	52537	Good	BH			Mental Health services should be established
1316	52584	Good	BH			Mental Health,
1036	52537	Good	BH			Mental health.
1258	52533	Good	BH			More access to mental health
1313	52537	Good	BH			Need more mental health as there are many who would greatly benefit from these services
1201	52537	Good	BH			Would like to see more for Mental Health
1197	52537	Good	BH			yes mental health
1110	52537	Good	BH			Yes, need more mental health care for all age groups.

**CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357**

ID	ZIP	Community Health Status	c1	c2	c3	Q4 - Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1325	52537	Very Good	CARD	REHAB	LOC	Happy to have cardiac rehab back at Davis County Hospital.
1190	52537	Very Good	CARD	REHAB		Glad to see cardiac rehab come back. Absurd it was taken away.
1095	52537	Fair	CARD			Cardiologist.
1143	52537	Good	CEHMO	LOC		Chemotherapy in Fairfield and radiation in Ottumwa. Should all be in the same place. A hardship for some people.
1106	52537	Very Poor	CHILD	BH		Child care and mental health.
1319	52537	Good	CLIN	AVAIL		more availability with clinic
1153	52537	Fair	CLIN	EMER	WAIT	Would be nice to be able to access a walk-in clinic instead of using the emergency room for minor problems. A lot of times it's hard to get an appointment with a doctor for the same day.
1249	52537	Good	CLIN	ENT		clinic care for strep, ear infection, sinus infection, etc.
1077	52537	Good	CLIN	OP	EMER	One major problem for me was the weekend clinic. Don't know if still offer it but walk-ins were welcome I thought. Was treated rudely, not welcomed since I didn't have an appointment. They were too busy. I haven't been back since for any services; outpatient, ER, or otherwise.
1285	52537	Good	CLIN	WAIT	DOCS	access to evening/weekend physicians on a walk-in basis
1314	52537	Fair	CLIN	WAIT		I would love to see our community offer after hours services, such as a walk-in clinic.
1123	52537	Good	COST	LOC		A large need to work with Amish. Many go out of the community due to cost.
1059	52537	Good	DENT	CANC	CARD	Need dentistry besides only one, need cancer treatment. Need cardio rehabilitation.
1173	52537	Good	DENT	EYE		additional dental and eye clinic
1187	52584	Good	DENT	EYE		We need more than one option for services...i.e. dental, eye, etc.
1026	52537	Fair	DENT	INSUR		Dentists - do not accept Title 19. Very unacceptable!
1290	52537	Good	DENT	LOC		more dental ..... prefer to go out of town than to visit the only one in town
1188	52537	Fair	DENT			Davis County Dental needs to go away. I have had nothing but problems with their services (root canal came apart, etc)
1307	52537	Good	DENT			dental medical
1294	52537	Good	DENT			Dentist - overcharging and performing work that is not needed.
1081	52537	Good	DENT			Dentists
1179	52537	Good	DERM			Dermatologist could be improved. Was not happy with her services.
1002	52537	Poor	DIAL	CANC		Dialysis and cancer care.
1053	52537	Very Good	DIAL			Dialysis
1019	52537	Fair	DOCS	ACCESS	HOSP	All doctors should have access to the hospital.
1363	52537	Good	DOCS	COST	BH	I have just moved here but there are not enough family physicians, the CAH is poor quality and very expensive. We need mental health providers!
1288	52536	Good	DOCS	DENT	EYE	Need more providers. Dentists, eye doctors
1287	52537	Good	DOCS	SPEC	AVAIL	Knowledgeable and competent doctors and specialist that come weekly to our town, rather than once or twice a month, if then.
1033	52537	Very Good	DOCS	SURG		Dr Jake Settles needs to be let go. My wife had surgery and he was terrible.
1207	52537	Good	DOCS			Need more doctors
1075		Fair	DOCS			Share doctors so more services can be done locally
1058	52537	Good	DOCS			We need doctors that are willing to take more serious cases.
1211	52537	Good	EMER	AMB	NP	The Emergency Room needs vast improvement!! The ambulance service is excellent however the nurse practitioner at night is not only rude to the families of the patients but she is rude to the patients themselves. It is sad because Davis County Hospital has a lot to offer especially when it comes to medical services and this one night changed several people's minds.

**CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357**

ID	ZIP	Community Health Status	c1	c2	c3	Q4 - Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1064	52537	Good	EMER	LAB	WAIT	The ER process is very slow. I came in with chest pain, was given nitro for the pain. They took blood, came back and took blood again, still don't know why! Had an x ray took for every for the results, same long wait for the blood test results. Finally decided I should stay overnight for observation. I don't know why it takes so long for results, is there a person to read X-rays on duty 24/7 ? Same question for the lab. I have been to Ottumwa Regional and the test results are much faster.
1252	52537	Good	EMER	SURG		ER, surgeons
1098	52537	Good	EMER	WAIT		Emergency room - too long of wait, not always comfortable with doctors on call.
1245	52537	Good	EMER			emergency room evaluations
1220	52560	Good	EMER			ER care center
1138	52537	Good	EXER	SEN		More opportunities for exercise for senior citizens.
1209	52560	Very Good	EYE	DENT		Eye care and dental
1043	52537	Good	FAMPLAN	BH	WAIT	Lack of family planning and mental health services needs fixed. Can't schedule x-ray stuff at better times - I go elsewhere to get a better time.
1162	52537	Good	FP	IM		Need more competent family practice/internal medicine practitioners
1304	52537	Good	FP	UROL		more family practice providers and urologist.
1289	52560	Fair	FP	WAIT		more family practice options- hard to get in when we are sick cant wait for a week sometimes
1223	52537	Good	FP			Family Practice physicians
1071	52537	Good	HC			more general healthcare
1254	52537	Good	HC			overall it seems we are trying to get the services that are needed
1343	52560	Good	HC			services listed as poor on the previous question
1175	52584	Fair	HC			Yes, most of the areas need to be looked at and improved.
1055	52537	Fair	HH	DISAB		Yes, we need more home health services for disabled people!
1094	52537	Good	HH	STAFF		Home health care needs more help. Awesome employees but short-staffed.
1269	52537	Good	HH			Need for in home health services for IV infusions
1131	52537	Fair	HOSP	COST		We go to other hospitals to avoid high costs.
1243	52537	Good	HOSP	DOCS		Hospital - doctors
1124	52537	Very Good	HOSP	HC	LOC	Local hospital in Bloomfield - we need more than a band-aid station. We want to be thankful for what the local Bloomfield hospital does but it seems anyone with a broken arm or non-life threatening injury is sent on to a larger hospital when it seems to us it shouldn't be necessary. In last 3 weeks, was a case where boy was lifeflighted due to seizures but was released with 12 hours. We're finding out we are better off driving to Centerville instead of calling 911 (non life threatening) as we get way better service and are not usually sent on even though Centerville hospital is smaller than Bloomfield is.
1144	52537	Fair	HOSP	LOC		More care at our hospital, less transfer out.
1202	52537	Very Good	HOSP	REP		the DC hospital for some reason has a bad reputation. I cannot personally say this is accurate or inaccurate but obviously something needs improvement for this to exist.
1013	67543	Good	INSUR	COST		Due to the large percentage of Amish in the area (who do not use insurance) and spend their medical money out of the county , an annual meeting should be held by representatives of both parties to see if those dollars could be kept withing. Maybe concentrating on certain procedures.
1284	52537	Very Good	INSUR	HOSP		More private practice less hospital
1346	52537	Good	LOC	SURG	DOCS	This week a broken ankle victim was forced to travel a long distance to have it set because there was no surgeon scheduled here for 10 days. Is there any way this can be avoided?

**CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357**

ID	ZIP	Community Health Status	c1	c2	c3	Q4 - Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1276	52537	Good	LOC	WAIT	EMER	Rig drivers need to know our area, we hear patients or neighbors or family members c/o rig passing their street or house multi times and increasing response time need something we can go to for healthcare on Saturdays except ER due to a high cost (for simple things ,needing antibiotics ,simple injuries?fast track)
1281	52501	Good	LOC			Ottumwa Regional Health Center in Ottumwa Ia
1339	52537	Good	NH	STAFF	EMER	Nursing Home: not enough staff for patients. Emergency Room: Will give pain meds but as soon as pain is "managed" send someone home only to be in pain again with no explanation once meds wear off- Patty Blackledge specifically.
1229	52537	Good	NH			Nursing home
1278	52537	Good	NONE			?
1137	52537	Very Good	NONE			Don't know. We have all healthcare in Ottumwa and/or Des Moines.
1195	52552	Good	NONE			Don't use Davis Co for healthcare
1171	52537	Fair	NONE			I believe it is all a matter of opinion.
1135	52537	Fair	NONE			I don't know.
1161	52537	Good	NONE			I don't use them, so I can't be sure that they should be improved or not.
1178	52537	Good	NONE			n/a
1218	52537	Good	NONE			NA
1065	52537	Good	NONE			No
1132	52537	Fair	NONE			No
1136	52537	Good	NONE			No
1184	52537	Good	NONE			No
1203			NONE			No
1215		Good	NONE			No
1328	52537	Good	NONE			no
1062	52537	Fair	NONE			No, i feel we get good service, considering the size of our community.
1335	52584	Very Good	NONE			none
1230	52537	Very Good	NONE			none that I can think of at this moment
1078	52537	Fair	NONE			Not really
1212	52537	Good	NONE			Not that I am aware of
1359	52537	Very Good	NONE			Not that I know if.
1039	52537	Good	NONE			They have done fine when I needed care.
1111		Fair	NONE			Yes
1265	52537	Good	NURS	HOSP	LOC	If we had qualified - trained and EXPERIENCED nursing care, advanced care and physicians without ego complexes we could keep far more ppl here in our facility rather than flying every person out.
1208			OBGYN	FP	SURG	We need a labor and delivery unit in Davis county, family practice doctor and obstetrics doctor as well as a general surgeon.
1164	52537	Good	OBGYN	LOC		Open the OB department again. To deliver at DCH was important. We need to have a local doctor to help the other doctor in town for 24/7 care.
1070	52537	Good	OBGYN	ONC	CANC	We need an OB/GYN to see patients and deliver babies. We need an Oncologist to see cancer patients.
1167	52537	Good	OBGYN	PEDS	BH	OB, pediatrics, mental health
1030	52537	Fair	OBGYN			Gynecology would be good to have.
1029	52537	Good	OBGYN			OB - I wish we had OB and ALOT of my friends do too.
1217	52537	Good	OBGYN			Ob gyn....we do not have this Healthcare service in our community.
1152	52537	Good	OBGYN			Obstetrics
1126	52537	Very Good	OBGYN			Women's health.
1206	52537	Very Good	OPHTH	OBGYN	FP	We need an ophthalmologist, Obgyn or family practice and obstetrics
1149	52537	Good	PEDS	COST		The pediatrician that is located in the hospital was too high the one time we went there in lieu of our normal one. Instead of the appointment fee and shot fee, there was one or two nurses fees in there as well which didn't make sense to us, and the whole bill was much higher than expected.

CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357						
ID	ZIP	Community Health Status	c1	c2	c3	Q4 - Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1204	52537	Good	PEDS	DOCS	MEDS	We need more Pediatricians We need Drs who check into things & not just tell you its whatever all the time and treat you will same medication over & over it doesn't work!
1214	52537	Good	PRIM	DERM	LOC	Primary Care physician that is a MD would be a plus versus DO only. I also think MD in Dermatology would be a big benefit. I know many people who travel to Ottumwa and Kirksville for this service.
1277	52537	Good	PRIM	LOC		Quality Primary health physician is difficult to find on our area.
1241	52537	Good	PRIM	WAIT	AVAIL	Primary care: easier to obtain an appointment.
1296	52537	Good	PRIM	WAIT	EYE	No access to primary care, inflexible scheduling for specialty doctors, no quality eye doctors around, inflexible imaging scheduling for everything. Can't get anything done after 5 or on a weekend
1224	52537	Fair	PRIM			More primary care options. Too many Older Physicians close to retirement.
1004	52537	Good	REF	COST		Wish we would have been referred before costs were applied.
1234	52552	Good	SPEC	AVAIL		Specialists here more than once a month
1309	52537	Good	SPEC	CARD		Retain a vein Doctor ( clinic space) and improve Cardio Facilities Build Cardio Programs for patients.
1183	52537	Very Good	SPEC	LOC	AWARE	When specialist come from outside the area to the hospital, they need to understand the community they are serving.
1169	52537	Fair	SPEC	WAIT		YES, lack of specialization (due to nature of community) can delay diagnosis while local services "drain and delay" appropriate treatment.
1360	52537	Very Good	SPEC			For a small community, I think Davis Co does a commendable job. It would not be cost effective to provide every specialty, but I think our visiting specialists fill many gaps for us.
1351	52537	Good	SPEC			MORE SPECIALISTS
1125	52537		SPEC			More specialists and visiting same.
1073	52537	Good	SPORTS	BH	NH	Need a sports medicine physician, access to mental health care, better nursing home care
1148	52537	Very Good	STAFF	AWARE		Bloomfield Care Center personnel need to be more observant of needs of residents and changes in their physical condition.
1236	52552	Good	SURG	DOCS		More surgeons to take care of different issues. More MD's - fewer DO's.
1080	52537	Fair	SURG			Another surgeon
1109	52537	Good	SURG			General surgeon.
1228	52537	Good	SURG			Surgeons/surgery
1260	52537	Good	SURG			Surgery
1063	52537	Good	SURG			surgery care
1145	52537	Fair	THER	HOSP		Therapy in hospital.
1117	52537	Good	WAIT	DOCS	AVAIL	Yes, experience at hospital (ease of visit, wait, providers available).
1180	52537	Good	WAIT	DOCS		Hard to get an appointment to see the doctor in a timely manner
1247	52537	Very Good	WAIT	EMER	LOC	Long waits at the emergency room. It would be quicker to go somewhere else.
1068	52537	Very Good	WAIT	RAD		Faster results for x-rays and other test results.

**CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357**

ID	ZIP	Community Health Status	c1	c2	c3	Yes	Q3 - Does our community need any additional healthcare providers? If Yes, please specify what is needed?
1175	52584	Fair	AWARE	MEDS		Yes	Ones that actually work with the patients to find the cause of the problem not just say here's your meds.
1111		Fair	AWARE			Yes	One who cares.
1089	52537	Good	BH	ACCESS	DOCS	Yes	Mental health access in town and additional medical doctors.
1165	52552	Good	BH	DOCS		Yes	Mental health counselors and Doctors
1276	52537	Good	BH	ENT	OBGYN	Yes	mental health, EENT, OBGYN , after hours an weekend for quick in and out assitannce
1166	52537	Fair	BH	LOC	SUB	Yes	More local mental health care. More local substance abuse,
1001	52537	Fair	BH	LOC		Yes	Mental health providers in the county of Davis County.
1258	52533	Good	BH	NEURO	GER	Yes	specialists (mental health, neurology, geriatrics)
1350	52537	Good	BH	NEURO	UROL	Yes	Mental Health, Neurology, Urology
1300	52537	Good	BH	OBGYN	UROL	Yes	Mental Health, Gynecology, urology
1330	52537	Good	BH	ONC	UROL	Yes	Mental Health, Oncologist, urologist
1332	52537	Good	BH	OPHTH	DENT	Yes	Psychiatrist, Ophthalmology, Dentists
1187	52584	Good	BH	PEDS	DENT	Yes	Mental health providers,pediatricians, ancillary services such as dental and vision.
1050	52537	Good	BH	WAIT		Yes	More healthcare providers. Sometimes getting in to see a doctor without waiting 3-4 months.
1110	52537	Good	BH	WELL		Yes	Mental health providers and wellness education.
1064	52537	Good	BH	WELL		Yes	Mental health, wellness experts are needed
1160	52537	Good	BH			Yes	Mental health
1238	52537	Good	BH			Yes	mental health
1271	52537	Good	BH			Yes	mental health
1316	52584	Good	BH			Yes	Mental Health
1325	52537	Very Good	BH			Yes	Mental Health
1362	52560	Very Good	BH			Yes	mental health
1133	52537	Good	BH			Yes	Mental health physician.
1076	52537	Very Good	BH			Yes	mental health professionals
1293	52537	Good	BH			Yes	mental health provider
1298	52501	Good	BH			Yes	Mental Health Providers
1324	52572	Very Good	BH			Yes	Mental health providers.
1046	52537	Good	BH			Yes	Mental health.
1116	52552	Fair	BH			Yes	Mental health.
1353	52537	Good	BH			Yes	Psychiatry
1005	52537	Fair	CANC	CHEMO	BH	Yes	Cancer physicians and chemo therapy treatment services. Mental health physicians and medical treatment to go with that. Handicap accessible equipment and buildings.
1356	52560	Good	CARD	BH		Yes	In house cardiologist Mental health doctor Mental health facility
1037	52537	Very Good	CARD	SURG		Yes	Cardiologist surgeon
1144	52537	Fair	CARD	SURG		Yes	Someone with cardiology knowledge and full-time surgeons.
1095	52537	Fair	CARD			Yes	Cardiologist.
1127	52537	Fair	CARD			Yes	Heart specialist
1059	52537	Good	CLIN	SEN	AMB	Yes	Don't have a good diagnostic clinic. A senior citizen said she felt like an experiment. Some of senior citizen housing is not ambulance accessible. No handicap bathroom in senior apartments.
1241	52537	Good	CLIN	WAIT	EMER	Yes	After 5:00 care and weekends to enable someone that has a non emergent issue to not have to go to ER after hours.
1249	52537	Good	CLIN			Yes	clinics
1291	52537	Fair	DENT	BH		Yes	good dental. additional mental healthcare too.
1259	52552	Good	DENT	EYE		Yes	dentist and eye doctor
1041	52537	Good	DENT			Yes	Better dentist.
1290	52537	Good	DENT			Yes	Dental
1004	52537	Good	DOCS	AVAIL		Yes	General doctor's offices available everyday.
1118	52537	Very Good	DOCS	AWARE		Yes	Better doctors who care for people.
1182	52537	Very Good	DOCS	CLIN	AVAIL	Yes	One more physician at DCH, it can be difficult to get an appointment at the clinic.
1305	52537	Very Good	DOCS	LOC	DENT	Yes	More doctors more people so more money spent in community, need a dentist
1183	52537	Very Good	DOCS	LOC		Yes	I would like to see more speciality Doctors in the area
1179	52537	Good	DOCS	MEDS		Yes	Someone that you don't feel like is merely writing a prescription when you walk in.
1180	52537	Good	DOCS	NP		Yes	More doctors or nurse practitioners.
1230	52537	Very Good	DOCS	OBGYN		Yes	If you're asking about more doctors, maybe additional providers for delivering babies.
1234	52552	Good	DOCS	SURG	LOC	Yes	MD's instead of DO's. Surgeons that take care of many types of surgeries - seems wrong to send people out of county for surgery because the local surgeon doesn't want to perform certain types of surgeries. Went to Dr. Batra for last surgery - in Centerville.
1135	52537	Fair	DOCS			Yes	Always need new people to replace those that retire.
1047	52537	Fair	DOCS			Yes	Doctors

**CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357**

ID	ZIP	Community Health Status	c1	c2	c3	Yes	Q3 - Does our community need any additional healthcare providers? If Yes, please specify what is needed?
1278	52537	Good	DOCS			Yes	More Dr.'s .. we have plenty of DO's. If health is a major issue for people .. it's important to them to be treated by a DR .. although we are lucky to have good DO's.
1100	52552	Good	DOCS			Yes	Need to increase number of doctors.
1265	52537	Good	DOCS			Yes	not more - just better qualified and experienced individuals in the positions that are here
1267	52537	Very Good	DOCS			Yes	Quality providers, not just one to fill a spot
1191	52537	Good	EMER	LOC	NP	Yes	There is always room for more providers especially for the emergency room. We do not need Rent-A-Docs coming from all over when it would be better to employ local physicians and ARNPs for this position.
1206	52537	Very Good	EYE	DENT	FP	Yes	Eye doctor, dentist, family practice and obstetrics, general surgeon
1122	52537	Fair	EYE			Yes	Eye
1009	52537	Good	EYE			Yes	Eye care.
1194	52537	Very Good	EYE			Yes	Eye dr
1345	52537	Good	FP	BH	UROL	Yes	I feel that family practice would be a great addition. As mentioned previously mental health is always a high demand and urology, ophthalmology, oncology in the county would be great additions
1070	52537	Good	FP	OBGYN	ONC	Yes	Family Practice, OB/GYN, Oncology, Urology, Pulmonology, Sports
1317	52537	Fair	FP	OBGYN		Yes	Family practice, obgyn
1210	52537	Good	FP	OBGYN		Yes	More family practice docs and OB docs
1077	52537	Good	FP	PEDS		Yes	Family doctors and pediatricians.
1269	52537	Good	FP	RHEU	CARD	Yes	family doctors, rheumatologist full time, cardiologist full time, orthopedic fulltime, urologist full time
1268	52537	Good	FP	RHEU	ORTHO	Yes	family doctors , rheumatologist, orthopedics, cardiologist, urologist full time
1304	52537	Good	FP	UROL	SURG	Yes	Family practice providers, urologist, cataract surgeon
1049	52537	Good	FP			Yes	Better family physicians.
1092	52537	Very Good	FP			Yes	Family physician
1162	52537	Good	FP			Yes	Family physician preferably MD who can give a decent physical and promote preventative healthcare
1297	52537	Good	FP			Yes	Family physicians
1051	52537	Good	FP			Yes	Family practice
1090	52537	Good	FP			Yes	Family practice
1223	52537	Good	FP			Yes	Family Practice
1299	52501	Fair	FP			Yes	more family providers. have heard people say that they have trouble getting into the clinic now due to them being booked.
1098	52537	Good	GER	CANC	SPEC	Yes	Geriatric and cancer specialists.
1128	52537	Good	GP	EMER	DENT	Yes	Just keep providing good, general healthcare and emergency service. A good, competitive dentist and optometrist would be helpful.
1148	52537	Very Good	GP	OBGYN		Yes	General practitioners, obstetrics
1338	52537	Good	GP	OBGYN		Yes	GP, OBGYN
1284	52537	Very Good	GP	SPEC		Yes	Less specialty more general practice
1012	52537	Good	GP	SURG	OBGYN	Yes	General practitioners, surgeons, OB/GYN.
1024	52537	Good	GP	SURG		Yes	General practitioners and surgeons.
1285	52537	Good	GP	WAIT	EMER	Yes	general practice at greater hours, Fridays are usually a day off for most and evening and weekends are ER only
1289	52560	Fair	GP	WAIT		Yes	general doctors- hard to get in when family is sick- don't like to have to come to e.r. unless its and actual have to situation
1036	52537	Good	GP			Yes	General MD
1346	52537	Good	GP			Yes	General Practicioners
1280	52537	Good	GP			Yes	just a General Physician
1028	52552	Poor	GP			Yes	More GP doctors.
1169	52537	Fair	HC			Yes	Additional = No; Different = YES
1176	52537	Good	HC			Yes	all around
1040	52537	Poor	HC			Yes	All kinds.
1102	52552	Good	HC			Yes	Everything
1124	52537	Very Good	HC			Yes	Just better
1168	52537	Very Good	IM	GP		Yes	Internists, general practitioners
1357	52632		INSUR	DENT	WELL	Yes	It remains challenging for Medicaid members to access dental care. So, more Medicaid dental providers is a need. Dental Wellness Plan members may also have difficulty accessing care.
1055	52537	Fair	INSUR	DISAB		Yes	We need experienced people to help self-insured people to understand their insurance coverage and the programs provided for disabled people.
1159	52537	Very Good	LOC	DOCS	AVAIL	Yes	I rarely go to a dr but when I do, I go out of the county. If there were more choices in the county I would consider going there.
1360	52537	Very Good	LOC			Yes	With Ottumwa close by, most regional needs are being met.

**CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357**

ID	ZIP	Community Health Status	c1	c2	c3	Yes	Q3 - Does our community need any additional healthcare providers? If Yes, please specify what is needed?
1292	52537	Good	MIDLVL	CLIN	URG	Yes	More mid level providers, options for urgent care and/or same day appointments
1022	52537	Very Good	NEURO	RHEU	SPORTS	Yes	Neurology, rheumatology, and sports medicine.
1065	52537	Good	NEURO			Yes	neurology
1078	52537	Fair	NONE			Yes	Don't know
1103	52537	Good	NONE			Yes	Don't know
1195	52552	Good	NONE			Yes	I'm not sure
1121	52537	Fair	NURS			Yes	Nurses
1270	52537	Very Good	OBGYN	BH	OCC	Yes	GYN, Mental Health, Speech therapy, Occupational therapy and Nutritional
1117	52537	Good	OBGYN	BH		Yes	OB/GYN, birthing center, mental health.
1220	52560	Good	OBGYN	EMER	ENT	Yes	obgyn er doctors ent dermatologist
1207	52537	Good	OBGYN	EYE	FP	Yes	Obstetrics, gynecology, eye doctor, family physician
1275	52552	Very Good	OBGYN	GER	BH	Yes	gynecology, geriatric, mental health, another pediatrician, gastroenterologist
1167	52537	Good	OBGYN	PEDS	BH	Yes	OB, pediatrics, mental health
1314	52537	Fair	OBGYN	PEDS	BH	Yes	ob/gyn, peds, mental health
1245	52537	Good	OBGYN	PEDS	DOCS	Yes	ob-gyn, pediatrician, MD
1281	52501	Good	OBGYN	PEDS		Yes	Baby doctor
1071	52537	Good	OBGYN	SURG	FP	Yes	Obgyn, general surgeons, more family practice doctors
1126	52537	Very Good	OBGYN	UROL		Yes	Gynecology and obstetrics/urology.
1287	52537	Good	OBGYN			Yes	care of woman and pregnant woman as well as all woman's health needs and concerns
1164	52537	Good	OBGYN			Yes	Deliver babies in our hospital
1006	52537	Fair	OBGYN			Yes	Gynecology.
1215		Good	OBGYN			Yes	O providers
1035	52584	Fair	OBGYN			Yes	OB
1156	52570	Good	OBGYN			Yes	OB
1209	52560	Very Good	OBGYN			Yes	Ob
1217	52537	Good	OBGYN			Yes	Ob gyn
1029	52537	Good	OBGYN			Yes	OB! See a trend?
1188	52537	Fair	OBGYN			Yes	ob/gyn
1247	52537	Very Good	OBGYN			Yes	OBGYN
1328	52537	Good	OBGYN			Yes	OBGYN
1335	52584	Very Good	OBGYN			Yes	OBGYN!!!!!!!!!!!!
1152	52537	Good	OBGYN			Yes	Obstetrics
1351	52537	Good	ONC	NEURO	SURG	Yes	ONCOLOGIST, NEUROLOGY, SURGEON
1226	52537	Good	OPT	DENT		Yes	Optometrist and dentists
1143	52537	Good	OPT			Yes	Optometrist
1343	52560	Good	OPT			Yes	optometrist
1252	52537	Good	ORTHO	EYE	SPORTS	Yes	Orthopaedics, vision, sports medicine, Dr. Porter
1106	52537	Very Poor	PEDS	BH		Yes	Child care and mental health.
1096	52552	Good	PEDS	DENT	OPHTH	Yes	Peds, dental, ophamologist, and pulmonary.
1171	52537	Fair	PEDS	DIAL	LOC	Yes	I think it is inconvenient to have to travel for a specialist especially if you are sick! We need more pediatricians for our children and I believe we need a dialysis center.
1075		Fair	PEDS	FP		Yes	pediatric and family doctors
1173	52537	Good	PEDS	FP		Yes	pediatric and family practice
1043	52537	Good	PEDS	GP		Yes	Very large gap in care provided and honed for elderly generations versus younger families, younger adults, and children. A part-time pediatrician isn't enough.
1032	52537	Very Good	PEDS	IM	SURG	Yes	Pediatrician, internist, and surgeons.
1355	52537	Good	PEDS	OBGYN		Yes	pediatric, gyn
1243	52537	Good	PEDS	OBGYN		Yes	Pediatrics, OB/GYN
1094	52537	Good	PEDS			Yes	Good pediatric doctors.
1138	52537	Good	PEDS			Yes	I think there is a need for neonatal and early childcare services.
1008	52537	Good	PEDS			Yes	Infants to age 12 care.
1204	52537	Good	PEDS			Yes	Pediatricians!
1052	52537	Good	PEDS			Yes	Pediatrics
1023	52537	Good	PRIM	ACCESS	SPEC	Yes	Some PCPs close to retirement age; need easier access to specialists.
1311	52537	Good	PRIM	ACCESS	WAIT	Yes	Additional primary care providers who are accessible can't usually get an appointment with the ones in DCH
1154	52537	Good	PRIM	BH	EMER	Yes	Primary care, Mental health, Local emergency room physicians
1363	52537	Good	PRIM	BH		Yes	Primary care physicians, psychiatrist
1141	52552	Good	PRIM	CHIRO	DENT	Yes	Primary care, chiropractor, and dental.
1030	52537	Fair	PRIM	DENT	OBGYN	Yes	Primary doctors, dentists, and gynecologists.
1340	52560	Good	PRIM	DENT		Yes	additional primary care providers, additional dentist
1214	52537	Good	PRIM	IM	PEDS	Yes	MD Primary Care or Internal Medicine. Another pediatrician.
1337	52537	Good	PRIM	ONC	OBGYN	Yes	Primary Care, Oncology and women's health services as well as mental health counselors.
1296	52537	Good	PRIM	PEDS		Yes	Absolutely need more primary care for younger generations. Even with pediatrician, there aren't enough providers for young adults and younger generations

**CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357**

ID	ZIP	Community Health Status	c1	c2	c3	Yes	Q3 - Does our community need any additional healthcare providers? If Yes, please specify what is needed?
1326	52537	Good	PRIM	WAIT	AVAIL	Yes	Primary care providers are always a need. It is difficult to be seen same or next day in most cases when illness arises. I personally rarely schedule a doctors appointment. When I call, its because myself or one of my children needs seen.
1091	52537	Good	PRIM			Yes	Primary care
1277	52537	Good	PRIM			Yes	Primary health physicians
1025	52537	Good	PRIM			Yes	Primary healthcare physician.
1339	52537	Good	SPC			Yes	specialties!!!
1274	52565	Very Good	SPEC	BH		Yes	Special needs family counselor's.
1309	52537	Good	SPEC	BH		Yes	Vein Specialists , Physical and Emotional abuse counselors, Mental provider,
1026	52537	Fair	SPEC	CANC	SURG	Yes	Specialists in all areas such as local cancer care or surgeries.
1349	52537	Good	SPEC			Yes	More specialists that are here all the time and not just on a visiting basis
1073	52537	Good	SPORTS	BH		Yes	Sports medicine physician, psychiatrist and/or psychologist, counselors
1260	52537	Good	SURG	FP	ONC	Yes	Surgeon; family physicians; oncologist;
1211	52537	Good	SURG	LOC		Yes	We need more surgical services so that people don't have to go out of town for these services.
1033	52537	Very Good	SURG	SUB		Yes	As I said before, we need a new surgeon. He has a reputation and people will not go to him. Substance abuse is on the rise and we could use some treatment programs here.
1342	52565	Good	SURG	UROL	ORTHO	Yes	General Surgery, Urology, Cataract Removal, Additional orthopedic coverage,
1080	52537	Fair	SURG			Yes	A good surgeon
1109	52537	Good	SURG			Yes	Competent surgeon.
1228	52537	Good	SURG			Yes	surgeon that is not limited, one that can operate on more things.
1229	52537	Good	SURG			Yes	Surgeons,
1063	52537	Good	UROL	OBGYN	BH	Yes	urologist OB/GYN Mental health

CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357						
ID	ZIP	c1	c2	c3	Yes	Q3 - Over the past 2 years, did you or your household receive health care services outside of your county? If yes, please specify the healthcare services you received.
1180	52537	APPEN	OTT		Yes	appendix removal in Ottumwa, Ia
1169	52537	ARTH	SURG	EYE	Yes	arthritis specialist, back surgery, eye care, dentist, surgeon consultation, pediatricians etc.
1321	52537	BAR	SURG	ORTHO	Yes	BARIATRIC SURGERY, ORTHO FOR CHILDREN
1197	52537	BH	SURG		Yes	mental health surgery
1272		BH			Yes	Mental Health
1324	52572	BH			Yes	Mental Health
1143	52537	CANC	CARD	DERM	Yes	Cancer check-up, saw heart doctor, and dermatologist surgery.
1349	52537	CANC	CARD		Yes	Cancer diagnosis/treatment Cardiac testing/treatment
1024	52537	CANC	KIRS	EYE	Yes	Skin cancer removal in Kirksville, MO; eye care at Wolf Clinic in Ottumwa, IA; and dental in Ottumwa, IA.
1093	52537	CANC			Yes	Cancer treatments.
1037	52537	CANC			Yes	Skin cancer removal.
1007	52537	CARD	DM	CANC	Yes	Cardiac/stent placement and ICU in Des Moines; prostate cancer specialist in Ottumwa.
1129	52537	CARD	EYE	REHAB	Yes	Husband - Stint, eye injections, cardio rehab. Wife - lumpectomy, radiation, breast biopsy, cancer check-up.
1009	52537	CARD	EYE		Yes	Cardiology and eye care.
1147	52537	CARD	IAMETH	CENT	Yes	A-fib - sent to Iowa Methodist and then to Centerville for therapy.
1076	52537	CARD	IP		Yes	Cardio inpatient
1296	52537	CARD	NEURO	PT	Yes	Cardiology, neurology, physical therapy, eye doctor, orthodontist, oral surgeon, imaging
1211	52537	CARD	OTT	LOC	Yes	Scopes and Cardiac Care in Ottumwa instead of Davis County for my husband. I received care at Ottumwa Regional as well due to services were not offered in Davis County
1236	52552	CARD	REHAB		Yes	Heart - angiogram. Stroke - rehabilitation
1095	52537	CARD	SURG	REHAB	Yes	Open heart surgery, cardio-pulmonary rehab.
1263	52537	CARD	SURG		Yes	Open Heart surgery
1054	52537	CARD	WAPEL		Yes	Cardiologist in Wapello County.
1234	52552	CARD			Yes	Angiogram
1080	52537	CARD			Yes	Cardiac
1064	52537	CARD			Yes	Cardiac care
1356	52560	CARD			Yes	Cardiac stent
1052	52537	CARD			Yes	Cardiology.
1011	52537	CARD			Yes	Heart
1082	52537	CHIRO	DENT		Yes	Chiropractor and dentist.
1005	52537	CHIRO	IACITY		Yes	Chiropractor at Iowa City Hospital
1260	52537	COLON	CANC	OBGYN	Yes	Colonoscopy; breast cancer checkups
1063	52537	COLON	SURG		Yes	Colonoscopy surgery on hand
1290	52537	COLON			Yes	colonoscopy
1077	52537	COLON			Yes	Elective colonoscopy.
1106	52537	COST			Yes	Cost was better and cheaper.
1142		COST			Yes	DC hospital is missing out on a lot of Amish healthcare on account of not being able to work with D.C.H. (cash discounts) on hospital bills. 25%-30% cash discount is not satisfactory on our bigger bills. Thank you for your efforts in the past.
1042		COST			Yes	When in the Davis County Hospital going to make enough money so we don't have to subsidize it?
1316	52584	DENT	BAR	SURG	Yes	Dentist, Bariatric Surgery and Follow up, Oral Surgeon, Chiropractic
1204	52537	DENT	ENT	OBGYN	Yes	dental; ears nose & throat; ob/gyn
1073	52537	DENT	EYE	OBGYN	Yes	Dentist, eye doctor, gynecologist
1107	52552	DENT	EYE	PRIM	Yes	Dental, eye, primary care, chiropractic, pharmacy.
1165	52552	DENT	EYE		Yes	Dental & Eye
1194	52537	DENT	EYE		Yes	Dental and eye
1200	52537	DENT	EYE		Yes	Dental, eye
1209	52560	DENT	EYE		Yes	Dentist, eye doctor
1222	52537	DENT	EYE		Yes	dentist, eye dr
1212	52537	DENT	LOC		Yes	Dental in surrounding counties
1071	52537	DENT	OBGYN	FAMPLAN	Yes	dental, obgyn, mammogram, family planning
1160	52537	DENT	OBGYN		Yes	Dentist, gynecologist
1124	52537	DENT	OBGYN		Yes	Dentists, child births, etc.
1185	52537	DENT	OPT	ENDO	Yes	Dental, optometry, endocrinology,
1265	52537	DENT	OPT	OBGYN	Yes	dentistry, optometry, obstetrics, plastic surgery

**CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357**

ID	ZIP	c1	c2	c3	Yes	Q3 - Over the past 2 years, did you or your household receive health care services outside of your county? If yes, please specify the healthcare services you received.
						Dentist in Ottumwa I started with when there was none in Bloomfield. Optometrist in Ottumwa approved by my insurance provider.
1089	52537	DENT	OTT	OPT	Yes	
1235	52537	DENT	PEDS	WOLF	Yes	Dentist and pediatric services Wolfe eye clinic
1270	52537	DENT	PRIM		Yes	Dentist and primary care
1303	52537	DENT	RHEU	UROL	Yes	Dental, Rheumatologist, Urologist
1255	52537	DENT			Yes	Dental
1188	52537	DENT			Yes	dental care
1285	52537	DERM	ALL		Yes	dermatology and allergist
1233	52560	DERM	DENT	CHIRO	Yes	Dermatology, Dental, Chiropractic, D.O.
1251	52537	DERM	NEURO		Yes	Dermatologist & Neurologist
1360	52537	DERM	ORTHO	EYE	Yes	Specialists for dermatology, knee repair, eye doctor
1100	52552	DERM			Yes	Dermatology.
1277	52537	DIAB	EMER		Yes	Son is type one diabetic. Received emergency care and ongoing care for this condition
1304	52537	DIAB	THYR	DM	Yes	diabetes and thyroid healthcare in Des Moines, Iowa
1135	52537	DOCS	MRI		Yes	Physician visits and MRI's.
1034	52537	DOCS	OTT		Yes	Doctor in Ottumwa - NOT CHANGING
1022	52537	DOCS	OTT		Yes	Doctor in Ottumwa.
1061	52537	DOCS	SPEC	LOC	Yes	We are a military family and recently moved to the area. We have all received a numerous amount of care from different doctors and specialists.
1287	52537	DOCS			Yes	Doctor and testing
1156	52570	DOCS			Yes	we switched doctor's
1300	52537	EMER	OBGYN		Yes	Emergency Room Visit, Gynecology visit
1187	52584	EMER	OTT		Yes	ER Services in Ottumwa
1274	52565	EMER	OTT		Yes	ER services in Ottumwa,IA hospital
1218	52537	EMER	PEDS	EYE	Yes	Emergency Room, Pediatrics, Eye Doctor, OBGYN, and Chiropractic in Wapello County
1075		EMER	PEDS	LOC	Yes	emergency room for child, children go outside of Davis County for regular doctor, wife doctors outside of County
1131	52537	EMER			Yes	Emergency room - head injury, stitches.
1153	52537	ENDO	DM	OTT	Yes	Endocrinologist in DesMoines and open MRI in Ottumwa because it's in the clinic and insurance covers more.
1317	52537	ENDO	EYE	GAST	Yes	endocrinologist, eye doctor, gastroenterologist, gynecologist
1347	52537	ENT	EYE		Yes	Ear and eye
1220	52560	ENT	OBGYN		Yes	ENT OB/GYN
1174		ENT	PEDS	OBGYN	Yes	audiologist, pediatrician, obgyn
1058	52537	ENT	SPEC	ORTHO	Yes	Ear, nose & throat specialty and broken bones.
1162	52537	ENT	SURG	OBGYN	Yes	ENT surgeries Gynecology
1027	52537	ENT			Yes	ENT
1059	52537	EYE	CANC	LOC	Yes	Eye exam. Need to be able to receive cancer treatment in Davis County.
1015	52537	EYE	CHIRO	UROL	Yes	Eye doctor, chiropractor, hearing, and urology.
1103	52537	EYE	DENT	NEURO	Yes	Eye doctor, dentist, neurologist, kidney doctor, and skin doctor.
1098	52537	EYE	DERM	DENT	Yes	Eye doctor, dermatologist, dentist, and gynecologist.
1053	52537	EYE	OBGYN	URG	Yes	Eye care, OB/GYN, urgent care, and dental.
1110	52537	EYE	RHEU		Yes	Cataract removal and rheumatologist.
1057	52537	EYE	WAPEL		Yes	Eye care in Wapello County.
1278	52537	EYE	WOLF	PROST	Yes	Eye care thru Wolfe Clinic, Dr. Shaffer for prostate,
1122	52537	EYE	WOLF		Yes	Wolf eye clinic
1217	52537	EYE			Yes	Eye care
1261	52537	EYE			Yes	Eye care
1145	52537	EYE			Yes	Eye care - cataracts removed.
1038	52537	EYE			Yes	Eye care, glasses, exam.
1307	52537	FAMPLAN	NEURO	EYE	Yes	family planning neurologist dental eye
1243	52537	FP	HOSP	OBGYN	Yes	Family doctor, Hospitalizations, Births
1207	52537	FP			Yes	Family physician
1013	67543	GALL	ENDO	CT	Yes	Gallbladder removal, upper and lower endoscopy, and cat scan.
1025	52537	GP	SPEC		Yes	General and specialist services.
1210	52537	GP			Yes	General
1137	52537	HC	LOC		Yes	All our healthcare services are outside Davis County.
1195	52552	HC			Yes	All kinds

**CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357**

ID	ZIP	c1	c2	c3	Yes	Q3 - Over the past 2 years, did you or your household receive health care services outside of your county? If yes, please specify the healthcare services you received.
1040	52537	HC			Yes	Could not take care of me for what was wrong with me.
1201	52537	HORM	SPEC	DM	Yes	Hormone Specialist in Des Moines
1010	52552	IACITY			Yes	Iowa City Hospital for 2 weeks.
1069	52537	IACITY			Yes	Son has appointments with Cleft team in Iowa City
1055	52537	IM	MEDS		Yes	Internal bleeding from medication (Plavacid).
1191	52537	KIRKS	ENT	WAIT	Yes	Went to Kirksville to Dr. Burchett the ENT because it was easier than waiting a month for him to come to the local hospital
1314	52537	LAB	OBYN	CLIN	Yes	labs, xrays, ob/gyn, walk-in clinic
1138	52537	LIV	EYE		Yes	Liver specialist and eye specialist.
1328	52537	LOC			Yes	Did not live in bloomfield.
1127	52537	LUP	ARTH		Yes	Lupus and arthritis care.
1227	52537	MAMM	DENT	ONC	Yes	mammogram, dentist, oncologist
1291	52537	MAMM	OBYN	ONC	Yes	mammogram, o.b. gyn. oncologist, dermatologist, dental
1091	52537	MAMM	SURG	JEFF	Yes	Mammogram, blood draws, surgery at Jefferson County Hospital, medical care, and dental care.
1086	52537	MAMM			Yes	Mammogram
1351	52537	MAMM			Yes	MAMMOGRAPHY
1078	52537	MERCY	DM	SURG	Yes	Lumpectomy at Mercy Hospital in Des Moines and cataract surgery
1002	52537	MERCY	DM		Yes	Mercy Hospital in Des Moines
1325	52537	MERCY			Yes	Husband needed to be transferred to Mercy for higher level of care.
1128	52537	MRI	KIRKS	SURG	Yes	Had an MRI done at Kirksville, MO and rotator cuff surgery at Lagrange, IN.
1026	52537	NEURO	DENT		Yes	Neurology and dentistry.
1043	52537	NEURO	PEDS	CARD	Yes	Neurology, pediatric cardiology, genetic counseling, medical imaging, physical therapy, and mental health services.
1256	52537	NEURO	SURG	OBYN	Yes	Neurosurgery, OBYN
1350	52537	NEURO			Yes	Neurology
1094	52537	OBYN	CARD		Yes	Gynecology and vascular doctor.
1271	52537	OBYN	COLON		Yes	gynecology and colonoscopy (not comfortable doing those with people I know or see around town)
1116	52552	OBYN	DENT	EYE	Yes	OB/GYN, dentist, eye doctor.
1035	52584	OBYN	DERM		Yes	OB and dermatologist.
1245	52537	OBYN	EYE	DENT	Yes	ob-gyn, vision, dentist
1006	52537	OBYN	EYE		Yes	Gynecology and eye care.
1240	52537	OBYN	EYE		Yes	OB Services, Eye Doctor
1313	52537	OBYN	EYE		Yes	OBYN---vision
1104	52537	OBYN	MAMM		Yes	Pap and mammogram.
1070	52537	OBYN	OTT	SURG	Yes	Daughter had a baby at Ottumwa Regional. OB/GYN at Ottumwa clinic. Two years ago she had pelvic surgery for a ruptured ovarian cyst. Local surgeon not comfortable doing that surgery.
1329		OBYN	OTT		Yes	OBYN, Ottumwa Regional
1167	52537	OBYN	PEDS	CARD	Yes	OB, pediatrics, heart health check, mental health services
1208		OBYN	PEDS	DENT	Yes	Obstetrics, pediatrician, dentist, family practice doctor, urologist
1112	52537	OBYN	PEDS	SURG	Yes	Child delivery, pediatrician, and general surgery.
1036	52537	OBYN	PEDS		Yes	OB/GYN and pediatrics.
1297	52537	OBYN	PEDS		Yes	OBYN, birth of child, and Rajni Batra- Pediatrician
1030	52537	OBYN	POD	BH	Yes	Gynecologist, foot doctor, and psychiatrist/social worker.
1117	52537	OBYN	PRIM	DENT	Yes	OB/GYN, primary care, dental, optometry, and mental health.
1161	52537	OBYN	SURG	PEDS	Yes	Ob/gyn, shoulder surgery, and all pediatric care
1319	52537	OBYN	URG	CLIN	Yes	OBYN, urgent care (walk-in clinic)
1345	52537	OBYN	VA		Yes	female annual exam, spouse receives care through the VA
1021	52537	OBYN	WAPEL	CARD	Yes	Childbirth in Wapello and heart surgery in Minnesota.
1090	52537	OBYN			Yes	GYN
1338	52537	OBYN			Yes	gynecological
1311	52537	OBYN			Yes	Gynecology
1284	52537	OBYN			Yes	Gynecologist
1339	52537	OBYN			Yes	Gynecologist
1079	52552	OBYN			Yes	OB
1183	52537	OBYN			Yes	OB
1134	52537	OBYN			Yes	OB services.
1199	52552	OBYN			Yes	ob/gyn
1203		OBYN			Yes	Ob/gyn
1229	52537	OBYN			Yes	Women's health care

**CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357**

ID	ZIP	c1	c2	c3	Yes	Q3 - Over the past 2 years, did you or your household receive health care services outside of your county? If yes, please specify the healthcare services you received.
1068	52537	ONC			Yes	Oncologist
1224	52537	OP	DENT		Yes	Outpatient Services, Dental Visits
1246	52537	OP	SURG		Yes	Outpatient surgery
1332	52537	OPHTH	DENT	ORTHOD	Yes	Ophthalmology, Dentist, Orthodontist
1230	52537	OPHTH	OTT		Yes	ophthalmologist in Ottumwa-been going there since a child
1343	52560	OPT	IM		Yes	optometrist, internal med
1083	52537	OPT	ORTHOD	OBGYN	Yes	Optometrist, orthodontist, Crohn's specialist, and OB/GYN.
1019	52537	OPT	VA		Yes	Optometrist and VA services.
1355	52537	ORHO	SURG		Yes	orthopedic surgery, shoulder replacement
1252	52537	ORTHO	DENT	EYE	Yes	Orthopaedics, dental, vision
1099	52537	ORTHO	EMER		Yes	To set a broken bone and put on a cast and emergency surgery.
1173	52537	ORTHO	ENDO	ENT	Yes	orthopedics (back specialist), endodontist, ENT
1301	52537	ORTHO	PEDS	DENT	Yes	Orthopedics (pediatric), dental
1060	52537	ORTHO	SURG	DM	Yes	June 15th I had a complete shoulder put in and a rod from my shoulder to my elbow. This was done in Des Moines, Iowa, about 100 miles away. The care was good. I was moved back to Bloomfield my 5th day and the care was great.
1359	52537	ORTHO			Yes	Joint Replacement
1151	52537	ORTHO			Yes	Orthopedic care.
1119	52537	ORTHO			Yes	Orthopedic diagnosis
1213	52537	ORTHOD	OTT		Yes	orthodontist-Ottumwa
1114	52537	OTT	DENT	EYE	Yes	Ottumwa dentist, Ottumwa eye doctor, and Iowa City eye doctor.
1004	52537	OTT	KIRKS		Yes	Ottumwa Regional in Kirksville, MO.
1330	52537	OTT	OBGYN		Yes	Ottumwa OB/GYN
1192	52584	OTT	PEDS		Yes	Ottumwa, pediatric,
1249	52537	OTT			Yes	Dr. Dodson, Ottumwa
1023	52537	OTT			Yes	Husband works in Ottumwa, work related incident had to go for care. Had to go to 2 places before receiving any treatment. Very unsatisfactory.
1074	52501	OTT			Yes	Ottumwa regional health center
1298	52501	OTT			Yes	Ottumwa Regional Health Center
1215		PAIN			Yes	Pain management- interventional
1190	52537	PEDS	ALL		Yes	Pediatrics & allergy before Graff came to town.
1202	52537	PEDS	DENT	OPT	Yes	pediatrician, dentist, optometrist, orthopedic
1149	52537	PEDS	OBGYN	OTT	Yes	Our pediatrician and gynecology is located in Ottumwa.
1085	52584	PEDS	OBGYN		Yes	Pediatrics and OB/GYN.
1067		PEDS	ORTHO	CHIRO	Yes	Pediatric, Orthopedics, Chiropractic
1170	52584	PEDS	OTT		Yes	Peds doctor in Ottumwa
1312	52501	PEDS	OTT		Yes	peds, I live in Ottumwa
1176	52537	PEDS	PRIM	OBGYN	Yes	pediatric care for children and primary care for women
1214	52537	PEDS	PRIM	OTT	Yes	We feel that it is very important that our children's primary care physician be a Pediatrician. For years he DC Hospital refused to put one on staff and we established care in Ottumwa. We were very encouraged to see Dr. Graff join the Hospital and did see her 1 time, when our provider was on vacation. I would definitely see her again if needed. This was a big step in the right direction for the hospital. We also receive dental care in Ottumwa.
1226	52537	PEDS			Yes	Child specialist
1130	52537	PEDS			Yes	NICU
1216		PEDS			Yes	Pediatric
1257	52537	PEDS			Yes	Pediatrician
1045	52537	POLK	CLIN	ORTHOD	Yes	Polk County - RA Clinic and orthopedic surgeon; Wapello - ophthalmology, optometrist, and urology; Pella Hospital - total hip replacement.
1340	52560	PRIM	DENT		Yes	primary care, dentist
1049	52537	PRIM	DM	PRIM	Yes	Primary care physician in Des Moines - spouse. Primary care at Pella Regional in Ottumwa - myself.
1141	52552	PRIM	EMER	DENT	Yes	Primary care, emergency room, specialist physician care, outpatient services, dentist, eye doctor, and chiropractor.
1159	52537	PRIM	EYE	DENT	Yes	primary care doctor, eye doctor and dentist
1144	52537	PRIM	OBGYN		Yes	General physical including pap.
1346	52537	PRIM	OTT		Yes	Primary Care doctor for many years located in Ottumwa

**CHNA Round #2 Community Feedback 2015 - Davis Co, IA N=357**

ID	ZIP	c1	c2	c3	Yes	Q3 - Over the past 2 years, did you or your household receive health care services outside of your county? If yes, please specify the healthcare services you received.
1241	52537	PRIM			Yes	Primary care
1342	52565	PRIM			Yes	Primary Care
1096	52552	PULM	CARD	EYE	Yes	Pulmonary, cardiac, eye, and dental.
1179	52537	SLEEP	ENT		Yes	Sleep study, ENT
1171	52537	SPEC	CHIRO	EYE	Yes	Our family see specialty doctors, chiropractor, and the eye doctor outside of the community.
1033	52537	SPEC			Yes	Our daughter saw a specialist at ICHC and so did our son.
1254	52537	SPEC			Yes	referred to a specialist
1294	52537	SPEC			Yes	specialist
1029	52537	STAFF	RAD	OBGYN	Yes	MRI - great staff on the daily i.e., registration/radiology staff. ER visit regarding OB - not good/professional services by this female doctor by any means was carelessness.
1353	52537	SUB			Yes	addiction recovery
1056	52537	SURG	CARD		Yes	CA surgery and heart stint.
1062	52537	SURG	DM		Yes	Saw a surgeon in Des Moines
1337	52537	SURG	MERCY	IACITY	Yes	Surgery at Mercy in Iowa City
1267	52537	SURG	ORTHO	DENT	Yes	Surgeries, yearly checkup, ortho, dental, eye appts
1288	52536	SURG	PRIM	CLIN	Yes	Surgery, physician office visits, flu clinic
1109	52537	SURG			Yes	General surgery procedure, D.C. hospital poor.
1157	52537	TURB	PEDS	OBGYN	Yes	Turbinate reduction, neonatal care
1289	52560	UI	CARD		Yes	University of Iowa- daughter has heart issues
1031	52537	UI	NEURO		Yes	U of I Neurology (wife)
1276	52537	UI	OTT	OBGYN	Yes	Uof I ottumwa OB
1065	52537	UI	PEDS		Yes	services through the University of Iowa Childrens Hospital
1051	52537	UROL	DENT	DERM	Yes	Urology, dentistry, dermatology, optometry, eye, and ear, nose, throat.
1206	52537	UROL	OBGYN	FP	Yes	Urology, obstetrics and gynecology, family practice, pediatrics, dental, vision, and general surgery
1113	52537	VA	OTT	IACITY	Yes	VA Ottumwa, VA Iowa City hospital, Iowa Heart Center in Ottumwa.
1017	52537	VA	OTT		Yes	VA in Ottumwa, IA
1014	52537	VA			Yes	VA
1175	52584	VB			Yes	VanBuren county
1309	52537	VEIN	CLIN		Yes	Vein Clinic

# CHNA Report Contact :



***Vince Vandelaar, MBA***  
**VVV Consultants LLC**  
***Adjunct Professor / Professional Healthcare  
Marketing and Strategic Planning Consulting  
Services***

***601 N Mahaffie, Olathe, KS 66061  
(913) 302-7264 (C)  
VVV@VandelaarMarketing.com***

***LinkedIn: vandelaar  
Website: VandelaarMarketing.com***