Carroll County
Public Health
Prevent. Promote. Protect.

2023

COMMUNITY HEALTH ASSESSMENT

CARROLL COUNTY PUBLIC HEALTH

Prepared By:

Carroll County Public Health

The Stephen Group, LLC.

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Introduction

Background

Carroll County Public Health is a Local Public Health Department operating under the guidance of the Carroll County Board of Health and Carroll County Board of Supervisors. As of July 1, 2022, Carroll County Public Health transitioned from a hospital-based organization to a county-based local public health agency. The program is operated from day to day by two co-directors and one program coordinator.

The intention of this assessment is to be able to better understand the health needs of the residents with Carroll County. The assessment will be used to identify interventions of selected health needs of the community.

Methods

Primary data collection

Community Survey

The voluntary and anonymous web-based Community Health Assessment (CHA) survey was available to all county residents from November 1st through December 31st, 2022. The survey links were advertised on all Carroll County Public Health social media sites. Flyers containing a QR code to the survey were posted at various businesses throughout the county, mailed with county employee's pay stubs, and mailed to each county residents with their water bill. A link to the survey was emailed through numerous email listservs with participation from the Carroll Area Chamber of Commerce, City of Carroll, Carroll Community School District, Kuemper Catholic Schools, St. Anthony Regional Hospital, McFarland Clinic, Manning Regional Healthcare Center, and other businesses within the county. Paper copies of the survey were available to the public at the Carroll County Public Health office, Carroll County Courthouse, and Carroll Library. We received 145 survey responses, one of which was a paper survey submission.

Participants were asked a series of demographic information. Following the demographic section, participants were asked within the survey to identify key issues they feel should be addressed. Key areas included promoting health living, preventing injury, preventing epidemics, protecting against environmental hazards, preparing for, and responding to public health emergencies, and strengthening health infrastructure. See Exhibit A for Community Health Assessment Survey.

Community Interviews

Interviews were conducted either in person or over the phone by Maggie Pauley, Carroll County Public Health Program Coordinator, in January and February 2023. Interviews were conducted with representatives from local hospitals and clinics, nonprofit health and human services organizations, and other community stakeholders. Twelve individuals were interviewed through this process. See Exhibit C and D for stakeholder interview questions and answers and community stakeholder interview participants.

Secondary data

Secondary data was collected from a variety of sources to demonstrate county composition regarding race, sex, age, and social and economic factors. Sources include the United States Census Bureau, County Health Rankings, Iowa Youth Survey, Iowa Department of Health and Human Services, etc.

Demographics

Carroll County lies in the West Central part of the State, bounded to the north by Sac and Calhoun Counties on the East by Greene County, South by Audubon and Guthrie County, and on the West by Crawford County. The 2020 US Census Bureau figures show the population to be 20,760 persons living within an area approximately 569 square miles.[1] See Exhibit B for Carroll County Map.

According to the US Census Bureau, the population of Carroll County is comprised of 93.8% White, 3.4% Hispanic, 1.4% Black, 0.5% Asian, and 0.4% American Indian/Alaska Native.[2] Of county residents, 0% are not proficient in English. The average life expectancy for residents within Carroll County is 79.7 years.

According to the County Health Rankings, Carroll County is comprised of 20.9% of residents who are 65 years and old which is higher than the state average of 17.7%. Again, Carroll County has another higher percent of residents who are 18 years or younger with 24.7% where the state average is 23.1%.[3]

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[1] https://www.census.gov/quickfacts/fact/dashboard/carrollcountyiowa,US/PST045222
[2] https://www.census.gov/quickfacts/fact/dashboard/carrollcountyiowa,US/PST045222
[3] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2022

2023 Initiatives

Through the Community Health Assessment (CHA), the following initiatives have been identified as the focus of the Community Health Improvement Plan (CHIP) for Carroll County Public Health.

Transportation

Through our community interviews and the public community health assessment survey, many residents reported difficulty accessing transportation within our county. This lack of transportation resources prevented them from accessing healthy food, exercise opportunities, and access to their primary care provider. Carroll County Public Health will work towards reducing transportation barriers within the county.

Nutrition and Physical Exercise

From the CHA survey we learned that 14.7% of participants reported that in the past 4 weeks, they had problems with work or daily life due to their physical health and 59% reported their physical health was only average (see Exhibit F). Carroll County Public Health will implement and promote programs that support residents in achieving a healthy diet and increased physical activity.

Dedicated Health Navigation

Carroll County Public Health will implement and promote health navigation services to county residents to address their individual needs. These services may include referrals to providers or specialists, referral to community assistance programs, resource guidance and education, healthy living education, etc.

Mental Health and Substance Use Disorder

Mental health and substance use disorders continue to need to be addressed as has been identified in previous CHA CHIP reports within Carroll County. Approximately 19% of participants from the CHA survey reported in the past 4 weeks having problems with work or daily life due to any emotional problems, such as feeling depressed, sad, or anxious. Whereas 51.4% of survey participants reported that their current mental health was only average (see Exhibit F). Tobacco and alcohol use among minors and adults in Carroll County and the state of Iowa are higher than the national rates. Secondary data analysis supports these findings. Carroll County Public Health will work towards addressing mental health and substance use disparities.

Social and Economic Factors

The County Health Rankings & Roadmaps (CHR&R) were reviewed for Carroll County social and economic factors. CHR&R is a program of the University of Wisconsin Population Health Institute. The CHR&R program provides data, evidence, guidance, and examples to build awareness of the multiple factors that influence health and support leaders in growing community power to improve health equity. The Rankings are unique in their ability to measure the health of nearly every county in all 50 states, and are complemented by guidance, tools, and resources designed to accelerate community learning and action[4]

Iowa's counties are ranked according to social and economic factors with 1 being the county with the best factors to 99 for the county with the poorest factors. In 2023, Carroll County was noted in the top quartile as the 22nd healthiest county of all 99 Iowa counties by County Health Rankings.[5] In 2022, Carroll County was ranked the 21st healthiest county.

Income and Employment[6]

The median household income for Carroll County was $65,600 in 2023 which is equal to the median income for the State of Iowa and slightly below the median income for the United States at $69,700. Examining poverty levels for families with children, shows that 10% of families with children under the age of 18 in Carroll County experience poverty in 2020. Compared to 12% at the state level and 17% nationally. Additionally, 14% of children lived in a household headed by a single parent in Carroll County, compared to 21% state-wide and 25% nationally.

Unemployment is measured as the percentage of population ages 16 and older unemployed but seeking work. In Carroll County, Iowa, 3.1% of people ages 16 and older were unemployed but seeking work. This is 1.1% lower than the State of Iowa (4.2%) and 2.3% lower than the United States (5.4%).

Household Assistance

In the State of Iowa Western Service Area, 41.2% of residents received food assistance from Supplemental Nutrition Assistance Program (SNAP) in 2022. In Carroll County, 31.4% of the residents receive SNAP assistance in 2022.[7]

In 2019, 11.8% of Carroll County residents filing income taxes qualified for the Earned Income Tax Credit (EITC).[8] The EITC is a federal tax credit for low- and moderate-income working people.

The percentage of students eligible for the free or reduced-price meal program is one indicator of socioeconomic status. In Carroll County in 2020, 34.3% of the students qualified for this program, below

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[4] https://www.countyhealthrankings.org/about-us

[5] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2022

[6] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023

[7] https://publications.iowa.gov/42687/1/F1%20-%20Monthly%20Report_December2022.pdf

[8] https://datacenter.kidscount.org/data/tables/1241-earned-income-tax-credit#detailed/2/any/false/1729,37,871,870,573,869,36,868,867,133/any/2689

the statewide percent of 41.8%.[9] The National School Lunch Program (NSLP) had nearly 100,00 schools/institutions serve school lunches to 29.6 million students every day, per pandemic.[10]

The federal Women Infants and Children Program (WIC) provides supplemental nutrition support for infants and young children. In Carroll County in 2020, 30.4% of the children aged birth to four who received WIC support, higher than the statewide percentage of 25.2% in Iowa.[11] In an average month of 2020 in the United Staes, an estimated 12.5 million people were eligible to receive WIC benefits. Of that group, 6.3 million people participated in the program, meaning the share of eligible people who participated in WIC (the coverage rate) was 50 percent.[12]

Education[13]

High school graduation rates are determined by the percent of ninth grade students in public schools who graduate in four years. The graduation rate of 95% in Carroll County in 2019 was higher than both the graduation rate of 91% for the State of Iowa an 87% for the United States.[14] The national goal for high school graduation in four years established in Healthy People 2030 is 90.7%, and as of 2019 a rate of 85.8% had been achieved nationwide. For the 2020-2021 school year, Iowa's high school graduation rate was 90%, which is one of the highest rates in the nation.[15] Carroll County has significantly surpassed both the current state average and the Healthy People 2030 goal.

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[9] https://datacenter.aecf.org/data/tables/1244-free-or-reduced-price-lunch-eligibility?loc=17&loct=2#detailed/2/any/false/574,1729,37,871,870,573,869,36,868,867/any/2695

[10] https://schoolnutrition.org/about-school-meals/school-meal-statistics/#eligibility

[11] https://datacenter.kidscount.org/data/tables/1240-children-receiving-women-infants-and-children#detailed/2/any/false/574,1729,37,871,870,573,869,36,868,867/any/2687

[12] https://www.fns.usda.gov/wic/eligibility-and-program-reach-estimates-2020

[13] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023

[14] https://nces.ed.gov/programs/coe/indicator/coi/high-school-graduation-rates#:~:text=In%20school%20year%202019%E2%80%9320,%E2%80%9311%20(79%20percent)

[15] Healthy Iowans: Iowa State Health Assessment June 2022

Health Behaviors

Health behaviors are actions individuals take that affect their health. They include actions that lead to improved health, such as eating well and being physically active, and actions that increase one's risk of disease, such as smoking, excessive alcohol intake, and risky sexual behavior.

Diet and Exercise[16]

Nutrition and Weight Status

Adult obesity is measured by the percentage of the adult population (age 18 and older) that reports a body mass index (BMI) greater than or equal to 30 kg/m2 (age-adjusted). In Carroll County, Iowa, 35% of adults had a BMI of 30 or greater which is below the percentage of the State of Iowa (37%) and 3% greater than the average across the country (32%).

All Nutrition Related Issues

Carroll County scored 9.3 out of a possible 10 on the food environment index, which includes access to healthy foods and food insecurity. The average value across the country was 7.0. The average percentage of Americans experiencing food insecurity, defined as the percentage of population who lack adequate access to food, is 12%. Food insecurity in Carroll County is half that at 6% of people who did not have a reliable source of food. The state percentage at 7% is also well below the national percentage at 12%. Additionally, 2% of county residents are low income and do not live close to a grocery store, limiting their ability to access healthy foods, while both the state and national percentage is at 6%.[17] Due to inflation, food today is 8% more expensive on average than it was a year ago. In Iowa, a family of four - two adults and two children - can expect to spend an average of $8,885 on food in 2022.[18]

All Physical Activity Related Issues

In Carroll County, 75% of people lived close to a park or recreation facility, lower than the average for Iowa (79%) and well below the average across the country (84%). 22% of adults reported participating in no physical activity outside of work which is closely aligned with the general percentage for Iowa (23%) and the United States (22%).

Alcohol and Drug Use[19]

Healthy People 2030 focuses on preventing drug and alcohol misuse and reports little to no detectible change in reducing the proportion of people aged 21 years and over as well as those under 21 who engaged in binge drinking in the past month. Carroll County is slightly above Iowa (25%) and well above the rest of the country (19%) with 26% of adults reporting binge or heavy drinking. From the 2021 Youth Survey in Carroll County, over 50% of 6th through 11th graders stated they binge drank within the past 30 days. [20]

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[16] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023

[17] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023

[18] Healthy Iowans: Iowa State Health Assessment June 2022

[19] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023

[20] https://iowayouthsurvey.idph.iowa.gov/Portals/20/IYS_Reports/2/81386aba-4b4f-4afe-9763-ffcd7ed86539.pdf

Table G41: Alcohol use (among students who reported having at least 1 drink in the past 30 days), by grade

	6th Grade					
	State			**County**		
	Yes	No	#	Yes	No	#
Drank beer in past 30 days	54%	46%	328	*	*	*
Drank "any other alcohol" in past 30 days	63%	37%	330	*	*	*
Binge drinking in past 30 days	18%	82%	340	*	*	*

	8th Grade					
	State			**County**		
	Yes	No	#	Yes	No	#
Drank beer in past 30 days	54%	46%	947	71%	29%	17
Drank "any other alcohol" in past 30 days	77%	23%	954	100%	0%	15
Binge drinking in past 30 days	28%	72%	974	53%	47%	17

	11th Grade					
	State			**County**		
	Yes	No	#	Yes	No	#
Drank beer in past 30 days	58%	42%	2,365	71%	29%	42
Drank "any other alcohol" in past 30 days	87%	13%	2,379	93%	7%	42
Binge drinking in past 30 days	51%	49%	2,398	52%	48%	42

Notes: See appendix for question wording. # = Number of students responding to item

Overall, drug use rates in Iowa are comparable to the rest of the nation. Drug use among youth in Iowa is higher compared to other states, but similar to national average. Opioid drugs, including prescription painkillers and illicit street drugs, are a leading cause of overdoses in Iowa and across the nation. Opioid related deaths jumped nearly 36% in Iowa from 2019 to 2020, from 157 to 213, respectively.[21]

Tobacco Use (Adult & Youth)

Healthy People 2030 notes that smoking harms nearly every organ in the body and increases the risk of heart disease, stroke, lung diseases, and many types of cancer. Its goals for reduction in cigarette smoking in adults is improving and is met or exceeded in adolescents.

18% of adults are current cigarette smokers in Carroll County which is slightly higher than the statewide (17%) and national (16%) average .[22] An average of 4.6% of students in grades 6 through 11 reported smoking cigarettes in the past 30 days.[23]

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[21] Healthy Iowans: Iowa State Health Assessment June 2022
[22] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023
[23] https://iowayouthsurvey.idph.iowa.gov/Portals/20/IYS_Reports/2/81386aba-4b4f-4afe-9763-ffcd7ed86539.pdf

Table G46: Types of tobacco and nicotine products used in the past 30 days (all participants), by grade

6th Grade

	State				County			
	Yes	No	Never used	#	Yes	No	Never used	#
Smoked cigarettes	<1%	1%	99%	14,570	1%	2%	97%	158
Smoked menthol cigarettes	<1%	1%	99%	14,569	0%	3%	97%	158
Smoked cigars	<1%	1%	99%	14,567	1%	2%	97%	158
Used smokeless tobacco	<1%	1%	99%	14,570	0%	3%	97%	158
Smoked tobacco using a water pipe or hookah	<1%	1%	99%	14,568	0%	3%	97%	158
Used an e-cigarette	1%	3%	96%	14,569	2%	3%	96%	158
Used a heated (heat-not-burn) tobacco product	<1%	1%	99%	14,574	0%	1%	99%	158

8th Grade

	State				County			
	Yes	No	Never used	#	Yes	No	Never used	#
Smoked cigarettes	1%	3%	96%	16,352	5%	2%	93%	174
Smoked menthol cigarettes	1%	3%	96%	16,351	5%	2%	93%	174
Smoked cigars	<1%	3%	96%	16,350	4%	3%	93%	174
Used smokeless tobacco	1%	3%	96%	16,352	4%	3%	93%	174
Smoked tobacco using a water pipe or hookah	<1%	3%	96%	16,352	3%	3%	93%	174
Used an e-cigarette	4%	6%	90%	16,349	8%	6%	86%	174
Used a heated (heat-not-burn) tobacco product	1%	1%	98%	16,358	4%	2%	94%	174

11th Grade

	State				County			
	Yes	No	Never used	#	Yes	No	Never used	#
Smoked cigarettes	3%	7%	90%	13,012	8%	12%	81%	146
Smoked menthol cigarettes	3%	7%	90%	13,012	6%	13%	81%	146
Smoked cigars	2%	8%	90%	13,012	4%	15%	81%	146
Used smokeless tobacco	2%	8%	90%	13,011	4%	15%	81%	146
Smoked tobacco using a water pipe or hookah	1%	9%	90%	13,011	1%	18%	81%	146
Used an e-cigarette	13%	11%	76%	13,007	23%	17%	60%	146
Used a heated (heat-not-burn) tobacco product	1%	3%	96%	13,012	2%	5%	93%	146

Question: In the past 30 days, have you…? # = Number of students responding to item

Mental Health

The current ratio of mental health providers within Carroll County is 1:860 which is an improvement to the 1:1,200 reported in the 2019 Community Health Needs Assessment. However, this ratio remains significantly below Iowa (1:530) and national (1:340) ratios. In 2020, the ratio of population to mental health providers for the state was 610:1 compared to the national average of 270:1.[24] In Carroll County, adults reported that their mental health was not good on 4.2 of the previous 30 days and 14% of adults reported experiencing poor mental health for 14 or more of the last 30 days.[25]

Students participating in the 2021 Iowa Youth Survey indicated significantly higher rates of feeling sad or hopeless compared to the state. Similarly, significantly higher rates of suicidal ideation were noted. Health People 2030 indicates that little to no detectible change has been made in the goal to increase the proportion of adolescents with depression who get treatment. These indicators of mental health status among adults and youth indicate the continued need to improve access to care.

According to the Iowa HHS State Health Assessment (SHA), some Iowans struggle to find mental health care. There are far fewer mental health providers in Iowa than the national average. In 2020, the ratio of population to mental health providers for the state was 610:1 compared to the national average of 270:1. In some cases, mental health distress leads to suicide, which is Iowa's ninth highest cause of death overall and second highest cause of death for people ages 15-39.[26]

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[24] Healthy Iowans: Iowa State Health Assessment June 2022
[25] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023
[26] Healthy Iowans: Iowa State Health Assessment June 2022

Chronic Conditions

Chronic diseases are described as health conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living or both. Chronic diseases such as heart disease, cancer, and diabetes are the leading causes of death and disability in the United States. They are also leading drivers of the nation's $4.1 trillion in annual health care costs.[27]

Cancer

The 2023 Iowa Cancer Registry Report shows 135 new cancer cases in Carroll County. The new cancer cases on a statewide level are highest for Breast (14%); Prostate (13.2%) and Lung (13%). The report estimates 45 cancer deaths will occur in 2023 in Carroll County, a projection based on mortality data provided by the Iowa Department of Health and Human Services. According to the report, the number of cancer survivors, defined as people who are currently living with or having had cancer, is growing. The 2023 Iowa Cancer Registry Report states there are an estimated 164,270 cancer survivors from 1973-2018 within Iowa, 1,210 of those survivors are in Carroll County.[28]

Heart Disease

In Carroll, the average estimated heart disease death rate for All Races/Ethnicities, All Genders, Ages 35+ for 2018-2020 is 311.5. This is lower than the statewide average of 330.4 and the national average of 319.5.[29]

Stroke

In Carroll County, the average estimated stroke death rate for All Races/Ethnicities, All Genders, Ages 35+ for 2018-2020 is 60.7. This is lower than the statewide average of 62.8 and well below the national average of 73.1.[30]

Diabetes

The percentage of adults aged 20 and above with diagnosed diabetes is 8% in Carroll County which slightly lower than the statewide and national percentage both at 9%.[31] Diabetes services are available to county residents through the St. Anthony Regional Hospital's Chronic Care Center.

COPD

Chronic Obstructive Pulmonary Disease, or COPD, is a group of diseases that cause airflow blockage and breathing problems. It includes emphysema and chronic bronchitis. CPD plagues 16 million Americans and while there is no cure, it can be treated.[32] Carroll County has an age adjusted prevalence of 5.6%

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[27] https://www.cdc.gov/chronicdisease/about/index.htm

[28] https://shri.public-health.uiowa.edu/wp-content/uploads/2023/02/cancer-in-iowa-2023.pdf

[29]https://nccd.cdc.gov/DHDSPAtlas/reports.aspx?geographyType=county&state=IA&themeId=1&filterIds=9,2,3,4,7 &filterOptions=1,1,1,1,1#report

[30]https://nccd.cdc.gov/DHDSPAtlas/reports.aspx?geographyType=county&state=IA&themeId=3&filterIds=9,2,3,4,7 &filterOptions=1,1,1,1,1#report

[31] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023

[32] https://www.cdc.gov/copd/index.html

among adults aged 18 years or older, which is aligned with the statewide prevalence according to the CDC County-level Estimates of COPD.[33]

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[33] https://www.cdc.gov/copd/data-and-statistics/county-estimates.html

Access to Care

Access to care means "the timely use of personal health services to achieve the best health outcomes."[34] This consists of four components: coverage, services, timeliness, and workforce. [35] Access to care includes the ability to navigate the health care system, find care locally, and pay for services. When someone lacks one or more of these abilities, disparities may emerge. In Iowa, much of Iowa is rural, meaning that resident's physical location is a barrier they may have to overcome to receive needed medical care.

Access to Primary Care

There is currently one primary care physician per 1,170 people in Carroll County. This ratio is lower than the state or national ratios at 1,360:1 and 1,310:1, respectively. There was one other primary care provider per 830 people within Carroll County, this is slightly higher than the statewide (800:1) and national (810:1) ratio. "Other primary care provider" includes nurse practitioners (NPs), physician assistants (PAs), and clinical nurse specialists who can provide routine and preventative care.[36]

Within Carroll County, there are three healthcare organizations to serve county residents: St. Anthony Regional Hospital, McFarland Clinic, and Manning Regional Healthcare Center. Between these three healthcare facilities, Carroll County residents have access to primary care providers, specialists, surgeons, rehabilitation centers, a cancer center, inpatient and outpatient mental health, and several other services that is not typically available in rural Iowa communities of similar population size.

Access to Dental/Oral Health Services or Providers

There was one dentist per 1,590 people registered in Carroll County as compared to 1,430:1 statewide and 1,380:1 nationally.[37] Within Carroll County, there are eleven dental clinics which include dental, periodontal, and orthodontic professionals.[38] In 2020, Iowa had around 1,436 residents for every dentist. Which is an 8% decrease from 1,561 per dentist in 2016. Iowa had the 22nd lowest ratio of dentists per population compared to other states. The U.S. average was 1399:1.[39]

Health Insurance

In Carroll County, Iowa, 6% of adults under age 65 did not have health insurance. These are below both the statewide (7%) and national (12%) percentages. Similarly, 2% of children under the age of 19 in Carroll County were uninsured, which again is lower than the state at 3% and the nation at 5%.[40] In 2019, nearly 5% of Iowa's population was living without health insurance. People of color, people with less education, and people with lower incomes are more likely to be uninsured in Iowa.[41]

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[34] https://www.ahrq.gov/research/findings/nhqrdr/chartbooks/access/elements.html

[35] http://www.healthypeople.gov/2020/topics-objectives/topic/Access-to-Health-Services

[36] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023

[37] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023

[38] https://www.newopp.org/media/cms/Carroll_County_Resource_Directory_2_3D22BC3C423FE.pdf

[39] Healthy Iowans: Iowa State Health Assessment June 2022

[40] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023

[41] Healthy Iowans: Iowa State Health Assessment June 2022

Transportation

Western Iowa Transit (WIT) offers door-to-door transportation services in six counties including Carroll. 84% of the workforce drives alone to work, lower than statewide (79%) and national (73%) percentages. However, the mean travel time to work is 14 minutes. Only 12% of Carroll County workers drive alone to work and commute more than 30 minutes each way, which is significantly lower that statewide (21%) and national (37%) percentages.[42]

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[42] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023

Prevention

Child Abuse and Neglect

In 2021 there were a total of 208 assessed reports of child neglect and abuse in Carroll County and 209 in 2022. Within the state of Iowa in 2021 there were 35,593 assessed reports of child neglect and abuse and 34,512 in 2022.[43] In Carroll County, residents are served by the Carroll County Council for the Prevention of Child Abuse dba Family Resource Center.

Motor Vehicle Injuries

In 2022, there were 13 deaths from motor vehicle crashes per 100,000 people in Carroll County, which is higher than the state (11) and national (12) rate per 100,000 people.[44] Comparing the numbers from 2021 to 2022, there was a 4.8% decrease in motor vehicle fatalities in the state of Iowa. In 2021, there were 356 fatalities and in 2022 there were 339 fatalities in the state. Nationally, in 2021 there were 42,939 and in 2022 there were 42,795 fatalities.[45]

Immunization[46]

Child immunization data includes the percent of children (birth to 2 years old) that received the recommended doses of 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella and 4 PCV vaccines and the 4:3:1:3:3:1:4 series by age 24 months (2 years old). Carroll County has a high immunization rate at 77.3% as compared to the state immunization rate of 70.9% for this age.

Adolescent immunization in Carroll County in 2022 is high at 81.7% while the state immunization rate for this age range in 71.3%. Adolescent immunization data includes the percent of 13–15-year-olds that received the recommended doses of 3 Hepatitis B, 1 Meningococcal, 2 MMR, 1 Td/Tdap, and 2 Varicella vaccines and the 3:1:2:1:2 series.

Adult (19 years and older) immunization data includes the percent of Iowa residents that received the recommended doses of Tdap, HPV, Pneumococcal, Hepatitis A, and Zoster vaccine, based on recommended age groups. In 2022, the percent of adults with one Tdap vaccines was 46.0% for the county and 43.7% for the state. The percent of adults with a complete HepA series was 15.7% for the county and 14.5% for the state. The percent of adults with a complete HepB series was 30.3% for the county and 32.9% for the state. The percent of adults with a complete HPV series was 42.8% for the county and 39.8% for the state. The percent of adults with a complete Zoster series was 25.2% for the county and 24% for the state.[47] National administrative data from 2018 showed that 32% and 31-40% of adults completed HepA or HepB vaccine series, respectively.[48]

[43] https://hhs.iowa.gov/reports/child-abuse-statistics

[44] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023

[45] https://crashstats.nhtsa.dot.gov/Api/Public/ViewPublication/813428

[46] https://tracking.idph.iowa.gov/Health/Immunization

[47] https://data.idph.state.ia.us/t/IDPH-DataViz/views/VaccineProfile/AdultVaccines?%3Aembed=y&%3AisGuestRedirectFromVizportal=y

[48] https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8853527/#:~:text=Real%20world%20studies%20using%20administrative,HepB%20%5B11%2C%2012%5D.

HPV vaccine uptake in the United States remains lower than the Healthy People 2020 goal of 80% coverage. A national survey conducted in 2018 found that 70% of girls aged 13–17 years had received at least one dose of the HPV vaccine, and 54% had received all doses in the series based on recommendations published in late 2016. Among boys, 66% of those aged 13–17 years received at least one dose and 49% received all recommended doses.[49] In Iowa, it was reported in 2022 that 47.9% of female and 44.6% of male adolescents age 13-15 years have a complete HPV vaccine series.[50] In Carroll County, 39.9% of 13-15 year old adolescents have a complete HPV vaccine series as of 2022. [51]

STD, HIV/AIDS

The CHR&R defines Sexually Transmitted Infections as the number of newly diagnosed chlamydia cases per 100,000 people. In Carroll County, 267.8 new cases of chlamydia were diagnosed per 100,000 people. This is significantly lower when compared to 478.5 at the state level and 481.3 at the national level per 100,000 people. 85 of every 100,000 residents (age 13 and above) are living with a diagnosis of HIV in Carroll County, well below the state (111) and national (380) number of every 100,000 resident living with a diagnosis of human immunodeficiency virus.[52]

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[49] https://www.cdc.gov/std/stats18/STDSurveillance2018-full-report.pdf

[50] https://tracking.idph.iowa.gov/Portals/14/userfiles/10/Immunization%20Summaries/2022%20HPV%20Vaccine%20Data%20Summary.pdf

[51] https://tracking.idph.iowa.gov/Health/Immunization/Human-Papillomavirus-Vaccine/Human-Papillomavirus-Vaccine-Data

[52] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023

Vulnerable Populations

Maternal and Child Health

In Carroll County, Iowa, 5% of babies had low birth weights (under 5 pounds, 8 ounces) which is a few points lower than the percent for Iowa (7%) and nationally (8%). In 2021, live births in Carroll County were 12.9 per 1,000. [53] Teen births are measured as the number of births per 1,000 female population ages 15-19. In Carroll County, there were 12 teen births per 1,000 females ages 15-19, well below that of the state of Iowa (16) and nationally (19).[54]

Older Adults

According to the Iowa Department on Aging, current projections show that Iowa's population of adults aged 65+ will constitute 19.9% of the state's population by 2050.[55] The state census shows that 20.9% of people in Carroll County are 65 or older which is higher than the statewide percentage of 17.7%.[56] Additionally, the percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening is 51% which is higher than statewide (47%) and national (37%) percentages.[57]

In 2021, there was 461 emergency department visits for fall related injuries, 71 hospitalizations for fall related injuries, and 6 fall-related injury deaths in Carroll County.[58] Health People 2030 have identified objectives related to falls among older adults, including the reduction of fall related deaths, are getting worse.[59]

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[53] https://tracking.idph.iowa.gov/people-community/Reproduction-and-Birth/Live-Births-and-Deaths
[54] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023
[55] https://iowaaging.gov/about
[56] https://www.census.gov/quickfacts/fact/table/carrollcountyiowa,IA/AGE775221#AGE775221
[57] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023
[58] https://tracking.idph.iowa.gov/Health/Injuries/Fall-Related-Injuries/Fall-Related-Deaths-Data
[59] https://health.gov/healthypeople/objectives-and-data/browse-objectives/injury-prevention/reduce-fall-related-deaths-among-older-adults-ivp-08

Environmental Health

Lead Poisoning

Iowa requires all children to be tested at least once before the age of six. Evaluating blood lead testing results on an annual basis contributes to the overall understanding of the impact and burden of lead poisoning in Iowa and can also be helpful for healthcare providers and local public health agencies for program assessment and improvement. Iowa requires all children to be tested at least once before the age of six. Evaluating blood lead testing results on an annual basis contributes to the overall understanding of the impact and burden of lead poisoning in Iowa and can also be helpful for healthcare providers and local public health agencies for program assessment and improvement.

Measure Descriptions:

- The Children Tested is the number of children under age six tested for blood lead level during the year.
- The Children with Confirmed Elevated BLL is the number of children under age six tested for blood lead level (BLL) during the year and had a confirmed result greater than or equal to 10 mcg/dL.
- The Percent of Children with Confirmed Elevated BLL is the percent of children tested that had Confirmed Elevated BLL result.

The following graph depicts the lead testing results in Carroll County from 2021, which is the most recent data available: [60]

Carroll County - 2021
Number of Children Tested by Blood Lead Level Category
Selected Age Group: **All**

Blood Lead Level	Confirmed	Unconfirmed
0 to < 3.5	23	372
3.5 to < 10	Suppressed	8
>= 10	Suppressed	Suppressed

State of Iowa - 2021
Number of Children Tested by Blood Lead Level Category
Selected Age Group: **All**

Blood Lead Level	Confirmed	Unconfirmed
0 to < 3.5	6,849	42,807
3.5 to < 10	692	1,675
>= 10	269	65

Carroll County - 2021
Percent of Children Tested by Blood Lead Level Category
Selected Age Group: **All**

Blood Lead Level	Confirmed	Unconfirmed
0 to < 3.5	5.69%	92.08%
3.5 to < 10	Suppressed	1.98%
>= 10	Suppressed	Suppressed

State of Iowa - 2021
Percent of Children Tested by Blood Lead Level Category
Selected Age Group: **All**

Blood Lead Level	Confirmed	Unconfirmed
0 to < 3.5	13.08%	81.76%
3.5 to < 10	1.32%	3.20%
>= 10	0.51%	0.12%

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[60] https://tracking.idph.iowa.gov/Health/Lead-Poisoning/Annual-Blood-Lead-Testing-Children-Under-6/Children-Tested

Radon

The second leading cause of lung cancer in the United States is from exposure to Radon. Iowa is ranked #1 in the nation for the percentage of homes tested above the Environmental Protection Agency action level of 4 pCi/l. [61] Radon is a colorless, odorless radioactive gas that comes from the natural breakdown (radioactive decay) of radium, which is itself a decay product of uranium. Uranium and radium are both common elements in the soil. In Carroll County, the Carrol County Environmental Health Department offers free radon testing kits to all county residents.

Water Quality

Wells tested in Carroll County are higher than the state average in contamination with Coliform Bacteria and Nitrates. One of the major factors in well water contamination is the construction of the well. Total Coliform and E-coli bacteria testing provides an indication of the bacteriological quality of the drinking water. The presence of Coliform bacteria in a drinking water supply indicates contamination from surface or shallow subsurface sources such as soil, septic or cesspool leakage, animal feedlot runoff, treatment failures, etc. Their presence also suggests that disease-causing organisms may enter the drinking water supply in the same manner. Nitrate is used in fertilizer and is found in sewage and wastes from human and/or farm animals and generally gets into drinking water from those activities. Excessive levels of nitrate in drinking water have caused serious illness and sometimes death in infants less than six months of age. The serious illness in infants is caused because nitrate is converted to nitrite in the body. Nitrite interferes with the oxygen carrying capacity of the child's blood.[62] No community water system in Carroll County have reported a health-based drinking water violation.[63]

Wastewater

On-Site wastewater treatment and disposal systems are a very common treatment option in the United States. About one-fourth of the total population is served by onsite wastewater systems, and about one-third of new construction employs this type of treatment. A conservative estimate is that anywhere from 10 to 30 percent of onsite systems are failing annually. Nationwide, this represents over 2.5 million malfunctions, resulting in more than 700 million gallons of improperly treated wastewater being discharged each day. Clean Water Act goals are not being met partly because of improperly operating onsite wastewater systems. New technologies are being applied to onsite systems, resulting in higher treatment levels, greater reliability, and more flexibility than ever before. The EPA has finally conceded that septic systems are viable, permanent solutions to wastewater treatment and disposal.[64]

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[61] https://www.carrollcountyiowa.gov/pview.aspx?id=21005&catid=0
[62] https://www.carrollcountyiowa.gov/pview.aspx?id=21009&catid=0
[63] https://www.countyhealthrankings.org/explore-health-rankings/iowa/carroll?year=2023
[64] https://www.carrollcountyiowa.gov/pview.aspx?id=21006&catid=0

Emergency Response[65]

County Emergency Management Coordinators and agencies have a vital role in preparation for, response to, and recovery from disasters. County emergency management agencies are the backbone of the state's emergency management system. They provide coordination of local resources and work in partnership with the Homeland Security and Emergency Management Department (HSEMD) to ensure the emergency management and response communities have adequately planned, and are well-equipped, trained, and exercised.

Carroll County Emergency Management's mission is to provide for the protection of life and property by assisting its citizens to prepare for, respond to, recover from, and prevent or reduce the effects of a disaster - whether it is natural or manmade. Emergency Management involves local, state, and federal government agencies, as well as volunteer organizations and businesses working as a coordinated team. These organizations operate together during times of disaster using the County-Wide Multi-Hazard Emergency Operations Plan as their guide. This plan incorporates all resources within the county, as well as those made available through mutual aid agreements with other counties, and those resources available from the State or Federal Governments.

Network Infrastructure and Communication

Emergency Management involves local, state, and federal government agencies, as well as volunteer organizations and businesses working as a coordinated team. These organizations operate together during times of disaster using the County-Wide Multi-Hazard Emergency Operations Plan as their guide. This plan incorporates all resources within the county, as well as those made available through mutual aid agreements with other counties, and those resources available from the State or Federal Governments.

Personnel and Volunteers

Entity	Address	Phone Number	Emergency Number
Carroll County Sheriff	114 E 6th St. Carroll, IA 51401	(712) 792-4393	9-1-1
Carroll County Ambulance	203 E 3rd St. Carroll, IA 51401	(712) 792-1335	9-1-1
Carroll County Public Health Department	608 N. Court St., Suite A Carroll, IA 51401	(712) 775-2660	
Carroll County Emergency Management	114 E. 6th St. Carroll, Iowa 51401	(712) 775-2166	
City of Carroll Police Department	112-18 E 5th St. Carroll, IA 51401	(712) 792-3536	9-1-1
Carroll Fire Department	801 N. Bella Vista Dr. Carroll, IA 51401	(712) 775-2028	9-1-1
Templeton Fire Department	117 South Main St. Templeton, Iowa, 51463	(712) 669-3411	9-1-1
Manning Fire Department	815 6th St.	(712) 655-2496	9-1-1

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[65] https://www.carrollcountyiowa.gov/pview.aspx?id=20963&catid=0

	Manning, IA 51455		
Manning Police Department	309 Elm St. Manning, IA 51455	(712) 655-2200	9-1-1
Breda Fire Department and Ambulance	121 N 1st St. Breda, IA 51436	(712) 673-2829	9-1-1

Summary of CHA Survey and Community Interviews

Community Interview Background

Community stakeholder interviews were conducted in January 2023. Eleven of the interviews were in person, one interview was held over the phone. Interviewees were identified by their position and dedication to the improvement of the overall health of the county. A mixture of professions, specialty fields, genders, and ages were taken into consideration during the participant selection. All participants were volunteer and were provided the interview questions prior to their agreeing to participate in the interview. See Exhibit D for list of Community Stakeholder Interview Participants.

Community Interview Methods

The interview questions were intentionally structured to promote natural conversation between interviewer, Maggie Pauley, and the participants. On average, the interviews lasted around 45 minutes per person. The interviews were voice recorded after being granted the participant's consent for later transcription and notes were taken throughout the interviews. While the participants are identified, the answers have been compiled to maintain some aspect of anonymity. See Exhibit C for the list of questions and subsequent answers that are listed in no particular order.

Community Interview Key Summary of Findings

Transportation was identified as a resource that is lacking with Carroll County. Some examples given were transportation to and from medical appointments, the grocery store, community health promotion events, the library, etc. By offering or identifying a transportation resource, Carroll County Public Health would be promoting healthier lifestyles and potentially addressing food insecurities.

Mental health was also identified as a service that has its challenges within the county. While there are numerous mental health professionals that currently serve our county residents, it is not met without its challenges. Wait times, lack of staff, limited after school/work hours appointments, financial assistance, stigma, and inpatient availability were identified as a few barriers that could be addressed to improve the mental health resources within our county.

Dedicated health navigation was a key resource that was discovered through the interview process that would be a direct impact on improving our county's health. Recurring discussions during the interviews proved that while our county has several resources and programs available to our residents, not every person or professional is aware of how to connect our residents to the services they require. It was also noted that some are not aware of the resources that are currently available, this is leading to services being unnecessarily recreated and duplicated. A health navigation program would act as the central hub to direct residents and professionals to the resources or programs that they are in search of. This would also aid in identifying resources or programs that the county may not already have and could benefit from.

Progress On Priorities Since Previous CHA 2019 (St. Anthony Regional Hospital)[66]

The following significant needs were identified in the last assessment as those that would be addressed through an implementation strategy or community health improvement plan.

Access to Care and Health Education

In response to concern that area residents do not feel they had adequate knowledge on how to access quality health service, the following steps were taken:

- Developed updated lists of area service providers and other resources
- Organized community health fairs and events for vulnerable populations, including older adults, children, and adolescents
- Promoted community service opportunities to address needs of target populations
- Provided support groups for individuals affected by priority health issues

Cancer – Treatment and Prevention

- Development of new cancer center and associated resources for the community
- Community runs for cancer to raise awareness and funds, in collaboration with partners that include Carroll Chamber and Carroll Cancer Crusaders
- Participation in Iowa Cancer Consortium event on HPV

Chronic Disease Management

- Ongoing leadership and participation in collaborative activities and events in the community that promote healthy living and chronic disease prevention and management (see details in health education and obesity)

Mental Health Services

- Community education on Adverse Childhood Experiences (ACES)
- Provider and parent education on child development and mental health
- Caregiver education on self-care
- Mentoring programs
- Community- and school-based mental health promotion programs and events for middle school and high school students
- Bereavement support groups

Nutrition and Exercise

- Community gardens and gardening classes for adults, children, and adolescents
- Community events promoting physical activity and education about healthy eating and drinking water

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[66] https://www.stanthonyhospital.org/webres/File/legal/Community%20Health%20Needs%20Assessment%202019%20Final.pdf

- Healthy eating education and healthy weight management programs for general population and vulnerable populations, including older adults, women, children, and people with disabilities
- Diabetes prevention and management services and programs
- Accredited diabetes education
- Participation in the Live Healthy Iowa initiative and Carroll County Wellness Coalition
- WIC clinics
- Fall prevention education and activities for older adults and providers

Substance Abuse -Tobacco and Alcohol

- Provider education
- Addiction support groups
- Community- and school-based programs to prevent substance use among adults, children, and adolescents
- Responsible beverage service training
- Drivers' education presentations regarding alcohol use
- Tobacco cessation "Quit Line"
- Tobacco/nicotine free work policy with area workplaces and with area childcare providers
- Collaboration with healthcare providers to implement 2A and R-ask, advise, refer system

Transportation

- Collaborate to increase transportation to healthcare services for vulnerable populations, including older adults, people with disabilities and individuals covered by Medicaid
- Community fundraiser to fund travel vouchers for low-income individuals Vaccinations
- Community education about HPV and promotion of vaccination
- Radio and newspaper ads, social media posts to increase HPV and meningitis immunization rates
- Community-based immunization clinics

Comments and Feedback

Anyone looking to provide their comments or feedback on Carroll County Public Health's 2023 Community Health Assessment is encouraged to submit their written comments to:

Carroll County Board of Health

608 N. Court St.

Carroll, IA 51401

(712) 775-2660

This Community Health Assessment was written by Carroll County Public Health in partnership with The Stephen Group. The Stephen Group is a business and government consulting agency.

Exhibit A – Community Health Assessment Survey

Every five years in Iowa, local boards of health lead a community-wide discussion about their community's health needs and decide what can be done about them. We are asking that you take 1-2 minutes to complete the following survey, which will be used to inform Carroll County's health needs. The survey is anonymous. Your participation is much appreciated.

1. **My zip code is:** _____

2. **What was your assigned sex at birth:**

   ☐ Male   ☐ Female

3. **What gender do you currently identify as:**

   ☐ Male   ☐ Female

   ☐ Transgender   ☐ Other

4. **My age is:**

   ☐ Under 18   ☐ 65-74

   ☐ 18-24   ☐ 75-84

   ☐ 25-45   ☐ 85 and over

   ☐ 46-64

5. **My yearly income is:**

   ☐ Less than $25,000   ☐ $75,000-$100,000

   ☐ $25,000-$50,000   ☐ Over $100,000

   ☐ $50,000-$75,000

6. **My race/ethnicity is: (select all that apply)**

   ☐ African American   ☐ Hispanic

   ☐ American Indian or Alaska Native ☐ Other

   ☐ Asian   ☐ I prefer not to answer.

   ☐ Caucasian

7. **What type of health insurance coverage do you have? (choose all that apply)**

   ☐ No Health Insurance

   ☐ Insurance through employer (through your job or the job of a family member)

   ☐ Private health insurance

   ☐ Government program (Medicare, Medicaid (Iowa Health and Wellness Plan.), etc. Other (Please specify.)

   _____

8. Overall how would you rate your physical health?

☐ Excellent

☐ Average

☐ Somewhat Poor

☐ Poor

☐ Not Sure

9. Overall how would you rate your mental health?

☐ Excellent

☐ Average

☐ Somewhat Poor

☐ Poor

☐ Not Sure

10. During the past 4 weeks, have you had any problems with your work or daily life due to your physical health?

☐ Yes

☐ No

☐ Not Sure

11. During the past 4 weeks, have you had any problems with your work or daily life due any emotional problems, such as feeling depressed, sad or anxious??

☐ Yes

☐ No

☐ Not Sure

The following survey questions are based on factors important for the health and well-being of everyone in your community. Please take a few minutes to complete this survey and help the board determine what is needed in Carroll County and to set an order for action by indicating the level of importance of these service needs.

12. Promoting Healthy Living: includes such health services as the prevention and treatment of addictive behaviors (tobacco, alcohol, other drugs, gambling) and chronic disease (mental health, heart disease and stroke, cancer, asthma, diabetes, arthritis, etc.); elderly wellness; family planning; infant, child & family health; nutrition; oral health; physical activity; and pregnancy & birth.

How important are these services? (Check one.)

☐ Very Important   ☐ Important   ☐ Not Important

If you answered very important or important, which services should be considered a priority for attention? (Check all that apply.)

☐ Tobacco   ☐ Arthritis

☐ Alcohol and other Drugs   ☐ Elderly Wellness

☐ Gambling   ☐ Family Planning

☐ Mental Health   ☐ Infant, Child, and Family Health

☐ Heart Disease and Stroke   ☐ Nutrition

☐ Cancer   ☐ Oral Health

☐ Asthma   ☐ Physical Activity

☐ Diabetes   ☐ Pregnancy and Birth

Other (Please specify.)

_____

Of the services you chose, please list the 3 that you believe are the most important for your community. Then mark the column that best describes your community's situation.

1. _____

2. _____

3. _____

For the first service that you chose, do you believe that your community....
☐ has available services and meets existing needs
☐ has available services but fails to meet needs
☐ services are not available to meet needs

For the second service that you chose, do you believe that your community....
☐ has available services and meets existing needs
☐ has available services but fails to meet needs
☐ services are not available to meet needs

For the third service that you chose, do you believe that your community....

☐ has available services and meets existing needs

☐ has available services but fails to meet needs

☐ services are not available to meet needs

13. **Preventing Injuries:** Includes such services as brain injury prevention, disability, Emergency Medical Services, intentional injuries (violent & abusive behavior, suicide), occupational health & safety, and unintentional injuries (motor vehicle crashes, falls, poisoning, drowning, etc.).

How important are these services? (Check one.)

☐ Very Important ☐ Important ☐ Not Important

If you answered very important or important, which services should be considered a priority for attention? (Check all that apply.)

☐ Brain Injury ☐ Occupational Health and Safety

☐ Disability ☐ Motor Vehicle Crashes

☐ Emergency Medical Services ☐ Falls

☐ Violent and Abusive Behavior ☐ Poisoning

☐ Suicide ☐ Drowning

Other (Please specify.)

_____

Of the services you chose, please list the 3 that you believe are the most important for your community. Then mark the column that best describes your community's situation.

1. _____

2. _____

3. _____

For the first service that you chose, do you believe that your community....

☐ has available services and meets existing needs

☐ has available services but fails to meet needs

☐ services are not available to meet needs

For the second service that you chose, do you believe that your community....

☐ has available services and meets existing needs

☐ has available services but fails to meet needs

☐ services are not available to meet needs

Community Health Needs Assessment Survey

For the third service that you chose, do you believe that your community....
- ☐ has available services and meets existing needs
- ☐ has available services but fails to meet needs
- ☐ services are not available to meet needs

14. Preventing Epidemics: Includes such services as child and adult immunizations/vaccinations and surveillance and control of infectious diseases including: HIV/AIDS, influenza, sexually transmitted diseases, tuberculosis (TB) and other reportable diseases.

How important are these services?　　(Check one.)

☐ Very Important　　　　☐ Important　　　　☐ Not Important

If you answered very important or important, which services should be considered a priority for attention? (Check all that apply.)

- ☐ Disease Investigation
- ☐ Disease Control & Surveillance
- ☐ HIV/AIDS
- ☐ Sexually Transmitted Disease
- ☐ Tuberculosis (TB)
- ☐ Immunizations/Vaccinations

Other (Please specify.)

_____

Of the services you chose, please list the 3 that you believe are the most important for your community. Then mark the column that best describes your community's situation.

1. _____
2. _____
3. _____

For the first service that you chose, do you believe that your community....
- ☐ has available services and meets existing needs
- ☐ has available services but fails to meet needs
- ☐ services are not available to meet needs

For the second service that you chose, do you believe that your community....
- ☐ has available services and meets existing needs
- ☐ has available services but fails to meet needs
- ☐ services are not available to meet needs

For the third service that you chose, do you believe that your community....
- ☐ has available services and meets existing needs
- ☐ has available services but fails to meet needs
- ☐ services are not available to meet needs

15. **Protecting against Environmental Hazards**: Includes such concerns as drinking water protection, food safety, food waste, hazardous materials, hazardous waste, healthy homes, lead poisoning, nuisances such as noise and litter, onsite wastewater systems, radon, radiological health, soil erosion, and vector (disease-carrying animals and insects) control.

How important are these services? (Check one.)

☐ Very Important   ☐ Important   ☐ Not Important

If you answered very important or important, which services should be considered a priority for attention? (Check all that apply.)

☐ Drinking Water Protection   ☐ Lead Poisoning

☐ Food Safety   ☐ Radon

☐ Food Waste   ☐ Vector (disease-carrying animals and insects) Control

☐ Hazardous Materials   ☐ Radiological Health

☐ Hazardous Waste   ☐ Soil Erosion

☐ Healthy Homes

☐ Wastewater
Other (Please specify.)

_____

Of the services you chose, please list the 3 that you believe are the most important for your community. Then mark the column that best describes your community's situation.

1. _____

2. _____

3. _____

For the first service that you chose, do you believe that your community....
☐ has available services and meets existing needs
☐ has available services but fails to meet needs
☐ services are not available to meet needs

For the second service that you chose, do you believe that your community....
☐ has available services and meets existing needs
☐ has available services but fails to meet needs
☐ services are not available to meet needs

For the third service that you chose, do you believe that your community....

☐ has available services and meets existing needs

☐ has available services but fails to meet needs

☐ services are not available to meet needs

16. Prepare for, Respond to & Recover from Public Health Emergencies: Includes such concerns as communication networks, emergency planning, emergency response, individual preparedness, recovery planning, risk communication (communication before, during, and after a crisis), and surge capacity (the capacity to continue normal duties during emergencies).

How important are these services? (Check one.)

☐ Very Important   ☐ Important   ☐ Not Important

If you answered very important or important, which services should be considered a priority for attention? (Check all that apply.)

☐ Communication Networks

☐ Emergency Planning

☐ Emergency Response

☐ Recovery Planning

☐ Individual Preparedness
Other (Please specify.)

☐ Risk Communication (communication before, during, and after a crisis)

☐ Surge Capacity (the capacity to handle an emergency along with regular services)

_____

Of the services you chose, please list the 3 that you believe are the most important for your community. Then mark the column that best describes your community's situation.

1. _____

2. _____

3. _____

For the first service that you chose, do you believe that your community....

☐ has available services and meets existing needs

☐ has available services but fails to meet needs

☐ services are not available to meet needs

For the second service that you chose, do you believe that your community....

☐ has available services and meets existing needs

☐ has available services but fails to meet needs

☐ services are not available to meet needs

For the third service that you chose, do you believe that your community....

- [ ] has available services and meets existing needs
- [ ] has available services but fails to meet needs
- [ ] services are not available to meet needs

17. Strengthen the Health Infrastructure (the framework to support being healthy): includes topics such as access to quality health services, community engagement, evaluation, food security, food systems, food and nutrition assistance (SNAP, WIC), health facilities, health insurance, medical care, organizational capacity, planning, quality improvement, social determinants (e.g., education & poverty levels), transportation, and workforce (e.g., primary care, dental, mental health, public health).workforce development, and an equal opportunity to live a long, healthy life regardless of income, education, or ethnic background.

How important are these services? (Check one.)

- [ ] Very Important
- [ ] Important
- [ ] Not Important

If you answered very important or important, which services should be considered a priority for attention? (Check all that apply.)

- [ ] Access to quality health services
- [ ] Community Engagement
- [ ] Evaluation
- [ ] Food Security
- [ ] Food Systems
- [ ] Food and Nutrition Assistance (SNAP, WIC)
- [ ] Health Facilities

- [ ] Equal Opportunity
- [ ] Health Insurance
- [ ] Medical Care
- [ ] Transportation
- [ ] Workforce Development
- [ ] Workforce (such as primary care, dental, mental health, public health
- [ ] Education & Poverty Levels

Other (Please specify.)

_____

Of the services you chose, please list the 3 that you believe are the most important for your community. Then mark the column that best describes your community's situation.

1. _____

2. _____

3. _____

For the first service that you chose, do you believe that your community....

☐ has available services and meets existing needs

☐ has available services but fails to meet needs

☐ services are not available to meet needs

For the second service that you chose, do you believe that your community....

☐ has available services and meets existing needs

☐ has available services but fails to meet needs

☐ services are not available to meet needs

For the third service that you chose, do you believe that your community....

☐ has available services and meets existing needs

☐ has available services but fails to meet needs

☐ services are not available to meet needs

18. Where do you access health related information? Please check as many as applies.

☐ Healthcare Provider   ☐ Blogs

☐ Television Programs   ☐ Online Video

☐ Facebook   ☐ CDC

☐ Twitter   ☐ Friends

☐ Instagram   ☐ Family

☐ LinkedIn

☐ YouTube

Other (Please specify.)

_____

19. What would a healthier county look like?

20. What do you see as barriers to prevent your county from becoming healthier?

Thank you for completing this survey! If you have any questions, please contact the Carroll County Public Health at 712-775-2660 or carrollcountypublichealth@carrollcountyiowa.org

Exhibit B – Carroll County Map
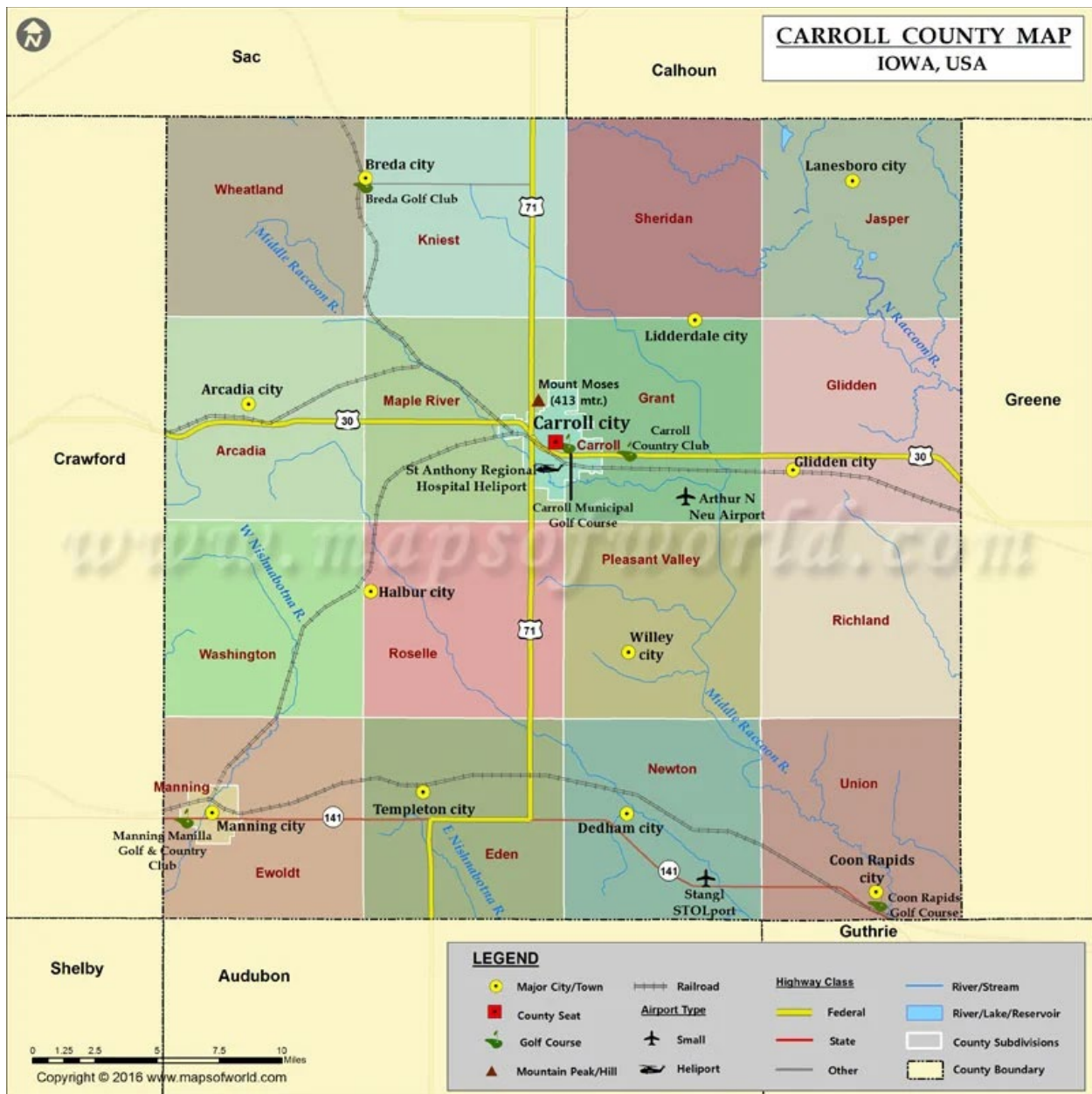
EXHIBIT C – Community Stakeholder Interview Questions and Answers

Questions	Answers
What are the major health issues/priorities in the community or county that Carroll County Public Health needs to focus on to improve the health in our community?	Addiction. Mental health. Obesity. Diet and exercise. Smoking and vaping cessation. Food insecurities. Care coordination. Transportation. General health knowledge/education related to personal care. Dental health. Chronic conditions. Supporting available resources and promoting awareness. Safe housing.
What reasons led you to choose those disparities?	Services available but participation and initiative is lacking from community. Educating on foundations of proper diet and exercise. Additional education or lessons through school programming. Stigma around accessing services specifically mental health. Reimbursement issues for providers. Gap between Medicaid coverage and financial situations where adults might not meet qualifications for assistance.
What are the factors that contribute to these health issues?	Transportation and accessibility to healthcare and grocery stores. Financial. Knowledge of available resources. Cultural. Language barriers. Misinformation from social media/internet. Socioeconomic disparities. Stigma. Fear of where/how to start living healthier. Lack of parent/guardian participation in children's health. Few resources to support middle-aged adults.

Questions	Answers
What are the strengths that this community has for improving the health of its residents?	Free physical activities (bike trails, tennis courts, pickleball courts). Counseling services that include school outreach. Urgent care. Leadership. Food resource options. Variety of providers and specialties.
Are there things that already exist in our community that we can capitalize on to make/sustain improvement?	Affordable housing. Dental – accepting state insurance. Mental health inpatient services. IV hydration outside of hospital services to combat dehydration. Continuous outreach efforts. Maternal health. Available equipment for newborns (car seats, cribs, etc.). Healthy living program promotion (5210 project). Program/service collaboration rather than duplicating services.
Where do you (or your clients) go for help with your health problems or health information?	Hospital/clinics. Urgent care EAP benefits. Massage therapy. Chiropractic. Acupuncture. Holistic medicine. Social media. Facebook groups. Internet searches. Pediatrician. Friend/family recommendations.
Do you (or your client) face challenges accessing needed medical care?	Ambulance services. Staffing challenges. Increased wait times. Limited appointments after school/work hours. Specialty physicians – urology, neurology, allergy. Dental anesthesia for routine cleanings. Financial. Urgent care's limited hours. Insurance bias (Medicaid). Transportation. Uninsured or underinsured. Accurate resource directing.

Questions	Answers
	Lack of home-based services.
Are there particular populations that you believe are not well served by area health and social service organizations?	Homeless. Hispanic. Behaviorally challenged. Autism. Those who are underinsured but do not meet qualifications to apply for/receive additional assistance. Chronic mental health/substance use disorder patients. Elderly.
What are the priority issues that you feel Carroll County Public Health should focus on to improve the community's health?	Care coordination/health navigation. Public resource guides that are continually updated. Resource alignment across the county to avoid overlap. Business outreach for employees to better understand public health and available resources. Promoting Carroll County Public Health as a resource hub for community members. Mental health advocacy. Transportation. Substance use disorders (drugs, alcohol, tobacco). Food insecurities. Influenza vaccinations. Dental clinics. Communication efforts (community activities, vaccinations, healthier lifestyle options). Religious organization outreach with resources. Podiatry Clinics.
Do you have any recommendations actions Carroll County Public Health could take to improve the health of the community?	Dedicated health navigation efforts. Exposure of healthy food options to children in schools School health class outreach. New student packets with county resource information. Expert information (physician interviews on current issues). Resource specific pamphlets for schools/businesses/close contacts to distribute (food options, healthcare, transportation, exercise). Evaluate extent of disparities within the county. Walkability study. Grants to promote healthy behavior. QR code advertisement for specific resource options. Email listservs to promote resources/events/health information. Work with school/daycare newsletters to promote health resources.

Questions	Answers
	Join the Wellness Coalition. Utilize volunteers.
Any additional thoughts or comments?	Broadcast public health services and available resources across various channels/avenues to inform the community that CCPH is a resource hub that they can utilize.

EXHIBIT D – Community Stakeholder Interview Participants

Allen Anderson, CEO, St. Anthony Regional Hospital

Kelley Mead, Director of Nursing, New Hope

Christy Jenkins, Behavioral Health Director, New Opportunities

Paula Spies, Health Services Director, New Opportunities

Dr. Casey Berlau, Superintendent, Carroll Community School District

Cindy Duhrkopf, Area Director, Partnerships 4 Families

Ashleigh Wiederin, Outreach Coordinator, St. Anthony Regional Hospital Birth Place

Amber Snyder, Healthy Aging Coordinator, Elderbridge Agency on Aging

Glenna Nockels, Clinical Supervisor, Plains Area Mental Health

Julie Hodne, CHA Coordinator, Manning Regional Healthcare Center

Dr. Carly Quam, DO, Family Medicine, McFarland Clinic

Dr. John Evans, MD, Family Medicine, McFarland Clinic

EXHIBIT F – Responses from Community Health Assessment Survey (n=145)

Zip Code: (n=145)

50058 – 7 (4.8%)
51401 – 111 (76.6%)
51430 – 2 (1.4%)
51436 – 7 (4.8%)
51440 – 8 (5.5%)
51443 – 2 (1.4%)
51444 – 3 (2.1%)
51451 – 0 (0%)
51452 – 0 (0%)
51455 – 1 (0.7%)
51459 – 0 (0%)
51463 – 4 (2.8%)

1. Survey Language (n=145)
   a. English – 144 (99.3%)
   b. Spanish – 1 (0.7%)
2. Assigned sex at birth: (n=142)
   a. Male – 36 (25.4%)
   b. Female – 106 (74.6%)
3. What gender do you currently identify as: (n=144)
   a. Male – 36 (25%)
   b. Female - 107 (74.3%)
   c. Transgender - 0 (0%)
   d. Other - 1 (0.7%)
4. My age is: (n=144)
   a. Under 18 – 0 (0%)
   b. 18-24 – 3 (2.1%)
   c. 25-45 – 73 (50.7%)
   d. 46-64 – 52 (36.1%)
   e. 65-74 – 13 (9.3%)
   f. 75-84 – 3 (2.1%)
   g. 85 and over – 0 (0%)
5. My yearly income is: (n=145)
   a. Less than $25,000 – 12 (8.3%)
   b. $25,000 – $50,000 – 51 (35.2%)
   c. $50,000 – $75,000 – 24 (16.6%)
   d. $75,000 – $100,000 – 22 (15.2%)
   e. Over $100,000 – 36 (24.8%)

6. My race/ethnicity is: (n=145)
    a. African American – 0 (0%)
    b. American Indian or Alaska Native - 0 (0%)
    c. Asian - 0 (0%)
    d. Caucasian – 137 (94.5%)
    e. Hispanic – 2 (1.4%)
    f. Other – 2 (1.4%)
    g. I prefer not to answer – 4 (2.8%)
7. What type of health insurance coverage do you have: (n=149)
    a. No health insurance – 3 (2%)
    b. Insurance through employer (through your job or the job of a family member) - 112 (75.2%)
    c. Private health insurance – 7 (4.7%)
    d. Government program (Medicare, Medicaid (Iowa Health and Wellness Plan) - 26 (17.4%)
    e. Other – 1 (0.7%)
8. Overall, how would you rate your physical health: (n=144)
    a. Excellent – 53 (36.8%)
    b. Average – 85 (59%)
    c. Somewhat poor – 6 (4.2%)
    d. Poor – 0 (0%)
    e. Not sure - 0 (0%)
9. Overall, how would you rate your mental health: (n=144)
    a. Excellent – 58 (40.3%)
    b. Average – 74 (51.4%)
    c. Somewhat poor – 12 (8.3%)
    d. Poor – 0 (0%)
    e. Not sure - 0 (0%)
10. During the past 4 weeks, have you had any problems with your work or daily life due to your physical health: (n=143)
    a. Yes – 21 (14.7%)
    b. No – 120 (83.9%)
    c. Not sure – 2 (1.4%)
11. During the past 4 weeks, have you had any problems with your work or daily life due to any emotional problems, such as feeling depressed, sad or anxious: (n= 142)
    a. Yes – 27 (19%)
    b. No – 113 (79.6%)
    c. Not sure – 2 (1.4%)
12. Promoting Healthy Living: includes such health services as the prevention and treatment of addictive behaviors (tobacco, alcohol, other drugs, gambling) and chronic disease (mental health, heart disease and stroke, cancer, asthma, diabetes, arthritis, etc.); elderly wellness; family planning; infant, child & family health; nutrition; oral health; physical activity; and pregnancy & birth. How important are these services: (n=145)
    a. Very important – 107 (73.8%)

b. Important – 36 (24.8%)
c. Not important – 2 (1.4%)
13. If you answered very important or important, which services should be considered a priority for attention (check all that apply): (n=981)
    a. Tobacco – 42 (4.3%)
    b. Alcohol and other drugs – 77 (7.8%)
    c. Gambling – 29 (3%)
    d. Mental health – 121 (12.3%)
    e. Heart disease and stroke – 62 (6.3%)
    f. Cancer – 82 (8.4%)
    g. Asthma – 27 (2.8%)
    h. Diabetes – 58 (5.9%)
    i. Arthritis – 27 (2.8%)
    j. Elderly wellness – 62 (6.3%)
    k. Family planning – 51 (5.2%)
    l. Infant, child, and family health – 82 (8.4%)
    m. Nutrition – 76 (7.7%)
    n. Oral health – 48 (4.9%)
    o. Physical activity – 75 (7.6%)
    p. Pregnancy and birth – 61 (6.2%)
    q. Other – 1 (0.1%)
14. Of the services you chose, please list the three that you believe are the most important for your community. Then mark the column that best describes your community's situation:
    a. Tobacco
        i. Has available services and meets existing needs - 0
        ii. Has available services but fails to meet needs - 0
        iii. Services are not available - 0
        iv. No selection - 3
    b. Alcohol and other drugs
        i. Has available services and meets existing needs - 7
        ii. Has available services but fails to meet needs - 20
        iii. Services are not available - 7
        iv. No selection - 16
    c. Gambling
        i. Has available services and meets existing needs - 0
        ii. Has available services but fails to meet needs - 2
        iii. Services are not available - 0
        iv. No selection - 5
    d. Mental health
        i. Has available services and meets existing needs - 10
        ii. Has available services but fails to meet needs - 55
        iii. Services are not available - 21

          iv.   No selection - 20

e. Heart disease and stroke
   - i.   Has available services and meets existing needs - 6
   - ii.   Has available services but fails to meet needs - 3
   - iii.   Services are not available - 0
   - iv.   No selection - 6

f. Cancer
   - i.   Has available services and meets existing needs - 12
   - ii.   Has available services but fails to meet needs – 6
   - iii.   Services are not available - 1
   - iv.   No selection - 24

g. Asthma
   - i.   Has available services and meets existing needs - 1
   - ii.   Has available services but fails to meet needs - 1
   - iii.   Services are not available - 0
   - iv.   No selection - 3

h. Diabetes
   - i.   Has available services and meets existing needs - 3
   - ii.   Has available services but fails to meet needs - 2
   - iii.   Services are not available - 0
   - iv.   No selection - 5

i. Arthritis
   - i.   Has available services and meets existing needs - 0
   - ii.   Has available services but fails to meet needs - 0
   - iii.   Services are not available - 0
   - iv.   No selection -4

j. Elderly wellness
   - i.   Has available services and meets existing needs - 4
   - ii.   Has available services but fails to meet needs - 6
   - iii.   Services are not available - 3
   - iv.   No selection - 14

k. Family planning
   - i.   Has available services and meets existing needs - 1
   - ii.   Has available services but fails to meet needs - 6
   - iii.   Services are not available - 2
   - iv.   No selection - 5

l. Infant, child, and family health
   - i.   Has available services and meets existing needs - 17
   - ii.   Has available services but fails to meet needs - 10
   - iii.   Services are not available - 0
   - iv.   No selection - 14

m. Nutrition

      i.   Has available services and meets existing needs - 2

      ii.   Has available services but fails to meet needs - 5

      iii.   Services are not available - 4

      iv.   No selection - 18

  n. Oral health

      i.   Has available services and meets existing needs - 0

      ii.   Has available services but fails to meet needs - 1

      iii.   Services are not available - 3

      iv.   No selection - 3

  o. Physical activity

      i.   Has available services and meets existing needs - 2

      ii.   Has available services but fails to meet needs - 4

      iii.   Services are not available - 3

      iv.   No selection - 11

  p. Pregnancy and birth

      i.   Has available services and meets existing needs - 2

      ii.   Has available services but fails to meet needs - 0

      iii.   Services are not available - 0

      iv.   No selection - 5

  q. Other

      i.   Has available services and meets existing needs - 0

      ii.   Has available services but fails to meet needs - 1

      iii.   Services are not available - 1

      iv.   No selection – 1

15. Preventing Injuries: Includes such services as brain injury prevention, disability, Emergency Medical Services, intentional injuries (violent & abusive behavior, suicide), occupational health & safety, and unintentional injuries (motor vehicle crashes, falls, poisoning, drowning, etc.). How important are these services: (n=140)

  a. Very important – 65 (46.4%)

  b. Important – 66 (47.1%)

  c. Not important – 9 (6.4%)

16. If you answered very important or important, which services should be considered a priority for attention (check all that apply): (n=491)

  a. Brain injury – 29 (5.9%)

  b. Disability - 48 (9.8%)

  c. Emergency Medical Services – 71 (14.5%)

  d. Violent and abusive behavior – 86 (17.5%)

  e. Suicide – 96 (19.6%)

  f. Occupational health and safety – 42 (8.6%)

  g. Motor vehicle crashes – 49 (10%)

  h. Falls – 26 (5.3%)

  i. Poisoning – 17 (3.5%)

j. Drowning – 27 (5.5%)

k. Other – 0 (0%)

17. Of the services you chose, please list the three that you believe are the most important for your community. Then mark the column that best describes your community's situation:

    a. Brain injury

        i. Has available services and meets existing needs - 2

        ii. Has available services but fails to meet needs - 1

        iii. Services are not available - 1

        iv. No selection – 7

    b. Disability

        i. Has available services and meets existing needs - 8

        ii. Has available services but fails to meet needs - 9

        iii. Services are not available - 4

        iv. No selection –10

    c. Emergency Medical Services

        i. Has available services and meets existing needs - 32

        ii. Has available services but fails to meet needs - 10

        iii. Services are not available - 2

        iv. No selection – 18

    d. Violent and abusive behavior

        i. Has available services and meets existing needs - 3

        ii. Has available services but fails to meet needs - 28

        iii. Services are not available - 17

        iv. No selection – 24

    e. Suicide

        i. Has available services and meets existing needs - 4

        ii. Has available services but fails to meet needs - 33

        iii. Services are not available - 15

        iv. No selection – 32

    f. Occupational health and safety

        i. Has available services and meets existing needs - 2

        ii. Has available services but fails to meet needs - 1

        iii. Services are not available - 1

        iv. No selection – 11

    g. Motor vehicle crashes

        i. Has available services and meets existing needs - 5

        ii. Has available services but fails to meet needs - 3

        iii. Services are not available - 4

        iv. No selection – 16

    h. Falls

        i. Has available services and meets existing needs - 0

        ii. Has available services but fails to meet needs - 1

            iii.   Services are not available - 1
            iv.   No selection – 4
      i.   Poisoning
            i.   Has available services and meets existing needs - 0
            ii.   Has available services but fails to meet needs - 1
            iii.   Services are not available - 0
            iv.   No selection – 1
      j.   Drowning
            i.   Has available services and meets existing needs - 1
            ii.   Has available services but fails to meet needs - 0
            iii.   Services are not available - 2
            iv.   No selection – 9

18. Preventing Epidemics: Includes such services as child and adult immunizations/vaccinations and surveillance and control of infectious diseases including HIV/AIDS, influenza, sexually transmitted diseases, tuberculosis (TB) and other reportable diseases. How important are these services? (n=139)
      a.   Very important – 55 (39.6%)
      b.   Important – 67 (48.2%)
      c.   Not important – 17 (12.2%)

19. If you answered very important or important, which services should be considered a priority for attention (check all that apply): (n=302)
      a.   Disease investigation – 49 (16.2%)
      b.   Disease control & surveillance – 63 (20.9%)
      c.   HIV/AIDS - 23 (7.6%)
      d.   Sexually transmitted diseases – 54 (17.9%)
      e.   Tuberculosis (TB) - 18 (6%)
      f.   Immunizations/vaccinations - 93 (30.8%)
      g.   Other – 2 (0.7%)

20. Of the services you chose, please list the three that you believe are the most important for your community. Then mark the column that best describes your community's situation:
      a.   Disease investigation
            i.   Has available services and meets existing needs - 6
            ii.   Has available services but fails to meet needs - 5
            iii.   Services are not available - 4
            iv.   No selection – 17
      b.   Disease control & surveillance
            i.   Has available services and meets existing needs - 11
            ii.   Has available services but fails to meet needs - 17
            iii.   Services are not available - 7
            iv.   No selection –23
      c.   HIV/AIDS
            i.   Has available services and meets existing needs - 0

        ii. Has available services but fails to meet needs - 4

        iii. Services are not available - 2

        iv. No selection – 5

    d. Sexually transmitted diseases

        i. Has available services and meets existing needs - 13

        ii. Has available services but fails to meet needs - 10

        iii. Services are not available - 3

        iv. No selection – 20

    e. Tuberculosis (TB)

        i. Has available services and meets existing needs - 2

        ii. Has available services but fails to meet needs - 2

        iii. Services are not available - 0

        iv. No selection – 3

    f. Immunizations/vaccinations

        i. Has available services and meets existing needs - 50

        ii. Has available services but fails to meet needs - 16

        iii. Services are not available - 4

        iv. No selection – 18

    g. Other

        i. Has available services and meets existing needs - 0

        ii. Has available services but fails to meet needs - 0

        iii. Services are not available - 2

        iv. No selection – 3

21. Protecting against Environmental Hazards: Includes such concerns as drinking water protection, food safety, food waste, hazardous materials, hazardous waste, healthy homes, lead poisoning, nuisances such as noise and litter, onside wastewater systems, radon, radiological health, soil erosion, and vector (disease-carrying animals and insects) control. How important are these services? (n=137)

    a. Very important – 62 (45.3%)

    b. Important – 50 (36.5%)

    c. Not important – 25 (18.2%)

22. If you answered very important or important, which services should be considered a priority for attention (check all that apply): (n=480)

    a. Drinking water protection - 89 (18.5%)

    b. Food safety – 66 (13.8%)

    c. Food waste – 19 (4%)

    d. Hazardous materials – 30 (6.3%)

    e. Hazardous waste – 40 (8.3%)

    f. Healthy homes – 50 (10.4%)

    g. Wastewater – 35 (7.3%)

    h. Lead poisoning – 31 (6.5%)

    i. Radon – 53 (11%)

j. Vector control – 22 (4.6%)

k. Radiological health – 14 (2.9%)

l. Soil erosion – 28 (5.8%)

m. Other - 3 (0.6%)

23. Of the services you chose, please list the three that you believe are the most important for your community. Then mark the column that best describes your community's situation:

   a. Drinking water protection
      i. Has available services and meets existing needs - 30
      ii. Has available services but fails to meet needs - 19
      iii. Services are not available - 6
      iv. No selection – 18

   b. Food safety
      i. Has available services and meets existing needs - 13
      ii. Has available services but fails to meet needs - 6
      iii. Services are not available - 3
      iv. No selection – 19

   c. Food waste
      i. Has available services and meets existing needs - 1
      ii. Has available services but fails to meet needs - 2
      iii. Services are not available - 0
      iv. No selection – 4

   d. Hazardous materials
      i. Has available services and meets existing needs - 1
      ii. Has available services but fails to meet needs - 6
      iii. Services are not available - 0
      iv. No selection – 6

   e. Hazardous waste
      i. Has available services and meets existing needs - 3
      ii. Has available services but fails to meet needs - 3
      iii. Services are not available - 3
      iv. No selection – 10

   f. Healthy homes
      i. Has available services and meets existing needs - 3
      ii. Has available services but fails to meet needs - 3
      iii. Services are not available - 4
      iv. No selection – 17

   g. Wastewater
      i. Has available services and meets existing needs - 7
      ii. Has available services but fails to meet needs - 0
      iii. Services are not available - 0
      iv. No selection – 7

   h. Lead poisoning

    i. Has available services and meets existing needs - 5

    ii. Has available services but fails to meet needs - 1

    iii. Services are not available - 0

    iv. No selection – 3

  i. Radon

    i. Has available services and meets existing needs - 0

    ii. Has available services but fails to meet needs - 9

    iii. Services are not available - 5

    iv. No selection – 10

  j. Vector control

    i. Has available services and meets existing needs - 0

    ii. Has available services but fails to meet needs - 2

    iii. Services are not available - 0

    iv. No selection – 7

  k. Radiological health

    i. Has available services and meets existing needs - 0

    ii. Has available services but fails to meet needs - 0

    iii. Services are not available - 0

    iv. No selection – 1

  l. Soil erosion

    i. Has available services and meets existing needs - 1

    ii. Has available services but fails to meet needs - 3

    iii. Services are not available - 1

    iv. No selection – 10

24. Prepare for, Respond to & Recover from Public Health Emergencies: Includes such concerns as communication networks, emergency planning, emergency response, individual preparedness, recovery planning, risk communication (communication before, during, and after a crisis), and surge capacity (the capacity to continue normal duties during emergencies). How important are these services? (n=133)

  a. Very important – 53 (39.8%)

  b. Important – 60 (45.1%)

  c. Not important – 20 (15%)

25. If you answered very important or important, which services should be considered a priority for attention (check all that apply): (n=384)

  a. Communication networks – 62 (16.1%)

  b. Emergency planning – 67 (17.4%)

  c. Emergency response – 84 (21.9%)

  d. Recovery planning – 31 (8.1%)

  e. Individual preparedness – 42 (10.9%)

  f. Risk communication – 50 (13%)

  g. Surge capacity – 48 (12.5%)

  h. Other – 0 (0%)

26. Of the services you chose, please list the three that you believe are the most important for your community. Then mark the column that best describes your community's situation:
    a. Communication networks
        i. Has available services and meets existing needs - 15
        ii. Has available services but fails to meet needs - 6
        iii. Services are not available - 4
        iv. No selection – 11
    b. Emergency planning
        i. Has available services and meets existing needs - 14
        ii. Has available services but fails to meet needs - 14
        iii. Services are not available - 7
        iv. No selection –11
    c. Emergency response
        i. Has available services and meets existing needs - 27
        ii. Has available services but fails to meet needs - 14
        iii. Services are not available - 4
        iv. No selection –23
    d. Recovery planning
        i. Has available services and meets existing needs - 2
        ii. Has available services but fails to meet needs - 1
        iii. Services are not available - 1
        iv. No selection –10
    e. Individual preparedness
        i. Has available services and meets existing needs - 0
        ii. Has available services but fails to meet needs - 7
        iii. Services are not available - 3
        iv. No selection –16
    f. Risk communication
        i. Has available services and meets existing needs - 5
        ii. Has available services but fails to meet needs - 5
        iii. Services are not available - 5
        iv. No selection –16
    g. Surge capacity
        i. Has available services and meets existing needs - 4
        ii. Has available services but fails to meet needs - 5
        iii. Services are not available - 3
        iv. No selection –15
27. Strengthen the Health Infrastructure: Includes topics such as access to quality health services, community engagement, evaluation, food security, food systems, food and nutrition assistance (SNAP, WIC), health facilities, health insurance, medical care, organizational capacity, planning, quality improvement, social determinates (e.g., education & poverty levels), transportation, and workforce (e.g., primary care, dental, mental health, public health), workforce development, and an

equal opportunity to live a long, healthy life regardless of income, education, or ethnic background. How important are these services? (n=134)
- a. Very important – 59 (44%)
- b. Important – 50 (37.3%)
- c. Not important – 25 (18.7%)

28. If you answered very important or important, which services should be considered a priority for attention (check all that apply): (n=551)
    - a. Access to quality health services – 69 (12.5%)
    - b. Community engagement – 31 (5.6%)
    - c. Evaluation – 15 (2.7%)
    - d. Food security – 41 (7.4%)
    - e. Food systems – 17 (3%)
    - f. Food and nutrition assistance (SNAP, WIC) - 43 (7.8%)
    - g. Health facilities – 40 (7.3%)
    - h. Equal opportunity – 26 (4.7%)
    - i. Health insurance – 56 (10.2%)
    - j. Medical care – 47 (8.5%)
    - k. Transportation – 34 (6.2%)
    - l. Workforce development – 38 (6.9%)
    - m. Workforce – 51 (9.3%)
    - n. Education and poverty levels – 41 (7.4%)
    - o. Other – 2 (0.4%)

29. Of the services you chose, please list the three that you believe are the most important for your community. Then mark the column that best describes your community's situation:
    - a. Access to quality health services
        - i. Has available services and meets existing needs - 13
        - ii. Has available services but fails to meet needs - 12
        - iii. Services are not available - 0
        - iv. No selection – 10
    - b. Community engagement
        - i. Has available services and meets existing needs - 2
        - ii. Has available services but fails to meet needs - 5
        - iii. Services are not available - 1
        - iv. No selection – 6
    - c. Food security
        - i. Has available services and meets existing needs - 7
        - ii. Has available services but fails to meet needs - 10
        - iii. Services are not available - 0
        - iv. No selection – 8
    - d. Food systems
        - i. Has available services and meets existing needs - 0
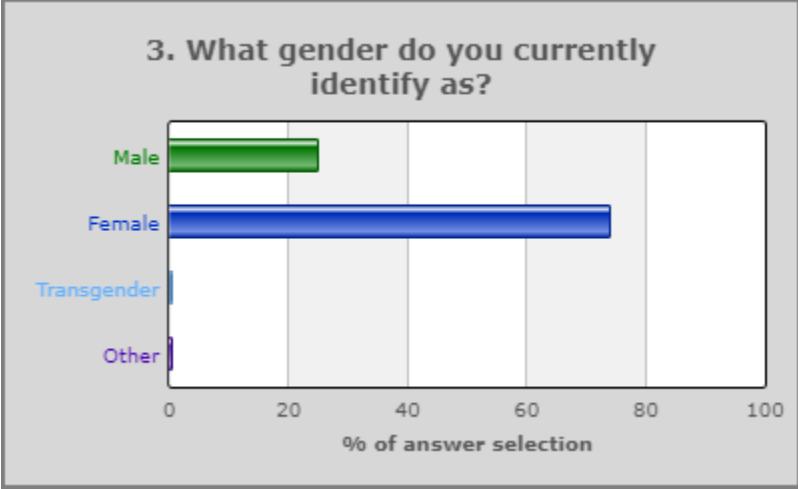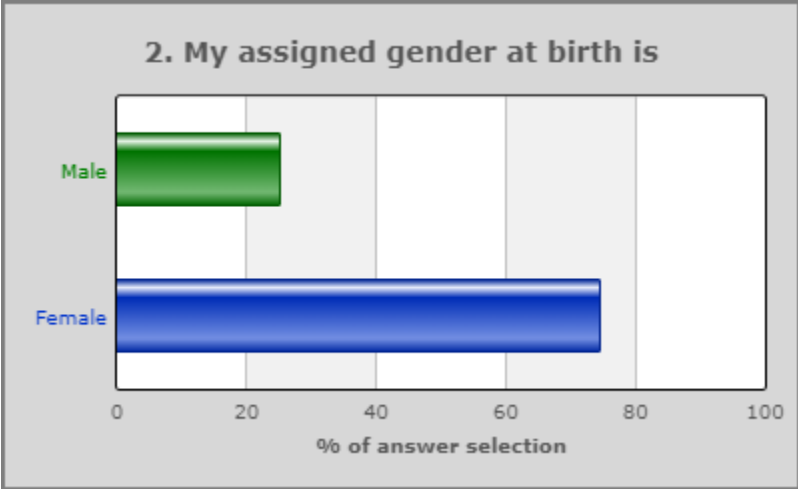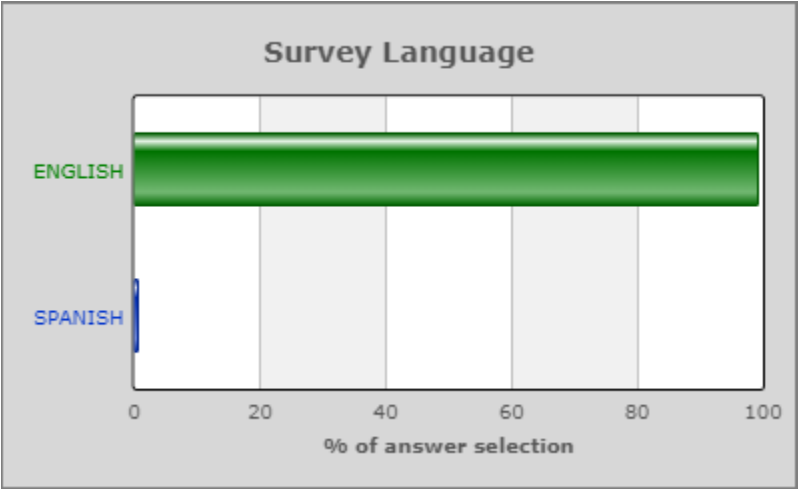   - ii. Has available services but fails to meet needs - 1

        iii.   Services are not available - 0

        iv.   No selection – 3

e. Food and nutrition assistance (SNAP, WIC)

        i.   Has available services and meets existing needs - 8

        ii.   Has available services but fails to meet needs - 5

        iii.   Services are not available - 0

        iv.   No selection – 9

f. Health facilities

        i.   Has available services and meets existing needs - 4

        ii.   Has available services but fails to meet needs - 2

        iii.   Services are not available - 0

        iv.   No selection – 5

g. Equal opportunity

        i.   Has available services and meets existing needs - 1

        ii.   Has available services but fails to meet needs - 0

        iii.   Services are not available - 2

        iv.   No selection – 2

h. Health insurance

        i.   Has available services and meets existing needs - 5

        ii.   Has available services but fails to meet needs - 5

        iii.   Services are not available - 5

        iv.   No selection – 9

i. Medical care

        i.   Has available services and meets existing needs - 5

        ii.   Has available services but fails to meet needs - 7

        iii.   Services are not available - 2

        iv.   No selection – 11

j. Transportation

        i.   Has available services and meets existing needs - 0

        ii.   Has available services but fails to meet needs - 3

        iii.   Services are not available - 5

        iv.   No selection – 6

k. Workforce development

        i.   Has available services and meets existing needs - 1

        ii.   Has available services but fails to meet needs - 3

        iii.   Services are not available - 0

        iv.   No selection – 8

l. Workforce

        i.   Has available services and meets existing needs - 1

        ii.   Has available services but fails to meet needs - 8

        iii.   Services are not available - 0

        iv.   No selection – 11

m. Education and poverty levels
- i. Has available services and meets existing needs - 0
- ii. Has available services but fails to meet needs - 8
- iii. Services are not available - 0
- iv. No selection – 11

30. Where do you access health related information? Check all that applies. (n=367)
- a. Healthcare provider – 112 (30.5%)
- b. Television programs – 26 (7.1%)
- c. Facebook – 33 (9%)
- d. Twitter – 6 (1.6%)
- e. Instagram – 4 (1.1%)
- f. LinkedIn – 2 (0.5%)
- g. YouTube – 12 (3.3%)
- h. Blogs – 7 (1.9%)
- i. Online video – 15 (4.1%)
- j. CDC – 48 (13.1%)
- k. Friends – 38 (10.4%)
- l. Family – 53 (14.4%)
- m. Other – 11 (3%)

EXHIBIT G - Community Health Assessment Survey Result Graphs

4. My age is

Age	% of answer selection
Under 18	~1
18 - 24	~2
25 - 45	~50
46 - 64	~36
65 - 74	~9
75 - 84	~2
85 and over	~1

5. My yearly income is

Income	% of answer selection
Less than 25,000	~8
25,000 - 50,000	~35
50,000 - 75,000	~16
75,000 - 100,000	~15
Over 100,000	~25

6. My race/ethnicity is

Race/ethnicity	% of answer selection
African American	~1
American Indian or Al...	~1
Asian	~1
Caucasian	~93
Hispanic	~1
Other	~1
I prefer not to answer	~2
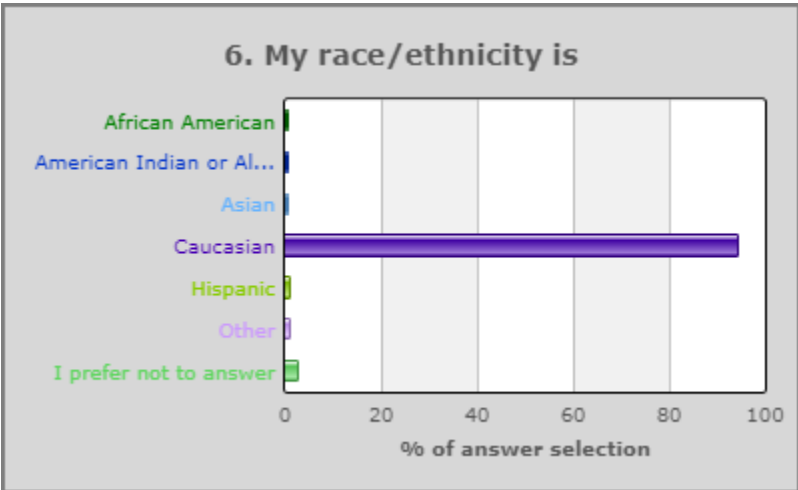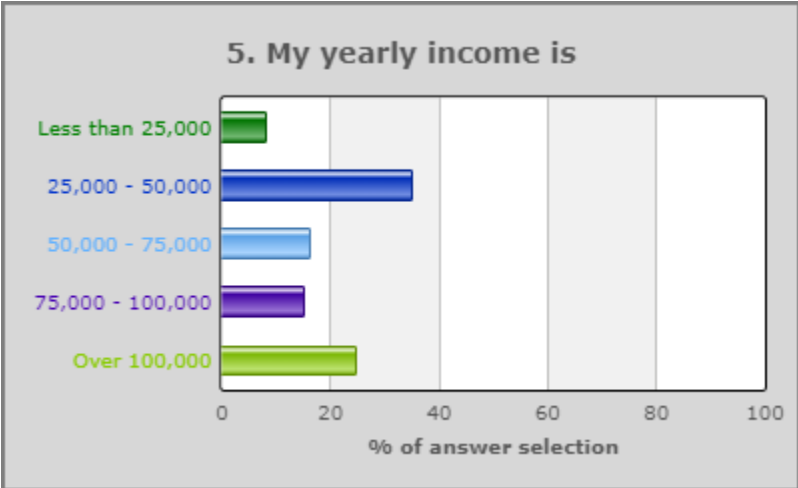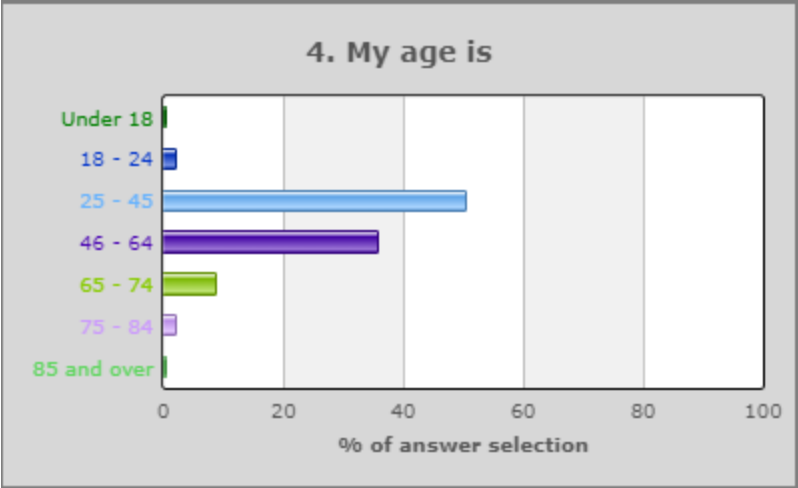
7. What type of health insurance coverage do you have?
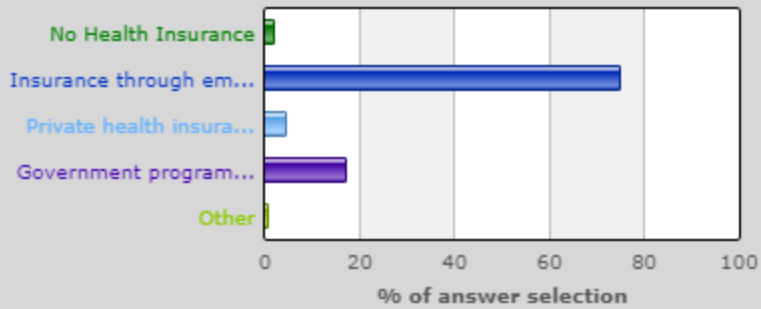
8. Overall how would you rate your physical health?
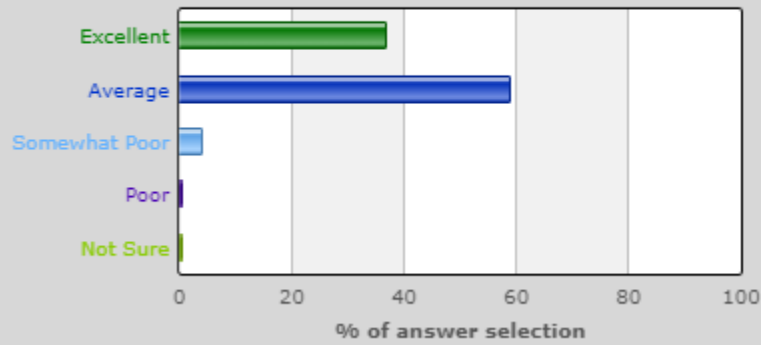
9. Overall how would you rate your mental health?
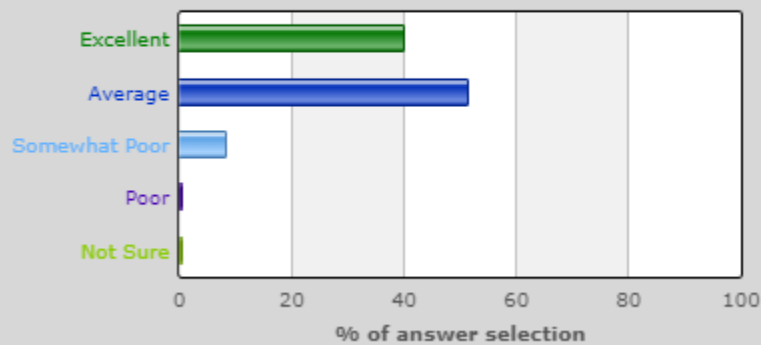
10. During the past 4 weeks, have you had any problems with your work or daily life due to your physical health?
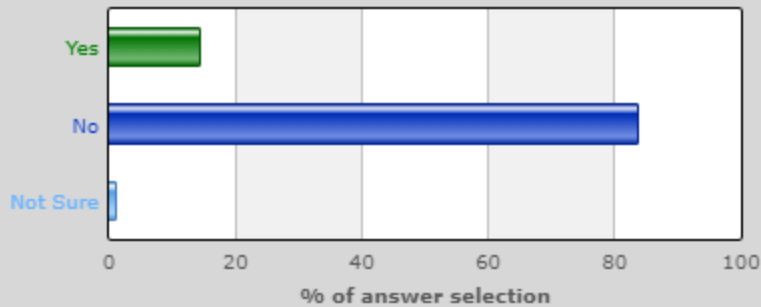
11. During the past 4 weeks, have you had any problems with your work or daily life due any emotional problems, such as feeling depressed, sad or anxious?

12. Promoting Healthy Living: includes such health services as the prevention and treatment of addictive behaviors (tobacco, alcohol, other drugs, gambling) and chronic disease (mental health, heart disease and stroke, cancer, asthma, diabetes, arthritis, etc.); elderly wellnes...

12. Selected As Top 3 Issues and Do they meet needs

AVAILABLE/MEETS NEEDS   AVAILABLE/DOES NOT MEET NEEDS   NOT AVAILABLE   NO SELECTION

12. All Issues Selected

13. Preventing Injuries: Includes such services as brain injury prevention, disability, Emergency Medical Services, intentional injuries (violent & abusive behavior, suicide), occupational health & safety, and unintentional injuries (motor vehicle crashes, falls, poisoning, drowni...

13. Selected As Top 3 Issues and Do they meet needs

13. All Issues Selected

14. Preventing Epidemics: Includes such services as child and adult immunizations/vaccinations and surveillance and control of infectious diseases including: HIV/AIDS, influenza, sexually transmitted diseases, tuberculosis (TB) and other reportable d...

14. Selected As Top 3 Issues and Do they meet needs

AVAILABLE/MEETS NEEDS | AVAILABLE/DOES NOT MEET NEEDS | NOT AVAILABLE | NO SELECTION

14. All Issues Selected

15. Protecting against Environmental Hazards: Includes such concerns as drinking water protection, food safety, food waste, hazardous materials, hazardous waste, healthy homes, lead poisoning, nuisances such as noise and litter, onsite wastewater systems, radon...

15. Selected As Top 3 Issues and Do they meet needs

15. All Issues Selected

16. Prepare for, Respond to & Recover from Public Health Emergencies: Includes such concerns as communication networks, emergency planning, emergency response, individual preparedness, recovery planning, risk communication (communication before,...

16. Selected As Top 3 Issues and Do they meet needs

16. All Issues Selected

17. Strengthen the Health Infrastructure (the framework to support being healthy): includes topics such as access to quality health services, community engagement, evaluation, food security, food systems, food and nutrition assistance (SNAP, WIC), health facilitie...

17. Selected As Top 3 Issues and Do they meet needs

17. All Issues Selected

18. Where do you access health related information?