Lee County

Community Health Improvement Plan





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For additional information, CONTACT:

Name	Organization	Phone	Email
Michele Ross	Lee County Health Department	319-372-5225	mross@leecountyhd.org
Julie Schilling	Lee County Health Department	319-372-5225	jschilling@leecountyhd.org
Amy Conlee	Keokuk Area Hospital	319-526-8762	aconlee@keokukhospital.org
Angie Budnik	Fort Madison Community Hospital	319-372-6530	abudnik@FMCHOSP.COM

Promote Healthy Lifestyles/Healthy Behaviors for all.

Goal #1 Reduce the	prevalence of chronic disease	National Alignment		State Alignme	nt	
	living to the Lee County population by		althy People 2020-HRQOL/WB-1; VS-14/15; PA-1/13/14: OH-7; Healthy Living #6;			
	ovide health education and the im reening awareness topics quarterly		Baselin Year 2015	e Baseline Value NA	Target Year 2017	Target Value 4
Strategy 1-1.1	Live Healthy Lee County Coalitio community health education th releases, newsletters, social meyear to promote healthy living/importance of preventive screen	rough use of radio, press dia, etc. at least 4 times per lifestyles and the	Strategy T Counselin	<u>Type</u> g & Education		
	Who's Responsible Live Healthy Lee County Coalition	n; Communication/Motivation	n Task Forc	<u>Target I</u> e 2/2017	<u>Date</u>	
ph Na	ecrease the percentage of the pop hysical inactivity from 27% to 23% b ational Center for Disease Preventi HNA.org).	by 2019 according to CDC,	Baselin Year 2012	e Baseline Value 27%	Target Year 2019	Target Value 23%
Strategy 1-2.1	Provide outdoor recreational ev	rents at least 6 times a year.	Strategy To Environme	<u>ype</u> ental / Policy / S	systems Cha	inge
	Who's Responsible Lee County Conservation Board			<u>Target I</u> annuall	<u>Date</u> y 2017-201	9
Strategy 1-2.2	Develop two new walking/biking trails in county for recreational use to promote walking and biking.		Strategy Type Environmental / Policy / Systems Change			inge
	Who's Responsible PORT of Fort Madison; Lee County Conservation Board		<u>Target Date</u> By 2019			
Strategy 1-2.3	Organize an active trails develop Keokuk Area.	oment committee in the	Strategy T Environme	<u>vpe</u> ental / Policy / S	systems Cha	inge
	Who's Responsible Lee County Leadership Group		<u>Target Date</u> By 2018			
Strategy 1-2.4	Work with various community p family fun events encouraging c physical activities.	•	Strategy T Environme	. ype ental / Policy / S	systems Cha	inge
	Who's Responsible Live Healthy Lee County Coalition		<u>Target Date</u> By 2019			
Strategy 1-2.5	Encourage worksites to promote their workforce (walking at breawalking meetings, stairwell use, and policy, etc.)	ıks, gym memberships,	Strategy T Environme	<u>'ype</u> ental / Policy / S	iystems Cha	nnge
	Who's Responsible Lee County Health Department			<u>Target I</u> By 2019		

Objective 1.3 Des	reaso the percent of adults who self report inchesuate fourth	Pacolino Pacolino Target Torget
Objective 1-3 Decrease the percent of adults who self report inadequate fruit/vegetable consumption from 83.4% to 80% by 2019 according to CDC, BRFFS (CHNA.org).		
Strategy 1-3.1	Increase the number of community gardens who offer education on vegetables grown in the gardens.	Strategy Type Counseling & Education
	Who's Responsible Hy-Vee; Lee County Conservation; ISU Extension and Outreach Community School District	<u>Target Date</u> h; Keokuk By 2019
Strategy 1-3.2	Maintain and support the number of farmer's markets currently available in the county and increase the number of vendors who sell at the markets.	Strategy Type Address Social Determinant / Health Inequity
	Who's Responsible Montrose Riverfront Inc.; Keokuk Chamber of Commerce; FM extension and Outreach; LCHD	Target Date Main Street; ISU By 2019
Strategy 1-3.3	Increase the percentage of healthy foods offered at area concession stands.	Strategy Type Environmental / Policy / Systems Change
	Who's Responsible LCHD; Live Healthy Lee County Coalition	<u>Target Date</u> By 2019
Strategy 1-3.4	Increase the availability of fresh produce offered at local food pantries.	Strategy Type Address Social Determinant / Health Inequity
	Who's Responsible RSVP; LCHD; ISU Extension and Outreach; Live Healthy Lee Co	Target Date ounty Coalition By 2019
Strategy 1-3.5	Work with local food producers and businesses to offer locally grown fresh produce and rural "food deserts" in the county.	Strategy Type Address Social Determinant / Health Inequity
	Who's Responsible LCHD; ISU Extension and Outreach; Live Healthy Lee County Co	Target Date Coalition By 2019
Strategy 1-3.6	Encourage worksites to promote healthy nutrition within their workforce (providing healthy options in vending machines, offering healthy food and beverage options during meetings, trainings, luncheons, through wellness programs and policy, etc.)	Strategy Type Environmental / Policy / Systems Change
	Who's Responsible LCHD	<u>Target Date</u> By 2019
Strategy 1-3.7	Offer Buy, Eat, Live Healthy classes to low-income populations.	Strategy Type Address Social Determinant / Health Inequity
	Who's Responsible ISU Extension and Outreach	<u>Target Date</u> By 2019
de	crease access to oral health care by increasing the number of ntists in Lee County who serve the Medicaid population by 50% 2019.	Baseline Baseline Target Target Value Year Value 2015 1 2019 2
Strategy 1-4.1	Develop dentist recruitment strategies and activities to bring new dentists to the area who are willing to accept Title XIX patients as well as Iowa Dental Wellness Plan members.	Strategy Type Address Social Determinant / Health Inequity

	Who's Responsible Keokuk Dental Recruitment Task Force	<u>Target Date</u> By 2019
Strategy 1-4.2	Visit with local dentists about the need for accepting Medicaid and Iowa Health and Wellness Dental Plan members to receive dental care.	Strategy Type Address Social Determinant / Health Inequity
	Who's Responsible LCHD/Dental Community	<u>Target Date</u> By 2019
Strategy 1-4.3	Continue offering gap filling dental screening and Fluoride varnish services to children and pregnant women. Provide dental care coordination services as needed to link families to available dentists in the area.	Strategy Type Address Social Determinant / Health Inequity
	Who's Responsible LCHD	<u>Target Date</u> By 2019
Strategy 1-4.4		
Strategy 1-4.4	LCHD Work with long term care facilities and other locations that serve older lowans to facilitate and promote oral health	By 2019 Strategy Type
Strategy 1-4.4 Strategy 1-4.5	UCHD Work with long term care facilities and other locations that serve older lowans to facilitate and promote oral health care/dental services among our senior population. Who's Responsible LCHD; Dental Community; Long term care facilities	By 2019 Strategy Type Address Social Determinant / Health Inequity Target Date

Improve Mental Health/Behavioral Health Issues/Access to Care.

Goal #1	Incresse	2000	es to somious and supports	National Alignment		State Alignmon	^+	
Goal #1			ess to services and supports sexperiencing mental health	National Alignment Healthy People 2020: MH/I	MD 0/10	State Alignmen		Lloolth and
			HRQOL/WB; ECBP-10.3	VID-9/10	Healthy Iowan Mental Disord		Health and	
Obj			rease the awareness of the existing	=	Baselin Year	e Baseline Value	Target Year	Target Value
	available in the county by supporting current jail diver community-based provider committee in meeting qua				2015 Le Co CHN local survey	e 23% found access difficult	2018 2020	15% 10%
	Strategy 1-2	1.1	Market and propagate commun safety cards, warm/hotlines and technology.		Strategy T Counseling	ype g & Education		
			Who's Responsible Jail Diversion and Community-ba	sed Provider Committee	<u>Target Date</u> By 2017			
	Strategy 1-2	1.2	Improve access to Mental Healt appointment wait/availability tir		Strategy T Clinical Int			
			Who's Responsible KAH; FMCH; CHC-SEIA; Counselin Christian Counseling; Lee Co Jail; Ministerial Association/faith-bas	Community Connections, a		Target D le Out By 2021		
	Strategy 1-1	1.3	Look into unique and innovative mental health/behavioral health		Strategy T Clinical Int			
			Who's Responsible Mental Health/Behavioral Health	Taskforce		<u>Target D</u> By 2018		
Obj	jective 1-2	sup	essment tools will be selected to operts needed related to MH/BH agnostics for pediatric birth to 17 y	and substance related	I Baseline Year 2015	e Baseline Value 34% of	Target Year 2020	Target Value 10%
						proportion of children screened at risk of dev/beh		increase of children screened
						and social delays using a parent		
						reported standardiz ed screening		
						tool		
	Strategy 1-2		Implement a standardized screen 5 programming to facilitate core (ASQ-3, ASQ-SE/SE-2, and/or	mparable data collection	Strategy T Clinical Int			
			Who's Responsible LCHD; CHCSEIA; Young House Far	mily Services		<u>Target D</u> By 2017		

Strategy 1-2.2	Implement a standardized screening tool across 6-10 year old programming to facilitate comparable data collection.	Strategy Type Clinical Intervention		
	Who's Responsible LCHD; CHCSEIA; Young House Family Services	<u>Target Date</u> By 2019		
Strategy 1-2.3	Implement a standardized screening tool across 11-17 year old programming to facilitate comparable data collection.	Strategy Type Clinical Intervention		
	Who's Responsible LCHD; CHCSEIA, and Young House Family Services	<u>Target Date</u> By 2020		
su	sessment tools will be selected to effectively identify individual oports needed related to MH/BH and substance related ignostics for adults.	Baseline Baseline Target Target Year Value Year Value 2015 0 2020 1		
Strategy 1-3.1	Implement screening tools across all mental health levels of care and programming to facilitate comparable data collection.	Strategy Type Clinical Intervention		
	Who's Responsible KAH; FMCH; CHC-SEIA; Counseling Associates; Bridgeway; O County Jail; Community Connections, Keokuk Ministerial Asso faith-based providers.	•		
Strategy 1-3.2	Implement screening tools across all substance abuse levels of care and programming to facilitate comparable data collection.	Strategy Type Clinical Intervention		
	Who's Responsible ADDS and other substance abuse service providers	<u>Target Date</u> By 2019		
Strategy 1-3.3	Implement screening tools across all co-occurring levels of care and programming to facilitate comparable data collection.	Strategy Type Clinical Intervention		
	Who's Responsible KAH; FMCH; CHC-SEIA; Counseling Associates; Bridgeway; Op County Jail; Community Connections, Keokuk Ministerial Asso faith-based providers; ADDS, and other substance abuse serv	ciation; other		
Strategy 1-3.4	Evaluate progress on Mental Health/Behavioral Health Goal and Objectives annually and revise/update as needed.	Strategy Type Clinical Intervention		
	Who's Responsible Mental Health/Behavioral Health Taskforce; CHNA partners	<u>Target Date</u> Annually		

Reduce Transportation Barriers of our Workforce and those with Access to Care issues.

Goal #1	ncrease ı	usa	ge and reduce barriers to	National Alignment		State Alignme	nt	
ā	accessing	tra	nsportation systems by 2019.	Healthy People 2020: AHS-6	5.1	Healthy Iowar Health Service Transportatio	es and Supp	ort-
Objec	tive 1-1	em	ribute a survey to at least 12 Lee ployees to identify and address trour workforce by 2017.			e Baseline Value	Target Year 2016	Target Value 12
Stı	Strategy 1-1.1		Distribute surveys to local busine County area.	esses and industries in Lee	Strategy Ty Address So	<u>ype</u> ocial Determina	nt / Health	Inequity
			Who's Responsible Southeast Iowa Regional Plannin Commerce	g Commission (SEIRPC) and C	hamber of	<u>Target [</u> 6/2016	<u>Date</u>	
Stı	rategy 1-1	1.2	Analyze survey results to identify available resources to alleviate by	•	Strategy Ty Address So	<u>/pe</u> ocial Determina	nt / Health	Inequity
			Who's Responsible SEIRPC			<u>Target [</u> 6/2017	<u>Date</u>	
Stı	rategy 1-1	1.3	Develop and implement plan/sy transportation needs of our wor		Strategy Ty Address So	<u>/pe</u> ocial Determina	nt / Health	Inequity
			Who's Responsible Lee Co Transportation Task Force SEIRPC; Chambers	e; Lee County Economic Deve	lopment gro	<u>Target [</u> oup; 1/2019	<u>Date</u>	
Stı	rategy 1-1	1.4	Evaluate Plan at least annually		Strategy Type Address Social Determinant / Health Inequity		Inequity	
			Who's Responsible Lee County Transportation Task F	Force		<u>Target [</u> 2016-2		
Objec		ser	mote the existing non-emergency vices available in Lee County throue east four times per year.		Baseline Year 2015	Baseline Value 0	Target Year 2016- 2019	Target Value 4
Sti	Strategy 1-2.1		Promote SEIBUS website/schedinformation to general public in grocery stores, DHS offices, clientorganizations, etc.)	key locations (hospitals,			Inequity	
			Who's Responsible SEIRPC; Lee Co Transportation Taskforce		<u>Target Date</u> 2016-2019			
Stı	Strategy 1-2.2		Increase awareness of the Iowa Medical Transportation (NEMT) utilized by the four MCOs and the each specific NEMT service prov medical/dental/mental health a	systems that will be be requirements for utilizing orider for transportation to	Strategy Ty Address So	<u>/pe</u> ocial Determina	nt / Health	Inequity
			<u>Who's Responsible</u> Lee Co Transportation Taskforce			<u>Target [</u> 3/2016-		

Strategy 1-2.3	Complete messaging through local media outlets about available transportation systems in the county such as through organization websites, face book, press releases, fliers, etc.	Strategy Type Address Social Determinant / Health Inequity	
	Who's Responsible SEIRPC; LCHD; Lee County Transportation and Communicatio groups	Target Date n Task Force 6/2016-2019	
Strategy 1-2.4	Invite SEIBUS, cab companies, others to annually evaluate and address transportation access barriers and needs within the local transportation system. Revise and update HIP as needed.	Strategy Type Address Social Determinant / Health Inequity	
	Who's Responsible Lee County Transportation Task Force	<u>Target Date</u> 11/2016-2019	
id	stribute a survey to at least 500 citizens of Lee County to entify and address transportation barriers/needs of our ammunity by 2017.	BaselineBaselineTargetTargetYearValueYearValue201502016500	
Strategy 1-3.1	Distribute surveys via Lee County Transportation Taskforce member agencies, through email/survey monkey and other contact points in public.	Strategy Type Address Social Determinant / Health Inequity	
	Who's Responsible Lee County Transportation Taskforce	<u>Target Date</u> 6/2016	
Strategy 1-3.2	Analyze survey results to identify public barriers and available resources to alleviate barriers.	Strategy Type Address Social Determinant / Health Inequity	
	Who's Responsible SEIRPC	<u>Target Date</u> 6/2017	
Strategy 1-3.3	Develop and implement Transportation plan/systems for addressing the transportation needs of our citizens.	Strategy Type Address Social Determinant / Health Inequity	
	Who's Responsible SEIRPC, Lee Co Transportation Task Force and others to be ide	Target Date entified 1/2019	
Strategy 1-3.4	Evaluate Lee County Transportation plan annually and revise/update as needed.	Strategy Type Address Social Determinant / Health Inequity	
	Who's Responsible Lee Co Transportation TaskForce; CHNA partners	<u>Target Date</u> Annually	

Improve Communication, provide Education, and Motivate our population for Change

outreach on priorities (tra behavioral h other popula	munity education and the established CHNA health ansportation, mental health, ealth, healthy lifestyles) and ation health needs identified y over the next three years.	National Alignment Healthy People 2020: HC/HI HIT-9	State Alignment IT-13; HC/ Healthy lowans: 4.1.2, 4.1.4, 6.1.1, 6.1.24, 6.1.26, and 6.6.1.28		
rea det	velop five alternative communicat ich our vulnerable populations wh terminants of health that create b tivation for change by 2017.	o have various social	BaselineBaselineTargetTargetYearValueYearValue2016020175		
Strategy 1-1.1	Develop list of five top targeted county who could benefit most feducation outreach messaging.		Strategy Type Address Social Determinant / Health Inequity		
	Who's Responsible Communication/Education Taskf	orce	<u>Target Date</u> By 2017		
Strategy 1-1.2	Develop five locations to reach t based on priority needs.	- : :	Strategy Type Address Social Determinant / Health Inequity		
	Who's Responsible Communication/Education Taskf	orce	<u>Target Date</u> By 2017		
Strategy 1-1.3	Work with other invested group messaging to the targeted popu according to priority needs involhealth, behavioral health, health	lations aligning topics ving transportation, mental	Strategy Type Address Social Determinant / Health Inequity		
	Who's Responsible Communication/Education Taskf	orce	<u>Target Date</u> By 2017		
Strategy 1-1.4	Provide community health infor education during hospital emerginpatient discharges, during urge and/or during home visits as need.	gency department visits, ent or prompt care visits	Strategy Type Address Social Determinant / Health Inequity		
	Who's Responsible KAH; FMCH; LCHD		<u>Target Date</u> By 2017		
me	ovide our general population with assaging related to our health need year.		Baseline Baseline Target Target Year Value Year Value 2016 0 2017 4		
Strategy 1-2.1	Align with transportation task for messages to increase awareness systems in county.		Strategy Type Counseling & Education		
	Who's Responsible Communication/Education Taskf	orce- other CHNA task force g	<u>Target Date</u> groups By 2017		

Strategy 1-2.2 Align with Mental Health/Behavioral Health Task force to Strategy Type develop outreach messages to increase awareness of Counseling & Education available resources and systems in place in county; develop health messages based on needs identified in group. Who's Responsible **Target Date** Communication/Education Taskforce- other CHNA task force groups By 2017 Align with task force groups and other service organizations Strategy 1-2.3 Strategy Type who are addressing behavioral health issues and develop Counseling & Education outreach messages to increase awareness of available resources and systems in place in county; develop health messages based on needs identified in group. Who's Responsible **Target Date** Communication/Education Taskforce- other CHNA task force groups; other By 2017 Align with Live Healthy Lee County coalition to develop Strategy 1-2.4 Strategy Type outreach messages such as promoting trail use, farmers Counseling & Education markets, healthy eating, promoting physical activity, accessing health and dental care, etc. based on needs identified in group. Who's Responsible Target Date Communication/Education Taskforce- other CHNA task force groups By 2017 Strategy 1-2.5 Evaluate progress on Communication/Education Goal and **Strategy Type** Objectives annually and revise/update as needed. Address Social Determinant / Health Inequity Who's Responsible **Target Date** Communication/Education CHNA Task Force Annually