

**Community Health Needs Assessment**  
**UnityPoint Health Allen Hospital**  
**2023 – 2025**  
**Published December 2022**

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### **I. Community Served by the Hospital**

The UnityPoint Health Allen Hospital market includes 10 counties in the Cedar Valley of Northeast Iowa: Black Hawk, Bremer, Buchanan, Butler, Chickasaw, Fayette, Franklin, Grundy, Hardin, and Tama.

Black Hawk and Bremer Counties are home to 59% of the market's 267,000 people. In 2021, 71% of Allen Hospital inpatient visits and 80% of hospital-outpatient visits lived in these two counties.

Black Hawk County is the diverse center of population, jobs, economic growth, and services for the market. Its residents and agencies provided the majority of responses for this assessment.

### **II. 2022 Community Health Needs Assessment Process**

In 2019, Black Hawk County healthcare providers and allied service organizations came together as partners to write and publish two online surveys to identify the community health needs of Cedar Valley residents and social service agencies.

In 2022, UnityPoint Health Allen Hospital used the assessment previously created with the community partners and added five questions related to COVID-19. Consistency of the questions from 2019 to 2022 was important to compare the impact from each cycle.

The online survey for residents was published from September 5 to September 19, 2022 and drew 696 unique responses. The parallel survey for social service agencies ran concurrently and drew 44 responses. Both surveys were extended one week to September 26, 2022, to allow for additional returns. For comparison, in 2019 the resident survey drew 1,554 unique responses while the survey for agencies drew 41 responses.

SurveyMonkey, an online survey tool, was the only outside service used in this assessment.

UnityPoint Health Allen Hospital remains involved in the Community Health Improvement Steering Committee through the Black Hawk Public Health Department as a community partner. Additional partners of the Steering Committee include:

- Peoples Community Health Clinic of Waterloo
- INRCOG (Iowa Northland Regional Council of Governments)
- Cedar Valley United Way
- University of Northern Iowa
- MercyOne Waterloo Medical Center
- Northeast Iowa Food Bank
- Embarc Iowa
- Habitat for Humanity

- City of Waterloo

### **III. Community Input**

The survey asked both residents and community organizations for their input on the health of the community. In reviewing the demographics of the survey respondents, those that responded do not accurately represent the diverse communities Allen Hospital serves. There could be a variety of reasons for the lack of diverse respondents including the survey distribution method, the timing of the survey, the nature of the survey, lack of trust of the healthcare field, and language barriers. To more accurately reflect the demographic makeup of the community, agencies and organizations are invited to participate.

The assessment partnership asked 87 community organizations to participate in the agency survey. Forty-four agencies completed the survey. Some identified themselves in more than one category:

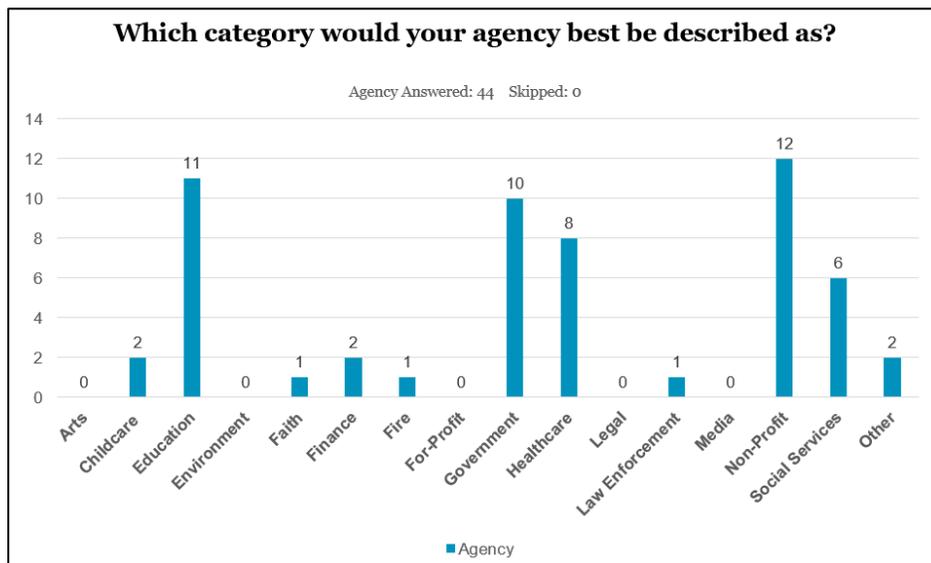
Amani Community Services	Department of Health and Human Services
Amerigroup	EMBARC Resource Center
Archdiocese of Dubuque	Exceptional Persons of NE Iowa
Area Education Agency 7	Eye of the Needle
Aspire	Families First Counseling Center
Back 2 Basics	Family and Children’s Council
Bank of Jabez	Friends of the Family
Bertch Cabinets	Goodwill Industries
Big Brothers Big Sisters	Grout Museum of Natural History
Black Hawk County Conservation	Grow Cedar Valley
Black Hawk County Corrections’ Office	Hawkeye Community College
Black Hawk County Gaming Association	House of Hope
Black Hawk County Health Department	Iowa C.O.R.E. Inc
Black Hawk County Sheriff’s Office	Iowa Courts
Black Hawk County Supervisors	Iowa Heartland Habitat for Humanity
Black Hawk Grundy Mental Health Center	Iowa State Extension Office
Bold Missions Inc.	Iowa Workforce Development
Cedar Falls Community School District	Jesse Cosby Center
Cedar Valley Hospice	John Deere
Cedar Valley United Way	Junior Achievement of Eastern Iowa
City of Waterloo	Leader Valley Foundation
Commission on Human Rights	Mayor of Cedar Falls
Community Foundation of Northeast Iowa	Mayor of Evansdale
Community Foundation of Waterloo	Mayor of Waterloo
Community United Child Care Centers	McElroy Trust
County Social Services	MercyOne Medical Center
CUNA Mutual	Midwest Counseling
CV Preschool and Childcare Center	NAACP
	NAMI

## Community Health Needs Assessment – Allen Hospital

NEI3A  
 Northeast Iowa Food Bank  
 Operation Threshold  
 Otto Schoitz Foundation  
 Pathways  
 People’s Community Health Center  
 Riverview Center  
 Salvation Army  
 See What I Mean  
 Silos and Smokestacks  
 Sing Me to Heaven Foundation  
 St. Vincent De Paul  
 SuccessLink  
 The Job Foundation  
 Tri-County Child and Family  
 Tyson Foods

UNI – Community Engagement  
 University of Northern Iowa  
 Upper Iowa University  
 VA Clinic  
 Veridian Credit Union  
 Veterans Affairs of Black Hawk County  
 Volunteer Center of the Cedar Valley  
 Waterloo Career Center  
 Waterloo Community Foundation  
 Waterloo Schools  
 Waterloo Visitors Bureau  
 Waverly Health Center  
 Western Home Communities  
 World Grace Project  
 YMCA of Black Hawk County

Agency participants represent the interests of African American, Hispanic, Bosnian, Asian, Indian, Burmese, American Indian and Congolese populations living in the Cedar Valley, predominately in Black Hawk County. They also represent the interests of and service residents living in poverty; women and children; women and children at-risk; pre-school children; adults 65+; the disabled; the underemployed and unemployed; the medically-underserved; residents suffering from mental illness and/or addiction; residents living with food insecurity; English language learners and the LGBTQ communities. Agency participants were recruited specifically for their knowledge and record of successful service to one or more medically-underserved, low-income and minority populations in the Cedar Valley.



#### **IV. Prioritized Significant Community Health Needs**

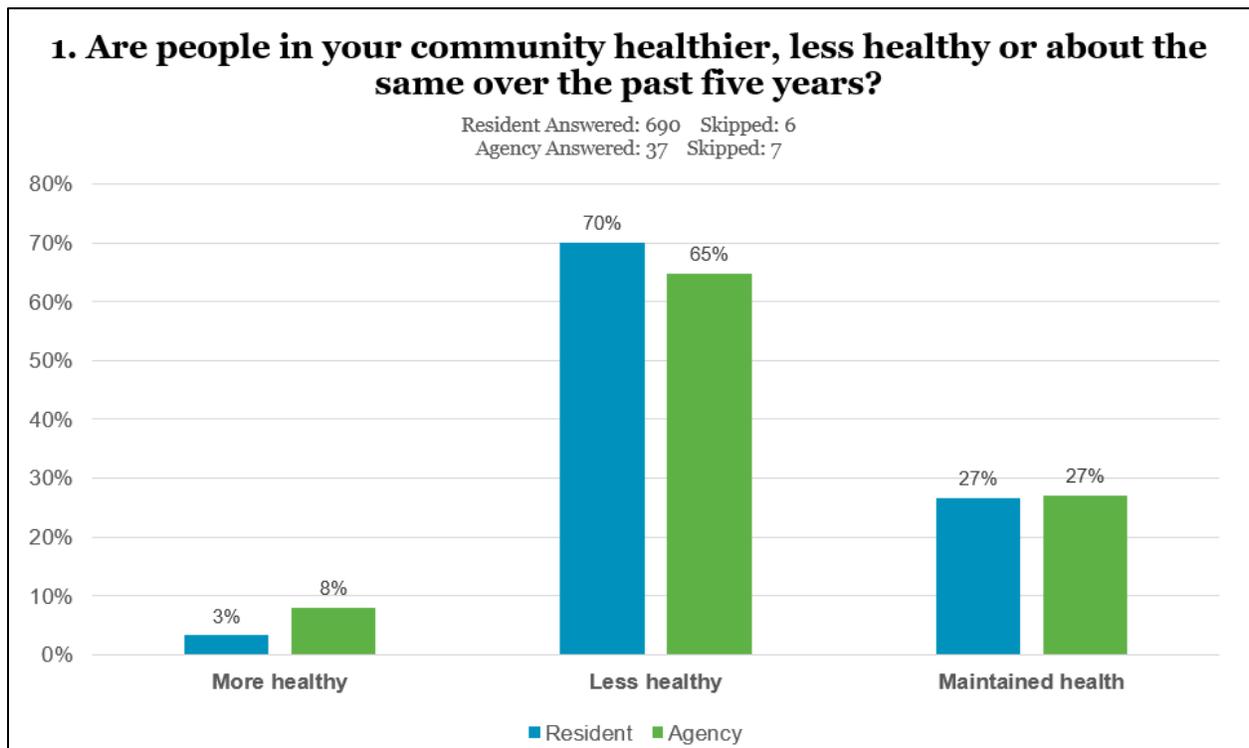
A community health needs assessment asks members to measure the health of their community by prioritizing problems and identifying needs. It tests for weakness, insufficiency, and stress. The process is valid because while individual responses are subjective, collective responses are often surprisingly similar across demographic lines. Every community has open secrets. A health needs assessment offers its members a way to talk about them with common purpose.

Throughout this assessment, we asked participants to define their own communities. The boundaries are unimportant. What matters more is what people think about where they call home and opportunities they see to make it stronger.

We started at the beginning, asking people to assess community health. From there, we asked them to consider their own health, their children's health, their mental health, and the impact of any adverse childhood experiences (ACEs) on their health today. We surveyed both residents and agencies, and we present findings from both.

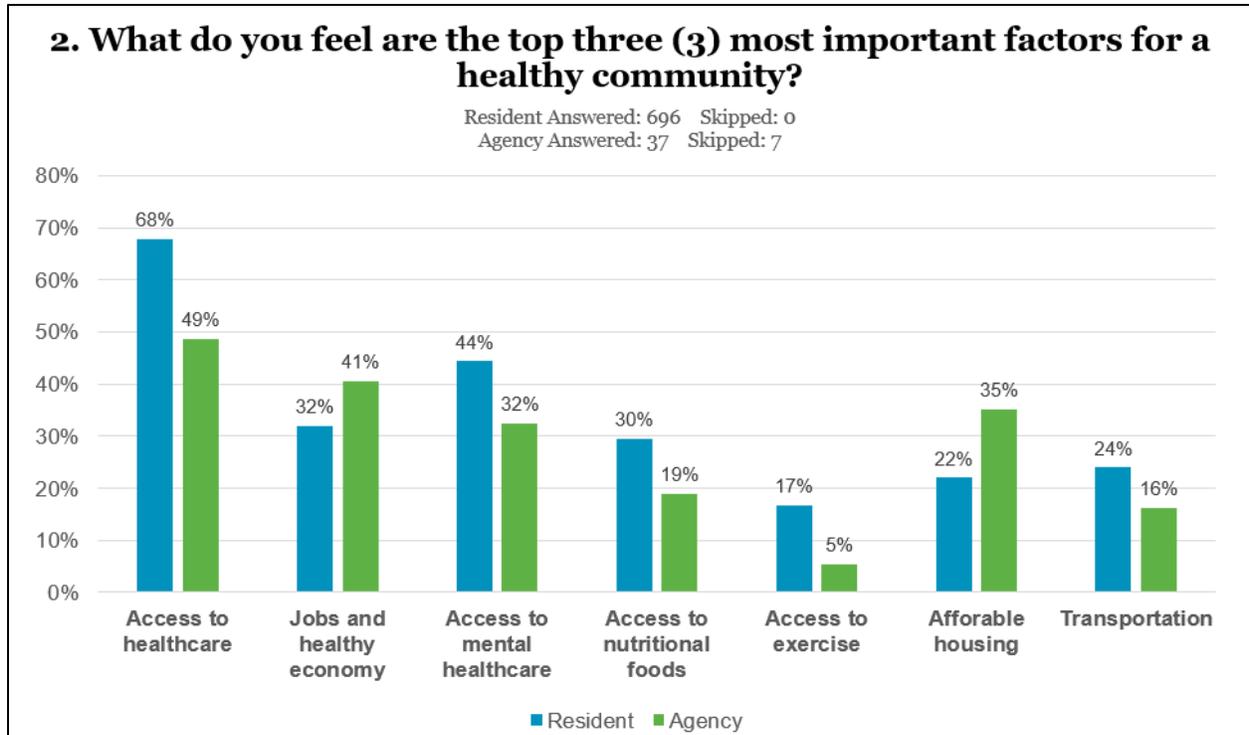
Residents speak for themselves and their families and friends. However, many minority and immigrant residents distrust surveys. Agencies speak for those residents and help represent individuals and populations who cannot or will not participate out of fear of identification or reprisal. Agency participation ensures their voices are counted too.

## COMMUNITY HEALTH



The community health needs assessment begins by asking people how they feel about their community. For this survey, seven out of ten believe their community is less healthy than it was in 2019.

The decline in perception of the community’s health may be related to the COVID-19 pandemic. It may also be related to the highlighted media awareness of many public health issues, such as access to healthcare, access to mental health care, housing, and transportation issues as well as actual changes in those parameters. Survey questions are designed to investigate and prioritize these changes to create opportunities for targeted actions.



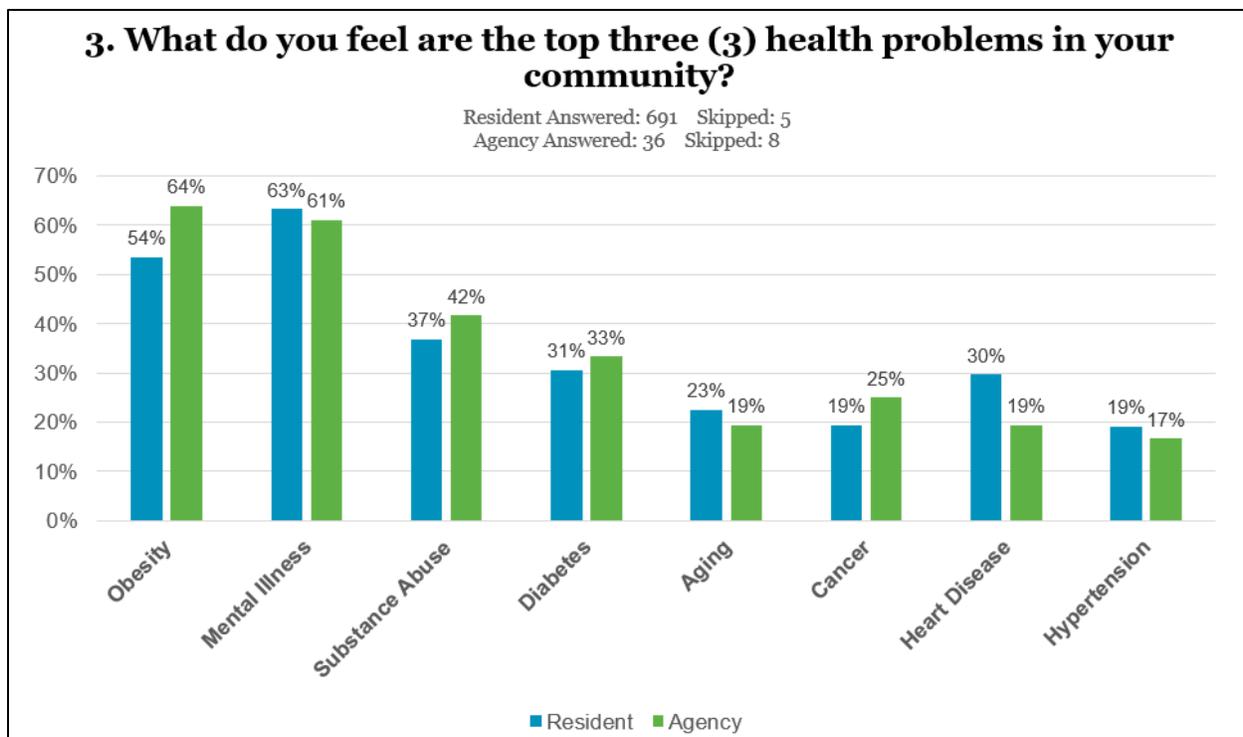
The top three factors for a healthy community are:

- Access to healthcare
- Access to mental healthcare
- Jobs and a healthy economy

Comments to the open-ended portion of this question indicate that access may also include affordable health care. Health insurance is almost always available but all too frequently inaccessible because of cost or the health status of the person seeking it.

According to the Agency for Healthcare Research and Quality, access to healthcare includes four components: coverage, services, timeliness, and workforce.

Question 31 indicates most of the survey respondents have health insurance through their employer, but when answering about the community they realize not everyone may have access to health insurance. Those without health insurance historically are less likely to seek out care.



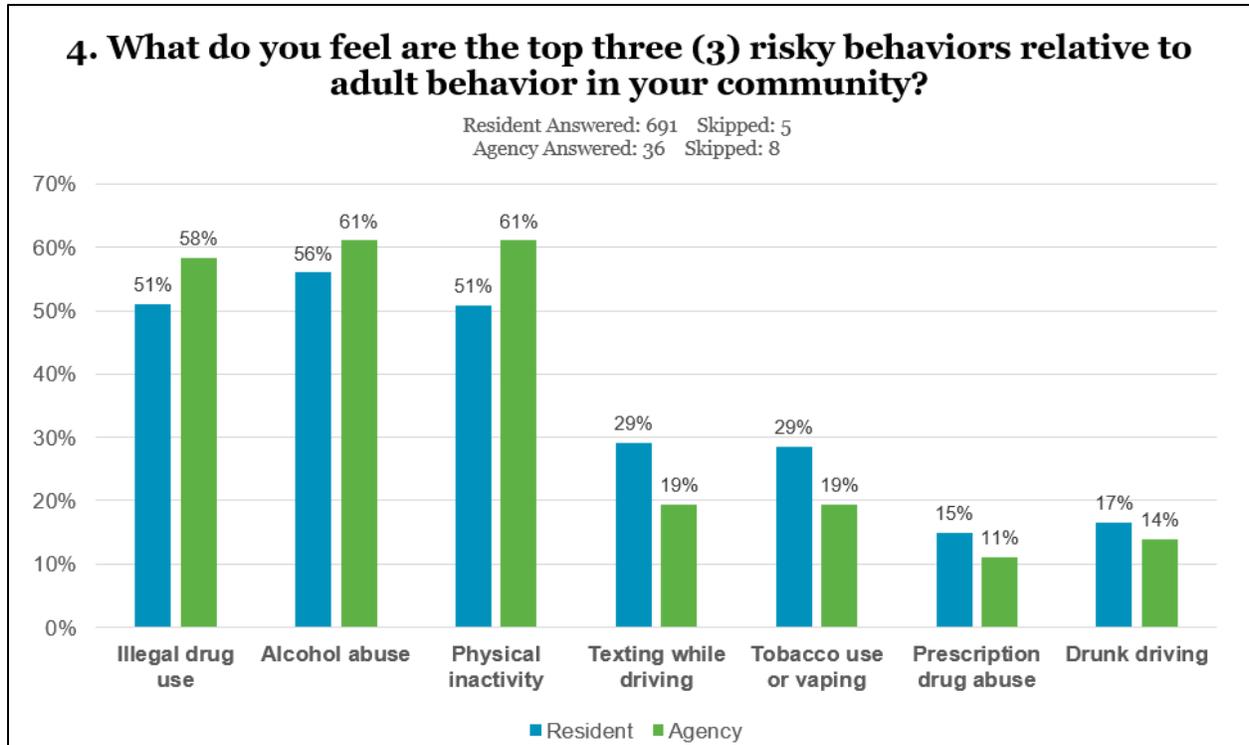
Both residents and agencies agree the top three community health problems are:

- Mental illness
- Obesity
- Substance abuse

Closely related, diabetes and heart disease/stroke were top choices for residents and agencies.

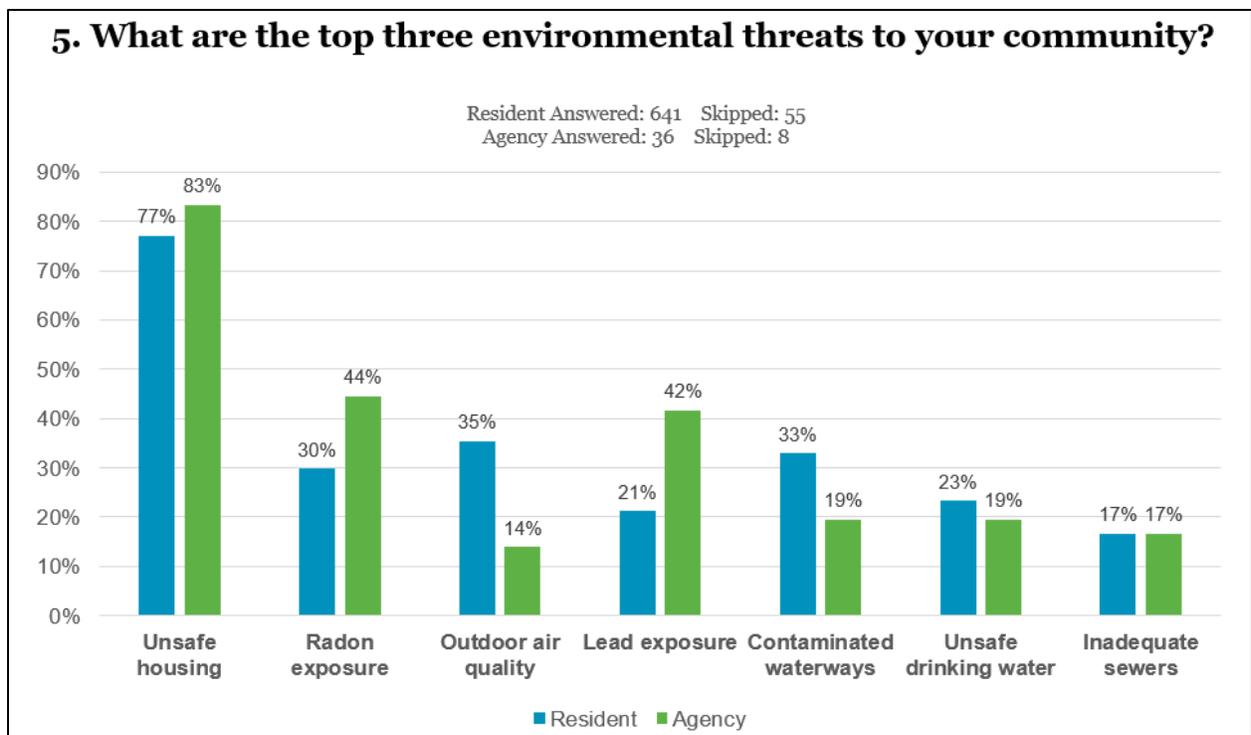
Iowa now ranks seventh in the nation for adult obesity, with nearly 36.5% reported as obese. Iowa ranks eighth for children considered overweight or obese. Obesity increases the risk for developing many diseases including diabetes, high blood pressure, heart disease, and cancers. Those that experience childhood obesity are more likely to become obese adults. According to the Centers for Disease Control and Prevention (CDC), obese children are also more likely to suffer from bullying and depression.

For many years, Iowa reported a lack of providers, care settings, and enough funding to begin meeting the demand. Throughout the COVID-19 pandemic, the mental health crisis in Iowa and across the nation continues to worsen. In 2022, nearly 128,000 Iowans reported having a serious mental health condition, and when asked about treatment, nearly one third of these individuals reported cost as a deterrent for receiving care.



Three addictions made the top list as well as two personal choices. The top five risky behaviors were:

- Alcohol abuse
- Illegal drug use
- Physical inactivity
- Texting while driving
- Tobacco use and vaping

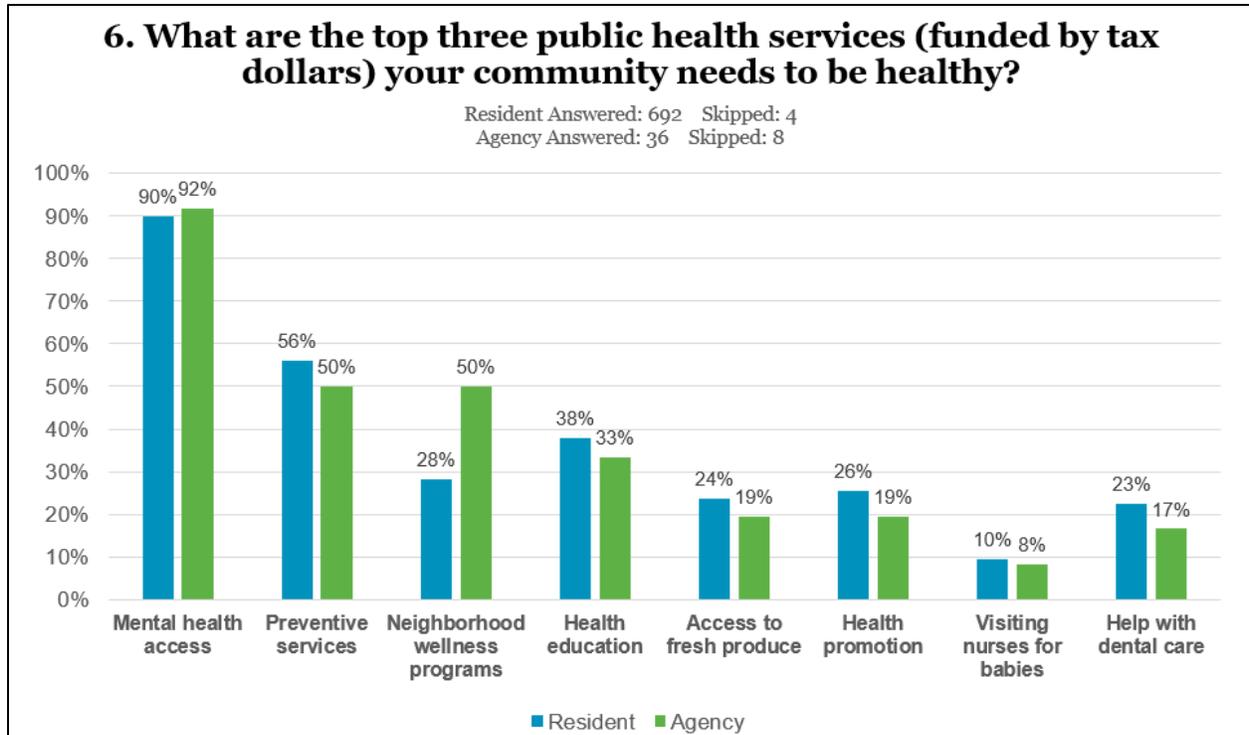


The top three environmental threats to our communities are:

- Unsafe housing
- Outdoor air quality
- Contaminated waterways

In 2019, the survey ranked radon exposure as a top threat. It is still reported that Iowa has the largest percentage of homes in the nation with radon levels above the United States Environmental Protection Agency’s recommended level, nearly fifty percent of homes reported high radon levels.

Healthy homes support healthy people, and unhealthy homes can have a significant impact on public health issues. A healthy home has good air quality – no first or secondhand smoke, is carbon monoxide and radon free, has good water quality, has safe drinking water and wastewater treatment systems, is free of toxins (pesticides, asbestos, lead, and mold) and is well maintained (free of fire and other hazards).



The top three public health services needed according to residents are:

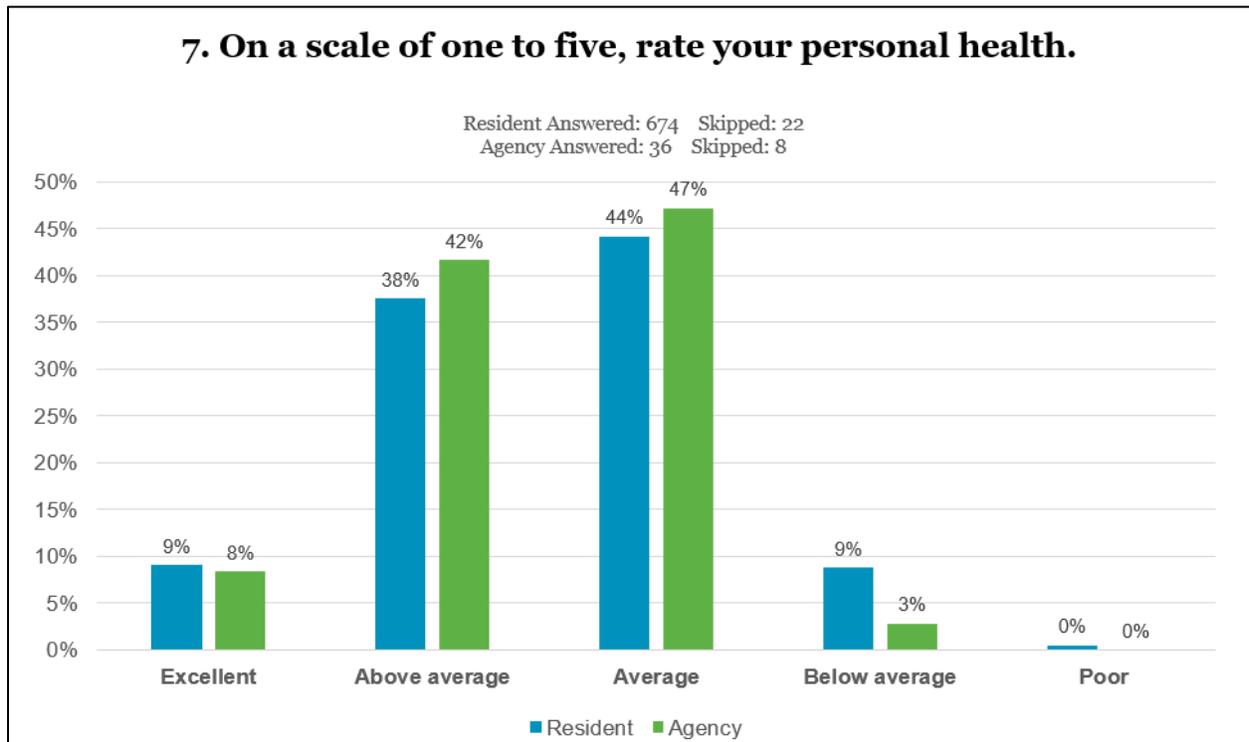
- Mental health access
- Preventative services
- Health education

The top three public health services needed according to the agencies are:

- Mental health access
- Preventative services
- Neighborhood wellness programs

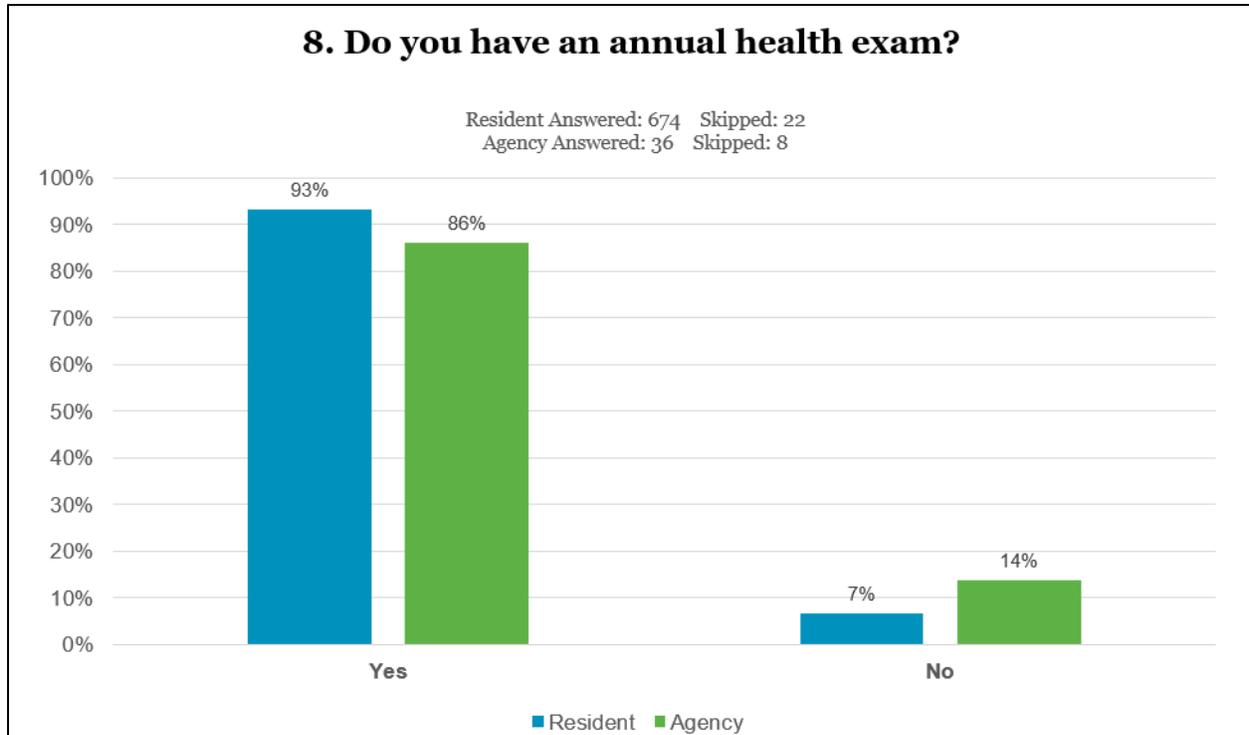
Agencies often recognize the importance of preventive measures, programs, and education. There is a shift in the mindset of communities to more of a preventive approach as well. Focusing on the widespread early treatment of diseases to keep people healthy and out of the hospital is an approach that is slow but more effective in the long-term for creating a healthy community.

## PERSONAL HEALTH



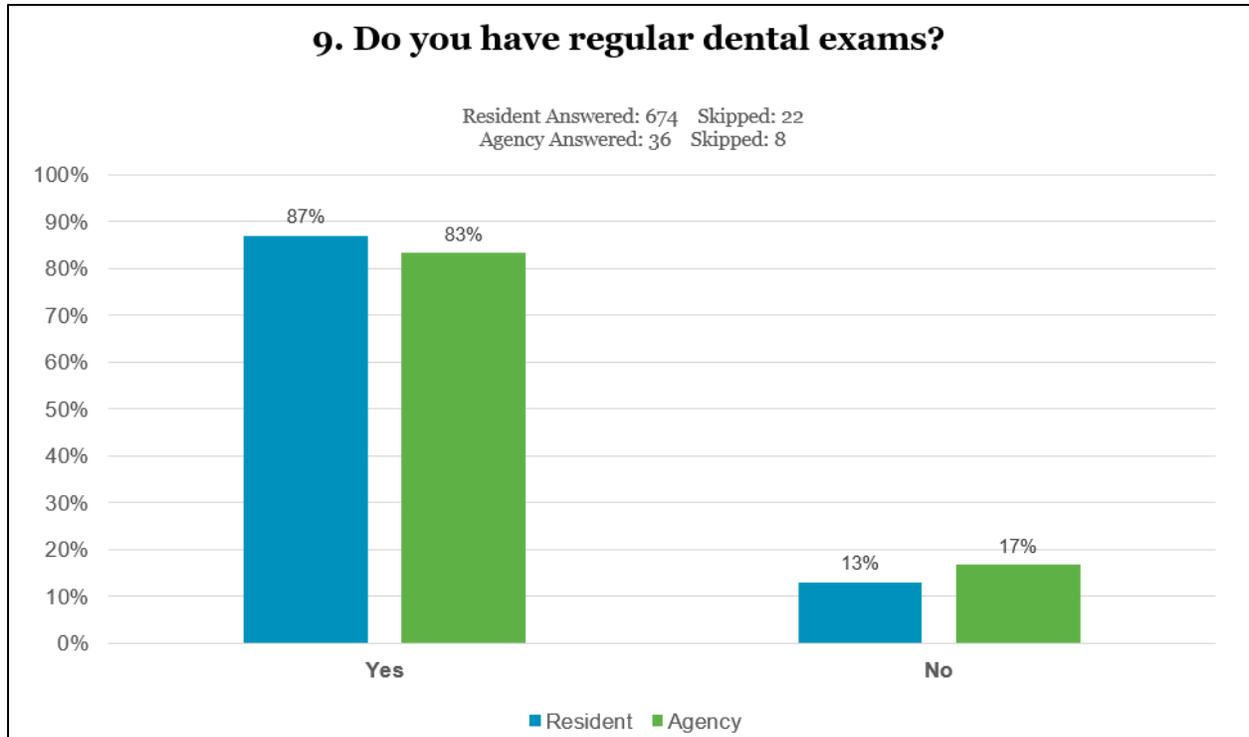
Most of the residents who replied rated themselves as in excellent or above average health. Statistically, only 50% of a population are apt to be average or above. In this case, 96% of respondents and 100% of agencies claimed that health status.

When asked the health of community in Question 1, the majority thought the community health was declining. Agencies responded in a similar way for the health of the people they serve.



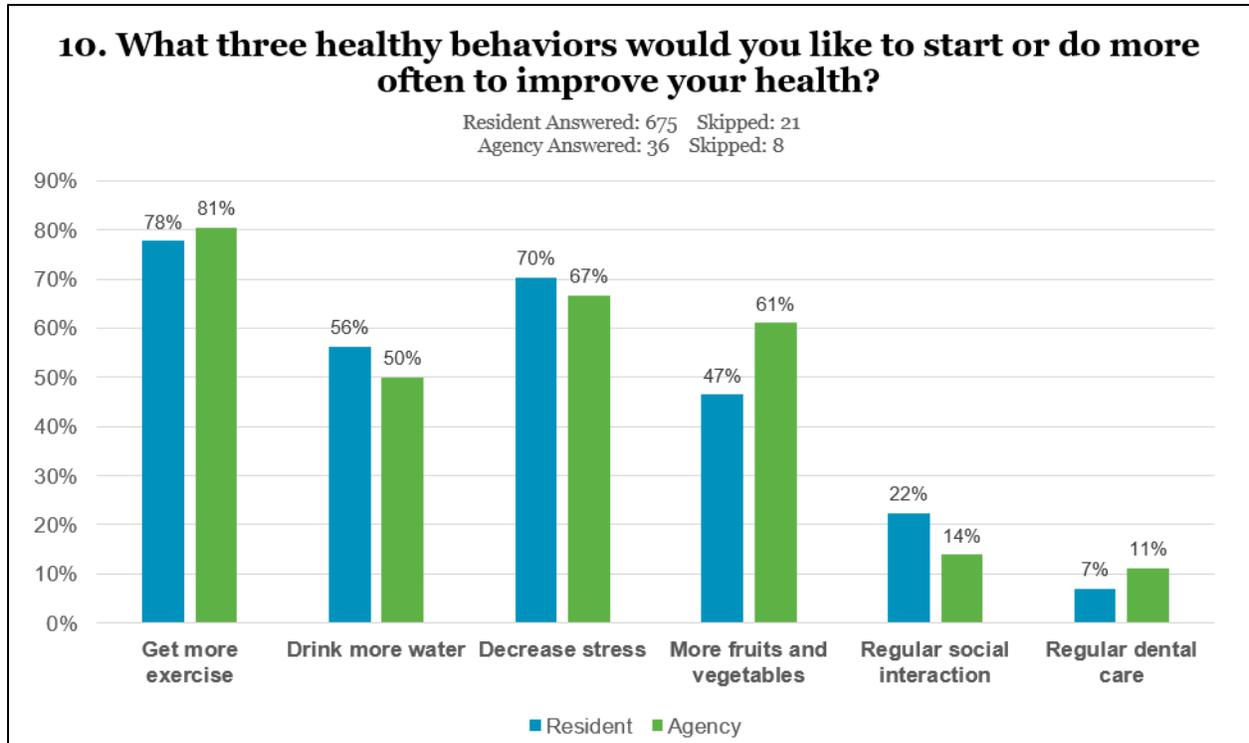
The positive response to this question is likely tied to the health insurance status of the respondents, see Question 31.

Becker’s Hospital Review reports Iowa ranks slightly below the national average of 157 primary care physicians per 100,000 residents. Iowa indexes at 153, a slight increase from 147 as reported in 2019.



Dental care is less available in the United States than healthcare. The American Dental Association estimates 33% of Americans do not have dental insurance, and 90% of dental insurance plans are employer sponsored. Even with full time employment, many jobs do not come with health or dental benefits.

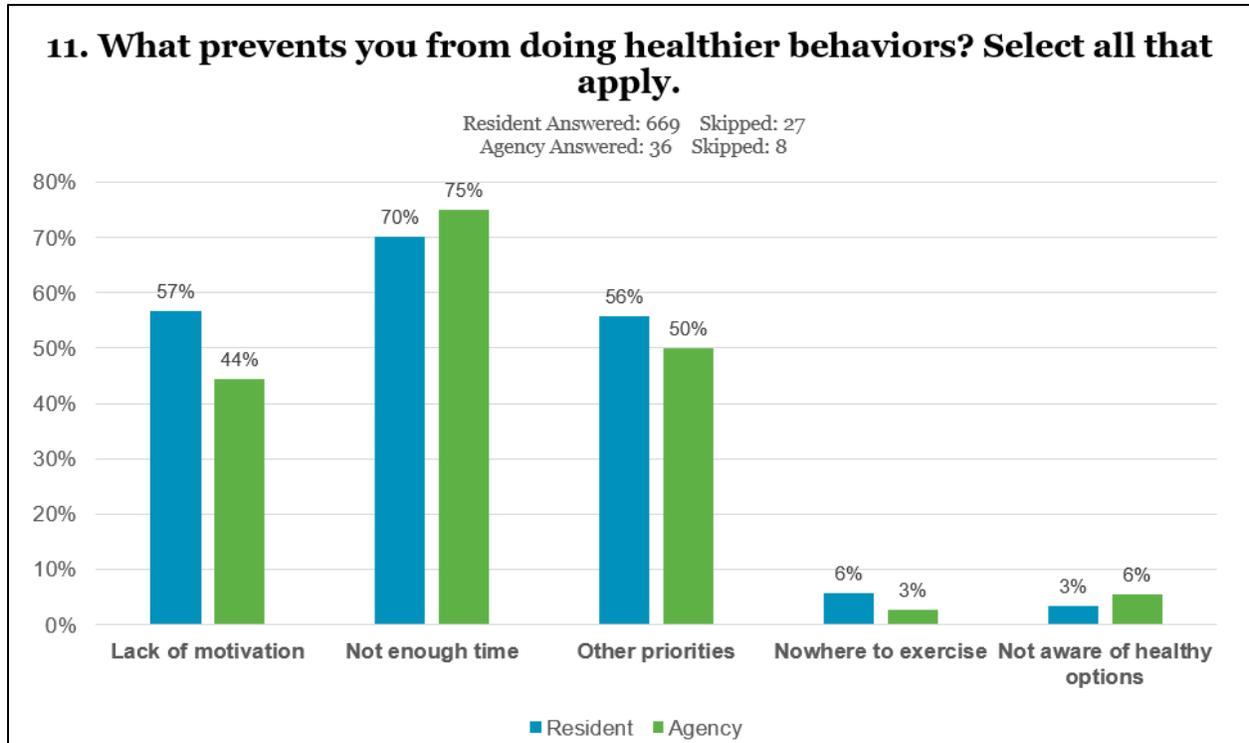
Lack of regular dental care can cause tooth decay, tooth loss and gum disease. Poor oral care is linked to heart disease, cancer, and diabetes. Like good healthcare, good dental care requires lifelong patient participation, including regular brushing, flossing, checkups, and restorations, as well as clean and fluoridated drinking water.



Residents and agencies both identified lack of exercise as a common risky behavior for adults. The responses here mirror responses in Question 4. Residents and agencies both identified lack of exercise as a common risky behavior for adults. Additionally, most respondents recognize the link between exercise and mental health, see Question 19 & 20.

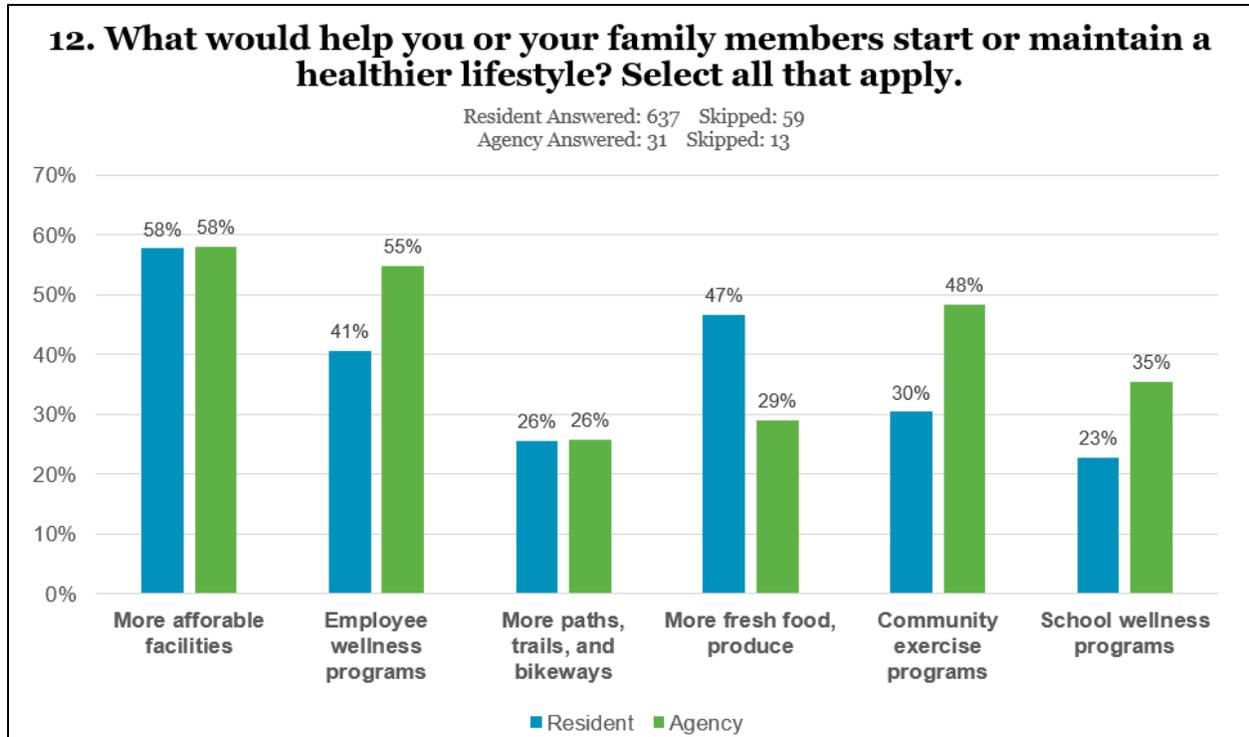
The second healthy behavior from both residents and agencies was to decrease stress. Exercise and stress levels are linked and work together to improve one’s overall health.

The identified needs to drink more water and eat more fruits and vegetables are consistent with education that we have received since we were young. Most people know it’s the right thing to do for their health, but the implementation is where it can be tough.



The top three responses to Question 11 are similar for residents and agencies. Not enough time, lack of motivation, and other priorities prevent many Americans from getting the recommended amount of exercise per week.

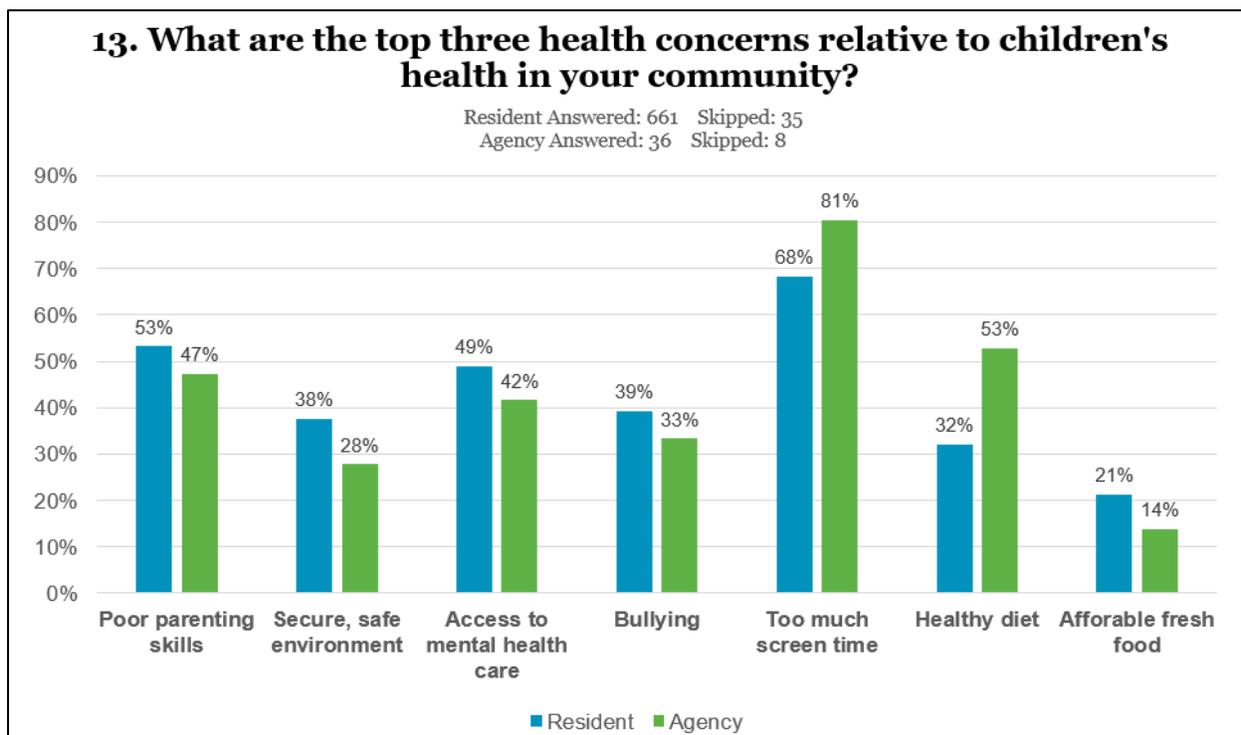
The Centers for Disease Control and Prevention’s National Center for Health Statistics estimates only around 22% of Americans get at least 150 minutes of moderate or 75 minutes of vigorous exercise each week. These recommendations are the thresholds identified for prevention of cardiovascular complication such as heart disease and stroke.



Responses to this question focus on programs and facilities, recognizing the social aspect of many exercise regimens.

However, just having programs and facilities does not mean people will do the work necessary to attend often enough and work hard enough to make a difference. People at every age need exercise, and most people need a lot more than they are getting. Exercise takes time and dedication. There is no health benefit for those who don't put in the work.

## CHILDREN’S HEALTH

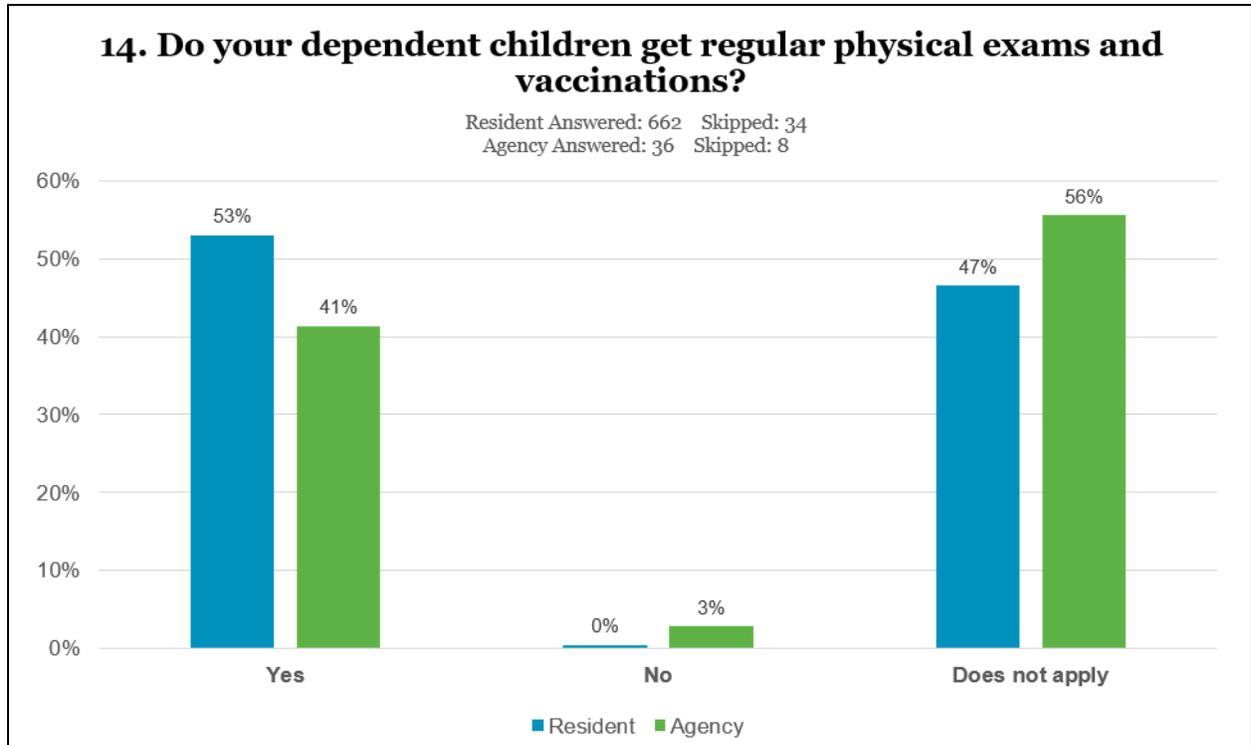


Too much screen time was the top concern in this assessment. In the previous two assessments, poor parenting skills was the top concern. Many parents turned to additional screen time through the pandemic due to virtual school, parents working at home, and many parks and activities, outdoor and indoor, being closed.

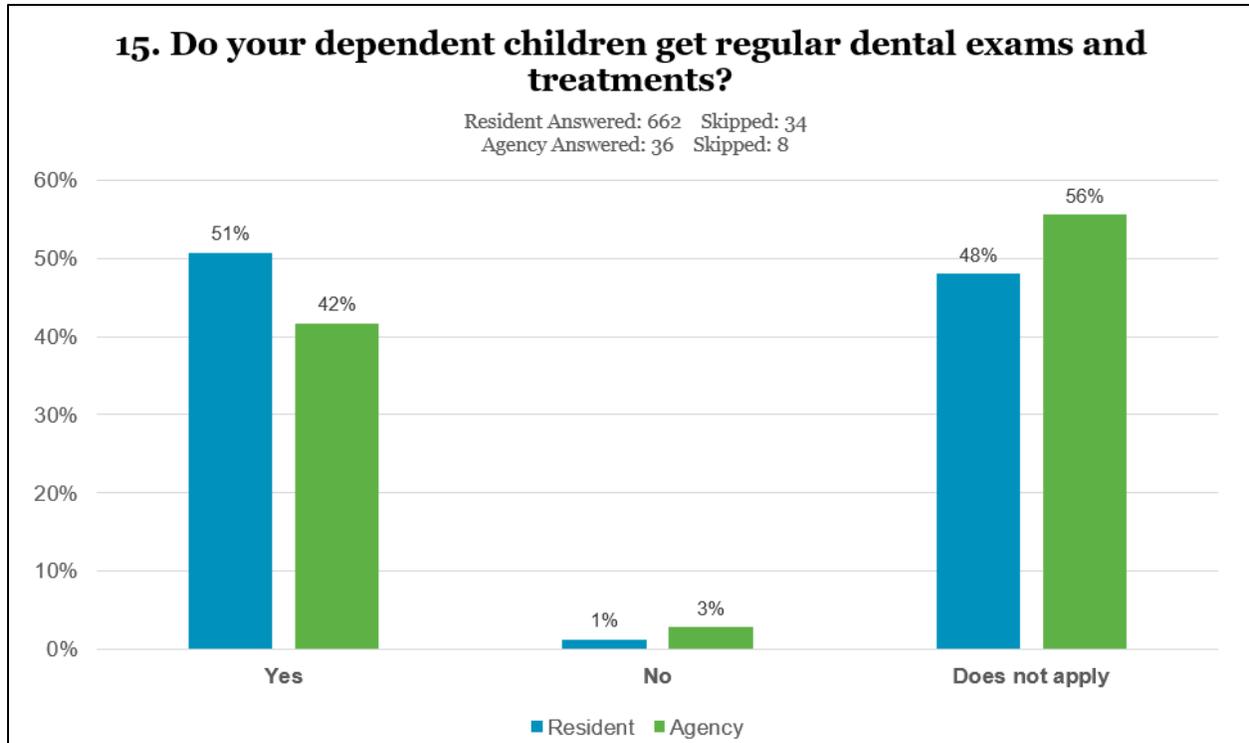
Good parenting ties to the need for children to have a safe, secure environment – both a personal and community health issues.

Access to mental healthcare is even more difficult for children than adults. There are few psychiatrists that specialize in children and teens and Iowa. Many family practice providers are this resource for children and teens. If children and teens are receiving their annual health exam, while it may not be enough care, it may be the introduction to the mental healthcare they need.

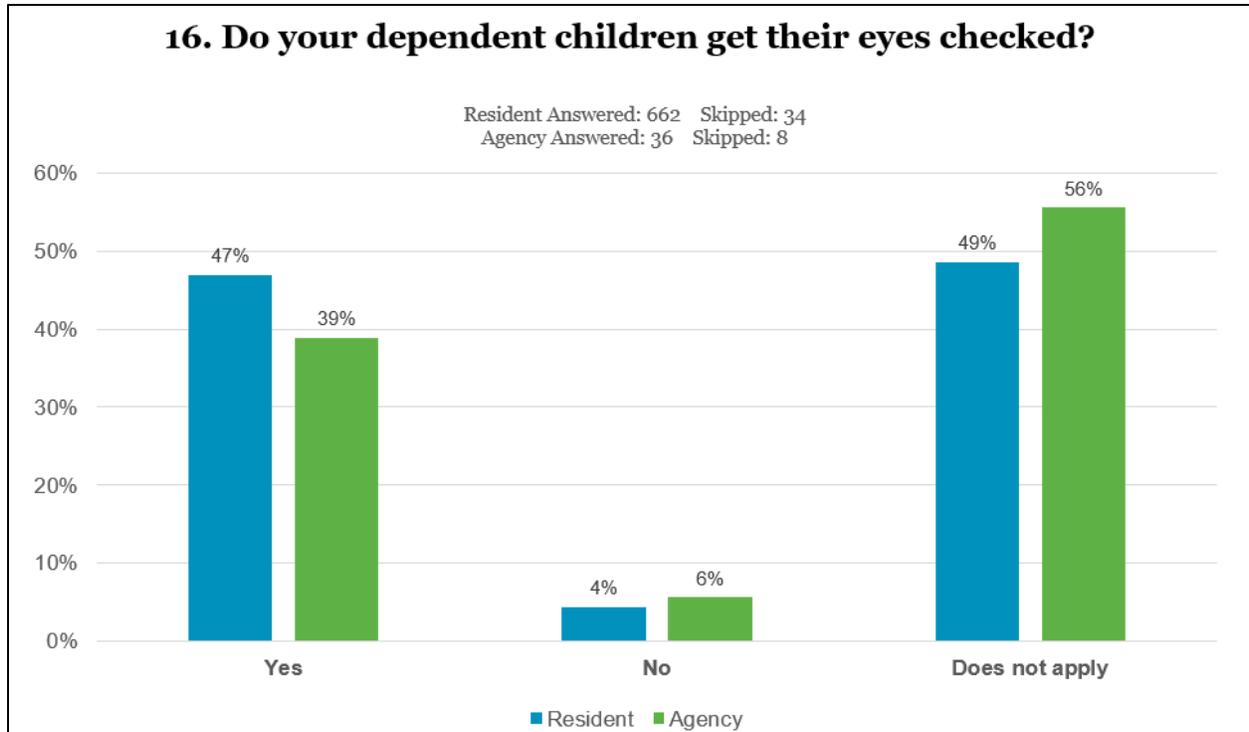
Bullying is not new to this list, but is gaining prominence quickly especially with the increased screen time. Online bullying is particularly hard to address. It is very hard to know how many predators lurk online and even harder to control them.



This is a positive response and a credit to parents, agencies, and communities.



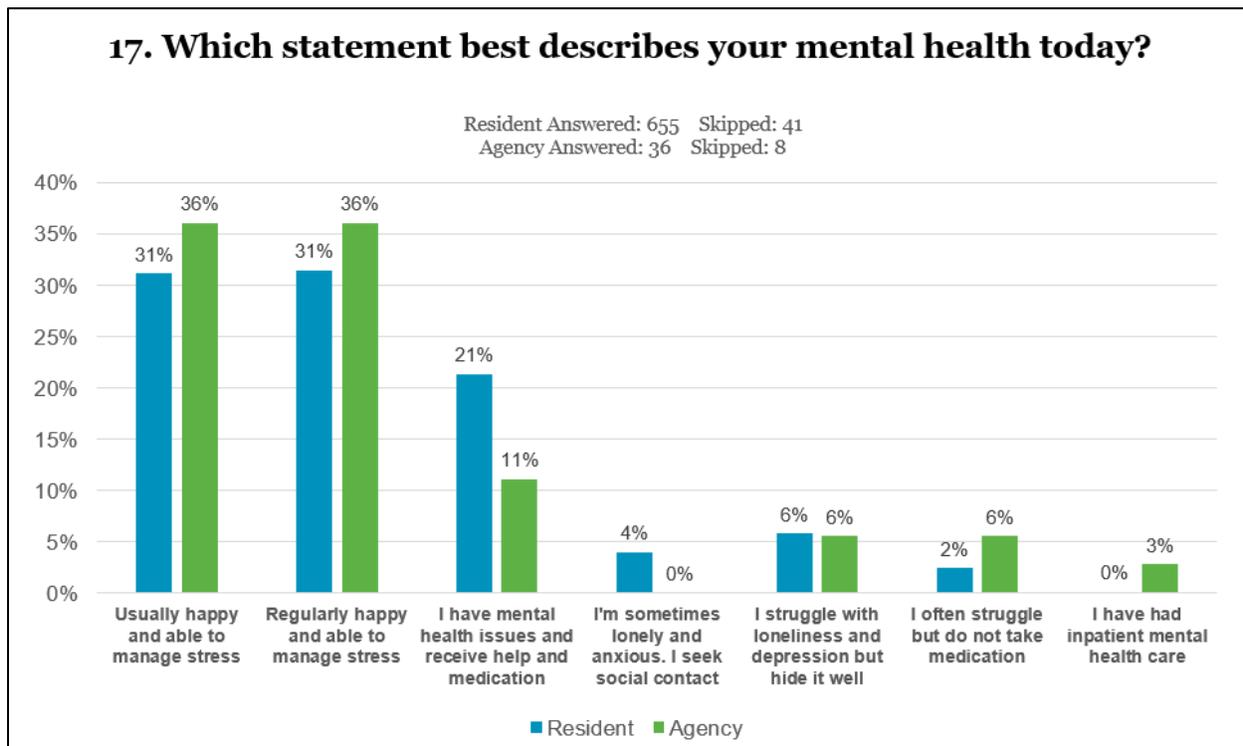
This response is positive. While most survey respondents have health insurance, they may not have dental or vision insurance. Black Hawk and many surrounding counties have a strong dental health presence with support for the “Dentist by 1” campaign.



As in Question 15, responses to this question may depend on the residents' insurance status. Eye exams and glasses are not covered under most healthcare policies.

The Iowa Child Vision Screening Program through the Iowa Department of Public Health is designed to provide a comprehensive vision screening for all students in kindergarten and third grade. Much of a child's learning is visual and the ability to see is critical for learning to read. Children who can't read by the fourth grade are at risk of being sidelined academically for the rest of their lives.

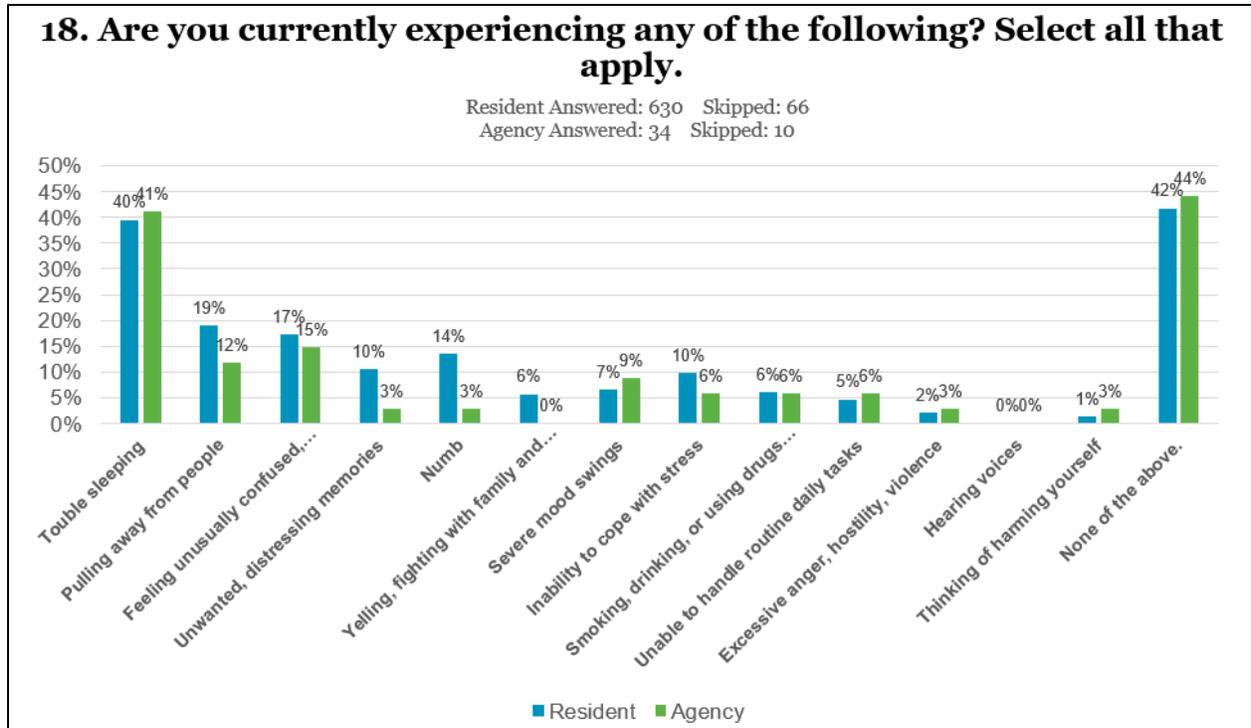
**MENTAL HEALTH**



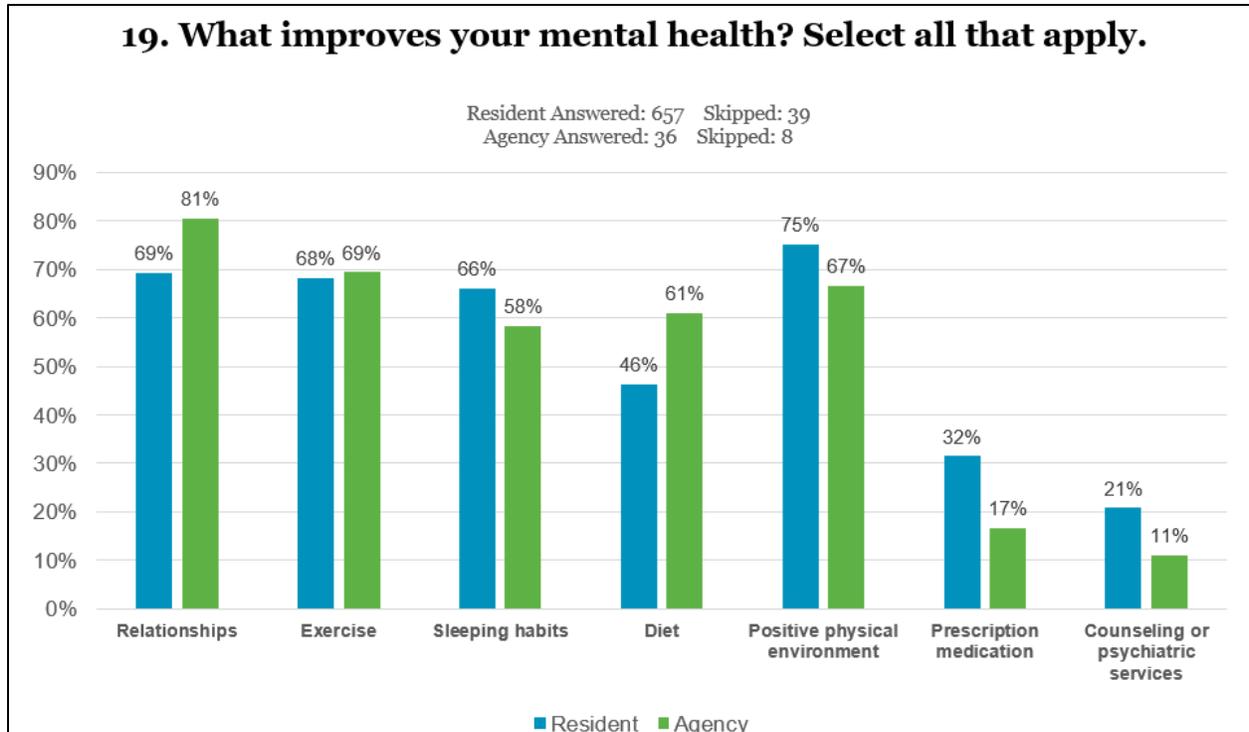
About 60% of residents and agencies indicated they generally are not dealing with mental health issues in their daily lives. The assessment has nearly 35% of respondents dealing with mental health issues. This is almost double the national norm estimate that one in five American adults will have one or more mental illness.

While the response of this assessment was consistent with the response pre-pandemic, the World Health Organization estimates the global prevalence of anxiety and depression increased by nearly 25%.

Mental illness still carries a powerful stigma. People do not want to admit their own issues, and they also don't want to share them with others. Mental illness often frightens family and friends, causing them to pull away as if it were contagious. Mental illness also carries the stigma of being something patients somehow bring on themselves or can cure on their own. Those common misperceptions push mental health patients and issues deeper into the shadows, away from effective treatment.

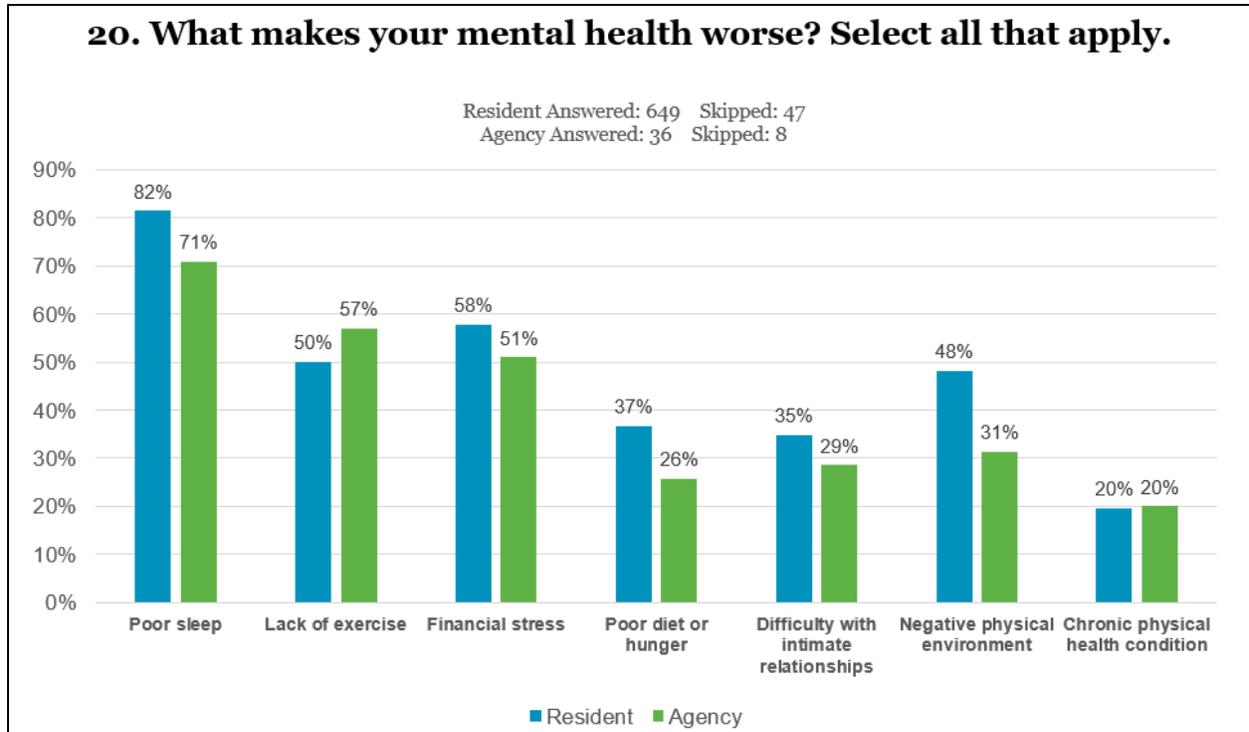


Among the top responses for residents that were experiencing symptoms were trouble sleeping, pulling away from people, and feeling unusually confused, forgetful, on edge, angry, upset, worried, or scared. These responses are often common signs of emotional stress which may be driven by too much work, too much screen time and too little time spent unplugged and free to recharge.



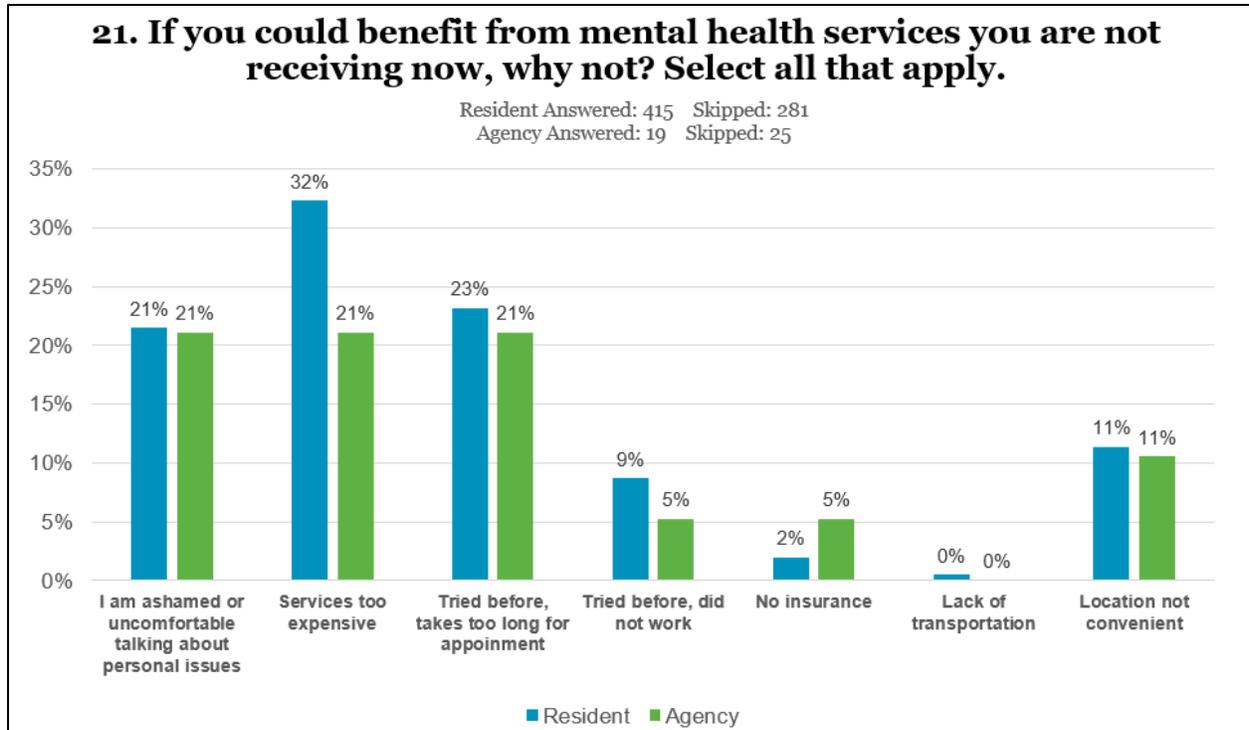
The correlation between resident and agency responses is strong here. None of these health activities are new or flashy. They are tested, reliable ways to re-center us around home, family, and our own needs.

These responses underline the social determinants of good health and healthcare. Respondents are saying that getting the basics right – family, friends, exercise, sleep, and diet – is generally more effective by far than medication or counseling alone. Humans need connections with other people to thrive. Things that bend those bonds stress us. Too much stress breaks us.



These responses validate the answers to Question 19. What makes our mental health worse is the absence of what makes our mental health better. The top five responses are the lack of things we all need: sleep, exercise, financial security, healthy diet, and relationships built on affection and trust.

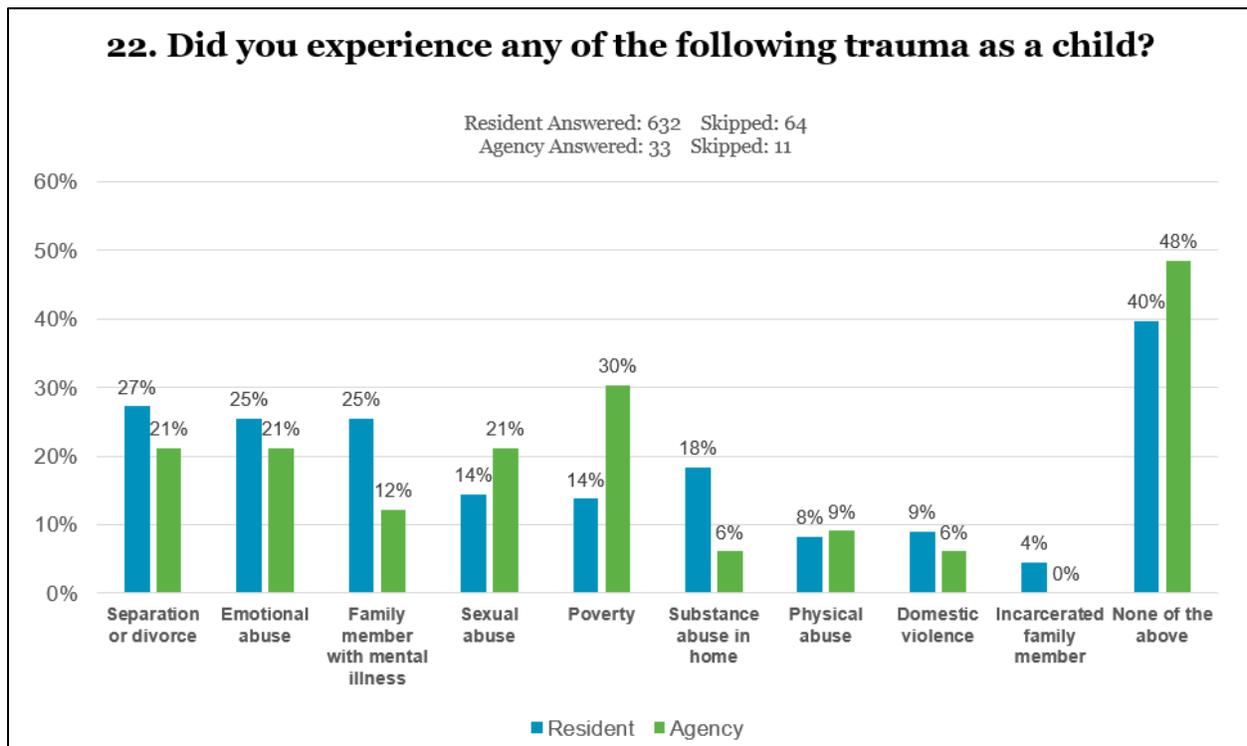
Chronic physical health conditions are frequently accompanied by mental health issues. When this occurs, the mental health concerns can get overlooked. Some physical health conditions drive mental illness. None make mental illness easier to treat. That’s why UnityPoint Health is co-locating mental health in primary care clinics. The best time to address both physical and mental health issues is while people are already in our clinics, talking with providers they trust.



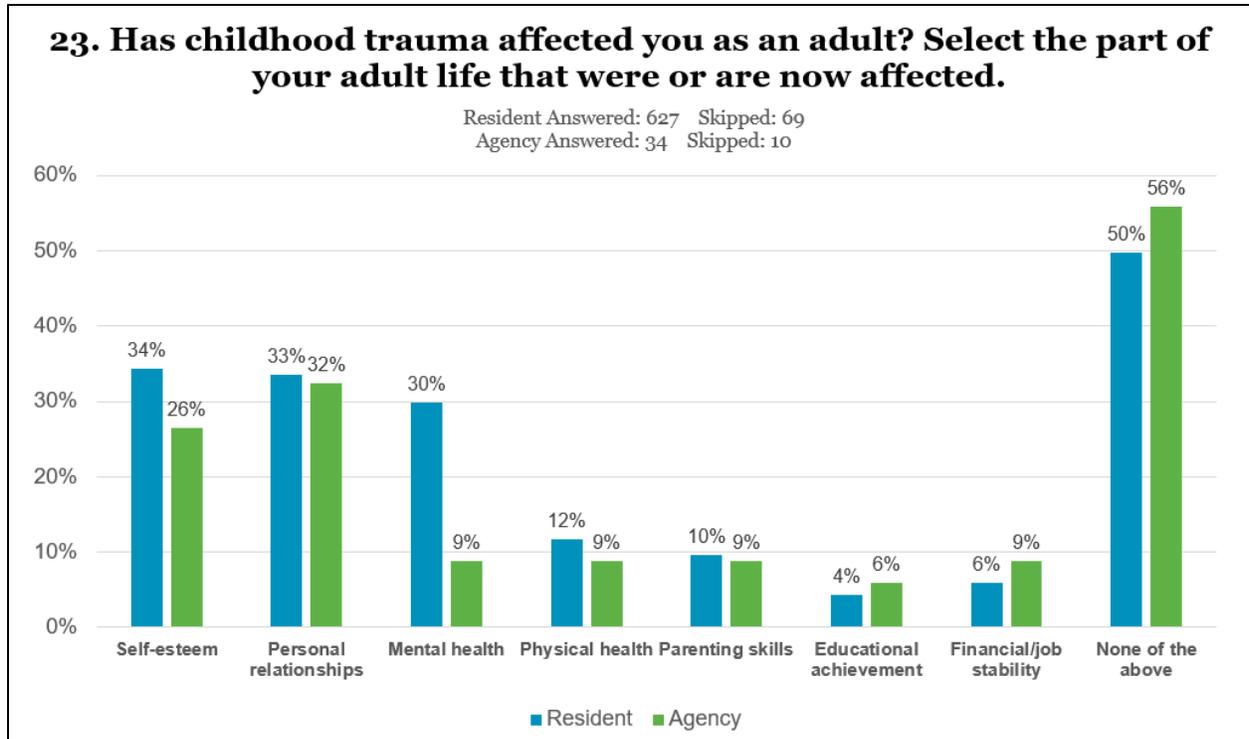
There was a decrease in the percentage of resident respondents that stated they didn't receive care out of shame or discomfort, approximately 20% compared to 37% in 2019. This is a trend in the right direction and may be partly due to decreasing the stigma around mental health and societal norms to begin talking about it.

Issues of cost and delay point to the enormous imbalance between the limited number of mental health providers and the large number of mental health patients needing prompt attention. UnityPoint Mental Health Walk-In Clinic addresses the promptness of appointments and is a growing resource for the community.

**ADVERSE CHILDHOOD EXPERIENCES (ACES)**

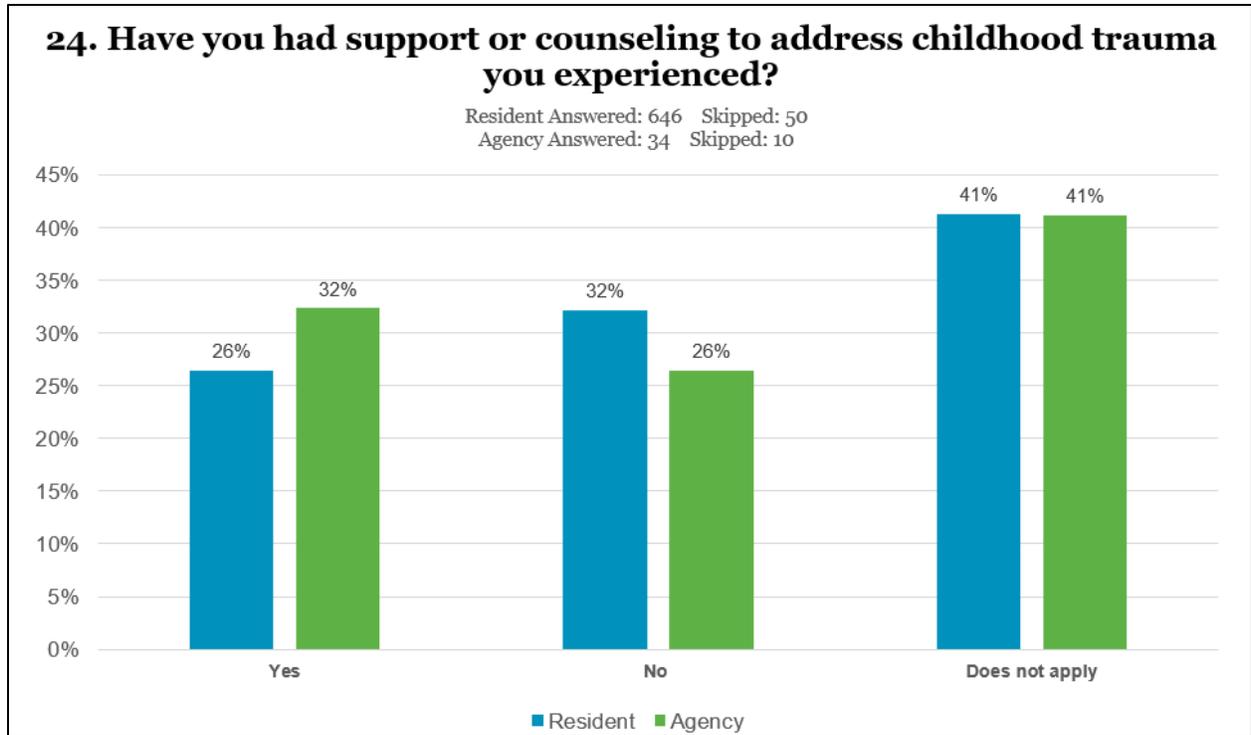


There is a strong correlation between adverse childhood experiences (ACES) and serious health problems when children become adults. The effects of these experiences are cumulative. Adults who have had zero or one ACE as children typically live longer, healthier lives than adults who have had multiple ACES. The negative effect of multiple ACES show up in middle age addictions, alcoholism, poor self-image, lack of self-control and chronic disease.



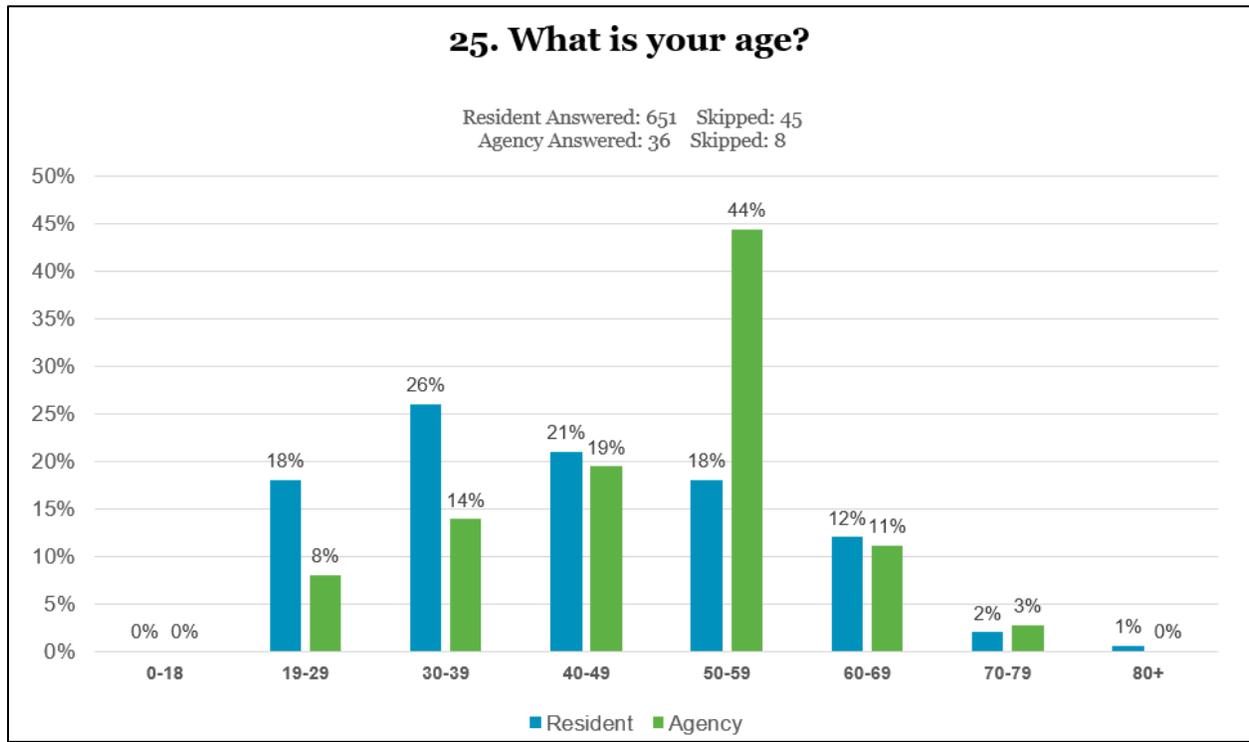
Majority of both residents and agencies indicate ACES have affected their self-esteem and personal relationships as adults. They also report ACES have affected their mental health.

Gathering and tracking ACES data can help communities identify and address ACES and help reduce or prevent generational cycles of negative behavior from repeating.

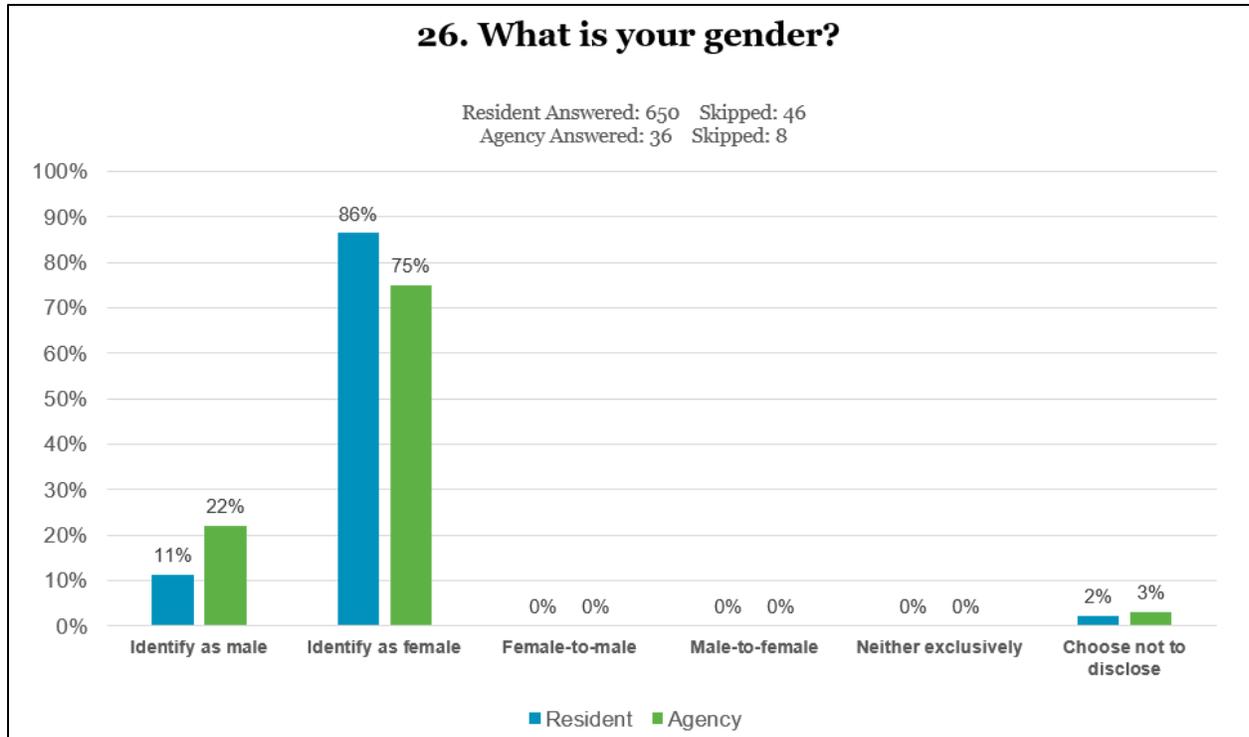


Nearly half of the resident and agency respondents that reported at least one ACES also reported seeking support or counseling. Communities and providers have enormous opportunity to improve population health by conducting and tracking ACES in students and acting on the results.

## PARTICIPANT PROFILES

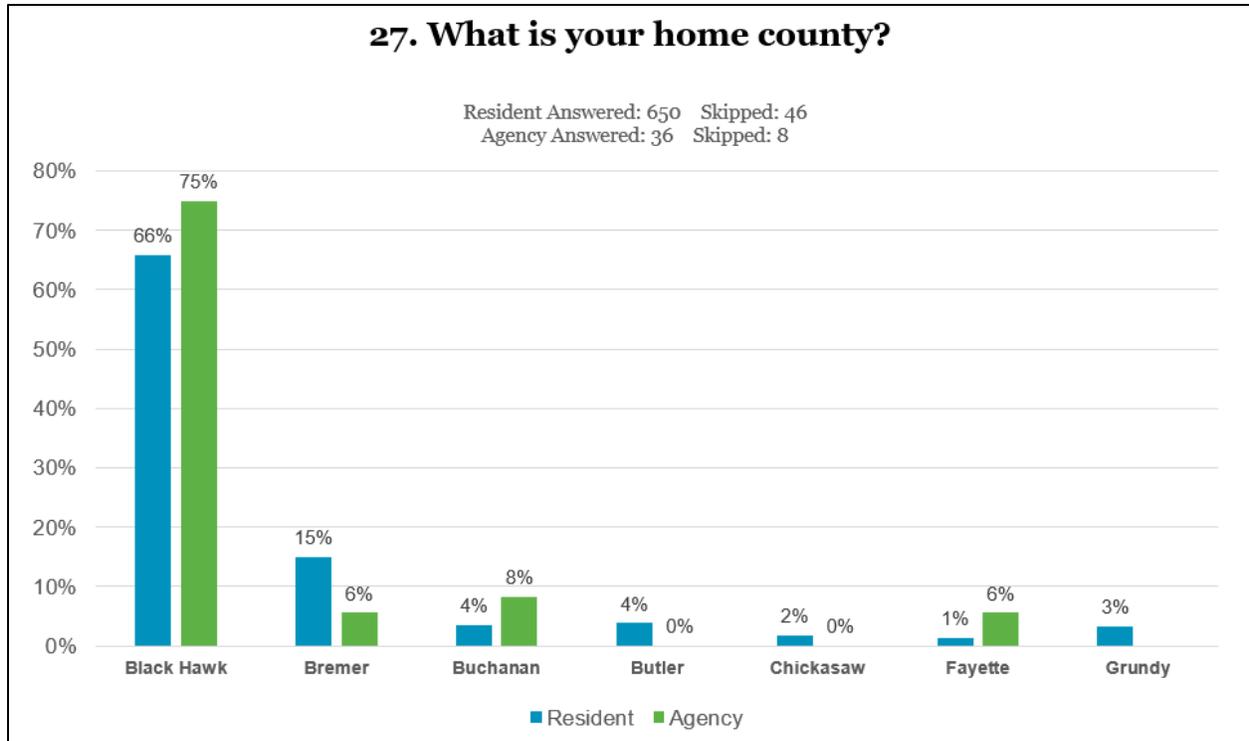


The participant age make-up of this survey is similar to those conducted in the past. Issues become more important as young people mature and raise children of their own. Healthcare becomes a priority for most adults once they reach middle age and a way of life for the elderly.



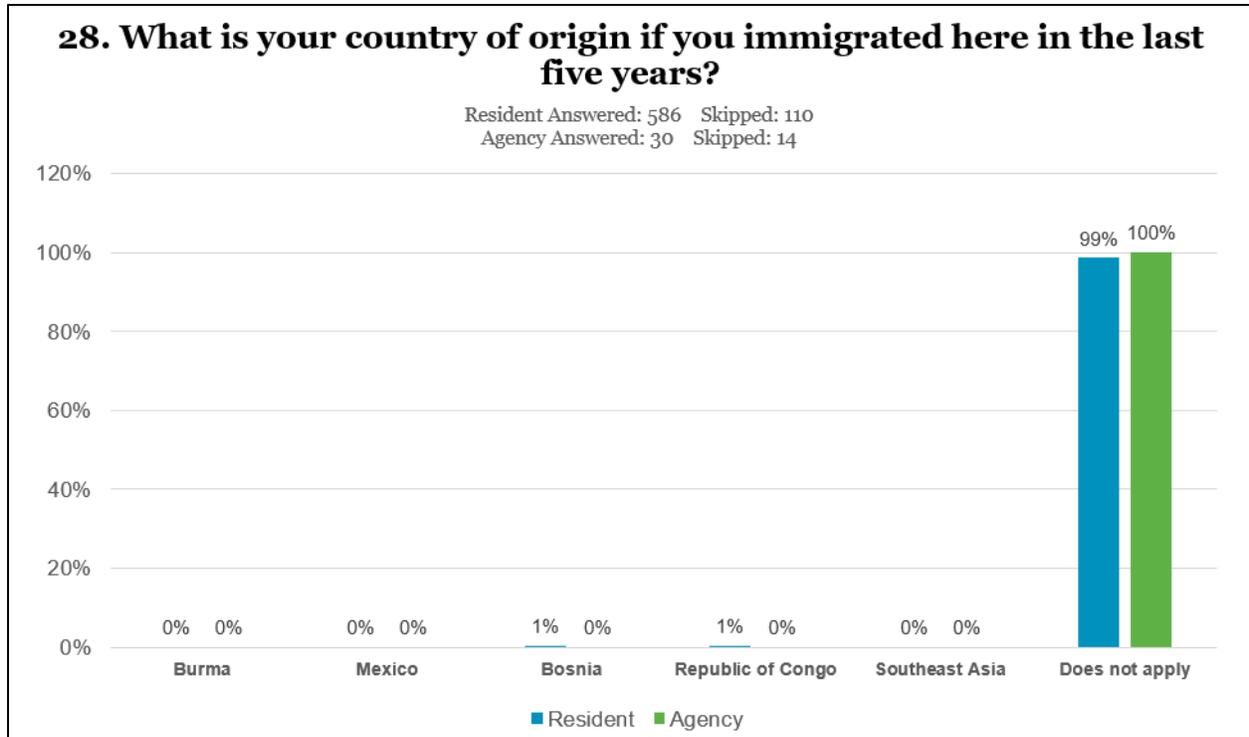
This is a valid gender distribution for healthcare issues. Women make a large majority of healthcare decisions for themselves and family members at all stages of life. Men are more apt to seek healthcare primarily for injury or illness rather than prevention, early intervention, or counseling.

The public usually identifies just two genders. Patients, however, may identify in many ways. UnityPoint Health – Waterloo provides gender-specific care at our LGBTQ Clinic at Prairie Parkway in Cedar Falls.

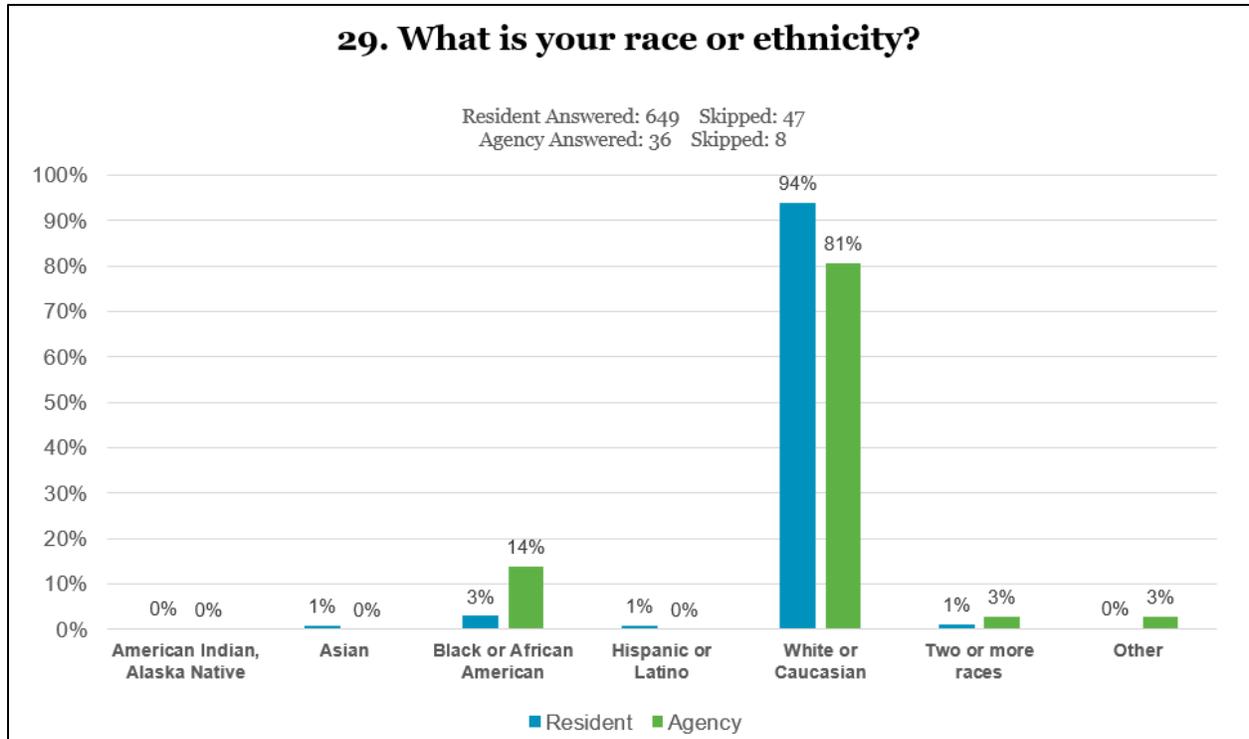


Black Hawk County residents were the majority in this assessment, followed by Bremer, Butler, Buchanan, and Grundy counties.

Agencies typically provide services throughout the Cedar Valley, regardless of where the agencies are based.

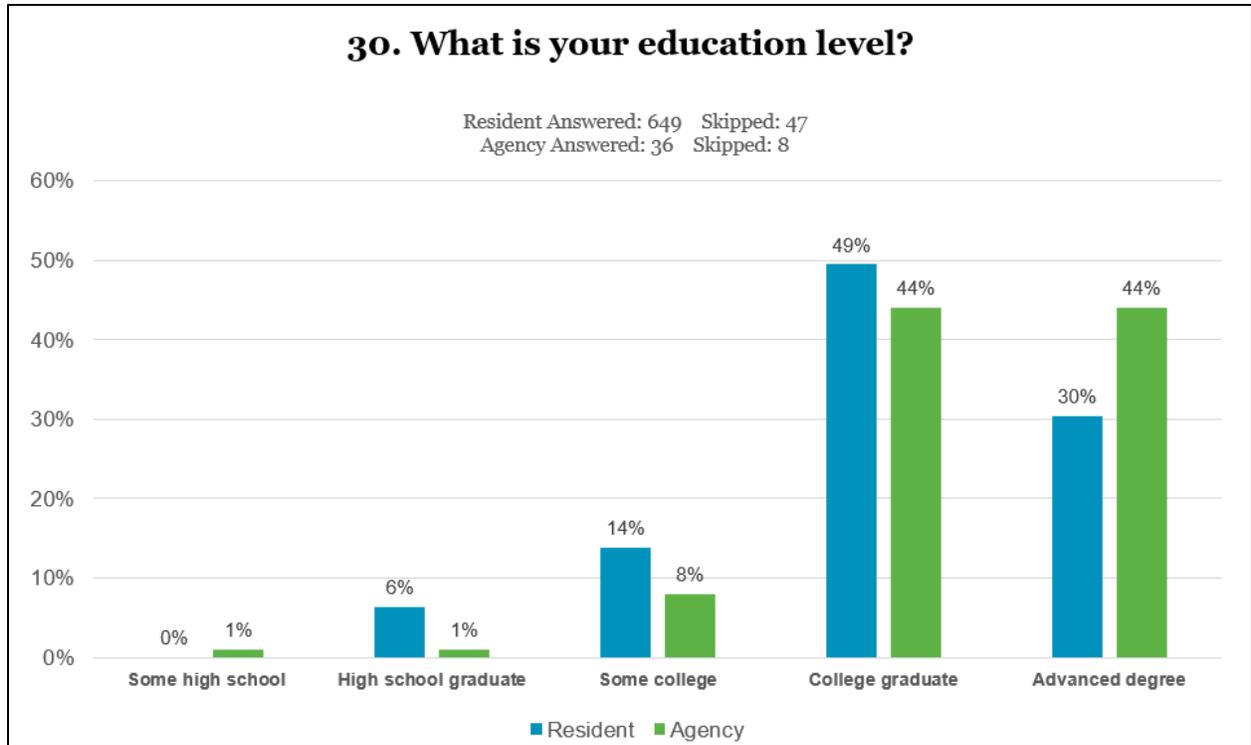


Black Hawk County has many immigrant populations, and they are under-represented in the survey. Immigrants face healthcare barriers, including health insurance coverage, financial resources, and low health literacy. Reaching these populations can be difficult, and it can be even more difficult for these populations to engage in surveys related to health needs.

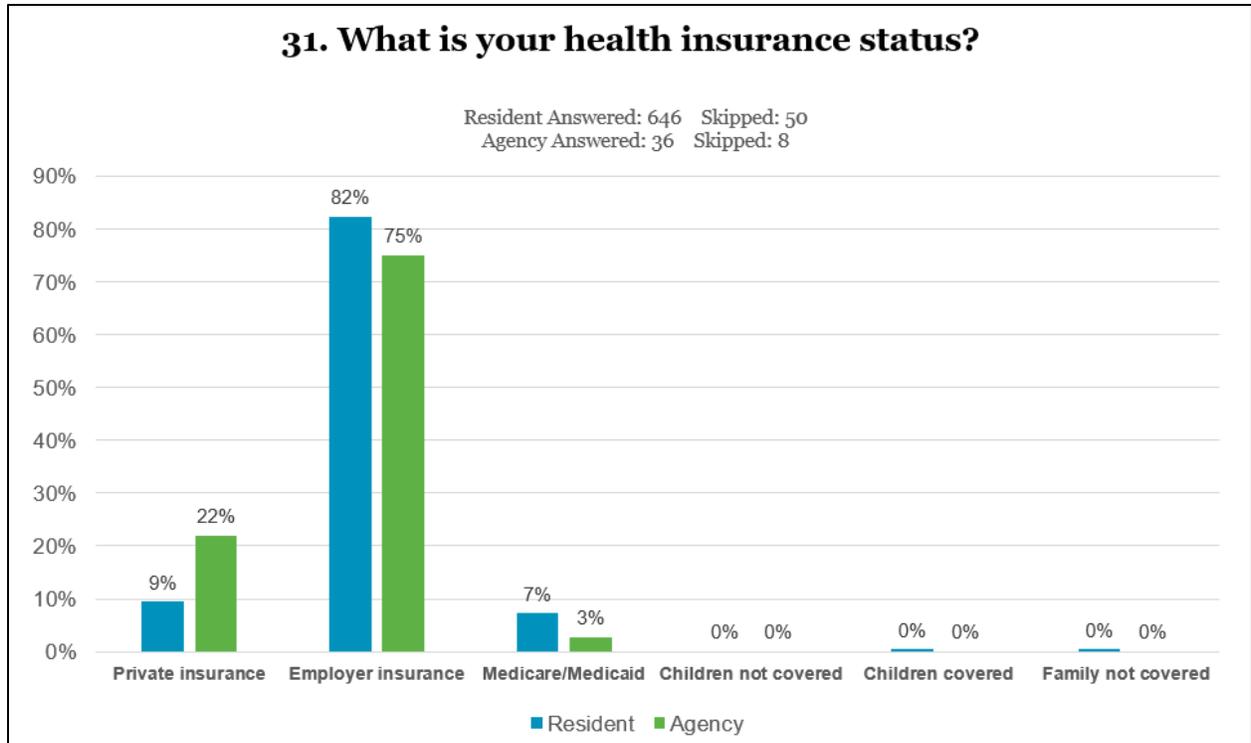


Non-white respondents are under-represented in this survey. Many black residents distrust healthcare and hospitals in general. Many Hispanic residents are reluctant to be surveyed in any way because of the relentless national focus on immigration and the concern the survey could target their identity or citizenship status.

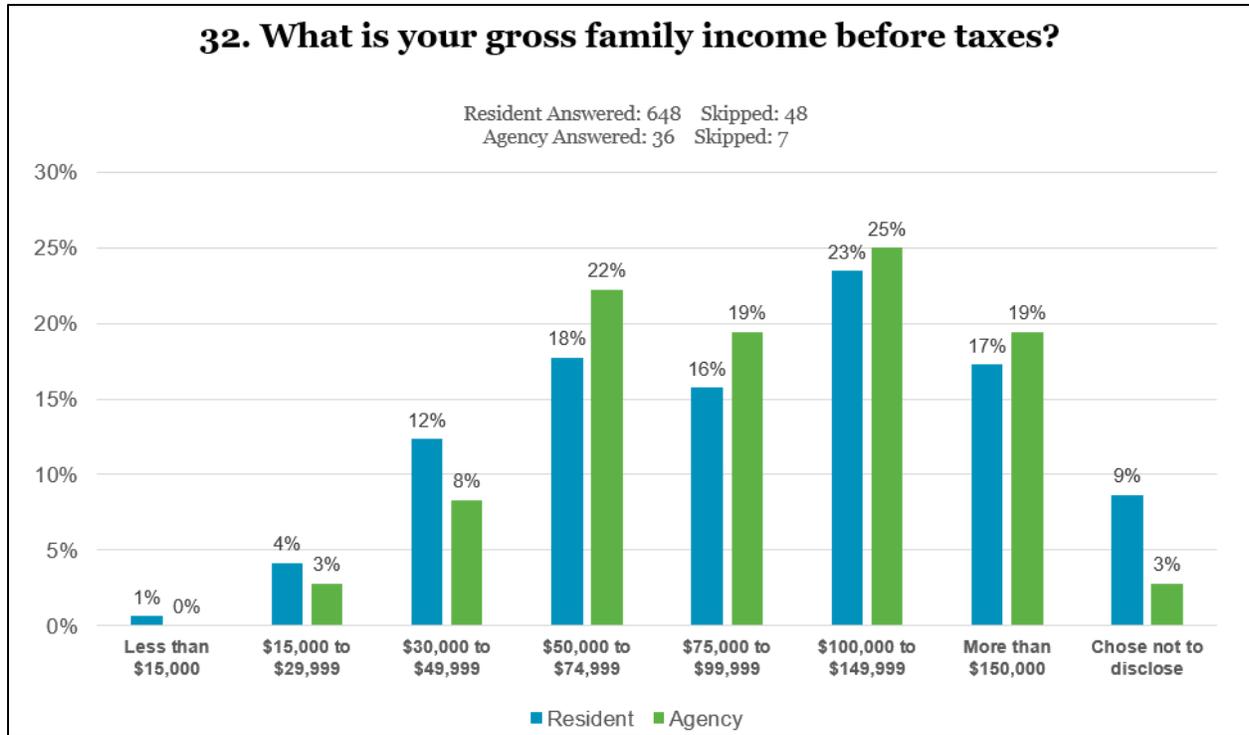
This is where agency responses make a difference. Agencies can help speak for those who cannot or will not participate in surveys themselves. Agency responses provide insider insight into community health needs based on direct experience.



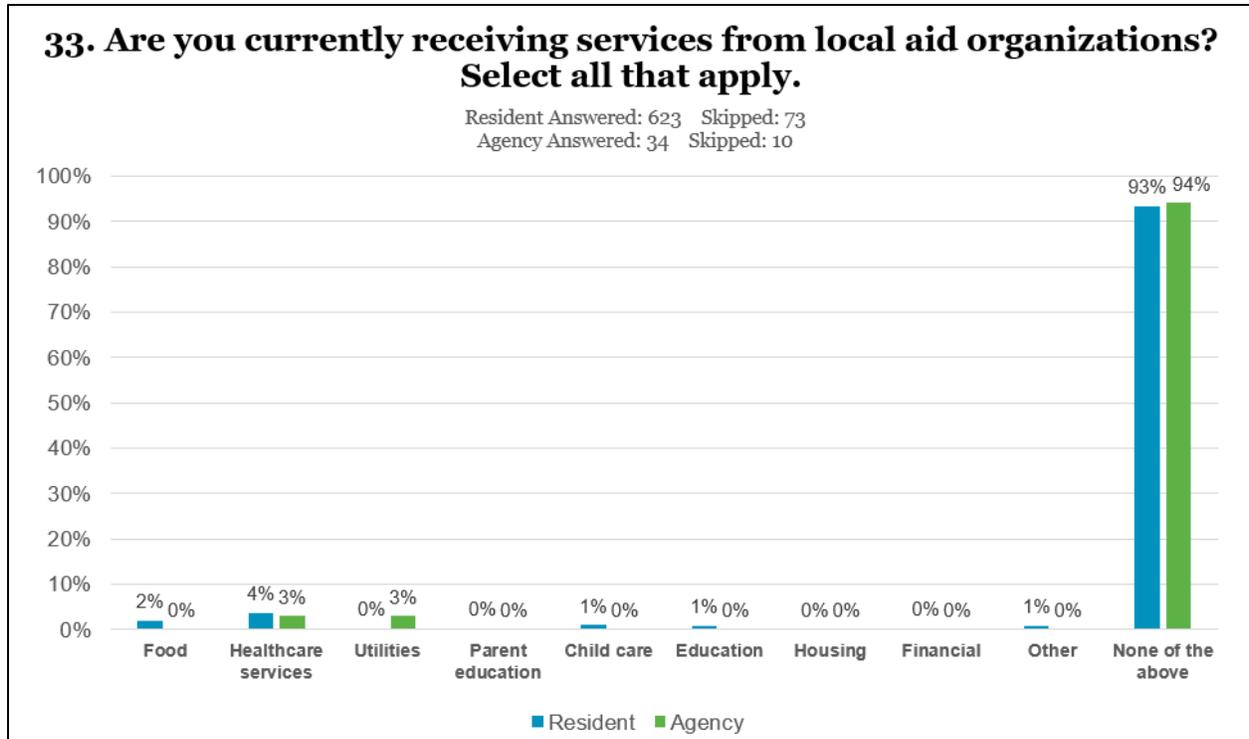
The education-level distribution is heavy on residents with college and advanced degrees. The distribution may also skew educationally upward because 49 residents chose not to reveal their status to this question.



This response distribution is similar to the statewide profile. In 2022, only 6% of Iowans had no insurance coverage, whereas the majority are insured through their employer.

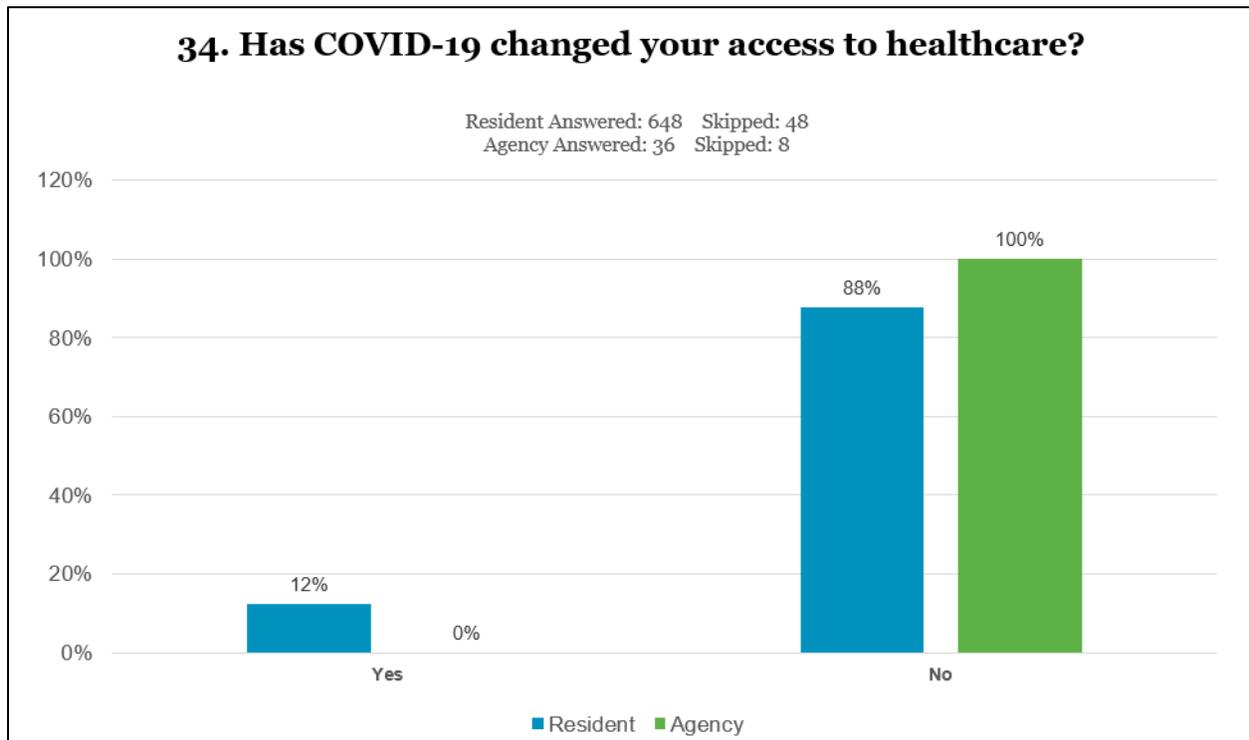


The income distribution reflects the higher education level of many respondents. The Census Bureau reports that the median household income in Iowa was \$61,836 from 2016-2020.



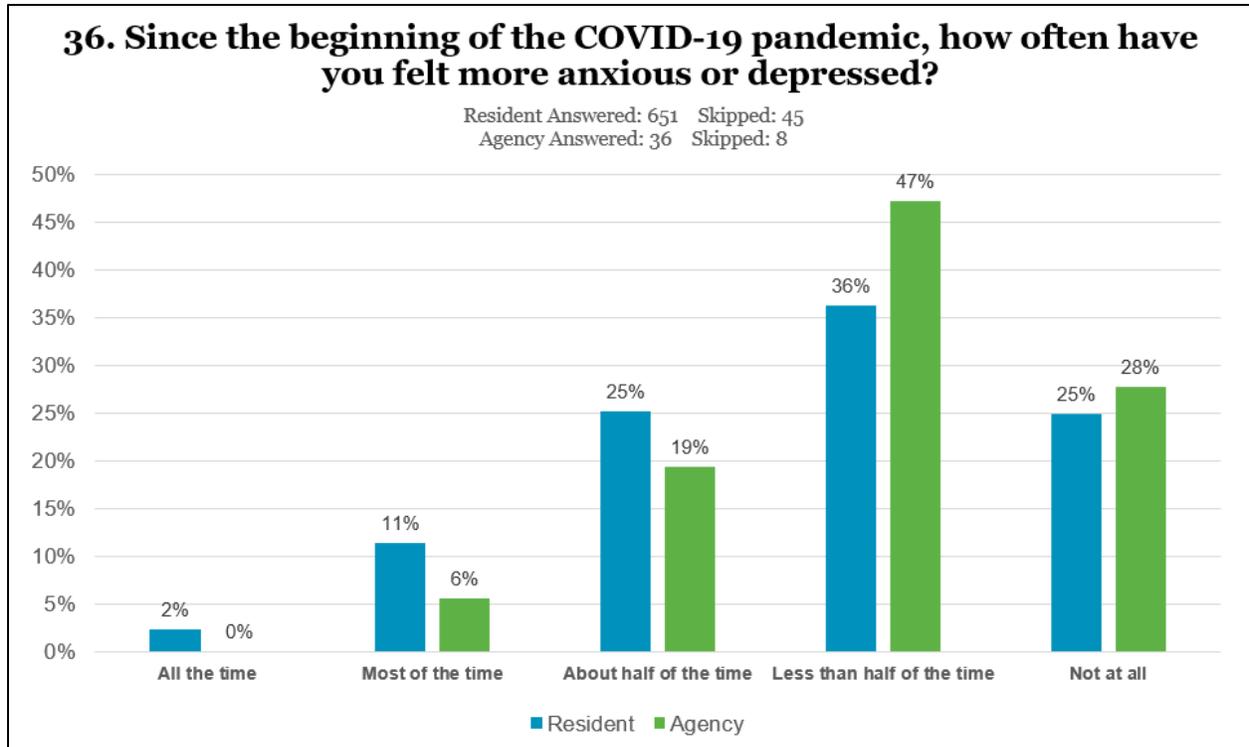
Only a small percentage of resident survey respondents reported received food, healthcare, and other forms of financial aid from local agencies which may also reflect the higher education, wage level, and insurance status of the respondents. The poverty rate for Iowa is around 11% and Black Hawk County is similar at 12.2%. Agency response to this question is low, many of those that responded are the agencies providing the local aid.

COVID-19



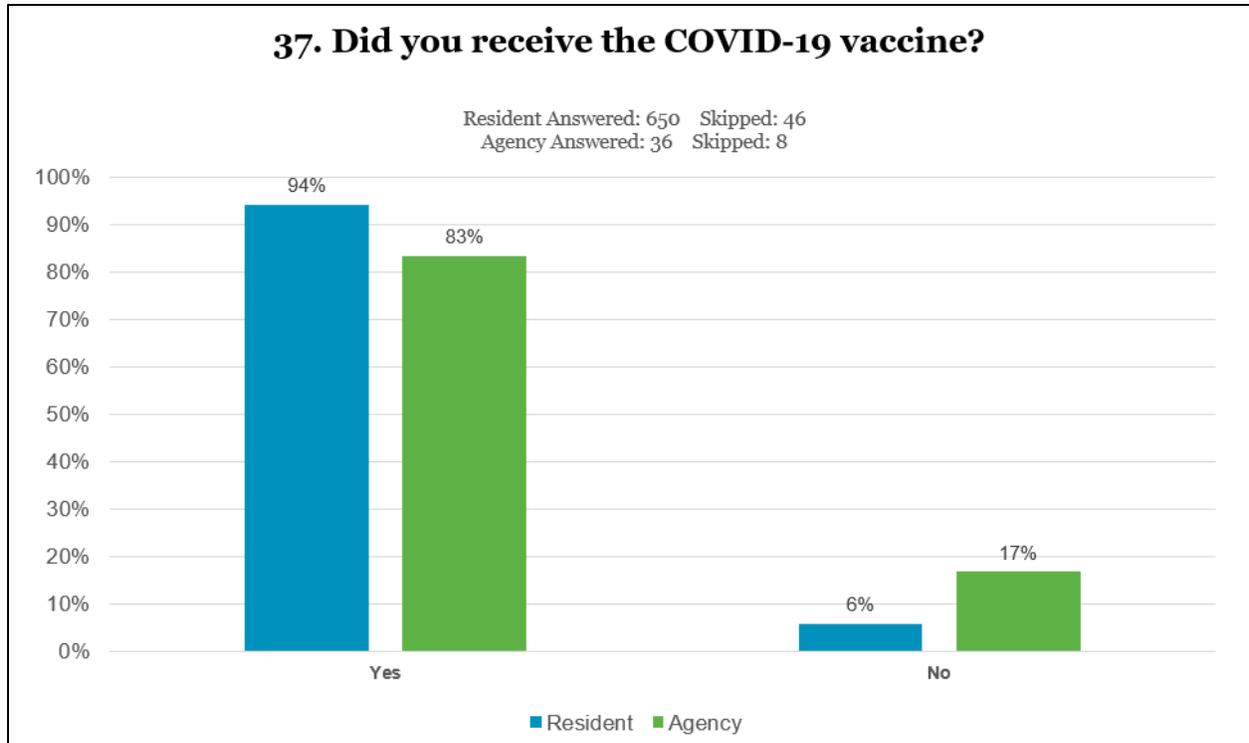
Question 34 asked residents and agencies if COVID-19 changed their access to healthcare. Question 35 asked “If yes, how has it changed?”

The written comments to Question 35 had themes such as limited appointment and increased wait times for Express Cares and primary care provider offices; stopped or reduced visits such as counseling, dental, and eye exams; fewer specialists and the length of time it took to get in was increased; postponed or cancelled elective procedures; and increased availability to telehealth.



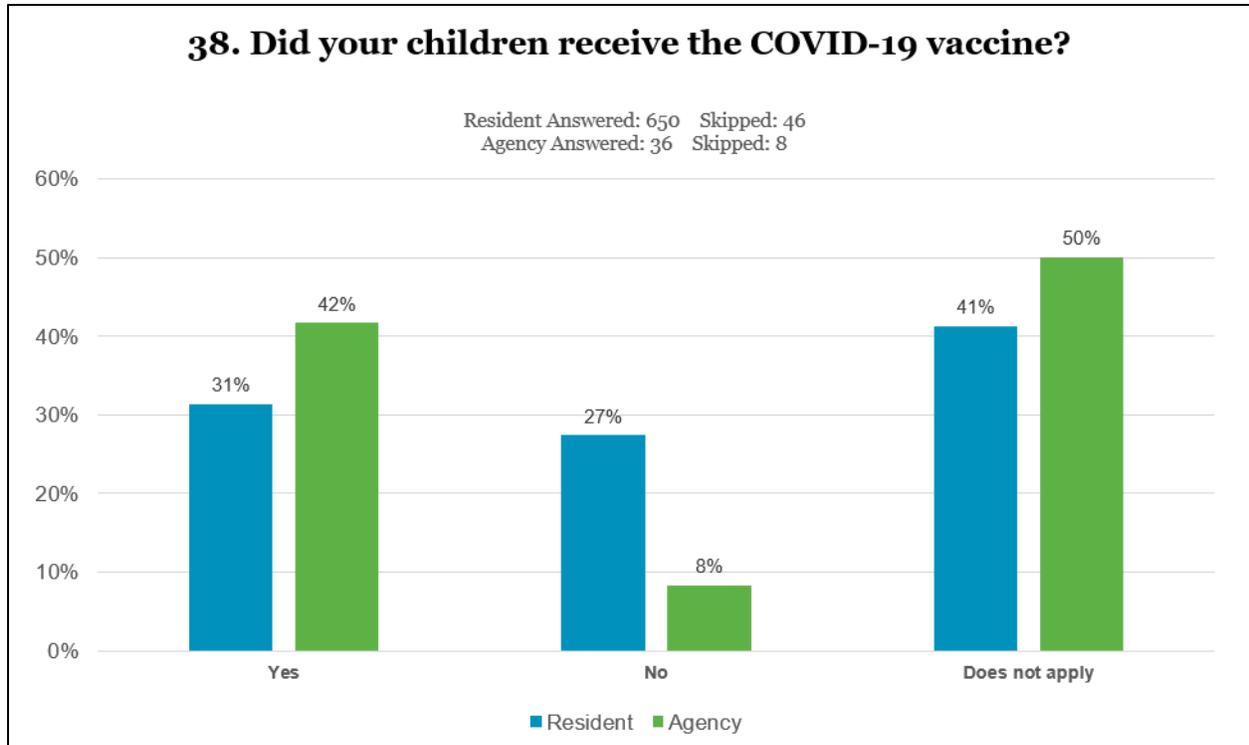
This survey was conducted nearly 2.5 years after the beginning of the COVID-19 pandemic. The effects are still felt for 38% of residents relating to increased feelings of anxiousness and depression.

The connection between mental health and healthy behavior was highlighted during the pandemic. Humans were isolated, staying at home, and many daily habits had to adjust. Sleep, physical activity, eating habits, alcohol and tobacco use, screen time, relaxation time, social interaction, and routine were all affected. COVID-19 had an impact on nearly every part of peoples' daily lives, as well as the health systems the community relied on.



The Iowa Department of Public Health reports that nearly 60% of all Iowans received the COVID-19 vaccine. Of the residents surveyed with this assessment, 94% received the vaccine.

According to the CDC, vaccine compliance was higher for females. Most of the respondents to this survey were females which may have positively impacted the data for this question.



More than half of the residents that Question 38 applies to reported that their children received the COVID-19 vaccine.

The CDC reports that everyone ages six months or older is eligible to receive the COVID-19 vaccine. Vaccine compliance rates are much lower among children than they are among adults.

### V. Potentially Available Resources

Community health is inextricably tied to social health. Allen Hospital reaches out to identify the social determinants of healthcare and affect determinants in a positive way. We do that through ongoing partnerships, both formal and informal, with other organizations serving the community. Examples include:

- Project SEARCH, which teams Allen Hospital with the Waterloo Schools to give special needs high-school seniors on the job training and experience. The program is entering its fifth year with a graduation rate of almost 100% and an equally high placement rate into permanent jobs for graduates. Project SEARCH address and often overlooked population cohort who can be semi-independent and self-supporting with the right start and community support.
- Together We Care (Aunt Bertha) Coalition, a partnership that promotes Findhelp.org to the communities we serve. Together We Care is a free tool to use to connect patients to free and reduced-cost local community resources specific to their needs. Local community resources can include food assistance, financial assistance and education, transportation, housing repairs and maintenance, temporary shelter, vision and dental care, adoption and foster care, workplace rights and job placement, and advocacy and legal aid.
- The Allen College Engagement Salvation Army Partnership (ACE-SAP), which provides a free, community clinic throughout the year. The clinic provides checkups, screenings, treatment of minor illness, medication assistance and referrals to 1,200 residents per year. It also provides Allen Hospital with real-time indicators of changing healthcare needs or our underserved populations. In 2022, the ACE-SAP clinic was expanded to include Occupational Therapy services at a satellite clinic in McElroy Hall at Allen College. Referrals are being accepted for neurology/post-stroke diagnoses, low vision coaching (diabetes management) and pediatrics.
- The UnityPoint Health – Mental Health Walk-In Clinic. The clinic was opened in October of 2021 and provides mental health assessments on a walk-in basis – no appointment necessary. The licensed behavioral health professionals offer mental health services including crisis counseling, medication prescribing, referrals to other outpatient mental health services or community resources, and triage for emergent or critical behavioral health intervention.
- The Community Convening: Advancing Equity in the Cedar Valley. This is another initiative that focuses on creating a strategic action plan for advancing equity in our community. A more equitable community is possible when people and communities move beyond obligatory inclusion to true co-creation.
- A partnership with Cedar Valley Kids. Affordable and reliable child care is particularly critical for maintaining a strong workforce. UnityPoint Health Allen Hospital received \$2 million as part of the Child Care Business Incentive Grant from the State of Iowa. In partnership with Cedar Valley Kids, UnityPoint Health

plans to construct a new facility near Allen Hospital in the North Crossing development.

- The Cedar Valley Mental Health Summit, a bi-annual convocation of area agencies, providers, and funders to address mental health care as an essential part of community health. Like the ACES coalition, it brings many organizations together to focus collective effort on a common problem.
- The Cedar Valley Coalition on Suicide Prevention and Support, a group that has met monthly since 2017 to increase suicide awareness, educate and train the public in suicide prevention, and provides resources to the community to facilitate suicide prevention activities.
- The Mental Health Workgroup, a group of interested individuals, businesses, agencies, and organizations in the Cedar Valley that meet monthly to identify gaps in the community related to behavioral health and promote solutions to these identified gaps.

## VI. Evaluation of Impact

The 2020-2022 community health needs assessment identified the following health needs: access to healthcare; access to mental healthcare; health education; personal exercise; personal nutrition.

The Allen Hospital Board of Directors discussed five major health needs as well as other issues identified in the survey at the April 28, 2020 virtual board meeting. Directors then cast individual votes to decide which three needs to prioritize in the 2020-2022 community health needs implementation plan. No hospital has the resources to begin to address all the possibilities, so the Directors voted to emphasize three community health needs: (1) access to healthcare, (2) access to mental healthcare, and (3) health education.

**Access to Healthcare.** These programs and initiatives have been added or expanded in 2020-2022 to help the community meet healthcare service's needs:

- Added UPC Express Care location in Waverly in early 2020
- Opened the Waterloo Schools Employee Health Center in August 2020
- Established the UnityPoint Health Family Medicine Residency in the summer of 2021
- Transitioned the surgery center at United Medical Park from a hospital outpatient department to an ambulatory surgery center in February 2020
- Started online check-in for outpatient procedures to make it easier to check in at home or on a mobile device compared to the full registration process at the hospital
- Began self-scheduling for mammography patients via computer or mobile device

- Opened new UnityPoint Pediatric Clinic in Waterloo
- Three pediatric providers added since 2019 with one additional beginning in 2023 to increase pediatric appointment availability
- Added two midwives to the existing practice to increase access for mothers during pregnancy and delivery
- Added telehealth and virtual appointments for patients in rural communities for Allen Women’s Health
- Created a Black Doula Program for black-identifying and African American mothers
- Arranging transportation within Allen Hospital for ease of scheduling for inpatients discharged
- Providing bus tickets for patients to assist in attending follow up appointments, funding is provided through the Care Management fund
- Transcatheter Aortic Valve Replacement (TAVR) Program added to Allen Hospital as a new cardiac procedure
- Added Cardiovascular Center, Neurosurgery, and Cardiothoracic Surgery to UnityPoint Health Waterloo
- Introduced pharmacy delivery services to patients’ homes
- Hosted COVID-19 Vaccine Clinics in multiple locations to increase vaccine access
- Drive up flu and COVID-19 vaccine clinics developed
- Partnered to open UPfit, a 24/7 access fitness center in the North Crossing Development

**Access to Mental Healthcare.** These programs and initiatives have been added or expanded in 2020-2022 to help the community meet mental health service needs:

- Opened the UnityPoint Mental Health Walk-In Clinic to increase same day and crisis services for the community
- Expanded Employee Assistance Program (EAP) to additional companies
- Restarted the Intensive Outpatient Program, an eight-week intense group schedule
- Increased fundraising through the Allen Foundation for Black Hawk Grundy Mental Health Center through the annual Mental Health Awareness Breakfast
- Added mental health telehealth services to the Child Protection Center
- Hired telehealth therapist for Black Hawk Grundy Mental Health Center
- Hired a Child & Adolescent Psychologist in August of 2022
- Created a central work que for triaging behavioral health patients to appropriately match patient needs to receive faster services
- Enhanced relationships with community partners to increase access

**Health Education.** The programs and initiatives have been added or expanded in 2020-2022 to help the community meet health education needs:

## Community Health Needs Assessment – Allen Hospital

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- Added health education through Allen Women’s Health to rural communities to educate on reproductive and sexual health
- Added a Chronic Disease Navigator to the Care Management team to educate inpatients
- Implemented Sexual Orientation and Gender Identity (SOGI) Documentation to better support patients, patients can document information about sexual orientation and/or gender identity through a MyChart questionnaire
- Developed the Legacy Program in partnership with Allen Hospital and Allen College to be used as an incentive to keep Allen College nurses working at Allen Hospital

The 2023 – 2025 Community Health Needs Assessment was adopted by the UnityPoint Health Allen Hospital Board of Directors at its monthly meeting on December 13, 2022.

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## VII. Additional Reading Links

### Introduction:

**City Population**, USA, Iowa, <https://www.citypopulation.de/en/usa/places/iowa/>

### Community Health:

**Agency for Healthcare Research and Quality**, Elements to Access to Health Care, <https://www.ahrq.gov/research/findings/nhqrd/chartbooks/access/elements.html>

**Iowa Public Health Tracking Portal**, Obesity, <https://tracking.idph.iowa.gov/Health/Obesity>

**Iowa Department of Public Health**, May is Mental Health Awareness Month, <https://idph.iowa.gov/News/ArtMID/646/ArticleID/158460/May-is-Mental-Health-Awareness-Month#:~:text=Adult%20mental%20health%20was%20the,with%20a%20serious%20mental%20illness>

**Iowa Department of Public Health**, Radon Resources, <https://idph.iowa.gov/radon/resources>

**Iowa Department of Public Health**, Healthy Homes Healthy People, [https://idph.iowa.gov/Portals/1/userfiles/197/BEHS/PDFs/healthy\\_homes\\_brochure.pdf](https://idph.iowa.gov/Portals/1/userfiles/197/BEHS/PDFs/healthy_homes_brochure.pdf)

### Personal Health:

**Becker's Hospital Review**, US Primary Care Physician Workforce per 100,000 capita, <https://www.beckershospitalreview.com/hospital-physician-relationships/primary-care-physician-workforce-by-state-california-has-the-largest.html>

**American Dental Association**, Resources, <https://www.ada.org/resources/practice/dental-insurance>

**Time**, only 23% of Americans Get Enough Exercise, a New Report Says, <https://time.com/5324940/americans-exercise-physical-activity-guidelines/>

### Children's Health:

**Delta Dental**, Dentist by 1, <https://www.dentistby1.com/iowa/partners.html>

**Iowa Department of Public Health**, Iowa Child Vision Screening Program,  
<https://idph.iowa.gov/family-health/child-health/vision-screening>

### Mental Health:

**World Health Organization**, COVID-19 pandemic triggers 25% increase in prevalence of anxiety and depression worldwide, <https://www.who.int/news/item/02-03-2022-covid-19-pandemic-triggers-25-increase-in-prevalence-of-anxiety-and-depression-worldwide>

### Participant Profile:

**Statista**, Health insurance status distribution of the total population of Iowa in 2021, <https://www.statista.com/statistics/238750/health-insurance-status-of-the-total-population-of-iowa/>

**Centers for Disease Control and Prevention**, National Health Statistics Reports, <https://www.cdc.gov/nchs/data/nhsr/nhsr169.pdf>

**United States Census Bureau**, QuickFacts Iowa, <https://www.census.gov/quickfacts/IA>

**United States Census Bureau**, QuickFacts Black Hawk County, Iowa, <https://www.census.gov/quickfacts/blackhawkcountyiowa>

### COVID-19:

**Mayo Clinic**, COVID-19 and your mental health, <https://www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/mental-health-covid-19/art-20482731#:~:text=Information%20overload%2C%20rumors%20and%20misinformation,anxiety%20and%20depression%2C%20can%20worsen.>

**Iowa Department of Public Health**, Iowa Public Health Tracking Portal, COVID-19 Vaccine Data, <https://tracking.idph.iowa.gov/Health/Immunization/covid-19-vaccine/data>

**Centers for Disease Control and Prevention**, COVID Data Tracker, Pediatric Data, <https://covid.cdc.gov/covid-data-tracker/#pediatric-data>