



An Affiliate of
MERCYONE

2021 Community Health Needs Assessment & Implementation Strategy

Mercy Iowa City

Needs Identified through Public Health, Vital Statistics, and Benchmark Data

No major needs were identified as our combined 5 county service area ranked at or above the state averages. However, there were individual counties that fared worse than the state averages and those are listed in the following tables.

PUBLIC HEALTH, VITAL STATISTICS, and BENCHMARKS

Topic	Issue	Finding	Counties
Access to Health Care	Primary Care Doctors per 100,000	Lower than the Iowa Average	Cedar, Muscatine
Cancer	Lung Cancer Incidence	Higher than the Iowa Average	Cedar
Diabetes	Diabetes Prevalence	Higher than the Iowa Average	Washington, Iowa
Heart Disease & Stroke	Coronary Heart Disease mortality rate	Higher than the Iowa Average	Iowa

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PUBLIC HEALTH, VITAL STATISTICS, and BENCHMARKS

Topic	Issue	Finding	Counties
Infant Health & Family Planning	Birth to Adolescents	Higher than the Iowa Average	Washington, Muscatine
Injury & Violence	Unintentional Injury, Mortality Rate	Lower than the Iowa Average	Washington, Iowa
Injury & Violence	Violent Crime Rate	Higher than the Iowa Average	Washington, Muscatine
Mental Health	Mental Health Providers per 100,000	Lower than the Iowa Average	Cedar

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PUBLIC HEALTH, VITAL STATISTICS, and BENCHMARKS

Topic	Issue	Finding	Counties
Nutrition	Population with low food access	Higher than the Iowa Average	Cedar, Muscatine
Respiratory Disease	Lung Disease Mortality Rate	Higher than the Iowa Average	Muscatine
Sexual Health	HIV Prevalence & Chlamydia Incidence	Higher than the Iowa Average	Johnson

Needs Identified by Key Informants

Topic / Health Need	Specific Concerns Mentioned	Percentage of Informants Ranking the Need as:		
		Major	Moderate	Either
Mental Health	Access to providers and facilities	80%	15%	95%
Heart Disease & Stroke		16	53	69
Cancer	Second highest cause of death	6	50	56
Respiratory Disease		0	71	71
Corona Virus/COVID-19	Vaccination rate disparities	18	68	86
Diabetes	Limited access to dieticians and poor insurance coverage	22	44	66
Kidney Disease	Access to dialysis	12	35	47
Disability & Chronic Pain	Management services difficult to access	6	67	73
Dementia/Alzheimer's	Lack of geriatric care units, adult daycare, and outpatient services focused on memory disorders	10	71	81

Needs ranked 20% or more as Major or 80% or more as Major or Moderate are colored red and are therefore considered to be major needs

Needs Identified by Key Informants, continued

Topic / Health Need	Specific Concerns Mentioned	Percentage of Informants Ranking the Need as:		
		Major	Moderate	Either
Infant Health/Family Planning	Access to services more difficult under Medicaid Managed Care	11%	44%	55%
Injury & Violence	Gun violence and domestic abuse	11	47	58
Tobacco Use	Vaping	16	53	69
Sexual Health	High STI rates among younger populations, few reproductive health services	6	23	29
Access to Healthcare Services	Cost barriers and rural area transportation	5	67	72
Oral Health	Access to providers more difficult under Medicaid Managed Care	11	52	63
Nutrition, Physical Activity & Weight	Cultural headwinds and lack of insurance covered programs for children	40	45	85
Substance Abuse	Alcohol, meth, opioid treatment options limited	33	47	80

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Implementation Strategy

Topic/ Health Need	Specific Concerns Mentioned	Implementation Strategy
Mental Health	Access to providers and facilities	In 2022, we hired a full-time physician psychiatrist specialist to both extend our psychiatric visits on our hospital campus and also to lead an effort to evaluate the options for developing a closed psychiatric unit. In the outpatient setting, we also have hired a second therapist to increase our therapy visits. We also intend to maintain mental health related links such as "Guild to Mental Health Resources" as well as "Stress and Coping" on our website for quick and convenient educational information available to the public.
Nutrition, Physical Activity & Weight	Cultural headwinds and lack of insurance covered programs for children	In 2022, we expanded our bariatric surgery program by hiring a second physician and a second dietician. Bariatric surgery is an effective treatment option especially when it is supported by a robust support program that features dietitians. We intend to maintain our posts of healthy recipes with video instruction on the Mercy website and to provide a walk-in Wellness Program which aims to increase physical activity and increase healthy eating in our community.
Substance Abuse	Alcohol, meth, opioid treatment options limited	Maintain a nurse navigator service that provides callbacks to patients as well as assisting these patients and their families in obtaining counseling services, transportation, or primary care referrals. Reopen meeting rooms so the local AA chapter can resume in-person meetings once our rooms become available and provided COVID status safety concerns are met.

Implementation Strategy

Topic/ Health Need	Specific Concerns Mentioned	Implementation Strategy
Diabetes	Limited access to dieticians and poor insurance coverage	Continue to offer a free pre-diabetes class taught by a registered dietician. This is offered as a virtual class in order to improve access to anyone interested. Continue to provide diabetic education to hospital-based nurses so they can more directly convey the importance of managing this disease to patients. We also offer individualized diabetic education which covers nutrition management, the role of physical activity, psychosocial adjustment and healthy coping, glucose monitoring and insulin administration.
Corona Virus/COVID-19	Vaccination rate disparities	We began offering vaccinations in select clinics in 2021 and intend to continue offering those as long as the need persists. We also continue to offer tele visits which provide improved access to our providers for those in more rural settings where travel may be more difficult.
Dementia/Alzheimer's	Lack of geriatric care units, adult daycare, and outpatient services focused on memory disorders	Maintain a nurse navigator service to arrange therapies and to assist in obtaining home health and/or respite care for the patients' caregivers.

Implementation Strategy

Issue	Counties	Implementation Strategy
Primary Care Access	Cedar, Muscatine	Maintain a primary care presence in these two counties.
Lung Cancer	Cedar, Muscatine	Maintain our low-dose CT screening program for long term smokers. Continue to offer smoking cessation counseling.
Heart Disease	Iowa	Maintain our Primary Stroke Center designation through The Joint Commission and our recognition as a Blue Distinction Center for heart care. Maintain our Emergency Care protocols and training that have helped us achieve interventions “faster than the national average”.
Births to Adolescents	Muscatine, Washington	Maintain our primary care clinic in Muscatine and continue to provide support by linking prospective mothers to our OBGYN affiliates, our pediatric outpatient clinic, our breastfeeding support classes, and to provide access to our financial counselors. Maintain our website support including a free pregnancy tracker app.
STI	Johnson	Continue to staff the infectious disease position. This person will monitor chlamydia incidence and maintain relationships with the public health departments at the county and state levels.

END