**Indiana University Health Tipton Hospital
Community Health Needs Assessment**

2015

IU Health Community Health Needs Assessment Team Members

Joyce M. Hertko, Ph.D.
Director
Community Outreach & Engagement
Indiana University Health Methodist Hospital
317.962.2189
jhertko@iuhealth.org

Stephanie Berry, MS
Senior Project Manager
Community Outreach and Engagement
Indiana University Health Methodist Hospital
317.962.6102
sberry@iuhealth.org

Anyah Land, MPH
Community Benefit Project Manager
Community Outreach and Engagement
Indiana University Health Methodist
Hospital

Amber Blackmon, MPH
Masters of Public Health Intern
Community Outreach and Engagement
Indiana University Health Methodist
Hospital
317.962.6010
ablackmon@iuhealth.org

Molly Witt
Health Promotion Intern
Community Outreach and Engagement
Indiana University Health Methodist
Hospital
317.962.5766
mwitt@iuhealth.org

Crissy Proffitt
Marketing Assistant/Events Planner
Indiana University Health Tipton Hospital
765.675.8107
cproffitt@iuhealth.org

1   INTRODUCTION

1.1   Purpose

This report provides an overview of findings from a community health needs assessment (CHNA) conducted on behalf of Indiana University Health (IU Health) Tipton Hospital (IU Health Tipton) in order to identify the leading health needs in the county service areas served by the hospital. This assessment was initiated by IU Health Tipton to identify the community's most important health issues, both overall and by county, in order to address such needs. It was also designed to identify key services where better integration of public health and healthcare can help overcome barriers to patient access, quality and cost-effectiveness.

The hospital has also assessed community health needs to respond to the regulatory requirements of the Patient Protection and Affordable Care Act of 2010 (PPACA), which requires that each tax-exempt hospital facility conduct an independent CHNA.

IU Health Tipton completed this assessment in order to set out the community needs and determine where to focus community outreach resources. The assessment will be the basis for creating an implementation strategy to focus on those needs. This report ultimately represents IU Health Tipton efforts to share knowledge that can lead to improved health and the quality of care available to their community residents while building upon and reinforcing IU Health Tipton's existing foundation of healthcare services and providers.

1.2   Objectives

The 2015 IU Health Tipton CHNA has three main objectives:

1. Identify the priority health needs within Tipton County.
2. Serve as a foundation for developing implementation strategies that can be utilized by healthcare providers, communities and policy makers in order to improve the health status of residents of the Tipton County community.
3. Supply public access to the CHNA results in order to inform the community and provide assistance to those invested in the transformation to the community's healthcare network.

2 EXECUTIVE SUMMARY

IU Health Tipton's entire community service area extends into six counties: Tipton, Hamilton, Madison, Howard, Clinton and Grant.

Top Community Health Needs

This assessment identified five priority needs across the entire community served by the hospital. These problems affect most of the community service area counties, but particularly apply to the PSA of Tipton County

Substance Abuse

Nutrition and Active Living

Mental Health

Chronic Disease

Access to Healthcare

To identify these needs, IU Health Tipton Hospital collected comments to the prior CHNA, surveyed residents of the county through an online portal and using paper surveys, conducted a focus group and reviewed available resources about health status indicators. From these sources, the Hanlon Method was used to identify the priority needs:

- Substance Abuse.
- Nutrition and Active Living.
- Mental Health.
- Chronic Disease.
- Access to Healthcare.

IU Health Tipton Hospital is the only hospital in Tipton County. In addition to physician practices, Tipton County has a Federally Qualified Health Center, the Tipton County WIC Program that also provides care for some of the priority health needs.

2.1 Primary Service Area

Tipton County comprises the majority of the IU Health Tipton community. It accounts for all of the PSA's) total population and 69% of the inpatient discharge population of the total community service area.

Tipton County has higher rates of unemployment than the state of Indiana and the national average. The median household income of Tipton County is above the Indiana state average and the national average. The county is adversely affected by a combination of chronic health conditions, unemployment and the low availability of higher paying jobs.

3 STUDY METHODS

3.1 Analytical Methods

In order to identify the community's leading health needs, both quantitative and qualitative data were utilized. For this CHNA, quantitative analyses assessed the health needs of the population through data abstraction and analysis and qualitative analyses were conducted by gathering input from community members through a survey and through a structured interview with community leaders in Tipton County.

3.2 Data Sources

CHNAs seek to identify priority health status and access issues for particular geographic areas and populations. Accordingly, the following topics and data are assessed:

- Demographics, e.g., population, age, sex, race
- Economic indicators, e.g., poverty and unemployment rates
- Health access indicators, e.g., insurance coverage, ambulatory care sensitive condition (ACSC) discharges
- Availability of healthcare facilities and resources

Data sets for quantitative analyses included:

- Dignity Health (formerly Catholic Healthcare West)—Community Needs Index
- Centers for Disease Control and Prevention
- Centers for Medicare & Medicaid Services

- Community Health Status Indicators Project
- Indiana Department of Workforce Development
- Indiana Hospital Association Database
- Kaiser Family Foundation
- Robert Wood Johnson Foundation—County Health Rankings
- STATS Indiana data—Indiana Business Research Center, IU Kelley School of Business
- US Bureau of Labor Statistics
- US Census Bureau
- US Department of Commerce, Bureau of Economic Analysis
- US Health Resources and Services Administration

While quantitative data can provide insights into an area, these data need to be supplemented with qualitative information to develop a full picture of a community's health and health needs. For this CHNA, qualitative data were gathered from responses collected online to the prior Community Health Needs Assessment, through surveys of members of the public and in a focus group with health leaders and public health experts.

3.3   Process for Determining Priorities

The quantitative, secondary data sources identified health needs for which Indiana or Tipton County is above or below average. Qualitative information from survey results, which included responses from under-served or underrepresented groups, supplemented the secondary data. Survey results and secondary data findings were shared with a focus group of community health leaders. This group prioritized leading health needs. The priorities from the focus groups, plus survey results and health indicator data were compiled. IU Health Tipton Hospital representatives used the Hanlon Method to identify the top five needs.

The Hanlon Method seeks ratings from 0 to 10 on three criteria: size of the health problem based on the percentage of the population affected, seriousness or magnitude of the health problem and the effectiveness of potential interventions.[1] With the ratings compiled, analysts identify specific health problems that can feasibly be addressed by the community served. From that list, priority scores are calculated, where the seriousness of the problem is given the most weight. Ranks are assigned based on the priority scores.

3.4   Information Gaps

To the best of our knowledge, no information gaps have affected IU Health Tipton's ability to reach reasonable conclusions regarding community health needs. While IU Health Tipton has worked to capture quantitative information on a wide variety of health conditions from a wide array of sources, IU Health Tipton realizes that it is not possible to capture every health need in the community and there will be gaps in the data captured.

To attempt to close the information gap qualitatively, IU Health Tipton conducted a focus group with public health experts and community health leaders and community surveys to gather input from general and underserved community members. However, it should be noted that there are limitations to these methods. If an organization from a specific group was not present during the

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[1] The Hanlon Method is one of the possible prioritization methods presented in material from the National Association of County and City Health Officials. For more information, please see http://www.naccho.org/topics/infrastructure/accreditation/upload/Prioritization-Summaries-and-Examples.pdf.

focus group, such as seniors or injury prevention groups, then that need could potentially be underrepresented in the focus group. Due to the community survey's small sample size, extrapolation of these results to the entire community population is limited.

3.5   Collaborating Organizations

The IU Health system collaborated with other organizations and agencies in conducting this needs assessment for the IU Health Tipton community. These collaborating organizations are as follows:

Area 5

Chrysler

Encore

IU Health Tipton Hospital

Purdue Extension Office

Tipton County Foundation

Tipton County Police Department

Tipton County School Corporation

Tipton County Sheriff Department

4 DEFINITION OF COMMUNITY ASSESSED

This section identifies the community assessed by IU Health Tipton. The community was defined as Tipton County, the county where IU Health Tipton Hospital is located. The secondary service area (SSA) is comprised of five contiguous counties.

The community was defined based on the geographic origins of IU Health Tipton inpatients in 2014. Of the hospital's inpatient discharges, approximately 68% originated from Tipton County PSA and 38% from counties in the SSA (IHA Database, 2015).

Figure 1: Counties in the IU Health Tipton Service Area Community, 2015
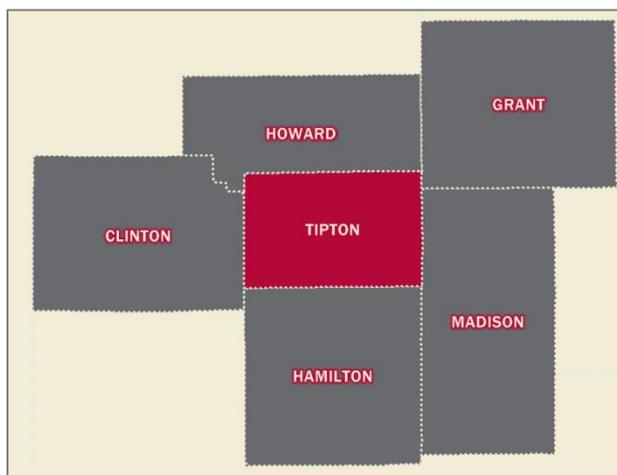
5 SECONDARY DATA ASSESSMENT

5.1 Demographics

IU Health Tipton Hospital is located in Tipton County, in central Indiana. Tipton County includes ZIP codes within the towns of Tipton, Elwood, Windfall City, Kempton and Sharpsville. Based on the most recent Census Bureau (2014) statistics, Tipton County's population is 15,415 persons, with approximately 50% being female and 50% male. The county's population estimates by race are 98.0% White, 2.6% Hispanic or Latino, 0.5% Black, 0.5% Asian, 0.3% American Indian or Alaska Native and 0.8% persons reporting two or more races.

Tipton County has relatively low levels of educational attainment. In the county, 10.8% did not complete high school and 41.3% stopped their education after high school or a GED; about a third (31%) have some college, which includes an associate's degree. Just 16.4% have a bachelor's degree or higher, which is far below the national level of more than 29% and below the state level of nearly 23%.[2]

The total population for the PSA is 15,415 and the total population for the entire service area is 632,434, as illustrated in *Table 1* below.

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[2] Data from http://www.towncharts.com/Indiana/Indiana-state-Education-data.html, based on data collected in 2013 and released in 2014 from the American Community Survey.

Table 1: Service Area Population, 2014

Service Area	County	Population	Percent of Total
Primary	Tipton	15,415	2.4%
	Subtotal	**15,415**	**2.4%**
Secondary	Hamilton	302,623	47.9%
	Madison	130,069	20.6%
	Howard	82,982	13.1%
	Clinton	32,776	5.2%
	Grant	68,569	10.8%
	Subtotal	**617019**	**97.6%**
Total Service Area		632,434	100.0%

Source: County Characteristics Datasets: Annual County Resident Population Estimates by Age, Sex, Race and Hispanic Origin: April 1, 2010 to July 1, 2014.

5.2   Economic Indicators

The following topics were assessed to examine various economic indicators with implications for health: (i) Employment, (ii) Household Income and People in Poverty and (iii) Uninsured.

5.2.1   *Employment*

In 2010, the share of jobs in Tipton County was highest within the areas of manufacturing, health care and social assistance, agriculture, forestry, fishing and hunting, retail trade and construction. Tipton County has a diverse group of major employers reported by the Indiana Department of Workforce Development, including: IU Health Tipton Hospital, Steel Parts Manufacturing, Dupont Pioneer, Tri Central Community Schools, Package Right Corporation, Miller's Merry Manor, Park 100 Foods and Tipton Community Schools.

Tipton County reported a relatively higher unemployment rate than the rates of surrounding counties, national average rates and the state of Indiana. *Table 2* below summarizes unemployment rates in December 2013 and December 2014.

Table 2: Unemployment Rates, December 2013 and December 2014

Service Area	County	Dec-13	Dec-14	% Change from 2013-2014
Primary	Tipton	5.9%	5.1%	-0.8%
Secondary	Hamilton	4.2%	4.0%	-0.2%
	Madison	7.7%	6.8%	0.9%
	Howard	6.7%	6.0%	-0.7%
	Clinton	5.9%	4.9%	-1.0%
	Grant	7.4%	6.6%	-0.8%
Indiana		6.3%	5.7%	-0.6%
USA		6.5%	5.4%	-1.1%

Source: US Census Bureau, 2015.

5.2.2 *Household Income and People in Poverty*

Areas with higher poverty rates tend to have poorer access to healthcare, lower rates of preventive care, higher rates of preventable hospital admissions and poorer health outcomes in general. According to the US Census, in 2013 the national poverty rate was at 14.8%, dropping from 15.0 % in 2012. In Indiana, 15.8% of the state population lived in poverty, a 0.3% increase from the 2012 poverty rate (15.5%).

For Tipton County, a poverty rate of 10.3% was reported in 2013, rising from 10.0% in 2012(0.3%). Comparatively for Indiana, Hamilton County had the lowest poverty rate at 5.5% and Monroe had the highest poverty rate at 24.0%. *Table 3* below illustrates the poverty rates by year between 2011 and 2013.

Table 3: Percent of People in Poverty, 2011-2013

Service Area	County	2011	2012	2013	% Change from 2012-2013
Primary	Tipton	9.6%	10.0%	10.3%	0.3%
Secondary	Hamilton	4.6%	4.7%	5.5%	0.8%
	Madison	18.9%	15.9%	19.6%	4.0%
	Howard	17.3%	17.2%	15.8%%	-1.4%
	Clinton	16.2%	13.8%	14.4%	0.6%
	Grant	17.4%	18.7%	21.7%	3.0%
Indiana		15.8%	15.5%	15.8%	0.3%
USA		15.0%	15.0%	14.8%	-0.2%

Source: US Census Bureau, 2012.

Grant County was one out of three counties to show an increase in poverty rate (+3.0%). Howard County had the largest poverty rate decrease in the IU Health Tipton service area between 2012 and 2013 (-1.4%). Comparisons of each service area county's poverty rates as well as those for the state of Indiana and the entire US are displayed in *Figure 2* on the next page.

Figure 2: Percent Change in Poverty Rates Between 2012 and 2013

County	Percent Change
Grant	3.0%
Clinton	0.6%
Howard	-1.4%
Madison	4.0%
Hamilton	0.8%
Tipton	0.4%
Indiana	0.3%
US	-0.2%

Income level is an additional economic factor that has been associated with the health status of a population. Based on the US Census Bureau (2009), Tipton County's per capita personal income was estimated to be $35,313, which is slightly below the state rate, with a median household income estimated to be around $52,423, above the state rate. The rates are higher than the Indiana state per capita income of $33,323 and median household income around $45,427, but lower than the US national per capita income of $38,846 and median household income of $50,221.

5.2.3 *Insurance Coverage*

National statistics on health insurance indicate that 10% of the United States population is uninsured. Of the US population that is insured, 49% are insured through an employer, 6% through individual providers, 19% through Medicaid, 13% through Medicare and 2% through other public providers.

In Indiana, it is estimated that 11% of the population are uninsured. Of the Indiana residents who are insured, 17% residents are insured through Medicaid, 15% through Medicare, 51% through their employer, 5% through individual providers and 1% through other public providers.[3]

5.3 County Level Health Status and Access Indicators

5.3.1 *County Health Rankings*

The Robert Wood Johnson Foundation, along with the University of Wisconsin Population Health Institute, created County Health Rankings to assess the relative health of county residents within each state for all 50 states. These assessments are based on health measures of health outcomes, specifically length and quality of life indicators and health factors, including indicators related to health behaviors, clinical care, economic status and the physical environment.

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3. Kaiser State Health Facts 2015, Kaiser Family Foundation. http://www.statehealthfacts.org.

With 92 counties in Indiana, a county may be ranked from 1 to 92, where 1 represents the highest ranking and 92 represents the lowest. *Table 4* summarizes County Health Ranking assessments for Tipton and surrounding counties in Indiana.

Table 4: Relative Health Status Indicators for Tipton County and Counties in Secondary Service Area

Key:

Top quartile		Second quartile		Third Quartile		Lowest Quartile	

Indicator	Tipton	Hamilton	Madison	Grant	Clinton	Howard
Health Outcomes	45	1	79	87	53	61
Length of Life	49	1	77	84	59	54
Quality of Life	39	2	77	87	48	72
Health Factors	25	1	81	71	34	53
Health Behaviors	39	1	85	80	18	71
Clinical Care	53	1	29	15	50	8
Social and Economic Factors	12	1	84	80	53	64
Physical Environment	16	31	77	12	33	46

Source: County Health Rankings, 2015

More of Tipton County's indicator rankings are in the middle two quartiles, including length of life (49th), quality of life (39th), health behaviors (39th) and clinical care (53rd). Tipton County ranked higher than the overall service area for many indicators, especially for social and economic factors (12th) and physical environment (16th). Across IU Health Tipton service area counties, clinical care, length of life and health outcomes are ranked most consistently in the bottom half of Indiana counties.

Tipton County ranked 45th for overall health outcomes. In preventable health factors, Tipton County ranked 25th in terms of overall health-related factors (determinants of health); individual scores for Tipton County are displayed in *Table 5*. Any individual rank of 69 or higher indicates that a county is in the lowest quarter among Indiana counties.

Table 5: Relative Health Status Indicators for Tipton County - Detail

Indicator	Tipton
Health Outcomes	**45**
Length of Life	**49**
Premature death per 100,000	7,860.0
Quality of Life	**39**
Poor or fair health	14%
Poor physical health days reported in the past 30 days	3.4
Poor mental health days reported in the past 30 days	3.5
Low birth weight (<2500 grams)	8.0%
Health Factors	**25**

Table 5 – Continued	
Health Behaviors	**39**
Adult smoking	25.0%
Adult obesity (BMI of 30 or more)	33.0%
Food environment index 0 (worst) 10 (best)	7.5
Physical inactivity age 20 and over	30.0%
Access to exercise opportunities	41%
Excessive drinking	*
Alcohol-impaired driving deaths	0.0%
Sexually transmitted infections (chlamydia) per 100,000	83.0
Teen female births ages 15-19 per 1,000	34
Clinical Care	**53**
Uninsured (under the age of 65)	14.0%
Primary care physicians ratio of population to primary care physicians	2,616 to 1
Dentists ratio of population to dentists	1,956 to 1
Mental health providers ratio of population to mental health providers	3,913 to 1
Preventable hospital stays per 1,000	90
Diabetic monitoring of Medicare enrollees ages 65-75 that receive HbA1c	80%
Mammography screening ages 67-69 of female Medicare enrollees	60.7%
Social and Economic Factors	**12**
High school graduation	96.0%
Some college ages 25-44	60.3%
Unemployment population ages 16 and older	7.70%
Children in poverty (under the age of 18)	15.0%
Income inequality ratio at the 80th percentile to income at the 20th percentile	3.2
Children in single-parent households	30%
Social associations per 10,000	15.3
Violent crime per 100,000	126
Injury deaths per 100,000	73
Physical Environment	**16**
Air pollution - particulate matter in micrograms per cubic meter (PM2.5)	13.5
Drinking water violations during the past year	0%
Severe housing problems with at least 1 of 4 problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities	8.0%
Driving alone to work	85.0%
Long commute - driving alone for more than 30 minutes	34%

Source: County Health Rankings, 2015

* Blank values reflect unreliable or missing data

5.3.2 *Community Health Status Indicators*

The Community Health Status Indicators (CHSI) Project of the US Department of Health and Human Services compares many health status and access indicators to both the median rates in the US and to rates in "peer counties" across the US. Counties are considered "peers" if they share common characteristics such as population size, poverty rate, average age and population density.

Tipton County has 46 designated "peer" counties in 15 states, including Blackford, Carroll, Fountain, Fulton, Perry and Vermillion counties in Indiana, as well as numerous counties in Iowa and Illinois. *Table 6* below presents the CHSI health status indicators with highlighting in cells for topics on which Tipton County compares favorably or unfavorably both to the US as a whole and to peer counties. Indicators are found to be unfavorable for a county when its rates are higher than those of the entire nation and designated peer counties and are considered favorable when the rates for the county are lower than those of the US or peer counties.

Indicators related to mortality that were unfavorable included coronary heart disease deaths and female life expectancy. Favorable indicators (where rates and percentages for the indicators in Tipton County are lower than those for the entire nation or for peer counties) included Alzheimer's disease deaths, cancer deaths, older adult depression, preterm births and on time high school graduation. Tipton County had indicators that concluded blank because of unreliable or missing data; those indicators are motor vehicle deaths, HIV, cost barrier to care, adult binge drinking, adult female routine pap tests and inadequate social support.

Table 6: Favorable and Unfavorable Health Status Indicators, Tipton County*

Better	(green)
Moderate	(yellow)
Worse	(red)

Indicator	Tipton
Mortality	
Alzheimer's Disease	(green)
Diabetes	(yellow)
Cancer	(green)
Chronic Kidney Disease	(yellow)
Chronic Lower Respiratory Disease	(yellow)
Coronary Heart Disease	(red)
Female Life Expectancy	(red)
Male Life Expectancy	(yellow)
Motor Vehicle	(yellow)
Stroke	(yellow)
Unintentional Injury (including motor vehicle)	(yellow)

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* This table is limited to Tipton County, because nearly 2/3rds of inpatient discharges are from that county.

Table 6 – Continued	
Indicator	**Tipton**
Morbidity	
Adult Diabetes	
Adult Obesity	
Adult Overall Health Status	
Alzheimer's Disease/Dementia	
Cancer	
Gonorrhea	
HIV	*
Older Adult Asthma	
Older Adult Depression	
Preterm Births	
Syphilis	
Health Care Access and Quality	
Cost Barrier to Care	*
Older Adult Preventable Hospitalization	
Primary Care Provider Access	
Uninsured	
Health Behaviors	
Adult Binge Drinking	*
Adult Female Routine Pap Tests	*
Adult Physical Inactivity	
Adult Smoking	
Teen Births	
Social Factors	
Children in Single-Parent Households	
High Housing Costs	
Inadequate Social Support	
On-Time High School Graduation	
Poverty	
Unemployment	
Violent Crime	
Physical Environment	
Access to Parks	
Annual Average PM2.5 Concentration	
Housing Stress	
Limited Access to Healthy Food	
Living Near Highways	

* Blank values reflect unreliable or missing data
Source: Community Health Status Indicators Project, Department of Health and Human Services, 2015.

5.4   ZIP Code-Level Health Access Indicators

The Community Need Index (CNI) was created in 2005 by Dignity Health (formerly Catholic Healthcare West) in collaboration with Thomson Reuters. CNI identifies the severity of health disparities related to housing, English as a second language (ESL) and education level for ZIP codes in the United States. In addition to health indicators, CNI includes economic and structural indicators in its assessment of the overall health of a community. Scores are assigned on a scale of one to five, with one indicating the least amount of community need and five indicating the most (see *Figure 3).* The CNI assessments illustrate correlations between high need/high scores and high hospital utilization in specific ZIP codes. *Table 7* summarizes the CNI for ZIP codes in Tipton County.
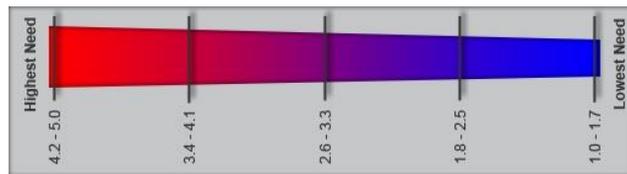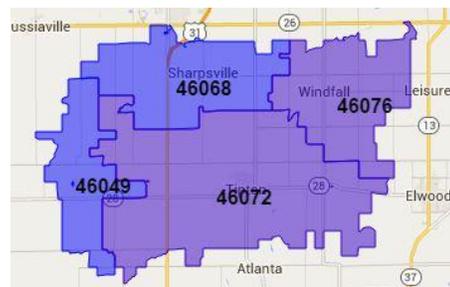
Figure 3: Community Need Index Rating Scale

Table 7: CNI Scores for Tipton County

PSA County	City	ZIP Code	Rank
Tipton	Windfall City	47076	2.0
	Tipton	46072	2.2
	Kempton	46049	1.2
	Sharpsville	46068	1.4

Source: Community Need Index, 2015.

Figure 4: CNI Scores Mapped for Tipton County

Within Tipton County, CNI scores indicate needs are highest for zip code 46072 (Tipton) and the need was rated as moderate. However, needs are higher for other parts of the secondary service area, including Madison, Howard, Clinton and Grant Counties (see *Table 8*).

Table 8: Range of CNI Scores for Tipton County and Surrounding Counties

Service Area	County	Range of CNI Scores (City of Highest)
Primary	Tipton	1.2 to 2.2
Secondary	Hamilton	1.6 to 2.2
	Madison	2 to 4.8 (Anderson)
	Howard	1.4 to 3.6 (Kokomo)
	Clinton	1.2 to 3.6 (Frankfort)
	Grant	1.6 to 4.6 (Marion)

Source: Community Need Index, 2015.

5.5   Medically Underserved Areas and Populations

The Health Resources and Service Administration (HRSA) has calculated an Index of Medical Underservice (IMU) score for communities across the US. The IMU score calculation includes the ratio of primary medical care physicians per 1000 persons, the infant mortality rate, the percentage of the population with incomes below the poverty level and the percentage of the population older than 64. IMU scores range from zero to 100, where 100 represents the least underserved and zero represents the most underserved.

Any area or population receiving an IMU score of 62.0 or below qualifies for Medically Underserved Area (MUA) or Medically Underserved Population (MUP) designation. Federally Qualified Health Centers (FQHCs) may be established to serve MUAs and MUPs. Populations receiving an MUP designation include groups within a geographic area with economic barriers or cultural and/or linguistic access barriers to receiving primary care. When a population group does not qualify for MUP status based on the IMU score, Public Law 99-280 allows MUP designation if "unusual local conditions which are a barrier to access to or the availability of personal health services exist and are documented and if such a designation is recommended by the chief executive officer and local officials of the State where the requested population resides."[4]
Table 9 below illustrates the areas that have been designated as MUAs or MUPs in the IU Health Tipton community.

Table 9: MUAs and MUPs in the IU Health Tipton Hospital Community

Service Area	County	Medically Underserved Areas		Medically Underserved Populations	
		IMU Score	Detail	IMU Score	Detail
Primary	Tipton				
Secondary	Hamilton				
	Madison			57.1	Low-income population, Anderson City Service Area - 10 CTs
	Madison			60.7	Low-income population, North Madison Service Area - 7 CTs
	Howard	61.1	Howard Service Area, 7 CTs		
	Clinton	61.9	Ross Service Area, MCD		
	Clinton	59.4	Warren Service Area, MCD		
	Grant			59.4	Low-income population, entire county

Source: Health Resources and Services Administration, US Department of Health and Human Services, 2015.
Indicates no MUA or MUP in that area.

Madison and Grant counties in the IU Health Tipton service area community had service areas designated as an MUP, if not the entire county (Grant County had the entire county designated as a MUP). Howard and Clinton counties had service areas designated as MUAs.

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4. Guidelines for Medically Underserved Area and Population Designation. US Department of Health and Human Services, Health Resources and Services Administration. http://bhpr.hrsa.gov/shortage/.

5.6   Health Professional Shortage Areas

An area can receive a federal Health Professional Shortage Area (HPSA) designation if a shortage of primary care, dental care, or mental healthcare professionals is found to be present. HPSAs can be: "(1) An urban or rural area (which need not conform to the geographic boundaries of a political subdivision and which is a rational area for the delivery of health services); (2) a population group; or (3) a public or nonprofit private medical facility." *Table 10* below lists the HPSAs in the IU Health Tipton community.

Table 10: HPSAs in the IU Health Tipton Hospital Community

Service Area	County	Primary Care HPSA	Dental Care HPSA	Mental Health HPSA
Primary	Tipton			
Secondary	Hamilton			
	Madison	Low-income population, entire county	1 Health Center: Madison County Community Health Center	1 Health Center: Madison County Community Health Center
		1 Health Center: Madison County Community Health Center		Mental Health-Correctional facility
	Howard	Low income – entire county		
	Clinton	Low income – entire county		
	Grant	Low- income population, entire county		Grant/Blackford County Mental Health Catchment Area

Source: Health Resources and Services Administration, US Department of Health and Human Services, 2015
Indicates no NPSA in that area.
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5.7   Description of Other Facilities and Resources Within the Community

The IU Health Tipton community contains a variety of resources that are available to meet the health needs identified through this CHNA. These resources include facilities designated as FQHCs, hospitals, public health departments and other organizations. *Table 11* below lists the other facilities and resources in the IU Health Tipton community.

Table 11: Resources in Tipton

Service Area	County	Public Health Department
Primary	Tipton	Tipton County Health Department (Tipton, Indiana)
Secondary	Clinton	Clinton County Health Department (Frankfort, IN)
	Grant	Grant County Health Department (Marion, IN)
	Hamilton	Hamilton County Health Department (Noblesville, IN)
	Howard	Howard County Health Department (Kokomo, IN)
	Madison	Madison County Health Department (Anderson, IN)

Service Area	County	FQHC
Primary	Tipton	Tipton County WIC Program (Tipton, Indiana)
Secondary	Clinton	Clinton County WIC Program (Frankfort, IN)
	Grant	Indiana Health Center at Marion (Marion, IN)
	Hamilton	Hamilton County WIC Program (Noblesville, IN) Jane Pauley Community Health Center at Aspire (Carmel, IN)
	Howard	Indiana Health Center at Kokomo (Kokomo, IN) Healthy Children, Health Teens Clinic (Kokomo, IN)
	Madison	Madison County Community Health Center (Anderson, IN) Northern Elwood Center (Elwood, IN) Open Door Health Services Family Planning Clinic (Anderson, IN)

Source: Indiana Primary Care Association, http://www.indianapca.org/?page=FindaCHC#Grant, 2015

Service Area	County	Hospital
Primary	Tipton	IU Health Tipton Hospital
Secondary	Clinton	St. Vincent Frankfort Hospital (Frankfort, IN)
	Grant	Marion General Hospital (Marion, IN) Grant-Blackford Mental Health (Marion, IN)
	Hamilton	IU Health North Hospital (Carmel, IN) IU Health Saxony (Fishers, IN) Franciscan St. Francis Health (Carmel, IN) Riverview Health (Noblesville, IN) St. Vincent Carmel (Carmel, IN) St. Vincent Fishers (Fishers, IN) St. Vincent Heart Center of Indiana (Indianapolis, IN)
	Howard	Community Howard Regional Health (Kokomo, IN) Community Howard Specialty (Kokomo, IN) St. Vincent Kokomo (Kokomo, IN)
	Madison	Community Health of Anderson and Marion County (Anderson, IN) St. Vincent Anderson Regional Hospital (Anderson, IN) St. Vincent Mercy Hospital (Elwood, IN) Assurance Health Psychiatric Hospital (Anderson, IN)

Source: State of Indiana, Health Care Regulatory Services, Indiana Hospital Directory,
http://www.in.gov/isdh/reports/QAMIS/hosdir/, 2015

6 PRIMARY DATA ASSESSMENT

IU Health Tipton Hospital's approach to gathering qualitative data for its CHNA consisted of a multicomponent approach to identify and verify community health needs for the IU Health Tipton service area. This included the following components:

1. Hosting multiple one and a half to two hour community conversation focus groups with public health officials and community leaders in attendance to discuss the healthcare needs of the service area and what role IU Health Tipton could play in addressing the identified needs.
2. Surveying the community at large through the hospital's website, with special emphasis to garner input from low income, uninsured, or minority groups.

6.1 Focus Group Findings

6.1.1 Identification of Persons Providing Input

Local leaders with a stake in the community's health were invited to attend a focus group session held at IU Health Tipton Hospital. Attendees who participated in the focus group are listed in *Table 12* below.

Table 12: Focus Group Participants

Name	Title, Affiliation
Thomas Clark	Chief of Police, Tipton County Police Department
Kristina Craig	Program Coordinator, Chrysler
Kevin Emsweller	Superintendent, Tipton County School Corporation
Tony Frawley	Sheriff, Tipton County Sheriff Department
Frank Giammarino	President, Tipton County Foundation
Melinda Goodnight	Director, Encore
Hope Lashlee	Case Manager, Area 5
Terri Newcom	Extension Educator, Purdue Extension
Cindy Wagoner	Supervisor, Area 5
Hannah Woods	ATL, Chrysler

The focus group occurred at a time when no representative of the Tipton County Health Department could participate.

6.1.2 Prioritization Process and Criteria

To obtain a more complete picture of the factors that play into the Tipton County community's health, input from local health leaders was gathered through a focus group session lasting three hours. IU Health facilitators mailed letters and made follow-up telephone calls inviting public health officials and community leaders to attend the focus group discussion, paying special attention to including organizations that represent the interest of low-income, minority and uninsured individuals. The goal of soliciting these leaders' feedback was to gather insights into the quantitative data that may not be easily identified from the secondary statistical data alone.

IU Health facilitators presented the goals and requirements of the CHNA, reviewed secondary health data including demographics, insurance information, poverty rates and county health rankings,

causes of death, physical activity, chronic conditions and past needs identified during the previous CHNA cycle. Each participant was asked to select the top five health needs. After the results were tallied, a discussion to gain consensus of the top five health needs of the community was conducted, along with current resources and gaps for each need was discussed. This was intended to inspire candid discussions and give leaders another chance to vote for their top five needs from the list.

The focus group concluded by sharing a timeline of next steps and accomplishments since the last CHNA.

6.1.3 *Description of Prioritized Needs*

The focus group identified the following five needs as priorities for IU Health Tipton:

1. Mental health.
2. Chronic disease and obesity.
3. Senior health.
4. Behavioral health.
5. Access to healthcare.

These prioritized needs are discussed in more detail below.

1. Mental health care was identified as the top health need in Tipton County by the focus group participants. There are no inpatient or outpatient services within the county, which means people needing services must ignore their need or go elsewhere. Patients with needs often require more than medication; they benefit from interacting with staff at a facility. The criminal justice representatives noted that people in jail often have a need for mental health treatment and the county does not have the resources to address that. The police and sheriff's offices continue to see increases.

Chronic Disease/Obesity was the second addressed need. There are too few specialists in the county to provide medical care for many of these diseases. There are services focused on prevention through Purdue Extension Services and other programs, but many people do not use these. Area 5 agency teaches chronic disease management and Chrysler has a wellness program. Schools model healthy eating in lunch programs and have wellness committees, yet families do not change diet or activity levels at home. Focus group participants noted the increased use of e-cigarettes, in place of tobacco. Overall, the group concluded that a) there is no community support, organization, or leadership that is driving chronic disease and obesity prevention; and b) individuals and families need to have the will to change and take responsibility for their health.

3. Senior health was the third priority addressed. Tipton County's aging population is continuously increasing, making senior health a great concern. There are several places that provide services to the elderly, yet only a few focus group participants knew of them. Resources provided through Area 5 include nutrition programs, in-home services, bath care and ramp building. The Encore Center provides transportation to the elderly though has limited transportation. Gaps include services that help people remain in their homes as long as possible, such as home/yard maintenance, access to affordable foods and exercise activities.

4. Behavioral health was the fourth identified priority need. The group mentioned several aspects of behavioral health, ranging from young students being unprepared for kindergarten to bullying in schools, domestic violence, and specific conditions such as autism. Purdue Extension has group

activities that support positive development within families (parenting skills, health and nutrition) but no services one-on-one. For families seeking assistance, the nearest services are in Kokomo, which can be difficult to reach. Tipton County has no behavioral health coalition or continuous effort to provide public education about what is available and what might indicate a need for the service.

5. Access to healthcare was a prominent concern of the focus group participants. The consensus was that there are not enough health care providers and not enough specialist physicians. The ideal of a continuum of care is an issue with those who can seek care elsewhere facing challenges to coordinate records and treatments from different physicians' practices. Focus group participants said county residents—especially seniors and others with multiple medications and needs—could benefit from patient advocates, navigators or coaches to help translate medical treatment protocols and help people follow doctors' instructions.

6.2   Community Survey Findings

IU Health also solicited responses from the general public regarding the health of IU Health Tipton community through an online survey as well as paper versions of the survey. The survey consisted of approximately 20 multiple choice and open-ended questions that assessed the community members' feedback regarding healthcare issues and barriers to access.

A link was made available on the hospital's website via an electronic survey tool from December 2014 through June 2015. A paper version was distributed to local community businesses, local chamber members, community health fairs and events, as well as within some hospital patient waiting areas. In addition to disseminating directly to the general public of the community, the survey was also sent via e-mail to participants in the needs assessment focus groups to provide an opportunity for these community leaders to pass on to their local community members.

6.2.1   *Respondent Demographics*

139 people from the IU Health Tipton community participated in the survey. The majority of respondents represented by the survey were White/Caucasian (99%). The older adult population (defined as ages 45 to 64) represented over half of the total respondents (51%). The young adult age group (defined as ages 25 to 44) was also significantly represented as well within Tipton County (30%).

134 of the 139 respondents reported their average household income. Of the 139 people, 21% had an average household income within $25,000 - $49,999. About 27% earned $50,000 - $74,999, whereas 22% earned $75,000 - $99,999. Only 7% of the respondents reported an average household income of below $24,999.

Survey respondents were also asked to report how they pay for health needs. Over 60% of the respondents reported utilizing employer provided insurance. Private insurance was the second most reported payment for health needs (24%). A portion of the respondents (12%) also used Medicare to cover health needs.

Given the reported demographics above, care should be taken with interpreting the survey results. The reported ages of the survey sample versus Tipton County's census data were disproportionate, with the young and older adult age groups being overrepresented.

6.2.2   Greatest Health Needs and Social Issues

Survey participants were asked to select the top five health needs in their community from a list of 12 options. By frequency of selected answer choices, Tipton County considered the top five health needs to be:

1. Substance abuse (**17.0%**)
2. Obesity (**15.5%**)
3. Mental health (**14.4%**)
4. Chronic disease (**13.1%**)
5. Access to healthcare (**12.8%**)

Respondents were also asked to select the top three social needs in their community. By frequency of selected answer choices, Tipton County considered the top three social needs to be:

1. Health (**22.1%**)
2. Public safety (**14.9%**)
3. Education (**13.2%**)

The top five health needs (Question 3) and top three social needs (Question 2) results are summarized in *Figure 5* and *Figure 6*.

Figure 5: Health Needs Identified in Survey
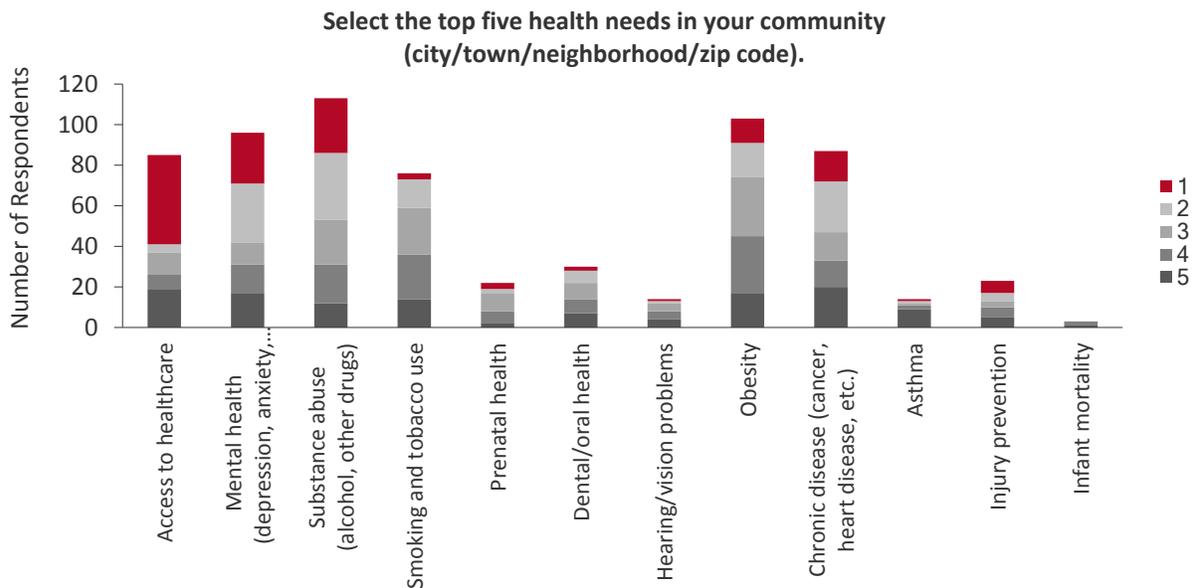
Source: Indiana Health Needs Assessment, 2015

Figure 6: Social Issues Identified in Survey

Select the top three social issues in your community (city/town/neighborhood/zip code).
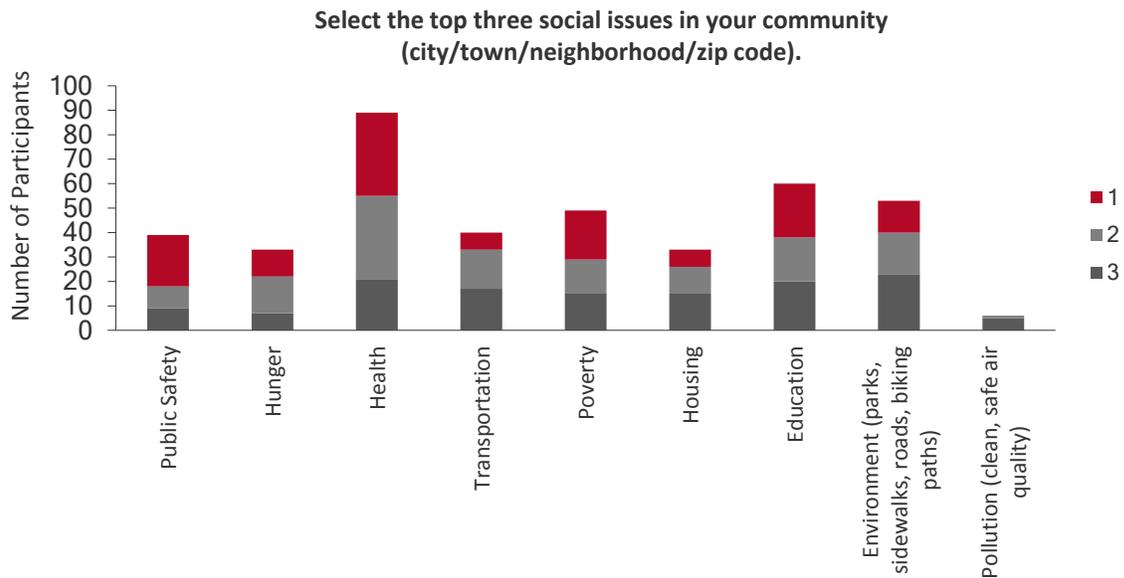
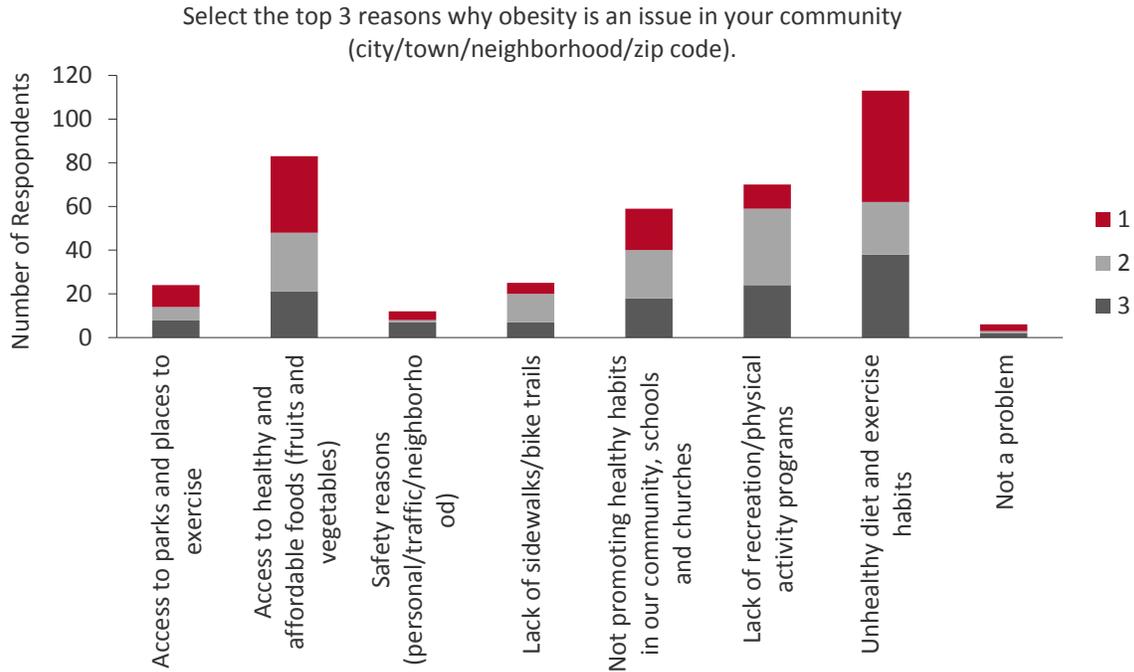Source: Indiana Health Needs Assessment, 2015

6.2.3 *Perceptions of Health Issues*

The survey included several questions about obesity and mental health issues within respondents' communities. When asked to select the top three reasons why obesity is an issue in their community (Question 4), the three answer choices selected most often by respondents were:

1. Unhealthy diet and exercise habits (28.8%)
2. Access to healthy and affordable foods (21.2%)
3. Lack of recreation/physical activity programs (17.9%)

Full results are presented in *Figure 7* on the next page.

Figure 7: Self-Perceptions about Causes of Obesity

Select the top 3 reasons why obesity is an issue in your community (city/town/neighborhood/zip code).

Source: Indiana Health Needs Assessment, 2015

Respondents were also asked to select what reasons kept them from their healthy weight (Question 9) from a list of 8 options. Over 67% of the respondents thought eating habits (fried foods, unhealthy snacking, fast food, overeating) kept them from a healthy weight. Almost 46% of respondents felt stress impacted weight, followed by about 26% attributing the cost and lack of healthy foods. Results are presented in *Figure 8* on the next page.

Figure 8: Self-perception about Own Weight Management

### What keeps you from your healthy weight? (Select all that apply)
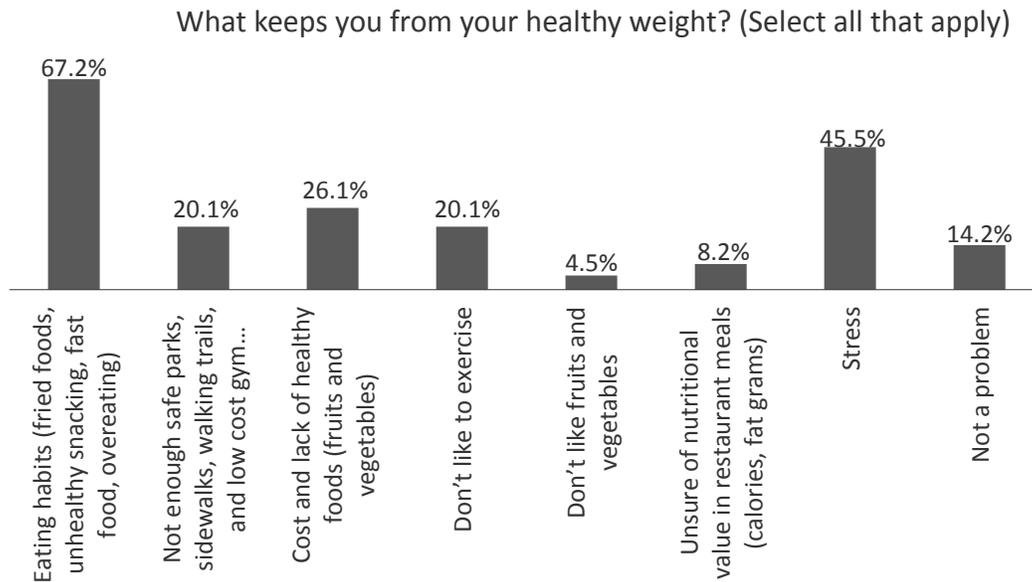
Source: Indiana Health Needs Assessment, 2015

When asked to select the top three ways to improve mental health in their community (Question 5), the three answer choices selected most often by respondents were:

1. Increase programs for mental health problems (depression, anxiety and suicide) (23.0%)
2. Increase awareness of mental health services (21.7%)
3. Increase substance abuse programs and resources (14.9%).

## Figure 9: Ideas from Survey to Improve Mental Health

Select the top 3 ways to improve mental health in your community.
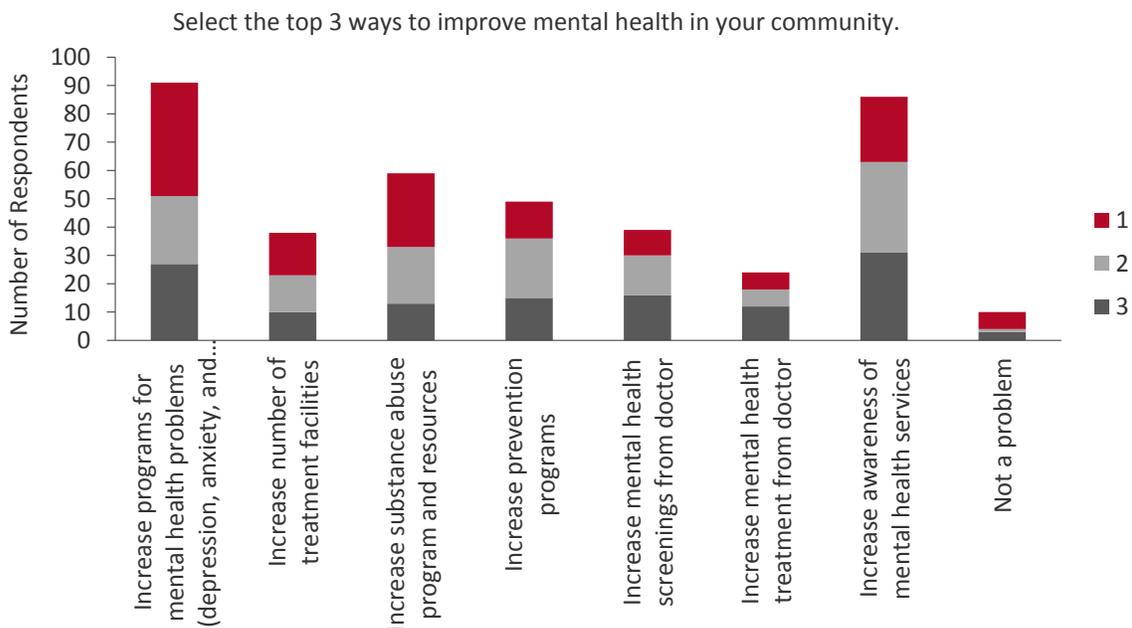
Source: Indiana Health Needs Assessment, 2015

6.2.4 Health Education and Access

A number of questions about health education and access to healthcare were asked in the survey. Question 10 asked to select all health topic doctors have discussed with them. About 37% of the respondents talked to doctors about exercising and diet or nutrition. However, 46% of the respondents felt the question did not apply. Question 10 is summarized in *Figure 10* below.

Figure 10: Health Topics Discussed with Physicians

Has your doctor talked to you about: (Select all that apply)
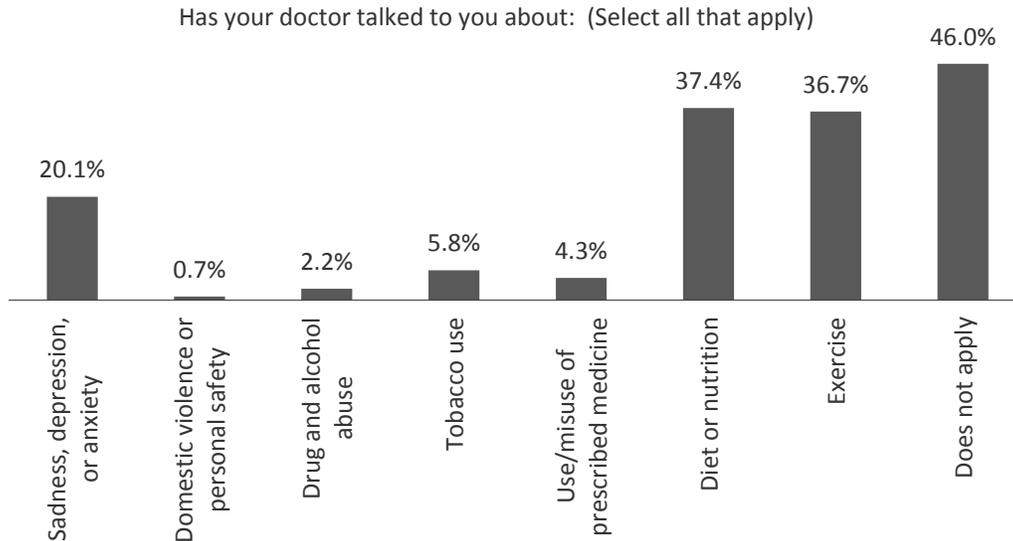
Source: Indiana Health Needs Assessment, 2015

When asked the top three challenges when receiving healthcare (Question 12), 47% of the respondents reported not having problems receiving healthcare. However, 35% of respondents felt the cost of the co-pay was a challenge and 33% thought limited hours at the doctor's office. Question 12 is summarized in *Figure 11*.

Figure 11: Challenges in Receiving Healthcare

What are the top three challenges for you and your household when receiving healthcare?
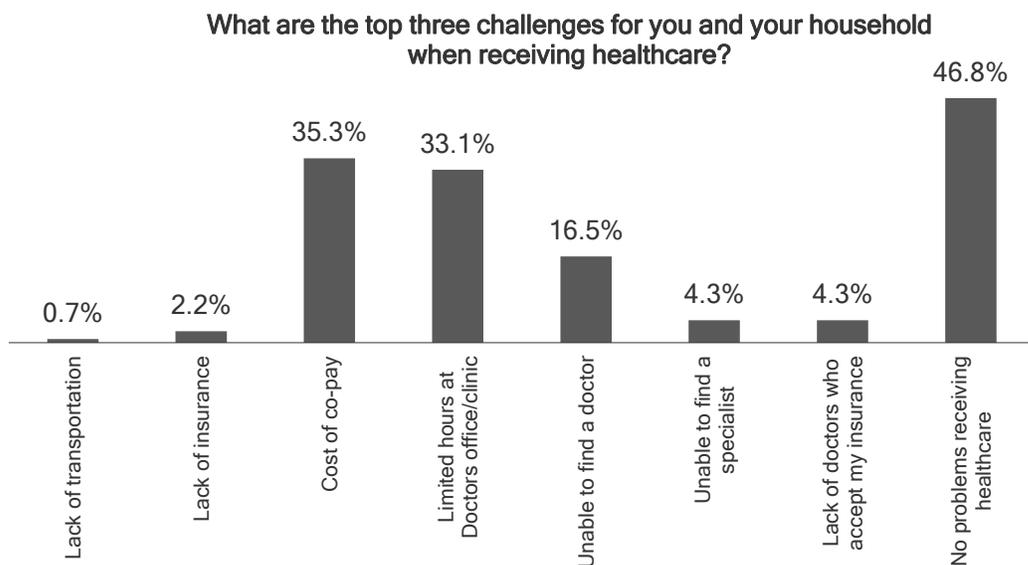
Source: Indiana Health Needs Assessment, 2015

7 IU HEALTH TIPTON ACTIVITIES THAT ADDRESS PRIORITY NEEDS

Obesity Prevention:

IU Health overall offers "My Healthy Habits," a free app for iOS or Android products to allow people to create customized notifications and calendars to help kick-start good eating, exercise and self-care habits.

The hospital provides free A1C screenings and Diabetes information at our annual health fair and at multiple community events throughout the year.

The hospital has participated in the IU Health Statewide Day of Service, for the last few years the focus has been Obesity Prevention. Enhancements have been made to the local city park, including adding 5 fitness stations along the existing walking path.

Access to Care:

Each year IU Health Tipton Hospital hosts a health fair and offers multiple free screenings. Past health fair screenings that have been offered to the community free of charge are: Blood Pressure, Blood Draw (Including Glucose and Cholesterol), Sleep Disorders Screenings, COPD Screenings, Bone Density Screenings, Diabetes Risk Assessments, etc.

IU Health Tipton Hospital offers low-cost sports physicals, a portion of the proceeds are donated back to each school. Students are provided a comprehensive multi-station exam that meets all IHSAA requirements.

Injury Prevention:

The hospital is a permanent fitting station with the Automotive Safety Program. We have certified car seat technicians on-site that offer free car seat fittings and consultations.

8 CONCLUSION

This study of Tipton County assessed priority community health needs using quantitative data from numerous sources, as well as survey responses from Tipton County and qualitative information derived from a focus group. The focus group included members of local businesses and charities such as the Tipton County Foundation, in addition to the local school system and employees of local government. No one from the Tipton County Health Department could attend due to scheduling conflicts.

To set priorities after receiving and compiling qualitative and quantitative data, IU Health Tipton used the Hanlon method. The top five identified needs after utilizing this process are:

- Mental Health.
- Obesity, Nutrition and Active Living.
- Senior Health.
- Behavioral Health.
- Access to Healthcare.

IU Health Tipton Hospital has services that address some of these needs. Other sites in the county, including Tipton County WIC Program, also address some of the identified priorities. Additional services will be developed as appropriate in response to this assessment.