CHI Health
A member of CommonSpirit

Community Health Improvement

Strategic Action Plan

Fiscal Year 2026 - 2028

CHI Health Mercy – Council Bluffs, IA

Board approved October 2025

Table of Contents

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

At-a-Glance Summary

Community Served 	CHI Health Mercy Council Bluffs' primary service area is considered Pottawattamie and Mills Counties. The Omaha and Council Bluffs Metro Area is made up of four counties: Pottawattamie in Iowa, and Cass, Douglas, and Sarpy in Nebraska. The hospital's primary and secondary service area includes portions of Pottawattamie, Harrison and Mills Counties.
Significant Community Health Needs Being Addressed 	The significant community health needs the hospital is helping to address and that form the basis of this document were identified in the hospital's most recent Community Health Needs Assessment (CHNA). Needs the hospitals intends to address with strategies and programs are: ● Access to Health Care Services ● Behavioral Health ● Social Determinants of Health
Strategies and Programs to Address Needs 	The hospital intends to take actions and to dedicate resources to address these needs, including: ● **Behavioral Health (Mental Health and Substance Use)** ○ Expand access to mental health services for youth. ○ Expand access to behavioral health peer support ○ Enhance Community-Wide Opioid Response through Strategic Partnerships and Data-Driven Insights ○ Create awareness about rising incidence of polypharmacy in patients treated for psychiatric illness ○ Provide QPR (Question, Persuade, Refer) Suicide Prevention training to community members and agency staff, focusing on organizations that serve vulnerable populations. ○ Screen for perinatal mood anxiety and send referrals for care ● **Chronic Disease** ○ Post-discharge navigation ensures follow-up, reducing heart failure readmissions and improving outreach

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

○Implement an awareness campaign related to early detection of lung cancer
○ Support community-based chronic disease prevention and management

- **Health Related Social Needs/Social Determinants of Health**
  ○ Support community efforts to address health-related social needs through effective service referrals and resource navigation.
  ○ Support evidence-based programming to support financial literacy and goal setting among individuals living in poverty in Pottawattamie County
  ○ Improve warm handoffs for patients transitioning between agencies, ultimately leading to better patient outcomes and reduced service gaps, particularly for individuals experiencing homelessness and/or behavioral health challenges in the community.
  ○ Invest in community health by partnering with local organizations and providing financial support to implement impactful health improvement initiatives.
  ○ Improve referral coordination by collaborating with community partners in Mills county to ensure patients get the resources they need.

Planned resources and collaborators to help address these needs, as well as anticipated impacts of the strategies and programs, are described in the “Strategies and Program Activities by Health Need” section of the document.

This document is publicly available online at the hospital’s website. Written comments on this strategy and plan can be submitted to the Administration Office of CHI St. Francis Health. Written comments on this report can be submitted via mail to CHI Health - The McAuley Fogelstrom Center (12809 W Dodge Rd, Omaha, NE 68154 attn. Healthy Communities); electronically at: https://forms.gle/KGRq62swNdQyAehX8 or by calling Ashley Carroll, Market Director, Community and Population Health, at: (402) 343-4548.

Our Hospital and the Community Served

About the Hospital

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

CHI Health Mercy Council Bluffs is a part of CommonSpirit Health, one of the largest nonprofit health systems in the U.S., with more than 2,200 care sites in 24 states coast to coast, serving patients in big cities and small towns across America.

CHI Health Mercy Council Bluffs

CHI Health Mercy Council Bluffs, located in Council Bluffs, Iowa, was founded in 1887 by the Sisters of Mercy and became part of the Alegent Health healthcare system in 1996. In 2014 the Alegent Health system merged with one other legacy health system to create the market-based organization CHI Health under the Catholic Health Initiatives umbrella.

Some services include emergency and trauma services, behavioral health, designated stroke unit, heart and vascular care, surgical robot, maternity center, rehabilitative services, cancer care, diagnostic and procedure center, advanced word care, medical, surgical, orthopedic, and pediatric

Our Mission

The hospital's dedication to assessing significant community health needs and helping to address them in conjunction with the community is in keeping with its mission. As CommonSpirit Health, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.

Financial Assistance for Medically Necessary Care

It is the policy of CommonSpirit Health to provide, without discrimination, emergency medical care and medically necessary care in CommonSpirit hospital facilities to all patients, without regard to a patient's financial ability to pay.

This hospital has a financial assistance policy that describes the assistance provided to patients for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for such care, and who meet the eligibility criteria for such assistance. The financial assistance policy, a plain language summary and related materials are available in multiple languages on the hospital's website.

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

https://www.chihealth.com/content/dam/chihealthcom/documents/patients-and-visitors/financial-assistance/fap-2025/Finance%20G-003%20Financial%20Assistance%20POLICY%2007-01-25_%20EN.pdf

Description of the Community Served

CHI Health Mercy Council Bluffs identified Pottawattamie and Mills Counties as their primary service area for the CHNA. The following zip codes correspond to 80% of patient admissions (51534, 51510, 51560, 51555) as the primary service area.

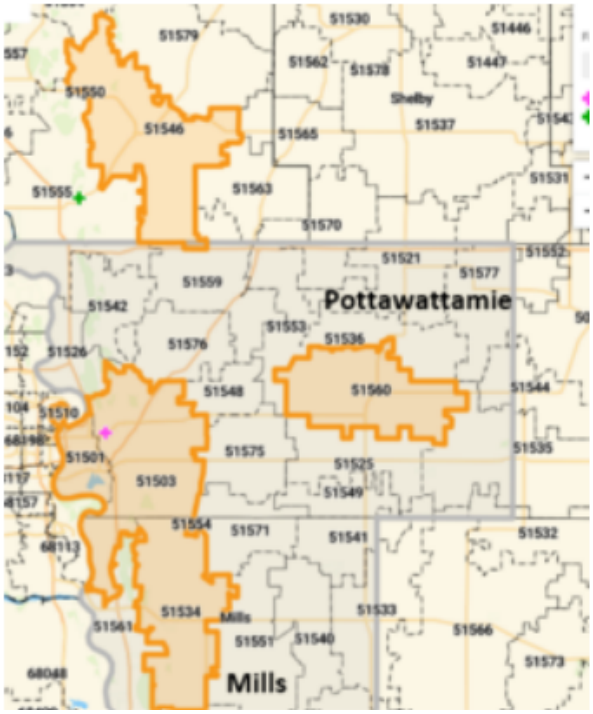


Figure 1: CHI Health Mercy Council Bluffs CHNA Service Area - Pottawattamie and Mills County

Community Description

CHI Health Mercy Council Bluffs is located in Council Bluffs, Iowa, on the western edge of Pottawattamie County, IA bordering the major metropolitan area of Omaha, NE to the west. Pottawattamie County covers approximately 950 square miles with 93,529 residents. Council Bluffs is primarily a metropolitan area and makes up 67% of the Pottawattamie County population while the remaining communities are more rural in nature. The population is primarily Non-Hispanic White population, however Pottawattamie County also has a slightly higher Hispanic population than Mills County and the State of Iowa. The estimated Hispanic population in Pottawattamie County as of 2022 is 8.70%.

Socioeconomic Factors

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

The socioeconomic factors known to influence health include household income, poverty, unemployment rates and educational attainment for the community served by the hospital. Pottawattamie County has a lower graduation rate (high school and bachelor's degree or
higher) than both Mills County and the State of Iowa. While poverty rates in both counties are lower than the state of Iowa, child poverty rates in Pottawattamie County are comparable to the state.

Health Professional Shortage Areas (HPSA) and Medically Underserved Areas (MUA)
Pottawattamie County has four designated Health Professional Shortage Areas (HPSA) including primary care, dental health, mental health disciplines. The four designated HPSA's in Pottawattamie County have scores that range from nine to 23 (17 median score), where the score range is 0-26 (the higher the score, the greater the priority). Mills County has no HPSA designations. Pottawattamie County has one designated Medically Underserved Area with a score of 50.9 where the lowest score (highest need) is zero; the highest score (lowest need) is 100.

Community Assessment and Significant Needs

The health issues that form the basis of the hospital's community health implementation strategy and plan were identified in the most recent CHNA report, which was adopted in April, 2025. The CHNA report includes:

- Description of the community assessed consistent with the hospital's service area;
- Description of the assessment process and methods;
- Data, information and findings, including significant community health needs;
- Community resources potentially available to help address identified needs; and
- Impacts of actions taken by the hospital since the preceding CHNA.

Additional details about the needs assessment can be found in the CHNA report, which is publicly available on the hospital's website https://www.chihealth.com/content/dam/chihealthcom/documents/about-us/community-health-needs-assessment/chna-reports/2025/chna-2025-mercy-council-bluffs.pdf or upon request from the hospital, using the contact information in the At-a-Glance Summary.

Significant Health Needs

The CHNA identified the significant needs in the table below, which also indicates which needs the hospital intends to address. Identified needs may include specific health conditions, behaviors or health care services, and also health-related social and community needs that have an impact on health and well-being.

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Significant Health Need	Description	Intend to Address?
Behavioral Health (Mental Health and Substance Use)	22.7% of people reported Fair/Poor Mental Health in the Omaha Metro Area. 32.3% are diagnosed with depression and 41.8% have symptoms of chronic depression in the Omaha Metro Area. 29% of Mills and 32.1% of Pottawattamie residents reported access to Mental Health treatment. Key informants rated substance use as a top concern with 49.0% stating it is a major problem and 46.9% stating it is a moderate problem. Access to Substance Abuse treatment was cited by 27% of Mills and 8.6% of Pottawattamie County residents as a top concern.	Yes
Access to Health Care Services	16.0% of Pottawattamie and 25% of Mills residents reported that cost prevented them from visiting a physician last year. Omaha Metro area residents reported difficulty accessing healthcare services due to cost, transportation, appointment times, and finding physicians.	Yes
Health Related Social Needs/Social Determinants of Health	Metro Area key informants rated social determinants of health as a top concern with 72.2% stating it is a major problem and 22.6% stating it is a moderate problem. A total of 24.3% of Metro Area and 31.1% of Pottawattamie residents would not be able to afford an unexpected $400 expense without going into debt. Pottawattamie County residents 32.3% always are worried about paying rent/ mortgage.	Yes

2025 Implementation Strategy and Plan

This section presents strategies and program activities the hospital intends to deliver, fund or collaborate with others to address significant community health needs over the next three years, including resources for and anticipated impacts of these activities.

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Planned activities are consistent with current significant needs and the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant, such as changes in community needs or resources to address them.

Creating the Implementation Strategy

The hospital is dedicated to improving community health and delivering community benefit with the engagement of its staff, clinicians and board, and in collaboration with community partners.

During the CHNA process, CHI Health Mercy Council Bluff leadership, along with community partners, identified the top health needs through consideration of various criteria, including: standing in comparison with benchmark data; identified trends; the magnitude of the issue in terms of the number of persons affected; and the perceptions of top health issues among key informants giving input to the process.

CHI Health Mercy Council Bluffs gained input from the hospital's community board and local health department. During these internal and external meetings the team took into consideration the severity of each health issue, factors driving the health needs, the populations impacted (making special consideration to disparities and vulnerable populations), the trends in the data, as well as existing partnerships, available resources, the hospital's level of expertise, existing initiatives (or lack thereof), potential for impact, and the community's interest in the hospital engaging in that health area. Through this process Behavioral Health, Chronic Disease, and Health Related Social Needs were identified as drivers of these health needs.

The programs and initiatives described here were selected on the basis of...

- Severity and impact on other health need areas
- Hospitals' expertise and ability to make impact
- Community's interest in the hospital engaging in this work
- Existing work engaging various community partners
- Political will to address systemic barriers

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Community Health Core Strategies

The hospital believes that program activities to help address significant community health needs should reflect a strategic use of resources. CommonSpirit Health has established three core strategies for community health improvement activities. These strategies help to ensure that program activities overall address strategic aims while meeting locally-identified needs.

- **Core Strategy 1**: Extend the care continuum by aligning and integrating clinical and community-based interventions.
- **Core Strategy 2**: Implement and sustain evidence-informed health improvement strategies and programs.
- **Core Strategy 3**: Strengthen community capacity to achieve equitable health and well-being.

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Vital Conditions and the Well-Being Portfolio

Community health initiatives at CommonSpirit Health use the Vital Conditions framework and the Well-Being Portfolio[1] to help plan and communicate about strategies and programs.

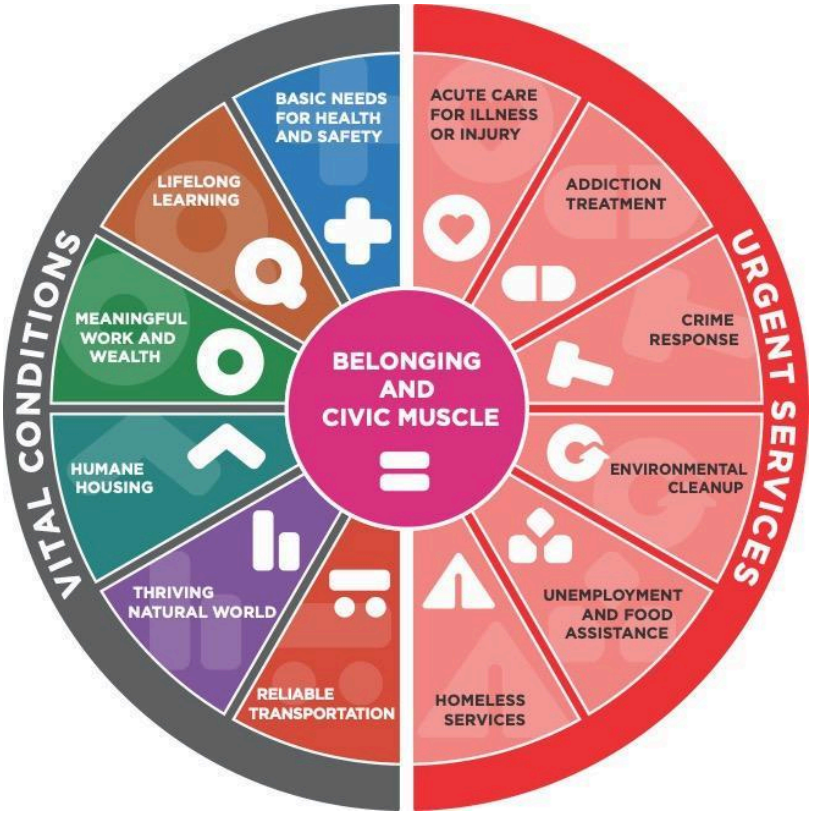
Investments of time, resources, expertise and collaboration to improve health and well-being can take different approaches. And usually, no single approach can fully improve or resolve a given need on its own.

One way to think about any approach is that it may strengthen "vital conditions" or provide "urgent services," both of which are valuable to support thriving people and communities. A set of program activities may seek to do one or both. Taken together, vital conditions and urgent services compose a well-being portfolio.

What are Vital Conditions?
These are characteristics of places and institutions that all people need all the time to be healthy and well. The vital conditions are related to social determinants or drivers of health, and they are inclusive of health care, multi-sector partnerships and the conditions of communities. They help create a community environment that supports health.

What are Urgent Services?
These are services that anyone under adversity may need temporarily to regain or restore health and well-being. Urgent services address the immediate needs of individuals and communities, say, during illness.

What is Belonging and Civic Muscle?
This is a sense of belonging and power to help shape the world. Belonging is feeling part of a community and valued for what you bring. Civic muscle is the power of people in a society to work across differences for a thriving future.



[1] The Vital Conditions framework and the Well-Being Portfolio were created by the Rippel Foundation, and are being used with permission. Visit https://rippel.org/vital-conditions/ to learn more.

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Well-Being Portfolio in this Strategy and Plan

The hospital's planned strategies and program activities that follow are each identified as aligning with one of the vital conditions or urgent services in this figure. This helps to identify the range of approaches taken to address community needs, and also acknowledges that the hospital is one community resource and stakeholder among many that are dedicated to and equipped for helping to address these needs and improve health.

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Strategies and Program Activities by Health Need

Health Need:	**Behavioral Health**				
Population(s) of Focus:	General population, individuals with a mental health and/or substance use challenge				
Strategy or Program	Summary Description	Strategic Alignment			
		Strategy 1: **Extend care continuum**	Strategy 2: **Evidence-informed**	Strategy 3: **Community capacity**	**Vital Condition (VC) or Urgent Service (US)**
Expand access to mental health services for youth.	Modify partial hospitalization inclusion criteria to admit youth as young as 5 years old (was previously 9 years old).	●	●	●	US
Expand access to Behavioral Health Peer Support	Add Behavioral Health Peer Support Specialists to the inpatient psychiatric care team to support patients in meeting their treatment goals while admitted and post discharge. Explore the potential for a Child/ Adolescent Peer Support Specialist for inpatient units and the partial residential treatment	●	●	●	US

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Health Need:	**Behavioral Health**				
	program.				
Enhance Community-Wide Opioid Response through Strategic Partnerships and Data-Driven Insights	Collaborate with Pottawattamie County Public Health and Heartland Family Services on opioid response (e.g. data sharing to understand magnitude of the issue, etc.)	●	●	●	US
Create awareness about the rising incidence of polypharmacy in patients treated for psychiatric illness	Educate primary care providers on best practices to decrease polypharmacy for patients receiving psychiatric services, specifically the combination of benzos and opioids.	●	●	●	US
Provide QPR (Question, Persuade, Refer) Suicide Prevention training to community members and agency staff, focusing on organizations that serve vulnerable populations.	1. Conduct QPR Training Sessions: Schedule and deliver QPR training sessions to various community groups and agencies. 2. Outreach to Community Agencies: Proactively contact and offer QPR training to organizations such as homeless shelters, schools, social service agencies, and faith-based organizations.	●	●	●	VC

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Health Need:	**Behavioral Health**				
	3. Promote Training Opportunities: Publicize upcoming QPR training sessions through various channels (e.g., website, social media, community newsletters).				
Provide screening for Perinatal Mood Anxiety	Screening for perinatal mood anxiety and send referrals for care	●	●	●	US
Collaborate with community partners through an inter-agency project to develop and implement standardized warm handoff procedures and training programs.	1. Utilize a Behavioral Health Navigator as a trainer to expand the reach of the training program within the organization and community. 2.Participate in regular project meetings with partners to coordinate activities, share progress, and address challenges. 3. Track and analyze data related to warm handoffs to assess the effectiveness of the project and identify areas for improvement.	●	●	●	US
Planned Resources:	Grant funding, staff time, training and educational materials				

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Health Need:	**Behavioral Health**
Planned Collaborators:	Council Bluffs Community Schools, AllCare Health Center, Pottawattamie County Public Health, Heartland Family Services, Methodist Jennie Edmundson, Pottawattamie County primary care providers, Micah House, Mercy Council Bluffs employees

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Improve mental health status	Percent of Omaha Metro Area residents reporting “Excellent” or “Very Good” mental health	CHNA
Improve access to care and education	Percent of residents able to access mental health services when they needed it	Centers for Medicare and Medicaid Services National Plan and Provider Enumeration System/CHNA

Health Need:	**Chronic Disease**	
Population(s) of Focus:	General population in Mercy Council Bluffs service area	
Strategy or Program	Summary Description	Strategic Alignment

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Health Need:	**Chronic Disease**				
		Strategy 1: **Extend care continuum**	Strategy 2: **Evidence-informed**	Strategy 3: **Community capacity**	**Vital Condition (VC) or Urgent Service (US)**
Reduce readmissions among people diagnosed with heart failure by improving post discharge care coordination	Increase post-discharge patient navigation/care coordination by Population Health Coaches for medication reconciliation, symptom assessment and to remind patients about follow-up appointments	●	●	●	VC
Reduce lung cancer incidence through screening and tobacco cessation	Implement an awareness campaign related to early detection of lung cancer through screening and education about other risk factors, etc. Screen patients for tobacco use and refer them to the quit line for cessation support.	●	●	●	VC
Planned Resources:	Grant funding, staff time, educational resources, Quitline Iowa				
Planned Collaborators:	Community health fairs, Mercy Council Bluffs employees				

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Decrease chronic disease mortality	Percent of residents with a chronic disease	America's Health Rankings- Iowa
Decrease Lung Disease mortality	Percent of residents with Chronic Obstructive Pulmonary Disease	CHNA

Health Need:	**Health Related Social Needs**				
Population(s) of Focus:	General population in Mercy Council Bluffs service area who are underserved, vulnerable, and/or in need of assistance—including those living at or below the poverty line				
Strategy or Program	Summary Description	Strategic Alignment			
		Strategy 1: **Extend care continuum**	Strategy 2: **Evidence-informed**	Strategy 3: **Community capacity**	**Vital Condition (VC) or Urgent Service (US)**
Improve identification of health-related social needs through IP screening	Support community efforts to address health-related social needs through effective service referrals and resource navigation: Connection to community-based services for unmet health needs	●	●	●	US

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Health Need:	**Health Related Social Needs**				
Promote financial literacy	Support the Bridges out of Poverty' Getting Ahead financial literacy program through a grant and board representation.	●	●	●	VC
Invest in community health by partnering with local organizations and providing financial support to implement impactful health improvement initiatives.	Align community investments with hospital priorities by providing financial support to local organizations through a targeted Community Health Improvement Grant program, based on needs identified in the Community Health Needs Assessment (CHNA).	●	●	●	VC
Improve referral coordination by collaborating with community partners in Mills county to ensure patients get the resources they need.	Collaborating with heartland crisis team to provide presentation on resources for healthcare workers	●	●	●	US
Planned Resources:	HRSN screening data, referral systems, grants, training/ education, staff time (in-kind)				
Planned Collaborators:	Heartland Family Services, Bridges out of Poverty				

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Improved financial resilience	Percent of residents who would not be able to afford an unexpected $400 expense without going into debt	CHNA
Increased perception of general health	Percent of residents rating their physical/ mental health as good or excellent	CHNA

*References are retrieved from the CHI Health Mercy Council Bluffs Community Health Needs Assessment of 2025