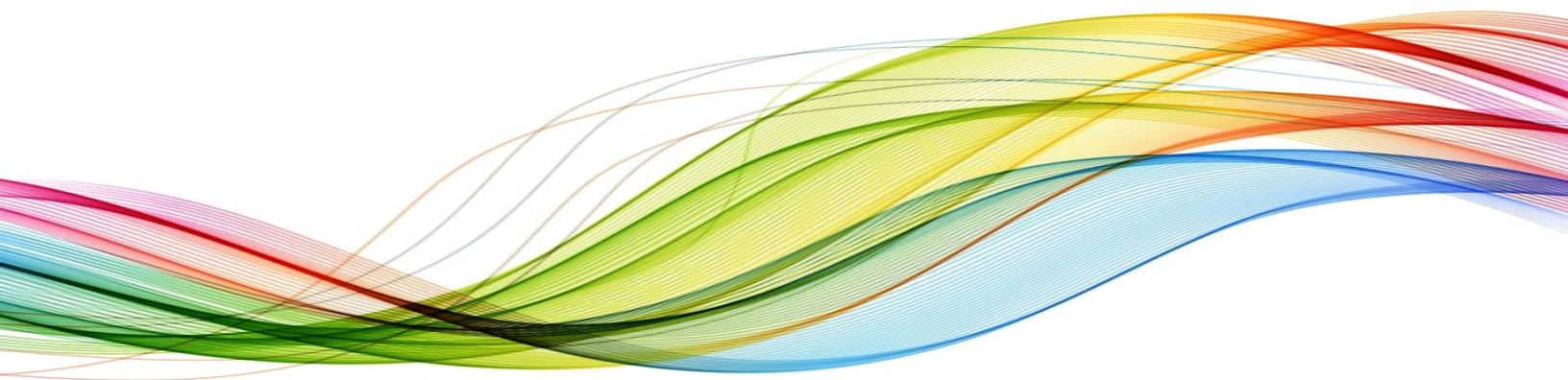




Community Health Needs Assessment

Citizen Health - Colby KS

Thomas County, Kansas



May 2018 Release

VVV Research & Development LLC
Olathe, KS

Community Health Needs Assessment

Citizen Health- Colby KS

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I. Executive Summary

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I. Executive Summary

2018 Community Health Needs Assessment (CHNA) Wave #3 – Thomas Co KS

Creating healthy communities requires a high level of mutual understanding and collaboration among community leaders. The development of this assessment brings together community health leaders and providers, along with local residents, to research and prioritize county health needs and document community health delivery successes. This health assessment will serve as the foundation for community health improvement efforts for the next three years. The last CHNA for Thomas County, KS was published in **May 2015**. (Note: The Patient Protection and Affordable Care Act (ACA) require not-for-profit hospitals to conduct a CHNA every three years and adopt an implementation strategy to meet the needs identified by the CHNA). This assessment was coordinated and produced by VVV Consultants LLC (Olathe, Kansas) under the direction of Vince Vandehaar, MBA.

Important CHNA benefits for both the local hospital and health department, as well as for the community, are as follows: 1) Increases knowledge of community health needs and resources 2) Creates a common understanding of the priorities of the community's health needs 3) Enhances relationships and mutual understanding between and among stakeholders 4) Provides a basis upon which community stakeholders can make decisions about how they can contribute to improving the health of the community 5) Provides rationale for current and potential funders to support efforts to improve the health of the community 6) Creates opportunities for collaboration in delivery of services to the community and 7) Provides guidance to the hospital and local health department for how they can align their services and community benefit programs to best meet needs.

Priority 2018 community health Needs (changes and/or improvements) cited by Thomas County (KS) area stakeholders / Citizens Health's Leadership are as follows:

Thomas County, KS - Citizens Health 2018 Community Stakeholder Priorities	
#	Health Needs to Change and/or Improve
1	Mental Health coverage / EAP services
2	Expand Preventive Care
3	Awareness / Access of HC Services
4	Community Engagement / Fight Health Apathy
5	Decrease Obesity (Provide Nutrition and Fitness Education)
6	Uninsured / Underinsured (Lack of Medicaid Expansion)

Key Community Health Needs Assessment Conclusions from Thomas County KS
secondary research are as follows:

KS HEALTH RANKINGS: According to the 2018 RWJ County Health Rankings study, Thomas County's highest State of Kansas rankings (of 105 counties) were in Mortality, Social and Economic Factors, Health Behaviors, Health Outcomes and Health Factors.

- TAB 1: Thomas County has a population of 7,892 residents as of 2016. 16% of Thomas County's population consists of the elderly (65+). The percent of Hispanics and Latinos in Thomas County is 5.4%. Children in Thomas County who live in single-parent households has slightly decreased down to 22%. The percent of people living below the poverty level has also reached below overall average levels and norms with 11.2% compared to 12.2%. The percent of people with limited access to healthy foods is 8%, much lower than the Kansas rural norm of 16.9% yet still a concerning amount.
- TAB 2: The Thomas County per capita income in 2015 equals \$26,309. The percent of unemployed workers in the civilian labor force in Thomas County has risen from 2.4% to 2.7% (2013-2015) but has remained below Kansas Rural Norm of 3.2%. Thomas County has a consistently rising and high percentage of households with no car with low access to a grocery store (8.8%), compared to the Kansas rural norm of 7.5%. The percent of solo drivers with longer commutes is 7%.
- TAB 3: In Thomas County, 41% of students are eligible for the free or reduced lunch program, compared to the Kansas rural norm of 48.9%. The county maintains a 90.7% high school graduation rate, which is much lower than the Kansas rural norm of 95.7%. The percent of persons (25+) with a Bachelor's degree or higher in Thomas County is 18.1%, also at a significantly lower percentage than the Kansas rural norm of 32.2%.
- TAB 4: The percent of births where prenatal care began in the first trimester in Thomas County is 83%, much higher than Kansas Rural Norm of 77.4%. The percent of births with low birth weights is 6.2%. The average monthly WIC mothers exclusively breastfeeding in Thomas County is 16.3%. 33.5% of births are occurring to unmarried women, higher than the Kansas rural norm of 32.8%. The percent of all births occurring to Teens has remained constant at 11.4% in Thomas County, now lower than the Kansas rural norm of 11.6%.
- TAB 5: The 2014 ratio of the population in Thomas County to Primary Care physicians is much better (1,970 residents to 1 doctor) than the Kansas rural norm of 2,296 to 1. The number of preventable hospital stays in Thomas County is 67, lower than the Kansas rural norm of 74. The percentage of patients who reported they would definitely recommend the hospital came in at 75%, which is lower compared to the Kansas Rural Norm of 77.1%.
- TAB 6: The depression rate for the Medicare population in Thomas County is 17.3%, a concerning higher rate than the Kansas rural norm of 16.5%. The percent of alcohol-impaired driving deaths in Thomas County (27%) is lower than the Kansas rural norm of 36.1%. The number of poor mental health days in Thomas County is 3.0 compared to the Kansas Rural Norm of 2.9.

- TAB 7: The adult obesity rate in Thomas County is 35%, significantly higher than the Kansas Rural Norm of 32.3%. The percent of people in Thomas County who are physically inactive is 24%. The percentage of the Medicare population with Hyperlipidemia was reported at 48.2%, significantly higher than the Kansas Rural Norm of 36.9%. The percentage of those who have Chronic Kidney Disease was 16.2%, compared to the lower rate of 15.1% for the Kansas Rural Norm.
- TAB 8: The uninsured adult population rate in Thomas County is 11%, lower than the Kansas rural norm of 13%.
- TAB 9: The age-adjusted Chronic Lower Respiratory Disease mortality rate per 100,000 is 61.2, higher than the Kansas rural norm of 51.5. The Heart Disease Mortality Rate was 169.5, which was lower than the Kansas Rural Norm of 174.3. The age-adjusted Suicide Mortality Rate is 27.9, much higher than the Kansas Rural Norm of 12.6.
- TAB 10: The percent of diabetic screenings in Thomas County is 88.0%. Access to exercise opportunities in Thomas County is 65%, much higher than the Kansas rural norm of 46.1%. Mammography screenings were 57%, much lower than the Kansas rural norm of 63.6%.

Community Feedback Research Conclusions: Community perspective from key stakeholders on their views of progress to address baseline CHNA needs. Highlighted points are as follows.

- When addressing the ratings of overall health quality feedback, the majority of stakeholders rated the community "somewhat healthy" (58.8%) and "healthy" (30%).
- Being familiar with the U.S. recommendations for adult activity is important and 51.1% of the stakeholders felt they were familiar by checking "Yes".
- Support regarding the raise of age limit for tobacco product purchase revealed many supporters amongst stakeholders with the highest percentage being "very supportive" (33.4%) and second highest of 24.1% of them being neutral to the age change.
- Thomas County community lack fresh produce of high quality and adequate street lighting for walking at night.

II. Methodology

[VVV Consultants LLC]

II. Methodology

a) CHNA Scope and Purpose

The federal Patient Protection and Affordable Care Act (ACA) requires that each registered 501(c)3 hospital conduct a Community Health Needs Assessment (CHNA) at least once every three years and adopt a strategy to meet community health needs. Any hospital that has filed a 990 is required to conduct a CHNA. IRS Notice 2011-52 was released in late fall of 2011 to give notice and request comments.

JOB #1: Meet/Report IRS 990 Required Documentation

1. A description of the community served by the facility and how the community was determined;
2. A description of the process and methods used to conduct the CHNA;
3. The identity of any and all organizations with which the organization collaborated and third parties that it engaged to assist with the CHNA;
4. A description of how the organization considered the input of persons representing the community (e.g., *through meetings, focus groups, interviews, etc.*), who those persons are, and their qualifications;
5. A prioritized description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and
6. A description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

Section 501(r) provides that a CHNA must take into account input from persons who represent the broad interests of the community served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: Government agencies with current information relevant to the health needs of the community and representatives or members in the community who are medically underserved, low-income, minority populations, and populations with chronic disease needs. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility's defined community (e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc.).

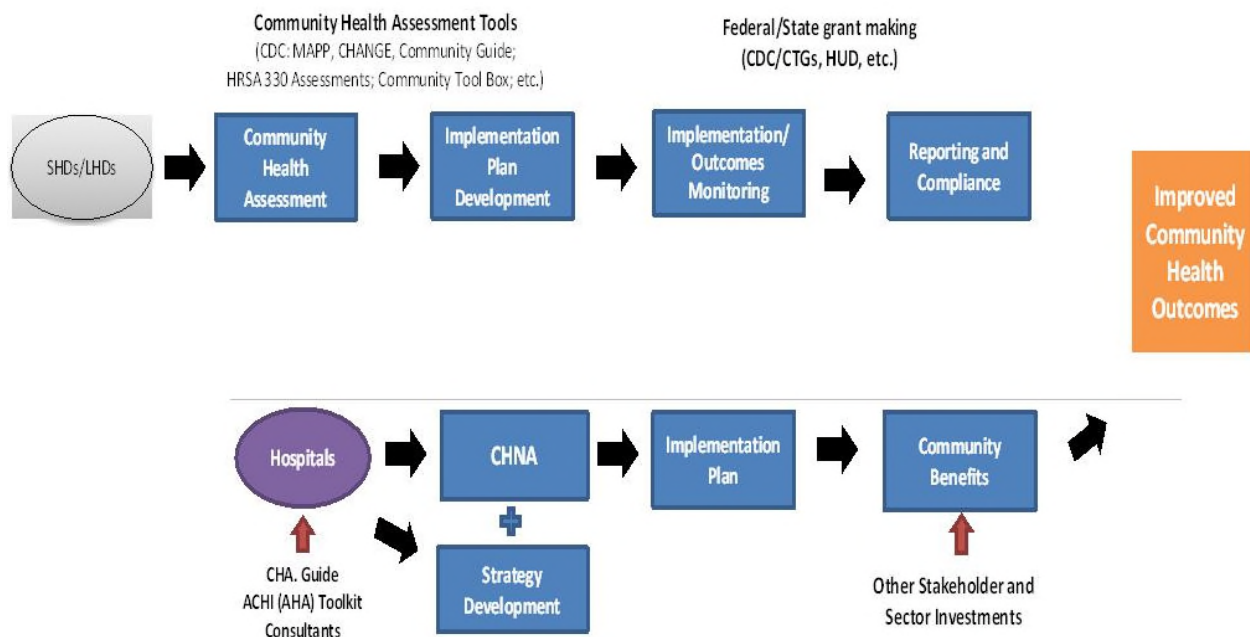
JOB #2: Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be "conducted" in the taxable year that the written report of the CHNA findings is made widely available to the public. The Notice also indicates that the IRS intends to pattern its rules for **making a CHNA "widely available to the public"** after the rules currently in effect for Form 990. Accordingly, an organization would make a **facility's written report** widely available by posting the final report on its website either in the form of (1) the report itself, in a readily accessible format or (2) a link to another organization's website, along with instructions for accessing the report on that website. *The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.*

JOB #3: Adopt an Implementation Strategy by Hospital

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. The Notice defines an “implementation strategy” as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it. A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

Great emphasis has been given to work hand-in-hand with leaders from hospitals, the state health department and the local health department. A common approach has been adopted to create the CHNA, leading to aligned implementation plans and community reporting.



IRS Notice 2011-52 Overview

Notice and Request for Comments Regarding the Community Health Needs Assessment Requirements for Tax-exempt Hospitals

Applicability of CHNA Requirements to “Hospital Organizations”

The CHNA requirements apply to “hospital organizations,” which are defined in Section 501(r) to include (1) organizations that operate one or more state-licensed hospital facilities, and (2) any other organization that the Treasury Secretary determines is providing hospital care as its principal function or basis for exemption.

How and When to Conduct a CHNA

Under Section 501(r), a hospital organization is required to conduct a CHNA for each of its hospital facilities once every three taxable years. ***The CHNA must take into account input from persons representing the community served by the hospital facility and must be made widely available to the public. The CHNA requirements are effective for taxable years beginning after March 23, 2012.*** As a result, a hospital organization with a June 30 fiscal year end must conduct an initial CHNA for each of its hospital facilities by June 30, 2013, either during the fiscal year ending June 30, 2013 or during either of the two previous fiscal years.

Determining the Community Served

A CHNA must identify and assess the health needs of the **community served** by the hospital facility. Although the Notice suggests that geographic location should be the primary basis for defining the community served, it provides that the organization may also take into account the target populations served by the facility (e.g., children, women, or the aged) and/or the facility’s principal functions (e.g., specialty area or targeted disease). *A hospital organization, however, will not be permitted to define the community served in a way that would effectively circumvent the CHNA requirements (e.g., by excluding medically underserved populations, low-income persons, minority groups, or those with chronic disease needs).*

Persons Representing the Community Served

Section 501(r) provides that a CHNA must take into account input from **persons who represent the broad interests of the community** served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: (1) government agencies with current information relevant to the health needs of the community and (2) representatives or members of medically underserved, low-income, and minority populations, and populations with chronic disease needs, in the community. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility’s defined community (e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc).

Required Documentation

The Notice provides that a hospital organization will be required to separately document the CHNA for each of its hospital facilities in a **written report** that includes the following information: 1) a description of the community served by the facility and how the community was determined; 2) a description of the process and methods used to conduct the CHNA; 3) the identity of any and all organizations with which the organization collaborated and third parties that it engaged to assist with the CHNA; 4) a description of how the organization considered the input of persons representing the community (e.g., through meetings, focus groups, interviews, etc.), who those persons are, and their qualifications; 5) a prioritized description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and 6) a description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be **“conducted”** in the taxable year that the written report of the CHNA findings is made **widely available to the public**. The Notice also indicates that the IRS intends to pattern its rules for making a CHNA “widely available to the public” after the rules currently in effect for Forms 990. *Accordingly, an organization would make a facility’s written report widely available by posting on its website either (1) the report itself, in a readily accessible format, or (2) a link to another organization’s website, along with instructions for accessing the report on that website. The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.*

How and When to Adopt an Implementation Strategy

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. **The Notice defines an “implementation strategy” as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need, or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it.** A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

Under the Notice, an implementation strategy is considered to be “adopted” on the date the strategy is approved by the organization’s board of directors or by a committee of the board or other parties legally authorized by the board to act on its behalf. Further, the formal adoption of the implementation strategy must occur by the end of the same taxable year in which the written report of the CHNA findings was made available to the public. For hospital organizations with a June 30 fiscal year end, that effectively means that the organization must complete and appropriately post its first CHNA no later than its fiscal year ending June 30, 2013, and formally adopt a related implementation strategy by the end of the same tax year. *This final requirement may come as a surprise to many charitable hospitals, considering Section 501(r) contains no deadline for the adoption of the implementation strategy.*

IRS and Treasury Finalize Patient Protection Rules for Tax-Exempt Hospitals

ACCOUNTING TODAY 1/2/15

The Internal Revenue Service and the Treasury Department have issued **final regulations** under the Affordable Care Act to protect patients in tax-exempt hospitals from aggressive debt collection practices and to provide other rules for charitable hospitals.

Under the **final regulations**, each Section 501(c)(3) hospital organization is required to meet four general requirements on a facility-by-facility basis: establish written financial assistance and emergency medical care policies; limit the amounts charged for emergency or other medically necessary care to individuals eligible for assistance under the hospital's financial assistance policy; make reasonable efforts to determine whether an individual is eligible for assistance under the hospital's financial assistance policy before engaging in extraordinary collection actions against the individual; and conduct a community health needs assessment, or CHNA, and adopt an implementation strategy at least once every three years. The first three requirements are effective for tax years beginning after March 23, 2010 and the CHNA requirements are effective for tax years beginning after March 23, 2012.

The ACA also added a new Section 4959, which imposes an excise tax for failure to meet the CHNA requirements, and added reporting requirements. These final regulations provide guidance on the entities that must meet these requirements, the reporting obligations relating to these requirements and the consequences for failing to satisfy the requirements.

"Charitable hospitals represent more than half of the nation's hospitals and play a key role in improving the health of the communities they serve," wrote Emily McMahon, Deputy Assistant Secretary for Tax Policy at the U.S. Department of the Treasury, in a blog post Monday explaining the requirements. "But reports that some charitable hospitals have used aggressive debt collection practices, including allowing debt collectors to pursue collections in emergency rooms, have highlighted the need for clear rules to protect patients. For hospitals to be tax-exempt, they should be held to a higher standard. That is why the Affordable Care Act included additional consumer protection requirements for charitable hospitals, so that patients are protected from abusive collections practices and have access to information about financial assistance at all tax-exempt hospitals."

She noted that as a condition of their tax-exempt status, charitable hospitals must take an active role in improving the health of the communities they serve, establish billing and collections protections for patients eligible for financial assistance, and provide patients with the information they need to apply for such assistance. "These final rules adopt the same framework of proposed regulations but simplify the compliance process for charitable hospitals, while continuing to provide meaningful guidance on protections for patients and requirements to assess community health needs," she added.

Under the new rules, hospitals cannot charge individuals eligible for financial assistance more for emergency or other medically necessary care than the amounts generally billed to patients with insurance (including Medicare, Medicaid, or private commercial insurance). In addition, every tax-exempt hospital must establish and widely publicize a financial assistance policy that clearly describes to patients the eligibility criteria for obtaining financial assistance and the method for applying for financial assistance.

Charitable hospitals are also prohibited from engaging in certain collection methods (for example, reporting a debt to a credit agency or garnishing wages) until they make reasonable efforts to determine whether an individual is eligible for assistance under the hospital's financial assistance policy.

In addition, each charitable hospital needs to conduct and publish a community health needs assessment at least once every three years and disclose on the tax form that it files on an annual basis the steps it is taking to address the health needs identified in the assessment.

Many of the requirements have been in place since the Affordable Care Act passed in 2010, but in response to comments on the proposed regulations, the final rules also expand access to translations for patients, by lowering the threshold for having translations of financial assistance policies available from 10 percent of the community served as proposed, to five percent of the community served or population expected to be encountered by the hospital facility, or 1000 persons, whichever is less, according to McMahon. "The final rules also revise the notification requirements to maintain important protections for patients while making it easier for hospitals to comply with them," she wrote. "General notifications regarding a hospital's financial assistance policy must appear on bills and in the hospital. However, individual written and oral notifications of the hospital's financial assistance policy are now only required when a hospital plans to use extraordinary collections actions, such as reporting a debt to a credit bureau, selling the debt to a third party or garnishing wages."

While charitable hospitals must continue to make a good-faith effort to comply, the rules provide charitable hospitals with time to fully update their policies and programming to implement the changes. But if a charitable hospital fails to meet the consumer protection provisions required by the law, the hospital could have its tax-exempt status revoked. If a hospital fails to properly conduct a community health needs assessment or adopt an implementation strategy, an excise tax will apply, McMahon noted. "However, if a hospital fails to meet a requirement, but the failure is neither willful nor egregious, the hospital can correct and publicly disclose the error to have it excused, thus avoiding revocation of tax-exempt status, but the excise tax would still apply," she wrote.

CHNA NEWS: IRS Makes First Revocation of Hospital Not-for-Profit Status Under 501(r)

RICH DALY, HFMA SENIOR WRITER/EDITOR

Aug. 15, 2017—Charity-care reporting requirements under the healthcare reform law may have gone into effect only last October, but already one hospital has lost its not-for-profit tax status as a result. The first-time tax-status revocation under Affordable Care Act (ACA) 501(r) requirements applied to a “dual-status” 501(c)(3) hospital operated by a “local county governmental agency” and was confirmed by a redacted copy of the [tax status letter](#), which was dated Feb. 14, 2017, and posted to the IRS website in August. Neither an IRS spokeswoman nor the redacted letter identified the hospital. Loss of the 501(c)(3) exemptions eliminates the ability of hospitals to use certain employee benefit plans; likely subjects hospitals to income, property, and other taxes; bars receipt of tax-deductible contributions; and disallows use of tax-exempt bonds.

The 501(r) requirements on performing community health needs assessments (CHNAs) and offering financial assistance became effective for tax years beginning on or after Dec. 29, 2015, meaning tax-exempt hospitals operating on the calendar had to be in compliance by Jan. 1, 2016, and those with a different fiscal-year end had to be in compliance by Oct. 1, 2016.

The only enforcement information previously released by the IRS was a June 2016 letter to Sen. Charles Grassley (R-Iowa), which noted that at that point the IRS had completed 2,482 compliance reviews under 501(r). Additionally, 163 hospitals were assigned for “examination” as a result of those compliance reviews, but no further actions were identified.

The ACA requires the IRS to review the community-benefit activities of about 3,000 tax-exempt hospitals at least once every three years. This was the first time that Keith Hearle, president, Verité Healthcare Consulting, LLC, Alexandria, Va., had heard of an instance in which a hospital lost its not-for-profit status over 501(r) requirements. He has heard of several others that incurred the \$50,000 excise tax for failing to meet the CHNA requirement.

“I would be surprised if it is a one-off,” said Hearle, who has been expecting more IRS enforcement after his own reviews indicated widespread hospital vulnerability due to poor compliance.

Reasons for Revocation

Hospital 501(r) requirements include:

- Conducting a CHNA at least once every three years
- Making the CHNA publicly available on a website
- Adopting an implementation strategy to meet the needs identified in the CHNA
- Adopting a financial assistance policy and publicizing the policy, including by posting it on a website
- Limiting the amounts charged to individuals who are eligible for financial assistance
- Making individuals aware of the financial assistance policy prior to engaging in certain collection actions

Among the reasons for the IRS action against the county government hospital was its finding that the hospital did not make the CHNA widely available to the public through a website, although it had paper copies available on request. “The hospital indicated to the IRS that it might have acted on some of the recommendations included in the Implementation Strategy Report, but that a separate written implementation policy was neither drafted nor adopted,” the IRS letter stated.

Officials at the small rural hospital said they lacked the staffing to comply with 501(r) requirements. They also said they “really did not need, actually have any use for, or want their tax-exempt status under Section 501(c)(3),” according to the IRS letter. The hospital believed its tax-exempt status somehow prevented its involvement in certain payment arrangements. It had maintained 501(c)(3) status “only in case any liabilities arose relating to the prior management company that had originally obtained that status from the IRS.”

The IRS deemed the hospital’s failure “egregious” because its leaders had “neither the will, the resources, nor the staff to follow through with the” 501(r) requirements.

Widespread Vulnerability

Industry advisers worry that many hospitals could be vulnerable to IRS enforcement—if not tax-status revocation—under the new requirements. “A lot of them just assume that what they have, in terms of policy and procedure, suffices under the final regulations and have not done a lot,” said Andrew Kloeckner, a partner for Omaha-based law firm Baird Holm.

Even hospitals that have taken steps to become compliant with the requirements can face downsides, including complications with their collection efforts, which in turn can delay cash flow, Kloeckner said.

Jan Smith, a tax senior manager in Crowe Horwath’s Healthcare practice, indicated that the likelihood of a similar penalty or the likelihood of this determination setting a precedent at other hospitals may be limited. This is due to the unusual position taken by the revoked hospital’s officials that they didn’t need or want charitable status (in addition to governmental status).

“If hospitals are making a good-faith effort to comply, I would be surprised if the IRS would revoke their tax status at this stage of 501(r) examinations,” Smith said in an interview. However, she is aware of several health systems that the IRS is seeking to penalize under the CHNA tax provision.

The IRS’s 501(r) compliance reviews include the agency’s analysis of hospital websites and “other information designed to identify the hospitals with the highest likelihood of non-compliance,” IRS Commissioner John Koskinen stated in his 2016 letter to Grassley.

Justin Lowe, senior manager with the Exempt Organizations Tax Practice at Ernst & Young, underscored that hospital websites are among the publicly available information that the IRS reviews. He urged hospitals to make sure that all required documents, including the CHNA and financial assistance policy, are on the website and easily findable. Insufficient approaches to 501(r) compliance, Kloeckner said, include instances when hospitals purchase financial assistance policy templates that are provided by a consultant and not submitted for legal review, potentially leaving audit vulnerabilities. Kloeckner also urged attention on practices and procedures outside of the policies.

Small government-operated hospitals are among the most vulnerable to enforcement, Hearle said, because they may not be required to file Form 990, which provides reminders about 501(r) compliance requirements. “It’s a group of hospitals I’m concerned about,” Hearle said.

Among the financial assistance requirements with which hospitals are most likely to struggle, Hearle said, is making available lists of physicians who are associated with the hospital and who utilize the same charity care policies.

“Patients obtaining charity care from a hospital want to find physician groups through which they can get the same charity care, as opposed to some group that doesn’t offer charity care,” Hearle said.

Public Health Criteria:

Domain 1: Conduct and disseminate assessments focused on population health status and public health issues facing the community.

Domain 1 focuses on the assessment of the health of the population in the jurisdiction served by the health department. The domain includes: systematic monitoring of health status; collection, analysis, and dissemination of data; use of data to inform public health policies, processes, and interventions; and participation in a process for the development of a shared, comprehensive health assessment of the community.

DOMAIN 1 includes 4 STANDARDS:

- **Standard 1.1** - Participate in or Conduct a Collaborative Process Resulting in a Comprehensive Community Health Assessment
- **Standard 1.2** - Collect and Maintain Reliable, Comparable, and Valid Data That Provide Information on Conditions of Public Health Importance and on the Health Status of the Population
- **Standard 1.3** - Analyze Public Health Data to Identify Trends in Health Problems, Environmental Public Health Hazards, and Social and Economic Factors That Affect the Public's Health
- **Standard 1.4** - Provide and Use the Results of Health Data Analysis to Develop Recommendations Regarding Public Health Policy, Processes, Programs, or Interventions

Required CHNA Planning Process Requirements:

- a. Participation by a wide range of community partners.
- b. Data / information provided to participants in CHNA planning process.
- c. Evidence of community / stakeholder discussions to identify issues & themes. Community definition of a "healthy community" included along with list of issues.
- d. Community assets & resources identified.
- e. A description of CHNA process used to set priority health issues.

Seven Steps of Public Health Department Accreditation (PHAB):

1. Pre-Application
2. Application
3. Document Selection and Submission
4. Site Visit
5. Accreditation Decision
6. Reports
7. Reaccreditation

II. Methodology

b) Collaborating CHNA Parties

Working together to improve community health takes collaboration. Listed below is an in-depth profile of the local hospital and Health Department CHNA partners:

Citizens Health. Profile

100 E. College Dr, Colby, KS, 67701
Chief Executive Officer: Greg Unruh

Our Story: At Citizens Health (CH) our mission is “ Enhancing the Lives of Those We Serve.” The over 380 employees of CH including our doctors, nurse practitioners, physician assistants, nurses, technicians, therapists, and other professionals are dedicated to this mission every day. CH is composed of Citizens Medical Center, Family Center for Health Care, Prairie Senior, and the Citizens Foundation. We all work together to ensure that the care you receive is the best it can be, from first encounter to last. That’s what it takes to be your choice for health care.

Citizens Health provides emergency services, acute care nursing, swing bed nursing, obstetrics, rehabilitative, and many other specialty services. Our patients can receive care in our Specialty Clinic from medical specialists from across the region in a broad range of medical specialties.

We provide the health care services you need by continually assessing our capabilities and updating or expanding our services as needs are identified. In the past this has required: expanding the Family Center for Health Care complex, upgrading our radiology department with a new CT scanner, and adding MRI, Nuclear Medicine, and Mammography capabilities. In the future it will lead to the expansion of our services as we add new obstetric, family medicine, and surgical capabilities.

We will strive to constantly improve the care you receive. Our commitment is to provide you with the high-quality health care you need now and in the future.

Mission Statement: Enhancing the Lives of Those We Serve

Vision: Citizens Health is the people’s choice as a provider of care, place to work and partner for regional growth. Our financial health supports keeping pace with an ever-changing healthcare environment. Our reputation of quality and caring continuously strengthens our relationships with the communities we serve. Every choice made and action taken during the life of this vision helps achieve our mission.

Services: We think it is important to provide you with the most advanced, extensive, timely, and compassionate care possible. That is why we continue to keep abreast of medical advances; to provide you with a full range of family practice and obstetrical services. The following summarizes our most frequently provided services and is not meant to be an exhaustive list of the full scope of our services. It is meant to provide you with a sample of the range of services available. If you have questions about a particular service, please speak with your health care provider for assistance and to receive a more thorough explanation or call us at (785) 462-6184.

- Adolescent Health
 - Adolescent Health Maintenance, Cervical Cancer Prevention, Birth Control, Sports Physicals, Sports Medicine
- Aesthetic & Cosmetic Medicine
 - Botx, Restylane, Radiesse, Chemical Peels, PCA Products, Navel Piercing
- Chronic Disease Management
- Geriatrics
 - Welcome to Medicare, Annual Wellness Exam, Nursing Home Program
- Immunizations
 - Immunization Schedule, Vaccines for Children Program, Adult Vaccination, Flu, Pneumococcal, Tetanus & Pertussis, Travel
- Men's Health
 - Men's Preventative Health, Prostate Health, Colonoscopy, Vasectomy
- Obstetrics
- Occupational Medicine
 - Employment Physicals, Physical Capacity Profile, Worker's Compensation, DOT Physicals, Drug Testing, Flu Shots, Health Promotion
- Osteopathic Manipulative Treatment
- Pediatrics
 - ADD/ADHD, Allergies, Asthma, Ear Infections, Schools Physicals, Health Wave, Well Child Check/Kan Be Healthy
- Surgical Services
- Weight Loss
- Women's Health
 - Women's Annual Exams, Sexually Transmitted Diseases, Mammograms, Bone Densitometry (DEXA), Hormone Replacement Therapy, Birth Control
- Other Services
 - Dermatology, Earwax Removal, Electrocardiogram, Fracture Care, Laceration Repair, Hearing and Vision Screenings, IV Therapy, Pulmonary Function Test

Thomas County Health Department Profile

350 S. Range Ave., Ste. #2, Colby, KS, 67701

Administrator: Kasiah Rothchild

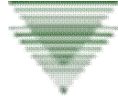
The Thomas County Health Department is open Monday through Friday from 8:00 am to 5:00 pm. Thomas County Health Department also has the Breastfeeding Boutique that offers breastfeeding supplies (bras, breast pumps, Bellaband, Maya wraps, milk storage, pillows, bracelets, and other baby items) for rent and purchase. The goal is to enhance mother's breastfeeding experience. In 2011 the Health Department offered a seasonal Flu Clinic to provide the vaccination in either injection or flu mist forms. The health department also offers WIC services through the Sherman County Health Department.

Thomas County Health Department offers the following services:

- Immunizations
- TB Skin Test
- Health Preparedness
- Physicals (School, Daycare)
- KanBe Healthy Program
- Hearing/Vision Screen
- Lab Work
- Family Planning
- RN & APRN Physicals
- Pap Smear
- Birth Control
- Pregnancy Testing
- HIV/STD's Check
- Maternal and Infant Program
- Lactation Classes
- Lactation Room Available for Mothers Who Need to Nurse
- Programs
 - Immunization, Public Health Preparedness, Maternal and Infant Program, Chronic Disease Risk Reduction, Family Planning

II. Methodology

b) Collaborating CHNA Parties Continued



Consultant Qualifications VVV Research & Development LLC

Company Profile: 601 N. Mahaffie, Olathe, KS 66061 (913) 302-7264

Vince Vandehaar MBA, Principal Consultant & Adjunct (913) 302-7264
VVV@VandehaarMarketing.com

Vince provides professional business consulting services to help healthcare organizations with business strategy, research and development. Specifically, Vince facilitates strategic planning, creates proven marketing plans/tactics, prepares IRS aligned community health needs assessments and conducts both qualitative and quantitative market research studies.

Vince started his consulting firm (VVV Research & Development LLC) on 1/1/2009, after working for Saint Luke's Health System of Kansas City for 16 years. (Note: Saint Luke's Hospital of KC, SLHS's largest hospital, won the Malcolm Baldrige National Quality Award in March of 2003). Prior to his experience at Saint Luke's, Vince worked in the payor and insurance industry for Blue Cross and Blue Shield of Kansas City; Tillinghast, a Tower's Perrin Actuarial Consulting Firm; and Lutheran Mutual Life Insurance Company.

Vince also is an Adjunct Professor teaching BA, MBA & MHA classes part time 20% of his time at Avila, Rockhurst and/or Webster University (Strategic Planning, Marketing, MHA Capstone, Marketing Research, Sales & Social Media classes) and consults the remainder of his time.

Vince is a Malcolm Baldrige coach and a professional focus group moderator. He is actively involved in the national Society for Healthcare Strategy & Market Development (SHSMD), KHA/MHA Marketing Associations, KC Employee Benefit Professional Association, Healthcare Executives Kansas City, the American Marketing Association KC Chapter and is a SG2 advocate.

Collaborating Support:

Cassandra Kahl BHS
Associate Consultant

II. Methodology

c) CHNA Research Process

Wave #3 Community Health Needs Assessment (CHNA) process began early 2018 as follows:

Partnered w/ Judy Johnston with the KU research department to conduct CHNA / requested VVV Research & Development (Olathe) to prepare IRS aligned CHNA report.

Conducted Perception Survey looking at 8 sectors (Health Care, Public Health, Worksites, Daycare/Preschool, Schools, Faith Communities, K-State Research & Extension, Community Environment). Note: A total of 1,442 surveys were collected and 18 Focus groups were held to review the most wanted resources in the different sectors.


Reviewed survey & focus group results along with community data & developed top themes.

Validate hospital Primary Service Area - meets the 80-20 Patient Origin Rule.

Uncover / document basic secondary research county health data, organized by 10 tabs.

Prepare & publish CHNA report which meets ACA requirements.

To ensure proper PSA Town Hall representation (that meets the 80-20 Patient Origin Rule), a patient origin three-year summary was generated documenting patient draw by zips as seen below:

 Define PSA - Citizens Health - ZIP Detail							
ZIP	County	Tot IP #Yr	%	Accum	IP2018	IP2017	IP2016
67701-Colby, KS	Thomas	972	62.3%	62.3%	392	258	322
67732-Brewster, KS	Thomas	70	4.5%	66.8%	28	19	23
67753-Rexford, KS	Thomas	62	4.0%	70.7%	28	21	13
67743-Levant, KS	Thomas	46	2.9%	73.7%	19	9	18
67734-Gem, KS	Thomas	11	0.7%	74.4%	2	3	6
67748-Oakley, KS	Logan	62	4.0%	78.3%	32	20	10
67730-Atwood, KS	Rawlins	39	2.5%	80.8%	20	9	10
Overall total		1,561			637	442	482

Year 2018 CHNA Citizen Health Focus Group Schedule (N=135)				
DATE	SECTOR	TIME	Attend	LOCATION
Wednesday, March 20th	Child Care/Pre-School	7:30-9am	9	CMC Board Room *breakfast
Denise Juenemann	Keesa Mariman	Megan		Kendra Glassman
Julie Ross (CHS)	Travis Rickford	Emily		Ashleigh Bustillos -KP
Paul Steele				
Wednesday, March 20th	Healthcare	1-2:30p	10	CMC Board Room
Scott Focke	Rhonda Barton	Megan		Rhonda McLaughlin
Therese Cook	Amanda Lange	Emily		Travis Rickford
Sheryl	Maureen			
Thursday, March 21st	Worksite	7-8:30am	7	CMC Board Room *breakfast
Misty	Rhonda McLaughlin	Megan		Tanya Grubb
Erin Gitau	Lon	Melinda		
Thursday, March 21st	Th.Co. Extension	10-11:30am	6	Pioneer Memorial Library basement
Misty	Daryl Walden	Megan		Sheryl
Virginia Hopper	Jenny Niblock			
Thursday, March 21st	Faith	1:30-3pm	13	CMC Board Room
Misty	Patrick Broz: with Abby	Megan		Abby Caseman
Jacee Dobbs	Steve Todd	Sheryl		Melinda
Darlene Lindskog	Kirby	James		Tanya Grubb
Sue Evans				
Friday, March 22nd	Behavioral Health	8-9:30am	12	CMC Board Room *breakfast
Therese Cook	Jake Reinert	Janet Saddler		Rod Williams
Misty	Karen Sullivan	Megan		Tanya
Brandi Wark				
Friday, March 22nd	Schools	12-1:30pm	12	CMC Board Room *lunch
Katina Brenn	Denise Juenemann	Megan		Jenessa Elling: 443-2229
Misty	Rhonda McLaughlin	Brandi Wark		Kathy KO
Terrel Harrison	Kassandra Spalding	Virginia H.		Tonya Winger
Monday, March 25th	Healthcare	1:30-3pm	6	CMC Conference Room
Emily	Lon	Megan		Joan Brighton
Vernon Schwanke	Tanya Grubb			
Monday, March 25th	Community Env.	4-5:30pm	5	CMC Board Room
Emily	Sheryl	Megan		Joan Brighton
Tanya Grubb				
Monday, March 25th	Childcare/Pre-School	6-7:30pm	9	CMC Board Room *dinner
Emily	Chris Gardner (CHS)	Megan		Kathy KO
Kassandra Spalding	Tonya Winger	Kelsi Janzen		Shannon Reilley
Carrie Starns				
Tuesday, March 26th	Community Env.	8-9:30am	4	CMC Board Room *breakfast
Misty	Rhonda McLaughlin	Megan		Tim Hansen
Tuesday, March 26th	Faith	10-11:30am	6	CMC Board Room
Misty	Linda Pabst	Megan		Rich Daise (Sacred Heart)
Joan Brighton	Tonya Winger			
Tuesday, March 26th	Public Health	2-3:30pm	9	CMC Board Room
Emily	Lisa Stoll	Megan		Monique Cheatum
Morgan Boeugher	Kendra Glassman	Sheryl		Joan Brighton
	Jenny Niblock			
Tuesday, March 26th	Schools	4-5:30pm	7	CMC Board Room
Emily	Katina Brenn	Megan		Jacee Dobbs
Kelsi Janzen	Stephanie McNemar	James		
Wednesday, March 27th	Tho. Co. Research & Ex.	8-9:30am	3	CMC Board Room *breakfast
Emily		Megan		Sheryl
Wednesday, March 27th	Worksite	10-11:30am	4	CMC Board Room
Misty	Travis Rickford	Megan		Joan Brighton
Wednesday, March 27th	Cross-Sector Behavioral	12-1:30pm	13	CMC Conference Room
Misty	Travis Rickford	Megan		Scott Focke
Maureen	Joan Brighton	Jacy Moss		Ashleigh Bustillos -KP
James	Mandy Lanning	Karen Sullivan		Elaine Ptakek
Booke Jones				

Community Health Needs Assessment
Meeting Agenda
May 29th – May 30th, 2018

Tuesday, May 29, 2018

Time	Meeting	Location	Topic	Attendees
12:00 P.M. - 4:00 P.M. <i>(lunch will be served in the cafeteria)</i>	Project Management Team	CMC Board Room	Review: Job description, survey tool, set timeline	5

Wednesday, May 30, 2018

Time	Meeting	Location	Topic	Attendees
8:00 A.M. - 9:00 A.M. <i>(light snacks will be provided)</i>	Thomas County Collaborators	CMC Board Room	Recruitment of volunteers, review survey, identify opportunities for administering tool	15
9:00 A.M. – 10:00 A.M.	Executive Meeting	CMC Board Room	Follow up to previous meetings, provide general information and updates	11
12:15 P.M. – 1:15 P.M. <i>(lunch will be catered in)</i>	Provider Meeting	FCHC Educ. Room	Review overall program and how it will be implemented	25

Locations:

Citizens Medical Center (CMC)
100 E. College Drive
Colby, KS 67701

Family Center for Health Care (FCHC)
310 E. College Drive
Colby, KS 67701

To meet IRS aligned CHNA requirements and meet Public Health accreditation criteria stated earlier, a four-phase methodology was followed:

Phase I—Discovery:

Conduct a 30-minute conference call with the CHNA county health department and hospital clients. Review / confirm CHNA calendar of events, explain / coach clients to complete required participant database and schedule / organize all Phase II activities.

Phase II—Qualify Community Need:

A) Conduct secondary research to uncover the following historical community health status for the primary service area. Use Kansas Hospital Association (KHA), Vital Statistics, Robert Wood Johnson Foundation: County Health Rankings, etc. to document current state of county health organized as follows:

TAB 1. Demographic Profile
TAB 2. Economic/Business Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospitalization / Providers Profile
TAB 6. Behavioral Health Profile
TAB 7. Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

B) Gather primary research (stakeholder feedback) to uncover public health needs, practices, and perceptions for primary service areas.

Phase III—Quantify Community Need:

Conduct 17 Thomas County area focus group sessions (90-minute) with required community primary service area residents. At focus group session, CHNA secondary data was reviewed, and discussed to determine the most important community health needs to focus on to improve community health access and quality of care.

Phase IV—Complete Data Analysis and Create Comprehensive Community Health Needs Assessment:

Post CHNA report findings to meet both PHAB and IRS CHNA criteria.

Detail CHNA Development Steps Include:

Development Steps to Create Comprehensive Community Health Needs Assessment	
Step # 1 Commitment	<i>Determine interest level of area healthcare leaders (Hospital, Health Dept., Mental Health Centers, schools, churches, physicians etc.), prepare project quote.</i>
Step # 2 Planning	<i>Prepare brief CHNA Project Work Calendar - list goals, objectives, purpose, outcome, roles, community involvement, etc. Hold community kick-off meeting.</i>
Step # 3 Secondary Research	<i>Collect and report community health published facts. Gather data health practice data from published secondary research sources (i.e. census, county health records, behavioral risk factors surveillance, etc.)</i>
Step # 4a Primary Research - Town Hall prep	<i>Collect community opinions. (quantitative research). Gather stakeholders / community opinions regarding community health needs and healthcare practices.</i>
Step # 4b Primary Research - Conduct Town Hall	<i>Conduct "Conversation with Community" Town Hall (qualitative research). Review secondary & primary data findings. Facilitate community conversation to build consensus; discuss opinions / identify health needs.</i>
Steps # 5 Reporting	<i>Prepare and present comprehensive CHNA report (to community leaders), facilitate development of CHNA Implementation Plan (actions to improve health). (Note: formal report will follow IRS Notice 2011-52 regs & PHAB requirements.)</i>
VVV Consultants, LLC Olathe, KS (913) 302-7264	

COMMUNITY HEALTH NEEDS ASSESMENT AGENDA

- Introductions
- Data Parameters
- CHNA Overview
- Theme Overview & Discussion
- Review top priorities

1

DATA PARAMETERS

- Access
- Distribution
- Collaboration
- Partnerships

**Community Health Needs Assessment
Data Request Form**

Please print a copy of this form and submit it to the KU research department and community engagement department.

Name: _____ Date: _____

Organization: _____

Data Requested (please mark all that apply):

<input type="checkbox"/> Complete Thomas County Community Assessment Data Report	
<input type="checkbox"/> Survey Demographic Information	<input type="checkbox"/> Public Health Sector
<input type="checkbox"/> Health & Wellness Beliefs	<input type="checkbox"/> Disease/Prevention Sector
<input type="checkbox"/> Healthcare Sector	<input type="checkbox"/> Faith Communities Sector
<input type="checkbox"/> Workplaces Sector	<input type="checkbox"/> Community Engagement Sector
<input type="checkbox"/> Schools Sector	
Focus Group Reports:	
<input type="checkbox"/> Healthcare Focus Group	<input type="checkbox"/> Public Health Focus Group
<input type="checkbox"/> Workplaces Focus Group	<input type="checkbox"/> Disease/Prevention Focus Group
<input type="checkbox"/> Schools Focus Group	<input type="checkbox"/> Faith Focus Group
<input type="checkbox"/> Community Engagement Focus Group	<input type="checkbox"/> Behavioral Health Focus Group
<input type="checkbox"/> K-State Research & Extension Focus Group	

Please describe the purpose for the data request including collaborations or partners involved (if any, email, report, etc.).

2

CHNA OVERVIEW

Past

- Partnered w/ Judy Johnston with the KU research department to conduct CHNA
- Conducted Perception Survey looking at 8 sectors (Health Care, Public Health, Worksites, Daycare/Preschool, Schools, Faith Communities, K-State Research & Extension, Community Environment)
- A total of 1,442 surveys were collected
- 18 Focus groups were held to review the most wanted resources in the different sectors (Cross-Sector Behavioral added)
- Reviewed survey & focus group results along with community data & developed top themes

Present

- Review top themes, identify solutions

Future

- Develop Implementation Plan, identify: Lead, Partners, & Timeframe

3

THEME OVERVIEW

- Behavioral / Mental Health
- Prevention / Education
- Collaboration / Communication
- Community Engagement

4

DATA

- Mental Health Providers rate:
 - 2015: 176 providers per 100,000 population
 - 2019: 128 providers per 100,000 population
 - Kansas: 2019-188 providers per 100,000 population
- Renters spending 30% or more of household income on rent:
 - 2013-2016: 43.6%
 - Previously: 32.3%
 - Kansas: 44.1%
- Social and Economic factors ranking: 15th in the state
 - Trend is going down: 5th in 2018
 - School graduation rates are down
 - Injury death rate is increasing

5

More data

- Suicide Mortality rate:
 - 23.1 deaths per 100,000 population (2009-2011)
 - Previous value: 27.92 deaths per 100,000 population
 - Kansas: 17.6 deaths per 100,000 population
- Percent Medicare Part D claims with opioid prescriptions written for more than 10-day supply
 - 73.0 % (2017)
 - Prior: 68.2%
 - Kansas: 71.0%

6

BEHAVIORAL / MENTAL HEALTH

- Emotional well-being support
- Employee Assistance Program (EAP)
- Behavioral health services
- Psychological testing & counseling

7

DISCUSSION

- What is missing
- Group discussion: list ideas or solutions to address the wanted resource **(5 minutes)**
- Choose a spokesperson to report on the tables top 3 priorities and solutions

8

Data X 2

- Sexually Transmitted Infections rate:
 - 2015: 227 per 100,000 people
 - 2019: 240 per 100,000 people
 - Kansas: 418 per 100,000 people
- Percent of Obese adults over the age of 20 and older:
 - 2015: 31%
 - 2019: 35%
 - Kansas: 33%
- Infant mortality rate:
 - 14.6 deaths per 1,000 live births (2008-2012)
 - Previously: 15.0
 - Kansas: 6.6

9

PREVENTION / EDUCATION

- Dementia/Alzheimer
- Chronic disease self-management
- Weight management
- Classes on health topics
- Health education in daycares & schools
- Smoking cessation
- Health Screenings

10

DISCUSSION

- What is missing
- Group discussion: list ideas or solutions to address the wanted resource (**5 minutes**)
- Choose a spokesperson to report on the tables top 3 priorities and solutions

11

COLLABORATION / COMMUNICATION / EDUCATION

Successful Collaboration & Communication Platforms

- Becoming A Mom® class
- Thomas County Coalition
- TCC listserv
- Colby Chamber of Commerce listserv
- TCC, Health Department, Citizens Health Facebook

12

DISCUSSION

- What is missing
- Group discussion: list ideas or solutions to address the wanted resource **(5 minutes)**
- Choose a spokesperson to report on the tables top 3 priorities and solutions

13

COMMUNITY ENGAGEMENT

- Gardening activities (daycare/preschool & faith)
- Walking School Bus (schools)
- Camping facilities (community)
- Biking / Walking trails (community)

14

DISCUSSION

- What is missing
- Group discussion: list ideas or solutions to address the wanted resource **(5 minutes)**
- Choose a spokesperson to report on the tables top 3 priorities and solutions

15

Review

- Top priorities

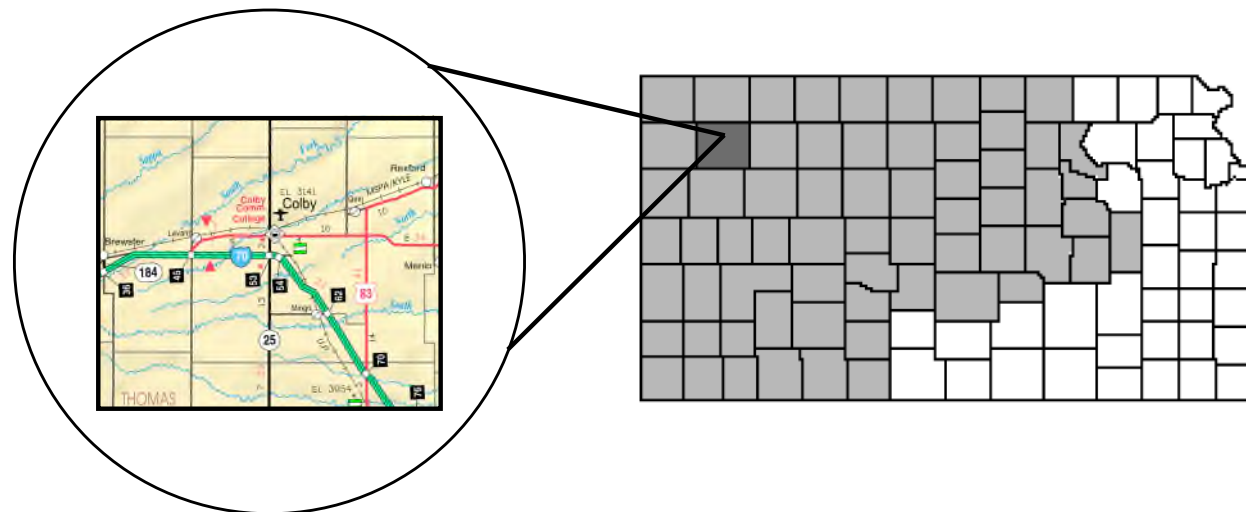
**WHAT'S
NEXT?**

16

-II. Methodology

d) Community Profile (A Description of Community Served)

Thomas County Community Profile



Demographics

The population of Thomas County was estimated to be 7,877 citizens in 2015, and had a -0.06% change in population from 2010 – 2015. The county has an overall population density of 7.0 persons per square mile.¹ The county covers 1,074.7 square miles and this area includes the Prairie Museum of Art & History, Cooper Barn, the Thomas County Courthouse, and the Northwest Research and Experiment Center². The county is located in northwest Kansas and agriculture, forestry, fishing, hunting, and mining, wholesale trade, educational, health and social services, professional, scientific, management, administrative and waste management services are the most common industries in its economy³. The county was founded in 1885 and the county seat is Colby.

The major highway transportation access to Thomas County is U.S. interstate 70, which runs from the southeast corner through the center of the county in an east-west direction. Kansas highways 83 and 25 run north–south through the county, and Kansas Highway 24 runs east–west.

¹ <http://kansas.hometownlocator.com/ks/thomas/>

² <http://oasisontheplains.com/beourquest/attractions-a-recreation>

³ http://www.city-data.com/county/Thomas_County-KS.html

Thomas County, KS Airports⁴

Name	USGS Topo Map
Hutton Airport	Brewster SE
Murray Airport	Colby

Schools in Thomas County⁵

Name	Level
Brewster Elem	Primary
Brewster High	High
Colby Elem	Primary
Colby Middle School	Middle
Colby Senior High	High
Golden Plains High	High
Golden Plains Middle	Middle
Thomas County Academy	Other/Ungraded

⁴ <http://kansas.hometownlocator.com/features/historical,class,airport,scfips,20193.cfm>

⁵ <http://kansas.hometownlocator.com/schools/sorted-by-county,n,thomas.cfm>

Thomas County KS- Detail Demographic Profile 2018

ZIP	NAME	County	Population:			Households		HH	Per Capita
			Yr2018	Yr2023	Chg	Yr2018	Yr2023	Avg Size	Yr2018
67701	Colby	THOMAS	6,463	6,477	0.2%	2,612	2,614	2.3	\$27,050
67732	Brewster	THOMAS	463	462	-0.2%	184	183	2.5	\$31,254
67734	Gem	THOMAS	148	151	2.0%	59	60	2.5	\$28,117
67743	Levant	THOMAS	123	123	0.0%	57	57	2.2	\$36,449
67753	Rexford	THOMAS	528	536	1.5%	199	201	2.7	\$27,376
Totals			7,725	7,749	0.3%	3,111	3,115	2.4	\$30,049

ZIP	NAME	County	YR 2018	Pop65+	KIDS<18	GenY	YR 2018	Females	
			HHYr2018				MEDAGE	Total 18	# Age20_35
67701	Colby	THOMAS	2612	1179	1691	1752	36.9	3308	852
67732	Brewster	THOMAS	184	86	115	101	43.7	220	44
67734	Gem	THOMAS	59	24	38	30	43.3	73	14
67743	Levant	THOMAS	57	23	30	27	43.8	58	12
67753	Rexford	THOMAS	199	97	134	106	43.9	254	48
Totals			3,111	1,409	2,008	2,016	212	3,913	970

ZIP	NAME	County	Population 2018:				Med Inc	HH 2023	HH \$50K+
			White	Black	Amer IN	Hisp	HH 18		
67701	Colby	THOMAS	6,038	62	36	340	\$49,110	2,614	1,290
67732	Brewster	THOMAS	437	0	5	25	\$56,661	183	102
67734	Gem	THOMAS	133	0	1	13	\$53,644	60	34
67743	Levant	THOMAS	117	0	1	7	\$57,641	57	32
67753	Rexford	THOMAS	476	1	3	37	\$61,094	199	102
Totals			7,201	63	46	422	\$55,630	3,113	1,560

Source: ERSA Demographics

III. Community Health Status

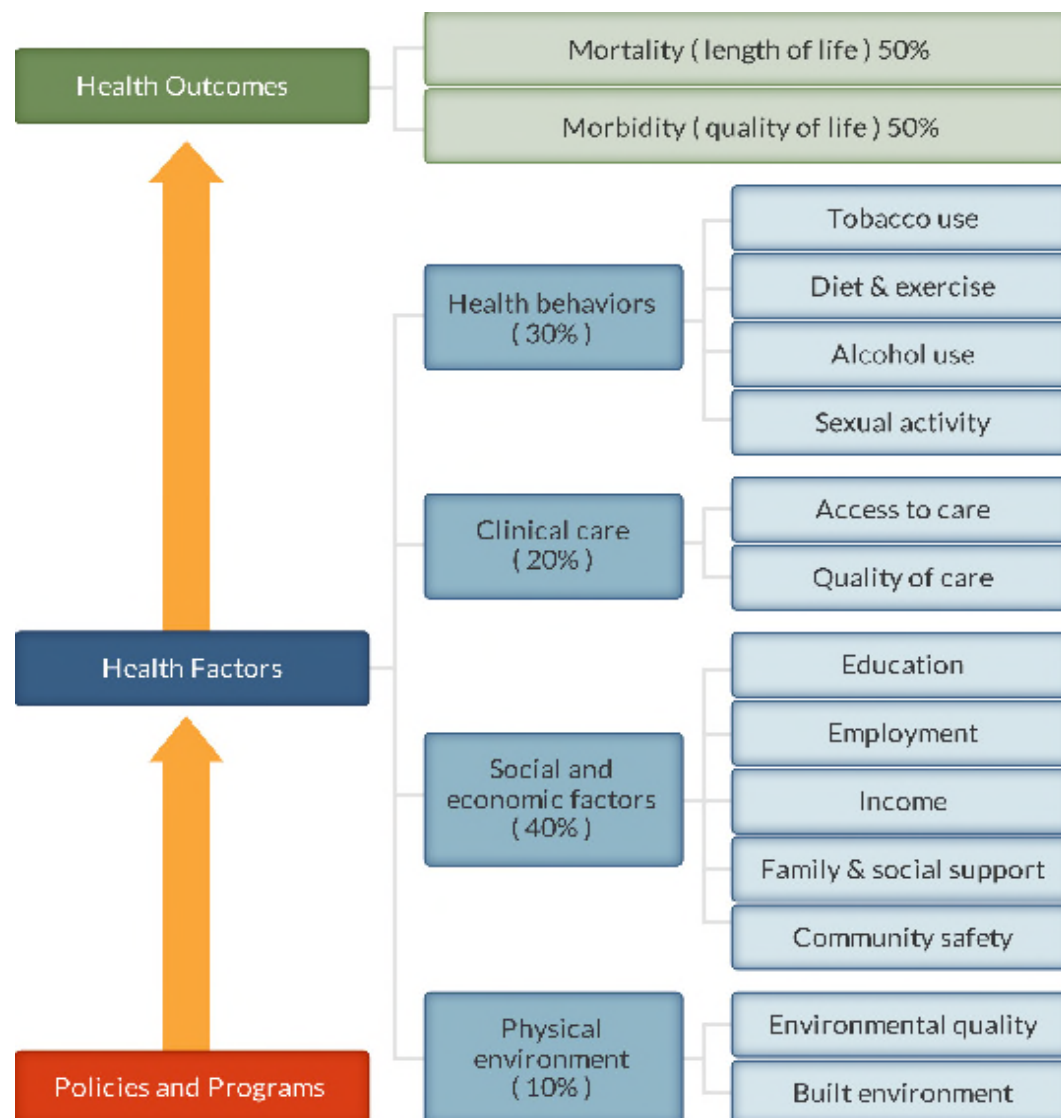
[VVV Research & Development, LLC]

III. Community Health Status

a) Historical Health Statistics

Health Status Profile

This section of the CHNA reviews published quantitative community health indicators. VVV Consultants staff analyzed data from multiple sources. This analysis focuses on a set of published health indicators organized by ten areas of focus (10 TABS) and results from the 2018 County Health Rankings. (Note: The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to release annual *County Health Rankings*. As seen below in model, these rankings are based on a number of health factors).



County Health Rankings model ©2012 UWPHI

Secondary Research

2018 State Health Rankings for Thomas County, KS

County Health Rankings 2017 - RWJ Univ of WI					
#	KS Rankings - 105 Counties	Definitions	Thomas Co KS	TREND	KS RURAL NORM (N=14)
1	Health Outcomes		6		52
2	Mortality	Length of Life	5		50
3	Morbidity	Quality of Life	18		57
4	Health Factors		14		40
5	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	40		47
6	Clinical Care	Access to care / Quality of Care	36		55
7	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	6		36
8	Physical Environment	Environmental quality	29		36
http://www.countyhealthrankings.org, released 2017					
Kansas Rural Norm (N=14) includes the following counties: Cheyenne, Barton, Edwards, Ellis, Gove, Kiowa, Norton, Osborne, Pawnee, Phillips, Russell, Sheridan, Smith and Thomas.					

2014 State Health Rankings for Thomas County, KS

#	Kansas 2015 County Health Rankings (105 counties)	Definitions	THOMAS CO 2015	TREND	NW Alliance (12)
1	Physical Environment	Environmental quality	48		50
2	Health Factors		9		26
2a	Clinical Care	Access to care / Quality of Care	52		41
2b	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	12		29
3	Health Outcomes		73		44
3a	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	7		34
3b	Morbidity	Quality of life	44		48
3c	Mortality	Length of life	87		42
OVERALL RANK			73		44
NW KS Norms include the following 12 counties: Barton, Ellis, Gove, Kiowa, Norton, Osborne, Pawnee, Phillips, Russell, Sheridan, Smith and Thomas					
http://www.countyhealthrankings.org					

When considering the state of community health, it's important to review published health data by topic area. Below is a summary of key TABS of information collected:

Tab 1 Demographic Profile

Tab	2018 Health Indicator	Thomas Co 2018	Trend	State of KS	KS Rural Norm (N=14)	Source
1a	a Population estimates, July 1, 2016, (V2016)	7,892		2,907,289	7,762	People Quick Facts
	b Population, percent change - April 1, 2010 (estimates base) to July 1, 2016, (V2016)	-0.10%		1.9%	-2.7%	People Quick Facts
	c Population, Census, April 1, 2010	7,900		2,853,118	7,897	People Quick Facts
	d Persons under 5 years, percent, July 1, 2016, (V2016)	7.2%		6.7%	5.8%	People Quick Facts
	e Persons under 18 years, percent, July 1, 2016, (V2016)	23.2%		24.6%	21.8%	People Quick Facts
	f Persons 65 years and over, percent, July 1, 2016, (V2016)	16.0%		15.0%	21.4%	People Quick Facts
	g Female persons, percent, July 1, 2016, (V2016)	51.3%		50.2%	49.2%	People Quick Facts
	h White alone, percent, July 1, 2016, (V2016)	95.9%		86.6%	95.6%	People Quick Facts
	i Black or African American alone, percent, July 1, 2016, (V2016)	0.8%		6.2%	1.3%	People Quick Facts
	j Hispanic or Latino, percent, July 1, 2016, (V2016)	5.4%		11.6%	6.5%	People Quick Facts
	k Foreign born persons, percent, 2011-2015	1.8%		6.9%	3.0%	People Quick Facts
	l Language other than English spoken at home, percent of persons age 5 years+, 2011-2015	2.5%		11.3%	5.7%	People Quick Facts
	m Living in same house 1 year ago, percent of persons age 1 year+, 2011-2015	83.8%		83.5%	86.9%	People Quick Facts

Tab	2018 Health Indicator	Thomas Co 2018	Trend	State of KS	KS Rural Norm (N=14)	Source
1b	a Total Veterans, 2011-2015	464		198,396	567	People Quick Facts
	b Population per square mile, 2012	7		34.9	8.9	Geography Quick Facts
	c Children in single-parent households, percent, 2011-2015	22.0%		29.0%	25.1%	County Health Rankings
	d Persons in poverty, percent	10.9%		12.1%	12.2%	People Quick Facts
	e Limited access to healthy foods, percent, 2010	8.0%		8.0%	16.9%	County Health Rankings

Tab 2 Economic Profiles

Tab		2018 Health Indicator	Thomas Co 2018	Trend	State of KS	KS Rural Norm (N=14)	Source
2	a	Per capita income in past 12 months (in 2015 dollars), 2011-2015	\$26,309		\$27,706	\$25,839	People Quick Facts
	b	Total Housing units, July 1, 2016, (V2016)	\$3,588		1,259,864	3,818	People Quick Facts
	c	Total Persons per household, 2011-2015	2.4		2.5	2.2	People Quick Facts
	d	Severe housing problems, percent, 2009-2013	9.0%		14.0%	9.4%	County Health Rankings
	e	Total retail sales per capita, 2012 (c)	\$29,409		\$13,263	\$15,052	Business Quick Facts
	f	Total of All firms, 2012	\$1,044		239,118	972	Business Quick Facts
	g	Unemployment, percent, 2015	2.7%		4.2%	3.2%	County Health Rankings
	h	Food insecurity, percent, 2014	12.0%		14.0%	12.8%	County Health Rankings
	i	Grocery stores/1,000 pop (% change), 2009-2014	-1.7%		NA	0.4%	U.S. Department of Agriculture - Food Environment Atlas
	j	Low income and low access to store, percent, 2015	8.8%		NA	7.5%	U.S. Department of Agriculture - Food Environment Atlas
	l	Mean travel time to work (minutes), workers age 16 years+, 2011-2015	10.1		19.1	14.2	People Quick Facts
	m	Long commute - driving alone, percent, 2011-2015	7.0%		20.0%	13.7%	County Health Rankings

Tab 3 Public Schools Health Delivery Profile

Currently school districts are providing on site primary health screenings and basic care.

Tab		2018 Health Indicator	Thomas Co 2018	Trend	State of KS	KS Rural Norm (N=14)	Source
3	a	Children eligible for free or reduced price lunch, percent, 2014-2015	41.0%		50.0%	48.9%	County Health Rankings
	b	High school graduate or higher, percent of persons age 25 years+, 2011-2015	90.7%		88.4%	95.7%	People Quick Facts
	c	Bachelor's degree or higher, percent of persons age 25 years+, 2011-2015	18.1%		27.1%	32.2%	People Quick Facts

TAB 4 Maternal and Infant Health Profile

Tracking maternal & infant care patterns are vital in understanding the foundation of family health.

Tab		2018 Health Indicator	Thomas Co 2018	Trend	State of KS	KS Rural Norm (N=14)	Source
4	a	Percent of Births Where Prenatal Care began in First Trimester, 2013-2015	83.0%		80.4%	77.4%	Kansas Health Matters
	b	Percentage of Premature Births, 2013-2015	10.2%		8.8%	9.5%	Kansas Health Matters
	c	Percent of Infants up to 24 months that received full Immunizations, 2015-2016	78.9%		NA	85.1%	Kansas Health Matters
	d	Percent of Births with Low Birth Weight, 2013-2015	6.2%		7.0%	11.6%	Kansas Health Matters
	e	Percent of WIC Mothers Breastfeeding Exclusively, percent, 2016	16.3%		15.0%	31.8%	Kansas Health Matters
	f	Percent of all Births Occurring to Teens (15-19), 2013-2015	11.4%		6.8%	11.6%	Kansas Health Matters
	g	Percent of Births Occurring to Unmarried Women, 2013-2015	33.5%		36.3%	32.8%	Kansas Health Matters
	h	Percent of births Where Mother Smoked During Pregnancy, 2013-2015	15.5%		11.8%	15.2%	Kansas Health Matters

TAB 5 Hospitalization/Provider Profile

Understanding provider access and disease patterns are fundamental in healthcare delivery. Listed below are several vital county statistics.

Tab		2018 Health Indicator	Thomas Co 2018	Trend	State of KS	KS Rural Norm (N=14)	Source
5	a	Primary care physicians, 2014	1,970		1,330:1	2,296:1	County Health Rankings
	b	Preventable hospital stays, 2014	67		52	74	County Health Rankings
	c	Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)	75%		78.0%	75.0%	CMS Hospital Compare, 10/1/2015-9/30/2016
	d	Patients Who Reported Yes, They Would Definitely Recommend the Hospital	75%		77.0%	77.1%	CMS Hospital Compare, 10/1/2015-9/30/2016
	e	Average Time Patients Spent in the Emergency Dept. Before They Were Seen by a Healthcare Professional (in Minutes)	NA		24.0	20.0	CMS Hospital Compare, 10/1/2015-9/30/2016

TAB 5 Hospitalization/Provider Profile (Con'T)

# KS Hospital Assoc PO103		Thoms County, KS IP			TREND
		FFY2016	FFY2017	FFY2018	
1	Total Discharges	691	608	802	
2	Total IP Discharges-Age 0-17 Ped	13	12	31	
3	Total IP Discharges-Age 18-44	86	51	63	
4	Total IP Discharges-Age 45-64	166	181	184	
5	Total IP Discharges-Age 65-74	81	90	184	
6	Total IP Discharges-Age 75+	276	198	280	
7	Psychiatric	8	18	13	
8	Obstetric	36	36	27	
9	Surgical %	21.7%	22.6%	22.1%	
# KS Hospital Assoc PO103		Citizens Memorial Medical Ctr			TREND
		FFY2016	FFY2017	FFY2018	
1	Total Discharges	382	310	469	
2	Total IP Discharges-Age 0-17 Ped	10	5	15	
3	Total IP Discharges-Age 18-44	41	33	26	
4	Total IP Discharges-Age 45-64	79	79	104	
5	Total IP Discharges-Age 65-74	44	49	119	
6	Total IP Discharges-Age 75+	203	131	195	
7	Psychiatric	1	4	2	
8	Obstetric	2	3	5	
9	Surgical %	4.2%	9.0%	5.8%	
#	KHA OPTOT223 Thomas Co	FFY2016	FFY2017	FFY2018	TREND
1	Citizens - ER Market Share %	83.2%	68.9%	80.8%	
2	Citizen -OPS Market Share %	57.5%	68.0%	72.2%	
3	Citizen -Total OP Market Share %	82.6%	87.6%	82.4%	

TAB 6 Social Services Profile

Behavioral health care provide another important indicator of community health status.

Tab	2018 Health Indicator	Thomas Co 2018	Trend	State of KS	KS Rural Norm (N=14)	Source
6 a	Depression: Medicare Population, percent, 2015	17.3%		17.8%	16.5%	Centers for Medicare and Medicaid Services
b	Alcohol-impaired driving deaths, percent, 2011-2015	27.0%		27.0%	36.1%	County Health Rankings
c	Poor mental health days, 2015	3.0		3.2	2.9	County Health Rankings

TAB 7 Health Risk Profiles

Knowing community health risk factors and disease patterns can aid in the understanding “next steps” to improve health. Being overweight/obese; smoking, drinking in excess, not exercising etc can lead to poor health.

Tab		2018 Health Indicator	Thomas Co 2018	Trend	State of KS	KS Rural Norm (N=14)	Source
7a	a	Adult obesity, percent, 2013	35.0%		31.0%	32.3%	County Health Rankings
	b	Adult smoking, percent, 2015	15.0%		18.0%	16.4%	County Health Rankings
	c	Excessive drinking, percent, 2015	17.0%		17.0%	14.9%	County Health Rankings
	d	Physical inactivity, percent, 2013	24.0%		23.0%	25.9%	County Health Rankings
	e	Poor physical health days, 2015	2.90		3.1	3.2	County Health Rankings
	f	Sexually transmitted infections, rate, 2014	314.50		384.1	267.1	County Health Rankings

TAB 7 Health Risk Profiles

Tab		2018 Health Indicator	Thomas Co 2018	Trend	State of KS	KS Rural Norm (N=14)	Source
7b	a	Hypertension: Medicare Population, 2015	59.0%		53.2%	55.1%	Kansas Health Matters
	b	Hyperlipidemia: Medicare Population, 2015	48.2%		40.0%	36.9%	Kansas Health Matters
	c	Heart Failure: Medicare Population, 2015	16.8%		13.0%	16.6%	Kansas Health Matters
	d	Chronic Kidney Disease: Medicare Pop, 2015	16.2%		16.2%	15.1%	Kansas Health Matters
	e	COPD: Medicare Population, 2015	12.8%		11.4%	12.7%	Kansas Health Matters
	f	Atrial Fibrillation: Medicare Population, 2015	9.5%		8.3%	10.1%	Kansas Health Matters
	g	Cancer: Medicare Population, 2015	8.3%		7.7%	8.6%	Kansas Health Matters
	h	Osteoporosis: Medicare Population, 2015	6.4%		5.7%	7.7%	Kansas Health Matters
	i	Asthma: Medicare Population, 2015	6.0%		7.3%	6.8%	Kansas Health Matters
	j	Stroke: Medicare Population, 2015	2.7%		3.4%	3.1%	Kansas Health Matters

TAB 8 Uninsured Profiles

Based on state estimations, the number of insured is documented below. Also, the amount of charity care (last 3 years of free care) from area providers is trended below.

Tab		2018 Health Indicator	Thomas Co 2018	Trend	State of KS	KS Rural Norm (N=14)	Source
8	a	Uninsured, percent, 2014	11.0%		12.0%	13.0%	County Health Rankings

TAB 9 Mortality Profile

Trending mortality trends are noted below.

Tab		2018 Health Indicator	Thomas Co 2018	Trend	State of KS	KS Rural Norm (N=14)	Source
9	a	Life Expectancy for Males, 2014	76.7		76.5	76.8	Kansas Health Matters
	b	Life Expectancy for Females, 2014	81.9		81.0	81.8	Kansas Health Matters
	c	Age-adjusted Cancer Mortality Rate per 100,000 population, 2014-2016	152.5		194.3	159.6	Kansas Health Matters
	d	Age-adjusted Heart Disease Mortality Rate per 100,000 population, 2014-2016	169.5		157.4	174.3	Kansas Health Matters
	e	Age-adjusted Chronic Lower Respiratory Disease Mortality Rate per 100,000 population, 2014-2016	61.2		48.9	51.5	Kansas Health Matters
	f	Age-adjusted Suicide Mortality Rate per 100,000 population, 2014-2016	27.9		15.9	12.6	Kansas Health Matters

TAB 10 Preventive Health Profile

The following table reflects future health of county. This information also is an indicator of community awareness of preventative measures.

Tab		2018 Health Indicator	Thomas Co 2018	Trend	State of KS	KS Rural Norm (N=14)	Source
10	a	Access to exercise opportunities, percent, 2014	65.0%		76.0%	46.1%	County Health Rankings
	b	Diabetes monitoring, percent, 2014	88.0%		86.0%	79.2%	County Health Rankings
	c	Mammography screening, percent, 2014	57.0%		63.0%	63.6%	County Health Rankings

Community Feedback Research

For CHNA Wave #3 content, it also important to gather community perspective from key stakeholders on their views of progress to address baseline CHNA needs. Below are survey findings :

NW KS Collaborative Community Perception Survey - 2018 Thomas County KS N=800				
In general, how would you rate the overall health of our community				
	Answers	Replies	%	Top 2 Boxes
a	Very Unhealthy	10	1.4%	
b	Unhealthy	55	7.9%	
c	Somewhat Healthy	409	58.8%	
d	Healthy	209	30.0%	
e	Very Healthy	13	1.9%	31.9%
	TOTAL	696	100.0%	
Are you familiar with the U.S. recommendations for adult physical activity?				
	Answers	Replies	%	% YES
a	No	192	27.4%	
b	Yes	358	51.1%	51.1%
c	Unsure	150	21.4%	
	TOTAL	700		
Do you feel like you're meeting those recommendations for adult physical activity?				
	Answers	Replies	%	% YES
	No	317	46.2%	
	Yes	289	42.1%	42.1%
	Unsure	80	11.7%	
	TOTAL	686	100.0%	
Are you familiar with the U.S. recommendations for adult fruit and vegetable consumption?				
	Answers	Replies	%	% YES
	No	176	25.3%	
	Yes	445	63.9%	63.9%
	Unsure	76	10.9%	
	TOTAL	697	100.0%	
Do you feel like you're meeting those recommendations for adult fruit and vegetable consumption?				
	Answers	Replies	%	% YES
	No	332	47.6%	
	Yes	308	44.2%	44.2%
	Unsure	57	8.2%	
	TOTAL	697	100.0%	

NW KS Collaborative Community Perception Survey - 2018

Thomas County KS N=800

Are you aware of the efforts in your community to promote smoking

Answers	Replies	%	% YES
No	326	46.6%	
Yes	251	35.9%	35.9%
Unsure	122	17.5%	
TOTAL	699	100.0%	

Please rate your level of support for raising the minimum age for tobacco purchases from the current age (18) to 21 years of age?

Answers	Replies	%	Top 2 Boxes
Definitely not supportive	72	10.3%	
Not supportive	92	13.1%	
Neutral	169	24.1%	
Supportive	133	19.0%	
Very supportive	234	33.4%	52.4%
TOTAL	700		

Were you aware of the Pathways to a Healthy Kansas Initiative that is being implemented by the Northwest Kansas Collaborative (Atwood, Bird City, Colby, St. Francis) in your community?

Answers	Replies	%	% YES
No	436	68.2%	
Yes	170	24.7%	24.7%
Unsure	83	12.1%	
TOTAL	689		

NW KS Collaborative Community Perception Survey - 2018							
Please rate your level of agreement with the following statements:							
Response	Top Two Boxes	Total	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
A. My community has a sufficient number of sidewalks or bike/walk paths	65.1%		5.6%	12.2%	17.1%	49.4%	15.7%
		696	39	85	119	344	109
B. My community has a sufficient number of parks/playgrounds	83.6%		1.3%	2.7%	12.4%	61.2%	22.4%
		693	9	19	86	424	155
C. For walking at night, my community has adequate street lighting	33.8%		8.2%	28.0%	30.0%	27.7%	6.1%
		693	57	194	208	192	42
D. In general, my community has sufficient opportunities for physical activity.	57.9%		3.6%	15.3%	23.3%	47.6%	10.2%
		695	25	106	162	331	71
Please rate your level of agreement with the following statements:							
		Total	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
A. It is easy to find fresh fruits and vegetables in my community	70.8%		2.9%	8.6%	17.8%	56.2%	14.7%
		696	20	60	123	391	102
B. The fresh produce in my community is of high quality	49.4%		3.4%	12.3%	34.8%	40.1%	9.3%
		698	24	86	243	280	65
C. It is easy to find whole grain products, such as breads, cereals, pasta and snacks in my community	75.5%		1.0%	5.3%	18.2%	61.3%	14.2%
		698	7	37	127	428	99
D. In general, my community has sufficient options for healthy living	54.6%		3.2%	14.9%	27.3%	44.5%	10.1%
		696	22	104	190	310	70
Please rate your level of agreement with the following statements:							
<i>Please rate your level of support for policies that prohibit tobacco use (i.e. smoking and chewing tobacco) in the following settings:</i>		TOTAL	Definitely not supportive	Not supportive	Neutral	Supportive	Very supportive
a) Local Parks	72.9%		6.6%	7.1%	13.4%	21.0%	52.0%
		687	45	49	92	144	357
b) School grounds	85.6%		5.5%	2.6%	6.3%	19.6%	66.0%
		688	38	18	43	135	454
c) Hospital grounds	80.2%		7.1%	4.2%	8.5%	18.8%	61.4%
		686	49	29	58	129	421
d) Worksites	62.4%		7.3%	9.0%	21.3%	17.1%	45.3%
		686	50	62	146	117	311

NW KS Collaborative Community Perception Survey - 2018			
Thomas County KS N=800			
Survey Profile of Respondents			
Your Age?			
Answers	Replies	%	
a) Less than 25	92	13.3%	
b) 25-39	258	37.4%	
c) 40-54	144	20.9%	
d) 55-64	122	17.7%	
e) 65 or over	74	10.7%	
TOTAL	690		
Your Gender			
a) Female	406	59.0%	
b) Male	282	41.0%	
TOTAL	688		
Which ethnic group do you most identify with?			
a) African American/Black	4	0.6%	
b) Asian/Pacific Islander	2	0.3%	
c) Hispanic/Latino	33	4.8%	
d) Native American	9	1.3%	
e) White/Caucasian	633	92.3%	
f) Other (please specify)	5	0.7%	
TOTAL	686		
Your Education			
a) Less than high school	21	3.1%	
b) High School diploma or GED	132	19.2%	
c) Some college/Associate's	315	45.9%	
d) Bachelors degree or higher	204	29.7%	
e) Other (please specify)	14	2.0%	
TOTAL	686		
Where/How did you get this survey?			
a) Church	25	3.7%	
b) Community Event	75	11.0%	
c) Community meeting	17	2.5%	
d) Email	104	15.2%	
e) Facebook or other social media	15	2.2%	
f) Grocery Store/Shopping Mall	1	0.2%	
g) Mail	15	2.2%	
h) Newspaper	3	0.4%	

IV. Inventory of Community Health Resources

[VVV Research & Development, LLC]

YR 2018 Inventory of Health Services - Thomas County, KS

Cat	Services Offered in Thomas Co KS Yes / No	Hospital	HLTH Dept	Other
Clinic	Primary Care	yes		yes
Hosp	Alzheimer Center			
Hosp	Ambulatory Surgery Centers	yes		
Hosp	Arthritis Treatment Center			
Hosp	Bariatric/Weight Control Services	yes		
Hosp	Birthing/LDR/LDRP Room	yes		
Hosp	Breast Cancer	yes		
Hosp	Burn Care			
Hosp	Cardiac Rehabilitation	yes		yes
Hosp	Cardiac Surgery			
Hosp	Cardiology Services	yes		yes
Hosp	Case Management	yes		yes
Hosp	Chaplaincy/Pastoral Care Services	yes		yes
Hosp	Chemotherapy	yes		
Hosp	Colonoscopy	yes		
Hosp	Crisis Prevention			yes
Hosp	CTScanner	yes		
Hosp	Diagnostic Radioisotope Facility	yes		
Hosp	Diagnostic/Invasive Catheterization			
Hosp	Electron Beam Computed Tomography (EBCT)			
Hosp	Enrollment Assistance Services	yes	yes	yes
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)			
Hosp	Fertility Clinic			
Hosp	FullField Digital Mammography (FFDM)	yes		
Hosp	Genetic Testing/Counseling			
Hosp	Geriatric Services	yes	yes	yes
Hosp	Heart			
Hosp	Hemodialysis			
Hosp	HIV/AIDS Services		yes	
Hosp	Image-Guided Radiation Therapy (IGRT)			
Hosp	Inpatient Acute Care - Hospital Services	yes		
Hosp	Intensity-Modulated Radiation Therapy (IMRT) 161			
Hosp	Intensive Care Unit	yes		
Hosp	Intermediate Care Unit	yes		
Hosp	Interventional Cardiac Catheterization			
Hosp	Isolation room	yes		
Hosp	Kidney			
Hosp	Liver			
Hosp	Lung	yes		
Hosp	Magnetic Resonance Imaging (MRI)	yes		
Hosp	Mammograms	yes		
Hosp	Mobile Health Services		yes	yes
Hosp	Multislice Spiral Computed Tomography (<64 slice CT)			
Hosp	Multislice Spiral Computed Tomography (<64+ slice CT)	yes		
Hosp	Neonatal			
Hosp	Neurological Services	yes		yes
Hosp	Obstetrics	yes	yes	
Hosp	Occupational Health Services	yes		yes
Hosp	Oncology Services	yes		yes
Hosp	Orthopedic Services	yes		yes
Hosp	Outpatient Surgery	yes		
Hosp	Pain Management	yes		
Hosp	Palliative Care Program	yes		yes
Hosp	Pediatric	yes	yes	
Hosp	Physical Rehabilitation	yes		yes
Hosp	Positron Emission Tomography (PET)			
Hosp	Positron Emission Tomography/CT (PET/CT)	yes		
Hosp	Psychiatric Services			yes
Hosp	Radiology, Diagnostic	yes		yes
Hosp	Radiology, Therapeutic	yes		
Hosp	Reproductive Health	yes	yes	yes

YR 2018 Inventory of Health Services - Thomas County, KS				
Cat	Services Offered in Thomas Co KS Yes / No	Hospital	HLTH Dept	Other
Hosp	Robotic Surgery			
Hosp	Shaped Beam Radiation System 161			
Hosp	Single Photon Emission Computerized Tomography (SPECT)			
Hosp	Sleep Center	yes		
Hosp	Social Work Services	yes		yes
Hosp	Sports Medicine	yes		yes
Hosp	Stereotactic Radiosurgery			
Hosp	Swing Bed Services	yes		yes
Hosp	Transplant Services			
Hosp	Trauma Center	pending		
Hosp	Ultrasound	yes		yes
Hosp	Women's Health Services	yes	yes	yes
Hosp	Wound Care	yes		yes
SR	Adult Day Care Program			
SR	Assisted Living			yes
SR	Home Health Services			yes
SR	Hospice			yes
SR	LongTerm Care	yes		yes
SR	Nursing Home Services	yes		yes
SR	Retirement Housing			yes
SR	Skilled Nursing Care	yes		yes
ER	Emergency Services	yes		
ER	Urgent Care Center			
ER	Ambulance Services			yes
SERV	Alcoholism-Drug Abuse			yes
SERV	Blood Donor Center			yes
SERV	Chiropractic Services			yes
SERV	Complementary Medicine Services	yes		yes
SERV	Dental Services			yes
SERV	Fitness Center	yes		yes
SERV	Health Education Classes	yes	yes	yes
SERV	Health Fair (Annual)	yes	yes	yes
SERV	Health Information Center			
SERV	Health Screenings	yes	yes	yes
SERV	Meals on Wheels			yes
SERV	Nutrition Programs	yes	yes	yes
SERV	Patient Education Center	yes		
SERV	Support Groups	yes		yes
SERV	Teen Outreach Services			yes
SERV	Tobacco Treatment/Cessation Program	yes	yes	yes
SERV	Transportation to Health Facilities			yes
SERV	Wellness Program	yes	yes	yes

YR 2018 Physician Manpower - Thomas County, KS

# of FTE Providers	Supply Working in Thomas Co KS		
	Co Based MDs / DOs	Visiting Providers	Co Based APPs
Primary Care:			
Family Practice	6.4	0.0	6.8
Internal Medicine	0.0	0.0	0.0
Obstetrics/Gynecology	0.0	0.1	0.0
Pediatrics	0.0	0.0	0.0
Medicine Specialists:			
Allergy/Immunology	0.0	0.1	
Cardiology	0.0	0.2	
Dermatology	0.2	0.0	
Endocrinology	0.0	0.0	
Gastroenterology	0.0	0.2	
Oncology/Rado	0.0	0.1	
Infectious Diseases	0.0	0.0	
Nephrology	0.0	0.0	
Neurology	0.0	0.1	
Podiatry	0.0	0.1	
Psychiatry	0.0	0.0	
Pulmonary	0.0	0.1	
Rheumatology	0.0	0.1	
Surgery Specialists:			
General Surgery	1.0	0.1	
Neurosurgery	0.0	0.0	
Ophthalmology	0.0	0.1	
Orthopedics	0.0	0.5	
Otolaryngology (ENT)	0.0	0.1	
Plastic/Reconstructive	0.0	0.1	
Thoracic/Cardiovascular/Vasc	0.0	0.1	
Urology	0.0	0.1	
Hospital Based:			
Anesthesia/Pain	0.0	0.0	1.0
Emergency	0.0	0.0	1.0
Radiology	0.0	0.0	0.2
Pathology	0.0	0.0	
Hospitalist *	0.0	0.0	
Neonatal/Perinatal	0.0	0.0	
Physical Medicine/Rehab	0.0	0.0	
TOTALS	7.6	2.2	9.0

Thomas Co KS - 2018 Visiting Specialists Providing Care

Specialty	Group Name	Physician Name	Office Location	Days per Month
Gynecology	Rocky Mountain Women's Care	Dr. David Forschner	Denver, CO	Third Wednesday every other month
Allergy	Advanced Allergy Asthma & Immunology	Dr. Michael Volz	Greenwood Village, CO	Tuesday /Wednesday third week of month
Cardio Electro	Hays Medical Center	Dr. Kent Glead	Hays, KS	Last Monday of month
Cardiology	Great Plains Health	Dr. Richard Markiewicz	North Platte, NE	2 Monday's
Cardiology	Hays Medical Center	Dr. Jeffery L. Curtis	Hays, KS	Third Monday of month
Cardiology	Hays Medical Center	Dr. Mohammed Janif	Hays, KS	First Tuesday of month
Cardiology	Hays Medical Center	Dr. Patricia D. Crawley	Hays, KS	1 Monday
ENT	Great Plains Health	Dr. Philip Fitzpatrick	North Platte, NE	Every Tuesday
Hematology/Oncology	Central Care Cancer Center	Dr. Jose Velasco	Dodge City, KS	
Hematology/Oncology	Centura St. Catherine Hospital	Dr. Anis Toumeh	Garden City, KS	
Hematology/Oncology	Hays Medical Center	Dr. Anthony Accurso	Hays, KS	
Hematology/Oncology	Hays Medical Center	Dr. Robert Rodriguez	Hays, KS	
Maternal Fetal Medicine	Stormont Vail Hospital	Dr. John Evans	Topeka, KS	First Thursday of month
Neurology	Centura Wound Care and Hyperbaric	Dr. Khoi Pham	Parker, CO	One Wednesday a month
Psychiatry	Saint Luke's North Hospital	Dr. French	Lee Summit, MO	
Pulmonology	Colorado Pulmonary Associates, P.C.	Dr. Michael D. Ricafort	Denver, CO	Last Wednesday every other month
Pulmonology	Hays Medical Center	Dr. Manmohan Biring	Hays, KS	Second Friday of month
Rheumatology	One Health Rose Medical Center	Dr. David Korman	Denver, CO	1 Wednesday every other month
Ophthalmology	Fry Eye Associates	Dr. William Clifford	Garden City, KS	Two Friday's a month
Orthopedics	Hays Medical Center	Dr. Gulraiz Cheema	Hays, KS	Third Wednesday of month
Orthopedics	Hays Medical Center	Dr. Max France De Carvalho	Hays, KS	First Wednesday of month
Orthopedics	Western Orthopedic	Dr. Armodios Hatzidakis	Denver, CO	
Orthopedics	Western Orthopedic	Dr. Benjamin Sears	Denver, CO	One Tuesday a month
Orthopedics	Western Orthopedic	Dr. James Holmes	Denver, CO	One Tuesday a month
Orthopedics	Western Orthopedic	Dr. Kevin Nagamani	Denver, CO	Second Wednesday of month
Orthopedics	Western Orthopedic	Dr. Rajesh Bazaz	Denver, CO	One Tuesday a month
Orthopedics	Western Orthopedic	Dr. Sean Baran	Denver, CO	First Monday of month
Orthopedics	Western Orthopedic	Dr. Timothy Birney	Denver, CO	Second Tuesday of month
Plastic Surgery	Western Orthopedic	Dr. Thomas Mordick, II	Denver, CO	Third Thursday of month
Urology	Hays Medical Center	Dr. Ernesto Lopez-Corona	Hays, KS	Second Wednesday/Thursday of month
Urology	Hays Medical Center	Dr. Srinivas Samavedi	Hays, KS	Third Thursday every other month
Vascular Surgery	Vascular Institute of the Rockies	Dr. Stephen Annest	Denver, CO	Last Wednesday of month
Anesthesia	Beatrice Community Hospital	John Evans, CRNA	Beatrice, NE	
Anesthesia	Centura St. Catherine Hospital	Jessica Berg, CRNA	Garden City, KS	
Podiatry	High Plains Podiatry	Dr. Robert Hinze, DPM	McCook, NE	2-3 days a month
Sleep Medicine Specialist	CIC Associates Mercy Sleep Center	Dr. Start	Clive, IA	Third Friday of month

Thomas County KS

Health Services Directory

Emergency Numbers

Police/Sheriff 911
Fire 911
Ambulance 911

Non-Emergency Numbers

Thomas County Sheriff	785-460-4570
Colby Police Department	785-460-4460
Kansas Highway Patrol	(State) 785-296-6800
	(Hays) 785-625-3518
Thomas County Ambulance	785-460-4585
Thomas County Emergency Management	785-460-4516

Municipal Non-Emergency Numbers

	Police/Sheriff	Fire
Colby	785-460-4460	785-460-4454
Brewster	785-460-4570	785-890-4575
Gem	785-460-4570	785-460-4460
Levant	785-460-4570	785-460-4460
Rexford	785-460-4570	785-460-4460

Thomas County Health Department
350 S Range, Ste 2
Colby, KS 67701
785-460-4596
estrange@thomascountyks.gov

Other Emergency Numbers

Kansas Child/Adult Abuse and Neglect Hotline

800-922-5330

<http://www.dcf.ks.gov/Pages/Default.aspx>

Domestic Violence Hotline

800-799-7233

www.ndvh.org

Emergency Management (Topeka)

785-274-1409

<http://www.kansastag.gov/kdem/default.asp>

Federal Bureau of Investigation

816-512-8200

<http://www.fbi.gov/>

Kansas Arson/Crime Hotline

800-KS-CRIME or 800-572-7463

www.accesskansas.org/kbi or

firemarshal.ks.gov/ars

Toxic Chemical and Oil Spills

800-424-8802

Kansas Bureau of Investigation (Topeka)

785-296-8200

www.accesskansas.org/kbi

Kansas Crisis Hotline (Domestic Violence/Sexual Assault)

888-363-2287

www.kcsdv.org

Kansas Road Conditions

866-511-KDOT, 511

785-871-1515 (Main Office)

www.ksdot.org

Poison Control Center

800-222-1222

www.aapcc.org

Suicide Prevention Hotline

800-784-2433

www.hopeline.com

800-273-TALK

www.suicidepreventionlifeline.com

Health Services

Health Department

Thomas County Health Department

350 South Range Avenue, Suite #2 (Colby)

Phone: (785) 460-4596 Fax: (785) 460-4595

<https://www.thomascohealth.com/>

Open M-F 7:30am to 5:00pm

Thomas County Health Department Services include:

*Breastfeeding Boutique
Certified Lactation
Consultants Becoming A
Mom®*

*Blood Pressure Screenings
Family Planning
STI & HIV Testing
Immunizations
Lab Services*

*Physicals
Tobacco Control &
Prevention
TB Skin Tests & Treatment
Worksite Wellness*

Hospital

Citizens Medical Center, Inc.

100 East College Drive (Colby)

785-462-7511

www.cmciks.com

Citizens Medical Center, Inc. (CMCI) Services include:

Anesthesia

Cardiopulmonary

Pulmonary Rehabilitation

Rehabilitation Education

- *Certified Lactation Consultant*

- *Childbirth Classes*

- *Diabetes Education*

Emergency Department

Foundation

- *Citizens Foundation*

General Surgical Services

Laboratory

Labor and Delivery

Long Term

Nursing Services

*Nutrition Counseling
(Diabetes and Obesity)*

Oncology

Pharmacy

Primary Care

Rehabilitation Services

- *Adult and Pediatric Speech Therapy*

- *Occupational Therapy*

- *Physical Therapy*

- *Women's Health*

Social Services

- *Serenity Room (end of life care)*

Specialty Clinics

Mental Health

Heartland Rural Counseling Services

Elaine Ptacek, LCPC; Amanda Lanning, LMSW

485 W 4th St (Colby)

785-460-7588

High Plains Mental Health Center Colby Branch

750 South Range Avenue (Colby)

785-462-6774 785-628-2871 24 Hour

www.highplainsmentalhealth.com

Meier New Life Clinic

Angie Witman, LPC & LCMFT

100 E. College Drive (Colby)

888-725-4642

www.meierclinics.com/Colby

The Office of Carrie Nassif, PhD

Provider: Carla Sloan-Brown, LMLP 2513

170 W 6th St (Colby)

785-460-0050

www.psychotherapyforkansas.com

Turning Point (Colby)

Bill Davis, LPC, LCAC; Jaime Kinderknecht,

LCPC; Megan Briggs, MSW, LSCSW

866-463-2679

www.turningpointpcs.net

Tele Psychiatry Services @ Hoxie Medical

Clinic Paula Wiesehan, 785-675-3060

Medical Professionals

Chiropractors

Franz&Tubbs Chiropractic

135 West 6th Street Suite 4

785-462-7236

<https://www.notjusttheback.com/>

Gundlach Chiropractic

480 North Franklin Avenue

785-269-9565

<http://www.gundlachchiropractic.com>

Northwest Kansas

Chiropractic

Dr. Kristin Parker

1005 S. Range Ave #200

785-460-0332

Blackwood Family Dentistry
501 Garfield Street (Quinter)
(Accepts KanCare (Medicaid))
785-754-2441

Colby Family Dentistry
Bryan Nagle, DDS
770 South Range Avenue (Colby)
785-460-3922

Sam Funk, OD
505 N Franklin Street (Colby)
785-462-3348

Dentists

Karen Thummel, DDS
480 West 4th Street (Colby)
785-460-6800

Rawlins County Dental Clinic
515 State St (Atwood)
(Accepts KanCare (Medicaid))
785-626-8290

Optometrists

Vision Source
1005 South Range Avenue (Colby)
785-462-8231
<http://visionsource-colby.com/>

Hearing

Northwest Kansas Hearing Services, Inc
175 S Range (Colby)
785-460-2957
<https://www.hearusa.com/>

Hearing Solutions
1870 S Range (Colby)
785-460-4327

Naturopathic Doctors

Dr. Joan D. Waters, ND
990 S. Range Ave #5 (Inside 110 Massage & Wellness)
Colby, KS 67701
(970) 482-2010
www.practicalhealthsolutions.com

Pharmacies

Dillon's
1605 South Range
Avenue (Colby)
785-462-1310
www.kroger.com

Palace Drug Store
460 North Franklin
Avenue (Colby)
785-460-7507
[https://www.corner
drugstore.com/](https://www.cornerdrugstore.com/)

Wal-Mart
115 West Willow
Avenue (Colby)
785-462-8634
www.walmart.com

Primary Care Providers

Family Center for Health Care
310 East College Drive (Colby)
785-462-6184
www.cmciks.com/family-center

Dr. Kelly Gabel, DO
Dr. Sarah Gabel, DO
Dr. Bruce Kellogg, DO
Dr. Brenda Kopriva, MD
Dr. Dan Kuhlman, MD
Dr. Kara Kuhlman, MD
Dr. Darren Matchell, DO
Dr. Dereck Totten, MD

*Dr. Kysha Nichols-Totten,
MD*
Tina Benson, APRN
Tricia Carney, APRN
Luetta Flanagan, APRN
Jenny Niblock, APRN
Kamau, Gitau, CRNA
Adam Horinek, PA-C

Jennifer Haag, PA-C
Regina Taylor, PA-C
Brian Unruh, PA-C
Amanda Reid, PA-C
Allie Keller, PA-C
Robert Hieger, APRN
Stephanie Mesch, APRN

Rehabilitation Services (physical, occupational and speech therapies)

Citizens Medical Center

(PT, OT, Pediatric and Adult Speech, Women's Health)
100 E. College Drive (Colby)
785-460-4868

Northwest Kansas Educational Service Center

(Home Care-PT, OT, Speech) 703 W. 2nd (Oakley) 785-672-3125

Good Samaritan Society of NW Kansas

(Home Care-PT, OT, Speech) 820 S. Denison St. (St. Francis) 785-332-3588

Tina Harris Physical Therapy & Sports Medicine Center

270 North Franklin Avenue (Colby)
785-462-8008

Other Healthcare Services

Assisted Living/Nursing Homes/Long Term Care

Colby Health & Rehab

105 East College Drive (Colby)
785-462-6721
<http://www.colbyhealthandrehab.com/>

Fairview Estates

1630 Sewell Avenue (Colby)
785-462-2154

Prairie Senior Living

Complex 1625 South Franklin Avenue (Colby)
785-462-8295
www.cmciks.com/senior-living

Diabetes

Citizens Medical Center

100 E. College Drive (Colby)
785-460-1237

Disability Services

SKIL of Western Kansas (Hays)

800-316-8019 or 785-628-8019

Kansas Dept. of Children and Families

1135 S. Country Club Drive (Colby)
785-462-6769

Kansas Department on Aging & Disability (Hays)

800-432-7422

LINK (ages 16-60) (Hays)

800-569-5926; 1-785-625-694

Home Health

Angels Care Home Health

519 Russell Avenue
Wakeeney, KS 67672
785-743-2270

Guardian Home Health

(In home private pay and long-term care insurance)
112 S. Kansas Ave., Ste. 304
Norton, KS 67654
785-622-4254
www.guardianks.com

Good Samaritan Society of NW Kansas

820 S. Denison St. (St. Francis)
785-332-3588

L&C Home Health Agency

1175 S Range Ave, Ste 1, Box 5 (Colby)
785-465-7444

Goodland Home Health

1502 Main Ave (Goodland)
785-890-7658

Hospice

Hospice Services, Inc.

438 N Franklin Avenue (Colby)
785-462-6710, 800-315-5122

Medical Equipment and Supplies

VFW Post 6882
(Wheelchairs and Walkers)
220 Lake St (Colby)
460-7275

Northwest Kansas
Educational Service Center
(Keyes)
785-672-3125

Dillon's (Durable Medical
Equipment)
462-1310

Wal-Mart (Durable Medical
Equipment)
462-8651

Lincare (Oxygen)
1013 Main St (Goodland)
785-899-6848

Size-wise (Bariatric
Equipment)
210 Jefferson St, PO Box 320
(Ellis)
800-814-9389

**Citizen's Medical
Equipment**
100 E. College Drive
460-1269

Senior Services

Brewster Senior Center
327 Kansas Avenue
(Brewster)
785-694-2645

Senior Progress Center
165 Fike Park Street (Colby)
785-460-2901

Seniors in Action
305 Main Street (Rexford)
785-687-4646

Government Health Care Services

Kansas Department on Aging & Disabilities
503 South Kansas Avenue (Topeka)
785-296-4986 or 800-432-3535
www.kdads.ks.gov

**Kansas Department of Health &
Environment (KDHE)**
1000 South West Jackson (Topeka)
785-296-1500
www.kdheks.gov/contact.html

KanCare (Medicaid)
900 SW Jackson, Suite 900 N (Topeka)
866-305-5147
www.kancare.ks.gov

Senior Health Insurance Counseling KS
510 West 29th, Suite B (Hays)
785-628-8204; 800-432-7422

**Medicare Part D Prescription Drug
Insurance Counseling**
350 S Range Ave Suite 16 (Colby)
785-460-4582

Healthcare Navigator
510 West 29th, Suite B (Hays)
785-628-8204; 800-432-7422
<https://www.healthcare.gov/glossary/navigator/>

Medicare
Social Security Administration
1212 East 27th Street (Hays)
888-552-7176
www.ssa.gov/benefits/medicare

Kansas Department of Children and Families
1135 S Country Club Drive Suite 1 (Colby)
785-462-6760; TTY/TDD 1-800-766-3777

Social Security Administration
1212 East 27th Street (Hays)
785-625-3496

Veteran's Affairs
990 S. Range Avenue (Colby)
785-462-3572 or 785-443-0120
<http://kcva.ks.gov/veteran-services/>

Local Government, Community, and Social Services

Adult Protection

**Kansas Department of
Aging & Disability Services**
800-922-5330
<http://www.kdads.ks.gov/hotlines>

Elder Abuse Hotline
800-842-0078
[http://www.kdheks.gov/bhfr/elder abuse hotlines.html](http://www.kdheks.gov/bhfr/elder%20abuse%20hotlines.html)

**Kansas Department of
Social and Rehabilitation
Services West Region
Protection Reporting
Center**
1-800-922-5330

Alcohol and Drug Treatment

Turning Point (Colby)
Bill Davis
Jaime Kinderknecht,
Megan Briggs
866-463-2679
www.turningpointpcs.net

Recovery Way Counseling
990 S Range Ste2B
Wendy Armbruster
785-269-1033

**Smoking Cessation
KanQuit**
1-800-784-8669
www.QuitNow.net/
www.KanQuit.org

Child Protection

Kansas Department of Children and Families Services
Western Region Protection Reporting Center
1-800-922-5330
Available 24 hours/7 days per week
<http://www.dcf.ks.gov/DCFContacts/Pages/default.aspx>

Children and Youth

Children's Alliance
627 Southwest Topeka Boulevard (Topeka)
785-235-5437
www.childally.org

Kansas Children's Service League
800-332-6378 (Bullying Prevention)
800-530-5275 (Main Line)
<https://www.kcsl.org/>

Community Assistance
Salvation Army (Thomas Co. Health Dept.)
Emergency Assistance/Vision USA
785-460-4596 (Colby)

LiveWell Northwest Kansas (Home Visiting
Programs ABC & PALS)
460 N. Garfield
785-460-8177
<https://www.livewellnwkc.org/>

Consumer Safety
<https://www.consumersafety.org/>

Community Event Centers
Colby Community Building
285 E 5th St
785-460-4435

Crime Prevention

Thomas County Sheriff
225 North Court Avenue (Colby)
785-460-4570

Colby Police Department
225 North Court Avenue (Colby)
785-460-4570

Day Care Providers-Children

Child Care Aware of NW Kansas
1255 South Range Avenue (Colby)
785-460-5482; 1-877-678-2548

Kids Port Group Childcare
460 North Garfield Avenue (Colby)
785-465-9110

Employment/Job Services

Kansas WorkforceONE
350 S Range (Colby)
785-462-2024
<http://www.kansasworkforceone.org/>

Extension Office

Northwest Area Extension Office
105 Experiment Farm Drive, Suite 1 (Colby)
785-462-7575
www.northwest.ksu.edu

Thomas County Extension Service
350 S. Range Avenue, Ste 16 (Colby)
785-460-4582
www.thomas.ksu.edu

Domestic/Family Violence

Child/Adult Abuse Hotline
1-800-922-5330
www.dcf.ks.gov/Pages/Report-Abuse-or-Neglect.aspx

Options Domestic and Sexual Violence Services
2716 Plaza Ave, Hays, KS
785-625-4202; 1-800-794-4624

<http://www.help4abuse.org>

General Information – Women’s Shelters
www.WomenShelters.org

Food Programs

Bobs Box distributed by Thomas County Health Department
350 South Range Avenue, Ste. 2 (Colby)
785-460-4596

Homestead Nutrition (Meal Delivery based on Eligibility) Senior Progress Center
165 Fike Park Street (Colby) 785-460-2901

Genesis Food Bank (Limited hours on most Wednesdays)
350 S. Range Avenue (Colby)
785-460-7930

High Plains Food Coop
1678 US Hwy 36 (Saint Francis)
7900 E Union Ave, Ste 200 (Denver)
785-626-6082
<http://www.highplainsfood.org>

WIC (Goodland – serves Colby/Thomas County)
1-800-899-4892

Head Start

Head Start NKESC
210 North Grant Avenue (Colby)
785-462-6067
www.nkesc.org/

Early Head Start NKESC
703 W 2nd St (Oakley- Serves Colby/Thomas County)
785-672-3125

Health and Fitness Centers (Colby)

Citizens Medical Center
100 E. College Drive
785-460-4868

Flex Fitness
200 N Franklin Avenue
785-443-1097

Colby Community College
1255 S. Range Avenue

785-462-3984

Movement Connection
430 N Franklin Avenue
785-462-2044

Crossfit Colby
1981 W. Fourth Street
785-460-0361

Colby Recreation Dept.
285 E. Fifth Street
785-460-4440

Jump Start Fitness Center
415 N Franklin Avenue
785-443-0419

Housing (Colby)

Colby Housing Authority
600 S Mission Ridge Ave
785-460-6763

**St. Thomas Historic
Residence**
200 S Range Ave
785-460-4360

Colby House LP
770 Dylan Dr
785-462-3473

Pregnancy Services

**Emergency Pregnancy
Services & Natural Family
Planning**
350 S. Range Ave, Ste 3
785-462-3022

Prenatal Classes
Thomas County Health
Department
Becoming A Mom®
785-462-4596

**Kansas Children's Service
League**
877-530-5275
www.kcsl.org

Legal Services

Iwin Legal Services
PO Box 288 (Colby)
785-269-7603

Barrett Law Firm
280 N. Court Ave Box 544
785-460-0188

John D. Gatz
505 N Franklin Ave, Ste A
785-460-3383

**Kansas Legal Services
Legal Aide Society**
1401 B Main (Hays)
800-723-6953
785-625-4514

Stramel Law Firm
480 N Franklin Ave
785-460-3222

Lamm Law
785-443-3476

Ronald Shalz
1675 W. 4th St. Ste A
785-464-6736

Thomas County Attorney
410 N Franklin Ave
785-460-4580

Public Information

City of Colby
785-460-4400

Chamber of Commerce
350 S. Range Suite 10 (Colby)
785-460-3401

Thomas County Courthouse
300 North Court Avenue (Colby)
785-460-4500

Colby Visitors Center
2015 S Range Ave (Colby)
785-460-0076

Colby Convention & Visitors Bureau
350 S Range Ave, Suite 10 (Colby)
785-460-7643

Rape

The Crisis Center (Manhattan)
785-539-7935
800-727-2785
www.thecrisiscenterinc.org

Options Domestic and Sexual Violence Services
2716 Plaza Ave, Hays, KS
785-625-4202; 800-794-4624

Domestic Violence and Rape Hotline
888-656-HOPE (4673)
Family Crisis Center
1806 12th Street (Great Bend)
620-792-1885/ 866-792-1885
www.familycrisisctr.org

Kansas Crisis Hotline
888-363-2287

Social Security

Social Security Administration
888-552-7176
www.ssa.gov

Transportation

Thomas County Transportation van
300 N. Court (Colby)
785-443-9208
785-460-4500

Colby Cab
785-462-TAXI (8294)

Veterinary Services

Colby Animal Clinic
810 East 4th Street (Colby)
785-460-8621
www.colbyanimalclinic.com

Swartz Veterinary Hospital
1775 West 4th Street (Colby)
785-460-1078
<http://www.swartzvethospital.com/>

State and National Information, Services, Support

Adult Protection

Adult Protection Services
1-800-922-5330

Poison Center 1-800-222-1222

Domestic Violence and Sexual Assault
1-800-874-1499
www.dvack.org

Elder Abuse Hotline
1-800-922-5330 or 877-662-8362
www.elderabusecenter.org

Elder and Nursing Home Abuse Legal
http://www.kdheks.gov/bhfr/elder_abuse_hotlines.html

Kansas Coalition Against Sexual and Domestic Violence
1-888-END-ABUSE (363-2287)

www.kcsdv.org/

Kansas Department on Aging Adult Care Complaint Program
1-800-842-0078

National Center on Elder Abuse
(Administration on Aging)
<https://ncea.acl.gov/>

National Domestic Violence Hotline
1-800-799-SAFE (799-7233)
1-800-787-3224 (TTY)
www.ndvh.org

National Sexual Assault Hotline
800.656.4673 <https://www.rainn.org/>

National Suicide Prevention Lifeline
1-800-273-8255

Sexual Assault and Domestic Violence Crisis Line
1-800-701-3630

Kansas Department of Children and Families
1-888-369-4777 (Hays)
www.dcf.ks.gov

Alcohol and Drug Treatment Programs

AIC (Assessment, Information & Counseling)
205 E. 7th St. Ste. 126, Hays
785-639-1081
www.aicounseling.org

Al-anon/Alateen Helpline
1-888-425-2666
www.al-anon.alateen.org

Alcohol and Drug Helpline
1-800-821-4357
www.aa.org

Kansas Alcohol and Drug Abuse Services Hotline
1-800-586-3690
www.dcf.ks.gov

Mothers Against Drunk Driving
1-800-GET-MADD (438-6233)
www.madd.org

National Council on Alcoholism & Drug Dependence, Inc.
1-800-622-2255
www.ncadd.org

SAMHSA's National Helpline
1-800-662-HELP (4357)
<https://www.samhsa.gov/find-help/national-helpline>

Recovery Connection
1-800-993-3869
www.recoveryconnection.org

Regional Prevention Centers of Kansas
785-625-5521 (Hays)(Smoky Hill Foundation)
<https://www.kdads.ks.gov/commissions/behavioral-health/kpc>

Valley Hope
1-800-544-5101
<https://valleyhope.org/location/>

Children and Youth

Adoption
1-800-862-3678
www.adopt.org/

Boys and Girls Town National Hotline
1-800-448-3000
www.girlsandboystown.org

Child/Adult Abuse and Neglect Hotline
1-800-922-5330
www.dcf.ks.gov/Pages/Report-Abuse-or-Neglect.aspx

Child Abuse National Hotline
1-800-422-4453
1-800-222-4453 (TDD)
<https://www.childhelp.org/hotline/>

Child Find of America: 1-800-426-5678

Child Help USA National Child Abuse Hotline: 1-800-422-4453

Child Protective Services: 1-800-922-5330

KanCare (Medicaid)
105 W 13th (Hays)
785-621-5147; 785-259-8614
bney@kdheks.gov 1-800-792-4884
1-800-792-4292 (TTY)

Heartspring (Institute of Logopedics)
8700 E. 29TH N, Wichita, KS 67226
800-835-1043
www.heartspring.org

Kansas Big Brothers/Big Sisters
1-888-574-2447
<https://www.kansasbig.org/>

Kansas Children's Service League (Hays)
785-625-2244
1-877-530-5275
www.kcsl.org

Kansas Department of Health and Environment

785-296-1500
www.kdheks.gov

The Kansas Society for Children with Challenges

106 W. Douglas, Suite 900, Wichita, KS 67202
1-800-624-4530; 316-262-4676
www.kssociety.org

National Runaway Switchboard

1-800-RUNAWAY (786-2929)
www.1800runaway.org/

National Society for Missing and Exploited Children 1-800-THE-LOST (843-5678)

www.missingkids.com

Parents Anonymous Help Line

1-800-345-5044
<http://parentsanonymous.org/>

Parent Help Line: 1-800-CHILDREN
24/7 Statewide, anonymous, information and referral

Runaway Line

1-800-621-4000 or 1-800-621-0394 (TDD)
www.1800runaway.org/

Talking Books: 1-800-362-0699

<https://kslib.info/153/Talking-Books>

Community Action

Public Affairs Hotline

(Kansas Corporation Commission)
1-800-662-0027
www.kcc.state.ks.us

Peace Corps

1-800-424-8580
www.peacecorps.gov

Counseling

Care Counseling

Family counseling services
for Kansas and
Missouri
1-888-999-2196

Kansas Problem Gambling Hotline

1-800-522-4700
<http://www.ksgamblinghelp.com/>

Self-Help Network of Kansas

316-978-3843

Catholic Charities

1-888-468-6909
<https://www.ccnks.org/>

National Problem Gambling Hotline

1-800-522-4700

National Hopeline Network

1-800-SUICIDE

Central Kansas Mental Health Center

1-800-794-8281
<http://www.ckmhc.org/>

Senior Health Insurance Counseling for Kansas

1-800-860-5260
<http://www.kdads.ks.gov/commissions/commission-on-aging/medicare-programs/shick>

Sunflower Family Services, Inc.

1-877-457-5437
www.sunflowerfamily.org

Consumer Credit Counseling Services

1-800-279-2227
www.kscccs.org/

WINGS Upon the Prairie

485 N Franklin (Colby)
785-460-7477

Disability Services

American Association of People with Disabilities (AAPD)

800-840-8844
www.aapd.com

www.drckansas.org

Hearing Healthcare Associates

800-448-0215

American Council for the Blind

800-424-8666
www.acb.org

Kansas Commission for the Deaf & Hearing Impaired

800-432-0698
<http://www.dcf.ks.gov/>

Americans with Disabilities Act Hotline

800-514-0301; 800-514-0383 (TTY)
www.ada.gov

Kansas Relay Center

800-766-3777 or dial 7-1-1
www.kansasrelay.com

Disability Advocates of Kansas, Inc.

855-747-6075
www.disabilitysecrets.com

National Center for Learning Disabilities

888-575-7373
www.ncld.org

Disability Group, Inc.

888-236-3348
www.disabilitygroup.com

National Library Services for Blind & Physically Handicapped

888-657-7323
800-424-8567 (Music Section)
www.loc.gov/nls/

Disability Rights Center of Kansas (DRC)

877-776-1541; 877-335-3725 (TTY)

Environment

Environmental Protection Agency

1-800-223-0425
913-321-9516 (TTY)
www.epa.gov

Kansas Department of Health and Environment

Salina 785-827-9639
Hays 785-625-5663
Topeka 785-296-1500

www.kdheks.gov

Local Environmental Protection Group (LEPG)

785-462-8636

Food and Drug

Center for Food Safety and Applied Nutrition

1-888-723-3366
<http://www.fda.gov/Food/>

www.fsis.usda.gov/

US Consumer Product Safety Commission

1-800-638-2772; 1-800-638-8270 (TDD)

Poison Hotline

1-800-222-1222

USDA Meat and Poultry

1-888-674-6854

U.S. FDA

1-888-463-6332
www.fda.gov

Health Services

American Cancer Society

1-800-227-2345
www.cancer.org

American Diabetes Association

1-800-DIABETES
www.diabetes.org

AIDS/HIV Center for Disease Control/Prev.

1-800-CDC-INFO
www.cdc.gov/hiv/

AIDS/STD National Hot Line

1-800-342-AIDS
1-800-227-8922 (STD)

Bright Focus Foundation

1-800-437-2423
<https://www.brightfocus.org/>
American Heart Association
1-800-242-8721
www.heart.org

American Lung Association

1-800-586-4872
www.lung.org

American Stroke Association

1-888-4-STROKE
www.heart.org

Center for Disease Control and Prevention

1-800-CDC-INFO
1-888-232-6348 (TTY)
www.cdc.gov/hiv/

Early Detection Works

877-277-1368
www.kdheks.gov/edw/about.htm

Elder Care Helpline

www.eldercarelink.com

Eye Care Council

1-800-960-EYES
www.seetolearn.com

Kansas Foundation for Medical Care

1-800-432-0770
www.kfmc.org

National Health Information Center

www.health.gov/nhic

National Cancer Information Center

1-800-227-2345
1-866-228-4327 (TTY)
www.cancer.org

Hospice

Hospice-Kansas Association

800-315-5122 (NW Kansas)
www.hospicenwks.com

Kansas Hospice and Palliative Care Organization

<https://khpco.wordpress.com/>

Housing

US Department of Housing and Urban Development

Kansas Regional Office
913-551-5462
800-225-5342; 800-877-8339
www.hud.gov

Kansas Housing Resources Corporation

785-217-2001
1-800-766-3777 TTY
<http://www.kshousingcorp.org/>

Legal Services

Kansas Attorney General

1-800-432-2310 (Consumer Protection)
1-800-828-9745 (Crime Victims' Rights)
1-800-766-3777 (TTY)
www.ksag.org/

Kansas Bar Association

785-234-5696
www.ksbar.org

Kansas Legal Services

1-800-723-6953
www.kansaslegalservices.org

Northwest Kansas Area Agency on Aging

510 W 29th Street, Suite B (Hays)
785-628-8204
800-432-7422
www.nwkaaa.com

Kansas Department on Aging

785-296-4986
<http://www.kdads.ks.gov/commissions/commission-on-aging>

Medicaid/Medicare Services

KanCare (Medicaid)

900 SW Jackson, Suite 900 N (Topeka)

1-866-305-5147

www.kancare.ks.gov

Medicare Information

1-800-MEDICARE

www.medicare.gov

U.S. Department of Health and Human Services

1-800-MEDICARE (1-800-633-4227)

1-877-486-2048 (TTY)

www.cms.hhs.gov

Senior Health Insurance Counseling for KS

510 West 29th, Suite B (Hays)

785-628-8204

800-432-7422

www.kdads.ks.gov

Medicare Part D Prescription Drug Insurance Counseling Senior Health Insurance Counseling for Kansas

350 S Range Ave Suite 16 (Colby)

785-460-4582

Mental Health Services

Alzheimer's Association

1-800-272-3900; 1-866-403-

3073 (TTY)

www.alz.org

Developmental Services of Northwest Kansas

1-800-637-2229

www.dsnwk.org

KS Alliance for Mentally Ill

785-233-0755

www.namikansas.org

Make a Difference (KDHE – Special Health Care Needs)

1-800-332-6262

www.kdheks.gov/shcn/index.htm

Mental Health America

1-800-969-6MHA (969-

6642)

www.mentalhealthamerica.net

National Alliance for the Mentally Ill

Helpline 1-800-950-NAMI

(950-6264)

703-516-7227 (TTY)

1-800-539-2660 (Kansas

NAMI office)

www.nami.org

National Institute of Mental Health

1-866-615-6464 or 1-866-

415-8051 (TTY)

www.nimh.nih.gov

National Library Services for Blind and Physically Handicapped

1-800-424-8567

www.loc.gov/nls/music/index.html

State Mental Health Agency

915 SW Harrison Street

(Topeka)

785-296-3959

www.dcf.ks.gov

Suicide Prevention Hotline

1-800-SUICIDE (784-2433)

<https://www.imalive.org/>

Nutrition

Eating Disorders Awareness and Prevention

1-800-931-2237

www.nationaleatingdisorders.org

American Dietetic Association Consumer

Nutrition Hotline 1-800-366-1655

American Dietetic

Association 1-800-877-1600

Kansas Department of Health and Environment

1000 SW Jackson, Suite 220

785-296-1320

<http://www.kansaswic.org/>

Department of Human Nutrition

119 Justin Hall

785-532-5508

www.he.k-state.edu/fndh/

Road and Weather Conditions

Kansas Road Conditions

1-866-511-KDOT or 5-1-1 from mobile

www.ksdot.org

Senior Services

Alzheimer's Association

1-800-487-2585

<http://www.alz.org/>

American Association of Retired Persons (AARP)

1-888-OUR-AARP

www.aarp.org

Americans with Disabilities Act Information Line

1-800-514-0301; 1-800-514-0383

<https://www.ada.gov/infoline.htm>

Area Agency on Aging

1-800-432-2703

Eldercare Locator

1-800-677-1116

Home Buddy

1-866-922-8339

www.homebuddy.org

Home Health Complaints

Kansas Department of Children & Families

1-800-842-0078

www.dcf.ks.gov

Kansas Advocates for Better Care Inc.

1-800-525-1782

www.kabc.org

Kansas Department for Aging & Disability Services

1-800-432-3535

785-291-3167 (TTY)

www.kdads.ks.gov

Kansas Foundation for Medical Care, Inc.

1-800-432-0770

Kansas Tobacco Use Quitline

1-866-KAN-STOP (526-7867)

www.kdheks.gov/tobacco/cesation.html

Older Kansans Employment Programs

785-296-7842

<https://kansascommerce.gov/997/Older-Kansans-Employment-Program>

Older Kansans Information Reference Sources on Aging

1-800-432-3535

Senior Health Insurance Counseling for Kansas

1-800-860-5260

<http://www.kdads.ks.gov/commissions/commission-on-aging/medicare-programs/shick>

Medicare Part D Prescription Drug Insurance Counseling Senior Health Insurance Counseling for Kansas

350 S Range Ave Suite 16 (Colby)

785-460-4582

Kansas Department for Aging & Disability Services

785-296-3959 or 785-296-1491 (TTY)

www.kdads.ks.gov

Federal Information Center

1-800-333-4636

www.usa.gov

Veterans

Kansas Commission on Veterans Affairs

1-800-513-7731

www.kcva.org

Veterans Administration

Veterans Administration Benefits

1-800-669-8477

Debt Management

1-800-827-0648

Benefits Information and Assistance

1-800-827-1000

Welfare Fraud Hotline

1-800-432-3913

Life Insurance Information and Service

1-800-669-8477

V. Detail Exhibits

[VVV Research & Development, LLC]

Patient Origin & Access

[VVV Research & Development, LLC]

2018 Patient Origin – Thomas Co



Kansas Hospital
ASSOCIATION

Inpatient Origin by County

Thomas, KS Residents Treated in KHA Reporting Area

Federal Fiscal Year: 2018

Detail																					
Hospital Detail by County				Pediatric		Adult Medical/Surgical								Psychiatric		Obstetric		Newborn			
				Age 0-17		Age 18-44		Age 45-64		Age 65-74		Age 75+									
Hospital Name	Rank	Total Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	Surg %
Citizens Health - Coby, KS	1	469	58.5%	15	3.2%	26	5.5%	104	22.2%	119	25.4%	195	41.6%	2	0.4%	5	1.1%	3	0.6%		5.8%
HaysMed, The University of Kansas Health System - Hays, KS	2	163	20.3%	0	0.0%	24	14.7%	36	22.1%	30	18.4%	47	28.8%	0	0.0%	14	8.6%	12	7.4%		46.0%
Ascension Via Christi Hospitals St. Francis - Wichita, KS	3	23	2.9%	0	0.0%	4	17.4%	9	39.1%	4	17.4%	6	26.1%	0	0.0%	0	0.0%	0	0.0%		43.5%
Wesley Healthcare - Wichita, KS	4	20	2.5%	6	30.0%	4	20.0%	5	25.0%	1	5.0%	3	15.0%	0	0.0%	1	5.0%	0	0.0%		55.0%
Kansas Residents/Nebraska Hospitals	5	19	2.4%	0	0.0%	0	0.0%	1	5.3%	9	47.4%	9	47.4%	0	0.0%	0	0.0%	0	0.0%		68.4%
Salina Surgical Hospital - Salina, KS	6	19	2.4%	0	0.0%	0	0.0%	8	42.1%	5	26.3%	6	31.6%	0	0.0%	0	0.0%	0	0.0%		100.0%
The University of Kansas Health System - Kansas City, KS	7	16	2.0%	1	6.3%	1	6.3%	10	62.5%	3	18.8%	1	6.3%	0	0.0%	0	0.0%	0	0.0%		68.8%
Salina Regional Health Center - Salina, KS	8	15	1.9%	1	6.7%	0	0.0%	2	13.3%	3	20.0%	5	33.3%	4	26.7%	0	0.0%	0	0.0%		6.7%
Goodland Regional Medical Center - Goodland, KS	9	13	1.6%	0	0.0%	1	7.7%	0	0.0%	1	7.7%	3	23.1%	0	0.0%	4	30.8%	4	30.8%		7.7%
St. Catherine Hospital - Garden City, KS	10	9	1.1%	0	0.0%	0	0.0%	1	11.1%	1	11.1%	0	0.0%	7	77.8%	0	0.0%	0	0.0%		0.0%
Children's Mercy Kansas City - Kansas City, MO	11	6	0.7%	6	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%		50.0%
Sheridan County Health Complex - Hoxie, KS	12	6	0.7%	0	0.0%	0	0.0%	3	50.0%	1	16.7%	2	33.3%	0	0.0%	0	0.0%	0	0.0%		0.0%
Rawlins County Health Center - Atwood, KS	13	5	0.6%	2	40.0%	0	0.0%	3	60.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%		0.0%
Graham County Hospital - Hill City, KS	14	3	0.4%	0	0.0%	0	0.0%	0	0.0%	3	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%		0.0%
Norton County Hospital - Norton, KS	15	2	0.2%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	50.0%	1	50.0%		0.0%
Rooks County Health Center - Plainville, KS	16	2	0.2%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	2	100.0%	0	0.0%	0	0.0%	0	0.0%		100.0%
St. Mary's Medical Center - Blue Springs, MO	17	2	0.2%	0	0.0%	2	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%		0.0%
AdventHealth Shawnee Mission - Shawnee Mission, KS	18	1	0.1%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%		100.0%
Edwards County Medical Center - Kinsley, KS	19	1	0.1%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%		0.0%
Gove County Medical Center - Quinter, KS	20	1	0.1%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%		0.0%
Greeley County Health Services - Tribune, KS	21	1	0.1%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%		0.0%
Kansas Residents/Illinois Hospitals	22	1	0.1%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%		0.0%
Kansas Residents/Iowa Hospitals	23	1	0.1%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%		0.0%
Kansas Residents/Minnesota Hospitals	24	1	0.1%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%		100.0%
Overland Park Regional Medical Center - Overland Park, KS	25	1	0.1%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%		0.0%
Stormont Val Health - Topeka, KS	26	1	0.1%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%		100.0%
Western Plains Medical Complex - Dodge City, KS	27	1	0.1%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%		100.0%
Overall		802	100.0%	31	3.9%	63	7.9%	184	22.9%	184	22.9%	280	34.9%	13	1.6%	27	3.4%	20	2.5%		22.1%

2017 Patient Origin – Thomas Co



Kansas Hospital
ASSOCIATION

Inpatient Origin by County

Thomas, KS Residents Treated in KHA Reporting Area

Federal Fiscal Year: 2017

Detail

Hospital Detail by County				Pediatric		Adult Medical/Surgical								Psychiatric		Obstetric		Newborn				
				Age 0-17		Age 18-44		Age 45-64		Age 65-74		Age 75+										
Hospital Name	Rank	Total Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Surg %
Citizens Health - Goby, KS	1	310	51.0%	5	1.6%	33	10.6%	79	25.5%	49	15.8%	131	42.3%	4	1.3%	3	1.0%	6	1.9%			9.0%
HaysMed, The University of Kansas Health System - Hays, KS	2	164	27.0%	0	0.0%	12	7.3%	62	37.8%	24	14.6%	37	22.6%	0	0.0%	19	11.6%	10	6.1%			41.5%
St. Catherine Hospital - Garden City, KS	3	18	3.0%	0	0.0%	3	16.7%	0	0.0%	3	16.7%	3	16.7%	7	38.9%	1	5.6%	1	5.6%			44.4%
Wesley Healthcare - Wichita, KS	4	18	3.0%	0	0.0%	0	0.0%	9	50.0%	2	11.1%	0	0.0%	0	0.0%	5	27.8%	2	11.1%			33.3%
Kansas Residents/Nebraska Hospitals	5	16	2.6%	0	0.0%	0	0.0%	5	31.3%	3	18.8%	8	50.0%	0	0.0%	0	0.0%	0	0.0%			75.0%
Salina Regional Health Center - Salina, KS	6	15	2.5%	0	0.0%	1	6.7%	6	40.0%	0	0.0%	5	33.3%	3	20.0%	0	0.0%	0	0.0%			46.7%
Salina Surgical Hospital - Salina, KS	7	13	2.1%	0	0.0%	0	0.0%	6	46.2%	4	30.8%	3	23.1%	0	0.0%	0	0.0%	0	0.0%			100.0%
Ascension Via Christi Hospitals St. Francis - Wichita, KS	8	11	1.8%	1	9.1%	2	18.2%	4	36.4%	1	9.1%	3	27.3%	0	0.0%	0	0.0%	0	0.0%			81.8%
The University of Kansas Health System - Kansas City, KS	9	10	1.6%	0	0.0%	0	0.0%	7	70.0%	1	10.0%	2	20.0%	0	0.0%	0	0.0%	0	0.0%			60.0%
Children's Mercy Kansas City - Kansas City, MO	10	8	1.3%	6	75.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	12.5%	1	12.5%			12.5%
Goodland Regional Medical Center - Goodland, KS	11	4	0.7%	0	0.0%	0	0.0%	1	25.0%	0	0.0%	1	25.0%	0	0.0%	1	25.0%	1	25.0%			25.0%
Gove County Medical Center - Quinter, KS	12	4	0.7%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	4	100.0%	0	0.0%			25.0%
Sheridan County Health Complex - Hoxie, KS	13	4	0.7%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	4	100.0%	0	0.0%	0	0.0%	0	0.0%			0.0%
Graham County Hospital - Hill City, KS	14	2	0.3%	0	0.0%	0	0.0%	2	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%			0.0%
Keamy County Hospital - Lakin, KS	15	2	0.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	50.0%	1	50.0%			0.0%
Memorial Health System - Abilene, KS	16	2	0.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	2	100.0%	0	0.0%	0	0.0%			0.0%
Kansas Residents/Minnesota Hospitals	17	1	0.2%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%			0.0%
Mitchell County Hospital Health Systems - Beloit, KS	18	1	0.2%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%			0.0%
North Kansas City Hospital - North Kansas City, MO	19	1	0.2%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%			100.0%
Research Medical Center - Kansas City, MO	20	1	0.2%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%			0.0%
Rooks County Health Center - Plainville, KS	21	1	0.2%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%			0.0%
The University of Kansas Health System Great Bend Campus - Great Bend, KS	22	1	0.2%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%			100.0%
Truman Medical Center Hospital Hill - Kansas City, MO	23	1	0.2%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%			0.0%
Overall		608	100.0%	12	2.0%	51	8.4%	181	29.8%	90	14.8%	198	32.6%	18	3.0%	36	5.9%	22	3.6%			26.6%

2016 Patient Origin – Thomas Co



Inpatient Origin by County

Thomas, KS Residents Treated in KHA Reporting Area

Federal Fiscal Year: 2016

Detail																					
Hospital Detail by County				Pediatric		Adult Medical/Surgical								Psychiatric		Obstetric		Newborn			
				Age 0-17		Age 18-44		Age 45-64		Age 65-74		Age 75+									
Hospital Name	Rank	Total Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%
Citizens Health - Colby, KS	1	382	55.3%	10	2.6%	41	10.7%	79	20.7%	44	11.5%	203	53.1%	1	0.3%	2	0.5%	2	0.5%	4.2%	
HaysMed, The University of Kansas Health System - Hays, KS	2	161	23.3%	0	0.0%	18	11.2%	44	27.3%	18	11.2%	45	28.0%	0	0.0%	19	11.8%	17	10.6%	49.7%	
Wesley Healthcare - Wichita, KS	3	19	2.7%	0	0.0%	8	42.1%	1	5.3%	0	0.0%	4	21.1%	0	0.0%	4	21.1%	2	10.5%	31.6%	
Kansas Residents/Nebraska Hospitals	4	18	2.6%	2	11.1%	1	5.6%	5	27.8%	5	27.8%	5	27.8%	0	0.0%	0	0.0%	0	0.0%	22.2%	
Salina Surgical Hospital - Salina, KS	5	18	2.6%	0	0.0%	0	0.0%	10	55.6%	3	16.7%	5	27.8%	0	0.0%	0	0.0%	0	0.0%	100.0%	
Ascension Via Christi Hospitals St. Francis - Wichita, KS	6	17	2.5%	1	5.9%	4	23.5%	10	58.8%	1	5.9%	1	5.9%	0	0.0%	0	0.0%	0	0.0%	58.8%	
Goodland Regional Medical Center - Goodland, KS	7	15	2.2%	0	0.0%	0	0.0%	0	0.0%	1	6.7%	5	33.3%	0	0.0%	5	33.3%	4	26.7%	13.3%	
Gove County Medical Center - Quinter, KS	8	8	1.2%	0	0.0%	0	0.0%	0	0.0%	2	25.0%	1	12.5%	0	0.0%	5	62.5%	0	0.0%	25.0%	
Salina Regional Health Center - Salina, KS	9	7	1.0%	0	0.0%	0	0.0%	1	14.3%	1	14.3%	1	14.3%	3	42.9%	1	14.3%	0	0.0%	14.3%	
The University of Kansas Health System - Kansas City, KS	10	7	1.0%	0	0.0%	0	0.0%	7	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	57.1%	
St. Catherine Hospital - Garden City, KS	11	6	0.9%	0	0.0%	4	66.7%	0	0.0%	0	0.0%	0	0.0%	2	33.3%	0	0.0%	0	0.0%	33.3%	
Menorah Medical Center - Overland Park, KS	12	4	0.6%	0	0.0%	1	25.0%	1	25.0%	0	0.0%	2	50.0%	0	0.0%	0	0.0%	0	0.0%	0.0%	
Norton County Hospital - Norton, KS	13	4	0.6%	0	0.0%	4	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0.0%	
Logan County Hospital - Oakley, KS	14	3	0.4%	0	0.0%	0	0.0%	0	0.0%	1	33.3%	2	66.7%	0	0.0%	0	0.0%	0	0.0%	0.0%	
Stormont Val Health - Topeka, KS	15	3	0.4%	0	0.0%	2	66.7%	0	0.0%	0	0.0%	0	0.0%	1	33.3%	0	0.0%	0	0.0%	0.0%	
Ascension Via Christi Hospital Manhattan - Manhattan, KS	16	2	0.3%	0	0.0%	0	0.0%	2	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0.0%	
Ascension Via Christi Hospital St. Teresa - Wichita, KS	17	2	0.3%	0	0.0%	0	0.0%	1	50.0%	0	0.0%	1	50.0%	0	0.0%	0	0.0%	0	0.0%	0.0%	
Jewell County Hospital - Mankato, KS	18	2	0.3%	0	0.0%	0	0.0%	2	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0.0%	
Kansas Residents/Illinois Hospitals	19	2	0.3%	0	0.0%	0	0.0%	2	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	100.0%	
LMH Health - Lawrence, KS	20	2	0.3%	0	0.0%	2	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0.0%	
The University of Kansas Health System Great Bend Campus - Great Bend, KS	21	2	0.3%	0	0.0%	0	0.0%	0	0.0%	2	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	100.0%	
Greenwood County Hospital - Eureka, KS	22	1	0.1%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0.0%	
Kansas Residents/Minnesota Hospitals	23	1	0.1%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0.0%	
Memorial Health System - Abilene, KS	24	1	0.1%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0.0%	
Ravins County Health Center - Atwood, KS	25	1	0.1%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0.0%	
Scott County Hospital - Scott, KS	26	1	0.1%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0.0%	
Sheridan County Health Complex - Hoxie, KS	27	1	0.1%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0.0%	
The University of Kansas Health System St. Francis Campus - Topeka, KS	28	1	0.1%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	100.0%	
Overall		691	100.0%	13	1.9%	86	12.4%	166	24.0%	81	11.7%	276	39.9%	8	1.2%	36	5.2%	25	3.6%	21.7%	

b) Community Attendees, Notes, & Feedback

[VVV Consultants LLC]

Citizens Medical Center, Inc.

CMC

Citizens Medical Center

100 E. College Drive
Colby, KS 67701-3799
(785) 462-7511
(785) 460-4870 Fax



FCHC

Family Center for Health Care

310 E. College Drive
Colby, KS 67701-3799
(785) 462-6184
(785) 460-1490 Fax



PSLC

Prairie Senior Living Complex

1625 S. Franklin Avenue
Colby, KS 67701-3799
(785) 462-8295
(785) 460-1435 Fax



Thomas County Health Care Collaborators

Established March 2018

NAME	ORGANIZATION	E-mail
Carla Brown	Carla Sloan-Brown, LMLP Couples Therapy	carlasloanbrown@gmail.com
Carol Bonebrake	CMCI	cbonebrake@cmci.com
Carolyn Kasdorf	Colby Community College	carolyn.kasdorf@colbycc.edu
Chelston Ketting	Thomas County Sheriff	cketting@thomascountyks.gov
Denise Singer	Child Care Aware	denises@ks.childcareaware.org
Denise Voss		
Don Marton	Thomas County EMS	dmorton@thomascountyks.gov
Elaine Ptacek	Heartland Rural Counseling Services	heartland@st-tel.net
Emily Strange	Thomas County Health Department	estrangle@thomascountyks.gov
Francis Britton	Thomas County Commissioner	fbritton@st-tel.net
Greg Unruh	CMCI	gunruh@cmci.com
Carla Sharp	Options	carla@help4abuse.org
Jessica Scherfick	High Plains Mental Health Center	Jessica.scherfick@hpmhc.com
Jolene Hansen	Rexford	Johans@juno.com
Katina Brenn	Colby Public Schools	kbrenn@colbyeagles.org
Kathy Kersenbrock	NWKS Educational Service Center	kko@nkesc.org
Mary Ellen Welshon	USD 316	mewelshon@usd316.org
Megan Carmichael	CMCI	mcarmichael@cmci.com
Michaela Kaus	Thomas County Attorney Office	Legal2@thcoatty.com
Mike Baughn	Thomas County Commissioner	mbaughn@thomascountyks.gov
Mike Schultz	City of Brewster	brewsterks@st-tel.net
Misty Jimerson	Thomas County Health Department	mjimerson@thomascountyks.gov
Randy Smith	Palace Drug Store	randyrsmith@gmail.com
Shelly Harms	Thomas County Clerk Office	sharms@thomascountyks.gov
Sheryl Carson	Thomas County Research & Extension	scarson@ksu.edu
Sue Evans	Thomas County Coalition	suevans@st-tel.net
Shelly Angelos	USD 314	shelly.angelos@usd314.com
Travis Rickford	Thomas County Coalition – Live Well	travisr@nwksprevention.com
Tyson McGreer	City of Colby	manager@cityofcolby.com
Virginia Hopper	Senior Legislative Representative – Thomas County	Bugdrover35@gmail.com

Judy Johnson 316-293-1861

jjohnston@kumc.edu

c) Public Notice & Requests

[VVV Consultants LLC]



Citizens Medical Center, Inc.
100 E. College Drive
Colby, KS 67701
785-462-6184



Thomas County Health Department
350 S Range Ave
Colby, KS 67701
785-460-4596

FOR IMMEDIATE RELEASE

CITIZENS MEDICAL CENTER, INC. AND THOMAS COUNTY HEALTH DEPARTMENT TO COMPLETE COMMUNITY HEALTH NEEDS ASSESMENT

Citizens Medical Center, Inc. (CMCI) and the Thomas County Health Department have joined forces to complete a Thomas County Community Health Needs Assessment (CHNA). Although the assessment is a requirement for CMCI set forth by the Patient Protection and Affordable Care Act, the completion of the survey goes well beyond that. The CHNA is a systematic way of identifying needs and resources by gathering statistical data, soliciting perspectives of community members, & by collecting information about community resources. The data collected from the assessment will provide insight into our community context and ensure that interventions will be designed, planned, and carried out in a way that maximizes benefit to the community. The results will also guide us in where to focus resources and interventions (programs, policies, and environmental changes).

On May 30, 2018, CMCI and Thomas County Health Department held a community stakeholder meeting (Thomas County Health Care Collaborators) to discuss the assessment process for Thomas County. The stakeholders will continue to meet to advise CMCI and the health department on next steps. Stakeholders represented are from Brewster, Colby and Rexford. CMCI brought in Judy Johnston, a Research Instructor from KU School of Medicine – Wichita, to assist in the assessment process. Judy has implemented a similar assessment in three other counties which had amazing response rates. We feel hopeful and confident that Thomas County will be just as successful. An opinion survey is being developed to hand deliver to residents of Thomas County. We are recruiting volunteers from all areas of Thomas County to help us in this effort. If you are interested in volunteering please contact Misty Jimerson at Thomas County Health Department, 785-460-4596 or Megan Carmichael at Citizens Medical Center, Inc., 785-460-1214.

Our goal is to survey 80% of Thomas County residents and to keep you updated throughout the process. One person per household is asked to fill out the 10 minutes or less survey. Be on the lookout for more information about when and how you can complete this 10 minute survey. The information that we collect from the opinion survey will help our entire county.

It is going to take more than the health system to produce healthy children and adults.

It is going to take more than the school system to produce children succeeding in school.

It is going to take more than the police department to produce safe communities.

It will, in fact, take partnerships made up of many different players from across the community's public and private sectors to produce a community that offers the resources needed to live a safe and healthy life.

#

CFP Briefly / Chamber Newsletter / Tri-State Radio

Message: Citizens Medical Center, Inc. and the Thomas County Health Department will be conducting a Thomas County Health Needs Assessment. One person from each Thomas County residence will be asked to complete a survey to help determine where to focus resources and programming for the county. Survey Collectors will begin distributing surveys on July 15th and will continue until the end of August. For questions contact Megan at 785-460-1214 or Misty at 785-460-4596.

TCC Sign

COMPLETE THE HEALTH NEEDS
ASSESSMENT FOR A BETTER TOMORROW

Flyer (Attached)

Post on: Marlin, Facebook, Website, Display at FCHC & CMC

Radio

Citizens Medical Center, Inc. and the Thomas County Health Department will be conducting a Thomas County Health Needs Assessment. This survey will show our county's strengths and weaknesses and will help us in determining where to focus resources and programs for the future. One person from each Thomas County residence will be asked to complete a survey. Survey Collectors will begin distributing the surveys July 15th and will continue until the end of August. For questions contact Megan at CMC or Misty at the health department. Be sure to take the survey for a better tomorrow!

FLYER

Looking to earn some extra money and help out the community! Here is your chance!

Sign up to be a survey collector volunteer for the upcoming Community Health Needs Assessment and earn up to \$4,000! This is a great opportunity for individuals or fundraising groups to earn some extra cash (Lions Club, Rotary, Churches, Sports groups, etc.). Volunteers can earn:

- ☐ \$100 for 50 surveys completed
- ☐ \$250 for 100 surveys completed
- ☐ \$700 for 250 surveys completed
- ☐ \$2,000 for 1,000 surveys completed
- ☐ Plus prizes & more!

So what is the Community Health Needs Assessment (CHNA)? The CHNA is a survey for Thomas County residents to complete to help key stakeholders in identifying our needs and resources. The survey will provide insight into our community needs and ensure that interventions will be designed, planned, and carried out in a way that maximizes benefit to the community. The results will also guide us in where to focus resources and interventions (programs, policies, and environmental changes).

To become a volunteer, you must be 18yrs or older and attend a 1hr training class to be held during the week of July 9th (dates/times TBD).

To sign up or for questions, contact Megan Carmichael with Citizens Medical Center, Inc. at 785-460-1214 or Misty Jimerson with the Thomas County Health Department at 785-460-4596

d) Primary Research Detail

Neighborhood Roundtables & Online Research

[VVV Consultants LLC]

Community Health Needs Assessment Focus Group Analysis

9 Sectors:

1. Healthcare
2. Public Health
3. Worksite
4. Daycare
5. Schools
6. Faith
7. K-State Research & Extension
8. Community Environment
9. Behavioral

The top “Most Wanted Resources” has been identified in each sector. The Focus Group Analysis reviews each of the top most wanted resources with recommendations.

Sector # 1: Healthcare

Most Wanted Resources:

1. High Risk OB Care
2. Weight Management
3. Dementia/Alzheimer’s Disease Care & Support for the Caregiver
4. After-Hours Non-Emergency Care
5. Chronic Disease Self-Management
6. Emotional Well-Being Support Services

Recommendations:

High Risk OB Care:

1. Evaluate new high-risk OB care procedures every 6 months
2. Use evaluation data on cost savings, number of transfers, etc. to make the case for why our system is good for the region
3. Promote high-risk OB care services widely to increase acceptance and use

Weight Management:

A. Coaching

1. Identify multiple channels to provide general weight management tools: 1 on 1 coaching, support groups, virtual tools
2. Promote multiple options, including costs associated with each
3. Propose behavior accountability tools that can be used by individuals

4. Make weight management resources available to clinic staff for use with patients
- B. Groups
 1. Encourage weight management support groups by providing written & virtual information on nutrition & physical activity to keep people engaged over time
 2. Propose behavior accountability tools that can be used by both individuals & groups
 - C. Prepared Meals or Supplements
 1. Don't provide weight management programs that involve specific supplements or meal replacements
 - D. Online & Virtual Resources
 1. Brand online weight management resources to document credibility & only propose evidence based strategies
 - E. Physical Activity
 1. Partner w/ community businesses & agencies to identify physical activity resources & events in the county
 2. Partner w/ community businesses & agencies to plan, develop, & promote additional physical activity opportunities
 - F. Community Leadership
 1. In other smaller communities, identify a civic organization or faith community to take the lead in engaging residents in weight management
 2. Provide ongoing support to the leadership in the form of written & online resources

Dementia/Alzheimer's Disease Care & Support for the Caregiver:

1. Identify or develop expertise among clinic staff to screen for Alzheimer's Disease & dementia & refer to regional resources
 2. Increase understanding of Alzheimer's disease and dementia, including early identification & prevention, among community members through regularly scheduled edu. sessions, written, & online materials provided in collaboration with local partners.
 3. Emphasize removing the stigma of the disease
- A. Education & Support
 1. Identify or create resources to support caregivers
 2. Promote existing & new resources to provide care for people with Alzheimer's or dementia & their caregivers
 3. In other smaller communities, identify a civic organization or faith community to take the lead in hosting events or watch parties to view webinars on detection, prevention, & management. Also to host support groups for caregivers with education & activities
 4. Investigate availability & cost of Caring for Caregivers training through K-State Research & Extension

After-Hours Non-Emergency Care:

1. Promote current walk-in clinic hours & how best to use them
2. Create a simple checklist to help people determine when they should go to the ED vs. the clinic or simply call their PCP
3. Encourage clinic staff & HR directors in worksites to education individuals about how to use their healthcare options
4. Coordinate education with worksites to help their HR & management staff adopt policies that help rather than penalize staff who take time off to keep doctor's appointments rather than going to ER
5. Develop marketing messages specific to agricultural staff to encourage self-care
6. Educate agricultural workers on the fact they have higher risk injury, some chronic diseases, and behavioral health issues as a byproduct of their profession & what resources exist to address the risks
7. Provide Tele-Medicine to provide access to specialist who are not available in the community
8. Promote Tele-Medicine as a viable option for busy people
9. Develop & promote regular health self-care activities focused on men
10. Work with worksites & agencies to provide incentives to men who participate in self-care

Chronic Disease Self-Management:

1. Develop written, face-to-face, & online resources for different age groups that educate them about preventative services and why they are important, insurance coverage for preventative services, and how the healthcare system is changing to make individuals more responsible for their health
2. Investigate options for implementing the CDSMP or a similar program through a collaborative effort involving CH, K-State, Health Department, and others.

Well-Being Support:

1. Identify worksites in Thomas County that offer EAPs for their employees and encourage them to educate their employees on what it is, how to use it, and why it is valuable
2. Encourage worksites that do not offer EAPs to employees to consider adding that benefit to their insurance plan when they renew it
3. Normalize the concept of behavioral wellness versus mental health to reduce stigma
4. Provide Mental Health First Aid training for adults and youth throughout the county

Sector # 2: Public Health

Most Wanted Resources:

1. Environmental Health Monitoring
2. Communicable Disease Investigation
3. Community Water Fluoridation – No Recommendation Given
4. Health Education

Recommendations:**Environmental Health Monitoring:**

1. Develop a concise laminated guide for consumers that lists all environmental testing/monitoring including: when & why to test, testing resources/instructions, mitigation resources & costs, then distribute through multiple channels
2. Educate consumers through brief news articles in the newspaper, newsletters, & online regarding importance of environmental monitoring
3. Explore options for leftover drugs then promote

Communicable Disease Investigations:

1. Educate consumers through news articles, newsletters, & online regarding systems that are in place to investigate communicable diseases

Education on Health Topics:

1. Coordinate health education resources among hospital, health department, extension, and promote widely

Sector # 3: Worksites**Most Wanted Resources:**

1. Access to exercise facilities at work
2. Incentives for practicing healthy behaviors
3. Employee Assistance Program
4. Community-Supported Agriculture – No Recommendation Given
5. Access to healthy food options at work
6. Employee wellness program

Recommendations:**Access to Exercise Facilities at Work:**

1. Inventory workout options (classes, personal trainers, weights, track, etc.) available in the county and discuss potential options for reduced costs or worksite subsidies for employees with facilities' owners/managers.
2. Coordinate with local gyms and worksites to offer subsidized or reduced memberships for employees, coupled with monitoring of use as a requirement.

Incentives for Practicing Healthy Behaviors:

1. Survey employers to determine what, if any, incentives they offer to employees for health and wellness activities, ideas for incentives that they believe employees would prefer, and incentives that might be feasible for them to implement.

Employee Assistance Program:

1. Educate employees about EAP benefits available and how to access them

Access to healthy food options at work:

1. Coordinate with Workwell Kansas to disseminate recommendations for healthy vending options at worksites.

Employee Wellness Program:

1. Explore resources to provide education to HR directors in Thomas County regarding health and wellness screening benefits and wellness programs, including EAPs, that might be available to them when negotiating new insurance contracts.

Sector # 4: Daycare/Preschool

Most Wanted Resources:

1. Access to child care in evenings & on weekends
2. Access to child care for children with special needs
3. Gardening activities at child care/pre-school
4. Access to quality/affordable child care
5. Health & parenting education for kids & parents of kids at child care/preschool

Recommendations:

Access to child care in evenings & on weekends:

1. Assess need for second and third shift and weekend childcare among employers in Colby to determine actual need and the impact of not having that childcare available on their workforce.

Access to child care for children with special needs:

1. Promote existing resources (childcare and others) for children with special needs with an emphasis on how to access services and costs.
2. Provide a graphic matrix of services for children with special needs to healthcare providers so that they can easily identify what services are available and make appropriate referrals

Gardening activities at child care/pre-school:

1. Work with Master Gardeners' program to identify and/or develop gardening resources for use by child care providers

Access to quality/affordable child care:

1. Develop a group for child care providers in Thomas County that includes educational opportunities, sharing, and fellowship.
2. Due to the shortage of childcare providers and expected retirement of providers in the next few years, work with the college to develop training programs for child care providers and nannies to meet the need.
3. Identify community leaders who are willing to collaborate to articulate the needs of Thomas County related to early childcare and education to state and national legislators/policy-makers, so that the unique needs of rural communities are considered in policy-making, and state-level strategies are identified to address the shortage of quality providers in rural communities.
4. Share focus group data on ideal child care features with care providers in Thomas County

Health & parenting education:

1. Form a subcommittee of Live Well Northwest Kansas to plan and provide a variety of educational and activity-focused events for parents and their children throughout the year that are jointly sponsored by partner organizations.

Sector # 5: Schools

Most Wanted Resources:

1. Behavioral Health Services
2. Psychological Testing & Counseling
3. Smoking Cessation
4. Walking School Bus – No Recommendation Given
5. Psychological Counseling – No Recommendation Given

Recommendations:

Behavioral Health Services:

1. Evaluate existing mental health resources in all levels of schools, assessing prevention, identification, counseling, and referral policies and staffing and make recommendations for improvement.
2. Evaluate parent services related to children's mental/behavioral health for all ages and expand as needed.

Psychological Testing & Counseling

1. Educate community members regarding the entire special education system so that they better understand what each "circle" includes and how they are best able to utilize it appropriately for their children.

Smoking Cessation

1. Educate community members (adults and youth) regarding latest research on vaping.
2. Engage youth in community education on vaping.
3. Identify community resources for smoking/vaping cessation for youth and adults.

Sector # 6: Faith

Most Wanted Resources:

1. Community Garden
2. Health Education
3. Health Screenings

Recommendations:

Community Garden:

1. Develop infrastructure & guidelines, share/promote information, and evaluate success.
2. Identify & engage multiple community partners. Bring in garden mentors.

Health Education:

1. Develop a collaborative effort among hospital, health department, & extension to develop a list of health education resources & disseminate to churches.

Health Screenings:

1. Make churches aware of opportunities for low-cost screenings in the community.
2. Revitalize the ministerial alliance to provide networking & social support and to coordinate efforts.

Sector # 7: K-State Research & Extension

Recommendations:

1. Offer variety of resources including budgeting, financial literacy, time management, goal setting, and emotional well-being.
2. Identify efforts to increase bandwidth to better support virtual resources
3. Recruit & train facilitators
4. Offer programs in a variety of formats
5. Consider themes to create a coordinated plan then assume responsibility for different parts

Sector # 8: Community Environment

Most Wanted Resources:

1. Camping facilities
2. Biking trails
3. Community-supported agriculture
4. Food & Farm Council

Recommendations:

Camping Facilities

1. Evaluate options for temporary housing & use of campgrounds
2. Develop weather safety plan for those without shelter
3. Identify strategies to work with companies with temporary employers so they don't utilize ER for primary care.

Biking Trails

1. Evaluate connectivity of trails
2. Evaluate walk/bikability & set timeline for master plan

Sector # 9: Behavioral

Factors that contribute to mental/behavioral health problems:

1. Stigma
 - a. Recruit PCPs to participate in education
2. Lack of resources
 - a. Identify partners & strategies
 - b. Engage police in identifying needs
 - c. Explore options for PCPs to educate
 - d. Develop relationship with High Plains
 - e. Engage faith communities
 - f. Offer mental health first aid



Citizens Health Medical Providers
Community Health Needs Assessment Focus Group Meetings

Last year we conducted the Community Health Needs Assessment survey. We collected over 1,400 surveys gathering responses from 50% of the Thomas County households. Now that the data has been collected, we will be holding CHNA Focus Groups to review and discuss the data. Like the survey, the focus groups have been broken into sectors:

- | | |
|----------------------|----------------------------|
| 1. Healthcare | 2. Community Environment |
| 3. Behavioral Health | 4. Public Health |
| 5. Faith | 6. Thomas County Extension |
| 7. Schools | 8. Childcare/Preschool |
| 9. Work site | |

Two focus groups will be held for each sector (schedule below & attached with topic details). We invite you to attend any of the focus groups that are of interest to you. It is important that we hear feedback from the community to assist in our efforts to provide meaningful programs and services for our area. We also encourage you to share this with your family and friends. To sign up for one of the meetings, please contact Megan at: mcarmichael@cmicks.com. In your email please include your selected meeting/s time & date.

Thank you,
Greg Unruh

FOCUS GROUP SCHEDULE			
DATE	SECTOR	TIME	LOCATION
Wednesday, March 20th	Child Care/Pre-School	7:30-9am	CMC Board Room *breakfast
Wednesday, March 20th	Healthcare	1-2:30p	CMC Board Room
Thursday, March 21st	Worksite	7-8:30am	CMC Board Room *breakfast
Thursday, March 21st	Th.Co. Extension	10-11:30am	Pioneer Memorial Library basement
Thursday, March 21st	Faith	1:30-3pm	CMC Board Room
Friday, March 22nd	Behavioral Health	8-9:30am	CMC Board Room *breakfast
Friday, March 22nd	Schools	12-1:30pm	CMC Board Room *lunch
Monday, March 25th	Healthcare	1:30-3pm	CMC Conference Room
Monday, March 25th	Community Env.	4-5:30pm	CMC Board Room
Monday, March 25th	Childcare/Pre-School	6-7:30pm	CMC Board Room *dinner
Tuesday, March 26th	Community Env.	8-9:30am	CMC Board Room *breakfast
Tuesday, March 26th	Faith	10-11:30pm	CMC Board Room
Tuesday, March 26th	Public Health	2-3:30pm	CMC Board Room
Tuesday, March 26th	Schools	4-5:30pm	CMC Board Room
Wednesday, March 27th	Tho. Co. Research & Ex.	8-9:30am	CMC Board Room *breakfast
Wednesday, March 27th	Worksite	10-11:30am	CMC Board Room
Wednesday, March 27th	Cross-Sector Behavioral	12-1:30pm	CMC Conference Room *lunch

Detail Primary Research Primary Service Area

[VVV Research & Development, LLC]

Thomas County Community Health and Wellness Environment Survey –

Community where you live (check one): ☐ Colby ☐ Brewster

☐ Gem ☐ Menlo ☐ Mingo ☐ Levant ☐ Rexford

☐ Other Community in Thomas County ☐ Rural area of Thomas County

1. Please select one (1) definition of health/wellness that you prefer from the list below:

☐ Health/wellness is the lack of disease.

☐ Health/wellness is a state of best physical, mental and social welfare and not just the lack of disease.

☐ Health/wellness is an active, lasting process of becoming aware of choices and making decisions toward a more satisfying life.

☐ Health/wellness is the state of being strong, undamaged, or whole, in body, mind, or soul; especially, the state of being free from physical disease or pain.

☐ I don't know

☐ I prefer not to answer

2. My health/wellness is affected by the environments where I live, learn, work, play and pray.

☐ I totally agree ☐ I partially agree ☐ I disagree

☐ I'm unsure ☐ I prefer not to answer

3. My personal choices affect how healthy/well I am.

☐ I totally agree ☐ I partially agree ☐ I disagree

☐ I'm unsure ☐ I prefer not to answer

4. The healthcare system has control over my health/wellness.

☐ I totally agree ☐ I partially agree ☐ I disagree

☐ I'm unsure ☐ I prefer not to answer

5. In Column 1, mark all of the healthcare services you think can be found in your county. In Column 2, mark all of the healthcare services that are not found in your county but you wish were found there.

Found Wanted

☐ ☐ Acute hospital care

☐ ☐ After-hours non-emergency care

☐ ☐ Ambulance service

☐ ☐ Assisted living communities

☐ ☐ Behavioral health services (integrated diagnosis and treatment of mental health, substance abuse, and associated physical disorders)

☐ ☐ Breastfeeding support

☐ ☐ Chronic disease self-management/Kansans Optimizing Health

☐ ☐ Dementia/Alzheimer's disease care

☐ ☐ Dental screening

☐ ☐ Developmental Check-up (age 0-5 speech, vision, hearing, & dental)

☐ ☐ Domestic violence prevention & support

☐ ☐ Emotional well-being support services

Questions continued on the back of this page

Found Wanted

- | | |
|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> Preventive dental services |
| <input type="checkbox"/> | <input type="checkbox"/> Restorative dental services |
| <input type="checkbox"/> | <input type="checkbox"/> Diabetes prevention support |
| <input type="checkbox"/> | <input type="checkbox"/> Diabetes management support |
| <input type="checkbox"/> | <input type="checkbox"/> Drug and alcohol abuse treatment |
| <input type="checkbox"/> | <input type="checkbox"/> Early Detection Works program (mammography for uninsured women) |
| <input type="checkbox"/> | <input type="checkbox"/> Emergency care |
| <input type="checkbox"/> | <input type="checkbox"/> Hospice care |
| <input type="checkbox"/> | <input type="checkbox"/> High-risk obstetrical (pregnancy) care |
| <input type="checkbox"/> | <input type="checkbox"/> Preventive care (immunizations, disease screening, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> Medical equipment resources |
| <input type="checkbox"/> | <input type="checkbox"/> Mental health services |
| <input type="checkbox"/> | <input type="checkbox"/> In-home care |
| <input type="checkbox"/> | <input type="checkbox"/> Nursing home care |
| <input type="checkbox"/> | <input type="checkbox"/> Nutrition/diet counseling |
| <input type="checkbox"/> | <input type="checkbox"/> Obstetrical/prenatal (pregnancy) care |
| <input type="checkbox"/> | <input type="checkbox"/> Physical exams required for admission to school, pre-school, and daycare |
| <input type="checkbox"/> | <input type="checkbox"/> Physical exams for sports |
| <input type="checkbox"/> | <input type="checkbox"/> Physical therapy |
| <input type="checkbox"/> | <input type="checkbox"/> Sexual violence prevention & support |
| <input type="checkbox"/> | <input type="checkbox"/> Substance abuse prevention & support |
| <input type="checkbox"/> | <input type="checkbox"/> Support for caregivers |
| <input type="checkbox"/> | <input type="checkbox"/> Weight management coaching |
| <input type="checkbox"/> | <input type="checkbox"/> Family medicine clinic |
| <input type="checkbox"/> | <input type="checkbox"/> Health information and advisory services |
| <input type="checkbox"/> | <input type="checkbox"/> Don't know |

6. In Column 1, mark all of the public health services you think can be found in your county. In Column 2, mark all of the public health services that are not found in your county but you wish were found there.

Found Wanted

- | | |
|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> Breastfeeding support |
| <input type="checkbox"/> | <input type="checkbox"/> Communicable disease investigation |
| <input type="checkbox"/> | <input type="checkbox"/> Community water fluoridation |
| <input type="checkbox"/> | <input type="checkbox"/> Environmental health monitoring (air, water, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> Family planning |
| <input type="checkbox"/> | <input type="checkbox"/> Health education (classes on health topics) |
| <input type="checkbox"/> | <input type="checkbox"/> Health screening (blood pressure, blood sugar, height and weight) |
| <input type="checkbox"/> | <input type="checkbox"/> Healthy Start program to support pregnant women and families with babies |
| <input type="checkbox"/> | <input type="checkbox"/> Immunizations |

Found	Wanted
-------	--------

- | | |
|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> Physical exams required for admission to school, pre-school, and daycare |
| <input type="checkbox"/> | <input type="checkbox"/> Sexually Transmitted Disease (STD)/Sexually Transmitted Infections (STI) information |
| <input type="checkbox"/> | <input type="checkbox"/> Sexually Transmitted Disease (STD)/Sexually Transmitted Infections (STI) testing |
| <input type="checkbox"/> | <input type="checkbox"/> Sexually Transmitted Disease (STD)/Sexually Transmitted Infections (STI) treatment |
| <input type="checkbox"/> | <input type="checkbox"/> Tuberculosis testing |
| <input type="checkbox"/> | <input type="checkbox"/> Tuberculosis treatment |
| <input type="checkbox"/> | <input type="checkbox"/> WIC (Special Supplemental Nutrition Program Women, Infants, & Children) |
| <input type="checkbox"/> | <input type="checkbox"/> Don't know |

7. Do you or any member of your household currently work at a job outside the home?

- ☐ Yes
 ☐ No
 ☐ Don't know
 ☐ Prefer not to answer

If no, "Don't know", or "Prefer not to answer" skip this question and go to question #8.

If yes, In Column 1, mark all of the work site health/wellness resources you think can be found in your workplace. In Column 2, mark all of the work site health/wellness resources that are not found in your workplace but you wish were there.

Found	Wanted
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- | | |
|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> Access to exercise facilities at work |
| <input type="checkbox"/> | <input type="checkbox"/> Access to healthy food options at work |
| <input type="checkbox"/> | <input type="checkbox"/> Breastfeeding support through access to private breastfeeding spaces at work |
| <input type="checkbox"/> | <input type="checkbox"/> Community Supported Agriculture ("subscription" service to buy local seasonal food directly from a local farmer) |
| <input type="checkbox"/> | <input type="checkbox"/> Employee wellness program |
| <input type="checkbox"/> | <input type="checkbox"/> Health education (classes on health topics) |
| <input type="checkbox"/> | <input type="checkbox"/> Health insurance |
| <input type="checkbox"/> | <input type="checkbox"/> Incentives for practicing healthy behaviors (insurance discounts, gift cards, free items) |
| <input type="checkbox"/> | <input type="checkbox"/> Safety and ergonomics assessments |
| <input type="checkbox"/> | <input type="checkbox"/> Stop-smoking support |
| <input type="checkbox"/> | <input type="checkbox"/> Dental insurance |
| <input type="checkbox"/> | <input type="checkbox"/> Employee Assistance Program (provides free and confidential assessments, short-term counseling, referrals, and follow-up services to help employees deal with issues that affect their emotional well-being) |
| <input type="checkbox"/> | <input type="checkbox"/> Smoke-free environment (no designated smoking areas, no smoking tobacco or chewed tobacco products or e-cigarettes allowed on worksite property including in vehicles) |
| <input type="checkbox"/> | <input type="checkbox"/> Tobacco-free environment (no tobacco of any kind may be used on property) |
| <input type="checkbox"/> | <input type="checkbox"/> Health risk appraisals with feedback |
| <input type="checkbox"/> | <input type="checkbox"/> Flexible work schedule |
| <input type="checkbox"/> | <input type="checkbox"/> Don't know |

Questions continued on the back of this page

8. Is any member of your household currently attending a day care or preschool of any kind (center or in-home care)?

☐ Yes ☐ No ☐ Don't know ☐ Prefer not to answer

If no, "Don't know", or "Prefer not to answer" skip this question and go to question #9.

If yes, in Column 1, mark all of the preschool/daycare resources you think can be found in your county. In Column 2, mark all of the preschool/daycare resources that are not found in your county but you wish were there.

Found Wanted

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Access to quality, affordable child care |
| <input type="checkbox"/> | <input type="checkbox"/> | Access to child care in the evenings, nights and on weekends |
| <input type="checkbox"/> | <input type="checkbox"/> | Access to child care for children with special needs |
| <input type="checkbox"/> | <input type="checkbox"/> | Access to quality, affordable pre-school |
| <input type="checkbox"/> | <input type="checkbox"/> | Access to healthy foods at child care/pre-school (healthy meals & snacks served) |
| <input type="checkbox"/> | <input type="checkbox"/> | Limited or no access to sugar-sweetened foods and beverages at child care/pre-school |
| <input type="checkbox"/> | <input type="checkbox"/> | Access to physical activity opportunities at child care/pre-school throughout the day |
| <input type="checkbox"/> | <input type="checkbox"/> | Breastfeeding support at child care/pre-school (e.g., use of pumped breast milk) |
| <input type="checkbox"/> | <input type="checkbox"/> | Dental screening |
| <input type="checkbox"/> | <input type="checkbox"/> | Developmental Check-up (age 0-5 speech, vision, hearing, & dental) |
| <input type="checkbox"/> | <input type="checkbox"/> | Gardening activities at child care/pre-school |
| <input type="checkbox"/> | <input type="checkbox"/> | Health education for kids at child care/pre-school |
| <input type="checkbox"/> | <input type="checkbox"/> | Health and parenting education for parents at child care/pre-school |
| <input type="checkbox"/> | <input type="checkbox"/> | Smoke free environment (No smoking allowed on daycare/preschool property) |
| <input type="checkbox"/> | <input type="checkbox"/> | Tobacco-free environment (no tobacco of any kind may be used on daycare/ preschool property) |
| <input type="checkbox"/> | <input type="checkbox"/> | Don't know |

9. Is any member of your household currently going to grade school, middle school/junior high school, or high school?

☐ Yes ☐ No ☐ Don't know ☐ Prefer not to answer

If no, "Don't know", or "Prefer not to answer" skip this question and go to question #10.

If yes, check school/school district attended: ☐ USD 314 Brewster ☐ USD 315 Colby

☐ USD 316 Golden Plains ☐ USD 274 Oakley ☐ USD 275 Triplains

☐ Heartland Christian School ☐ Sacred Heart School ☐ Home Schooled

If yes, in Column 1, mark all of the resources for school-age children and youth you think can be found in your county. In Column 2, mark all of the resources for school-age children and youth that are not found in your county but you wish were found there.

Found Wanted

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Access to healthy foods (cafeteria, vending, school stores, & concessions) |
| <input type="checkbox"/> | <input type="checkbox"/> | Access to physical activity opportunities |

Found Wanted

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Behavioral health services (integrated diagnosis and treatment of mental health, substance abuse, and associated physical disorders) |
| <input type="checkbox"/> | <input type="checkbox"/> | Dental screening |
| <input type="checkbox"/> | <input type="checkbox"/> | Preventive dental services |
| <input type="checkbox"/> | <input type="checkbox"/> | Vision screening |
| <input type="checkbox"/> | <input type="checkbox"/> | Health education (classes on health topics) |
| <input type="checkbox"/> | <input type="checkbox"/> | Health services/school nurse |
| <input type="checkbox"/> | <input type="checkbox"/> | Healthy social environment |
| <input type="checkbox"/> | <input type="checkbox"/> | Hearing screening |
| <input type="checkbox"/> | <input type="checkbox"/> | Hearing specialist |
| <input type="checkbox"/> | <input type="checkbox"/> | Opportunities for family involvement |
| <input type="checkbox"/> | <input type="checkbox"/> | Psychological counseling |
| <input type="checkbox"/> | <input type="checkbox"/> | Psychological testing |
| <input type="checkbox"/> | <input type="checkbox"/> | Stop smoking help |
| <input type="checkbox"/> | <input type="checkbox"/> | Smoke free environment throughout the day (PE, recess, sports practices, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | Tobacco-free environment |
| <input type="checkbox"/> | <input type="checkbox"/> | Walking school bus |
| <input type="checkbox"/> | <input type="checkbox"/> | Don't know |
| <input type="checkbox"/> | <input type="checkbox"/> | Other, specify _____ |

10. Do you or any member(s) of your household currently go to a faith community place of worship (church, synagogue, temple, or mosque)?

- ☐ Yes
 ☐ No
 ☐ Don't know
 ☐ Prefer not to answer

If no, "Don't know", or "Prefer not to answer" skip this question and go to question #11.

If yes, in Column 1, mark all of the health/wellness resources you think can be found in faith communities in your county. In Column 2, mark all of the health/wellness resources that are not found in faith communities in your county but you wish were found there.

Found Wanted

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Access to healthy foods (healthy food options at church-sponsored events) |
| <input type="checkbox"/> | <input type="checkbox"/> | Community garden |
| <input type="checkbox"/> | <input type="checkbox"/> | Community social events/celebrations |
| <input type="checkbox"/> | <input type="checkbox"/> | Counseling |
| <input type="checkbox"/> | <input type="checkbox"/> | Food bank/food pantry |
| <input type="checkbox"/> | <input type="checkbox"/> | Health education (classes on health topics) |
| <input type="checkbox"/> | <input type="checkbox"/> | Health screening (blood pressure, blood sugar, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | Physical activity opportunities with other members |
| <input type="checkbox"/> | <input type="checkbox"/> | Prayer/meditation options |
| <input type="checkbox"/> | <input type="checkbox"/> | Smoke free environment (no smoking anywhere on church property) |
| <input type="checkbox"/> | <input type="checkbox"/> | Social support (Mom's day out, women's group, men's group, youth group) |

Questions continued on the back of this page

Found Wanted

- ☐ ☐ Summer Food Program
- ☐ ☐ Don't know

11. What health and wellness resources does the K-State Research and Extension Office in your county offer? In Column 1, mark all of the resources you think are provided by the K-State Research and Extension Office in your county. In Column 2, mark all of the resources that are not provided by the K-State Research and Extension Office in your county but you wish were there.

Found Wanted

- ☐ ☐ Affordable Care Act education (health insurance issues website & blog)
- ☐ ☐ Chronic disease self-management program/ Kansans Optimizing Health
- ☐ ☐ Education on how to use healthcare appropriately (Health Insurance Smarts)
- ☐ ☐ Food/nutrition classes
- ☐ ☐ Food safety resources
- ☐ ☐ Health issues website, publications, and reports
- ☐ ☐ Information on regulations and food safety "best practices" for farmers' market vendors
- ☐ ☐ Life balance programs (work/life balance)
- ☐ ☐ Nutrition programs for low-income families (Expanded Food and Nutrition Education Program (EFNEP), Kansas Family Nutrition Program/ SNAP-Ed)
- ☐ ☐ Physical activity programs (Walk Kansas, Stay Strong, Stay Healthy)
- ☐ ☐ Positive youth development/4-H
- ☐ ☐ Publications and newsletters
- ☐ ☐ Speakers/food and nutrition advice
- ☐ ☐ Senior Health Insurance Counseling for Kansas (SHICK)
- ☐ ☐ Workplace wellness resources
- ☐ ☐ Don't know

12. What resources do you think your community environment offers to residents to support their health/wellness? In Column 1, mark all of the resources you think are available in your county. In Column 2, mark all of the resources that are not available in your county but you wish were there.

Found Wanted

- ☐ ☐ Access to gyms
- ☐ ☐ Access to healthy foods (grocery stores with fresh, affordable food, healthy options in restaurants and take-out food)
- ☐ ☐ Biking trails
- ☐ ☐ Camping facilities
- ☐ ☐ Community social events/celebrations
- ☐ ☐ Community Supported Agriculture ("subscription" service to buy local, seasonal food directly from a farmer)
- ☐ ☐ Community water fluoridation
- ☐ ☐ Farmers' Market
- ☐ ☐ Food and Farm Council
- ☐ ☐ Food Bank/Food Pantry

Found Wanted

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Parks and Recreation Department-sponsored activities and classes for all ages |
| <input type="checkbox"/> | <input type="checkbox"/> | Smoke free environment in all public places |
| <input type="checkbox"/> | <input type="checkbox"/> | Walking/running trails |
| <input type="checkbox"/> | <input type="checkbox"/> | Don't know |

DEMOGRAPHIC INFORMATION

1. **How old is the person completing the survey?** Age: _____ ☐ Prefer not to answer

2. **Sex of person completing the survey**

- ☐ Male ☐ Female ☐ Prefer not to answer

3. **Household Income – What is your approximate total household income?**

- | | | |
|---|---|---|
| <input type="checkbox"/> Less than \$10,000 | <input type="checkbox"/> \$10,000 to \$24,999 | <input type="checkbox"/> \$25,000 to \$39,999 |
| <input type="checkbox"/> \$40,000 to \$54,999 | <input type="checkbox"/> \$55,000 to \$69,999 | <input type="checkbox"/> \$50,000 to \$59,999 |
| <input type="checkbox"/> \$60,000 to \$69,999 | <input type="checkbox"/> \$70,000 to \$84,999 | <input type="checkbox"/> \$85,000 or more |
| <input type="checkbox"/> Prefer not to answer | | |

4. What is **the highest level of education** that the **head of your household** has completed?

- | | |
|---|--|
| <input type="checkbox"/> Some high school | <input type="checkbox"/> Graduated from high school |
| <input type="checkbox"/> Some college | <input type="checkbox"/> Graduated with an associate's degree |
| <input type="checkbox"/> Graduated with a bachelor's degree | <input type="checkbox"/> Advanced degree (e.g., Master's, PhD, MD, JD) |

5. **Health Insurance status of person completing the survey. Please check all that apply.**

- | | |
|--|--|
| <input type="checkbox"/> Insured through employer | <input type="checkbox"/> Buy my own health insurance in an open market |
| <input type="checkbox"/> Buy health insurance through the Affordable Care Act/Obamacare Market Place | |
| <input type="checkbox"/> Medicaid/KanCare | <input type="checkbox"/> Medicare plus Medicare Supplemental Insurance |
| <input type="checkbox"/> Medicare no Medicare Supplement | <input type="checkbox"/> Uninsured |
| <input type="checkbox"/> Don't know | <input type="checkbox"/> Prefer not to answer |

6. **Ethnic origin (or race) of the person completing the survey (SELECT ALL THAT APPLY)**

- | | |
|--|--|
| <input type="checkbox"/> White, <u>not</u> of Hispanic origin | <input type="checkbox"/> Black, <u>not</u> of Hispanic origin |
| <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> White, of Hispanic origin |
| <input type="checkbox"/> Black, of Hispanic origin | <input type="checkbox"/> Native American or American Indian |
| <input type="checkbox"/> Asian or Pacific Islander | <input type="checkbox"/> Other |
| <input type="checkbox"/> Prefer not to answer | |

7. **Language spoken most of the time in your home:**

- ☐ English ☐ Spanish ☐ Other _____ ☐ Prefer not to answer

8. **Number of people in each age category who live in your home:**

_____ Under 5 years old _____ 5-17 years old _____ 18-64 years old
_____ 65 years old or older _____ Prefer not to answer

Thank you for completing the community health and wellness environment survey!

Estudio de Salud, Bienestar y Ambiente de la Comunidad del Condado Thomas:

Comunidad en la que usted vive (marque uno): ☐ Colby ☐ Brewster
☐ Gem ☐ Menlo ☐ Mingo ☐ Levant ☐ Rexford
☐ Otras Comunidades del condado Thomas ☐ Area Rural del condado

1. Por favor, seleccione una (1) definición de salud / bienestar que prefiere de la lista siguiente:

- ☐ Salud / bienestar es la falta de la enfermedad.
- ☐ Salud / bienestar es un estado del mejor bienestar físico, mental y social y no solamente la ausencia de enfermedad.
- ☐ Salud / bienestar es un proceso activo de tomar conciencia de opciones y la toma de decisiones hacia una vida más satisfactoria.
- ☐ Salud / bienestar es el estado de estar fuerte, sin daños, o sano en cuerpo, mente, o alma; especialmente, el estado de estar libre de enfermedad física o dolor.
- ☐ No sé
- ☐ Prefiero no contestar

2. Mi salud/bienestar está afectado por el entorno en el que vivo, aprendo, trabajo, juego y rezo.

- | | | |
|--|--|--|
| <input type="checkbox"/> Estoy totalmente de acuerdo | <input type="checkbox"/> Estoy parcialmente de acuerdo | <input type="checkbox"/> No estoy de acuerdo |
| <input type="checkbox"/> No estoy seguro | <input type="checkbox"/> Prefiero no contestar | |

3. Mis opciones personales afectan mi estado de salud/bienestar.

- | | | |
|--|--|--|
| <input type="checkbox"/> Estoy totalmente de acuerdo | <input type="checkbox"/> Estoy parcialmente de acuerdo | <input type="checkbox"/> No estoy de acuerdo |
| <input type="checkbox"/> No estoy seguro | <input type="checkbox"/> Prefiero no contestar | |

4. El sistema de salud tiene el control sobre mi salud/bienestar.

- | | | |
|--|--|--|
| <input type="checkbox"/> Estoy totalmente de acuerdo | <input type="checkbox"/> Estoy parcialmente de acuerdo | <input type="checkbox"/> No estoy de acuerdo |
| <input type="checkbox"/> No estoy seguro | <input type="checkbox"/> Prefiero no contestar | |

5. En la 1a columna, marque todos los servicios de salud que usted piensa que puedan ser encontrados en su condado. En la 2da columna, marque todos los servicios de salud que no se encuentran en su condado, pero que usted desea que se encuentren.

Encuentro Quiero

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Cuidado hospitalario agudo |
| <input type="checkbox"/> | <input type="checkbox"/> | Clínica abierta en horas no laborales |
| <input type="checkbox"/> | <input type="checkbox"/> | Servicios de ambulancia |
| <input type="checkbox"/> | <input type="checkbox"/> | Comunidades de vida asistida |
| <input type="checkbox"/> | <input type="checkbox"/> | Servicios de salud del comportamiento (diagnóstico integrado y tratamiento de la salud mental, abuso de sustancias y trastornos físicos asociados) |
| <input type="checkbox"/> | <input type="checkbox"/> | Apoyo para la lactancia |
| <input type="checkbox"/> | <input type="checkbox"/> | Enfermedad crónica autogestión / Kansas optimización de la salud |
| <input type="checkbox"/> | <input type="checkbox"/> | Cuidado de la demencia / la enfermedad de Alzheimer |
| <input type="checkbox"/> | <input type="checkbox"/> | Examen dental |
| <input type="checkbox"/> | <input type="checkbox"/> | Cheque del desarrollo (edad 0-5) |
| <input type="checkbox"/> | <input type="checkbox"/> | Prevención y apoyo contra la violencia domestica |
| <input type="checkbox"/> | <input type="checkbox"/> | Servicios de apoyo de bienestar emocional |
| <input type="checkbox"/> | <input type="checkbox"/> | Servicios dentales preventivos |
| <input type="checkbox"/> | <input type="checkbox"/> | Servicios dentales restaurativos |

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Apoyo para la prevención de la diabetes |
| <input type="checkbox"/> | <input type="checkbox"/> | Apoyo para el manejo del diabetes |
| <input type="checkbox"/> | <input type="checkbox"/> | Tratamiento para el abuso de alcohol y drogas |

Encuentro Quiero

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Programa de detección precoz (mamografía para mujeres sin aseguranza) |
| <input type="checkbox"/> | <input type="checkbox"/> | Atención de emergencia |
| <input type="checkbox"/> | <input type="checkbox"/> | Tratamiento paliativo |
| <input type="checkbox"/> | <input type="checkbox"/> | Atención obstétrica (embarazo) de alto riesgo |
| <input type="checkbox"/> | <input type="checkbox"/> | La atención preventiva (vacunas, detección de enfermedades, etc) |
| <input type="checkbox"/> | <input type="checkbox"/> | Los recursos de equipamiento médico |
| <input type="checkbox"/> | <input type="checkbox"/> | Servicios de salud mental |
| <input type="checkbox"/> | <input type="checkbox"/> | Cuidado en casa |
| <input type="checkbox"/> | <input type="checkbox"/> | Cuidado de hogar de ancianos |
| <input type="checkbox"/> | <input type="checkbox"/> | Asesoramiento de nutrición / dieta |
| <input type="checkbox"/> | <input type="checkbox"/> | Cuidado obstétrico / prenatal (embarazo) |
| <input type="checkbox"/> | <input type="checkbox"/> | Exámenes físicos requeridos para ingresar a la escuela, preescolar y guardería |
| <input type="checkbox"/> | <input type="checkbox"/> | Exámenes físicos para deportes |
| <input type="checkbox"/> | <input type="checkbox"/> | Terapia física |
| <input type="checkbox"/> | <input type="checkbox"/> | Prevención y apoyo a contra la violencia sexual |
| <input type="checkbox"/> | <input type="checkbox"/> | Prevención y apoyo contra el abuso de sustancias |
| <input type="checkbox"/> | <input type="checkbox"/> | Apoyo para cuidadores |
| <input type="checkbox"/> | <input type="checkbox"/> | Entrenamiento para la gestión de peso |
| <input type="checkbox"/> | <input type="checkbox"/> | Otro (especifique): _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Clínica de medicina familiar |
| <input type="checkbox"/> | <input type="checkbox"/> | Información de salud y servicios de asesoramiento |
| <input type="checkbox"/> | <input type="checkbox"/> | No sé |

6. En la 1a columna, marque todos los servicios de salud pública que usted piensa que puedan ser encontrados en su condado. En la 2da columna, marque todos los servicios de salud pública que no se encuentran en su condado, pero que usted desea que se encuentren.

Encontró Quiero

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Apoyo para la lactancia |
| <input type="checkbox"/> | <input type="checkbox"/> | Investigación de enfermedades comunes |
| <input type="checkbox"/> | <input type="checkbox"/> | Floración de agua comunitaria |
| <input type="checkbox"/> | <input type="checkbox"/> | Vigilancia de la salud del medio ambiente (aire, agua, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | Planificación familiar |
| <input type="checkbox"/> | <input type="checkbox"/> | Educación de la salud (clases sobre temas de salud) |
| <input type="checkbox"/> | <input type="checkbox"/> | Evaluación de la salud (presión arterial, la glucosa de sangre, la altura, y el peso) |
| <input type="checkbox"/> | <input type="checkbox"/> | El programa Healthy Start para educar y apoyar a las mujeres embarazadas y familias con bebés hasta un año de edad |
| <input type="checkbox"/> | <input type="checkbox"/> | Inmunizaciones |
| <input type="checkbox"/> | <input type="checkbox"/> | Exámenes físicos requeridos para la admisión a la escuela |
| <input type="checkbox"/> | <input type="checkbox"/> | Información sobre las enfermedades en infecciones de transmisión sexual (ETS) |
| <input type="checkbox"/> | <input type="checkbox"/> | Exámenes de enfermedades de e infecciones transmisión sexual (ETS) |
| <input type="checkbox"/> | <input type="checkbox"/> | Tratamiento de enfermedades e infecciones de transmisión sexual (ETS) |
| <input type="checkbox"/> | <input type="checkbox"/> | Análisis de tuberculosis |
| <input type="checkbox"/> | <input type="checkbox"/> | Tratamiento de tuberculosis |
| <input type="checkbox"/> | <input type="checkbox"/> | WIC (Programa Especial de Nutrición Suplementaria para Mujeres, bebés y niños) |
| <input type="checkbox"/> | <input type="checkbox"/> | No sé |

7. ¿Usted o algún miembro de su hogar que actualmente trabaja?

☐ Sí ☐ No ☐ No sé ☐ Prefiero no contestar

Si no, no sé, o preferir no contestar, pase a la pregunta #8.

Si sí, en la 1a columna, marque todos los recursos de salud/bienestar en el sitio de trabajo que usted piensa que puedan ser encontrados en su lugar de trabajo. En la 2da columna, marque todos los recursos de salud/bienestar en el sitio de trabajo que no se encuentran en su lugar de trabajo, pero que usted desea que se encuentren.

Encontrado	Quiero
-------------------	---------------

- | | |
|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> Acceso a facilidades de ejercicio en el trabajo |
| <input type="checkbox"/> | <input type="checkbox"/> Acceso a opciones de comida saludable en el trabajo |
| <input type="checkbox"/> | <input type="checkbox"/> Apoyo para la lactancia a través del acceso a espacios privados en el sitio de trabajo |
| <input type="checkbox"/> | <input type="checkbox"/> Agricultura sostenida por la comunidad |
| <input type="checkbox"/> | <input type="checkbox"/> Programas de bienestar del trabajador |
| <input type="checkbox"/> | <input type="checkbox"/> Educación para la salud (clases sobre temas de la salud) |
| <input type="checkbox"/> | <input type="checkbox"/> Aseguranza de salud |
| <input type="checkbox"/> | <input type="checkbox"/> Incentivos para la práctica de comportamientos saludables |
| <input type="checkbox"/> | <input type="checkbox"/> Las evaluaciones de seguridad y ergonomía |
| <input type="checkbox"/> | <input type="checkbox"/> Apoyo para dejar de fumar |
| <input type="checkbox"/> | <input type="checkbox"/> Aseguranza dental |
| <input type="checkbox"/> | <input type="checkbox"/> Programa de asistencia para empleados (que proporciona evaluación gratis y confidencial, asesoramiento a corto plazo, referencias, y servicios de seguimiento para ayudar a los empleados a manejar problemas que afectan su bienestar emocional) |
| <input type="checkbox"/> | <input type="checkbox"/> Ambiente libre de humo (no hay áreas designadas para fumadores) |
| <input type="checkbox"/> | <input type="checkbox"/> Ambiente libre de tabaco |
| <input type="checkbox"/> | <input type="checkbox"/> Las evaluaciones de riesgo de la salud con comentarios |
| <input type="checkbox"/> | <input type="checkbox"/> Horas flexibles del trabajo |
| <input type="checkbox"/> | <input type="checkbox"/> No sé |

8. ¿Hay algún miembro de su familia que actualmente asiste a una guardería o al preescolar de cualquier tipo (centro o en casa)?

☐ Sí ☐ No ☐ No sé ☐ Prefiero no contestar

Si no, no sé, o preferir no contestar, pase a la pregunta # 9.

Si sí, en la 1a columna, marque todos los recursos de preescolar/guardería que usted piensa que puedan ser encontrados en su condado. En la 2da columna, marque todos los recursos de preescolar/guardería que no se encuentran en su condado, pero que usted desea que se encuentren.

Encontrado	Quiero
-------------------	---------------

- | | |
|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> Acceso a cuidado infantil de calidad y a precio razonable |
| <input type="checkbox"/> | <input type="checkbox"/> Acceso a cuidado de niños por las noches y fines de semana |
| <input type="checkbox"/> | <input type="checkbox"/> Acceso a una guardería para niños con necesidades especiales |
| <input type="checkbox"/> | <input type="checkbox"/> Acceso a educación preescolar de calidad y económica |
| <input type="checkbox"/> | <input type="checkbox"/> Acceso a comida saludable en el cuidado infantil/preescolar (comidas y refrigerios saludables) |

- | | |
|--|--|
| <input type="checkbox"/> infantil/preescolar | <input type="checkbox"/> Acceso limitado o nulo a los alimentos y bebidas endulzados con azúcar en el cuidado |
| <input type="checkbox"/> el día | <input type="checkbox"/> El acceso a las oportunidades de actividad física en el cuidado infantil y preescolar durante |
| <input type="checkbox"/> extraída) | <input type="checkbox"/> Apoyo para la lactancia en el cuidado infantil y preescolar (ej. Uso de leche materna |
| <input type="checkbox"/> | <input type="checkbox"/> Proyección dental |
| <input type="checkbox"/> | <input type="checkbox"/> Evaluación del desarrollo (edad 0-5 habla, visión, audición y dental) |
| <input type="checkbox"/> | <input type="checkbox"/> Actividades de jardinería en el cuidado infantil preescolar |
| <input type="checkbox"/> | <input type="checkbox"/> Educación sobre la salud para los niños en el cuidado infantil preescolar |
| <input type="checkbox"/> | <input type="checkbox"/> Educación para los padres sobre la salud y crianza en el cuidado infantil preescolar |
| <input type="checkbox"/> | <input type="checkbox"/> Ambiente libre de humo (en que no se permite fumar) |
| <input type="checkbox"/> | <input type="checkbox"/> Ambiente libre de tabaco (tabaco de cualquier tipo prohibido en la guardería o el |
| | <input type="checkbox"/> preescolar |
| <input type="checkbox"/> | <input type="checkbox"/> No sé |

9. ¿Hay algún miembro de su hogar que actualmente va a la escuela primaria, escuela media / secundaria, o preparatoria?

- ☐ Sí ☐ No ☐ No sé ☐ Prefiero no contestar

Si no, no sé, o preferir no contestar, pase a la pregunta # 10.

Si sí, en la 1a columna, marque todos los recursos para los jóvenes y niños de edad escolar que usted piensa que puedan ser encontrados en su condado. En la 2da columna, marque todos los recursos para los jóvenes y niños de edad escolar que no se encuentran en su condado, pero que usted desea que se encuentren.

Encontrado Quiero

- | | |
|--|---|
| <input type="checkbox"/> | <input type="checkbox"/> Acceso a comida saludable (cafetería, máquinas expendedoras) |
| <input type="checkbox"/> | <input type="checkbox"/> El acceso a oportunidades de actividad física |
| <input type="checkbox"/> mental, abuso de sustancias y trastornos físicos asociados) | <input type="checkbox"/> Servicios de salud del comportamiento (diagnostico integrado y tratamiento de la salud |
| <input type="checkbox"/> | <input type="checkbox"/> Exámenes dentales |
| <input type="checkbox"/> | <input type="checkbox"/> Servicios dentales preventivos |
| <input type="checkbox"/> | <input type="checkbox"/> Exámenes de visión |
| <input type="checkbox"/> | <input type="checkbox"/> Educación sobre la salud (clases sobre temas de salud) |
| <input type="checkbox"/> | <input type="checkbox"/> Servicios de salud / enfermera de la escuela |
| <input type="checkbox"/> | <input type="checkbox"/> Entorno social saludable |
| <input type="checkbox"/> | <input type="checkbox"/> Exámenes auditivos |
| <input type="checkbox"/> | <input type="checkbox"/> Especialistas en audicion |
| <input type="checkbox"/> | <input type="checkbox"/> Oportunidades para la participación de la familia |
| <input type="checkbox"/> | <input type="checkbox"/> Asesoramiento psicológico |
| <input type="checkbox"/> | <input type="checkbox"/> Exámenes psicológicos |
| <input type="checkbox"/> | <input type="checkbox"/> Apoyo para dejar de fumar |
| <input type="checkbox"/> | <input type="checkbox"/> Ambiente libre de humo durante el día (EF, recreo, prácticas) |
| <input type="checkbox"/> | <input type="checkbox"/> Entorno sin tabaco |
| <input type="checkbox"/> | <input type="checkbox"/> Camino hasta la escuela acompañado por adultos |
| <input type="checkbox"/> | <input type="checkbox"/> No sé |
| <input type="checkbox"/> | <input type="checkbox"/> Otro (especifique): _____ |

10. ¿Usted o algún miembro de su familia asiste a una comunidad de fe (lugar de alabanza, iglesia, sinagoga, templo o mezquita)?

- ☐ Sí ☐ No ☐ No sé ☐ Prefiero no contestar

Si no, no sé, o preferir no contestar, pase a la pregunta # 11.

Si sí, en la 1a columna, marque todos los recursos de la salud/bienestar que usted piensa que puedan ser encontrados en las comunidades de fe en su condado. En la 2a columna, marque todos los recursos de la salud/bienestar que no se encuentran en las comunidades de fe en su condado, pero que usted desea que se encuentren.

Encontrado	Quiero
<input type="checkbox"/>	<input type="checkbox"/> Acceso a comida saludable (opciones de comida saludable en los eventos patrocinados por mi iglesia)
<input type="checkbox"/>	<input type="checkbox"/> Jardines comunitarias
<input type="checkbox"/>	<input type="checkbox"/> Celebraciones/eventos sociales para la comunidad
<input type="checkbox"/>	<input type="checkbox"/> Asesoramiento
<input type="checkbox"/>	<input type="checkbox"/> Despensa comunitaria
<input type="checkbox"/>	<input type="checkbox"/> Educación sobre la salud (clases sobre temas de salud)
<input type="checkbox"/>	<input type="checkbox"/> Exámenes de salud (presión arterial, glucosa de sangre, etc.)
<input type="checkbox"/>	<input type="checkbox"/> Oportunidades de actividad con otros miembros de la comunidad de fe
<input type="checkbox"/>	<input type="checkbox"/> Opciones de oración/meditación
<input type="checkbox"/>	<input type="checkbox"/> Ambiente libre de humo
<input type="checkbox"/>	<input type="checkbox"/> I apoyo social (día libre de las madres, grupo de mujeres/hombres/jóvenes)
<input type="checkbox"/>	<input type="checkbox"/> Programa de comidas en el verano
<input type="checkbox"/>	<input type="checkbox"/> No sé

11. ¿Cuales recursos de la salud/bienestar cree/sabe que se ofrecen por la Oficina de Investigación y Extensión de K-State en su condado? En la 1a columna, marque todos los recursos que usted piensa que son ofrecidos por la Oficina de Investigación y Extensión de K-State en su condado. En la 2da columna, marque todos los recursos que no son ofrecidos por la Oficina de Investigación y Extensión de K-State en su condado, pero que usted desea que fueran ofrecidos.

Disponible	Quiero
<input type="checkbox"/>	<input type="checkbox"/> Educación sobre la Ley de Asistencia Asequible (página de web y blog sobre aseguanza)
<input type="checkbox"/>	<input type="checkbox"/> Autogestión para enfermedades crónicas
<input type="checkbox"/>	<input type="checkbox"/> Educación del uso apropiado del sistema de salud
<input type="checkbox"/>	<input type="checkbox"/> Clases de comida / nutrición
<input type="checkbox"/>	<input type="checkbox"/> Recursos de seguridad alimenticia
<input type="checkbox"/>	<input type="checkbox"/> Información en la web sobre la salud
<input type="checkbox"/>	<input type="checkbox"/> Información sobre regulaciones y seguridad alimenticia para agricultores y vendedores del Mercado
<input type="checkbox"/>	<input type="checkbox"/> Programas de vida balanceada
<input type="checkbox"/>	<input type="checkbox"/> Programas de nutrición para familias de bajo ingreso
<input type="checkbox"/>	<input type="checkbox"/> Programas de actividad física
<input type="checkbox"/>	<input type="checkbox"/> Desarrollo positivo para jóvenes/4-H
<input type="checkbox"/>	<input type="checkbox"/> Publicaciones y hojas informativas
<input type="checkbox"/>	<input type="checkbox"/> Consejo sobre alimentos y nutrición
<input type="checkbox"/>	<input type="checkbox"/> Asesoramiento para la aseguanza de salud de mayores (SHICK)
<input type="checkbox"/>	<input type="checkbox"/> Recursos del bienestar del trabajo
<input type="checkbox"/>	<input type="checkbox"/> No sé

12. ¿Cuales recursos de salud/bienestar piensa que su entorno comunitario ofrece a los residentes? En la 1a columna, marque todos los recursos que piensa que son disponibles en su condado. En la 2da columna, marque todos los recursos que no son disponibles en su condado, pero que usted desea que fueran disponibles.

Disponible	Quiero
<input type="checkbox"/>	<input type="checkbox"/> Acceso a comida saludable (tiendas de comestibles con alimentos de buen precio, restaurantes con opciones saludables y comida para llevar)
<input type="checkbox"/>	<input type="checkbox"/> Senderos para bicicletas
<input type="checkbox"/>	<input type="checkbox"/> Facilidades para acampar
<input type="checkbox"/>	<input type="checkbox"/> Celebraciones/eventos sociales para la comunidad
<input type="checkbox"/>	<input type="checkbox"/> Agricultura sostenida por la comunidad
<input type="checkbox"/>	<input type="checkbox"/> Mercado de agricultores
<input type="checkbox"/>	<input type="checkbox"/> Floración de agua comunitaria
<input type="checkbox"/>	<input type="checkbox"/> Asesoramiento de alimentos y agricultura
<input type="checkbox"/>	<input type="checkbox"/> Banco de alimentos/ despensa de alimentos
<input type="checkbox"/>	<input type="checkbox"/> Actividades patrocinadas por el Departamento de Parques y para toda la familia
<input type="checkbox"/>	<input type="checkbox"/> Ambiente libre de humo en todos los lugares públicos
<input type="checkbox"/>	<input type="checkbox"/> Senderos para caminar / correr
<input type="checkbox"/>	<input type="checkbox"/> No sé

INFORMACIÓN DEMOGRÁFICA

13. ¿Qué edad tiene la persona que completa la encuesta? Edad: _____ ☐ Prefiero no contestar

14. El sexo de la persona que completa la encuesta

☐ Masculino ☐ Femenino ☐ Prefiero no contestar

15. Ingreso Familiar - ¿Cuál es su ingreso total aproximado?

<input type="checkbox"/> Menos de \$ 10,000	<input type="checkbox"/> \$ 10,000 a \$ 19,999
<input type="checkbox"/> \$ 20,000 a \$29,999	<input type="checkbox"/> \$ 30,000 a \$ 39,999
<input type="checkbox"/> \$ 40,000 a \$ 49,999	<input type="checkbox"/> \$ 50,000 a \$ 59,999
<input type="checkbox"/> \$ 60,000 a \$ 69,999	<input type="checkbox"/> \$ 70,000 a \$ 79,999
<input type="checkbox"/> \$ 80,000 a \$ 89,999	<input type="checkbox"/> \$ 90,000 a \$ 99,999
<input type="checkbox"/> \$ 100,000 a \$ 149,999	<input type="checkbox"/> \$ 150,000 o más
<input type="checkbox"/> No sé	<input type="checkbox"/> Prefiero no responder

16. Aseguranza de Salud de la persona que completa la encuesta. Por favor marque solamente una.

- ☐ Asegurado a través del empleador
- ☐ Compro mi propia aseguranza de salud en un mercado abierto
- ☐ Compro aseguranza de salud a través de la Ley de Asistencia Asequible / Obamacare
- ☐ Medicaid / KanCare
- ☐ Medicare con Suplemento de Medicare
- ☐ Medicare sin Suplemento de Medicare
- ☐ Sin seguro
- ☐ No sé
- ☐ Prefiero no contestar

17. El origen étnico (o raza) de la persona que completa la encuesta:

- ☐ Blanco, no de origen Hispano
- ☐ Negro o Afro-American, no de origen hispano
- ☐ Hispano
- ☐ Blanco/Latino de origen Hispano
- ☐ Negro o Afro-American, de origen Hispano
- ☐ Indio Americano o nativo americano
- ☐ Asiático o de las Islas del Pacífico
- ☐ Multirracial
- ☐ Otro
- ☐ Prefiero no contestar

18. Idioma principalmente hablado en la casa:

- ☐ Inglés
- ☐ Español
- ☐ Otro: _____
- ☐ Prefiero no contestar

19. Número de personas en cada categoría de edad que viven en su hogar:

_____ Menos de 5 años de edad _____ 5-17 años de edad _____ 18-64 años de edad

_____ 65 años de edad o más _____ Prefiero no contestar

Gracias por completar el Estudio de Salud, Bienestar y Ambiente de la comunidad!

Northwest Kansas Collaborative Community Perception Survey

Community Perception Survey

Your community is part of Pathways to a Healthy Kansas, a Blue Cross and Blue Shield of Kansas initiative. The purpose of this survey is to gather your perceptions about opportunities for physical activity, healthy eating, and tobacco cessation in your community. The information gathered in this survey will inform our efforts in ensuring that community members have healthy options to choose from. This survey will be shared with the community once per year for each of the three years of the Pathways initiative.

Your responses will be compiled with other responses and will never directly identify your individual response. We are gathering some demographic information to ensure that we have gathered feedback from a broad representation of individuals in the community, but this will not be shared outside the project team. You can choose to skip questions that you don't feel comfortable answering and you can stop at any time. We thank you for your participation!

1. In which county do you currently reside:
 - ☐ Cheyenne
 - ☐ Rawlins
 - ☐ Thomas

2. If you live in Cheyenne County, which zip code do you live in?
 - ☐ 67731
 - ☐ 67756

3. In general, how would you rate the overall health of our community?
 - ☐ Very Unhealthy
 - ☐ Unhealthy
 - ☐ Somewhat Healthy
 - ☐ Healthy
 - ☐ Very Healthy

4. Are you familiar with the U.S. recommendations for adult physical activity?
 - ☐ No
 - ☐ Yes
 - ☐ Unsure

It is recommended that adults get at least 2 hours and 30 minutes each week of aerobic physical activity at a moderate level OR 1 hour and 15 minutes each week of aerobic physical activity at a vigorous level. Adults should also do strengthening activities, like push-ups, sit-ups and lifting weights, at least 2 days a week.

5. Do you feel like you're meeting those recommendations?

- ☐ No
- ☐ Yes
- ☐ Unsure

6. Please rate your level of agreement with the following statements:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
My community has a sufficient number of sidewalks or bike/walk paths					
My community has a sufficient number of parks/playgrounds					
For walking at night, my community has adequate street lighting					
In general, my community has sufficient opportunities for physical activity					

7. Are you familiar with the U.S. recommendations for adult fruit and vegetable consumption?

- a. No
- b. Yes
- c. Unsure

It is recommended that adults eat 1 ½ -2 cups (3-4 servings) of fruit per day and 2-3 cups of vegetables (4-6 servings) of vegetables per day.

8. Do you feel like you're meeting those recommendations?

- a. No
- b. Yes
- c. Unsure

9. Please rate your level of agreement with the following statements:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
It is easy to find fresh fruits and vegetables in my community					
The fresh produce in my community is of high quality					
It is easy to find whole-grain products, such as breads, cereals, pasta and snacks, in my community					
In general, my community has sufficient options for healthy eating					

10. Are you aware of efforts in your community to promote smoking cessation (i.e. quitting smoking)?

- ☐ No
- ☐ Yes
- ☐ Unsure

11. Please rate your level of support for raising the minimum age for tobacco purchases from the current age (18) to 21 years of age?

- a. Definitely not supportive
- b. Not supportive
- c. Neutral
- d. Supportive
- e. Very Supportive

12. Please rate your level of support for policies that prohibit tobacco use (i.e. smoking and chewing tobacco) in the following settings:

	Definitely not supportive	Not supportive	Neutral	Supportive	Very Supportive
Local Parks					
School grounds					
Hospital grounds					
Worksites					

13. Were you aware of the Pathways to a Healthy Kansas Initiative that is being implemented by the Northwest Kansas Collaborative (Atwood, Bird City, Colby, St. Francis) in your community?

- ☐ No
- ☐ Yes
- ☐ Unsure

14. Age:

- ☐ Less than 25
- ☐ 25 - 39
- ☐ 40 - 54
- ☐ 55 - 64
- ☐ 65 or over

15. Gender:

- ☐ Female
- ☐ Male

16. Ethnic group you most identify with:

- ☐ African American / Black
- ☐ Asian / Pacific Islander
- ☐ Hispanic / Latino
- ☐ Native American
- ☐ White / Caucasian
- ☐ Other _____

17. Education

- ☐ Less than high school
- ☐ High school diploma or GED
- ☐ Some college/Associate's degree
- ☐ Bachelor's degree or higher
- ☐ Other _____

18. Where / how you got this survey: (check one)

- ☐ Church
- ☐ Community Event
- ☐ Community Meeting
- ☐ Email
- ☐ Facebook or other social media
- ☐ Grocery Store / Shopping Mall
- ☐ Mail
- ☐ Newspaper
- ☐ Newsletter
- ☐ Personal Contact
- ☐ Workplace
- ☐ Other _____

Northwest Kansas colaborativa Encuesta de percepción de la comunidad

Encuesta de percepción de la comunidad

Su comunidad es parte de Pathways to a Healthy Kansas, una iniciativa de Blue Cross and Blue Shield of Kansas. El propósito de esta encuesta es recopilar sus percepciones sobre las oportunidades para realizar actividad física, tener una alimentación saludable, y dejar de fumar en su comunidad. La información recopilada en esta encuesta informará sobre nuestros esfuerzos para garantizar que los asegurados de la comunidad tengan opciones saludables de dónde elegir. Esta encuesta será compartida con la comunidad una vez al año por cada uno de los tres años de la iniciativa Pathways.

Sus respuestas se recopilarán con otras respuestas y nunca identificarán directamente su respuesta individual. Estamos recopilando alguna información demográfica para asegurarnos de que hemos reunido los comentarios de una extensa representación de personas en la comunidad, pero no se compartirá fuera del equipo del proyecto. Puede elegir omitir las preguntas con las que no se sienta cómodo respondiendo y puede detenerse en cualquier momento. ¡Le agradecemos su participación!

1. En qué condado reside actualmente:
 - ☐ Cheyenne
 - ☐ Rawlins
 - ☐ Thomas

2. Si usted vive en el Condado de Cheyenne, ¿en qué código postal vive usted?
 - ☐ 67731
 - ☐ 67756

3. En general, ¿cómo calificaría la salud general de nuestra comunidad?
 - ☐ Demasiado no saludable
 - ☐ No saludable
 - ☐ Un poco saludable
 - ☐ Saludable
 - ☐ Muy saludable

4. ¿Conoce usted las recomendaciones de los E.E.U.U. para la actividad física de adultos?
 - a. No
 - b. Si
 - c. No estoy seguro/a

Se recomienda que los adultos realicen al menos 2 horas y 30 minutos a la semana de actividad física aeróbica a nivel moderado O BIEN 1 hora y 15 minutos a la semana de actividad física aeróbica a nivel vigoroso.

5. ¿Piensa usted que está realizando esas recomendaciones?

- a. No
- b. Si
- c. No estoy seguro/a

6. Por favor califique su nivel de acuerdo con las siguientes afirmaciones:

	Muy en desacuerdo	En desacuerdo	Neutro	De acuerdo	Muy de acuerdo
Mi comunidad tiene aceras o rutas adecuadas para andar en bicicleta/caminar					
Mi comunidad tiene opciones fáciles para caminar en interiores cuando el clima no es bueno					
Mi comunidad tiene iluminación pública adecuada para poder caminar de noche					
En general, mi comunidad tiene oportunidades adecuadas para realizar actividad física					

7. Conoce usted las recomendaciones de los E.E.U.U para el consumo de frutas y verduras para adultos?

- a. No
- b. Si
- c. No estoy seguro/a

Se recomienda que los adultos coman 1.5-2 tazas (3-4 porciones) de fruta por día y 2-3 tazas (4-6 porciones) de verduras por día.

8. ¿Piensa usted que está realizando esas recomendaciones?

- a. No
- b. Si
- c. No estoy seguro/a

9. Por favor califique su nivel de acuerdo con las siguientes afirmaciones:

	Muy en desacuerdo	En desacuerdo	Neutro	De acuerdo	Muy de acuerdo
En mi comunidad es fácil encontrar frutas y vegetales frescos					
Los productos frescos en mi comunidad son de alta calidad					
Los productos frescos en mi comunidad tienen un precio accesible					
En general, mi comunidad tiene suficientes opciones para una alimentación saludable					

10. ¿Está usted consciente de los esfuerzos de su comunidad para promover que la gente deje de fumar?

- ☐ No
- ☐ Sí
- ☐ No estoy seguro/a

11. Por favor califique su nivel de apoyo para elevar la edad mínima para las compras de tabaco de la edad actual (18) a 21 años de edad.

- a. Definitivamente no lo apoyo
- b. No lo apoyo
- c. Neutro
- d. Si lo apoyo
- e. Definitivamente lo apoyo

12. Por favor califique su nivel de apoyo para las políticas que prohíben el consumo de tabaco (es decir, fumar y mascar tabaco) en los siguientes lugares:

	Definitivamente no lo apoyo	No lo apoyo	Neutro	Si lo apoyo	Definitivamente lo apoyo
Parques					
Las áreas de las escuelas					
Terrenos del hospital					
Lugares de trabajo					

13. ¿Estaba usted enterado de la iniciativa *Pathways to a Healthy Kansas* que Northwest Kansas Colaborativa (Atwood, Bird City, Colby, St. Francis) está implementando en su comunidad?

- ☐ No
- ☐ Sí
- ☐ No estoy seguro/a

14. Edad:

- ☐ Menor de 25 años
- ☐ 25 a 39
- ☐ 40 a 54
- ☐ 55 a 64
- ☐ Mayor de 65 años

15. Sexo:

- ☐ Femenino
- ☐ Masculino

16. Grupo étnico con el que más se identifica:

- ☐ Afroamericano/negro
- ☐ Asiático/isleño del Pacífico
- ☐ Hispano/latino
- ☐ Indígena estadounidense
- ☐ Blanco/caucásico
- ☐ Otro _____

17. Educación

- ☐ No terminó la escuela secundaria
- ☐ Diploma o GED de la escuela secundaria
- ☐ Algunos estudios universitarios o un título técnico
- ☐ Título universitario o superior
- ☐ Otro _____

18. Donde/como se encontró esta encuesta: (seleccione una)

- a. Iglesia
- b. Evento en la comunidad
- c. Reunión en la comunidad
- d. Correo electrónico
- e. Facebook u otro medio de comunicación social
- f. Supermercado/centro comercial
- g. Correo (no electrónico)
- h. Periódico
- i. Hoja informativa
- j. Recomendación personal
- k. Lugar de trabajo
- l. Otro _____



CHNA Report
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VVV Consultants LLC is an Olathe, KS based "boutique" healthcare consulting firm specializing in Strategy; Research and Business Development services. We partner with clients. Plan the Work; Work the Plan