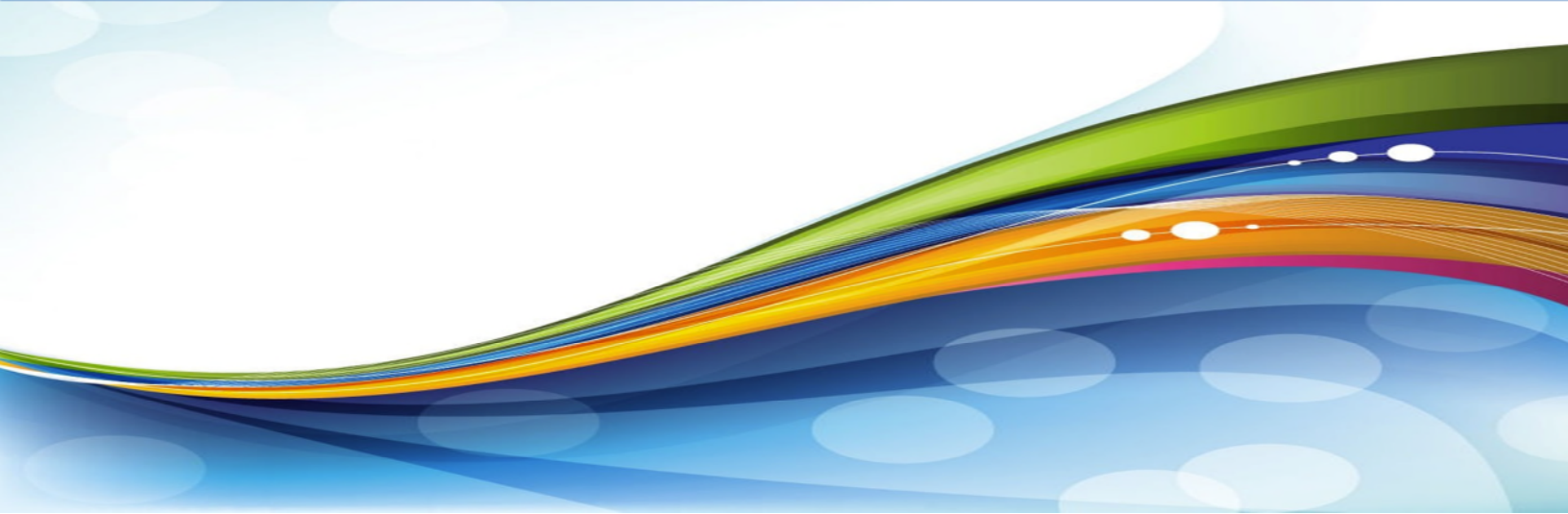




Miami & Linn Counties, KS

on behalf of Miami County Medical Center

Community Health Needs Assessment Round #2



January 2016

**VVW Consultants LLC
Olathe, KS**

Community Health Needs Assessment

Table of Contents

I. Executive Summary

II. Methodology

- a) CHNA Scope and Purpose
- b) Local Collaborating CHNA Parties (The identity of any and all organizations with which the organization collaborated and third parties that engaged to assist with the CHNA)
- c) CHNA and Town Hall Research Process (A description of the process and methods used to conduct the CHNA, a description of how the organization considered the input of persons representing the community, and an explanation of the process / criteria used in prioritizing such needs)
- d) Community Profile (A description of the community served by the facility and how the community was determined)

III. Community Health Status

- a) Town Hall CHNA Findings: Areas of Strengths and Areas to Change and/or Improve
- b) County Health Area of Future Focus (A prioritized description of all of the community needs identified by the CHNA)
- c) Historical Health Statistics

IV. Inventory of Existing County Health Resources

- a) A description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA

V. Detail Exhibits

- a) Patient Origin and Access to Care
- b) Town Hall Attendees, Notes and Feedback (Who attended with qualifications)
- c) Public Notice and News
- d) Primary Research Detail

Shaded lines note IRS requirements

I. Executive Summary

[VVV Consultants LLC]

I. Executive Summary

Miami and Linn Counties, KS - 2015 Community Health Needs Assessment (CHNA) Round #2

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 Miami and Linn Counties, KS was published in February of 2013. (Note: The Patient Protection and Affordable Care Act (ACA) requires 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.

Town Hall "Community Health Strengths" cited for Miami County Medical Center's Primary Service Area are as follows:

Miami Co, KS - Community Health "Strengths"			
#	Topic	#	Topic
1	Walk-in Urgent Care Center	9	Quality of schools
2	Quality care at the hospital and nursing home	10	Hospital providing healthcare services to the uninsured
3	Affiliation with Olathe Medical Center	11	A lot of green space
4	Specialists coming to Miami County	12	Wide variety of dental and eye care services
5	Engaged community	13	Health Partnership Clinic
6	Access to physical fitness in Miami County	14	EMS
7	Leadership at the hospital	15	Location of our clinics throughout the area
8	Good mix of healthcare services and resources	16	Availability of parking at the hospital

Town Hall “Community Health Changes and/or Improvements Ranking” cited for Miami County Medical Center’s Primary Service Area are as follows:

Miami County Medical Center - Primary Service Area				
Town Hall Community Health Needs Priorities (38 Attendees, 137 votes)				
#	Health Needs to Change and/or Improve	Votes	%	Accum
1	Increase access to mental health (diagnosis, placement and medication management).	37	27.0%	27.0%
2	Reduce substance abuse (alcohol and drugs).	31	22.6%	49.6%
3	Extend walk-in clinic hours.	17	12.4%	62.0%
4	Improve and expand primary care services.	12	8.8%	70.8%
5	Decrease tobacco use.	10	7.3%	78.1%
6	Provide affordable healthy eating options and nutritional education (food preparation).	8	5.8%	83.9%
Other items receiving votes: Affordable Physical Activity for Seniors (Partner with Senior Center), Cardiac Rehab, Affordable Dental Services, Awareness of Pediatric Services, Health Education for Working Adults				

Key Community Health Needs Assessment Conclusions from secondary research for Miami County Medical Center’s Primary Service Area are as follows:

KS HEALTH RANKINGS: According to the 2015 RWJ County Health Rankings study, Miami County’s highest State of Kansas rankings (of 105 counties) were in Health Factors, Clinical Care, Health Outcomes, Health Behaviors and Mortality.

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

- TAB 1: Miami County has a population of 32, 822 residents as of 2015. 15.2% of Miami County’s population consists of the elderly (65+), and 24.4% percent of these elderly people (65+) are living alone. The percent of Hispanics and Latinos in Miami County is 3.1%. 29% percent of children in Miami County live in single-parent households. The percent of people living below the poverty level is 9.5%, lower than the Kansas rural norm of 12.5%. The percent of people with limited access to healthy foods is 3.0%, lower than the Kansas rural norm of 8.0%.
- TAB 2: Miami County per capita money income in the past 12 months equals \$28,412, higher than the Kansas rural norm of \$25,046. The median value of owner-occupied

housing units is \$162,500, higher than the Kansas rural norm of \$75,775. The percent of people who are low-income with low access to a grocery store in Miami County is 2.7%, lower than the Kansas rural norm of 15.4%.

- TAB 3: In Miami County, 32.3% of students are eligible for the free lunch program, lower than the Kansas rural norm of 34.2%. The poverty status by school enrollment is 12.7%, nearly equivalent to the Kansas rural norm of 12.6%. The percent of persons (25+) with a Bachelor's degree or higher in Miami County is 23.9%, higher than the Kansas rural norm of 20.5%.
- TAB 4: The percent of births where prenatal care began in the first trimester in Miami County is 87.9%, higher than the Kansas rural norm of 78.9%. The percent of births where the mother smoked during pregnancy is 16.8%. The average monthly WIC participation rate in Miami County is 14%, lower than the Kansas rural norm of 20.9%. 2.9% of all births in Miami County are occurring to teens, lower than the Kansas rural norm of 7.6%.
- TAB 5: The ratio of the population in Miami County to primary care physicians is 2,038. The heart disease hospital admission rate in Miami County (240) is lower than the Kansas rural norm of 262. The congestive heart failure hospital admission rate in Miami County (136) is lower than the Kansas rural norm of 191. The injury hospital admission rate (756) in Miami County is higher than the Kansas rural norm of 691.
- TAB 6: The depression rate for the Medicare population in Miami County is 15.4%, similar to the Kansas rural norm of 15.2%. The percent of alcohol-impaired driving deaths in Miami County is 25.7%, lower than the Kansas rural norm of 36.4%.
- TAB 7: The adult obesity rate in Miami County is 35%, higher than the Kansas rural norm of 30%. The percent of adults in Miami County who currently smoke cigarettes is 28.4%, higher than the Kansas rural norm of 22%. The rate of sexually transmitted infections is 156 per 100,000, lower than the Kansas rural norm of 369 per 100,000.
- TAB 8: The uninsured adult population rate in Miami County is 13.4%, lower than the Kansas rural norm of 17.4%.
- TAB 9: The age-adjusted years of potential life lost due to traffic injury in Miami County is 547 per 100,000, much lower than big Kansas rural norm of 1,541 per 100,000. The age-adjusted traffic injury mortality rate in Miami County is 15 per 100,000, lower than the Kansas rural norm of 25 per 100,000. The age-adjusted suicide mortality rate per 100,000 in Miami County is 12, lower than the Kansas rural norm of 14 per 100,000.
- TAB 10: The percent of access to exercise opportunities in Miami County is 66.4%, higher than the Kansas rural norm of 51.3%. The percentage of adults who reported consuming fruit less than one time per day in Miami County is 43.1%. The percent of diabetic screenings in Miami County is 89%, higher than the Kansas rural norm of 86%. The percent of mammography screenings in Miami County is 66.1%, higher than the Kansas rural norm of 64%.

Key 2015 Community Feedback Conclusions:

In late September of 2015, MCMC collected stakeholder feedback from their primary service area consumers, community leaders and groups, public and other organizations, and other providers. These stakeholders (N=101) provided the following community feedback insights via an online perception survey:

- 63.4% of MCMC primary service area stakeholders would rate the overall quality of healthcare delivery in their community as either Very Good or Good, with Very Good being the highest ranking.
- MCMC primary service area stakeholders are satisfied with Ambulance Services.
- MCMC primary service area stakeholders are not satisfied with the following services: Child Care, Dentists, Emergency Room, Family Planning Services, Mental Health Services Nursing Home, School Nurse and Visiting Specialists.
- 84.2% of MCMC primary service area stakeholders have received healthcare services outside of their community over the past two years.
- MCMC primary service area stakeholders perceive the following causes of disease or disability a problem in their community: Abuse/Violence, Alcohol, Diabetes, Drugs/Substance Abuse, Mental Illness, Nutrition, Obesity, Poverty, Suicide and Wellness Education.

As seen below, the community still senses a health need for Obesity and Teen Pregnancy/Unwed Mothers.

Miami County Medical Center KS (Primary Service Area) - Miami County, KS N=101						
From our last Community Health Needs Assessment (2012), a number of health needs were identified as priorities. Are any of these 2012 CHNA needs still an "ongoing problem" in our community?						
Answer Options	Not a Problem Anymore	Somewhat of a Problem	Major Problem	Problem %	Response Count	Most Pressing Rank
Obesity	3	30	40	95.9%	73	1
Teen Pregnancy / Unwed Mothers	3	41	19	95.2%	63	5
Affordable Pharmaceuticals	23	31	21	69.3%	75	2
Dental Care Access	22	24	23	68.1%	69	6
Additional Health Education Offerings	22	33	13	67.6%	68	7
Urgent Care Services	31	35	10	59.2%	76	3
Walk-In Doctor Appointments	36	34	8	53.8%	78	4
Home Health Services (PT/OT)	33	25	3	45.9%	61	9
Immunizations for Children	38	20	10	44.1%	68	8

II. Methodology

[VVV Consultants LLC]

II. Methodology

a) Scope and Purpose

The new federal Patient Protection and Affordable Care Act 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 who 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 that 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.).

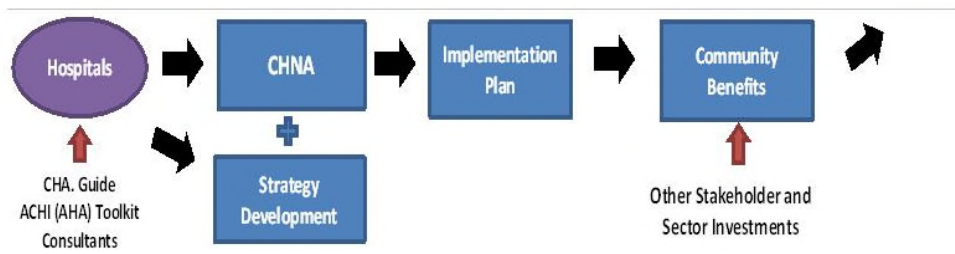
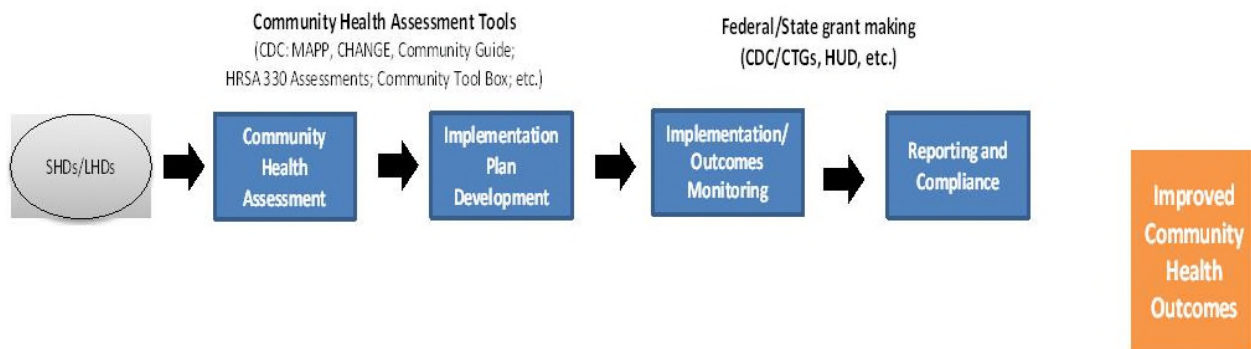
JOB #2: Making a CHNA Widely Available to the Public

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, 2015 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.*

Year 2015 - 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 need 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.

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:

Miami County Medical Center Profile

2100 Baptiste Dr, Paola, KS 66071
President/CEO: Frank H. Devocelle

About Us: Miami County Medical Center (MCMC) has a 39-bed license and offers a 24-hour emergency care center staffed by certified emergency professionals. We also specialize in providing quality care in numerous sub-specialties, including general surgery, orthopedics, cardiology, podiatry and family medicine.

MCMC Among Top in Nation for Quality Care

MCMC was named a Top Performer by The Joint Commission, the nation's leading accreditor for healthcare organizations, for the treatment of conditions like heart attack, heart failure, pneumonia and stroke. Our wide-ranging surgical care also received special notice for "outstanding performance." MCMC also received the Guardian of Excellence award from Press Ganey for Outstanding Performance in Clinical Quality. MCMC is one of only 17 hospitals nationwide to receive this award.

In addition, MCMC has earned Emergent Stroke Ready designation from the American Heart Association. This means that we can diagnose, treat and transfer patients, if necessary, who are experiencing stroke-like symptoms. MCMC is also a designated Level IV trauma center by the Kansas Department of Health and Environment.

History: Miami County Medical Center is a member of the Olathe Health System. More than six decades ago, local founders of Olathe Health System envisioned a responsive and responsible healthcare provider to the families in our communities, a continuum of compassionate competent care that would span every stage of life.

This indigenous healthcare startup thrived in native soil, growing from a modest 30-bed hospital in 1953 to a vital regional health network today that serves four counties through Olathe Medical Center, Miami County Medical Center, the 35 family care and specialty clinics of Olathe Medical Services, and a roster of more than 300 physicians and 2,500 employees.

Today, the Olathe Health System purpose remains steadfast: respond to our communities, their families and their healthcare demands with the highest possible level of medical professionalism, advanced technology, and professional care.

Remaining independent and locally owned in today's prevailing trend to healthcare conglomerates requires deeply rooted sensibilities and an unwavering dedication to the healing arts. These qualities drive the Olathe Health System commitment to be the heart of high-tech care. This is the promise that shapes every decision, every action, every day.

Mission: Olathe Health System is focused on improving the health of all individuals in the communities we serve by providing compassionate, quality healthcare in an environment of trust and collaboration.

Vision: Olathe Health System is committed to be the premier healthcare provider and employer throughout the communities we serve.

Miami County Medical Center offers the following services to its community:

- Cardiology
- Ear, Nose and Throat (Otolaryngology)
- Emergency Medicine
- Family Medicine
- General Surgery
- Gerontology
- Internal Medicine
- Ophthalmology
- Orthopedics and Sports Medicine
- Pain Management
- Plastic and Reconstructive Surgery
- Podiatry
- Urology

Miami County Department of Health and Environment Profile

1201 Lakemary Dr, Paola, KS 66071

Director: Rita McKoon, RN

The role of the community health department is to provide leadership to the public health and medical communities in a coordinated effort to detect, respond to, and prevent illness.

Programs administered by the health department include:

- Women's Health Care
- Immunizations
- Women, Infant, and Children (WIC)
- Day Care Licesning
- Kan-Be-Healthy Screenings
- Healthy Start

Schedule of Services:

Weekly schedule of services provided:

Tuesday and Thursday

8 a.m. to noon and 1 to 4 p.m.:

- Walk-In Services
 - o Blood pressure and pulse
 - o Blood Sugar
 - o General counseling
 - o Hemoglobin
 - o Immunizations (Appointment Only)
 - o Injections (with doctor's order)
 - o TB testing (one only, Tuesday from 8 a.m. to noon/1 to 4 p.m., and Wednesday, 4 to 5:30 p.m.)
 - o Urinalysis

Wednesday

- Walk-In Services 4 to 5:30 p.m.
- Women's Health Care 4 to 5:30 p.m.

Thursday

8 a.m. to noon and 1 to 4 p.m.:

- Walk-In Services
 - o No TB
 - o No Women's Health Care

Friday

8 a.m. to noon and 1 to 4 p.m.

- Women's Health Care

II. Methodology

b) Collaborating CHNA Parties Continued

Consultant Qualifications



VVV Consultants LLC

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

VINCE VANDEHAAR, MBA

Principal Consultant and Owner of VVV Consultants LLC

VVV Consultants LLC was incorporated on May 28th, 2009. With over 30 years of business and faculty experience in helping providers, payors and financial service firms obtain their strategic planning and research and development needs, Vince brings in-depth health industry knowledge, research aptitude, planning expertise and energy. VVV Consultants LLC services are organized, formal processes of listening to the voice of the customer. Vince started his consulting business after working for Saint Luke's Health System (SLHS) of Kansas City for 16 years. *(Note: Saint Luke's Hospital of Kansas City, SLHS's largest hospital, won the Malcolm Baldrige National Quality Award in March of 2003. The Baldrige examiners cited Vince's department as "Best Practice" in the areas of customer satisfaction, market research and evaluation efforts <Kansas City Star 3/10/04>).*

VVV Consultants LLC consultants have in-depth experience helping hospitals work with local health departments to engage community residents and leaders to identify gaps between existing health community resources and needs and construct detailed strategies to meet those needs, while still adhering to the hospital's mission and budget. Over the past 20 years, Vandehaar has completed eight comprehensive Baldrige aligned Community Health Needs Assessments for Saint Luke's of Kansas City System facilities (3 campuses) and was contracted to conduct two additional independent department of health consulting projects (prior to IRS 990 regs). To date, VVV has completed 55 CHNA IRS-aligned assessments for Iowa, Kansas, Missouri and Nebraska hospitals and health departments.

Vince Vandehaar, MBA is actively involved in the Kansas City community. He is a member the Greater Kansas City Employee Benefits Association, the Society for Healthcare Strategy and Market Development, the American Marketing Association Kansas City Chapter and Co-Chair of the AMA Kansas City Healthcare Special Interest Group. In addition to these roles, from 2000 to 2008, Vince served as the state chairman for MHA's Data Committee and was a member of KHA's Data Taskforce.

Collaborating Consultants

Alexa Backman, MBA - VVV Consultants LLC
Associate Consultant

II. Methodology

c) CHNA and Town Hall Research Process

Miami County Medical Center's (MCMC) Community Health Needs Assessment process began in the spring of 2015. At that time, an inquiry was made by Mike Jensen, Vice President of Marketing and External Affairs for Olathe Health System, to VVV Consultants LLC to explore the possibility of conducting a comprehensive IRS-aligned CHNA. On that date, VVV Consultants LLC reviewed: VVV Consultants LLC's CHNA experience, CHNA requirements (in-depth regulations), CHNA development steps/options to meet IRS requirements and next steps after option approval.

VVV CHNA Deliverables:

- Uncover/document basic secondary research and health of county, organized by 10 TABS.
- Conduct Town Hall meeting to discuss secondary data and uncover/prioritize county health needs.
- Conduct and report CHNA primary research.
- Prepare and publish IRS-aligned CHNA report to meet requirements.

Miami County Medical Center CHNA Work Plan Project Timeline & Roles 2015

Step	Date (Start-Finish)	Lead	Task
1	4/26/2015	VVV	Sent VVV quote for review.
2	5/22/2015	Hosp	Select CHNA Option A/B/C. Approve and sign VVV CHNA quote.
3	8/31/2015	VVV	Send out REQCommInvite Excel file. Hosp and health dept to fill in PSA stakeholders names, addresses and e-mails.
4	8/31/2015	VVV	Request hosp client to send KHA PO reports (PO101 and PO103) to document service area for FFY 12, 13 and 14. In addition, request hosp to complete three year historical PSA IP/OP/ER/Clinic patient origin file (Use ZipPSA_3yrPOorigin.xls).
5	On or before 9/7/15	VVV	Prepare CHNA Round#2 stakeholder feedback online link. Send text link for hosp review.
6	On or before 9/7/2015	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming CHNA work (general story). Hosp to place.
7	9/14/2015	VVV	Launch and conduct online survey to stakeholders. Hosp will e-mail invite to participate to all stakeholders.
8	9/14/2015	VVV / Hosp	Prepare and send out PR story to local media CHNA survey announcing online CHNA Round #2 feedback. Request public to participate.
9	On or before 10/5/2015	VVV	Assemble and complete secondary research. Find and populate 10 TABS. Create Town Hall PPT for presentation.
10	10/5/2015	Hosp	Prepare and send out community Town Hall invite letter and place local ad.
11	10/5/2015	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming Town Hall. VVV will mock up PR release to media sources.
12	On or before 10/12/2015	All	Conduct conference call (time TBD) with hosp/public health to review Town Hall data and flow.
13	10/22/2015	VVV	Conduct CHNA Town Hall. Breakfast 7-8:30am at Town Square. Review and discuss basic health data plus rank health needs.
14	On or before 11/30/15	VVV	Complete analysis. Release draft one and seek feedback from leaders (hosp and health dept).
15	On or before 12/31/15	VVV	Produce and release final CHNA report. Hosp will post CHNA online.
16	On or before 12/31/15	Hosp	Conduct client implementation plan PSA leadership meeting.
17	30 days prior to end of hospital fiscal year	Hosp	Hold board meetings discuss CHNA needs, create and adopt an implementation plan. Communicate CHNA plan to community.

To meet IRS-aligned CHNA requirements, a four-phase methodology was reviewed and approved as follows:

Phase I—Discovery:

Conduct a 30 minute conference call with the CHNA hospital client and county health department. Review/confirm CHNA calendar of events, explain/coach client to complete required participants 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 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 historical primary research to uncover public health needs, practices and perceptions for hospital primary service areas.

Phase III—Quantify Community Need:

Conduct a 90 minute Town Hall meeting with required county primary service area residents. At each Town Hall meeting, CHNA secondary data will be reviewed, facilitated group discussion will occur and a group ranking activity to determine the most important community health needs will be administered.

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

Post CHNA report findings to meet IRS-aligned CHNA criteria.

After consideration of CHNA stakeholders (sponsoring hospital and local health department), the CHNA Option C was selected with the following project schedule:

Phase I: Discovery.....	August 2015
Phase II: Secondary / Primary Research.....	Sept-Oct 2015
Phase III: Town Hall Meeting.....	October 22, 2015
Phase IV: Prepare / Release CHNA report.....	December 2015

Detail CHNA Development Steps Include:

Steps to Conduct Community Health Needs Assessment	
	Development Steps
Step # 1 Commitment	<i>Determine interest level of area healthcare leaders (Hospital, Health Dept, Mental Health Centers, Schools, Churches, Physicians etc), hold community meeting.</i>
Step # 2 Planning	<i>Prepare brief Community Health Needs Assessment Plan - list goals, objectives, purpose, outcome, roles, community involvement, etc. Hold Community Kick-off meeting.</i>
Step # 3 Secondary Research	<i>Collect & 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	<i>Conduct Community Roundtable (Qualitative Research). Review Secondary Research (Step3) with Community Stakeholders. Gather current opinions and identify health needs.</i>
Step # 4b Primary Research <Optional>	<i>Collect Community Opinions. (Quantitative Research). Gather current opinions (Valid sample size) regarding community health needs and healthcare practices. If appropriate, conduct Physician Manpower Assessment to determine FTE Physician need by specialty.</i>
Steps # 5 Reporting	<i>Prepare/Present comprehensive Community Health Needs Assessment report (to community leaders) with Recommended Actions to improve health. < Note: Formal report will follow IRS Notice 2011-52 regs ></i>
VVV Research & Development, LLC 913 302-7264	

Overview of Town Hall Community Priority Setting Process

Each community has a wealth of expertise to be tapped for CHNA development. For this reason, a Town Hall is the perfect forum to gather community insight and provide an atmosphere to objectively consensus build and prioritize county health issues.

All Town Hall priority-setting and scoring processes involve the input of key stakeholders in attendance. Individuals and organizations attending the Town Halls were critically important to the success of the CHNA. The following list outlines partners invited to Town Hall: local hospital, public health community, mental health community, free clinics, community-based clinics, service providers, local residents, community leaders, opinion leaders, school leaders, business leaders, local government, faith-based organizations and persons (or organizations serving them), people with chronic conditions, uninsured community members, low income residents and minority groups.

Miami County Medical Center's Town Hall was held on Thursday, October 22nd, 2015 at Town Square. Vince Vandelaar and Alexa Backman facilitated this 1 ½ hour session with thirty-eight (38) attendees. (Note: a detailed roster of Town Hall attendees is listed in Section V a).

The following Town Hall agenda was conducted:

1. Welcome and introductions.
2. Review purpose for the CHNA Town Hall and roles in the process.
3. Presentation/review of historical county health indicators (10 tabs).
4. Facilitate Town Hall participant discussion of data (probe health strengths/concerns). Reflect on size and seriousness of any health concerns cited and discuss current community health strengths.
5. Engage Town Hall participants to rank health needs (using four dots to cast votes on priority issues). Tally and rank top community health concerns cited.
6. Close meeting by reflecting on the health needs/community voting results. Inform participants on next steps.

At the end of each Town Hall session, VVV encouraged all community members to continue to contribute ideas to both hospital and health department leaders via e-mail or personal conversations.

(NOTE: To review detail Town Hall discussion content, please turn to Section V for detailed notes of session and activity card content reporting of open-end comments).

Community Health Needs Assessment Town Hall Meeting

on behalf of Miami County Medical Center (Paola, KS)

Vince Vandehaar, MBA

VVV Marketing & Development, LLC
Owner and Adjunct Marketing Professor

Olathe, Kansas 66061
vmvandehaar@aol.com

www.vandehaarmarketing.com
(913) 302-7264

Community Health Needs Assessment (CHNA) Town Hall Discussion Agenda

- I. Opening / Introductions (10 mins)
- II. Review CHNA Purpose and Process (10 mins)
- III. Review Current County "Health Status" –
Secondary Data by 10 Tab Categories
Review Community Feedback Research (35 mins)
- IV. Collect Community Health Perspectives
Hold Community Voting Activity: Determine
MOST Important Health Areas (30 mins)
- I. Close / Next Steps (5 mins)

VVV Marketing & Development, LLC

I. Introduction: Background and Experience



Vince Vandehaar, MBA

VVV Marketing & Development, LLC Principal Consultant
Olathe, KS (913) 302-7264

- Professional Consulting Services: Strategic Planning, Marketing Management, Business Research & Development
 - Focus: Strategy, Research, Deployment
 - Over 25 years of experience with Tillinghast, BCBSKC, Saint Luke's
- Adjunct Professor - Marketing / Health Admin, 26 years +**
- Webster University (1988 – present)
 - Rockhurst University (2010 – present)

Alexa Backman, MBA, Business Development Manager

Town Hall Participation (You)

- ALL attendees welcome to share.
 - Parking Lot
- There are no right or wrong answers.
- Only one person speaks at a time.
- Please give truthful responses.
- Have a little fun along the way.

I. Introductions: A Conversation with the Community

Community members and organizations invited to CHNA Town Hall

Consumers: Uninsured/underinsured people, Members of at-risk populations, Parents, caregivers and other consumers of health care in the community, and Consumer advocates.

Community leaders and groups: The hospital organization's board members, Local clergy and congregational leaders, Presidents or chairs of civic or service clubs -- Chamber of Commerce, veterans' organizations, Lions, Rotary, etc., Representatives from businesses -- owners/CEO's of large businesses (local or large corporations with local branches.), Business people & merchants (e.g., who sell tobacco, alcohol, or other drugs), Representatives from organized labor, Political, appointed and elected officials, Foundations, United Way organizations. And other "community leaders."

Public and other organizations: Public health officials, Directors or staff of health and human service organizations, City/Community planners and development officials, Individuals with business and economic development experience, Welfare and social service agency staff, Housing advocates - administrators of housing programs: homeless shelters, low-income- family housing and senior housing, Education officials and staff - school superintendents, principals and teachers, Public safety officials, Staff from state and area agencies on aging, Law enforcement agencies - Chiefs of police, Local colleges and universities, Coalitions working on health or other issues.

Other providers: Physicians, Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services, Leaders from Catholic Charities and other faith-based service providers, Mental health providers, Oral health providers, Health insurers, Parish and congregational nursing programs, Other health professionals

II. Purpose: Why Conduct Community Health Needs Assessment?

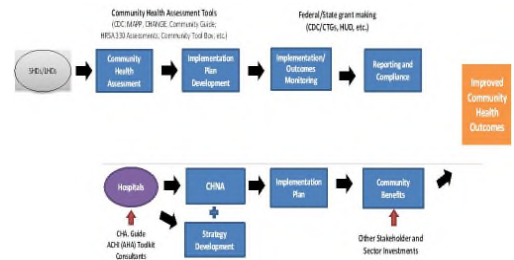
- To determine health-related trends and issues of the community. Revisit 2012 Needs.
- To understand and evaluate health delivery programs in place.
- To develop strategies to address unmet health needs. (After Town Hall).
- To meet Federal requirements—both local hospital and health department.

II. Review CHNA Definition

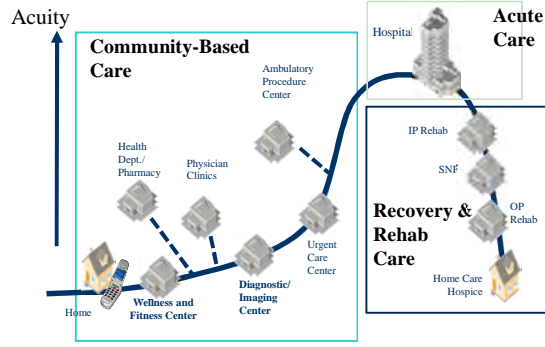
A Community Health Needs Assessment (CHNA) is a systematic collection, assembly, analysis, and dissemination of information about the health of the community. (NOTE: Some the data has already been collected (published) by local, state and federal public health organizations. *Priorities will be collected today*).

CHNA's role is to identify factors that affect the health of a population and determine the availability of resources to adequately address those factors.

Community Health Needs Assessment Joint Process: Hospital and Health Department

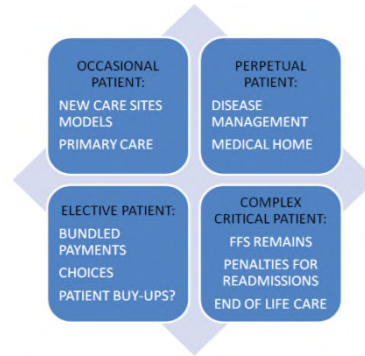


Future System of Care—Sg2



IP = inpatient; SNF = skilled nursing facility; OP = outpatient.

Patient Types



II. Required Written Report IRS 990 Documentation

- a description of the community served
- a description of the CHNA process
- the identity of any and all organizations & third parties which collaborated to assist with the CHNA
- 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
- a **prioritized description of all of the community needs identified by the CHNA and**
- a description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

Historical Needs – Last CHNA

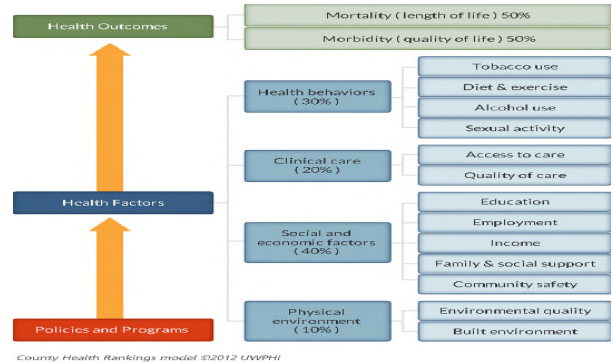
Miami County, KS (MCMC PSA)				
Town Hall Community Health Needs Priorities N=43				
#	Healthcare Topics Cited to Either Change or Improve	Votes	%	Accum
1	Urgent Care Services	22	13.1%	13.1%
2	Affordable Pharmaceuticals	18	10.7%	23.8%
3	Obesity too High	18	10.7%	34.5%
4	Walk-in Doctor Appointments	17	10.1%	44.6%
5	Offer Home Health South of JO CO, KS (PT/OT Access)	15	8.9%	53.6%
6	Teen pregnancy/Births to Unwed Mothers	14	8.3%	61.9%
7	Increase Immunization Rates for Children	13	7.7%	69.6%
8	Increase Access to Dental Care	10	6.0%	75.6%
9	Expand Health Education (Diabetic, Obesity, Behavioral Risk Factors, Chronic Diseases)	9	5.4%	81.0%

Note: Other needs receiving votes: School Screenings, Smoking, Transportation, Centralized Healthcare Data, Low Gym Usage, CV Rehab, Domestic Violence, Mental Health, Accident Rates and Safe Play Areas for Children.

III. Review Current County “Health Status”
 Secondary Data by 10 TAB Categories, Plus KS State Rankings

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

County Health Rankings
 Robert Wood Johnson Foundation and University of WI Health Institute



IV. Collect Community Health Perspectives
 Ask your opinion. Your thoughts?

- 1) **Tomorrow:** What is occurring or might occur *that would affect the “health of our community?”*
- 2) **Today:** What are the *strengths* of our community that contribute to health?
- 3) **Today:** Are there healthcare services in your community / neighborhood that you feel *need to be improved and / or changed?*

Community Health Needs Assessment

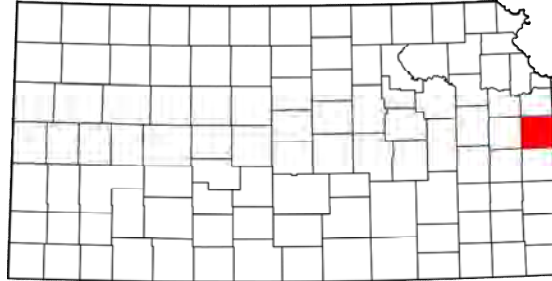
**Questions?
 Next Steps?**

VVV Marketing & Development, LLC
vmlvandehaar@aol.com
 913 302-7264

II. Methodology

d) Community Profile (A Description of Community Served)

Miami County, KS Community Profile



Demographics

The population of Miami County was estimated to be 32,822 in 2014, and had a 0.1% change in population from 2010–2014.¹ The county covers 575.66 square miles and this area is home to Hillsdale Lake, Louisburg Cider Mill, Somerset Wine Trail, Powell Observatory, Soldiers' Monument, Creamery Bridge and the Miami County Historical Museum.² The county has an overall population density of 57.0 persons per square mile. The county is located in eastern Kansas and its economy is based on Professional (scientific, management, administrative and waste management services (26.5%)), Manufacturing (21.6%) and Educational (health and social services (10.4%)).³ The county was founded in 1855 and the county seat is Paola.⁴

The major highway transportation is by US Highway 69, US Highway 169, Route 7 and Route 68.

¹ <http://quickfacts.census.gov/qfd/states/20/20121.html>

² <http://www.miamicountyks.org/471/Tourism-Attractions-Events>

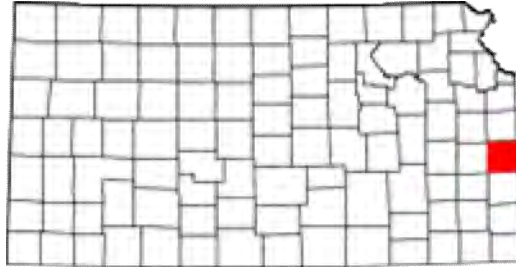
³ http://www.city-data.com/county/Miami_County-KS.html#ixzz2EJNbmmB4

⁴ http://en.wikipedia.org/wiki/Miami_County,_Kansas

II. Methodology

d) Community Profile (A Description of Community Served)

Linn County, KS Community Profile



Demographics

The population of Linn County was estimated to be 9,502 in 2014, and had a -1.6% change in population from 2010–2014.¹ The county covers 594.06 square miles and this area is home to the Linn County Historical Society Museum, Mound City Historic Park, Trading Post Museum, and La Cynge Historical Museum.² The county has an overall population density of 16.0 persons per square mile. The county is located in eastern Kansas and its economy is based on Agriculture (forestry, fishing and hunting and mining (54.0%)), Educational (health and social services (19.0%)) and Professional (scientific, management, administrative and waste management services (12.4%)). The county was founded in 1867 and the county seat is Mound City.⁴

The major highway transportation is by US Highway 169, US Highway 69 and Route 7.

¹ <http://quickfacts.census.gov/qfd/states/20/20107.html>

² <http://www.linncountyks.com>

³ http://www.city-data.com/county/Linn_County-KS.html#ixzz2EJNbmmB4

⁴ http://en.wikipedia.org/wiki/Linn_County,_Kansas

⁵ <http://quickfacts.census.gov/qfd/states/20/20179.html>

Miami County Detail Demographic Profile

ZIP	NAME	County	Population			Households		HH	Per Capita
			YR 2014	YR 2019	Chg	YR 2014	YR 2019	Avg Size	Income 14
66013	Bucyrus	MIAMI	1,932	2,056	6.4%	682	725	2.8	\$38,596
66026	Fontana	MIAMI	719	739	2.8%	263	271	2.7	\$25,638
66053	Louisburg	MIAMI	7,698	7,960	3.4%	2,805	2,901	2.7	\$30,370
66064	Osawatomie	MIAMI	6,358	6,437	1.2%	2,339	2,366	2.6	\$19,311
66071	Paola	MIAMI	12,301	12,391	0.7%	4,747	4,796	2.5	\$28,589
Totals			29,008	29,583	14.6%	10,836	11,059	2.7	\$28,501

ZIP	NAME	County	Population				YR 2014		Females
			YR 2014	Pop65+	Kids<18	GenY	Males	Females	Age20_35
66013	Bucyrus	MIAMI	1,932	274	512	437	975	957	112
66026	Fontana	MIAMI	719	122	169	177	371	348	44
66053	Louisburg	MIAMI	7,698	994	2,297	2,222	3,805	3,893	588
66064	Osawatomie	MIAMI	6,358	929	1,778	1,897	3,112	3,246	598
66071	Paola	MIAMI	12,301	1,990	3,213	3,326	6,015	6,286	931
Totals			29,008	4,309	7,969	8,059	14,278	14,730	2,273

ZIP	NAME	County	Population				Aver	HH	
			White	Black	Amer In	Hisp	HH Inc 14	YR 2014	HH \$50K+
66013	Bucyrus	MIAMI	1,840	17	11	64	\$109,337	682	514
66026	Fontana	MIAMI	687	5	2	23	\$70,089	263	166
66053	Louisburg	MIAMI	7,416	31	40	267	\$83,094	2,805	1,843
66064	Osawatomie	MIAMI	5,884	166	57	193	\$51,457	2,339	921
66071	Paola	MIAMI	11,617	200	88	330	\$73,584	4,747	2,940
Totals			27,444	419	198	877	\$77,512	10,836	6,384

Source: ERSA Demographics

Linn County Detail Demographic Profile

ZIP	NAME	County	Population			Households		HH	Per Capita
			YR 2014	YR 2019	Chg	YR 2014	YR 2019	Avg Size	Income 14
66010	Blue Mound	LINN	624	615	-1.4%	258	255	2.4	\$23,719
66040	Lacygne	LINN	3,419	3,453	1.0%	1,432	1,455	2.4	\$24,310
66056	Mound City	LINN	1,734	1,819	4.9%	763	806	2.2	\$24,716
66072	Parker	LINN	1,060	1,051	-0.8%	406	404	2.6	\$22,096
66075	Pleasanton	LINN	2,152	2,205	2.5%	921	948	2.3	\$20,388
66767	Prescott	LINN	535	564	5.4%	222	235	2.3	\$20,423
Totals			9,524	9,707	11.5%	4,002	4,103	2.4	\$22,609

ZIP	NAME	County	Population				YR 2014		Females
			YR 2014	Pop65+	Kids<18	GenY	Males	Females	Age20_35
66010	Blue Mound	LINN	624	135	142	175	323	301	48
66040	Lacygne	LINN	3,419	689	833	855	1,721	1,698	215
66056	Mound City	LINN	1,734	419	378	435	858	876	118
66072	Parker	LINN	1,060	184	290	291	544	516	84
66075	Pleasanton	LINN	2,152	452	531	574	1,035	1,117	166
66767	Prescott	LINN	535	122	113	133	270	265	33
Totals			9,524	2,001	2,287	2,463	4,751	4,773	664

ZIP	NAME	County	Population				Aver		HH	
			White	Black	Amer In	Hisp	HH Inc 14	YR 2014	HH \$50K+	
66010	Blue Mound	LINN	605	2	2	8	\$57,368	258	129	
66040	Lacygne	LINN	3,278	21	34	71	\$58,042	1,432	795	
66056	Mound City	LINN	1,665	17	12	32	\$55,863	763	336	
66072	Parker	LINN	1,030	9	3	32	\$57,690	406	256	
66075	Pleasanton	LINN	2,031	28	12	60	\$47,531	921	348	
66767	Prescott	LINN	501	5	5	16	\$48,350	222	85	
Totals			9,110	82	68	219	\$54,141	4,002	1,949	

Source: ERSA Demographics

III. Community Health Status

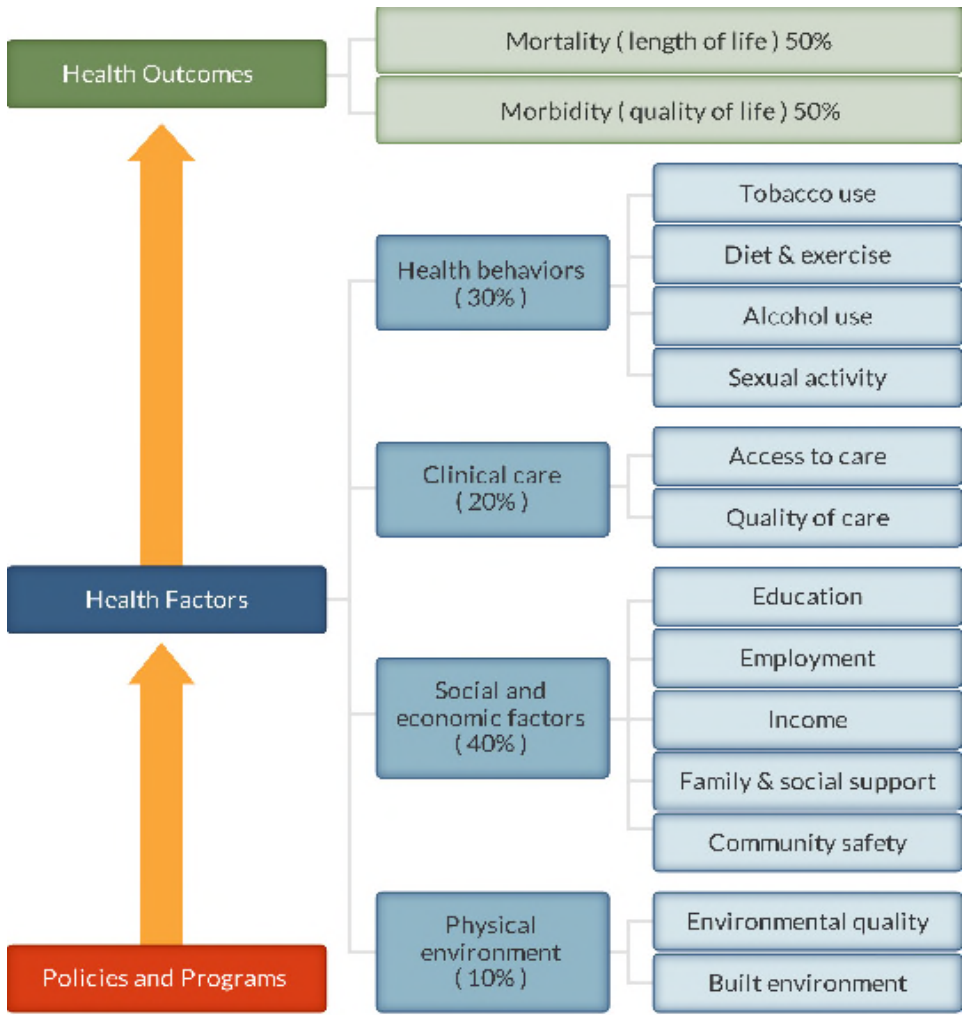
[VVV Consultants LLC]

III. Community Health Status

a) Historical Health Statistics

Health Status Profile

This section of the CHNA reviews published quantitative community health indicators and results of our recent CHNA Town Hall. To produce this profile, VVV Consultants LLC staff analyzed data from multiple sources. This analysis focuses on a set of published health indicators organized by ten areas of focus (10 tabs), results from the 2015 County Health Rankings and conversations from Town Hall primary research. **Each table reflects a Trend column, with GREEN denoting growing/high performance indicators, YELLOW denoting minimal change/average performance indicators and RED denoting declining/low performance indicators.** <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

2015 State Health Rankings for Miami County, KS

#	KANSAS 2015 COUNTY HEALTH RANKINGS (105 COUNTIES)	DEFINITIONS	MIAMI CO 2015	TREND	LINN CO 2015	RURAL KS NORM (15)
1	Physical Environment	Environmental Quality	80		70	58
2	Health Factors		29		91	39
2a	Clinical Care	Access to Care / Quality of Care	12		66	46
2b	Social & Economic Factors	Education, Employment, Income, Family/Social Support, Community Safety	65		91	37
3	Health Outcomes		33		52	51
3a	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	21		75	42
3b	Morbidity	Quality of Life	43		80	53
3c	Mortality	Length of Life	35		32	51
	OVERALL RANK		29		52	35
Rural KS norm includes the following 15 counties: Barton, Ellis, Gove, Kiowa, Linn, Miami, Norton, Osborne, Pawnee, Phillips, Russell, Sheridan, Smith, Thomas and Trego 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	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
1a a	Population, 2014 Estimate	32,822		9,502	2,904,021	104,831	People Quick Facts
1a b	Population, Percent Change - April 1, 2010 to July 1, 2014	0.1%		-1.6%	1.8%	-0.5%	People Quick Facts
1a c	Population, 2010	32,787		9,656	2,853,118	104,876	People Quick Facts
1a d	Persons Under 5 years, Percent, 2014	6.1%		5.0%	6.9%	6.0%	People Quick Facts
1a e	Persons Under 18 years, Percent, 2014	25.7%		23.3%	24.9%	22.1%	People Quick Facts
1a f	Persons 65 Years and Over, Percent, 2014	15.2%		20.9%	14.3%	20.4%	People Quick Facts
1a g	Female Persons, Percent, 2014	50.4%		50.5%	50.2%	49.2%	People Quick Facts
1a h	White Alone, Percent, 2014	95.7%		96.3%	86.8%	95.4%	People Quick Facts
1a i	Black or African American Alone, Percent, 2014	1.3%		0.8%	6.3%	1.7%	People Quick Facts
1a j	Hispanic or Latino, Percent, 2014	3.1%		2.3%	11.4%	5.2%	People Quick Facts
1a k	Foreign Born Persons, Percent, 2009-2013	0.9%		0.6%	6.7%	2.1%	People Quick Facts
1a l	Language Other than English Spoken at Home, Pct Age 5+, 2009-2013	1.8%		1.5%	11.0%	4.7%	People Quick Facts
1a m	Living in Same House 1 Year & Over, Percent, 2009-2013	86.4%		91.2%	83.2%	86.6%	People Quick Facts
1a n	People 65+ Living Alone, 2009-2013	24.4%		32.5%	29.4%	32.4%	American Community Survey

Tab 1 Demographic Profile

TAB	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
1b a	Veterans, 2009-2013	2,365		928	211,113	18,731	People Quick Facts
1b b	Persons per Square Mile, 2010	57.0		16.3	34.9	16.9	Geography Quick Facts
1b c	Rate of Violent Crime per 1,000 Population, 2013	2.0		1.3	3.2	0.0	Kansas Bureau of Investigation
1b d	Children in Single-Parent Households	29.0%		31.0%	NA	29.0%	County Health Rankings
1b e	People Living Below Poverty Level, 2009-2013	9.5%		12.9%	13.7%	12.5%	American Community Survey
1b f	Children Living Below Poverty Level, 2009-2013	13.0%		16.9%	18.7%	18.1%	American Community Survey
1b g	Limited Access to Healthy Foods	3.0%		11.0%	NA	8.0%	County Health Rankings
1b h	People 65+ Living Below Poverty Level, 2009-2013	4.2%		10.3%	7.6%	8.5%	American Community Survey
1b i	People 65+ with Low Access to a Grocery Store, 2010	1.3%		5.7%	NA	9.5%	U.S. Department of Agriculture - Food Environment Atlas
1b j	Voter Turnout, 2012	69.5%		6.4%	66.8%	71.0%	Kansas Secretary of State

Tab 2 Economic Profile

TAB	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
2a a	Households, 2009-2013	12,334		12,334	1,110,440	42,866	People Quick Facts
2a b	Median Household Income, 2009-2013	\$58,936		\$58,936	\$51,332	\$44,017	American Community Survey
2a c	Per Capita Money Income in Past 12 Months (2013 dollars), 2009-2013	\$28,412		\$26,224	\$26,929	\$25,046	People Quick Facts
2a d	Households with Cash Public Assistance Income, 2009-2013	2.9%		3.5%	2.3%	1.6%	American Community Survey
2a e	Housing Units, 2014	13,322		5,446	1,248,813	106,387	People Quick Facts
2a f	Median Value of Owner-Occupied Housing Units, 2009-2013	\$162,500		\$98,000	\$128,400	\$75,775	People Quick Facts
2a g	Homeownership, 2009-2013	74.1%		63.3%	60.7%	60.7%	American Community Survey
2a h	Housing Units in Multi-Unit Structures, Percent, 2009-2013	10.2%		3.1%	17.7%	9.0%	People Quick Facts
2a i	Persons per Household, 2009-2013	2.6		2.2	2.5	2.3	People Quick Facts
2a j	Severe Housing Problems, 2007-2011	13.2%		12.0%	13.1%	8.5%	County Health Rankings
2a k	Homeowner Vacancy Rate, 2009-2013	0.9%		3.6%	2.0%	1.8%	American Community Survey
2a l	Renters Spending 30% or More of Household Income on Rent, 2009-2013	51.8%		45.7%	45.5%	37.0%	American Community Survey

Tab 2 Economic Profile

TAB	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
2b a	Retail Sales per Capita, 2007	\$8,183		\$4,981	\$12,444	\$9,577	Business Quick Facts
2b b	Total Number of Firms, 2007	3,211		642	237,040	10,781	Business Quick Facts
2b c	Unemployed Workers in Civilian Labor Force, 2014	4.4%		6.4%	4.3%	2.7%	U.S. Bureau of Labor Statistics
2b d	Private Nonfarm Employment, Percent Change, 2012-2013	0.2%		2.8%	1.4%	5.3%	Business Quick Facts
2a e	Households with No Car and Low Access to a Grocery Store, 2010	1.7%		2.6%	NA	2.1%	U.S. Department of Agriculture - Food Environment Atlas
2b f	Child Food Insecurity Rate, 2013	22.1%		24.7%	22.3%	20.8%	Feeding America
2a g	Grocery Store Density, 2011	0.1		0.3	NA	0.4	U.S. Department of Agriculture - Food Environment Atlas
2b h	Low-Income and Low Access to a Grocery Store, 2010	2.7%		10.5%	NA	15.4%	U.S. Department of Agriculture - Food Environment Atlas
2b i	Low-Income Persons who are SNAP Participants, 2007	37.2%		26.8%	NA	12.3%	U.S. Department of Agriculture - Food Environment Atlas
2b j	Households without a Vehicle, 2009-2013	3.4%		5.0%	5.3%	4.2%	American Community Survey
2b k	Mean Travel Time to Work (Minutes), Workers Age 16+, 2009-2013	0.3		34.4	19.0	14.0	People Quick Facts
2b l	Solo Drivers with a Long Commute, 2009-2013	50.6%		45.0%	19.6%	12.2%	County Health Rankings
2b m	Workers who Walk to Work, 2009-2013	1.9%		1.9%	2.4%	4.6%	American Community Survey

Tab 3 Public Schools Health Delivery Profile

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

TAB	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
3 a	Students Eligible for the Free Lunch Program, 2012-2013	32.3%		43.3%	39.5%	34.2%	National Center for Education Statistics
3 b	Poverty Status by School Enrollment, 2009-2013	12.7%		10.9%	12.9%	12.6%	American Community Survey
3 c	Student-to-Teacher Ratio, 2012-2013	14.2		12.6	15.1	9.4	National Center for Education Statistics
3 d	High School Graduation, 2013	90.4%		89.9%	85.8%	84.6%	Annie E. Casey Foundation
3 e	Bachelor's Degree or Higher, Percent of Persons Age 25+, 2009-2013	23.9%		14.2%	30.3%	20.5%	People Quick Facts

Tab 3 Public Schools Health Delivery Profile

#	Indicators	LaCygne	Osawatomie	Paola
1	Total Public School Nurses	1	2	2
2	School Nurse is Part of the IEP Team	Yes	Yes	Yes
3	School Wellness Plan in Place (Active)	Yes	Yes	Yes
4	VISION: Screened / Referred to Prof / Seen by Professional	695/69/17	NA	1,228/120/unknown
5	HEARING: Screened / Referred to Prof / Seen by Professional	603/28/8	NA	826/21/unknown
6	ORAL HEALTH: Screened / Referred to Prof / Seen by Professional	623/200/3	NA	0/0/0
7	SCOLIOSIS: Screened / Referred to Prof / Seen by Professional	N/A	0/0/0	0/0/0
8	Student Served with No Identified Chronic Health Concerns	790	NA	1504
9	School has a Suicide Prevention Program	No	No	No
10	Compliance on Required Vaccinations	100%	100%	100 % (Jr High and High School)

Source: Data provided by each school district. Louisburg and Mound City School Data NA.

TAB 4 Maternal and Infant Health Profile

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

TAB	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
4 a	Percent of Births where Prenatal Care Began in First Trimester, 2011-2013	87.9%		81.9%	78.6%	78.9%	Kansas Department of Health and Environment
4 b	Percentage of Premature Births, 2011-2013	8.8%		7.3%	9.0%	8.9%	Kansas Department of Health and Environment
4 c	Percent of Births with Low Birth Weight, 2011-2013	6.4%		4.8%	7.1%	7.6%	Kansas Department of Health and Environment
4 d	Percent of Births where Mother Smoked During Pregnancy, 2011-2013	16.8%		22.9%	13.5%	NA	Kansas Department of Health and Environment
4 e	Percent of all Births Occurring to Teens (15-19), 2011-2013	2.9%		10.0%	8.1%	7.6%	Kansas Department of Health and Environment
4 f	Percent of Births Occurring to Unmarried Women, 2011-2013	31.9%		38.1%	36.7%	31.3%	Kansas Department of Health and Environment
4 g	Average Monthly WIC Participation per 1,000 Population, 2014	14.0%		25.8%	22.5%	20.9%	Kansas Department of Health and Environment
4 h	Percent of WIC Mothers Breastfeeding Exclusively, 2014	16.9%		15.1%	13.2%	14.6%	Kansas Department of Health and Environment

TAB 4 Maternal and Infant Health Profile

TAB	Vital Statistics	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS
4	Total Live Births, 2010	384		92	40,439
4	Total Live Births, 2011	380		101	39,628
4	Total Live Births, 2012	364		97	40,304
4	Total Live Births, 2013	297		91	38,805
4	Total Live Births, 2014	410		111	39,193
4	Total Live Births, 2010-2014 - Five year rate	11.2%		10.3%	13.8%

TAB 5 Hospitalization/Provider Profile

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

TAB	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
5 a	Ratio of Population to Primary Care Physicians, 2013	2,038		3,321	1,816	2,114	Kansas Department of Health and Environment
5 b	Staffed Hospital Bed Ratio, 2013	6		0	3	13	Kansas Hospital Association
5 c	Percent of Births with Inadequate Birth Spacing, 2011-2013	10.9%		10.2%	11.0%	10.8%	Kansas Department of Health and Environment
5 d	Preventable Hospital Stays	58		69	NA	64	County Health Rankings
5 e	Heart Disease Hospital Admission Rate, 2010-2012	240		351	281	262	Kansas Department of Health and Environment
5 f	Congestive Heart Failure Hospital Admission Rate, 2010-2012	136		193	190	191	Kansas Department of Health and Environment
5 g	Chronic Obstructive Pulmonary Disease (COPD) Hospital Admission Rate, 2010-2012	70		138	132	194	Kansas Department of Health and Environment
5 h	Bacterial Pneumonia Hospital Admission Rate, 2010-2012	142		224	254	488	Kansas Department of Health and Environment
5 i	Injury Hospital Admission Rate, 2010-2012	756		1219	892	691	Kansas Department of Health and Environment

TAB 5 Hospitalization/Provider Profile

#	KS Hospital Assoc PO103	Miami County, KS IP			TREND
		FFY2012	FFY2013	FFY2014	
1	Total Discharges	3,132	2,910	3,045	
2	Total IP Discharges-Age 0-17	129	110	110	
3	Total IP Discharges-Age 18-44	341	271	266	
4	Total IP Discharges-Age 45-64	723	723	800	
5	Total IP Discharges-Age 65-74	482	437	482	
6	Total IP Discharges-Age 75+	650	739	651	
7	Psychiatric	148	120	100	
8	Obstetric	333	254	319	
#	KS Hospital Assoc PO103	Miami County Medical Center Only			TREND
		FFY2012	FFY2013	FFY2014	
1	Total Discharges	341	282	282	
2	Total IP Discharges-Age 0-17	5	3	1	
3	Total IP Discharges-Age 18-44	38	35	13	
4	Total IP Discharges-Age 45-64	88	68	102	
5	Total IP Discharges-Age 65-74	73	54	56	
6	Total IP Discharges-Age 75+	128	118	108	

Source: Olathe Health System Decision Support.

TAB 6 Social & Rehab Services Profile

Behavioral healthcare provides another important indicator of community health status.

TAB	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
6	a Depression: Medicare Population, 2012	15.4%		12.9%	16.2%	15.2%	Centers for Medicare and Medicaid Services
6	b Alcohol-Impaired Driving Deaths, 2009-2013	25.7%		14.0%	33.3%	36.4%	County Health Rankings
6	d Poor Mental Health Days	2.6		3.3	NA	2.8	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	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
7a	a Percent of Adults Tested and Diagnosed with High Cholesterol, 2013	37.3%		45.6%	38.1%	41.0%	Kansas Department of Health and Environment
7a	b Adult Obesity	35.0%		35.0%	30.0%	30.0%	County Health Rankings
7a	c Percent of Adults Who are Binge Drinkers, 2013	15.1%		NA	15.4%	16.7%	Kansas Department of Health and Environment
7a	d Percent of Adults Who Currently Smoke Cigarettes, 2013	28.4%		26.2%	20.0%	22.0%	Kansas Department of Health and Environment
7a	e Percent of Adults with Diagnosed Hypertension, 2013	26.3%		38.7%	31.3%	31.7%	Kansas Department of Health and Environment
7a	f Percent of Adults with Doctor Diagnosed Arthritis, 2013	30.0%		27.3%	23.9%	23.3%	Kansas Department of Health and Environment
7a	g Physical Inactivity	26.0%		27.0%	NA	25.0%	County Health Rankings
7a	h Percent of Adults with Fair or Poor Self-Perceived Health Status, 2013	11.3%		19.2%	15.4%	12.4%	Kansas Department of Health and Environment
7a	i Public Water Supply - Percent of Population Served Unaffected by SDWA Nitrate Violations, 2013	100.0%		100.0%	99.5%	96.2%	Kansas Department of Health and Environment
7a	j Sexually Transmitted Infections	156		222	NA	369	County Health Rankings

TAB 7 Health Risk Profiles

TAB	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
7b a	Hypertension: Medicare Population, 2012	50.7%		48.8%	52.7%	55.2%	Centers for Medicare and Medicaid Services
7b b	Hyperlipidemia: Medicare Population, 2012	40.9%		41.1%	39.3%	38.1%	Centers for Medicare and Medicaid Services
7b c	Rheumatoid Arthritis or Osteoarthritis: Medicare Population, 2012	26.5%		26.4%	27.7%	33.5%	Centers for Medicare and Medicaid Services
7b d	Ischemic Heart Disease: Medicare Population, 2012	25.7%		26.4%	26.7%	29.7%	Centers for Medicare and Medicaid Services
7b e	Diabetes: Medicare Population, 2012	27.1%		26.5%	24.6%	23.0%	Centers for Medicare and Medicaid Services
7b f	Heart Failure: Medicare Population, 2012	11.7%		12.0%	14.0%	18.3%	Centers for Medicare and Medicaid Services
7b g	Chronic Kidney Disease: Medicare Population, 2012	14.3%		13.6%	13.9%	13.1%	Centers for Medicare and Medicaid Services
7b h	COPD: Medicare Population, 2012	9.6%		10.1%	11.0%	12.9%	Centers for Medicare and Medicaid Services
7b i	Alzheimer's Disease or Dementia: Medicare Pop 2012	7.8%		6.7%	9.9%	10.6%	Centers for Medicare and Medicaid Services
7b j	Atrial Fibrillation: Medicare Population, 2012	8.7%		8.6%	8.0%	9.3%	Centers for Medicare and Medicaid Services
7b k	Cancer: Medicare Population, 2012	6.5%		7.2%	8.0%	9.1%	Centers for Medicare and Medicaid Services
7b l	Osteoporosis: Medicare Population, 2012	3.9%		3.5%	6.1%	8.2%	Centers for Medicare and Medicaid Services
7b m	Asthma: Medicare Population, 2012	4.0%		3.9%	3.8%	3.5%	Centers for Medicare and Medicaid Services
7b n	Stroke: Medicare Population, 2012	3.4%		3.4%	3.2%	2.6%	Centers for Medicare and Medicaid Services

TAB 8 Uninsured Profiles

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

TAB	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
8 a	Uninsured Adult Population Rate, 2013	13.4%		19.6%	17.5%	17.4%	U.S. Census Bureau

TAB 8 Uninsured Profiles

Community Benefit Report - MCMC		YR 2012	YR 2013	YR 2014	TREND
1	Charity Care and Means-Tested Government Programs	\$1,867,840	\$1,885,409	\$2,195,671	
2	Health Professionals Education	\$206,175	\$54,662	\$276,843	
3	General Community Support	\$48,701	\$40,095	\$39,930	
Source: Olathe Health System Decision Support.					

TAB 9 Mortality Profile

The leading causes of county deaths are listed below. Areas of higher than expected are so noted.

TAB	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
9 a	Life Expectancy for Females, 2010	80.4		78.5	80.5	80.8	Institute for Health Metrics and Evaluation
9 b	Life Expectancy for Males, 2010	75.8		74.5	75.8	76.2	Institute for Health Metrics and Evaluation
9 c	Infant Mortality Rate, 2009-2013	0		0	0	0	Kansas Department of Health and Environment
9 d	Age-Adjusted Mortality Rate per 100,000 Population, 2011-2013	674		0	757	740	Kansas Department of Health and Environment
9 e	Age-Adjusted Years of Potential Life Lost - Traffic Injury, 2011-2013	547		1,511	490	1,541	Kansas Department of Health and Environment
9 f	Age-Adjusted Cancer Mortality Rate per 100,000 Population, 2011-2013	140		205	166	148	Kansas Department of Health and Environment
9 g	Age-Adjusted Heart Disease Mortality Rate per 100,000 Population, 2011-2013	178		174	156	166	Kansas Department of Health and Environment
9 h	Age-Adjusted Chronic Lower Respiratory Disease Mortality Rate per 100,000 Population, 2011-2013	39		53	51	51	Kansas Department of Health and Environment
9 i	Age-Adjusted Traffic Injury Mortality Rate per 100,000 Population, 2011-2013	15		40	13	25	Kansas Department of Health and Environment
9 j	Age-Adjusted Unintentional Injuries Mortality Rate per 100,000 Population, 2011-	39		55	40	66	Kansas Department of Health and Environment
9 k	Age-Adjusted Suicide Mortality Rate per 100,000 Population, 2011-2013	12		37	15	14	Kansas Department of Health and Environment

TAB 9 Mortality Profile

#	Causes of Death by County of Residence, KS Vital Statistics 2014	MIAMI CO	TREND	LINN CO	KANSAS
	T O T A L S	309		105	25,731
1	All Other Diseases	56		19	5,240
2	Ischemic Heart Diseases	49		10	2,995
3	Other Heart Disease	28		8	2,260
4	Cancers of Trachea, Broncus and Lung	23		5	1,574
5	Other Cancer	21		3	1,416
6	Chronic Lower Respiratory Dis.	19		9	1,663
7	Alzheimers	14		3	791
8	Cerebrovascular Dis.	14		6	1,341
9	All Other Acc./Adverse Effects	11		4	1,017
10	Cancer of Pancreas	8		3	381
11	Nephritis, Neph. Synd., Nephrosis	7		4	560
12	Cancers of Colon, Rectum & Anus	6		9	508
13	Influenza and Pneumonia	6		2	631
14	Cancers of Urinary Tract	5		0	300
15	Diabetes Mellitus	5		3	638
16	Hypertensive Heart Dis. w./, w./o. Renal Disease	5		3	207
17	Leukemia	4		1	265
18	Atherosclerosis	4		1	439
19	Suicide	4		3	454
20	Chronis Liver Dis. & Cirrhosis	3		2	283
21	Cancer of Breast	2		1	362

TAB 10 Preventive Health Profile

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

TAB	HEALTH INDICATOR	MIAMI CO 2015	TREND	LINN CO 2015	KANSAS	RURAL KS NORM (15)	SOURCE
10	a Access to Exercise Opportunities, 2015	66.4%		35.0%	78.2%	51.3%	County Health Rankings
10	b Percent of Infants Fully Immunized at 24 Months, 2012-2014	39.9%		71.3%	61.5%	78.6%	Kansas Department of Health and Environment
10	c Percent of Adults Ages 65 Yrs + Who Were Immunized Against Influenza Past 12 Mo,	66.9%		NA	64.8%	NA	Kansas Department of Health and Environment
10	d Percent of Adults Who Reported Consuming Fruit Less than 1 Time per Day, 2013	43.1%		52.0%	41.7%	NA	Kansas Department of Health and Environment
10	e Percent of Adults Who Reported Consuming Vegetables Less than 1 Time per Day, 2013	17.4%		27.6%	22.9%	NA	Kansas Department of Health and Environment
10	f Diabetic Screening	89.0%		86.0%	NA	86.0%	County Health Rankings
10	g Mammography Screening	66.1%		59.6%	NA	64.0%	County Health Rankings
10	h Percent Annual Check-Up Visit with PCP	NA			NA	NA	Not Available
10	i Percent Annual Check-Up Visit with Dentist	NA			NA	NA	Not Available
10	j Percent Annual Check-Up Visit with Eye Doctor	NA			NA	NA	Not Available

Community Feedback Research

For CHNA Round #2, it also important to gather community perspective from key stakeholders on their views of progress to address baseline CHNA needs documented three years ago. Below are findings of this online community primary research:

Question 1—Overall Quality Ranking

Miami County Medical Center (Primary Service Area) - Miami County, KS N=101						
1. Three years ago, a Community Health Needs Assessment was completed. This assessment identified a number of health needs for our community. Today, we are updating this assessment and would like to know how you rate the "Overall Quality" of healthcare delivery in our community?						
Answer Options	Very Good	Good	Fair	Poor	Very Poor	Valid N
Miami County N=101	13	51	31	3	3	101
Top 2 Boxes (Very Good / Good)	63.4%					
KS Stakeholders Round #2	406	835	274	37	10	1562
Top 2 Boxes (Very Good / Good)	79.4%					

Questions 5 & 6—Community Ranking of Healthcare Services 2015

Miami County Medical Center (Primary Service Area) Miami County, KS N=101			
5. How would our community rate each of the following ?	KS Stakeholders Round #2 Bottom 2 Boxes	Miami Co N=101	TREND
Ambulance Services	3.5%	2.8%	
Child Care	16.9%	16.7%	
Chiropractors	6.0%	5.4%	
Dentists	14.1%	15.1%	
Emergency Room	4.9%	14.3%	
Eye Doctor / Optometrist	6.4%	6.7%	
Family Planning Services	15.0%	21.8%	
Home Health	12.8%	8.2%	
Hospice	8.8%	9.8%	
Inpatient Services	3.5%	8.6%	
Mental Health Services	29.7%	27.5%	
Nursing Home	12.6%	15.9%	
Outpatient Services	2.6%	5.3%	
Pharmacy	2.8%	8.1%	
Primary Care	5.2%	9.3%	
Public Health Department	3.4%	8.8%	
School Nurse	7.0%	11.7%	
Visiting Specialists	7.5%	14.9%	

Question 7—Receiving Healthcare Services Outside our Community

Miami County Medical Center (Primary Service Area) Miami County, KS N=101			
7. Over the past 2 years, did you or do you know someone who received health care services outside of our community?	KS Stakeholders Round #2 Bottom 2 Boxes	Miami Co N=101	TREND
Yes	78.6%	84.2%	
No	12.9%	13.2%	
Don't know	8.6%	2.6%	
TOTALS	100.0%	100.0%	

Question 8—Requested Discussion Items for Town Hall Agenda

Miami County Medical Center (Primary Service Area) Miami County, KS N=101			
8. Are there any other health needs that we need to discuss at our upcoming CHNA Town Hall meeting?	KS Stakeholders Round #2 Bottom 2 Boxes	Miami Co N=101	TREND
Abuse / Violence	4.8%	5.5%	
Alcohol	5.0%	5.5%	
Cancer	5.7%	4.2%	
Diabetes	4.9%	6.1%	
Drugs / Substance Abuse	7.4%	6.1%	
Family Planning	2.8%	3.3%	
Heart Disease	3.8%	1.8%	
Lead Exposure	0.7%	0.9%	
Mental Illness	7.4%	8.1%	
Nutrition	5.2%	5.3%	
Obesity	8.0%	7.4%	
Ozone	0.9%	1.1%	
Physical Exercise	6.2%	5.0%	
Poverty	4.6%	6.1%	
Respiratory Disease	2.5%	1.5%	
Sexual Transmitted Diseases	2.0%	2.0%	
Suicide	4.4%	6.3%	
Teen Pregnancy	3.8%	4.8%	
Tobacco Use	4.2%	3.7%	
Vaccinations	4.9%	3.1%	
Water Quality	3.4%	2.6%	
Wellness Education	6.1%	6.6%	
Some Other Need (please specify below)	1.2%	3.1%	
TOTAL	100.0%	100.0%	

IV. Inventory of Community Health Resources

[VVV Consultants LLC]

Inventory of Health Services 2015 - Miami County, KS				
Cat	HC Services Offered in County: Yes / No	Hospital	Health Dept	Other
Clinic	Primary Care	YES		
Hosp	Alzheimer Center			
Hosp	Ambulatory Surgery Centers			
Hosp	Arthritis Treatment Center			
Hosp	Bariatric / Weight Control Services			
Hosp	Birthing / LDR / LDRP Room			
Hosp	Breast Cancer	YES		
Hosp	Burn Care			
Hosp	Cardiac Rehabilitation			
Hosp	Cardiac Surgery			
Hosp	Cardiology Services	YES		
Hosp	Case Management	YES		
Hosp	Chaplaincy / Pastoral Care Services			
Hosp	Chemotherapy			
Hosp	Colonoscopy	YES		
Hosp	Crisis Prevention			
Hosp	CT Scanner	YES		
Hosp	Diagnostic Radioisotope Facility	YES		
Hosp	Diagnostic / Invasive Catheterization			
Hosp	Electron Beam Computed Tomography (EBCT)			
Hosp	Enrollment Assistance Services			YES
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)			
Hosp	Fertility Clinic			
Hosp	FullField Digital Mammography (FFDM)	YES		
Hosp	Genetic Testing / Counseling			
Hosp	Geriatric Services	YES		
Hosp	Heart	YES		
Hosp	Hemodialysis			YES
Hosp	HIV / AIDS Services			
Hosp	Image-Guided Radiation Therapy (IGRT)			
Hosp	Inpatient Acute Care - Hospital Services	YES		
Hosp	Intensity-Modulated Radiation Therapy (IMRT) 161			
Hosp	Intensive Care Unit			
Hosp	Intermediate Care Unit			
Hosp	Interventional Cardiac Catheterization			
Hosp	Isolation room	YES		
Hosp	Kidney	YES		
Hosp	Liver	YES		
Hosp	Lung	YES		
Hosp	Magnetic Resonance Imaging (MRI)	YES		
Hosp	Mammograms	YES		
Hosp	Mobile Health Services			
Hosp	Multislice Spiral Computed Tomography (<64 slice CT)	YES		
Hosp	Multislice Spiral Computed Tomography (<64+ slice CT)			
Hosp	Neonatal			
Hosp	Neurological Services			
Hosp	Obstetrics			
Hosp	Occupational Health Services			
Hosp	Oncology Services			
Hosp	Orthopedic Services	YES		
Hosp	Outpatient Surgery	YES		
Hosp	Pain Management	YES		
Hosp	Palliative Care Program			
Hosp	Pediatric	YES	YES	
Hosp	Physical Rehabilitation	YES		
Hosp	Positron Emission Tomography (PET)			

Inventory of Health Services 2015 - Miami County, KS				
Cat	HC Services Offered in County: Yes / No	Hospital	Health Dept	Other
Hosp	Positron Emission Tomography / CT (PET/CT)			
Hosp	Psychiatric Services			YES
Hosp	Radiology, Diagnostic	YES		
Hosp	Radiology, Therapeutic			
Hosp	Reproductive Health			
Hosp	Robotic Surgery			
Hosp	Shaped Beam Radiation System 161			
Hosp	Single Photon Emission Computerized Tomography			
Hosp	Sleep Center			
Hosp	Social Work Services	YES		
Hosp	Sports Medicine	YES		
Hosp	Stereotactic Radiosurgery			
Hosp	Swing Bed Services			
Hosp	Transplant Services			
Hosp	Trauma Center -Level IV	YES		
Hosp	Ultrasound	YES		
Hosp	Women's Health Services		YES	
Hosp	Wound Care	YES		
SR	Adult Day Care Program			
SR	Assisted Living			YES
SR	Home Health Services	YES		YES
SR	Hospice			YES
SR	LongTerm Care			YES
SR	Nursing Home Services			YES
SR	Retirement Housing			YES
SR	Skilled Nursing Care			YES
ER	Emergency Services	YES		
ER	Urgent Care Center			
ER	Ambulance Services			YES
SERV	Alcoholism-Drug Abuse			
SERV	Blood Donor Center			
SERV	Chiropractic Services			YES
SERV	Complementary Medicine Services			YES
SERV	Dental Services			YES
SERV	Fitness Center			YES
SERV	Health Education Classes	YES		
SERV	Health Fair (Annual)	YES		
SERV	Health Information Center			
SERV	Health Screenings	YES	YES	
SERV	Meals on Wheels			YES
SERV	Nutrition Programs	YES	YES	
SERV	Patient Education Center	YES		
SERV	Support Groups			YES
SERV	Teen Outreach Services			YES
SERV	Tobacco Treatment / Cessation Program		YES	
SERV	Transportation to Health Facilities			YES
SERV	Wellness Program	YES		YES

Inventory of Health Services 2015 - Linn County, KS				
Cat	HC Services Offered in County: Yes / No	Hospital	Health Dept	Other
Clinic	Primary Care			YES-OMSI
Hosp	Alzheimer Center			
Hosp	Ambulatory Surgery Centers			
Hosp	Arthritis Treatment Center			
Hosp	Bariatric / Weight Control Services			
Hosp	Birthing / LDR / LDRP Room			
Hosp	Breast Cancer			
Hosp	Burn Care			
Hosp	Cardiac Rehabilitation			
Hosp	Cardiac Surgery			
Hosp	Cardiology Services			
Hosp	Case Management			
Hosp	Chaplaincy / Pastoral Care Services			
Hosp	Chemotherapy			
Hosp	Colonoscopy			
Hosp	Crisis Prevention			
Hosp	CT Scanner			
Hosp	Diagnostic Radioisotope Facility			
Hosp	Diagnostic / Invasive Catheterization			
Hosp	Electron Beam Computed Tomography (EBCT)			
Hosp	Enrollment Assistance Services			
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)			
Hosp	Fertility Clinic			
Hosp	FullField Digital Mammography (FFDM)			
Hosp	Genetic Testing / Counseling			
Hosp	Geriatric Services			
Hosp	Heart			
Hosp	Hemodialysis			
Hosp	HIV / AIDS Services			
Hosp	Image-Guided Radiation Therapy (IGRT)			
Hosp	Inpatient Acute Care - Hospital Services			
Hosp	Intensity-Modulated Radiation Therapy (IMRT) 161			
Hosp	Intensive Care Unit			
Hosp	Intermediate Care Unit			
Hosp	Interventional Cardiac Catheterization			
Hosp	Isolation room			
Hosp	Kidney			
Hosp	Liver			
Hosp	Lung			
Hosp	Magnetic Resonance Imaging (MRI)			
Hosp	Mammograms			
Hosp	Mobile Health Services			
Hosp	Multislice Spiral Computed Tomography (<64 slice CT)			
Hosp	Multislice Spiral Computed Tomography (<64+ slice CT)			
Hosp	Neonatal			
Hosp	Neurological Services			
Hosp	Obstetrics			
Hosp	Occupational Health Services			
Hosp	Oncology Services			
Hosp	Orthopedic Services			
Hosp	Outpatient Surgery			
Hosp	Pain Management			
Hosp	Palliative Care Program			
Hosp	Pediatric			
Hosp	Physical Rehabilitation			
Hosp	Positron Emission Tomography (PET)			

Inventory of Health Services 2015 - Linn County, KS				
Cat	HC Services Offered in County: Yes / No	Hospital	Health Dept	Other
Hosp	Positron Emission Tomography / CT (PET/CT)			
Hosp	Psychiatric Services			
Hosp	Radiology, Diagnostic			
Hosp	Radiology, Therapeutic			
Hosp	Reproductive Health			
Hosp	Robotic Surgery			
Hosp	Shaped Beam Radiation System 161			
Hosp	Single Photon Emission Computerized Tomography			
Hosp	Sleep Center			
Hosp	Social Work Services			
Hosp	Sports Medicine			
Hosp	Stereotactic Radiosurgery			
Hosp	Swing Bed Services			
Hosp	Transplant Services			
Hosp	Trauma Center - Level IV			
Hosp	Ultrasound			
Hosp	Women's Health Services			
Hosp	Wound Care			
SR	Adult Day Care Program			
SR	Assisted Living			
SR	Home Health Services			
SR	Hospice			
SR	LongTerm Care			
SR	Nursing Home Services			
SR	Retirement Housing			
SR	Skilled Nursing Care			
ER	Emergency Services			
ER	Urgent Care Center			
ER	Ambulance Services			
SERV	Alcoholism-Drug Abuse			
SERV	Blood Donor Center			
SERV	Chiropractic Services			
SERV	Complementary Medicine Services			
SERV	Dental Services			YES
SERV	Fitness Center			YES
SERV	Health Education Classes			
SERV	Health Fair (Annual)			YES
SERV	Health Information Center			
SERV	Health Screenings			
SERV	Meals on Wheels			YES
SERV	Nutrition Programs			
SERV	Patient Education Center			
SERV	Support Groups			
SERV	Teen Outreach Services			
SERV	Tobacco Treatment / Cessation Program			
SERV	Transportation to Health Facilities			
SERV	Wellness Program			

Providers Delivering Care in MCMC PSA Zips* 2015				
		FTE	Miami County Medical Center **	
FTE Providers Working in County	County Based	Visting	MD / DO	PA / NP
Primary Care:				
Family Practice	10.6	0.0	8.0	6.0
Internal Medicine/Geriatrician	1.0	0.0	1.0	0.0
Obstetrics/Gynecology	0.0	0.0	0.0	0.0
Pediatrics	0.0	0.0	0.0	0.0
Medicine Specialists:				
Allergy/Immunology	0.0	0.0	0.0	
Cardiology	0.7	0.0	14.0	
Dermatology	0.0	0.0	0.0	
Endocrinology	0.0	0.0	0.0	
Gastroenterology	0.0	0.0	0.0	
Oncology/Radiology	0.0	0.0	0.0	
Infectious Diseases	0.0	0.0	0.0	
Nephrology	0.0	0.0	0.0	
Neurology	0.0	0.0	0.0	
Psychiatry	0.0	0.0	0.0	
Pulmonary	0.0	0.0	4.0	
Rheumatology	0.0	0.0	0.0	
Surgery Specialists:				
General Surgery/Colon/Oral	1.0	0.0	1.0	
Neurosurgery	0.0	0.0	0.0	
Ophthalmology	0.0	0.2	2.0	
Orthopedics	1.2	0.0	10.0	5.0
Otolaryngology	0.0	0.1	1.0	
Plastic/Reconstructive	0.0	0.1	1.0	
Thoracic/Cardiovascular/Vascular	0.0	0.0	0.0	
Urology	0.0	0.3	2.0	
Hospital Based:				
Anesthesia/Pain	4.0	0.0	11.0	4.0
Emergency	4.2	0.0	8.0	0.0
Radiology	0.0	0.0	14.0	
Pathology	0.0	0.0	17.0	
Hospitalist	0.0	0.0	0.0	
Neonatal/Perinatal	0.0	0.0	0.0	
Physical Medicine/Rehab	0.0	0.0	1.0	
Occ Medicine	0.0	0.0	0.0	
Podiatry	0.5	0.0	1.0	
Chiropractor	10.0	0.0	0.0	
Optometrist	10.0	0.1	0.0	
Dentist	12.0	0.0	0.0	
TOTALS	55.2	0.8	96.0	15.0

*MCMC PSA Zips: 66013, 66026, 66040, 66053, 66064, 66071

**Total credentialed doctors, physician assistants and nurse practioners with MCMC

Visiting Specialists - Miami County Medical Center 2015

<i>SPECIALTY - DR, GROUP NAME, CITY, STATE</i>	<i>SCHEDULE</i>	<i>LOCATION OF OUTREACH CLINIC</i>
Cardiology - Cardiology Services, Drs. Andrea Yang, James Marcum and Howard Lee - Paola, KS	Every Wednesday	Miami County Medical Center 2102 Baptiste Dr.
Cardiology - Dr. Baseem Kayali - Paola, KS	Every week day	Miami County Medical Center 2102 Baptiste Dr.
Ophthalmology - Dr Aaron Florkowski - Paola, KS	2nd and 4th Wednesday	Miami County Medical Center 2102 Baptiste Dr.
Otolaryngology - Midwest ENT, Dr. Brian Metz - Paola, KS	1st Monday	Miami County Medical Center 2102 Baptiste Dr.
Pain - Johnson County Anesthesiologists, Dr. Joseph Danda - Paola, KS	Every Wednesday	Miami County Medical Center 2102 Baptiste Dr.
Plastic Surgery - Dr. Juan Nosti - Paola, KS	1st, 3rd, and 5th Tuesday	Miami County Medical Center 2102 Baptiste Dr.
Urology - Urologic Surgery Associates, Dr. Andrew Morris - Paola, KS	2nd and 4th Monday	Miami County Medical Center 2102 Baptiste Dr.

MCMC Primary Service Area Health Services Directory 2015

Healthcare providers within Miami County Medical Center's primary service area zip codes: Bucyrus (66013), Fontana (66026), LaCygne (66030), Louisburg (66053), Osawatomie (66064) and Paola (66071).

Other Emergency Numbers

Kansas Child/Adult Abuse and Neglect Hotline

800-922-5330
www.srskansas.org/hotlines.html

Domestic Violence Hotline

800-799-7233
www.ndvh.org

Emergency Management (Topeka)

785-274-1409
www.accesskansas.org/kdem

Federal Bureau of Investigation

866-483-5137
www.fbi.gov/congress/congress01/caruso100301.htm

Kansas Arson/Crime Hotline

800-KS-CRIME
800-572-1763
www.accesskansas.org/kbi

Kansas Bureau of Investigation (Topeka)

785-296-8200
www.accesskansas.org/kbi

Kansas Crisis Hotline (Domestic Violence/Sexual Assault)

888-END-ABUSE
www.kcsdv.org

Kansas Road Conditions

866-511-KDOT
511
www.ksdot.org

Poison Control Center

800-222-1222
www.aapcc.org

Suicide Prevention Hotline

800-SUICIDE
<http://hopeline.com>
800-273-TALK
www.suicidepreventionlifeline.com

Toxic Chemical and Oil Spills

800-424-8802
www.epa.gov/region02/contact.htm

Health Services

Hospitals

Miami County Medical Center

2100 Baptiste Drive (Paola)
294-2327
www.olathehealth.org/About-Us/Miami-County-Medical-Center

Miami County Medical Center Services Include:

Cardiology
Emergency
General Surgery
Inpatient
Ophthalmology
Otolaryngology
Orthopedic Surgery
Pain Management
Plastic Surgery
Podiatry

Health Department

Miami County Health Department

1201 Lakemary Drive (Paola)
294-2431
www.miamicountyks.org/health_dept.html

Miami County Health Department Services Include:

Day Care Licensing
Family Planning
Health Start
Immunizations
Kan-Be-Healthy Screenings
WIC
Walk-In Services
Blood Pressure
Blood Sugar
General Counseling
Hemoglobin
Immunizations
Injections
TB Testing
Urinalysis

Linn County Health Department

902 Main Street (Pleasanton)
913-352-6640
www.linncountyks.com/DetailFrames/Departments/Health/Health_.html

Linn County Health Department Services Include:

Community Health Screenings & Services
Disease Follow-Up & Containment
Family Planning
Healthy Start Program
Immunizations
International Travel

Other Health Services
Physical Assessments
Public Health & Emergency Response
WIC
Women's Clinic

Mental Health

Elizabeth Layton Center
401N East St (Paola)
557-9096
www.laytoncenter.org

Osawatomie State Hospital
500 State Hospital Dr (Osawatomie)
755-7000

Medical Professionals

Chiropractors

Fulk Chiropractic Acupuncture
1313 Baptiste Drive (Paola)
294-3851

Miami County Chiropractic Office
11 South Broadway (Paola)
837-2910

Cook Chiropractic Office
3 S Pearl St (Paola)
294-2060

Cook Chiropractic Office
501 1st St (Osawatomie)
755-2070

Jaccard Chiropractic
618 E Market ST (LaCygne)
757-4044

LaCygne Chiropractic
210 N. Commercial (LaCygne)
757-2003

Paola Chiropractic Office
820 N Pearl St (Paola)
294-9993

Community Chiropractic Office
1612 Industrial Dr (Paola)
294-5501

Clinics

Associates in Family Care
100 Main Street (Osawatomie)
755-3044
2102 Baptiste Drive (Paola)
557-5678
www.olathehealth.org

LaCygne Family Care
1017 E. Market St.
913-757-4575
www.olathehealth.org

Louisburg Family Care
102 W. Crestview Circle (Louisburg)
837-4299
www.olathehealth.org

Donald Banks, MD
705 Baptiste Drive (Paola)
294-2305

Johnson County Orthopedics-Paola
2102 Baptiste Drive (Paola)
557-3800
www.olathehealth.org

Heartland Podiatry
2102 Baptiste Drive (Paola)
557-2300
www.olathehealth.org

Miami County Surgical Associates
2102 Baptiste Drive (Paola)
557-0700
www.olathehealth.org

Cardiology Services
2102 Baptiste Drive (Paola)
557-9113
www.olathehealth.org

Dentists

Dennis Barden, DDS
301 E Main St (Osawatomie)
755-3014

Hannah Orthodontics
4 S Berkley (Louisburg)
837-3500

Herwig DDS
22 S Silver (Paola)
294-4321

Ironhorse Dental Group
1258 W Amity St (Louisburg)
837-3096

Jay M Oltjen
24 S Silver Street (Paola)
294-4848

Louisburg Dental Care
4 S Berkley St (Louisburg)
837-4746

Paola Family Dentistry
21 W Wea Street (Paola)
294-2222

Sanders Family Dentistry
28 W Peoria Street (Paola)
294-5377

Steve Neill, DDS
302 N Hospital Dr (Paola)
294-2402

William McKee, DDS
113 Broadway St. (LaCygne)
757-4429

Optometrists

Eyecare Associates of Osawatomie
524 Broad Avenue (Osawatomie)
256-2176
www.oseyecare.com

Eyecare Professionals
2 S Silver (Paola)
294-2300
www.paolaeyecare.com

Louisburg Eye Care
3 S Berley St (Louisburg)
837-3636

Peoples Optical
14 E Peoria St (Paola)
294-4342
www.theeyedoctors.net

The EyeDoctors
705 Baptiste Dr (Paola)
294-4342
8 S Broadway (Louisburg)
837-4611

Pharmacies

Auburn Pharmacy
311 North Hospital Drive (Paola)
294-3516
6 S Metcalf Rd (Louisburg)
837-5555

Auten Pharmacy
125 E Main St (Osawatomie)
755-4111

Rockers Pharmacy
304 Baptiste Dr (Paola)
294-2715

Silver Creek Pharmacy
945 E Market St (LaCygne)
757-4744

Vohs Pharmacy
100 E Crestview Dr (Louisburg)
837-3784

WalMart Pharmacy
310 Hedge Lane (Paola)
294-5777

Rehabilitation Services

Life Care Center of Osawatomie
1615 Parker Ave (Osawatomie)
755-4165

Louisburg Healthcare & Rehabilitation Center
1200 S Broadway (Louisburg)
837-2916

Louisburg Rehabilitation
102 W Crestview Circle (Louisburg)
837-1600
www.olathehealth.org

Osawatomie Rehabilitation
539 Main Street (Osawatomie)
755-2078
www.olathehealth.org

Miami County Medical Center Rehabilitation
2100 Baptiste Dr. (Paola)
294-6679
www.olathehealth.org

Other Health Care Services

General Health Services

Home Health Services of Olathe Medical Center
20920 W 151st St (Olathe)
913-324-8515

Miami County Health Department
1201 Lakemary Drive (Paola)
294-2431
www.miamicountyks.org/health_dept.html

Assisted Living/Nursing Homes/TLC

Country Club Estates
2 Lewis Dr (Paola)
294-4531

Life Care Center of Osawatomie
1615 Parker Ave (Osawatomie)
755-4165

Louisburg Healthcare & Rehabilitation Center
1200 South Broadway (Louisburg)
837-2916

Medicallodges Paola
501 Assembly Lane (Paola)
294-3345

North Point
908 N Pearl St (Paola)
937-9804

Vintage Park
601 North East Street (Paola)
557-0202

202 Rogers St. (Louisburg)
837-5133

1520 Parker Ave. (Osawatomie)
755-2167

Diabetes

**Miami County Medical Center
Diabetes Education**
2100 Baptiste Dr. (Paola)
294-6638

Disability Services

American Disability Group
877-790-8899

Kansas Department on Aging
800-432-3535
www.agingkansas.org/index.htm

Lakemary Center
100 Lakemary Drive (Paola)
557-4000
501 South Hospital, Suite 400 (Paola)
294-4343
www.lakemaryctr.org

Domestic/Family Violence

Child/Adult Abuse Hotline
800-922-5330
http://www.srskansas.org/services/child_protective_services.htm

Safe Home
24-Hour Hotline: 913-262-2868

General Information – Women’s Shelters

www.WomenShelters.org

Kansas Crisis Hotline
Manhattan
785-539-7935

Sexual Assault/Domestic Violence Center
(Hutchinson)
Hotline: 800-701-3630
Business Line: 663-2522

Educational Training Opportunities

Association of Continuing Education
620-792-3218

Food Programs

Oz Food Pantry
811 S 6th St (Osawatomie)

LaCygne Nutrition Center
118 S 4th St (LaCygne)
757-4866

Government Healthcare

Kansas Department on Aging (KDOA)
503 S. Kansas Avenue
Topeka, KS66603
785-296-4986 or 1-1-800-432-3535
www.agingkansas.org/

Kansas Department of Health and Environment (KDHE)
CurtisStateOfficeBuilding
1000 SW Jackson
Topeka, KS66603
785-296-1500
www.kdheks.gov/contact.html

MEDICAID
Kansas Department of Social & Rehabilitation Services (SRS)
3000 Broadway
Hays, KS 67601
785-628-1066

MEDICARE
Social Security Administration
1212 East 27th Street
Hays, KS 67601
785-625-3496

East Central Kansas Area Agency on Aging
117 South Main Street
Ottawa, KS 66067
785-242-7200
www.eckaaa.org

Social & Rehabilitation Services (SRS)
3000 Broadway
Hays, KS 67601
785-628-1066

Social Security Administration
1212 East 27th Street
Hays, KS 67601
785-625-3496

Health and Fitness Centers

BodyMaxx Fitness
710 Baptiste Drive (Paola)
294-1000
www.bodymaxxfitness.com

Intellicare Network
909 North Pearl Street (Paola)
294-8404

Jacq’s Fitness Studio
104 South 4th Street (LaCygne)
913-731-2424

Louisburg Athletic Club
401 South Metcalf Road (Louisburg)
837-1400
www.louisburgathleticclub.com

New Creation Women's Fitness
210 N Hospital (Paola)
294-2270

OZone
300 11th Street (Osawatomie)
755-3622

Home Health

Home Health Services of Olathe Medical Center
20920 W 151st St (Olathe)
913-324-8515

Hospice

Hospice Services of Olathe Medical Center
20920 W 151st St (Olathe)
913-324-8515

Hospice House at Olathe Medical Park
15310 S Marion St (Olathe)
913-324-8588

Hospice Care of Kansas
212 North Hospital Drive (Paola)
294-2300

Massage Therapy

Sheila's Spa
8A South Broadway Street (Louisburg)
837-2242
www.sheilafarrow-cmt.com

Medical Equipment and Supplies

American Medical Sales and Repair
866-637-6803

Westrock Incorporated
909 North Pearl Street (Paola)
294-5200

School Nurses

Holy Rosary-Wea Catholic Church
School of Religion
22779 Metcalf Avenue (Bucyrus)
533-2462
www.holyrosarywea.org

Louisburg Public Schools – USD 416

Rockville Elementary School
977 North Rockville Road (Louisburg)
837-1970
Broadmoor Elementary School
105 South 5th Street East (Louisburg)
837-1900
Louisburg Middle School
505 East Amity (Louisburg)
837-1800
Louisburg High School
202 Aquatic Drive (Louisburg)
837-1720
www.usd416.org

Osawatomie Public Schools – USD 367

Trojan Elementary School
1901 Parker Avenue (Osawatomie)
755-4133
Osawatomie Middle School
428 Pacific Avenue (Osawatomie)
755-4155
Osawatomie High School
1200 Trojan Drive (Osawatomie)
755-2191
www.usd367.k12.ks.us

Paola Public Schools – USD 368

Cottonwood Elementary School
709 Hedge Lane (Paola)
294-8050
Sunflower Elementary School
1401 East 303rd Street (Paola)
294-8040
Paola Middle School
405 North Hospital Drive (Paola)
294-8030
Paola High School
401 North Angela Drive (Paola)
294-8010
www.usd368.org

Prairie View Schools – USD 362

Fontana Elementary
208 East North Avenue (Fontana)
913-849-3141
LaCygne Elementary
710 Walnut Street (LaCygne)
913-757-4417
Parker Elementary
421 North Center Avenue (Parker)
913-898-3160
Middle School
13667 Kansas Highway 152 (LaCygne)
913-757-4497
High School
13731 Kansas Highway 152 (LaCygne)
913-757-4447
www.pv362.org

Senior Services

Community Senior Services Center
815 6th St (Osawatomie)
755-4786

East Central Kansas Area Agency on Aging
117 South Main Street
Ottawa, KS 66067
785-242-7200
www.eckaaa.org

Elder Care, Inc.
PO Box 1364 (Great Bend)
792-5942

Senior Citizens Center
121 W Wea Street (Paola)
294-4630

504 S Metcalf Rd (Louisburg)
837-5113

118 S 4th St (LaCygne)
757-4866

Local Government, Community, and Social Services

Adult Protection

Adult Protective Services (SRS)
800-922-5330
www.srskansas.org/ISD/ees/adult.htm

Elder Abuse Hotline
800-842-0078
www.elderabusecenter.org

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

Alcohol and Drug Treatment

Alcohol and Drug Abuse Services
800-586-3690
http://www.srskansas.org/services/alc-drug_assess.htm

Alcohol Detoxification 24-Hour Helpline
877-403-3387
www.ACenterForRecovery.com

Center for Recovery
877-403-6236

G&G Addiction Treatment Center
866-439-1807

Road Less Traveled
866-486-1812

Seabrook House
800-579-0377

The Treatment Center
888-433-9869

Child Protection

Kansas Department of Social and Rehabilitation Services West Region Protection Reporting Center – i.e. PROTECTION REPORT CENTER FOR ABUSE
1-1-800-922-5330
Available 24 hours/7 days per week – including holidays

Community Centers

Community Center
19 E Peoria St (Paola)
259-3650

LaCygne Community Building
204 Commercial St (LaCygne)
913-757-4711

Crime Prevention

Kansas Highway Patrol
27960 Beaver Creek Road (Louisburg)
837-5621

LaCygne Police Department
206 N Commercial St (LaCygne)
757-3322

Linn County Sheriff's Department
312 Main Street (Mound City)
913-795-2666

Louisburg Police Department
209 S Metcalf Road (Louisburg)
837-3191

Miami County Sheriff's Department
118 S Pearl St (Paola)
294-8477

Osawatomie Police Department
105 E Main St (Osawatomie)
755-2101

Paola Police Department
805 N Pearl Street (Paola)
259-3631

Extension Office

Linn County Extension
115 S 6th Street (Mound City)
913-795-2829
www.linn.ksu.edu

Miami County Extension
104 South Brayman (Paola)
294-4306
www.miami.ksu.edu/Funeral_Homes

Penwell-Gabel Funeral Homes & Crematory
120 South Broadway (Louisburg)
837-4310
305 North Pearl (Paola)
294-2372
www.penwellgabel.com

Head Start

Paola Head Start
302 North Oak Street (Paola)
294-4880
608 10th St. (Osawatomie)
755-2018

Housing

Paola Housing Authority
310 South Iron Street (Paola)
294-4731

Libraries, Parks and Recreation

Cedar Gove Feline Conservation Park
3783 Highway K68 (Louisburg)
837-5515

Hillsdale State Park
26001 West 255th Street (Paola)
783-4507

Louisburg Library
206 South Broadway Street (Louisburg)
837-2217
www.louisburglibrary.org

Louisburg Swimming Pool
2 Aquatic Drive (Louisburg)
837-3555

OZone
300 11th Street (Osawatomie)
755-3622

Paola City Library
101 East Peoria Street (Paola)
259-3655
www.paolalibrary.org

Osawatomie Public Library
527 Brown Avenue (Osawatomie)
755-2136
www.osawatomie.org

Osawatomie Swimming Pool
110 11th Street (Osawatomie)
755-4211

Paola Swimming Pool
10 Wallace Park Drive (Paola)
259-3660

Water Sports
25825 Edgemore Road (Paola)
783-4300
www.kcwatersports.com

Pregnancy Services

Adoption is a Choice
877-524-5614

Adoption Network
888-281-8054

Adoption Spacebook
866-881-4376

Graceful Adoptions
888-896-7787

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

Miami County Health Department
1201 Lakemary Drive (Paola)
294-2431
www.miamicountyks.org/health_dept.html

Public Information

Louisburg Chamber of Commerce
5 Peoria Street, #103 (Louisburg)
837-2826
www.fnblouisburg.com

Osawatomie Chamber of Commerce
628 Main Street (Osawatomie)
755-4114
www.osawatomiechamber.org

Paola Chamber of Commerce
3 West Wea Street (Paola)
294-4335
www.paolachamber.org

Rape

Domestic Violence and Rape Hotline
888-874-1499

Family Crisis Center
1806 12th Street (Great Bend)
793-1885

Kansas Crisis Hotline
Manhattan
785-539-7935
800-727-2785

Red Cross

American Red Cross
1600 Washington Boulevard (Kansas City)
913-321-6314
www.kck.redcross.org

Social Security

Social Security Administration
800-772-1213
800-325-0778
www.ssa.gov

Transportation

General Public Transportation
121 West Wea St (Paola)
294-4630

Linn County Transportation
23420 Valley Road (LaCygne)
913-757-3354

Miami County Airport
32580 Airport Road (Paola)
755-2345

State and National Information, Services, Support

Adult Protection

Adult Protection Services
1-800-922-5330
www.srskansas.org/SD/ees/adult.htm

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

Elder Abuse Hotline
800-842-0078
www.elderabusecenter.org

Elder and Nursing Home Abuse Legal
www.resource4nursinghomeabuse.com/index.html

Kansas Coalition Against Sexual and Domestic Violence
1-888-END-ABUSE (363-2287)
www.kcsdv.org/ksresources.html

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

Metropolitan Organization to Counter Sexual Assault Advocacy (MOCSA)
913-642-0233

National Center on Elder Abuse
(Administration on Aging)
www.ncea.gov/NCEAroot/Main_Site?Find_Help/Help_Hotline.aspx

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

National Sexual Assault Hotline
1-800-994-9662
1-888-220-5416 (TTY)
www.4woman.gov/faq/sexualassault.htm

National Suicide Prevention Lifeline
1-800-273-8255

Poison Center
1-800-222-1222

Rape Hotline
1-800-656-4673

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

Social and Rehabilitation Services (SRS)
1-888-369-4777 (HAYS)
www.srskansas.org

Suicide Prevention Helpline
1-785-841-2345

Alcohol and Drug Treatment Programs

A 1 A Detox Treatment
1-800-757-0771

AAAAAH
1-800-993-3869

Abandon A Addiction
1-800-405-4810

Able Detox-Rehab Treatment
1-800-577-2481 (NATIONAL)

Abuse Addiction Agency
1-800-861-1768
www.thewatershed.com

AIC (Assessment Information Classes)
1-888-764-5510

Al-Anon Family Group
1-888-4AL-ANON (425-2666)
www.al-anon.alateen.org

Alcohol and Drug Abuse Hotline
800-ALCOHOL

Alcohol and Drug Abuse Services
800-586-3690
http://www.srskansas.org/services/alc-drug_assess.htm

Alcohol and Drug Addiction Treatment Programs
1-800-510-9435

Alcohol and Drug Helpline
1-800-821-4357

Alcoholism/Drug Addiction Treatment Center
800-477-3447

Elizabeth Layton Center
Paola
913-557-9096

Kansas Alcohol and Drug Abuse Services Hotline
800-586-3690
http://www.srskansas.org/services/alc-drug_assess.htm

Lighthouse Presbyterian Church
1402 E. 303rd St. (Paola)
294-2400

Louisburg Baptist Temple
6961 W. 271st St. (Louisburg)
837-2979

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

National Council on Alcoholism and Drug Dependence, Inc.
1-800-NCA-CALL (622-2255)
www.ncadd.org

Recovery Connection
www.recoveryconnection.org

Regional Prevention Centers of Kansas
1-800-757-2180
www.smokyhillfoundation.com/rpc-locate.html

Cross Points Assembly of God
1016 N. Pearl St. (Paola)
294-2429

Better Business Bureau

Better Business Bureau
328 Laura (Wichita)
316-263-3146
<http://www.wichita.bbb.org>

Children and Youth

Adoption
800-862-3678
<http://www.adopt.org/>

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

Child/Adult Abuse and Neglect Hotline
800-922-5330
<http://www.srskansas.org/>

Child Abuse Hotline
1-800-922-5330

Child Abuse National Hotline
800-422-4453
800-222-4453 (TDD)
<http://www.childhelpusa.org/home>

Child Abuse National Hotline
1-800-4-A-CHILD (422-4453)
www.childabuse.com

Child Find of America
1-800-426-5678

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

Child Protective Services
800-922-5330
www.srskansas.org/services/child_protective_services.htm

HealthWave
P.O. Box 3599
Topeka, KS66601
1-800-792-4884
1-800-792-4292 (TTY)
www.kansashealthwave.org

Heartspring (Institute of Logopedics)
8700 E. 29th North
Wichita, KS67226
www.heartspring.org

Kansas Big Brothers/Big Sisters
1-888-KS4-BIGS
www.ksbbbs.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
e-mail: info@kdheks.gov

Kansas Society for Crippled Children

106 W. Douglas, Suite 900
 Wichita, KS67202
 1-800-624-4530
 316-262-4676
www.kssociety.org

National Runaway Switchboard

1-800-RUNAWAY
www.1800runaway.org/

National Society for Missing and Exploited Children

1-800-THE-LOST (843-5678)
www.missingkids.com

Parents Anonymous Help Line

800-345-5044
<http://www.parentsanonymous.org/paIndex10.html>

Runaway Line

800-621-4000
 800-621-0394 (TDD)
<http://www.1800runaway.org/>

Talking Books

800-362-0699
http://skyways.lib.ks.us/KSL/talking/ksl_bph.html

Community Action**Peace Corps**

800-424-8580
www.peacecorps.gov

Public Affairs Hotline (Kansas Corporation Commission)

800-662-0027
www.kcc.state.ks.us

Counseling**Care Counseling**

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

Carl Feril Counseling

608 North Exchange (St. John)
 620-549-6411

CastlewoodTreatmentCenter for Eating Disorders

1-888-822-8938
www.castlewoodtc.com

Catholic Charities

1-888-468-6909
www.catholiccharitiessalina.org

Center for Counseling

5815 West Broadway (Great Bend)
 800-875-2544

Central Kansas Mental HealthCenter

1-800-794-8281
 Will roll over after hours to a crisis number.

Consumer Credit Counseling Services

800-279-2227
<http://www.kscgccs.org/>

Kansas Problem Gambling Hotline

866-662-3800
<http://www.ksmhc.org/Services/gambling.htm>

National Hopeline Network

1-800-SUICIDE (785-2433)
www.hopeline.com

National Problem Gambling Hotline

1-800-552-4700
www.npgaw.org

Samaritan Counseling Center

1602 N. Main Street
 Hutchinson, KS67501
 620-662-7835
<http://cmc.pdswebpro.com/>

Self-Help Network of Kansas

1-800-445-0116
www.selfhelpnetwork.wichita.edu

Senior Health Insurance Counseling

1-800-860-5260
www.agingkansas.org

Sunflower Family Services, Inc.

(adoption, crisis pregnancy, conflict solution center)
 1-877-457-5437
www.sunflowerfamily.org

Disability Services**American Association of People with Disabilities (AAPD)**

www.aapd.com

American Council for the Blind

1-800-424-8666
www.acb.org

Americans with Disabilities Act Information Hotline

1-800-514-0301
 1-800-514-0383 (TTY)
www.ada.gov

Disability Advocates of Kansas, Incorporated

1-866-529-3824
www.disabilitysecrets.com

Disability Group, Incorporated

1-888-236-3348
www.disabilitygroup.com

DisabilityRightsCenter of Kansas (DRC)
Formerly Kansas Advocacy & Protective Services
1-877-776-1541
1-877-335-3725 (TTY)
www.drckansas.org

Hearing Healthcare Associates
800-448-0215

Kansas Commission for the Deaf and Hearing Impaired
1-800-432-0698
www.srskansas.org/kcdhh

Kansas Relay Center (Hearing Impaired service)
1-800-766-3777
www.kansasrelay.com

NationalCenter for Learning Disabilities
1-888-575-7373
www.nclld.org

National Library Services for Blind & Physically Handicapped
www.loc.gov/nls/
1-800-424-8567

Parmelee Law Firm
8623 East 32nd Street North Suite 100 (Wichita)
877-267-6300

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

Food and Drug

Center for Food Safety and Applied Nutrition
1-888-SAFEFOOD (723-3366)
www.cfsan.fda.gov/
www.healthfinder.gov/docs/doc03647.htm

US Consumer Product Safety Commission
800-638-2772
800-638-8270 (TDD)
www.cpsc.gov

USDA Meat and Poultry Hotline
1-888-674-6854
1-800-256-7072 (TTY)
www.fsis.usda.gov/

U.S. Food and Drug Administration
1-888-INFO-FDA
1-888-463-6332
www.fsis.usda.gov/

Poison Hotline
1-800-222-1222

Health Services

American Cancer Society
800-227-2345
www.cancer.org

American Diabetes Association
800-DIABETES (342-2383)
www.diabetes.org

AIDS/HIV Center for Disease Control and Prevention
800-CDC-INFO
888-232-6348 (TTY)
<http://www.cdc.gov/hiv/>

AIDS/STD National Hot Line
800-342-AIDS
800-227-8922 (STD line)

American Health Assistance Foundation
800-437-2423
www.ahaf.org

American Heart Association
800-242-8721
www.americanheart.org

American Lung Association
800-586-4872

American Stroke Association
1-888-4-STROKE
[www.american heart.org](http://www.americanheart.org)

Center for Disease Control and Prevention
800-CDC-INFO
888-232-6348 (TTY)
<http://www.cdc.gov/hiv/>

Elder Care Helpline
www.eldercarelink.com

Eye Care Council
800-960-EYES
www.seetolearn.com

Kansas Foundation for Medical Care
800-432-0407
www.kfmc.org

National Health Information Center
800-336-4797
www.health.gov/nhic

National Cancer Information Center
800-227-2345
866-228-4327 (TTY)
www.cancer.org

**National Institute on Deafness and Other
Communication Disorders Information**
Clearinghouse
800-241-1044
800-241-1055 (TTY)
www.nidcd.nih.gov

Hospice

Hospice-Kansas Association
800-767-4965

**Kansas Hospice and Palliative Care
Organization**
888-202-5433
www.lifeproject.org/akh.htm

Southwind Hospice, Incorporated
www.southwindhospice.com
785-483-3161

Housing

Kansas Housing Resources Corporation
785-296-2065
www.housingcorp.org

**US Department of Housing and Urban
Development**
Kansas Regional Office
913-551-5462

Legal Services

East Central Kansas Area Agency on Aging
117 South Main Street
Ottawa, KS 66067
785-242-7200
www.eckaaa.org

Kansas Attorney General
800-432-2310 (Consumer Protection)
800-828-9745 (Crime Victims' Rights)
800-766-3777 (TTY)
<http://www.ksag.org/>

Kansas Bar Association
785-234-5696
www.ksbar.org

Kansas Department on Aging
800-432-3535
www.agingkansas.org/index.htm

Kansas Legal Services
800-723-6953
www.kansaslegalservices.org

Medicaid Services

First Guard
888-828-5698
www.firstguard.com

Kansas Health Wave
800-792-4884 or 800-792-4292 (TTY)
www.kansashealthwave.org

Kansas Medical Assistance Program
Customer Service
800-766-9012
www.kmpa-state-ks.us/

Medicare Information
800-MEDICARE
www.medicare.gov

**U.S. Department of Health and Human
Services**
Centers for Medicare and Medicaid Services
800-MEDICARE (800-633-4227) or
877-486-2048 (TTY)
www.cms.hhs.gov

Mental Health Services

Alzheimer's Association
1-800-272-3900 or 1-866-403-3073 (TTY)
www.alz.org

**Developmental Services of Northwest
Kansas**
1-800-637-2229

Kansas Alliance for Mentally III(Topeka, KS)
785-233-0755
www.namikansas.org

Make a Difference
1-800-332-6262

Mental Health America
1-800-969-6MHA (969-6642)

**National Alliance for the Mentally III
Helpline**
1-800-950-NAMI (950-6264) or 703-516-7227
(TTY)
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

National Mental Health Association
800-969-6642
800-433-5959 (TTY)
www.nmha.org

Osawatomie State Hospital

Pawnee Mental Health

State Mental Health Agency

KS Department of Social and Rehabilitation Services
915 SW Harrison Street
Topeka, KS66612
785-296-3959
www.srskansas.org

Suicide Prevention Hotline

1-800-SUICIDE [784-2433]
www.hopeline.com

Nutrition

American Dietetic Association

1-800-877-1600
www.eatright.org

American Dietetic Association Consumer Nutrition Hotline

800-366-1655

Department of Human Nutrition

KansasStateUniversity
119 Justin Hall
Manhattan, KS66506
785-532-5500
www.humec.k-state.edu/hn/

Eating Disorders Awareness and Prevention

1-800-931-2237
www.nationaleatingdisorders.org

Food Stamps

Kansas Department of Social and Rehabilitation Services (SRS)
1-888-369-4777 or Local SRS office
www.srskansas.org/ISD/ees/food_stamps.htm

Kansas Department of Health and Environment

1000 SW Jackson, Suite 220
Topeka, KS66612
785-296-1320
www.kdheks.gov/news-wic/index.html

Road and Weather Conditions

Kansas Road Conditions

866-511-KDOT
511
<http://kdot1.ksdot.org/divplanning/roadrpt/>

Senior Services

Alzheimer's Association

1-800-487-2585

American Association of Retired Persons (AARP)

1-888-OUR-AARP (687-2277)
www.aarp.org

Americans with Disabilities Act Information Line

1-800-514-0301 or 1-800-514-0383 [TTY]
www.usdoj.gov/crt/ada

American Association of Retired Persons

888-687-2277
www.aarp.org

Area Agency on Aging

800-432-2703

Eldercare Locator

1-800-677-1116
www.eldercare.gov/eldercare/public/home.asp

Home Buddy

1-866-922-8339
www.homebuddy.org

Home Health Complaints

Kansas Department of Social and Rehabilitation Services (SRS)
1-800-842-0078

Kansas Advocates for Better Care Inc.

Consumer Information
1-800-525-1782
www.kabc.org

Kansas Department on Aging

1-800-432-3535 or 785-291-3167 (TTY)
www.agingkansas.org/index.htm

Kansas Foundation for Medical Care, Inc.

Medicare Beneficiary Information
1-800-432-0407

Kansas Tobacco Use Quitline

1-866-KAN-STOP (526-7867)
www.kdheks.gov/tobacco/cessation.html

Older Kansans Employment Programs (OKEP)

785-296-7842
www.kansascommerce.com

Older Kansans Hotline

800-742-9531

Older Kansans Information Reference Sources on Aging (OKIRSA)

1-800-432-3535

Senior Health Insurance Counseling for Kansas

1-800-860-5260
www.agingkansas.org/SHICK/shick_index.html

SHICK

1-800-860-5260
www.agingkansas.org/SHICK

Social Security Administration
785-296-3959 or 785-296-1491 (TTY)
www.srskansas.org

SRS Rehabilitation Services Kansas
785-296-3959
785-296-1491 (TTY)
www.srskansas.org

Suicide Prevention

Suicide Prevention Services
800-784-2433
www.spsfv.org

Veterans

Federal Information Center
1-800-333-4636
www.FirstGov.gov

U.S. Department of Veterans Affairs
1-800-513-7731
www.kcva.org

Education (GI Bill)
1-888-442-4551

Health Resource Center
877-222-8387

Insurance Center
800-669-8477

Veteran Special Issue Help Line
Includes Gulf War/Agent Orange
Helpline
800-749-8387

U.S. Department of Veterans Affairs

Mammography Helpline
888-492-7844

Other Benefits
800-827-1000

Memorial Program Service [includes
status of headstones and markers]
800-697-6947

**Telecommunications Device for the
Deaf/Hearing Impaired**
800-829-4833 (TTY)
www.vba.va.gov

Veterans Administration

Veterans Administration Benefits
800-669-8477

Life Insurance
800-669-8477

Education (GI Bill)
888-442-4551

Health Care Benefits
877-222-8387

Income Verification and Means

Testing
800-929-8387

Mammography Helpline
888-492-7844

Gulf War/Agent Orange Helpline
800-749-8387

Status of Headstones and Markers
800-697-6947

**Telecommunications Device for the
Deaf**
800-829-4833
www.vba.va.gov

Benefits Information and Assistance
800-827-1000

Debt Management
800-827-0648

Life Insurance Information and Service
800-669-8477

Welfare Fraud Hotline

Welfare Fraud Hotline
800-432-3913

V. Detail Exhibits

[VVV Consultants LLC]

Patient Origin and Access

[VVV Consultants LLC]

The following are hospitalization Patient Origin Reports provided by the Kansas Hospital Association. They identify the facilities that patients from a selected ZIP Code or county go to for treatment.

Miami County Medical Center Inc. - Paola, KS

KHA PO 101 Hospital	Total - FFY14		0-17		18-44		45-64		65-74		75+		Obstetrics		Psychiatry	
	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Total	Dsch	% Total
Grand Total	426	100.00%	3	100.00%	22	100.00%	152	100.00%	99	100.00%	147	100.00%	1	100.00%	2	100.00%
MIAMI,KANSAS	282	66.20%	1	33.33%	13	59.09%	102	67.11%	56	56.57%	108	73.47%		0.00%		0.00%
LINN,KANSAS	84	19.72%	2	66.67%	4	18.18%	22	14.47%	25	25.25%	30	20.41%	1	100.00%		0.00%
FRANKLIN,KANSAS	17	3.99%		0.00%	1	4.55%	8	5.26%	6	6.06%	2	1.36%		0.00%		0.00%
JOHNSON,KANSAS	12	2.82%		0.00%	2	9.09%	7	4.61%	2	2.02%	1	0.68%		0.00%		0.00%
ANDERSON,KANSAS	11	2.58%		0.00%		0.00%	4	2.63%	4	4.04%	3	2.04%		0.00%		0.00%
CASS,MISSOURI	5	1.17%		0.00%		0.00%	3	1.97%	1	1.01%	1	0.68%		0.00%		0.00%
CLAY,MISSOURI	2	0.47%		0.00%		0.00%	1	0.66%	1	1.01%		0.00%		0.00%		0.00%
BOURBON,KANSAS	2	0.47%		0.00%		0.00%		0.00%	2	2.02%		0.00%		0.00%		0.00%
VERNON,MISSOURI	1	0.23%		0.00%		0.00%	1	0.66%		0.00%		0.00%		0.00%		0.00%
BATES,MISSOURI	1	0.23%		0.00%		0.00%		0.00%	1	1.01%		0.00%		0.00%		0.00%
LARIMER,COLORADO	1	0.23%		0.00%		0.00%	1	0.66%		0.00%		0.00%		0.00%		0.00%
SAN JOAQUIN,CALIFORNIA	1	0.23%		0.00%		0.00%		0.00%		0.00%	1	0.68%		0.00%		0.00%
BOONE,MISSOURI	1	0.23%		0.00%		0.00%	1	0.66%		0.00%		0.00%		0.00%		0.00%
SHAWNEE,KANSAS	1	0.23%		0.00%		0.00%	1	0.66%		0.00%		0.00%		0.00%		0.00%
LABETTE,KANSAS	1	0.23%		0.00%		0.00%		0.00%		0.00%	1	0.68%		0.00%		0.00%
BUTLER,KANSAS	1	0.23%		0.00%		0.00%	1	0.66%		0.00%		0.00%		0.00%		0.00%
WYANDOTTE,KANSAS	1	0.23%		0.00%	1	4.55%		0.00%		0.00%		0.00%		0.00%		0.00%
GREENWOOD,KANSAS	1	0.23%		0.00%	1	4.55%		0.00%		0.00%		0.00%		0.00%		0.00%
HARRIS,TEXAS	1	0.23%		0.00%		0.00%		0.00%	1	1.01%		0.00%		0.00%		0.00%

Source: Olathe Health System Decision Support

Miami County Medical Center Inc. - Paola, KS

KHA PO 101 Hospital	Total - FFY13		0-17		18-44		45-64		65-74		75+		Psychiatry	
	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Total
Grand Total	388	100.00%	3	100.00%	43	100.00%	90	100.00%	90	100.00%	158	100.00%	4	100.00%
MIAMI,KANSAS	282	72.68%	3	100.00%	35	81.40%	68	75.56%	54	60.00%	118	74.68%	4	100.00%
LINN,KANSAS	59	15.21%		0.00%	3	6.98%	11	12.22%	21	23.33%	24	15.19%		0.00%
FRANKLIN,KANSAS	18	4.64%		0.00%		0.00%	3	3.33%	11	12.22%	4	2.53%		0.00%
ANDERSON,KANSAS	9	2.32%		0.00%	1	2.33%	1	1.11%	3	3.33%	4	2.53%		0.00%
JOHNSON,KANSAS	7	1.80%		0.00%	2	4.65%	1	1.11%	1	1.11%	3	1.90%		0.00%
CASS,MISSOURI	5	1.29%		0.00%	1	2.33%	2	2.22%		0.00%	2	1.27%		0.00%
BATES,MISSOURI	4	1.03%		0.00%	1	2.33%	3	3.33%		0.00%		0.00%		0.00%
CLAY,MISSOURI	2	0.52%		0.00%		0.00%		0.00%		0.00%	2	1.27%		0.00%
DOUGLAS,KANSAS	1	0.26%		0.00%		0.00%	1	1.11%		0.00%		0.00%		0.00%
BOONE,MISSOURI	1	0.26%		0.00%		0.00%		0.00%		0.00%	1	0.63%		0.00%

Source: Olathe Health System Decision Support

Miami County Medical Center Inc. - Paola, KS

KHA PO 101 Hospital	Total - FFY12		0-17		18-44		45-64		65-74		75+		Obstetrics		Psychiatry	
	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Ttl	Dsch	% Total	Dsch	% Total
Grand Total	490	100.00%	7	100.00%	51	100.00%	136	100.00%	118	100.00%	168	100.00%	1	100.00%	9	100.00%
MIAMI,KANSAS	341	69.59%	5	71.43%	38	74.51%	88	64.71%	73	61.86%	128	76.19%	1	100.00%	8	88.89%
LINN,KANSAS	89	18.16%	1	14.29%	3	5.88%	24	17.65%	32	27.12%	28	16.67%		0.00%	1	11.11%
FRANKLIN,KANSAS	20	4.08%		0.00%	4	7.84%	8	5.88%	5	4.24%	3	1.79%		0.00%		0.00%
JOHNSON,KANSAS	11	2.24%		0.00%	4	7.84%	4	2.94%	1	0.85%	2	1.19%		0.00%		0.00%
CASS,MISSOURI	9	1.84%	1	14.29%	1	1.96%	3	2.21%	1	0.85%	3	1.79%		0.00%		0.00%
ANDERSON,KANSAS	7	1.43%		0.00%	1	1.96%	2	1.47%	2	1.69%	2	1.19%		0.00%		0.00%
BATES,MISSOURI	2	0.41%		0.00%		0.00%		0.00%	2	1.69%		0.00%		0.00%		0.00%
WAKE,NORTH CAROLINA	2	0.41%		0.00%		0.00%	2	1.47%		0.00%		0.00%		0.00%		0.00%
DOUGLAS,KANSAS	2	0.41%		0.00%		0.00%	2	1.47%		0.00%		0.00%		0.00%		0.00%
RILEY,KANSAS	1	0.20%		0.00%		0.00%		0.00%	1	0.85%		0.00%		0.00%		0.00%
EAU CLAIRE,WISCONSIN	1	0.20%		0.00%		0.00%		0.00%		0.00%	1	0.60%		0.00%		0.00%
SAN JOAQUIN,CALIFORNIA	1	0.20%		0.00%		0.00%		0.00%		0.00%	1	0.60%		0.00%		0.00%
ALLEN,KANSAS	1	0.20%		0.00%		0.00%		0.00%	1	0.85%		0.00%		0.00%		0.00%
JACKSON,MISSOURI	1	0.20%		0.00%		0.00%	1	0.74%		0.00%		0.00%		0.00%		0.00%
WYANDOTTE,KANSAS	1	0.20%		0.00%		0.00%	1	0.74%		0.00%		0.00%		0.00%		0.00%
BOURBON,KANSAS	1	0.20%		0.00%		0.00%	1	0.74%		0.00%		0.00%		0.00%		0.00%

Source: Olathe Health System Decision Support

Town Hall Attendees Notes and Feedback

[VVVConsultants, LLC]

Miami County, KS Town Hall Roster, N=38

Date: 10/22/15

Name	Phone	Organization	E-mail Address
Amiee Seck		Osawatomie Rotary	amiee.seck@yahoo.com
Anna Hudspeth		Louisburg Rotary	anna.hudspeth@olathehealth.org
Aubree Slayman		MCMC Nursing	aubree.slayman@olathehealth.org
Bill Maness		Senator Moran's Office	bill_maness@moran.senate.gov
Carl Buchman		Resident	honeychop@cebridge.net
Dan Sheihan		LCC of Osawatomie	daniel_sheihan@lcca.com
Diana Neal	913-755-4114	Osawatomie Chamber of Commerce	Chamber@osawatomietchamber.org
Donna Darner		Osawtaomie Chamber	
Donna Prophe		Miami County Cancer Foundation	
Donna Prothe		Miami County Cancer Foundation	cprothe@gmail.com
Dr. Christopher Lewis		Miami County Surgical Associates	christopher.lewis@olathehealth.org
Gary Frank		USD 367	friend@usd367.rog
Gary Reimer		Resident	gmreimer@suddenlink.net
Jackie Davey		MCMC Diabetes Educator	
Jimmy Hay	913-294-5331	United Way of Paola	jimmy_hay@usd368.org
Joyce Stoughton		OMSI	joyce.stoughton@olathehealth.org
Judy Welter		Paola School District	judy_welter@usd368.org
K. Leckman		Resident	pdk@suddenlink.net
Kathy Brakeville	913-294-5331	United Way of Paola	
Kevin Colwell	913-731-6901	Paola Police Department	kcolwell@cityofpaola.com
Lacey Kane		Resident	lacey.kane@olathehealth.org
Liz Fitzgerald		Health Partnership Clinic	lfitzgerald@hpcjc.com
Loralei Crum	913-294-4335	Paola Chamber of Commerce	loralei@paolachamber.com
Mike McGinnis			michael.mcginis@olathehealth.org
Mike Moon		Moon's Osawatomie	moon@classicnet.net
Milton A		KOFO	koforous@kofo.com
Myrnice Reimer		Resident	gmreimer@suddenlink.net
Nate Rockers		Rockers Pharmacy	nate@rockersrx.com
Nathan Law		City of Louisburg	nlaw@louisburgkansas.gov
Pam Johnson		Prairie View School District	pamj@pv362.org
Paul Luce		MCMC VP	paul.luce@olathehealth.org
Paulette Bennett		Miami County Cancer Foundation	
Rita McKoon		Miami County Health Department	mchealth@classicnet.net
Shawn Pearcy		OMSI	shawn.pearcy@olathehealth.org
Shirlene Johnson		Olathe Medical Services	shirlene.johnson@olathehealth.org
Travis Thompson		Louisburg Forward	thompson.travis@outlook.com
Ty McBride		MCMC Rehab	ty.mcbride@olathehealth.org
Vicki Belt	913-294-5331	United Way of Paola	

Miami County Community Health Needs Assessment Meeting
10.22.15
N=39

Representatives in the Room

- Parents
- Those taking care of seniors in their home
- Business owners
- Farmers
- Elected officials (HR City, County)
- Schools
- Nurses
- Doctors (Internal Medicine/Pediatrics, General Surgery)
- Senior community
- Linn County

County Health Rankings

- Miami scored green or yellow in all areas except “Physical Environment”

TAB 1: Demographic Profile

- Veterans going to Leavenworth to receive care
- Police say rate of violent crime is declining

TAB 3: Educational Profile

- Schools went with an outsource program that offers a lot of fruits and veggies, sometimes the kids just don’t like it.
- “Having a 17 year old boy, the portions are too small. He has to buy 2-3 lunches in order to be full.”
- “With the new guidelines from the Feds, we are limited on the number of calories that are allowed to be served.”
- State mandate for vision and hearing screenings, but every district does their own record keeping.

TAB 5: Hospital and Provider Profile

- We are hiring more primary care providers (NP, MD) in our clinic because we can’t keep up with the uninsured population.

TAB 8: Uninsured Profile

- 90% of the adult population is uninsured at the FQHC clinic.

TAB 10: Preventive Quality Profile

- Public health says they don’t have to get the shots by a certain time, they can pick and choose, so a lot of people don’t get them in time.
- A lot of stems back to Andrew Wakefield and what he spread about immunizations. People believe it isn’t harmful to spread the shots out over time.

STRENGTHS

- Walk-in Urgent Care Center
- Engaged community
- Quality care at the hospital and nursing home
- Access to physical fitness in Miami County
- Affiliation with OMC
- Leadership at the hospital
- Specialists coming to Miami County
- Good mix of healthcare services and resources
- Quality of schools
- Health Partnership Clinic
- Hospital providing healthcare services to the uninsured
- EMS
- A lot of green space
- Location of our clinics throughout the area
- Wide variety of dental and eye care services
- Availability of parking at the hospital

WEAKNESSES

- Affordable physical activity for seniors (work with the senior center)
- Primary care support services
- Affordable healthy eating options
- Extended walk-in clinic hours
- Nutritional education (food preparation)
- Substance abuse (alcohol, drugs)
- Cardiac rehab
- Health education for working adults
- Access to mental health (diagnosis, placement and med management)
- Availability of dental services and education about the affordability
- Tobacco
- Awareness of pediatric services

Public Notice and Invitation

[VVV Consultants, LLC]



A Member of Olathe Health System

FOR IMMEDIATE RELEASE

DATE: September 21, 2015

CONTACT: Stephanie Manning
PR & Marketing Manager
913-791-4398
stephanie.manning@olathehealth.org

Miami County Medical Center Invites Community to Provide Input About Healthcare Needs

PAOLA, KAN. (September 21, 2015) – Miami County Medical Center (MCMC) is seeking input from community members about the healthcare needs and desires in Miami County. All community residents and business leaders are encouraged to fill out a short online survey at https://www.surveymonkey.com/r/MCMC_2015 by Oct. 12. In addition, you are invited to attend a Town Hall meeting from 7:30 - 9 a.m. on Thursday, Oct. 22 at Town Square, 15 W. Wea in Paola, Kan., to discuss this topic with representatives from MCMC and other community health providers. Breakfast will be provided.

"The health of our community is a priority for our entire health system," Frank H. Devocelle, President/CEO of Olathe Health System, said. "We hope the community and health professionals will take advantage of this opportunity to provide input into the future of healthcare delivery in our county."

The information discussed at the Town Hall will be part of a final public report, called the Miami County Community Health Needs Assessment (MCCHNA). The report is an update to the MCCHNA completed in 2012 and will provide guidance to address the county's healthcare needs. The goal of this report is to help MCMC understand its progress in addressing community health needs cited in the 2012 report and to collect up-to-date community health perceptions.

~more~

MCMC executed several projects based on the healthcare needs cited in the 2012 report, including:

- Opening a walk-in clinic at Associates in Family Care - Paola
- Integrating goals for healthy eating habits and healthy lifestyles into pediatric patients' electronic medical records, and
- Partnering with the City of Paola to create a walking trail system in Paola

The full version of MCMC's 2012 Community Health Needs Assessment and 2014-2016 Community Health Improvement Plan can be found at olathehealth.org/community.

We value your input and hope you take the short survey and join us at the upcoming Town Hall. If you have any questions about CHNA activities, please call 913-791-4311.

###

From: CEO

Date: September 9th, 2015

To: Community Leaders, Providers, Hospital Board and Staff

Subject: CHNA Round #2 Online Survey 2015

Miami County Medical Center is partnering with other community health providers to update the 2012 Community Health Needs Assessment. (*Note:* This assessment update is a follow-up to meet final IRS regulations released on 01/02/2015, requiring all 501(c)(3) hospitals to conduct a Community Health Needs Assessment and adopt an implementation strategy at least once every three years).

Your feedback and suggestions regarding community health delivery are very important to collect in order to complete the 2015 Community Health Needs Assessment and implementation plan updates.

To accomplish this work, a short online survey has been developed:

https://www.surveymonkey.com/r/MCMC_2015

CHNA Round #2 due date for survey completion is Monday, October 12th, 2015. All responses are confidential. Thank you in advance for your time and support in participating with this important request.

Sincerely,
Frank Devocelle
CEO



Community Health Needs Assessment

Miami County, KS Community Town Hall Meeting

Miami County Medical Center
and Miami County Public Health
will be hosting a
Town Hall Meeting on October 22nd, 2015
from 7:00 to 8:30 a.m.
at Town Square.

Public is invited to attend.
A light breakfast will be provided.

Please join us for this opportunity to share your opinions
and suggestions to improve health care delivery
in Miami County, KS.

Thank you in advance for your participation.

Dear Community Member:

Miami County Medical Center (MCMC) is seeking input from community members about the healthcare needs in Miami and Linn Counties. All community residents and business leaders are encouraged to fill out a short online survey at https://www.surveymonkey.com/r/OMC_2015 by Oct. 12.

In addition, you are invited to attend a Town Hall meeting from 7:30 - 9 a.m. on Thursday, Oct. 22 at Town Square, 15 W. Wea St. in Paola, to discuss this topic with representatives from MCMC and other community health providers. Breakfast will be provided.

The information discussed at the Town Hall will be part of a final public report, called the Miami County Community Health Needs Assessment (MCCHNA). This report is an update to the MCCHNA completed in 2012 and will provide guidance to address the county's healthcare needs. The goal of this report is to help MCMC understand its progress in addressing community health needs cited in the 2012 report and to collect up-to-date community health perceptions.

We look forward to talking with you, and thank you for your participation!



Frank H. Devocelle
President/CEO
Olathe Health System

Detail Primary Research Primary Service Area

[VVV Consultants LLC]

Community Health Needs Assessment Round #2 Community Feedback

Methodology

A community feedback survey was created on behalf of the CHNA client to gather primary service area stakeholder feedback on health perception and progress in addressing previous CHNA community needs. All community residents were encouraged to take the survey online by entering the following address into personal browser:

https://www.surveymonkey.com/r/MCMC_2015. In addition, an invite letter was sent to all primary service area stakeholders (i.e. Schools, County, City, Clergy, Public Health Leaders).

Below is a summary of public response:

Miami County Medical Center (Primary Service Area) Miami County, KS N= 101			
9. For reporting purposes, are you involved in or are you a...	KS Stakeholders Round #2 Bottom 2 Boxes	Miami Co N=101	TREND
Board Member	4.4%	3.8%	
Business / Merchant	5.7%	9.6%	
Case Manager / Discharge	0.6%	1.3%	
Civic Club / Chamber	4.5%	5.7%	
Charitable Foundation	2.7%	6.4%	
Clergy / Congregational Leader	1.1%	0.6%	
College / University	1.8%	0.0%	
Consumer Advocate	1.0%	1.3%	
Consumers of Health Care	8.6%	8.9%	
Dentist	0.2%	0.0%	
Economic Development	1.3%	1.3%	
Education Official / Teacher	4.6%	5.1%	
Elected Official (City / County)	1.6%	1.9%	
EMS / Emergency	1.3%	1.3%	
Farmer / Rancher	4.3%	5.1%	
Health Department	1.4%	0.6%	
Hospital	13.3%	3.8%	
Housing / Builder	0.3%	0.0%	
Insurance	0.9%	0.0%	
Labor	1.3%	0.0%	
Law Enforcement	0.6%	0.6%	
Low Income / Free Clinics	0.5%	0.0%	
Mental Health	1.3%	1.3%	
Nursing	8.6%	7.6%	
Other Health Professional	6.4%	8.9%	
Parent / Caregiver	11.8%	10.8%	
Pharmacy	0.6%	1.3%	
Physician (MD / DO)	0.4%	0.6%	
Physician Clinic	1.2%	1.9%	
Press (Paper, TV, Radio)	0.2%	0.0%	
Senior Care / Nursing Home	1.3%	0.0%	
Social Worker	0.7%	1.9%	
Veteran	1.6%	0.6%	
Welfare / Social Service	0.6%	1.3%	
Other (please note below)	3.1%	6.4%	
TOTAL	100.0%	100.0%	

Miami County Medical Center CHNA - Let Your Voice Be Heard!

Miami County Medical Center is updating its Community Health Needs Assessment in partnership with other area health providers. Feedback from this survey will identify current health issues in our community. Participation is voluntary and all answers will be kept confidential.

All CHNA Round #2 feedback is due by Monday, October 12th. Thank you for your participation.

Part I: Introduction

1. Three years ago, MCMC completed a Community Health Needs Assessment. This assessment identified a number of health needs for our community. Today, we are updating this assessment and would like to know how you rate the "Overall Quality" of healthcare delivery in our community?

	Very Good	Good	Fair	Poor	Very Poor
Health Rating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. Are there healthcare services in your community / neighborhood that you feel need to be improved and/or changed? (Please be specific).

3. From our last Community Health Needs Assessment (2012), a number of health needs were identified as priorities. Are any of these 2012 CHNA needs still an "ongoing problem" in our community?

	Not a Problem Anymore	Somewhat of a Problem	Major Problem
Urgent Care Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Affordable Pharmaceuticals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obesity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Walk-In Doctor Appointments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Home Health Services (PT/OT)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teen Pregnancy / Unwed Mothers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Immunizations for Children	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental Care Access	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Additional Health Education Offerings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



4. Which 2012 CHNA health needs are most pressing TODAY for improvement? (Please select top three needs).

- | | |
|---|--|
| <input type="checkbox"/> Urgent Care Services | <input type="checkbox"/> Teen Pregnancy / Unwed Mothers |
| <input type="checkbox"/> Affordable Pharmaceuticals | <input type="checkbox"/> Immunizations for Children |
| <input type="checkbox"/> Obesity | <input type="checkbox"/> Dental Care Access |
| <input type="checkbox"/> Walk-In Doctor Appointments | <input type="checkbox"/> Additional Health Education Offerings |
| <input type="checkbox"/> Home Health Services (PT/OT) | |



5. How would community members rate each of the following services? (Please check one box per row).

	Very Good	Good	Fair	Poor	Very Poor	N/A
Ambulance Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chiropractors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dentists	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency Room	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eye Doctor / Optometrist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family Planning Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Home Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. How would our community members rate each of the following? (Continued). (Please check one box per row).

	Very Good	Good	Fair	Poor	Very Poor	N/A
Inpatient Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nursing Home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outpatient Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmacy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Primary Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public Health Department	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School Nurse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Visiting Specialists	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. Over the past two years, did you or someone you know receive healthcare services outside of our community?

- Yes Do Not know
 No

If yes, please specify the healthcare services received

8. Are there any other health needs from the list below that we need to discuss at our upcoming CHNA Town Hall meeting? (Please check all that need to be on our agenda).

- | | | |
|--|--|---|
| <input type="checkbox"/> Abuse / Violence | <input type="checkbox"/> Mental Illness | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Alcohol | <input type="checkbox"/> Nutrition | <input type="checkbox"/> Teen Pregnancy |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Obesity | <input type="checkbox"/> Tobacco Use |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Ozone (Air) | <input type="checkbox"/> Vaccinations |
| <input type="checkbox"/> Drugs / Substance Abuse | <input type="checkbox"/> Physical Exercise | <input type="checkbox"/> Water Quality |
| <input type="checkbox"/> Family Planning | <input type="checkbox"/> Poverty | <input type="checkbox"/> Wellness Education |
| <input type="checkbox"/> Heart Disease | <input type="checkbox"/> Respiratory Disease | |
| <input type="checkbox"/> Lead Exposure | <input type="checkbox"/> Sexual Transmitted Diseases | |
| <input type="checkbox"/> Other (please specify) | | |

9. Do you follow these health practices...? (Please check one box per row).

	Yes	No	N/A
If over 50, have you had a colonoscopy?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If male over 50, do you have annual prostate exams?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If female over 40, do you have annual mammograms?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If female, do you have a pap smear every other year?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Please complete sentence below. Are you...?

	Yes	No	N/A
Eating right (5+ servings fruits/veg)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using tobacco products weekly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exercising 2-3 times weekly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consuming alcohol (more than 1 drink daily)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Receiving an annual flu immunization	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Demographics

11. What is your home zip code?

12. For reporting purposes, are you involved in or are you a...? (Please select all that apply).

- | | | |
|---|---|---|
| <input type="checkbox"/> Board Member (Local) | <input type="checkbox"/> Elected Official - City / County | <input type="checkbox"/> Other Health Professional |
| <input type="checkbox"/> Business / Merchant | <input type="checkbox"/> EMS / Emergency | <input type="checkbox"/> Parent / Caregiver |
| <input type="checkbox"/> Case Manager / Discharge | <input type="checkbox"/> Farmer / Rancher | <input type="checkbox"/> Pharmacy |
| <input type="checkbox"/> Civic Club / Chamber | <input type="checkbox"/> Health Department | <input type="checkbox"/> Physician (MD / DO) |
| <input type="checkbox"/> Charitable Foundation | <input type="checkbox"/> Hospital | <input type="checkbox"/> Physician Clinic |
| <input type="checkbox"/> Clergy / Congregational Leader | <input type="checkbox"/> Housing / Builder | <input type="checkbox"/> Press (Paper, TV, Radio) |
| <input type="checkbox"/> College / University | <input type="checkbox"/> Insurance | <input type="checkbox"/> Senior Care / Nursing Home |
| <input type="checkbox"/> Consumer Advocate | <input type="checkbox"/> Labor | <input type="checkbox"/> Social Worker |
| <input type="checkbox"/> Consumers of Health Care | <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Veteran |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Low Income / Free Clinics | <input type="checkbox"/> Welfare / Social Service |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Mental Health | |
| <input type="checkbox"/> Education Official / Teacher | <input type="checkbox"/> Nursing | |
| <input type="checkbox"/> Other (please specify) | | |

You have just completed the Community Health Needs Assessment Survey. Thank you for your participation. By hitting "Next," you are submitting your responses and giving others an opportunity to complete the same survey.

Again, thank you for your participation.

KEY - CHNA Open End Comments			
CODE	Physician Specialty		NEUS
			Neurosurgery
ALL	Allergy/Immunology		OBG
			Obstetrics/Gynecology (Delivery)
AES	Anesthesia/Pain		ONC
			Oncology/RADO
CARD	Cardiology		OPHTH
			Ophthalmology
DERM	Dermatology		ORTH
			Orthopedics
EMER	Emergency		ENT
			Otolaryngology (ENT)
ENDO	Endocrinology **		PATA
			Pathology
FP	Family Practice (General)		PEDS
			Pediatrics
GAS	Gastroenterology		PHY
			Physical Medicine/Rehab
SUR	General Surgery		PLAS
			Plastic/Reconstructive
GER	Gerontology		PSY
			Psychiatry
IFD	Infectious Diseases		PUL
			Pulmonary
IM	Internal Medicine		RAD
			Radiology
NEO	Neonatal/Perinatal * ABP 06		RHE
			Rheumatology
NEP	Nephrology **		VAST
			Thoracic/Cardiovascular/Vascular
NEU	Neurology		URL
			Urology

KEY - CHNA Open End Comments			
Code	HC Themes		Code
			HC Themes
VIO	Abuse / Violence		EMRM
			Emergency Room
ACC	Access to Care		EMS
			EMS
AGE	Aging (Senior Care / Assistance)		EYE
			Eye Doctor / Optometrist
AIR	Air Quality		FAC
			Facility
ALC	Alcohol		FAM
			Family Planning Services
ALT	Alternative Medicine		FEM
			Female (OBG)
ALZ	Alzheimers		FINA
			Financial Aid
AMB	Ambulance Service		FIT
			Fitness / Exercise
ASLV	ASSISTED LIVING		ALL
			General Healthcare Improvement
AUD	Auditory		GEN
			General Practitioner
BACK	Back / Spine		GOV
			Government
BD	Blood Drive		HRT
			Heart Care
BRST	Breastfeeding		HEM
			Hematologist
CANC	Cancer		HIV
			HIV / AIDS
CHEM	Chemotherapy		HH
			Home Health
KID	Child Care		HSP
			Hospice
CHIR	Chiropractor		HOSP
			Hospital
CHRON	Chronic Diseases		MAN
			Hospital Management
CLIN	Clinics (Walk-in etc.)		INFD
			INFIDELITY
COMM	Communication		IP
			Inpatient Services
CORP	Community Lead Health Care		LEAD
			Lead Exposure
CONF	CONFIDENTIALITY		BIRT
			Low Birth Weight

KEY - CHNA Open End Comments				
Code	HC Themes		Code	HC Themes
DENT	DENTIST		LOY	LOYALTY
DENT	Dentists		MAMO	Mammogram
DIAB	Diabetes		MRKT	MARKETING
DIAL	Dialysis		STFF	Medical Staff
DUP	Duplication of Services		BH	Mental Health Services
ECON	Economic Development		MDLV	MID-LEVELS
	HC Themes		SANI	Sanitary Facilities
NURSE	More Nurse Availability		SNUR	School Nurse
NEG	Neglect		STD	Sexually Transmitted Diseases
NP	NURSE PRACTITIONER		SMOK	Smoking
NH	Nursing Home		SS	Social Services
NUTR	Nutrition		SPEC	Specialist Physician care
OBES	Obesity		SPEE	Speech Therapy
ORAL	Oral Surgery		STF	STAFFING
ORTHOD	ORTHODONTIST		STRK	Stroke
OTHR	Other		DRUG	Substance Abuse (Drugs / Rx)
OP	Outpatient Services/Surgeries		SUIC	Suicide
OZON	Ozone		SURG	SURGERY
PAIN	Pain Management		TPRG	Teen Pregnancy
PARK	PARKING		TEL	TELEMEDICINE
PHAR	Pharmacy		THY	Thyroid
DOCS	Physicians		TOB	Tobacco Use
FLU	Pneumonia / Flu		TRAN	Transportation
FOOT	Podiatrist		TRAU	Trauma
POD	PODIATRIST		TRAV	TRAVEL
POV	Poverty		ALCU	Underage Drinking
PNEO	Prenatal		INSU	Uninsured/Underinsured
PREV	Preventative Healthcare		URG	Urgent Care/After Hours Clinic
PRIM	Primary Care:		VACC	Vaccinations
PROS	Prostate		VETS	VETERANS CARE
DOH	Public Health Department		WAG	Wages
QUAL	Quality of care		WAIT	Wait Times
REC	Recreation		H2O	Water Quality
RESP	Respiratory Disease		WELL	Wellness Education/Health Fair
NO	Response "No Changes," etc.		WIC	WIC Program

**CHNA Round #2 Community Feedback 2015
MCMC Primary Service Area - Miami County, KS N=101**

ID	ZIP	c1	c2	c3	Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1072	6607	AGE			Yes! For a number of years my parents lived in a small SE Ks town that built an independent living facility (+55) with one and two bedroom apartments with a small kitchen. Each apt. Had a detached garage and storage unit on the front porch. They were very much like the apts. just built on south Hospital Dr. except they had a central club house where everyone that wanted came together for a noon meal. The apts. were built on the the hospital grounds so the meals were provided by the hospital and they were within walking distance of the hospital. Eventually doctor's offices were built next to the hospital so they were also within walking distance of the apts. My folks lived there for 16 years and loved the arrangement and the family atmosphere the club house provided.
1013		ALL			All of them
1075	66053	ASLV	AGE	ALZ	I won't say I've researched much, but my biggest concern as I get older is assisted living / nursing home options, especially for dementia / Alzheimer's victims. My second concern is affordability of those facilities.
1090	66071	BH	PEDS		Easier access to mental health services. Easier more frequent appointments for younger children who need them
1028	66053	CARD	URL	OP	MCMC needs a Cardiologist and Urologist either full time or part time for Out Patient visits including in patient when needed. There are many seniors in the county that prefer not to travel out of our county for medical care. The out patient facility on north side of hospital building is very inconvenient for the elderly patients to access the offices from parking area. If you park on the south side and go back through hall it is extremely far to have to walk especially for those that are handicapped and if you park in the back there is limited parking and you have to walk up the steep driveway to enter the building or use the very steep steps leading up to the entrance. Also there is not public restroom on the north side outpatient facility. You have to walk all the way up to the restrooms near radiology.
1015	66056	CLIN	STFF	CANC	The clinics in LaCygne & Mound City needs to be restaffed as well as the hospital in Paola. My mothers cancer was misdiagnosed 2 times by the hospital. She was there 5 times & to the LaCygne clinic. She had been having trouble for a year. This time Olathe caught it but it was too late. I just love the Olathe hospital & since the hospital in Paola changed hands we tried to believe they had improved. If I were Olathe Med. I would be ashamed to have these places represent me with my name. I use to see Olathe Medical on it & feel trust & admiration. Not so much anymore.
1069	66071	CLIN	STFF		I love the walk in clinic because it saves me a trip to Olathe; wish it were open on the weekends. Front office staff need better customer service skills. Most of them don't wear a smile or give one away. Eye contact is important too!
1059		CLIN			A walk-in clinic here in town (Osawatomie) would be great.
1077	66064	COST			more low cost for all, particularly the poor

**CHNA Round #2 Community Feedback 2015
MCMC Primary Service Area - Miami County, KS N=101**

ID	ZIP	c1	c2	c3	Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1091	66071	DENT	BH	WAIT	Easier access to dentists. Faster appointments for Mental
1006	66071	DOCS			I know it is very difficult but stability of physicians would be a benefit.
1095		DOH	INSU	VACC	the local health dept now only accepts people without insurance...however even the insured, can't sometimes afford a co-pay at the doctors office for vaccinations...
1011	66064	DRUG	ALC	BH	Drug Abuse Services Alcohol Abuse Services Mental Illness Services Emergency Care MCMC needs to be more proactive with treatment. Urgnet Care/Walk In Clinic on Weekends and Evenings Peditrician Services Speciality Clinics so patients don't have to travel Involvement with the local school districts
1081		DRUG	ALC		drugs and alcohol
1096	66071	EMER	AMB	OBG	We need to have Olathe Health systems start putting money into Miami County instead of building all of these health campuses. I think it is ridiculous that almost every time someone is seen at Miami County ER that they are taken to Olathe by ambulance. When does that money come back here? Olathe had tied the hands of the providers down here. We need OB services, ICU and more services.
1049	66072	EMER	DOCS	QUAL	I hear a lot of complaints about the ER here at MCMC. Pts that follow up with other drs in the facility comment a lot about the care in the ER and how they don't feel it was sufficient.
1070	66071	EMER	INSU		I took my husband to the emergency room in our town and we received a bill saying it was out of network for Aetna. Aetna supposedly bought out Coventry. When we had Coventry our local emergency room was not out of network, so it never occurred to us it would be now. If people can't go to the local emergency room and be considered in network it causes a financial hardship. I'm not sure if this can be improved.
1010	66040	EMER	NURSE		Yes the ER at MCMC very uncaring and rude nurses. I have had three bad experiences there and will never go back. I tried to address these issues and was met with just a generic response. Very Uncaring
1023		EMER	NURSE		Yes the Emergency Room at MCMC I have had three bad experiences there with incompetent and rude nursing. I will not be returning
1008	66053	EMER	OP	COMM	ER, out patient communication between healthcare providers and patients
1042	66064	EMER	QUAL	STFF	mcmc er care and employees are lacking in many areas that are necessary in er quality - i am a 15 year resident in the miami co are and have had to use the facility many times for self and family and have been disappointed
1085	66064	EMER	WAIT		I have used the ER several times and a couple of times I have felt like maybe the wait is too long...sometimes you can get in to the triage quickly but then it seems like you just wait forever. I have bypassed MCMC several times and gone to OMC for treatment
1044		EMER			Emergency care
1045	66071	EMER			Better emergency care

**CHNA Round #2 Community Feedback 2015
MCMC Primary Service Area - Miami County, KS N=101**

ID	ZIP	c1	c2	c3	Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1079	66071	FP	WAIT	DOCS	Associates in Family Care Paola-excessively long wait times (we waited 45 minutes in the waiting room and 45 minutes to be seen once taken back with a 1 month old, we changed doctors shortly after that) Not easy to get appointments with specific doctors at Associates in Family Care Paola (too many irons in the fire)
1086	66042	HOSP	IP	COMM	The hospitalists for inpatients at Miami County Medical Center doesn't seem to be working well. Major lack of communication between hospital nursing staff and hospitalists.
1004	66071	HOSP	SPEC	PRIM	our local hospital is good. they have done a good job getting specialists to come down and see patients here. I have had a few issues finding a primary doctor with the departure of several physicians from the area.
1087	66064	INSU	CLIN	DOH	Many uninsured people cannot afford to go to the doctor. It would be nice to see a walk in clinic with sliding scale fees based on income (similar to the health department).
1003	66071	MAMMO	DUP		Mammography - too many false alarms that would likely be eliminated with 3D mammography.
1002	66071	MAMMO			3D Mammography
1024	66071	OBES			obesity
1019	66071	OBG	OBES	DIAB	More women's health opportunities Increased work to fight obesity, type 2 diabetes (could even include cooking classes for healthy eating at home)
1001		OBG			gynecology services
1053	66071	OBG			I feel an OB/Gyn Dr would be good for Miami Co.
1094		OBG			OB / women's health
1098	66064	OBG			The community would benefit if MCMC delivered babies.
1065	66064	PEDS			More pediatric services. We are always having to take our grandsons to CMH even for minor emergencies because this hospital doesn't seem equipped to even do proper pediatric testing.
1100	66071	PEDS			Pediatrician services
1040	66071	PHY	CARD	FAC	Expand space and equipment for rehab department at MCMC. Provide cardiac rehab at MCMC.
1036	OBG	PNEO	BH		prenatal and mental health availability
1067		PRIM	CLIN		I miss having a "personal" doctor (or whatever you want to call it) instead of seeing someone different every time at a walk-in - but we need the walk-ins too.
1038		PRIM	DOCS		more male physicians for those patients not comfortable seeing females.
1005	66071	PRIM	URG		Need for more Primary Care physicians...urgent care does well.
1039	66064	PT			Paola PT is too small
1092		SMOK	WELL		Smoking Cessation
1051		SPEC	OBG	URL	It would be great to see more specialty services available at Miami County Medical Center such as OB/Gyn, Urology, GI, etc.
1014		STFF	CANC	DUP	Paola hospital & the clinics in Mound City need to seriously be restaffed. Misdiagnosis of cancer on a patient who died in Aug. The hospital did this twice to my mom. Once b4 they changed to Olathe & now after.
1020	66064	TRANS	SPEC		transportation for patients to specialists here and out of town

**CHNA Round #2 Community Feedback 2015
MCMC Primary Service Area - Miami County, KS N=101**

ID	ZIP	c1	c2	c3	Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1083	66064	URG	CLIN	WAIT	After hours/weekend availability of urgent care/walk in clinic
1099	66071	URG	CLIN		Extended walk in clinic hours in evenings till about 8:00 and additional Saturday hours.
1030	66071	URG	DENT		need urgent care center for after hours hassle to get dental care for those using medicaid
1031	66071	URG	NP	COMM	The Urgent Care. Some of the ARNP's are Terrible. They can miss diagnosis the easiest problem. We need someone who will listen to the patient. Some patients are not text book case, so they need to be able to listen to the patient and think outside the box.
1066	66071	URG			Urgent care
1016	66053	WELL	TPRG	SUIC	Education and quidance for young parents. Baby's are having babys and have no clue. The responsibilities that are required to keep a child healthy and happy are being neglected and then spill over to the feel of not being wanted or loved. This I believe creates suicidal tendencess and drug abuse.

CHNA Report Contact :



Vince Vandelaar, MBA
VVV Consultants LLC
***Adjunct Professor / Professional Healthcare
Marketing and Strategic Planning Consulting
Services***

*601 N Mahaffie, Olathe, KS 66061
(913) 302-7264 (C)
VVV@VandelaarMarketing.com*

*LinkedIn: vandelaar
Website: VandelaarMarketing.com*