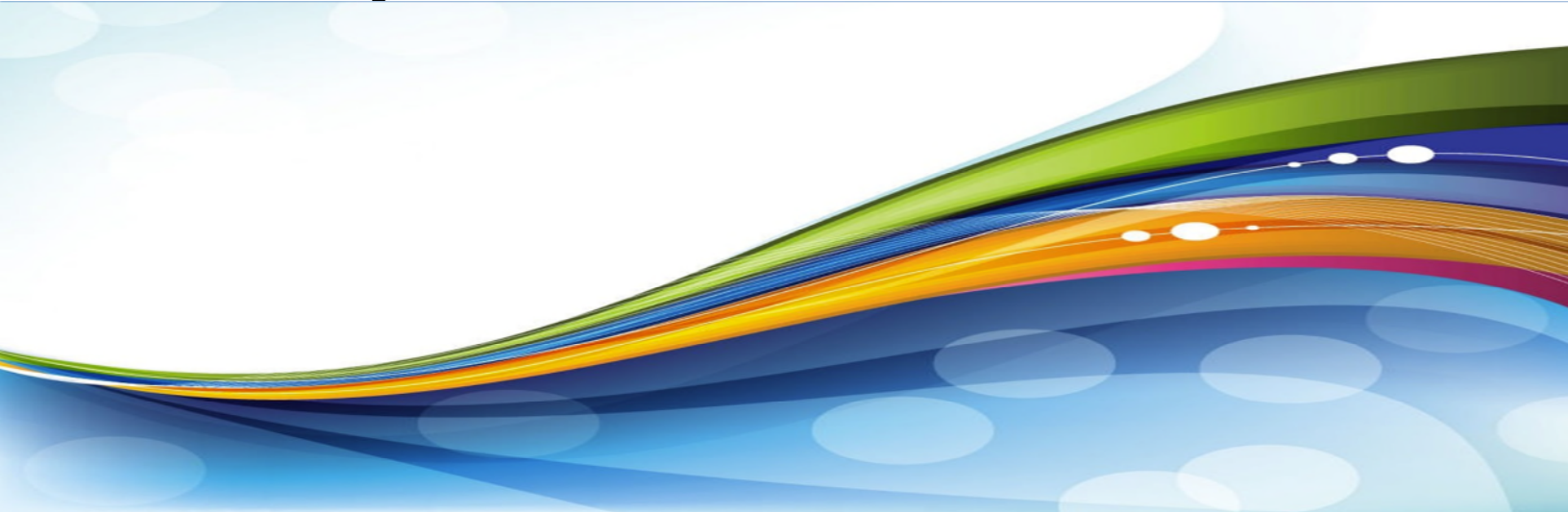




Thomas County, KS

Community Health Needs Assessment Round #2



May 2015

**VVV Research & Development, LLC
Olathe, KS**

Community Health Needs Assessment

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I. Executive Summary

[VWV Research & Development, LLC]

I. Executive Summary

Thomas County, 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 Thomas County, KS was published in May of 2012. (Note: The Patient Protection and Affordable Care Act (ACA) require not-for-profit hospitals to conduct a CHNA every three years and adopt an implementation strategy to meet the needs identified by the CHNA). This assessment was coordinated and produced by VVV Research & Development, 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 Citizens Medical Center, Inc.'s Primary Service Area are as follows:

Thomas Co, KS - Community Health "Strengths"			
#	Topic	#	Topic
1	Good Outpatient Care	13	Interpreting Service
2	Thomas County Community Coalition Focused on Healthy Living Choices	14	Supportive Community Social Services
3	Good Health Department	15	Safe Community
4	Quality Physicians	16	Availability of Resources
5	Collaboration of Agencies in Healthcare Delivery	17	Good Imaging Equipment
6	Local Hospital (Self-Sustained)	18	Sliding Scale Cost for Services
7	Planned Growth in Community	19	Multiple Pharmacies
8	Local Surgeon	20	Immunizations
9	Quality of Health Delivery	21	Low Murder Rate
10	Good ER/Emergency Response	22	Community Funding
11	Good Perception of Healthcare	23	Annual Wellness Fair
12	Strong Local Economy		

Town Hall "Community Health Changes and/or Improvements Ranking" cited for Citizens Medical Center, Inc.'s Primary Service Area are as follows:

Thomas County, KS - Citizens Medical Center Inc. PSA				
Town Hall Community Health Needs Priorities (29 Attendees)				
#	Health Needs to Change and/or Improve	Votes	%	Accum
1	Increase Availability of Child Daycare	17	14.7%	14.7%
2	Expand Affordable Mental Health (Availability of Psychiatrists)	16	13.8%	28.4%
3	Expand Cancer Services	16	13.8%	42.2%
4	Expand Dentists Accepting Medicaid / uninsured	13	11.2%	62.1%
5	Decrease Obesity (Provide Nutrition and Fitness Education)	10	8.6%	50.9%
6	Expand Preventive Care	8	6.9%	69.0%
7	Provide Healthcare Transportation (County wide)	7	6.0%	75.0%
8	Recruit Specialists (Endo, Derm, ENT, Alt Medicine)	6	5.2%	80.2%
Total Town Hall Votes		116	100.0%	
Note: Other items NOT receiving votes: Decrease Drinking, Offer Affordable Housing, Drug Abuse, Uninsured, Assisted Living, Smoking, Home Health, Understanding the State Data, Increasing Number of Beds at Jails.				

Key Community Health Needs Assessment Conclusions from secondary research for Citizens Medical Center, Inc.'s Primary Service Area are as follows:

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

- TAB 1: Thomas County has a population of 7,948 residents as of 2013. 15.3% of Thomas County's population consists of the elderly (65+), and 37.0% percent of these elderly people (65+) are living alone. The percent of Hispanics and Latinos in Thomas County is 5.2%. 23.0% percent of children in Thomas County live in single-parent households. The percent of people living below the poverty level in is 11.2%. The percent of children living below poverty level in Thomas County is 6.3%, much lower than the Kansas rural norm of 18.1%. The percent of people with limited access to healthy foods is 15.0%, much higher than the Kansas rural norm of 8.0%.
- TAB 2: The Thomas County per capita income equals \$25,942. The median value of owner-occupied housing units is \$92,200, higher than the Kansas rural norm of \$75,775. The percent of unemployed workers in the civilian labor force in Thomas County is 2.4%. Thomas County has a high percentage of households with no care with low access to a grocery store (4.1%), compared to the Kansas rural norm of 2.1%. The number of

households without a vehicle is 2.5%, lower than the Kansas rural norm of 4.2%. The percent of solo drivers with a long commute is 8.0%.

- TAB 3: In Thomas County, 31.4% of students are eligible for the free or reduced lunch program, compared to the Kansas rural norm of 34.2%. The poverty status by school enrollment is 5.3%, much lower than the Kansas rural norm of 12.6%. The county maintains a 93.6% high school graduation rate, which is higher than the Kansas rural norm of 84.6%. The percent of persons (25+) with a Bachelor's degree or higher in Thomas County is 27.0%, higher than the Kansas rural norm of 20.5%.
- TAB 4: The percent of births where prenatal care began in the first trimester in Thomas County is 78.4%. The percent of births with low birth weights is 10.2%, higher than the Kansas rural norm of 8.9%. The average monthly WIC participation rate in Thomas County is 19.6%. 35.2% of births are occurring to unmarried women, higher than the Kansas rural norm of 31.3%. The percent of all births occurring to Teens is 11.4% in Thomas County, higher than the Kansas rural norm of 7.6%.
- TAB 5: The ratio of the population in Thomas County to primary care physicians is 3103, higher than the Kansas rural norm of 2,114. The number of preventable hospital stays in Thomas County is 84, higher than the Kansas rural norm of 64. The chronic obstructive pulmonary disease admission rate (313) and congestive heart failure hospital admission rate (230) in Thomas County are higher than their respective Kansas rural norms of 136 and 199.
- TAB 6: The depression rate for the Medicare population in Thomas County is 13.0%, lower than the Kansas rural norm of 15.2%. The percent of alcohol-impaired driving deaths in Thomas County (25.0%) is lower than the Kansas rural norm of 36.4%. The number of poor mental health days in Thomas County is 2.5.
- TAB 7: The adult obesity rate in Thomas County is 31.0%. The percent of people in Thomas County who are physically inactive is 25.0%. Ischemic Heart Disease in the Medicare population is 22.9%, lower than the Kansas rural norm of 29.7%. Diabetes in the Medicare population is 21.3%, lower than the Kansas rural norm of 23.0%.
- TAB 8: The uninsured adult population rate in Thomas County is 15.8%, lower than the Kansas rural norm of 17.4%.
- TAB 9: The age-adjusted years of potential life lost due to traffic injury in Thomas County is 1961, much higher than the Kansas rural norm of 1541. The age-adjusted Chronic Lower Respiratory Disease mortality rate is 86, higher than the Kansas rural norm of 51. The infant mortality rate in Thomas County is 14.6%, higher than the Kansas rural norm of 10.7%.
- TAB 10: The percentage of infants fully immunized at 24 months in Thomas County is 76.2%, lower than the Kansas rural norm of 78.6%. The percent of diabetic screenings in Thomas County is 88.0%. Access to exercise opportunities in Thomas County is 75.0%, much higher than the Kansas rural norm of 51.3%. Mammography screenings are at 47.6%, much lower than the Kansas rural norm of 64.0%.

Key 2015 Community Feedback Conclusions:

As seen below, the community still senses a health need for Obesity, Teen Pregnancy, Uninsured, Social Services Funding and Chronic Disease.

CHNA Round #2 Feedback 2015 - Thomas Co, KS						
From our last Community Health Needs Assessment (2012), a number of health needs were identified as a priority. 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	7	87	78	95.9%	172	1
Teen Pregnancy	10	113	49	94.2%	172	5
Uninsured	12	121	36	92.9%	169	6
Social Services Funding	17	104	38	89.3%	159	8
Chronic Disease	21	108	40	87.6%	169	4
Dentists that Accept Medicaid	21	83	52	86.5%	156	7
Mental Health	24	77	62	85.3%	163	3
Specialty Services (Chemo, Radiation, Dialysis, Surgery)	26	94	55	85.1%	175	2
Healthcare Transportation	39	102	28	76.9%	169	10
Home Health Services	46	88	24	70.9%	158	9

II. Methodology

[VVV Research & Development, 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).

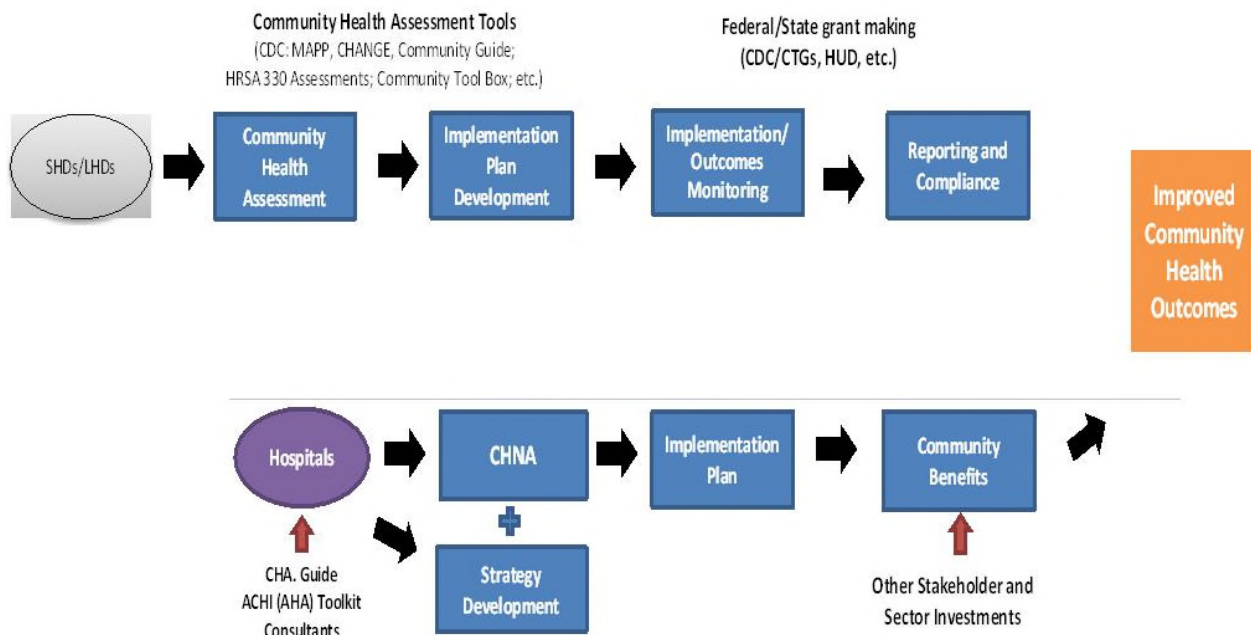
JOB #2: Making a CHNA Widely Available to the Public

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 both hospitals and the local county health department. A common approach has been adopted to create the CHNA, leading to aligned implementation plans and community reporting.



IRS Notice 2011-52 Overview

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

Applicability of CHNA Requirements to “Hospital Organizations”

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

How and When to Conduct a CHNA

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

Determining the Community Served

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

Persons Representing the Community Served

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

Required Documentation

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

Making a CHNA Widely Available to the Public

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

How and When to Adopt an Implementation Strategy

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

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

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:

Citizens Medical Center, Inc. Profile

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

Our Story: At Citizens Medical Center, Inc. (CMCI) our mission is “We are a team of health care professionals leading the region by providing superior health care services and exceptional customer care.” The over 270 employees of CMCI including our doctors, nurse practitioners, physician assistants, nurses, technicians, therapists, and other professionals are dedicated to this mission every day. CMCI is composed of Citizens Medical Center, Family Center for Health Care, Prairie Senior Living Complex, and the Citizens Foundation. We all work together to ensure that the care you receive is the best it can be, from first encounter to last. That’s what it takes to be your choice for health care.

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

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

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

Mission Statement: We are a team of health care professionals leading the region by providing superior health care services and exceptional customer care.

Vision: We strive to be the most progressive, dependable, knowledgeable regional medical center providing compassionate, evidence-based care, in a cost effective manner; therefore, becoming the provider and employer of choice.

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

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

Thomas County Health Department Profile

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

Administrator: Kasiah Rothchild

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

Thomas County Health Department offers the following services:

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

II. Methodology

b) Collaborating CHNA Parties Continued

Consultant Qualifications



VVV Research & Development, LLC

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

VINCE VANDEHAAR, MBA

Principal Consultant and Owner of VVV Research & Development, LLC

VVV Research & Development, LLC was incorporated on May 28th, 2009. With over 30 years of business & faculty experience in helping both providers, payors, and financial service firms obtain their strategic planning and research & development needs, Vince brings in-depth health industry knowledge, research aptitude, planning expertise and energy. VVV Research & Development 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 Research & Development, LLC consultants have in-depth experience helping hospitals work with local Health Departments to engage community residents & leaders to identify gaps between existing health community resources & 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 8 comprehensive Baldrige aligned Community Health Needs Assessments for Saint Luke's of Kansas City System facilities (3 campuses) and was contracted to conduct 2 additional independent Dept. of Health consulting projects (prior to IRS 990 regs). To date, VVV has completed 39 CHNA IRS aligned assessments for Kansas, Iowa and Missouri hospitals & 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 & 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 2015 - VVV Research & Development, LLC
Lead Business Development Analyst

II. Methodology

c) CHNA and Town Hall Research Process

Our Community Health Needs Assessment process began in December of 2014. At that time an inquiry by Hays Medical Center (Hays, KS) to all NW KS Health Alliance Network member hospitals was communicated to explore the possibility of a “group buy” to meet IRS CHNA requirements. (Note: Most NW KS Alliance Network hospitals work closely with Hays Medical Center to provide onsite IT, Telemedicine, Mobile Radiology and Bio-Medical services. In addition, many Hays based specialists will travel to neighboring counties to provide visiting outreach clinics).

In late December of 2014 a meeting was called (hosted) by Hays Medical to learn more from the NW Alliance members (24) regarding their CHNA needs and to review the possible CHNA collaborative options. VVV Research & Development, LLC from Olathe, KS was asked to facilitate this discussion with the following agenda: VVV Research CHNA experience, review CHNA requirements (regulations) and discuss CHNA steps and options to meet IRS requirements and to discuss the next steps.

VVV CHNA Deliverables:

- Uncover and document basic secondary research – health of county (organized by 10 TABS)
- Conduct Town Hall meeting to discuss secondary data and uncover and prioritize county health needs
- Conduct and report CHNA primary Research (valid N)
- Prepare and publish IRS-aligned CHNA report to meet requirements

VVV CHNA Citizens Medical Center, Inc. Work Plan Project Timeline & Roles 2015

Step	Date (Start-Finish)	Lead	Task
1	12/11/2014	VVV	Hold kickoff Northwest Alliance review.
2	1/1/2015	Hosp	Select CHNA Option A/B/C. Approve and sign VVV CHNA quote.
3	1/20/2015	VVV	Send out REQCommInvite Excel file. Hosp and Health Dept to fill in PSA stakeholders names / address / e-mail.
4	1/20/2015	VVV	Request Hosp client to send KHA PO reports (POT01, 103 and TOT223E) to document service area for FFY 11, 12 and 13. In addition, request Hosp to complete 3 year historical PSA IP/OP/ER/Clinic patient origin file (Use ZipPSA_3yrPOrigin.xls).
5	On or Before 1/28/2015	VVV	Prepare CHNA Round#2 stakeholder feedback online link. Send text link for Hosp review.
6	On or Before 1/28/2015	VVV / Hosp	Prepare / send out PR story to local media announcing upcoming CHNA work. Hosp to place.
7	2/2/2015	VVV	Launch / conduct online survey to stakeholders. Hosp will e-mail invite to participate to all stakeholders.
9	2/11/2015	VVV / Hosp	Prepare / send out PR story to local media CHNA survey announcing online CHNA Round #2 feedback. Request public to participate.
10	On or Before 2/15/2015	VVV	Assemble and complete secondary research. Find / populate 10 TABS. Create Town Hall PPT for presentation.
11	2/18/2015	Hosp	Prepare / send out community Town Hall invite letter and place local ad.
12	2/18/2015	VVV / Hosp	Prepare / send out PR story to local media announcing upcoming Town Hall. VVV will mock-up PR release to media sources.
13	5/13/2015	All	Conduct conference call (time TBD) with Hosp / Health Dept to review Town Hall data / flow.
14	5/21/2015	VVV	Conduct CHNA Town Hall. Dinner 5:30-7pm at Pioneer Memorial Library. Review and discuss basic health data plus rank health needs.
15	On or Before 5/31/2015	VVV	Complete analysis (release draft 1). Seek feedback from leaders (Hosp and Health Dept).
16	On or Before 6/30/2015	VVV	Produce and release final CHNA report. Hosp will post CHNA online.
17	On or Before 6/30/2015	Hosp	Conduct client implementation plan PSA leadership meeting.
18	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 CHNA hospital client and county health department. Review and confirm CHNA calendar of events, explain and coach client to complete required participants database and schedule and organize all Phase II activities.

Phase II – QUALIFY Community Need:

A) Conduct secondary research to uncover the following historical community health status for PSA. Use Kansas Hospital Association (KHA), Vital Statistics, Robert Woods 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 90 minute Town Hall meeting with required county PSA residents. (Note: 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 CHNA criteria.

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

Phase I: Discovery.....	January 2015
Phase II: Secondary / Primary Research.....	Jan - Feb 2015
Phase III: Town Hall Meeting.....	May 21, 2015
Phase IV: Prepare and release CHNA report.....	June 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.

Gove County Medical Center's Town Hall was held on Thursday May 21th, 2015 at Pioneer Memorial Library. Vince Vandelaar and Alexa Backman facilitated this 1 ½ hour session with sixty three (29) attendees. (Note: a detail 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 and review of historical county health indicators. (10 TABS)
4. Facilitate Town Hall participant discussion of data (probe health strengths and 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 4 dots to cast votes on priority issues). Tally and rank top community health concerns cited.
6. Close meeting by reflecting on the health needs and 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 Gove County, KS Town Hall Meeting on behalf of Gove County Medical Center

Vince Vandehaar, MBA
VVV Marketing & Development INC.
Owner and Adjunct Marketing Professor

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www.vandehaarmarketing.com
913-302-7264

Community Health Needs Assessment (CHNA) Town Hall Discussion Agenda

- I. Opening / Introductions (10 mins)
- II. Review CHNA Purpose & 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)
- V. Close / Next Steps (5 mins)

VVV Marketing & Development INC.

I. Introduction:

Background and Experience



Vince Vandehaar MBA,
VVV Marketing & Development INC 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 2015, VVV Collaborative Analyst

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, 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?

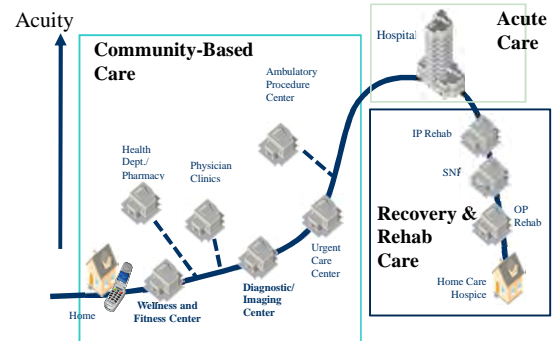
- To determine health-related trends and issues of the community.
- To understand/evaluate health delivery programs in place.
- To develop strategies to address unmet health needs.
- To meet Federal requirements – both local hospital & Health Department.

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. Some data will be collected today.>*

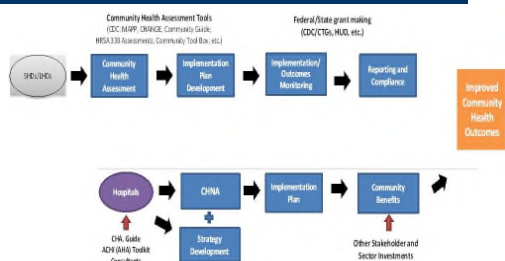
CHNA's role is to identify factors that affect the health of a population and determine the availability of resources to adequately address those factors.

Future System of CARE Sg2



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

Community Health Needs Assessment Joint Process: Hospital & Health Department



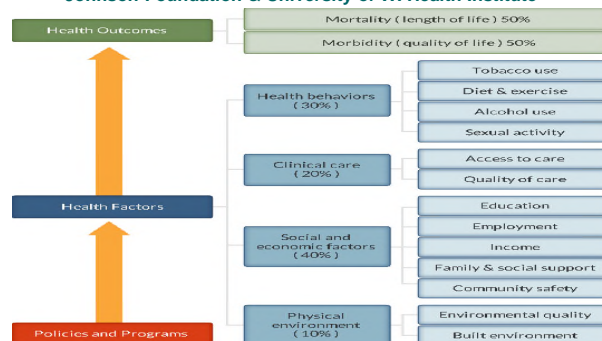
II. Required Written Report IRS 990 Documentation

- 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.

III. Review Current County "Health Status" – Secondary Data by 10 TAB Categories plus IA 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 & University of WI Health Institute



1	Focus Area	Measure	Description	
1	Physical Environment (10%)	Air and water quality (5%)	Air pollution - particulate matter The average daily measure of fine particulate matter in micrograms per cubic meter (PM2.5) in a county	
		Drinking water violations	Percent of population potentially exposed to water exceeding a violation limit during the past year	
		Housing and transit (5%)	Severe housing problems Percent of households with at least 1 of a housing problem: overcrowding, high housing costs, or lack of hot/cold gas/plumbing facilities. Percent of the workforce that drives alone to work Among workers who commute in their car alone, the percent that commute more than 30 minutes	
2a	Clinical Care (20%)	Focus Area	Measure	Description
2a	Access to care (10%)	Uninsured	Percent of population under age 65 without health insurance	
		Primary care physicians	Ratio of population to primary care physicians	
		Dentists	Ratio of population to dentists	
Quality of care (10%)	Mental health providers	Ratio of population to mental health providers		
	Preventable hospitalizations	Hospitalization rate for ambulatory care sensitive conditions per 1,000 Medicare enrollees		
	Diabetic screening	Percent of diabetic Medicare enrollees that receive HbA1c screening		
2b	Social and Economic Environment (40%)	Mammography screening	Percent of female Medicare enrollees that receive mammography screening	
		2b	Focus Area	Measure
2b	Education (10%)	High school graduation	Percent of ninth grade cohort that graduates in 4 years	
		Some college	Percent of adults aged 25-44 years with some post-secondary education	
		Unemployment (10%)	Percent of population age 16+ unemployed but seeking work	
Income (10%)	Children in poverty	Percent of children under age 18 in poverty		
	Inadequate social support	Percent of adults without social/emotional support		
Family and social support (5%)	Children in single-parent households	Percent of children that live in household headed by single parent		
	2b / 3c	Stability / Mortality	Focus Area	Measure
2b / 3c	Community safety (5%)	Violent crime	Violent crime rate per 100,000 population	
		Injury deaths	Injury mortality per 100,000	
		3	Health Outcomes (30%)	Focus Area
3	Health Behaviors (15%)	Adult smoking	Percent of adults that report smoking >= 100	
		Adult obesity	Percent of adults that report a BMI >= 30	
		Diet and exercise (10%)	Index of factors that contribute to a healthy food environment	
3	Health Outcomes (15%)	Food environment index	Index of factors that contribute to a healthy food environment	
		Physical inactivity	Percent of adults aged 20 and over reporting access to locations for physical activity	
		Access to exercise opportunities	Percent of the population with adequate access to locations for physical activity	
3	Health Outcomes (15%)	Alcohol and drug use (5%)	Excessive drinking Binge plus heavy drinking	
		Alcohol-impaired driving deaths	Percent of driving deaths with alcohol involvement	
		Sexually transmitted infections	Chlamydia rate per 100,000 population	
3	Health Outcomes (10%)	Teen births	Teen birth rate per 1,000 female population, ages 15-19	
		3b / 3c	Stability / Mortality	Focus Area
3b / 3c	Quality of life (50%)	Poor or fair health (age-adjusted)	Percent of adults reporting fair or poor health (age-adjusted)	
		Poor physical health days (age-adjusted)	Average number of physically unhealthy days reported in past 30 days (age-adjusted)	
		Poor mental health days (age-adjusted)	Average number of mentally unhealthy days reported in past 30 days (age-adjusted)	
3b / 3c	Health Outcomes (5%)	Low birthweight	Percent of live births with low birthweight (< 5,500 grams)	
		Premature death	Years of potential life lost before age 75 per 100,000 population (age-adjusted)	

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?**

V. Have we forgotten anything ?

- | | |
|--------------------------------|------------------------------------|
| A. Aging Services | M. Hospice |
| B. Chronic Pain Management | N. Hospital Services |
| C. Dental Care/Oral Health | O. Maternal, Infant & Child Health |
| D. Developmental Disabilities | P. Nutrition |
| E. Domestic Violence, | R. Pharmacy Services |
| F. Early Detection & Screening | S. Primary Health Care |
| G. Environmental Health | T. Public Health |
| H. Exercise | U. School Health |
| I. Family Planning | V. Social Services |
| J. Food Safety | W. Specialty Medical Care Clinics |
| K. Health Care Coverage | X. Substance Abuse |
| L. Health Education | Y. Transportation |
| M. Home Health | Z. Other _____ |

Community Health Needs Assessment

Questions Next Steps ?

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Thomas County, KS Airports⁴

Name	USGS Topo Map
Hutton Airport	Brewster SE
Murray Airport	Colby

Schools in Thomas County⁵

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

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

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

Detail Demographic Profile

ZIP	NAME	County	Population:			Households		HH	Per Capita
			Yr2014	Yr2019	Chg	Yr2014	Yr2019	Avg Size	Income 14
67701	Colby	THOMAS	6,390	6,442	0.8%	2,627	2,662	2.3	\$23,933
67732	Brewster	THOMAS	494	498	0.8%	200	204	2.5	\$27,907
67734	Gem	THOMAS	151	155	2.6%	62	63	2.4	\$23,062
67743	Levant	THOMAS	151	151	0.0%	64	65	2.4	\$28,815
67753	Rexford	THOMAS	514	525	2.1%	199	204	2.6	\$23,653
Totals			7,700	7,771	6.4%	3,152	3,198	2.4	\$25,474

ZIP	NAME	County	Population 2014:				YR 2014		Females
			Yr2014	POP65p	KIDS<18	GenY	MALES	FEMALES	Age20_35
67701	Colby	THOMAS	6,390	1,050	1,709	2,052	3,111	3,279	715
67732	Brewster	THOMAS	494	84	129	134	260	234	37
67734	Gem	THOMAS	151	22	40	41	78	73	9
67743	Levant	THOMAS	151	25	39	42	79	72	12
67753	Rexford	THOMAS	514	81	138	139	267	247	32
Totals			7,700	1,262	2,055	2,408	3,795	3,905	805

ZIP	NAME	County	Population 2014:				Aver	Hholds	HH \$50K+
			White	Black	Amer IN	Hisp	HH Inc14	Yr2014	
67701	Colby	THOMAS	6,045	74	33	326	\$57,579	2,627	1,282
67732	Brewster	THOMAS	472	0	4	25	\$68,931	200	111
67734	Gem	THOMAS	138	0	1	13	\$56,168	62	32
67743	Levant	THOMAS	144	0	2	8	\$67,985	64	35
67753	Rexford	THOMAS	476	1	3	37	\$61,094	199	102
Totals			7,275	75	43	409	\$62,351	3,152	1,562

Source: ERSA Demographics

III. Community Health Status

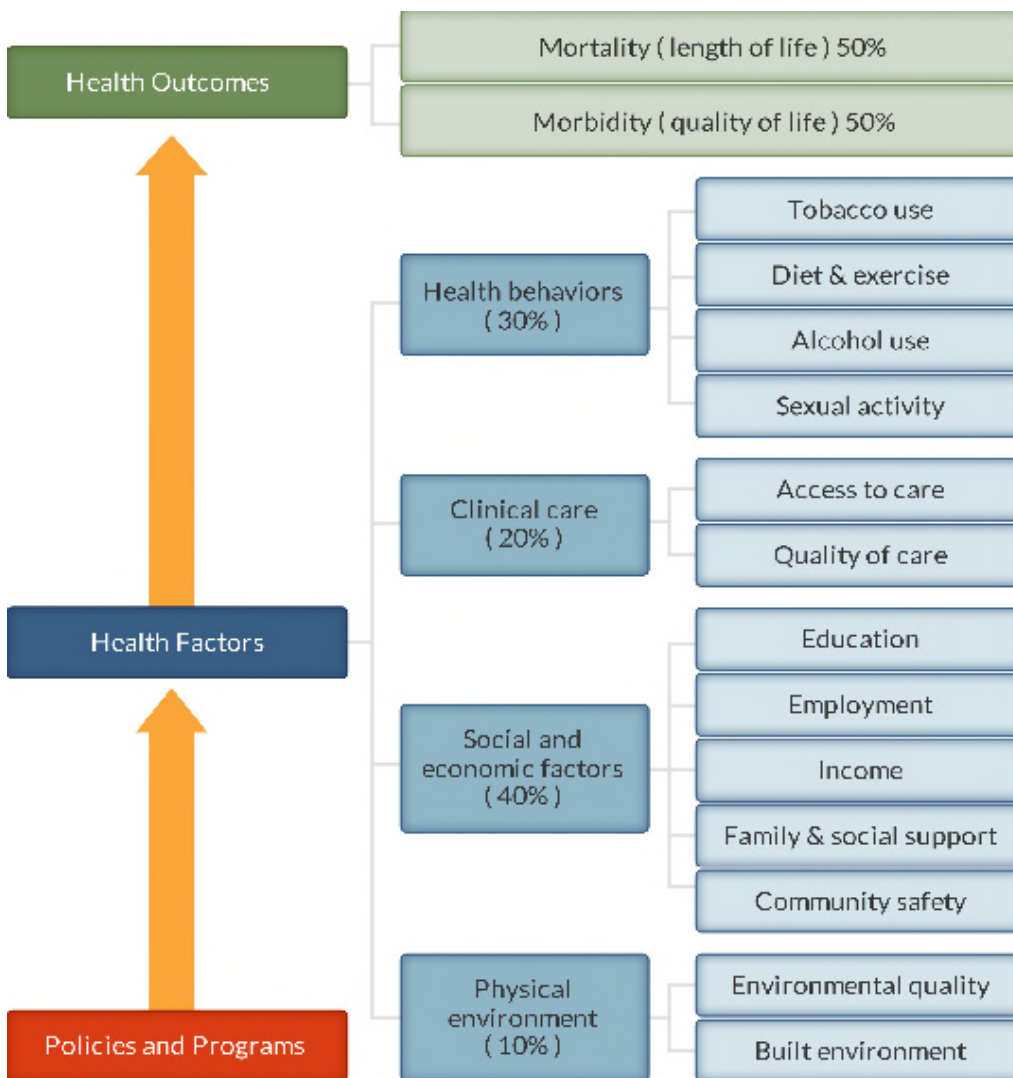
[VVV Research & Development, LLC]

III. Community Health Status

a) Historical Health Statistics

Health Status Profile

This section of the CHNA reviews published quantitative community health indicators and results of our recent CHNA Town Hall. To produce this profile, VVV Research & Development 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. (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 Thomas County, KS

#	Kansas 2015 County Health Rankings (105 counties)	Definitions	THOMAS CO 2015	TREND	NW Alliance (12)
1	Physical Environment	Environmental quality	41		50
2	Health Factors		13		26
2a	Clinical Care	Access to care / Quality of Care	43		41
2b	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	16		29
3	Health Outcomes		6		44
3a	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	13		34
3b	Morbidity	Quality of life	50		48
3c	Mortality	Length of life	1		42
OVERALL RANK			13		44
NW KS Norms include the following 12 counties: Barton, Ellis, Gove, Kiowa, Norton, Osborne, Pawnee, Phillips, Russell, Sheridan, Smith and Thomas					
http://www.countyhealthrankings.org					

2014 State Health Rankings for Thomas County, KS

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

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

Tab 1 Demographic Profile

TAB		Health Indicator	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
1a	a	Population, 2013 estimate	7,948		2,895,801	5,068	People Quick Facts
1a	b	Population, 2010	7,900		2,853,118	5,108	People Quick Facts
1a	c	Pop Growth % - April 1, 10 to July 1, 13	0.6%		2.1%	-0.5%	People Quick Facts
1a	d	Persons under 5 years, percent, 2013	6.7%		6.9%	6.0%	People Quick Facts
1a	e	Persons under 18 years, percent, 2013	22.9%		21.8%	22.1%	People Quick Facts
1a	f	Persons 65 years and over, percent, 2013	15.3%		13.6%	20.4%	People Quick Facts
1a	g	Female persons, percent, 2013	50.8%		49.7%	49.2%	People Quick Facts
1a	h	White alone, percent, 2013 (a)	96.1%		95.6%	95.4%	People Quick Facts
1a	i	Black or African American alone, % 2013 (a)	0.8%		1.0%	1.7%	People Quick Facts
1a	j	Hispanic or Latino, percent, 2013 (b)	5.2%		5.4%	5.2%	People Quick Facts
1a	k	Foreign born persons, percent, 2008-2012	2.2%		2.6%	2.1%	People Quick Facts
1a	l	% Language other than English spoken at home	5.0%		7.6%	4.7%	People Quick Facts
1a	m	% Living in same house 1 year +, 2008-2012	81.1%		75.8%	86.6%	People Quick Facts
1a	n	People 65+ Living Alone, 2009-2013	37.0%		29.4%	32.4%	American Community Survey

TAB		Health Indicator	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
1b	a	Veterans, 2008-2012	564		NA	18,731	People Quick Facts
1b	b	Population per square mile, 2010	7.4		31.6	17	Geography Quick Facts
1b	c	Violent crime rate (Rate of Violent Crime per 1,000)	2.1		3.5	207.5%	Kansas Bureau of Investigation
1b	d	Children in single-parent households	23%		NA	29%	County Health Rankings
1b	e	People Living Below Poverty Level, 2009-2013	11.2%		13.7%	12.5%	American Community Survey
1b	f	Children Living Below Poverty Level, 2009-2013	6.3%		18.7%	18.1%	American Community Survey
1b	g	Limited access to healthy foods	15%		NA	8%	County Health Rankings
1b	h	People 65+ Living Below Poverty Level, 2009-2013	13.2%		7.6%	8.5%	American Community Survey
1b	i	People 65+ with Low Access to a Grocery Store, 2010	6.9%		NA	9.5%	U.S. Department of Agriculture - Food Environment Atlas
1b	j	Voter Turnout, 2012	78.7%		66.8%	71.0%	Kansas Secretary of State

Tab 2 Economic Profiles

TAB		Health Indicator	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
2a	a	Households, 2008-2012	3,137		1,110,440	95,097	People Quick Facts
2a	b	Median household income, 2009-2013	\$48,187		\$51,332	\$44,017	American Community Survey
2a	c	Per capita money income in past 12 months (2012 dollars), 2008-2012	\$25,942		\$24,625	\$25,046	People Quick Facts
2a	d	Households with Cash Public Assistance Income, 2009-2013	2.1%		2.3%	1.6%	American Community Survey
2a	e	Housing units, 2013	3,506		NA	106,387	People Quick Facts
2a	f	Median value of owner-occupied housing units, 2008-2012	\$92,200		\$134,700	\$75,775	People Quick Facts
2a	g	Homeownership rate, 2009-2013	60.6%		60.7%	62.6%	American Community Survey
2a	h	Housing units in multi-unit structures, % 2008-2012	19.5%		23.4%	9.0%	People Quick Facts
2a	i	Persons per household, 2008-2012	2.4		2.3	2.3	People Quick Facts
2a	j	Severe Housing Problems, 2006-2010	8.0%		12.8%	8.5%	County Health Rankings
2a	k	Homeowner Vacancy Rate, 2009-2013	0.4%		2.0%	1.8%	American Community Survey
2a	l	Renters Spending 30% or More of Household Income on Rent, 2009-2013	43.8%		45.5%	37.0%	American Community Survey

TAB		Health Indicator	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
2b	a	Retail sales per capita, 2007	\$21,574		\$18,264	\$9,577	Business Quick Facts
2b	b	Total number of firms, 2007	997		3551	27,141	Business Quick Facts
2b	c	Unemployed Workers in Civilian Labor Force, 2014	2.4%		3.9%	2.7%	U.S. Bureau of Labor Statistics
2b	d	Private nonfarm employment, percent change, 2011-2012	0.7%		4.6%	5.3%	Business Quick Facts
2a	e	Households with No Car and Low Access to a Grocery Store, 2010	4.1%		NA	2.1%	U.S. Department of Agriculture - Food Environment Atlas
2b	f	Child Food Insecurity Rate, 2012	16.9%		22.5%	20.8%	Feeding America
2a	g	Grocery Store Density, 2011	0.1%		NA	0.4%	U.S. Department of Agriculture - Food Environment Atlas
2b	h	Low-Income and Low Access to a Grocery Store, 2010	14.9%		NA	15.4%	U.S. Department of Agriculture - Food Environment Atlas
2b	i	Low-Income Persons who are SNAP Participants, 2007	15.9%		NA	12.3%	U.S. Department of Agriculture - Food Environment Atlas
2b	j	Households without a Vehicle, 2009-2013	2.5%		5.3%	4.2%	American Community Survey
2b	k	Mean travel time to work (minutes), workers age 16+, 2008-2012	11.9		12.7	14	People Quick Facts
2b	l	Solo Drivers with a Long Commute, 2008-2012	8.0%		19.5%	12.2%	County Health Rankings
2b	m	Workers who Walk to Work, 2009-2013	5.1%		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	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
3 a	Students Eligible for the Free Lunch Program, 2011-2012	31.4%		38.9%	34.2%	National Center for Education Statistics
3 b	Poverty Status by School Enrollment, 2009-2013	5.3%		12.9%	12.6%	American Community Survey
3 c	Student-to-Teacher Ratio (% Student / Teacher), 2011-2012	7.0		13.0	9.4	National Center for Education Statistics
3 d	High School Graduation, 2013	93.6%		85.8%	84.6%	Annie E. Casey Foundation
3 e	Bachelor's degree or higher, percent of persons age 25+, 2008-2012	27.0%		32.1%	20.5%	People Quick Facts

#	Health Indicators	Brewster	Colby	Rexford
		USD #314	USD #315	USD #316
1	Total # Public School Nurses	1 Part-Time	1	1 Part-Time
2	School Nurse is part of the IEP team Yes/No	Y	Y	Y
3	School Wellness Plan (Active)	Y	Y	Y
4	VISION: # Screened / Referred to Prof / Seen by Professional	120 Screened; 3 Referred; 3 Seen	652 Screened; 34 Referred; 24 Seen	203 Screened; 6 Referred; 3 Seen
5	HEARING: # Screened / Referred to Prof / Seen by Professional	120 Screened; 2 Referred ; 2 Seen	705 Screened; 5 Referred; 2 Seen (others retested/passed)	203 Screened; 4 Referred; 4 Seen
6	ORAL HEALTH: # Screened / Referred to Prof / Seen by Professional	None	818 Screened; 60 Referred	None
7	SCOLIOSIS: # Screened / Referred to Prof / Seen by Professional	Not Required	Not Required	Not Required
8	# of Students served with no identified chronic health concerns	119 (122 Students)	675 (851 Students)	198 (203 Students)
9	School has a suicide prevention program	No	Yes	No
10	Compliance on required vaccinations (%)	95%	97%	95%

TAB 4 Maternal and Infant Health Profile

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

TAB	Criteria	THOMAS	TREND	KANSAS	NW Alliance 15
4	Total Live Births, 2008	108		41,815	1293
4	Total Live Births, 2009	108		41,388	1317
4	Total Live Births, 2010	115		40,439	1274
4	Total Live Births, 2011	99		39,628	1315
4	Total Live Births, 2012	118		40,304	1370
4	Total Live Births, 2008-2012 - Five year Rate (%)	14.1		14.5	138.5

TAB	Health Indicator	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
4 a	Percent of Births Where Prenatal Care began in First Trimester, 2011-2013	78.4%		78.4%	78.9%	Kansas Department of Health and Environment
4 b	Percentage of Premature Births, 2011-2013	10.2%		9.0%	8.9%	Kansas Department of Health and Environment
4 c	Percent of Births with Low Birth Weight, 2011-2013	7.0%		7.1%	7.6%	Kansas Department of Health and Environment
4 d	Percent of births Where Mother Smoked During Pregnancy, 2010-2012	NA		13.5%	NA	Kansas Department of Health and Environment
4 e	Percent of all Births Occurring to Teens (15-19), 2011-2013	11.4%		8.1%	7.6%	Kansas Department of Health and Environment
4 f	Percent of Births Occurring to Unmarried Women, 2011-2013	35.2%		36.7%	31.3%	Kansas Department of Health and Environment
4 g	Average Monthly WIC Participation per 1,000 population, 2013	19.6%		23.6%	20.9%	Kansas Department of Health and Environment
4 h	Percent of WIC Mothers Breastfeeding Exclusively, 2013	19.1%		12.9%	14.6%	Kansas Department of Health and Environment

TAB 5 Hospitalization/Provider Profile

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

# KS Hospital Assoc PO103		Thoms County IP			TREND
		FFY2012	FFY2013	FFY2014	
1	Total Discharges	938	892	964	
2	Total IP Discharges-Age 0-17 Ped	22	35	33	
3	Total IP Discharges-Age 18-44	68	70	84	
4	Total IP Discharges-Age 45-64	205	201	229	
5	Total IP Discharges-Age 65-74	126	135	117	
6	Total IP Discharges-Age 75+	275	248	235	
7	Psychiatric	22	17	17	
8	Obstetric	111	94	124	
9	Surgical %	26.2%	28.1%	28.3%	
# KS Hospital Assoc PO103		Citizens Medical Center Only			TREND
		FFY2012	FFY2013	FFY2014	
1	Total Discharges	410	386	478	
2	Total IP Discharges-Age 0-17 Ped	5	10	5	
3	Total IP Discharges-Age 18-44	17	14	39	
4	Total IP Discharges-Age 45-64	54	45	65	
5	Total IP Discharges-Age 65-74	45	39	33	
6	Total IP Discharges-Age 75+	135	150	146	
7	Psychiatric	8	4	4	
8	Obstetric	73	62	93	
9	Surgical %	5.9%	5.7%	10.9%	
#	Kansas Hospital AssocOP TOT223E	FFY2012	FFY2013	FFY2014	TREND
1	ER Market Share	82.1%	81.5%	83.6%	
2	OPS Market Share	48.0%	42.1%	59.2%	
3	Total OP Market Share	82.1%	81.5%	83.6%	

TAB	Health Indicator	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
5 a	Ratio of Population to Primary Care Physicians, 2013	3103		1816	2114	Kansas Department of Health and Environment
5 b	Staffed Hospital Bed Ratio (per 1,000 Pop), 2012	3.1%		3.4%	5.4%	Kansas Hospital Association
5 c	Percent of Births with Inadequate Birth Spacing, 2011-2013	8.0%		11.0%	10.8%	Kansas Department of Health and Environment
5 d	Preventable hospital stays	84		NA	64	County Health Rankings
5 e	Heart Disease Hospital Admission Rate, 2009-2011	224		300	262	Kansas Department of Health and Environment
5 f	Congestive Heart Failure Hospital Admission Rate, 2009-2011	230		199	191	Kansas Department of Health and Environment
5 g	Chronic Obstructive Pulmonary Disease (COPD) Hospital Admission Rate, 2009-2011	313		136	194	Kansas Department of Health and Environment
5 h	Bacterial Pneumonia Hospital Admission Rate, 2009-2011	453		269	488	Kansas Department of Health and Environment
5 i	Injury Hospital Admission Rate, 2009-2011	682		915	691	Kansas Department of Health and Environment

TAB 6 Social & Rehab Services Profile

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

TAB		Health Indicator	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
6	a	Depression: Medicare Population, 2012	13.0%		16.2%	15.2%	Centers for Medicare & Medicaid Services
6	b	Alcohol-Impaired Driving Deaths, 2008-2012	25.0%		34.7%	36.4%	County Health Rankings
6	d	Poor mental health days	2.5		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	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
7a	a	% of Adults with High Cholesterol, 2013	NA		38.1%	41.0%	Kansas Department of Health and Environment
7a	b	Adult obesity	31%		30%	30%	County Health Rankings
7a	c	Percent of Adults Who are Binge Drinkers, 2013	NA		15.4%	16.7%	Kansas Department of Health and Environment
7a	d	Percent of Adults Who Currently Smoke Cigarettes, 2013	NA		20.0%	21.9%	Kansas Department of Health and Environment
7a	e	% of Adults with Diagnosed Hypertension, 2013	NA		31.3%	31.7%	Kansas Department of Health and Environment
7a	f	% of Adults with Doctor Diagnosed Arthritis, 2013	NA		23.9%	23.3%	Kansas Department of Health and Environment
7a	g	% Physical inactivity	25.0%		NA	25.0%	County Health Rankings
7a	h	% of Adults with Fair or Poor Self-Perceived Health Status, 2013	NA		15.4%	12.4%	Kansas Department of Health and Environment
7a	i	Served Unaffected by SDWA Nitrate Violations, 2013	94.9%		99.7%	96.2%	Kansas Department of Health and Environment
7a	j	Sexually transmitted infections	227		NA	369	County Health Rankings

TAB 7 Health Risk Profiles

TAB		Health Indicator	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
7b	a	Hypertension: Medicare Population, 2012	54.5%		52.7%	55.2%	Centers for Medicare & Medicaid Services
7b	b	Hyperlipidemia: Medicare Population, 2012	42.6%		39.3%	38.1%	Centers for Medicare & Medicaid Services
7b	c	Rheumatoid Arthritis: Medicare Population, 2012	29.4%		27.7%	33.5%	Centers for Medicare & Medicaid Services
7b	d	Ischemic Heart Disease: Medicare Population, 2012	22.9%		26.7%	29.7%	Centers for Medicare & Medicaid Services
7b	e	Diabetes: Medicare Population, 2012	21.3%		24.6%	23.0%	Centers for Medicare & Medicaid Services
7b	f	Heart Failure: Medicare Population, 2012	17.5%		14.0%	18.3%	Centers for Medicare & Medicaid Services
7b	g	Chronic Kidney Disease: Medicare Population, 2012	10.2%		13.9%	13.1%	Centers for Medicare & Medicaid Services
7b	h	COPD: Medicare Population, 2012	12.8%		11.0%	12.9%	Centers for Medicare & Medicaid Services
7b	i	Alzheimer's Disease or Dementia: Medicare Pop 2012	8.2%		9.9%	10.6%	Centers for Medicare & Medicaid Services
7b	j	Atrial Fibrillation: Medicare Population, 2012	7.9%		8.0%	9.3%	Centers for Medicare & Medicaid Services
7b	k	Cancer: Medicare Population, 2012	7.7%		8.0%	9.1%	Centers for Medicare & Medicaid Services
7b	l	Osteoporosis: Medicare Population, 2012	6.3%		6.1%	8.2%	Centers for Medicare & Medicaid Services
7b	m	Asthma: Medicare Population, 2012	2.9%		3.8%	3.5%	Centers for Medicare & Medicaid Services
7b	n	Stroke: Medicare Population, 2012	3.2%		3.2%	2.6%	Centers for Medicare & Medicaid Services

TAB 8 Uninsured Profiles

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

TAB		Health Indicator	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
8	a	Uninsured Adult Population Rate, 2012	15.8%		17.6%	17.4%	U.S. Census Bureau

#	Citizens Medical Center	YR 2012	YR 2013	YR2014	TREND
1	Free Patient Care Given	\$407,528	\$516,143	\$629,693	
2	Bad Debt	\$701,623	\$1,000,295	\$1,072,340	

TAB 9 Mortality Profile

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

CTS	Causes of Death by County of Residence, KS 2012	THOMAS	TREND	KANSAS	NW Alliance 15
1	TOTAL	114		43262	2013
1	Major Cardiovascular Diseases	20		7,458	341
2	All Malignant Neoplasms	12		5,406	256
3	Diseases of Heart	16		5,314	259
4	All Other Causes	10		4,215	194
4	Ischemic Heart Disease	8		2,990	156
5	Other Heart Diseases	8		2,156	100
6	Malignant Neoplasms of Respiratory and Intrathoracic Organs	4		1,537	72
7	Chronic Lower Respiratory Diseases	10		1,680	75
8	Malignant Neoplasms of Digestive Organs	3		1,288	51
9	Other Malignant Neoplasms	1		1,145	48
10	Alzheimer's Disease	4		788	42
11	Cerebrovascular Diseases	3		1,331	53
12	Malignant Neoplasms of Breast	2		400	27
13	Motor Vehicle Accidents	1		410	33
14	Malignant Neoplasms of Genital Organs	1		500	24
15	Pneumonia and Influenza	0		621	37
16	Suicide	1		505	27

TAB	Health Indicator	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
9 a	Life Expectancy for Females, 2010	81		81	81	Institute for Health Metrics and Evaluation
9 b	Life Expectancy for Males, 2010	76		76	76	Institute for Health Metrics and Evaluation
9 c	Infant Mortality Rate, 2009-2013	14.6%		6.4%	10.7%	Kansas Department of Health and Environment
9 d	Age-adjusted Mortality Rate per 100,000 population, 2011-2013	638		757	740	Kansas Department of Health and Environment
9 e	Age-Adjusted Years of Potential Life Lost - Traffic Injury, 2011-2013	1961		490	1541	Kansas Department of Health and Environment
9 f	Age-adjusted Cancer Mortality Rate per 100,000 population, 2011-2013	123		166	148	Kansas Department of Health and Environment
9 g	Age-adjusted Heart Disease Mortality Rate per 100,000 population, 2011-2013	143		156	166	Kansas Department of Health and Environment
9 h	Age-adjusted Chronic Lower Respiratory Disease Mortality Rate per 100,000 population, 2009-2013	86		51	51	Kansas Department of Health and Environment
9 i	Age-adjusted Traffic Injury Mortality Rate per 100,000 population, 2011-2013	28		13	25	Kansas Department of Health and Environment
9 j	Age-adjusted Unintentional Injuries Mortality Rate per 100,000 population, 2011-2013	37		40	66	Kansas Department of Health and Environment
9 k	Age-adjusted Suicide Mortality Rate per 100,000 population, 2003-2013	28		15	14	Kansas Department of Health and Environment

TAB 10 Preventive Health Profile

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

TAB		Health Indicator	THOMAS CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
10	a	Access to Exercise Opportunities, 2014	75.0%		70.9%	51.3%	County Health Rankings
10	b	% of Infants Fully Immunized at 24 Mo, 2011-2013	76.2%		71.7%	78.6%	Kansas Department of Health and Environment
10	c	Immunized Against Influenza Past 12 Mo, 2013	NA		64.8%	64.9%	Kansas Department of Health and Environment
10	d	Percent of Adults Who Reported Consuming Fruit Less than 1 Time Per Day, 2013	NA		41.7%	48.3%	Kansas Department of Health and Environment
10	e	Percent of Adults Who Reported Consuming Vegetables Less than 1 Time Per Day, 2013	NA		22.9%	30.3%	Kansas Department of Health and Environment
10	f	Diabetic monitoring	88.0%		NA	86%	County Health Rankings
10	g	Mammography screening	47.6%		NA	64%	County Health Rankings
10	h	% Annual check-up visit with PCP	NA		NA	NA	TBD
10	i	% Annual check-up visit with Dentist	NA		NA	NA	TBD
10	j	% Annual check-up visit with Eye Doctor	NA		NA	NA	TBD

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

CHNA Round #2 Feedback 2015 - Community Feedback						
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
Thomas County N= 227	59	138	22	5	0	224
Top 2 Boxes (Very Good / Good)	87.9%					
NW Alliance (10) Totals	411	769	236	34	7	1457
Top 2 Boxes (Very Good / Good)	81.0%					

Questions 5 & 6- Community Ranking of Healthcare Services 2015

CHNA Round #2 Feedback 2015 - Community Feedback			
5. How would our community rate each of the following ?	NW Alliance (10) Lower 2 Box %	Thomas N= 227	TREND
Ambulance Services	3.7%	2.3%	
Child Care	18.9%	40.7%	
Chiropractors	5.8%	1.1%	
Dentists	13.8%	6.3%	
Emergency Room	4.3%	2.8%	
Eye Doctor / Optometrist	7.2%	1.1%	
Family Planning Services	15.7%	10.6%	
Home Health	15.0%	14.7%	
Hospice	9.2%	5.8%	
Inpatient Services	3.2%	3.5%	
Mental Health Services	26.2%	28.5%	
Nursing Home	12.5%	8.3%	
Outpatient Services	2.4%	1.1%	
Pharmacy	2.7%	0.6%	
Primary Care	5.1%	2.2%	
Public Health Dept.	2.4%	0.6%	
School Nurse	6.5%	3.5%	
Visiting Specialists	7.1%	3.5%	

Question 7- Receiving Healthcare Services Outside our Community

CHNA Round #2 Feedback 2015			
7. Over the past 2 years, did you or do you know someone who received health care services outside of our community?	NW Alliance (10)	Thomas CO N=227	TREND
Yes	84.1%	77.0%	
No	8.5%	14.6%	
Don't know	7.5%	8.4%	
TOTALS	100.0%	100.0%	

Question 8- Requested Discussion Items for Town Hall Agenda

CHNA Round #2 Feedback 2015 - Community Feedback			
8. Are there any other health needs that we need to discuss at our upcoming CHNA Town Hall meeting?	NW Alliance (10)	Thomas CO N=227	TREND
Abuse / Violence	4.8%	4.3%	
Alcohol	5.1%	3.6%	
Cancer	5.7%	6.6%	
Diabetes	4.9%	5.2%	
Drugs / Substance Abuse	7.8%	7.1%	
Family Planning	2.8%	2.4%	
Heart Disease	4.0%	3.9%	
Lead Exposure	0.7%	0.2%	
Mental Illness	6.8%	7.4%	
Nutrition	5.1%	4.5%	
Obesity	7.7%	8.1%	
Ozone (Air)	0.9%	0.4%	
Physical Exercise	6.2%	6.3%	
Poverty	4.3%	4.1%	
Respiratory Disease	2.7%	2.5%	
Sexual Transmitted Diseases	2.0%	2.8%	
Suicide	3.7%	3.2%	
Teen Pregnancy	4.1%	6.7%	
Tobacco Use	4.4%	5.2%	
Vaccinations	5.3%	5.2%	
Water Quality	4.0%	2.6%	
Wellness Education	6.0%	6.6%	
Some Other Need (please specify below)	0.8%	1.0%	
TOTAL	100.0%	100.0%	

IV. Inventory of Community Health Resources

[VVV Research & Development, LLC]

YR 2015 Inventory of Health Services - Thomas County, KS

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

YR 2015 Inventory of Health Services - Thomas County, KS

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

YR 2015 Physician Manpower - Thomas County, KS			
# of FTE Providers	Supply Working in County		
	FTE County Based	FTE Visting	PA/NP
Primary Care:			
Family Practice	6.4	0.0	6.8
Internal Medicine	0.0	0.0	0.0
Obstetrics/Gynecology	0.0	0.1	0.0
Pediatrics	0.0	0.0	0.0
Medicine Specialists:			
Allergy/Immunology	0.0	0.1	
Cardiology	0.0	0.2	
Dermatology	0.2	0.0	
Endocrinology	0.0	0.0	
Gastroenterology	0.0	0.2	
Oncology/Rado	0.0	0.1	
Infectious Diseases	0.0	0.0	
Nephrology	0.0	0.0	
Neurology	0.0	0.1	
Podiatry	0.0	0.1	
Psychiatry	0.0	0.0	
Pulmonary	0.0	0.1	
Rheumatology	0.0	0.1	
Surgery Specialists:			
General Surgery	1.0	0.1	
Neurosurgery	0.0	0.0	
Ophthalmology	0.0	0.1	
Orthopedics	0.0	0.5	
Otolaryngology (ENT)	0.0	0.1	
Plastic/Reconstructive	0.0	0.1	
Thoracic/Cardiovascular/Vasc	0.0	0.1	
Urology	0.0	0.1	
Hospital Based:			
Anesthesia/Pain	0.0	0.0	1.0
Emergency	0.0	0.0	1.0
Radiology	0.0	0.0	0.2
Pathology	0.0	0.0	
Hospitalist *	0.0	0.0	
Neonatal/Perinatal	0.0	0.0	
Physical Medicine/Rehab	0.0	0.0	
TOTALS	7.6	2.2	9.0

Outreach Visiting Clinics -Thomas County KS

SPECIALTY - DR. NAME, CITY, STATE	SCHEDULE	CONTACT FOR APPOINTMENT	LOCATION OF OUTREACH CLINIC
Allergy - Dr. Michael Volz Greenwood Village, CO	Twice a Month	Doctors OFC Does Their Own Scheduling 720-488-9280	Citizens Medical Center 100 E College Dr
Cardiology - Dr. Christine Fisher Hays, KS	Twice a Month	Doctors OFC Does Their Own Scheduling 888-625-4699 785-625-4699	Citizens Medical Center 100 E College Dr
Cardiology - Dr. Steven Freeman Hays, KS	Monthly	Doctors OFC Does Their Own Scheduling 888-625-4699 785-625-4699	Citizens Medical Center 100 E College Dr
General Surgeon - Dr Charles Frankum Denver, CO	Twice a Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Gastroenterology - Dr. Jeffrey Huston Denver, CO	Four Times a Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Gynecology - Dr. David Forschner Denver, CO	Every Other Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Hematology/Oncology - Dr. January Fields Hays, KS	Twice a Month	Doctors OFC Does Their Own Scheduling 785-623-5774	Citizens Medical Center 100 E College Dr
Neurology - Dr. Khoi Pham Parker, CO	Twice a Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Ophthalmology - Dr. William Clifford Garden City, KS	Twice a Month	Doctors OFC Does Their Own Scheduling 800-526-3937 620-275-7248	Citizens Medical Center 100 E College Dr
Orthopedic - Hays Orthopedic Dr. Sukchan Lee Hays, KS	Twice a Month	Doctors OFC Does Their Own Scheduling 866-428-8221 785-628-8221	Citizens Medical Center 100 E College Dr
Orthopedic - Hays Orthopedic Dr. Sharma Hays, KS	Once a Month	Doctors OFC Does Their Own Scheduling 866-428-8221 785-628-8221	Citizens Medical Center 100 E College Dr
Orthopedic - Western Orthopedic Dr. Rajesh Bazaz Denver, CO	Once a Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Orthopedic - Western Orthopedic Dr. Timothy Birney Denver, CO	Once a Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Orthopedic - Western Orthopedic Dr. Admodios Hatzidakis Denver, CO	Every Other Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Orthopedic - Western Orthopedic Dr. James Holmes Denver, CO	Once a Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Orthopedic - Western Orthopedic Dr. Thomas Mordick Denver, CO	Once a Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr

Outreach Visiting Clinics -Thomas County KS

SPECIALTY - DR. NAME, CITY, STATE	SCHEDULE	CONTACT FOR APPOINTMENT	LOCATION OF OUTREACH CLINIC
Orthopedic - Western Orthopedic Dr. Kevin Nagamani Denver, CO	Once a Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Orthopedic - Western Orthopedic Dr. Benjamin Sears Denver, CO	Every Other Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Otolaryngology (E/N/T) - Dr. Jerold Cossette Salina, KS	Every Other Month	Doctors OFC Does Their Own Scheduling 785-823-7225	Citizens Medical Center 100 E College Dr
Plastic Surgery - Dr. Conrad Tirre Denver, CO	Once a Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Podiatry - Dr. Steven Larsen Hays, KS	Once a Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Podiatry - Dr. James Reeves Lawrence, KS	Once a Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Pulmonary - Dr. Majd Kobitary Denver, CO	Once a Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Rheumatology - Dr. David Korman Denver, CO	Every Other Month	Citizens Medical Center 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr
Urology - Dr. Faris Azzouni Hays, KS	Once a Month	Doctors OFC Does Their Own Scheduling 785-628-6014	Citizens Medical Center 100 E College Dr
Vascular - Dr. Stephen Annest Denver, CO	Once a Month	Doctors OFC Does Their Own Scheduling 888-626-2657 303-539-0736	Citizens Medical Center 100 E College Dr
Sleep Studies - Somnograph Wichita, KS	Two/Three Times per Week	Patient's Primary Care Physician Will Call Citizens Medical Center to Schedule 785-460-1223 785-462-7511	Citizens Medical Center 100 E College Dr

Thomas County Area Health Services Directory

Emergency Numbers

Police/Sheriff	911
Fire	911
Ambulance	911

Non-Emergency Numbers

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

Municipal Non-Emergency Numbers

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

Other Emergency Numbers

Kansas Child/Adult Abuse and Neglect Hotline

1-800-922-5330

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

Domestic Violence Hotline

1-800-799-7233

www.ndvh.org

Emergency Management (Topeka)

785-274-1409

http://www.kansastag.gov/kdem_default.asp

Federal Bureau of Investigation

1-866-483-5137

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

Kansas Arson/Crime Hotline

1-800-KS-CRIME

1-800-572-1763

www.accesskansas.org/kbi

Kansas Bureau of Investigation (Topeka)

785-296-8200

www.accesskansas.org/kbi

Kansas Crisis Hotline (Domestic Violence/Sexual Assault)

1-888-363-2287

www.kcsdv.org

Kansas Road Conditions

1-866-511-KDOT, 511

785-871-1515 (Main Office)

www.ksdot.org

Poison Control Center

1-800-222-1222

www.aapcc.org

Suicide Prevention Hotline

1-800-784-2433

www.hopeline.com

1-800-273-TALK

www.suicidepreventionlifeline.com

m

Toxic Chemical and Oil Spills

1-800-424-8802

<http://www2.epa.gov/home/report-spills-and-environmental-violations#who>

Health Services

Hospitals

Citizens Medical Center, Inc.

100 East College Drive (Colby)

785-462-7511

www.nwkshealthcare.com

Citizens Medical Center, Inc.

(CMCI) Services include:

Anesthesia

- Epidural Anesthesia

Cardiopulmonary

- Pulmonary Rehabilitation
- Cardiac Rehabilitation

Education

- Childbirth Classes
- Diabetes Education
- Chronic Disease Self-Management

Emergency Department

Foundation

- Citizens Foundation

Laboratory

Long Term Care

- Prairie Senior Living Complex (PSLC)
- Nursing Services
 - Swing Bed Nursing
- Nutrition Counseling (Including Diabetes and Obesity)
- Pharmacy
- Primary Care
 - Family Center for Health Care (FCHC)
- Radiology
- Specialty Clinics
- Social Services
 - Serenity Room (end of life care)
- Rehabilitation Services
 - Adult and Pediatric Speech Therapy
 - Occupational Therapy
 - Physical Therapy
 - Women's Health
- General Surgical Services

Health Department

Thomas County Health Department

350 South Range Avenue, Ste. 2
(Colby)
785-460-4596
<http://thomascountyks.com/Departments/HealthDepartment/tabid/7879/Default.aspx>

Thomas County Health Department Services include:

- Immunizations
- Physicals
- Family Planning
- Maternal and Child Program
- TB Skin Tests
- TB Treatment
- Lab Testing
- Certified Lactation Consultant
- Disease Investigation

Breastfeeding Boutique (Open M-F 8:00am to 5:00pm)
WIC 1-800-899-4892

Mental Health

High Plains Mental Health Center Colby Branch

750 South Range Avenue (Colby)
785-462-6774 785-628-2871 24 Hour
www.highplainsmentalhealth.com

Turning Point (Colby)

Bill Davis, LPC, LCAC; Jaime Kinderknecht, LCPC; Megan Briggs, MSW, LSCSW
866-463-2679

Heartland Rural Counseling Services

Elaine Ptacek, LCPC; Amanda Lanning, LMSW and Carla Sloan-Brown, TLMLP
485 W 4th St (Colby)
785-460-7588

Meier New Life Clinic

Angie Witman, LPC & LCMFT
CMC Specialty Clinic
100 E. College Drive (Colby)
888-725-4642
www.meierclinics.com/Colby

New Beginnings (Colby)

Doug Finley, LSCSW
785-462-3308

Action Potential Counseling (Colby)

Ryan Hale, Psychology Instructor and Counselor
785-460-5544

Medical Professionals

Chiropractors

Duffey Chiropractic Care, Inc.
320 North Lake Avenue (Colby)
785-460-3224

Franz & Tubbs Chiropractic
135 West 6th Street Suite 4
(Colby)
785-462-7236

**Northwest Kansas
Chiropractic**
**Drs. Eric & Amanda Griggs, &
Dr Mark Gundlach**
770 South Range Avenue, Suite 4
(Colby)
785-460-0332

Specialty Clinics

**Citizens Medical Center
Specialty Clinic**
100 East College Drive (Colby)
785-460-1215

Dentists

Thomas J. Barlow
505 North Franklin Avenue, Suite
H (Colby)
785-460-7538

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

Scott G. Haas, DDS
770 South Range Avenue (Colby)
785-460-3922

Rawlins County Dental Clinic
707 Grant St., Ste. 1 (Atwood)

(Accepts KanCare(Medicaid))
785-626-8290

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

Optometrists

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

Vision Source
1005 South Range Avenue
(Colby)
785-462-8231
[http://eyeclinic.com/hours-and-
location/main-office-location](http://eyeclinic.com/hours-and-location/main-office-location)

Hearing

**Northwest Kansas Hearing
Services, Inc**
175 S Range (Colby)
785-460-2957
<http://colbyhearingervices.com/>

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

Pharmacies

Dillons
1605 South Range Avenue
(Colby)
785-462-1310
www.kroger.com

Palace Drug Store
460 North Franklin Avenue
(Colby)
785-460-7507
www.palacedrugstore.com

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

Physicians

Colby Medical Services
1005 S. Range Avenue, Ste 200
(Colby)
785-462-3332
Amanda Reid, PA
Carl Woofter, PA
Dr. John Herscher, DO
Deanna Sulzman, APRN

Family Center for Health Care
310 East College Drive (Colby)
785-462-6184
Dr. Bruce Kellogg
Dr. Dan Kuhlman
Dr. Darren Matchell
Dr. John Dygert
Dr. Kara Kuhlman
Dr. Kelly Gabel
Dr. Sarah Gabel
Tina Benson, APRN
Tricia Carney, APRN
Luetta Flanagan, APRN
Jenny Niblock, APRN
Brandon Bailey, APRN
John Paterson, APRN
Jennifer Haag, PA-C
Brian Unruh, PA-C

Rehabilitation Services **(physical, occupational and** **speech therapies)**

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

**Good Samaritan Society of
NW Kansas**
(Home Care-PT, OT, Speech)
820 S. Denison St. (St. Francis)
785-332-3588

**Northwest Kansas
Educational Service Center**
(Home Care-PT, OT, Speech)
703 W. 2nd (Oakley)
785-672-3125

**Tina Harris Physical Therapy
& Sports Medicine Center**
270 North Franklin Avenue
(Colby)
785-462-8008

Other Health Care Services

Assisted Living/Nursing Homes/LTC

Deseret Health & Rehab
105 East College Drive (Colby)
785-462-6721

Fairview Estates
1630 Sewell Avenue (Colby)
785-462-6721

Prairie Senior Living Complex
1625 South Franklin Avenue
(Colby)
785-462-8295
www.nwkshealthcare.com

Diabetes

**Citizens Medical Center
Certified Diabetes Educator**
100 E. College Drive (Colby)
785-460-1237

Disability Services

LINK (ages 16-60) (Hays)
1-800-569-5926; 1-785-625-6942
<http://linkinc.org/>

SKIL of Western Kansas
(Hays)
<http://skilonline.com/>
1-800-316-8019

Kansas Department of Children and Families
1135 S. Country Club Drive
(Colby)
785-462-6769
<http://www.dcf.ks.gov/services/Pages/DCFOfficeLocatorMap.aspx>

Kansas Department on Aging & Disability (Hays)
1-800-432-7422
www.kdads.ks.gov

Home Health

Good Samaritan Society of NW Kansas
820 S. Denison St. (St. Francis)
785-332-3588

Goodland Home Health
677 E 22nd St (Goodland)
785-890-7658

L&C Home Health Agency
1175 S Range Ave, Ste 1, Box 5
(Colby)
785-465-7444

Hospice

Hospice Services, Inc.
438 N Franklin Avenue (Colby)
785-462-6710, 800-315-5122

Serenity Room
Citizens Medical Center, Inc.
(Colby)
785-462-7511

Medical Equipment and Supplies

VFW Post 6882 (Wheel Chairs and Walkers)
220 N Lake Avenue (Colby)
460-7275- Dale Deaver

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

Dillons (Durable Medical Equipment)
462-1310

Wal-Mart (Durable Medical Equipment)
462-8651

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

Size-wise (Bariatric Equipment)
210 Jefferson St, PO Box 320
(Ellis)
1-814-9389

Apria Healthcare (Oxygen Only)
1255 South Country Club Drive
(Colby)
785-462-8661
www.apria.com

Senior Services

Brewster Senior Center

327 Kansas Avenue (Brewster)
785-694-2645

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

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

Government Health Care Services

Kansas Department on Aging & Disabilities

503 South Kansas Avenue
(Topeka)
785-296-4986 or 1-800-432-3535
www.kdads.ks.gov

Kansas Department of Health & Environment (KDHE)

Curtis State Office Building
1000 South West Jackson
(Topeka)
785-296-1500
www.kdheks.gov/contact.html

KanCare(Medicaid)

900 SW Jackson, Suite 900 N
(Topeka)
1-866-305-5147
www.kancare.ks.gov

KanCare Health Plans:
Amerigroup: 800-600-4441, TTY: 800-855-2880
Sunflower: 877-644-4623,
TTY: 888-282-6428
United Healthcare: 877-542-9238, TTY: #711

Senior Health Insurance Counseling for Kansas
(SHICK)

NW Kansas Dept for Aging & Disability Services
510 West 29th, Suite B (Hays)
785-628-8204 800-432-7422

Healthcare Navigator

NW Kansas Dept for Aging & Disability Services
510 West 29th, Suite B (Hays)
785-628-8204; 800-432-7422
<https://www.healthcare.gov/glossary/navigator/>

Healthcare Navigators are individuals or organizations trained and able to help consumers, small businesses, and employees look for health coverage options through the Marketplace, including completing eligibility/enrollment forms. These individuals and organizations are required to be unbiased. Their services are free to consumers.

MEDICARE

Social Security Administration
1212 East 27th Street (Hays)
888-552-7176

Kansas Department of Children and Families

1135 S Country Club Drive Suite 1 (Colby)
785-462-6760; TTY/TDD 1-800-766-3777

Social Security Administration

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

Veteran's Affairs

990 S. Range Avenue (Colby)
785-462-3572

<http://kcva.ks.gov/veteran-services/>

Local Government, Community, and Social Services

Adult Protection

Kansas Department of Aging & Disability Services
1-800-922-5330
<http://www.kdads.ks.gov/LongTermCare/SCC/hotlines.html>

Elder Abuse Hotline
1-800-842-0078
suspectedcrime@aging.ks.gov

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

Alcohol and Drug Treatment

Thomas County ADAC
990 S Range, Ste 2B (Colby)
785-462-6111
(Call for local AA, AL-ANON and NA meetings)

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

Child Protection

Kansas Department of Children and Families Services Western Region Protection Reporting Center
1-800-922-5330

Available 24 hours/7 days per week

Children and Youth

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

Kansas Children's Service League
1-800-332-6378
<https://www.kcsl.org/>

Community Assistance

Salvation Army:
Emergency Assistance/Vision USA
785-460-7511 (Colby)

Community Centers

Colby Bowl & Fun Center
1175 South Range Avenue
(Colby)
785-460-2672

Crime Prevention

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

Colby Police Department
225 North Court Avenue (Colby)
785-460-4460

Day Care Providers-Children

Child Care Aware of Northwest Kansas (Provides list of providers in area)
1255 South Range Avenue
(Colby)

785-460-5482; 1-877-678-2548

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

Employment/Job Services

Colby Work Force Center
350 S Range (Colby)
785-462-2024

Extension Office

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

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

Domestic/Family Violence

Child/Adult Abuse Hotline
1-800-922-5330
[www.dcf.ks.gov/Pages/Report-
Abuse-or-Neglect.aspx](http://www.dcf.ks.gov/Pages/Report-Abuse-or-Neglect.aspx)

**Options Domestic & Sexual
Violence Services**
475 ½ Chick (Colby)
785-460-1982; 1-800-794-4624
24 Hour
<http://www.help4abuse.org/>

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

Food Programs

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

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

Prairie Land Food
Linda Hagan
800-298-1989
<http://www.prairielandfood.com>

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

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

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

Funeral Homes

Baalmann Mortuary
190 South Franklin Avenue
(Colby)
785-462-2331
www.baalmannmortuary.com
**Kersenbrock Funeral Chapel
Inc**
745 South Country Club Drive
(Colby)

785-462-7979
[www.kersenbrockfuneralchapel.c](http://www.kersenbrockfuneralchapel.com)

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Head Start

Head Start NKESC

210 North Grant Avenue (Colby)
785-462-6067
www.nkesc.org/vnews/display.v/SEC/Head%20Start

Early Head Start NKESC

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

Health and Fitness Centers

Citizens Medical Center

100 E. College Drive (Colby)
785-460-4868

Colby Community College

1255 S. Range Avenue (Colby)
785-462-3984

Colby Recreation Department

285 E. Fifth Street (Colby)
785-460-4440

Crossfit Colby

200 N Franklin Ave (Colby)
785-460-0361
<http://crossfitcolby.com/>

Jump Start Fitness Center

415 North Franklin Avenue
(Colby)
785-460-5867

The Movement Connection

430 North Franklin Avenue
(Colby)
785-462-2044

Housing

Colby Housing Authority

600 South Mission Ridge Avenue
(Colby)
785-460-6763
www.colbyhousingauthority.com

Legal Services

Barrett Law Firm

280 N. Court Avenue; P. O. Box
544 (Colby)
785-460-0188

Berens Law Firm

410 N. Franklin Avenue (Colby)
785-462-2266

John D. Gatz

505 North Franklin Avenue, Suite
A (Colby)
785-460-3383

Kansas Legal Services

1-800-723-6953

Lindsey Moore

505 N Franklin Ave (Colby)
785-460-3383

Alwin Legal Services

PO Box 87 (Brewster)
785-269-7603

Legal Aide Society

1401 B Main (Hays)
785-625-4514
<http://kansaslegalservices.org>

Ronald Shalz

1480 W. 4th Street (Colby)
785-462-6736

Stramel Law Firm

480 N. Franklin Ave (Colby)

785-460-3222

Pregnancy Services

Emergency Pregnancy Services & Natural Family Planning

350 S. Range Ave, Ste 3 (Colby)
785-462-3022

Kansas Children's Service League

877-530-5275
www.kcsl.org

Prenatal Classes
Citizens Medical Center, Inc.
785-462-4850

Public Information

Colby Visitors Center
2015 S Range Ave (Colby)
785-460-0076
<http://oasisontheplains.com/>

City of Colby
785-460-4400
www.cityofcolby.com

Colby Convention & Visitors
Bureau
350 S Range Ave, Suite 10
(Colby)
785-460-7643
<http://oasisontheplains.com/>

Thomas County Courthouse
300 North Court Avenue (Colby)
785-460-4500
<http://thomascountyks.com/>

Rape

**Options Domestic & Sexual
Violence Services**

475 ½ Chick (Colby)
785-460-1982; 1-800-794-4624

24 Hour

<http://www.help4abuse.org/>

Domestic Violence and Rape Hotline

1-888-874-1499

Family Crisis Center
1806 12th Street (Great Bend)
785-793-1885

Kansas Crisis Hotline
785-539-7935
1-800-727-2785

Social Security

**Social Security
Administration**
888-552-7176 (Hays- serves
Colby/ Thomas County)
www.ssa.gov

Transportation

Colby Cab
785-462-TAXI (-8294)

**General Public
Transportation**
165 Fike Park Street (Colby)
785-443-9208; 785-460-4500

Veterinary Services

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

Swartz Veterinary Hospital
1775 West 4th Street (Colby)
785-460-1078

State and National Information, Services, Support

Adult Protection

Adult Protection Services

1-800-922-5330

<http://www.dcf.ks.gov/services/PS/Pages/APS/AdultProtectiveServices.aspx>

Domestic Violence and Sexual Assault (DVACK)

1-800-874-1499

www.dvack.org

Elder Abuse Hotline

1-800-842-0078

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

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

Sexual Assault and Domestic Violence Crisis Line

1-800-701-3630

Kansas Department of Children and Families

1-888-369-4777 (Hays)

www.dcf.ks.gov

Suicide Prevention Helpline

785-841-2345

Alcohol and Drug Treatment Programs

A 1 A Detox Treatment

1-800-757-0771

Abandon A Addiction

1-800-405-4810

Able Detox-Rehab Treatment

1-800-577-2481

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

1-800-ALCOHOL

**Alcohol and Drug Addiction
Treatment Programs**

1-800-510-9435

Alcohol and Drug Helpline

1-800-821-4357

Alcoholism/Drug Addiction

Treatment Center

1-800-477-3447

**Kansas Alcohol and Drug
Abuse Services Hotline**

1-800-586-3690

www.dcf.ks.org

Mothers Against Drunk

Driving

1-800-GET-MADD (438-6233)

www.madd.org

**National Council on
Alcoholism & Drug
Dependence, Inc.**

1-800-622-2255

www.ncadd.org

Recovery Connection

1-800-993-3869

www.recoveryconnection.org

**Regional Prevention Centers
of Kansas**

1-800-757-2180 (Hays)

www.smokyhillfoundation.com/rp-c-locate.html

Children and Youth

Adoption

1-800-862-3678

www.adopt.org/

**Boys and Girls Town National
Hotline**

1-800-448-3000

www.girlsandboystown.org

**Child/Adult Abuse and
Neglect Hotline**

1-800-922-5330

www.dcf.ks.gov/Pages/Report-Abuse-or-Neglect.aspx

Child Abuse National Hotline

1-800-422-4453

1-800-222-4453 (TDD)

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

1-800-922-5330

KanCare (Medicaid)

105 W 13th (Hays)

785-621-5147; 785-259-8614

bney@kdheks.gov 1-800-792-

4884

1-800-792-4292 (TTY)

Heartspring (Institute of Logopedics)

8700 E. 29TH N, Wichita, KS
67226
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, KS 67202
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

1-800-345-5044
www.parentsanonymous.org/palindex10.html

Runaway Line

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

Talking Books

1-800-362-0699
www.skyways.lib.ks.us/KSL/talking/ksl_bph.html

Community Action

Peace Corps

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

Public Affairs Hotline (Kansas Corporation Commission)

1-800-662-0027
www.kcc.state.ks.us

Counseling

Care Counseling

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

Castlewood Treatment Center for Eating Disorders

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

Catholic Charities

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

Central Kansas Mental Health Center

1-800-794-8281

Consumer Credit Counseling Services

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

**Kansas Problem Gambling
Hotline**
1-866-662-3800
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

Self-Help Network of Kansas
1-800-445-0116
www.selfhelpnetwork.wichita.edu

**Senior Health Insurance
Counseling for Kansas
(SHICK)**
1-800-860-5260
www.kdads.ks.gov/SHICK/psa_list_3.html

**Sunflower Family Services,
Inc.**
(adoption, crisis pregnancy,
conflict solution center)
1-877-457-5437
www.sunflowerfamily.org

WINGS Upon the Prairie
485 N Franklin (Colby)
785-460-7477

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

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

**Hearing Healthcare
Associates**
1-800-448-0215

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

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

**National Center for Learning
Disabilities**

1-888-575-7373
www.ncl.org

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

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)
<http://www.fda.gov/Food/>

**US Consumer Product Safety
Commission**
1-800-638-2772; 1-800-638-8270
(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

Poison Hotline
1-800-222-1222

Health Services

American Cancer Society
1-800-227-2345
www.cancer.org

**American Diabetes
Association**
1-800-DIABETES (342-2383)
www.diabetes.org

**AIDS/HIV Center for Disease
Control and Prevention**
1-800-CDC-INFO ; 1-888-232-
6348 (TTY)
www.cdc.gov/hiv/

AIDS/STD National Hot Line
1-800-342-AIDS; 1-800-227-8922
(STD line)

**American Health Assistance
Foundation**
1-800-437-2423
www.ahaf.org

American Heart Association
1-800-242-8721
www.americanheart.org

American Lung Association
1-800-586-4872
www.lung.org

American Stroke Association
1-888-4-STROKE
www.americanheart.org

**Center for Disease Control
and Prevention**

1-800-CDC-INFO ; 1-888-232-6348 (TTY)

www.cdc.gov/hiv/

Early Detection Works

Education, screening, diagnosis, case management, and referral for cancer treatment.

877-275-5302

www.kdheks.gov/edw/about.htm

Elder Care Helpline

www.eldercarelink.com

Eye Care Council

1-800-960-EYES

www.seetolearn.com

Kansas Foundation for Medical Care

1-800-432-0407

www.kfmc.org

National Health Information Center

1-800-336-4797

www.health.gov/nhic

National Cancer Information Center

1-800-227-2345; 1-866-228-4327 (TTY)

www.cancer.org

National Institute on Deafness and Other Communication Disorders Information

1-800-241-1044; 1-800-241-1055 (TTY)

www.nidcd.nih.gov

Hospice

Hospice-Kansas Association

1-800-767-4965

Kansas Hospice and Palliative Care Organization

1-888-202-5433

www.lifeproject.org/akh.htm

Housing

Kansas Housing Resources Corporation

785-296-2065

www.housingcorp.org

US Department of Housing and Urban Development

Kansas Regional Office

913-551-5462

www.hud.gov

Legal Services

Kansas Attorney General

1-800-432-2310 (Consumer Protection)

1-800-828-9745 (Crime Victims' Rights)

1-800-766-3777 (TTY)

www.ksag.org/

Kansas Bar Association

785-234-5696

www.ksbar.org

Kansas Department on Aging

1-800-432-3535

www.agingkansas.org/index.htm

Kansas Legal Services

1-800-723-6953

www.kansaslegalservices.org

Northwest Kansas Area Agency on Aging

510 W 29th Street, Suite B (Hays)

785-628-8204

800-432-7422

www.nwkaaa.com

Medicaid/Medicare Services

KanCare(Medicaid)

900 SW Jackson, Suite 900 N
(Topeka)
1-866-305-5147
www.kancare.ks.gov

KanCare Health Plans:
Amerigroup: 800-600-4441, TTY: 800-855-2880
Sunflower: 877-644-4623, TTY: 888-282-6428
United Healthcare: 877-542-9238, TTY: #711

Medicare Information

1-800-MEDICARE
www.medicare.gov

U.S. Department of Health and Human Services

Centers for Medicare and Medicaid Services
1-800-MEDICARE (1-800-633-4227) or 1-877-486-2048 (TTY)
www.cms.hhs.gov

Senior Health Insurance Counseling for Kansas

(SHICK)
Northwest Kansas Department for Aging and Disability Services
510 West 29th, Suite B (Hays)
785-628-8204 800-432-7422

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.htm

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National Mental Health Association

1-800-969-6642; 1-800-433-5959 (TTY)

www.nmha.org

State Mental Health Agency

Kansas Department of Children and Families
915 SW Harrison Street (Topeka)
785-296-3959
www.dcf.ks.gov

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

1-800-366-1655

Department of Human Nutrition

Kansas State University

119 Justin Hall (Manhattan)

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 Children
and Families

1-888-369-4777 or Local SRS

office

www.dcf.ks.gov

Kansas Department of Health and Environment

1000 SW Jackson, Suite 220

(Topeka)

785-296-1320

[www.kdheks.gov/news-
wic/index.html](http://www.kdheks.gov/news-wic/index.html)

Road and Weather Conditions

Kansas Road Conditions

1-866-511-KDOT

www.ksdot.org

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

1-888-687-2277

www.aarp.org

Area Agency on Aging

1-800-432-2703

Eldercare Locator

1-800-677-1116

[www.eldercare.gov/eldercare/pub
lic/home.asp](http://www.eldercare.gov/eldercare/public/home.asp)

Home Buddy

1-866-922-8339

www.homebuddy.org

Home Health Complaints

Kansas Department of Children &
Families

1-800-842-0078

www.dcf.ks.gov

Kansas Advocates for Better Care Inc.

1-800-525-1782

www.kabc.org

Kansas Department for Aging & Disability Services

1-800-432-3535 or 785-291-3167
(TTY)

www.kdads.ks.gov

**Kansas Foundation for
Medical Care, Inc.**

Medicare Beneficiary Information
1-800-432-0407

www.kfmc.org

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

1-800-742-9531

**Older Kansans Information
Reference Sources on Aging
(OKIRSA)**

1-800-432-3535

**Senior Health Insurance
Counseling for Kansas
(SHICK)**

1-800-860-5260

www.kdads.ks.gov/SHICK/psa_list_3.html

**Kansas Department for Aging
& Disability Services**

785-296-3959 or 785-296-1491

(TTY)

www.kdads.ks.gov

Suicide Prevention

Suicide Prevention Services

1-800-784-2433

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

Veterans Administration

**Veterans Administration
Benefits**

1-800-669-8477

**Benefits Information and
Assistance**

1-800-827-1000

Debt Management

1-800-827-0648

**Life Insurance Information
and Service**

1-800-669-8477

Welfare Fraud Hotline

Welfare Fraud Hotline

1-800-432-3913

V. Detail Exhibits

[VVV Research & Development, LLC]

Patient Origin & Access

[VWV Research & Development, LLC]

#	KS Hospital Assoc PO103	Thoms County, KS IP			TREND
		FFY2012	FFY2013	FFY2014	
1	Total Discharges	938	892	964	
2	Total IP Discharges-Age 0-17 Ped	22	35	33	
3	Total IP Discharges-Age 18-44	68	70	84	
4	Total IP Discharges-Age 45-64	205	201	229	
5	Total IP Discharges-Age 65-74	126	135	117	
6	Total IP Discharges-Age 75+	275	248	235	
7	Psychiatric	22	17	17	
8	Obstetric	111	94	124	
9	Surgical %	26.2%	28.1%	28.3%	
#	KS Hospital Assoc PO103	Citizens Memorial Medical Center, Inc.			TREND
		FFY2012	FFY2013	FFY2014	
1	Total Discharges	410	386	478	
2	Total IP Discharges-Age 0-17 Ped	5	10	5	
3	Total IP Discharges-Age 18-44	17	14	39	
4	Total IP Discharges-Age 45-64	54	45	65	
5	Total IP Discharges-Age 65-74	45	39	33	
6	Total IP Discharges-Age 75+	135	150	146	
7	Psychiatric	8	4	4	
8	Obstetric	73	62	93	
9	Surgical %	5.9%	5.7%	10.9%	
#	Kansas Hospital Assoc OP TOT223E	FFY2012	FFY2013	FFY2014	TREND
1	ER Market Share	82.1%	81.5%	83.6%	
2	OPS Market Share	48.0%	42.1%	59.2%	
3	Total OP Market Share	82.1%	81.5%	83.6%	

Town Hall Attendees Notes & Feedback

[VVV Research & Development, LLC]

Thomas County, KS Town Hall Roster N=29

Date: 05/21/15

First	Last	Organization	Address
Gary	Adrian		585 N. Franklin, Colby, KS 67701
Mike	Baughn		
Megan	Carmichael		
Sue	Draper		148 S. Adams, Colby, KS 67701
Pat	Erickson		
Patsy	Evans		100 E. College Dr., Colby, KS 67701
Brette	Hankin		
Joe	Hickert		1275 S. Franklin Ave., Colby, KS 67701
AJ	Hurst		100 E. College Dr., Colby, KS 67701
Virgil	Jones		1155 Wheatridge, Colby, KS 67701
Kelly	Kriegshauser		100 E. College Dr., Colby, KS 67701
Dan	Kuhlman		310 E. College Dr., Colby, KS 67701
Ken	Loos	High Plains MHC	208 E 7th St, Hays, KS
Jenny	Niblock		100 E. College Dr., Colby, KS 67701
Kasiah	Rothchild		350 S. Range Ave., Ste. 2, Colby, KS 67701
Janet	Saddler		100 E. College Dr., Colby, KS 67701
Paul	Steele		965 Prairie View Drive, Colby, KS 67701
Greg	Unruh		100 E. College Dr., Colby, KS 67701
Pam	Urrub		865 N Thompson, 67701
Melany	Wilks	Pioneer Memorial Library	285 N Garfield, Colby, KS 67701
Jeanene	Brown	CMCI	1070 W 3rd St, Colby, KS 67701
Valerie	Billingsley	Family Center for Health Care	660 N Garfield
Jodi	Hurst	Self-Employed	390 Latteciende Dr, Colby, KS 67701
Emily	Strange	TCHD	350 S Range Suite 2, Colby, KS 67701
Misty	Jimerson	TCHD	350 S Range Suite 2, Colby, KS 67701
Scott	Focke		1510 W 5th, Colby, KS 67701
Lucy	Wood	CMCI	220 E Walnut, Colby, KS 67701
Heather	Dixon	Family Center for Health Care	1212 Court Pl, Colby, KS 67701
Regina	Taylor	Family Center for Health Care	340 S School, Colby, KS 67701

Thomas County Community Health Needs Assessment Meeting
05.21.15
N=29

- Several parents in the room
- Nobody in the room who is currently taking care of an elderly person
- Business leaders, chamber members, veterans in the room
- Farmers in the room
- Elected officials present- Mayor, County Commissioners
- Several providers present
- Several people in the room took aspirin this morning for preventive health
- They have affordable fitness/wellness centers and people are using it
- No pharmacists present
- City officials really urging for Medicaid expansion
- Hospital is moving toward Level 4 Trauma Center
- Believe that the ACA is expecting them to do more with less

County Health Rankings

- Water, air, noise are all environmental factors in Thomas County

TAB 1: Demographic Profile

- Spanish is spoken in their community
- Are noticing a little bit of growth
- Have an engaged county based on voter turnout/town hall turnout

TAB 2: Economic Profile

- Have access to the healthy foods, it's just a matter of if you can afford it or not
- Brewster is the only other town in the county with a grocery store

TAB 3: Educational Profile

- In Colby, students are getting screened at the standard of the guidelines
- Kids are not eating the school lunches

TAB 4: Maternal and Infant Profile

- WIC numbers are down, they don't know why

TAB 6: Behavioral Health Profile

- Have a good clergy organization in town

TAB 7: Risk Factors and Indicators

- Woman in the room who says she used to work for the Kansas Department of Health, she claims Colby is not too small to get surveyed and they do get surveyed. Random phone calls are placed across the state, not dependent on "county size."

TAB 8: Uninsured Profile

- Bad debt/charity care could be going up just due to increase in volume at the hospital and clinic

TAB 10: Preventive Profile

- Monique got out her phone and went to the County Health Rankings website, access to exercise has gone up to 75%. People were angry with this, VV said new data came out last week. We will have to update the numbers for them.

STRENGTHS:

- Good Outpatient Care
- Good Imaging Equipment
- Good Health Department
- Quality Physicians
- Collaboration of Agencies in Healthcare Delivery
- Local Hospital (Self-Sustained)
- Planned Growth in the Community
- Local Surgeon
- Quality of Health Delivery
- Good ER/Emergency Response
- Good perception of healthcare
- Thomas County Community Coalition focused on Healthy Living Choices
- Interpreting Service
- Community Social Services Support
- Safe Community
- Availability of Resources
- Strong Local Economy
- Sliding Scale Cost for Services
- Multiple Pharmacies
- Immunizations
- Low Murder Rate
- Community Funding
- Annual Wellness Fair

WEAKNESSES:

- Availability of daycare (after hours)
- Affordable mental health (availability of psychiatrists)
- Obesity education (nutrition and fitness)
- Healthcare transportation outside county
- Affordable/more housing
- Understanding of the state data
- Cancer services
- Specialists (endo, derm, RD, alternative medicine, ENT)

- Preventive care
- Drug abuse
- Alcohol
- Dentists accepting Medicaid
- Home health
- Assisted living
- Smoking
- Uninsured
- Increasing number of beds at the jail

CHNA Round #2 Feedback 2015 - Thomas Co KS

Let Your Voice Be Heard!

This Community Health Needs Assessment is being conducted 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 Friday, May 8, 2015. Thank you for your participation.

Part I: Introduction

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?

	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)

CHNA Round #2 Feedback 2015 - Thomas Co KS

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

	Not a problem anymore	Somewhat of a Problem	Major Problem
Chronic Disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dentists that Accept Medicaid	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Healthcare Transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Home Health services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obesity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social Services funding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specialty Services (Chemo, Radiation, Dialysis, Surgery)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teen Pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Uninsured	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. Which 2012 CHNA health needs are most pressing TODAY for improvement? (Please Check Top 3 Needs)

- | | |
|--|---|
| <input type="checkbox"/> Chronic Disease | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Dentists that Accept Medicaid | <input type="checkbox"/> Social Services funding |
| <input type="checkbox"/> Healthcare Transportation | <input type="checkbox"/> Specialty Services (Chemo, Radiation, Dialysis, Surgery) |
| <input type="checkbox"/> Home Health services | <input type="checkbox"/> Teen Pregnancy |
| <input type="checkbox"/> Mental Health | <input type="checkbox"/> Uninsured |

CHNA Round #2 Feedback 2015 - Thomas Co KS

5. How would our community rate each of the following ? (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 rate of the following? (Check one box per row) CONT...

	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 Dept.	<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 do you know someone who received health care services outside of our community?

- Yes
- No
- Don't know

If yes, please specify the healthcare services received

CHNA Round #2 Feedback 2015 - Thomas Co KS

8. Are there any other health needs (from 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"/> Some Other Need (please specify below) |
| <input type="checkbox"/> Lead Exposure | <input type="checkbox"/> Sexual Transmitted Diseases | |

Other (please specify)

Demographics

9. For reporting purposes, are you involved in or are you a (Check 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"/> Other (Please note below) |
| <input type="checkbox"/> Education Official / Teacher | <input type="checkbox"/> Nursing | |

Other (please specify)

CHNA Round #2 Feedback 2015 - Thomas Co KS

***10. What is your home zip code?**

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.

Public Notice & Invitation

[VW Research & Development, LLC]

Round #2 Community Health Needs Assessment – Citizens Medical Center, Inc.

Media Release 04/13/2015

Over the next three months, Citizens Medical Center, Inc. will be updating the 2012 Thomas County (Colby, KS) Community Health Needs Assessment (CHNA). (*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).

The goal of this assessment update is to understand progress in addressing community health needs cited in the 2012 CHNA report and to collect up-to-date community health perceptions. To accomplish this work, a short online survey has been developed:

<https://www.surveymonkey.com/s/Thomas2015>

All community residents and business leaders are encouraged to **complete the 2015 online CHNA survey by Friday May 8th, 2015** and to attend the upcoming scheduled Town Hall on **Thursday, May 21th from 5:30-7:00pm at Pioneer Memorial Library.**

“We hope that the community and health professionals will take advantage of this opportunity to provide input into the future of healthcare delivery in our county,” comments Greg Unruh, CEO.

Vince Vandelaar, MBA (VAV Research & Development LLC, an independent research firm from Olathe, Kansas) has been retained to conduct this countywide research. If you have any questions about CHNA activities, please call 785-543-5226.

From: Greg Unruh, CEO

Date: April 13, 2015

To: Community Leaders, Providers and Hospital Board and Staff

Subject: CHNA Round #2 Online Survey 2015

Citizens Medical Center, Inc. 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 required 2015 Community Health Needs Assessment and Implementation Plan updates.

To accomplish this work, a short online survey has been developed: <https://www.surveymonkey.com/s/Thomas2015>. The CHNA Round #2 community survey completion due date is Friday, May 8th, 2015.

In addition, a community CHNA Town Hall is scheduled for Thursday, 5/21/15 from 5:30-7pm at Pioneer Memorial Library. All community members are invited to attend.

All responses are confidential. Thank you in advance for your time and support in participating with this important request.



Community Health Needs Assessment Community Town Hall Meeting

Citizens Medical Center, Inc. and
Thomas County Public Health
will be sponsoring a
Town Hall Meeting on 05/21/15,
from 5:30 to 7:00 p.m.
at Pioneer Memorial Library.

Public is invited to attend.

A light dinner will be provided starting at 5pm

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

Thank you in advance for your participation.

YOUR Logo

Date: Feb 13, 2015

Dear Community Member,

You may have heard that Citizens Memorial Medical Center, Inc. is partnering with other healthcare providers to perform a Community Health Needs Assessment. We need your input on the current state of health delivery in our community and your thoughts on the most important health needs that our community needs to address.

On Thursday, May 21st, you are invited to attend a Thomas County Town Hall meeting. We have retained the services Vince Vandelaar of VVV Research and Development, LLC from Olathe, KS, to facilitate this meeting and prepare our report.

Your input is valuable, and will be incorporated into our final report. Please join us on Thursday, May 21st, from 5:30-7:00 p.m. at Pioneer Memorial Library. A light meal will be served starting at 5:00 p.m.

We look forward to seeing you at the Town Hall meeting, and appreciate your input.

Sincerely,

Greg Unruh
CEO

Detail Primary Research Primary Service Area

[VVV Research & Development, LLC]

Community Health Needs Assessment Round #2 Community Feedback

Methodology

A community feedback survey was created on behalf of the CHNA client to gather PSA 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/s/Thomas15>. In addition, an invite letter was sent to all PSA stakeholders (i.e. Schools, County, City, Clergy, Public Health Leaders).

Below is a summary of public response:

CHNA Round #2 Feedback 2015 - NORMS			
9. For reporting purposes, are you involved in or are you a	NW Alliance (10)	Thomas CO N=227	TREND
Board Member -Local	4.3%	4.1%	
Business / Merchant	6.0%	4.8%	
Case Manager / Discharge	0.5%	0.7%	
Civic Club / Chamber	4.4%	5.6%	
Charitable Foundation	2.3%	2.2%	
Clergy / Congregational Leader	1.1%	1.2%	
College / University	1.9%	5.1%	
Consumer Advocate	1.0%	0.2%	
Consumers of Health Care	8.8%	8.7%	
Dentist	0.2%	0.2%	
Economic Development	1.5%	0.7%	
Education Official / Teacher	5.0%	2.4%	
Elected Official - City / County	1.8%	1.0%	
EMS / Emergency	1.4%	1.2%	
Farmer / Rancher	4.6%	3.4%	
Health Department	1.4%	0.7%	
Hospital	13.4%	16.2%	
Housing / Builder	0.4%	0.7%	
Insurance	0.9%	0.7%	
Labor	1.6%	0.7%	
Law Enforcement	0.5%	0.2%	
Low Income / Free Clinics	0.6%	0.2%	
Mental Health	1.2%	0.2%	
Nursing	8.8%	9.9%	
Other Health Professional	5.6%	8.5%	
Parent / Caregiver	11.9%	10.9%	
Pharmacy	0.4%	0.5%	
Physician (MD / DO)	0.2%	0.5%	
Physician Clinic	1.2%	1.9%	
Press (Paper, TV, Radio)	0.3%	0.0%	
Senior Care / Nursing Home	1.4%	1.5%	
Social Worker	0.5%	0.7%	
Veteran	1.8%	1.7%	
Welfare / Social Service	0.4%	0.7%	
Other (Please note below)	2.5%	1.7%	
TOTAL	100.0%	100.0%	

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
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 - Thomas Co N=227					
ID	ZIP	c1	c2	c3	Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1003	67701	MH			Mental health
1007	67701	WAIT	COMM		Quicker turn around times for determination to diagnose.
1011	67701	NO			not at this time
1016	67701	DOCS	DENT		Access to doctors is limited; my PN does a fine job but it does get old to have to go Hays for care. All of northwest Kansas is lacking in really good dental care; dentists in this area do not take care for germ control or proper patient sanitation (they wear gloves but then leave the patient, go out of the treatment and come back in wearing the same gloves!)
1019	67701	ALT			choice of non traditional care.....natural medicine, etc
1021	67701	PEDS	DOCS	DRUG	childrens healthcare needs to be paid closer attention to, doctors telling parents they wont give child medicine when its clearly needed but doctor doesn't see it the same way
1028	67701	EMT			Firemen and police officers should be cross trained to be EMI certified. There should also be one dispatch point. This would result in a 24/7 EMT service. The firemen and police are under utilized currently.
1031	NA	RAD	CHEMO	MH	Availability of radiation / chemo treatment for cancer patients. Good mental health therapists.
1033	67701	PEDS	OBG		Pediatrics and advanced healthcare specific to women's needs.
1035	NA	ALL			Improvement is always needed.
1037	NA	SPEC	DERM	WAIT	I think the services are excellent for a small town. If it was feasible, more specialists (dermatologists) available for more hours would be great.
1040	67701	MH			Mental Health
1041	67701	MH			Mental Health needs to continue to improve
1042	67701	ONC			More Oncology available in town.
1043	67601	FIT	WELL		WORK OUT FACILITIES
1044	67701	ORTH	SPEC		Orthodontics, Specialists
1050	67701	ALL			There is always room for improvement, but for the most part, I feel our community has Good to very good services & care.
1051	67701	UROL	ENDO	ENT	More specialist such as Endocrinology, another Ear/Nose/Throat, Urology, just a few that I could think of now.
1059	67601	KID			I have heard day care is an issue
1062	67701	URG	ER	WAIT	An urgent care center in this community would be beneficial. There are a lot of patients that inquire about such a place due to the high cost of the ER. They need to be seen, but it is not necessarily emergent.
1065	67701	MH			Mental Health Services are lacking.
1066	67701	OBG	FAC		I feel like for a small community we do offer a wide range of services which is really nice and helpful. I would like to see improvement in the CMC OB department. The rooms post delivery could be a little bigger so when family comes to visit you don't have to feel like sardines in a can.
1069	67753	MH			We need mental health to provide examinations in-house and not via internet based services.
1071	67701	WAIT			quicker checkin times at Admissions
1073	67701	DIAB	SPEC		No diabetic specialists available to see patients in Colby. Not sure how decisions are made for specialists and the degree of service they will provide I have a family member that goes to Goodland for her diabetic foot appointments because the specialist coming to Colby do not provide the necessary procedures she requires.
1076	NA	ALC	DRUG		I believe the services for treatment of drug/alcohol treatment are rather inadequate.
1078	67701	NH	ASLV		Nursing home / assisted living care options are few in number and sometimes lacking in quality.

CHNA Round #2 Community Feedback 2015 - Thomas Co N=227					
ID	ZIP	c1	c2	c3	Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1079	67701	NO			I like that our services are constantly under evaluation and expanding as the need arises. Our current services are a huge convenience for us as a rural community.
1081	67701	DRUG			Improve drug treatment / reintegration
1085	67701	LAB	WAIT		More lab work needs to be completed in town. Blood and culture samples have to be sent off and we have to wait on results.
1089	67701	WAIT	COMM		I feel as though not every employee is worried about patient care and that they are focused more on their own hours and what is convenient for them.
1091	67701	NO			no
1092	67701	CHEMO	RAD		It would be extremely beneficial if Citizens Medical Center could offer more extensive chemotherapy treatments and radiation.
1095	67701	CUST	WAIT		I think the customer service at the check in at CMCT needs to be upgraded, they don't appear to be too friendly. I've sat in their waiting room for over 20 minutes while two of the workers talked about personal things, not work things...then finally ask if i needed to sign in.
1100	67701	MH			Need for more readily available mental health services
1103	67701	SURG			More surgery done locally so one does not need to go to Denver or Hays
1104	67701	KID			daycare for healthcare workers is a major problem.
1105	67701	DENT	CLINIC		More access to dental providers. Continue to grow the specialty clinic where needs make sense.
1109	67701	URG			The Colby area needs a urgent health care office for minor illness.
1110	67701	NO			N/A
1114	67748	KID			DAYCARE
1115	67758	COST			Prices for the swimming pool--they are way to high
1122	67701	DIAL			Dialysis,
1125	NA	NO			I FEEL THAT THINGS ARE VERY GOOD AT THIS TIME
1126	67734	CLINIC	URG	SPEC	Specialty Clinic providing more specialty docs and Urgent care
1127	NA	MH			We are in dire need of QUALITY mental health services.
1129	67701	ED	DIAB	WELL	I think the community education on issues such as diabetes, obesity, etc still needs some improvement. These have come a long way, but more education could be offered.
1135	67701	NO			Not aware of any
1136	67701	URG	CLINIC	WAIT	I feel were in need of a urgent care clinic during our regular business hours.
1140	67701	MH	PEDS	DENT	Mental Health and Pediatric Dental services
1141	67701	MH			availability Mental health screens
1142	67701	MH			mental health is a challenge
1145	67701	MH			Need additional mental health providers. Wish FCHC would have a mental health provider on staff.
1146	67701	SUPGRP			support groups for families/caregivers
1148	67701	DERM	ONC		dermatology and oncology
1149	67732	NO			none
1154	67701	PC	SURG	TRAUM	Access to primary care, General Surgery services, and trauma care have all improved
1156	67701	CANC			Cancer center
1163	67730	ORTHO			orthopedic health care.
1167	67701	WIC			We need WIC office here in Colby so people don't have to go out of town to apply.
1170	67701	CLINIC	WAIT		More walk in clinic times.
1171	67701	SPEC	DOCS		increase specialty Doctors to decrease travel
1172	67701	NO			No

CHNA Round #2 Community Feedback 2015 - Thomas Co N=227					
ID	ZIP	c1	c2	c3	Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1174	67757	COMM	DOCS	WAIT	COMMUNICATION BETWEEN PATIENTS AND PROVIDERS. THIS COMING FROM PERSONAL EXPERIENCE, PROVIDERS DON'T COMMUNICATE WITH PATIENTS. THIS COULD BE CHECKING IN TO TESTING. EX: WENT TO CLINIC, PUT IN A ROOM, SPOKE WITH NURSE, THEN WAITED 45 MINS FOR THE PROVIDER. NOTHING WAS SAID TO ME ABOUT WHY I WAS WAITING WOULD BE NICE FOR SOMEONE TO JUST POP IN AND SAY SORRY YOU'VE WAITED SO LONG JUST LETTING YOU KNOW THEY ARE WITH A PATIENT AND WILL BE AROUND SHORTLY. INSTEAD OF ME FEELING LIKE I WAS FORGOTTEN.
1175	67701	URG	CLINIC		An Urgent Care clinic would be nice.
1176	67701	ER			Er team...they do great for what they have
1177	67701	SPEC	SURG	OBG	Overall we do pretty well I think for the size of our community. More actual Dr. other than practitioners would be nice. More choices of specialists. Glad to see surgery and OB/GYN services as options now.
1178	67701	CLINICS	WAIT	COMM	Medical clinics need to take patient calls for appointments during business hours, e.g. 8:00 a.m.-5:00 p.m. rather than 9:00-3:00 p.m. Appointments during the morning and afternoon hours should be reserved for unexpected illnesses and injuries that occur rather than patients being referred to the ER. Patients are not receiving calls regarding lab and radiology results.
1182	67701	CUST			I feel that it could be improved. With more personable providers. I go to one nurse practitioner in town and if I need to see a doctor or specialist I travel to Hays. The doctors here seem to not really care about you and your questions.
1183	67701	RECRT			As a small town. we always need to be recruiting more providers, but at the moment we seem to be in pretty good shape for numbers of providers for our population.
1184	67701	FIT	WELL		There is no fitness or community recreation center. Instead of one good facility, we have a few facilities that meet or attempt to meet the needs of a few people but nothing for the entire community's health/fitness needs.
1185	67701	FIT	WELL		There is no community center that offers exercise or fitness access. There is also very little investment by city or state government in this area. 6 months of the year, the weather is horrible. it's impossible to walk or exercise during this time because the wind is blowing 40 mph. A place to exercise would be great.
1186	67701	NO			no
1188	67701	CLINIC	MDLV		people who work at the clinic some of the mid levels are clueless They have I know more than any body attitude
1189	67701	FIT	WELL		I feel like this town could GREATLY benefit from a recreation center. You could build it through the hospital and use it for rehab, as well as make it open to the community to promote overall wellness and health in Colby. Make something similar to the Hays Center for Health and Improvement, but combine it with the Colby Rec Department as a place to host activities, such as youth basketball and general fitness classes.
1191	67701	DOCS			Would like to see all providers able to have admitting privileges at CMC.
1196	67701	DENT	OBG		1.)Dentist that take Healthwave 2.)An actual OB-GYN,
1201	NA	DENT	WAIT		The dental offices need to be open longer; in its current state, it is very difficult to get an appointment without having to take off a few hours from work. Some of us like to "save" those sick hours when there is an emergency (just in case), so additional off-hours (even on Fridays) would be beneficial to the community.
1202	67701	DOCS	WAIT		More care available at the hospital would be great. An official hospital instead of a Medical Center.

CHNA Round #2 Community Feedback 2015 - Thomas Co N=227					
ID	ZIP	c1	c2	c3	Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
1203	67701	CARD	PEDS	CUST	We need the ability to get an echocardiogram on someone 18 & under. Also would like to be able to call FCHC and be able to talk to a Dr or a nurse and not have to leave a "personal" message with the front desk who in turn gets the message wrong and knows business your personal business
1204	67701	MH			mental health
1207	67753	COMM	CUST	DOCS	I think that the doctors need to slow down and actually listen to what the patients are saying.
1209	67701	MH	SPEC		Mental health. Specialists.
1210	NA	SPEC			Specialists
1211	67701	LAB	COMM		Lab Work: If you don't say the words "Direct Access" or ask for Direct Access, you are charged a higher rate. If you choose Direct Access, you have to pick up the labs directly instead of them making them available to the Dr. Instead, Implement a plan that all labs that may done in house are done at the Direct Access Rate and have them available online for Dr.'s to see asap. If patients would like a hard copy of results, then they can pick it up or mailed to them. If they have to be sent off, then I understand a higher fee.
1214	67701	CLINIC	URG	WAIT	Healthcare services need to be offered after hours. It is hard to be working full time and always having to take time off to get appointments during the work day.
1220	67701	TRANS			We need some type of transportation service for out of town doctor appointments when people, particularly the elderly, need to travel and are not able to on their own and may not have family nearby who can take them.

CHNA Report contact :



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