## Introduction

In July 2019, Cloud County Health Center presented the community with a Community Health Needs Assessment Survey, asking their opinions on the most important health issues in our community that need addressing over the next three years. The surveys were made available at the Cloud County Fair, online via Facebook, the hospital website (<a href="www.cchc.com">www.cchc.com</a>), Cloud County Health Department, Hospital and Family Care Center registration desks and through Survey Monkey email invitations.

The survey listed the following health needs concerns requesting feedback from community members to rank them in order of importance:

- Obesity
- Depression/Mental Health
- Diabetes
- Heart Disease
- Tobacco Use
- Stroke
- Trauma/Falls
- Hypertension
- High Cholesterol
- Substance Abuse
- State of the Art Healthcare Facility

We received approximately 200 responses. In addition to the 10 listed healthcare needs on the survey, respondents were invited to suggest other areas of concern. These responses included Proactive Wellness Programs, Safety & Improved Healthcare for Children, Surgical Capabilities, Quality Medical Providers, Geriatric Home Safety and Community Connections Against Isolation.

The Community Health Assessment Committee then met to discuss the results and develop a follow-up Implementation strategy (Community Health Implementation Plan). The resulting plan was developed by a 50% weighting to the community responses and a 50% weighting to the committee input. This year, the committee was comprised of 18 members of various organizations throughout the community listed as an addendum to the plan. The Federal Patient Protection and Affordable Care Act (PPACA) requires that tax-exempt hospitals complete this assessment (CHNA) once every three years and then adopt a written strategy to be called here the Cloud County Community Health Improvement Plan. County Health Departments are also required to use the CHNA in their program planning efforts.

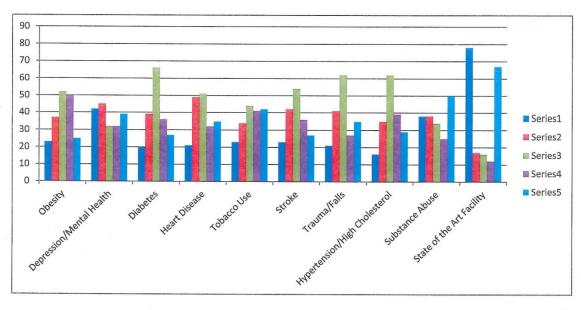
CCHC (Cloud County Health Center) is required to formally adopt the CHIP within the current tax year that the CHNA was completed. It is then expected to monitor this plan and develop an annual report on its progress.

This plan addresses 2 Priority Need Areas identified in the CHNA. This plan covers the next three years until a new or revised CHNA is developed as required. It details specific tasks to be completed, how these tasks will be measured, who will be responsible for completing the identified tasks, and target dates for completion of each task.

This Implementation Plan will be monitored by an identified person or organization that will also develop an annual update report on its progress.

## **COMMUNITY HEALTH NEEDS ASSESSMENT SURVEY**

#### **Community Health Needs Assessment Survey Results**



#### **Ranking Legend**

Series 1 - Most Important

Series 2 - Very Important

Series 3 - Important

Series 4 - Prevalent Throughout the Community But Not a Priority

Series 5 - Needs Addressing But Not A Priority

## Percent of Adults who are Obese

This indicator shows the percentage of adults 18 years and older who are obese (body mass index ≥30 kg/m²).

## Why is this important?

Obesity increases the risk of many diseases and health conditions including heart disease, type 2 diabetes, cancer, hypertension, stroke, liver and gallbladder disease, respiratory problems, and osteoarthritis. Losing weight and maintaining a healthy weight help to prevent and control these diseases. Obesity leads to significant economic costs due to increased healthcare spending and lost earnings.

The Healthy People 2020 national health target is to reduce the proportion of adults (ages 20 and older) who are obese to 30.6%.

**County: Cloud** 

40.3%





# Diabetes: Medicare Population

This indicator shows the percentage of Medicare beneficiaries who were treated for diabetes.

Medicare is the federal health insurance program for persons aged 65 years or older, persons under age 65 years with certain disabilities, and persons of any age with end-stage renal disease (ESRD).

### Why is this important?

Diabetes is a leading cause of death in the United States. According to the Centers for Disease Prevention and Control and Prevention (CDC), more than 25 million people have diabetes, including both diagnosed and undiagnosed cases. This disease can have a harmful effect on most of the organ systems in the human body; it is a frequent cause of end-stage renal disease, non-traumatic lower-extremity amputation, and a leading cause of blindness among working age adults. Persons with diabetes are also at increased risk for ischemic heart disease, neuropathy, and stroke. In economic terms, the direct medical expenditures attributable to diabetes is over \$116 billion (CDC). Diabetes disproportionately affects minority populations and the elderly, and its incidence is likely to increase as minority populations grow and the U.S. population becomes older.

**County: Cloud** 

24.6%





# Acute Cerebrovascular (Stroke) Disease Hospital Admission Rate

This indicator shows the number of admissions for acute cerebrovascular (stroke) disease per 10,000 population in an area.

### Why is this important?

Stroke, or acute cerebrovascular disease, is the fifth leading cause of death in the United States and is a major cause of serious disability for adults. About 795,000 people in the United States have a stroke each year. A growing number of younger U.S. adults are being hospitalized for strokes, at least in part because more of them have risk factors like high blood pressure, obesity and diabetes. Stroke is preventable. It is also the leading cause of serious long-term disability. Risk factors for stroke include inactivity, obesity, high blood pressure, cigarette smoking, high cholesterol, and diabetes.

**County: Cloud** 

12.2



## Heart Disease Hospital Admission Rate

This indicator shows the number of admissions for heart disease per 10,000 population in an area.

## Why is this important?

Heart disease has consistently been a public health concern and is the leading cause of death in the United States. For coronary heart disease alone, the estimated direct and indirect costs for the overall U.S. population are approximately \$165.4 billion for 2009. According to the national hospital discharge survey, hospitalizations for heart disease accounted for 4.2 million hospitalizations in 2006. Approximately 62% of these short-stay hospitalizations occurred among people ages 65 years and older. There is also evidence that heart disease hospitalization rates vary among racial and ethnic groups.

**County: Cloud** 

111.6



# Percent of Adults with Diagnosed Hypertension

This indicator shows the percentage of adults who have been told they have high blood pressure (140/90 mm Hg or higher).

NOTE: Estimates are not available for the counties with an insufficient sample.

### Why is this important?

High blood pressure is the number one modifiable risk factor for stroke. In addition to stroke, high blood pressure increases the risk for heart attack, heart failure, kidney failure, and atherosclerosis. In the United States, one in three adults has high blood pressure, and nearly one-third of these people are not aware that they have it. Because there are no symptoms associated with high blood pressure, it is often called the "silent killer." The only way to tell if you have high blood pressure is to have your blood pressure checked. High blood pressure can occur in people of any age or sex; however, it is more common among those over age 35. It is particularly prevalent in African Americans, older adults, obese people, diabetics, and heavy drinkers. Blood pressure can be controlled through lifestyle changes including eating a heart-healthy diet, limiting alcohol, avoiding tobacco, maintaining a healthy weight, and staying physically active. The Healthy People 2020 national health target is to reduce the proportion of adults aged 18 years and older with high blood pressure to 26.9%.

**County: Cloud** 

36.9%





## Hyperlipidemia: Medicare Population

This indicator shows the percentage of Medicare beneficiaries who were treated for hyperlipidemia.

Medicare is the federal health insurance program for persons aged 65 years or older, persons under age 65 years with certain disabilities, and persons of any age with end-stage renal disease (ESRD).

## Why is this important?

Hyperlipidemia is an increase in the amount of fat (cholesterol and triglycerides) in the blood. Hyperlipidemia by itself has no symptoms; therefore, the only way a doctor can diagnose the condition is through laboratory tests. Hyperlipidemia can lead to atherosclerosis, heart disease and acute pancreatitis. Risk factors for the hyperlipidemia include gender, family history, chronic renal failure, physical inactivity, obesity, and smoking. In many cases, this condition is reversible through healthy eating and regular exercise.

**County: Cloud** 

38.7%





# Depression: Medicare Population

This indicator shows the percentage of Medicare beneficiaries who were treated for depression.

Medicare is the federal health insurance program for persons aged 65 years or older, persons under age 65 years with certain disabilities, and persons of any age with end-stage renal disease (ESRD).

### Why is this important?

Depression is a chronic disease that negatively affects a person's feelings, behaviors and thought processes. Depression has a variety of symptoms, the most common being a feeling of sadness, fatigue, and a marked loss of interest in activities that used to be pleasurable. Many people with depression never seek treatment; however, even those with the most severe depression can improve with treatments including medications, psychotherapies, and other methods.

According to the National Comorbidity Survey of mental health disorders, people over the age of 60 have lower rates of depression than the general population — 10.7 percent in people over the age of 60 compared to 16.9 percent overall. The Center for Medicare Services estimates that depression in older adults occurs in 25 percent of those with other illnesses, including: arthritis, cancer, cardiovascular disease, chronic lung disease, and stroke.

**County: Cloud** 

16.3%





## **Mental Behavior**

## Hospital Admissions Rate

This indicator shows the rate of hospital admissions for Mental Behavioral issues per 10,000 population in an area.

## Why is this important?

Mental disorders are one of the leading causes of disability in the United States. In any given year, approximately 13 million American adults have a seriously debilitating mental illness.

An individual's mental health is affected by a combination of factors, including biology (genes/brain chemistry), life experiences (trauma/abuse), and family history regarding mental health problems. Due to the complex interplay between so many factors, it is especially important to recognize early warning signs, such as too much or too little sleep, rapid weight loss or weight gain, lack of energy and motivation in talking to people or participating in usual activities, or feelings of helplessness. It is important to recognize and address potential psychological issues before they become critical, particularly because the greatest opportunity for prevention is among young people.

**County: Cloud** 

64.3



# Percent of Adults Who Currently Smoke Cigarettes

This indicator shows the percentage of adults 18 years and older who currently smoke cigarettes.

NOTE: Estimates are not available for the counties with an insufficient sample.

## Why is this important?

Tobacco use is one of the most preventable causes of illness and death in America today. Tobacco use causes premature death for almost half a million Americans each year, and it contributes to profound disability and pain for many others. Approximately one-third of all tobacco users in this country will die prematurely because of their dependence on tobacco. Areas with a high smoking prevalence will also have greater exposure to secondhand smoke for non-smokers, which can cause or exacerbate a wide range of adverse health effects, including cancer, heart disease, respiratory infections, and asthma. The Healthy People 2020 national health target is to reduce the proportion of adults aged 18 years and older who smoke cigarettes to 12%.

**County: Cloud** 

24.0%





# Percent Medicare Part D Beneficiaries Having Daily Opioid Dosage >= 50 MME

Percentage of Medicare part D enrolled beneficiaries receiving opioids who have had a daily MME (Morphine Milligram Equivalent) at or above 50 within their possession at some point during the year.

## Why is this important?

Opioid abuse and overdose deaths are at epidemic levels in the United States and nearly half of these deaths involved prescription opioids. The U.S. Department of Health and Human Services reports during 2016, 1 out of 3 Medicare Part D beneficiaries received an opioid prescription. In addition, 1 in 10 Medicare Part D beneficiaries nationwide received opioids on a regular basis. Analysis has found that many of the prescribed dosages far exceed the manufacturers recommended amount, also, exceeding the CDC recommendation of no more than 90 mg Morphine Milligram Equivalent for patients with chronic pain.

This indicator is based on Centers for Medicare and Medicaid Services data and uses different methodology to calculate and may not be comparable to KTRACS-based indicators.

More...

**County: Cloud** 

38.5%



## Community Health Needs Assessment Committee Cloud County, Kansas September 2019

Gary Caspers, Chair Cloud County Commissioner

Alison Burchfiel
Education Coordinator at Cloud County Health Center

David Garnas
Administrator of Cloud County Health Center

Brandi Bray, RN Administrator, Cloud County Health Department

Lois Tracy
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Melissa Williamson or other representative of River Valley River Valley Extension Unit

Jennifer Giersch, RN USD #333 School Nurse

Tonya Merrill
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Pam Campbell Exec. Assistant at Cloud County Health Center

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