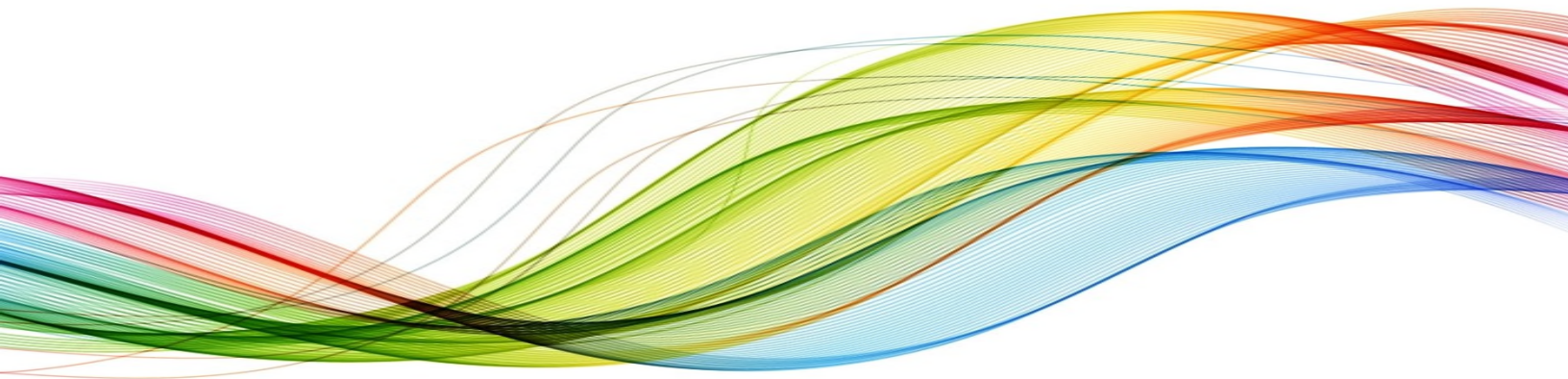




# **Community Health Needs Assessment Susan B. Allen Memorial Hospital Butler County, KS**

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**August 2019**

**VVV Consultants LLC  
Olathe, KS**

# **Community Health Needs Assessment**

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# **I. Executive Summary**

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[VVV Consultants LLC]

# I. Executive Summary

## Susan B. Allen Memorial Hospital – Butler County, KS - 2019 Community Health Needs Assessment (CHNA) Wave #3

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 the local residents, to research and prioritize county health needs and document community health delivery success. This health assessment will serve as the foundation for community health improvement efforts for the next three years.

Susan B. Allen Memorial Hospital (SBAMH) previous CHNA was completed in 2016. (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). Wave #3 Butler County, KS CHNA assessment began January 2019 and was facilitated / created by VVV Consultants, LLC (Olathe, KS) staff under the direction of Vince Vandelaar, MBA.

**Important community CHNA Benefits** for both the local hospital and the health department, are as follows: 1) Increases knowledge of community health needs and resources 2) Creates 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 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, and 8) fulfills Hospital "Mission" to deliver quality health care.

### a) County Health Area of Future Focus

#### SBAMH – Butler County, KS Town Hall - "Community Health Improvements Needs"

2019 CHNA Health Priorities - SBAMH PSA				
CHNA Wave #3 Town Hall (50 attendees, 176 votes)				
Butler County, KS				
#	Community Health Needs to Change and/or Improve	Votes	%	Accum
1	Mental Health (Diagnosis, Treatment, Aftercare)	27	15.3%	15.3%
2	Poverty (Employee Readiness)	25	14.2%	29.5%
3	Substance Abuse (Alcohol and Drugs)	23	13.1%	42.6%
4	Obesity (Nutrition / Exercise)	16	9.1%	51.7%
5	Senior Health	13	7.4%	59.1%
6	Foster Homes	12	6.8%	65.9%
7	Federal Qualified Health Centers (FQHC) services	11	6.3%	72.2%
8	Suicide Prevention	8	4.5%	76.7%
	Total Votes:	176	100.0%	
Other Items receiving votes: Knowledge of Healthcare Services, Child Care, Sexual Assault Support, Affordable Healthcare Services, Public Transportation, Access to Healthy Foods, Special Needs Children / Adults, Specialists (OB, Peds, Surg, Ortho), Housing, Local Political Advocacy, Unwed Mothers, and Women's Wellness.				

## b) Town Hall CHNA Findings: Areas of Strengths

### SBAMH – Butler County, KS CHNA Town Hall - “Community Health Areas of Strengths”

Butler County KS "Community Health Strengths"			
#	Topic	#	Topic
1	Ambulance Services	7	Mental Health Services - Access
2	Butler Community College	8	PSA # of Providers
3	Community Collaboration	9	Services in Community - Nonprofits
4	Diagnostic Technology	10	Two Hospitals - Access
5	Growing Population	11	Urgent Care Facilities
6	High Educational Opportunities	12	YMCA

### Key CHNA Wave#3 Secondary Research Conclusions are as follows:

**KANSAS HEALTH RANKINGS:** According to the 2019 Robert Wood Johnson County Health Rankings, Butler County was ranked 33<sup>rd</sup> in Health Outcomes, 55<sup>th</sup> in Health Factors, and 93<sup>rd</sup> in Physical Environmental Quality out of the 105 Counties.

**TAB 1.** Butler County’s population is 66,878 (based on 2017), with a population per square mile (based on 2010) of 46 persons. Six percent (6.1%) of the population is under the age of 5 and 14.7% is over 65 years old. Hispanic or Latinos make up 4.8% of the population and there are 3.4% of Butler County citizens speak a language other than English at home. In Butler County, children in single parent households make up 85.9%. There are 4,634 Veterans living in Butler County.

**TAB 2.** The per capita income in Butler County is \$28,478, and 10.1% of the population is in poverty. There is a severe housing problem of 11%. There is an unemployment rate of 33.8%. Food insecurity is 12%, and limited access to a store (healthy foods) is 7%.

**TAB 3.** Children eligible for a free or reduced-price lunch is at 28% and 92.3% of students graduate high school while 29.3% of students get their bachelor’s degree or higher in Butler County.

**TAB 4.** The percent of births where prenatal care started in the first trimester is 84.8%. Thirty-one percent (30.7%) of births in Butler County occur to unmarried women. Births where mothers have smoked during the pregnancy is at 14.3% and the percent of babies born prematurely is 10.1%. Seventy-one percent (71.4%) of infants up to 24 months received full immunizations.

**TAB 5.** There is one primary care physician per 1,460 people in Butler County. Patients who gave their hospital a rating of 9 or 10 out 10 are 80% and there are 76% of patients who reported Yes, They Would Definitely Recommend the Hospital.

**TAB 6.** Medicare population getting treated for depression in Butler County is 17.6%. There are 3.4 days out of the year that are poor mental health days.

**TAB 7.** Thirty-five percent (35%) of adults in Butler County are obese (based on 2019), with 27% of the population physically inactive. Eighteen percent (18%) of adults drink excessively and 18% smoke. Hyperlipidemia (37.6%), Heart Failure (15.7%), and Chronic Kidney (21.5%) risk are all higher than the comparative norm.

**TAB 8.** The adult uninsured rate for Butler County is 8%. The local Health Department is giving back to the community through Immunizations and Health Screenings.

**TAB 9.** The life expectancy rate in Butler County is 76 for Males and 80 for Females. The age-adjusted cancer mortality rate is 181.6 and the age-adjusted chronic lower respiratory disease mortality rate is 64.

**TAB 10.** Sixty-eight percent (68%) of Butler County has access to exercise opportunities and 10% monitor diabetes. Thirty-eight percent (38%) of women in Butler County get annual mammography screenings.

**Key 2019 Community Feedback Conclusions:** Stakeholder feedback from residents, community leaders and providers (N=161) provided the following community insights via an online perception survey:

- Using a Likert scale, 49.1% of Butler County stakeholders would rate the overall quality of healthcare delivery in their community as either Very Good or Good.
- Butler County stakeholders are satisfied with the following services: Ambulance Services, Eye Doctor, Hospice, Outpatient Services and Pharmacy.
- When considering past CHNA needs: Substance Abuse, Poverty, Mental Health Services, Obesity, Suicide, Abuse/Violence and Access to Healthcare came up.

CHNA Wave #3		Butler Co N=161			
Past CHNAs health needs identified		Ongoing Problem			Pressing
#	Topic	Votes	%	Trend	RANK
1	Substance Abuse	94	80.3%		1
2	Poverty	87	74.4%		3
3	Mental Health Services	78	66.7%		2
4	Obesity	67	57.3%		7
5	Suicide	51	43.6%		5
6	Abuse / Violence	50	42.7%		6
7	Access to Healthcare	49	41.9%		4
8	Diabetes	41	35.0%		9
9	Nutrition and Wellness Education	40	34.2%		8
10	Cancer	32	27.4%		11
11	Prenatal Care	21	18.0%		13
12	STD Education	20	17.1%		14
13	Immunizations	19	16.2%		10
14	Urgent Care	14	12.0%		12

## **II. Methodology**

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**[VVV Consultants LLC]**

## II. Methodology

### a) CHNA Scope and Purpose

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

#### **JOB #1: Meet/Report IRS 990 Required Documentation**

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

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

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

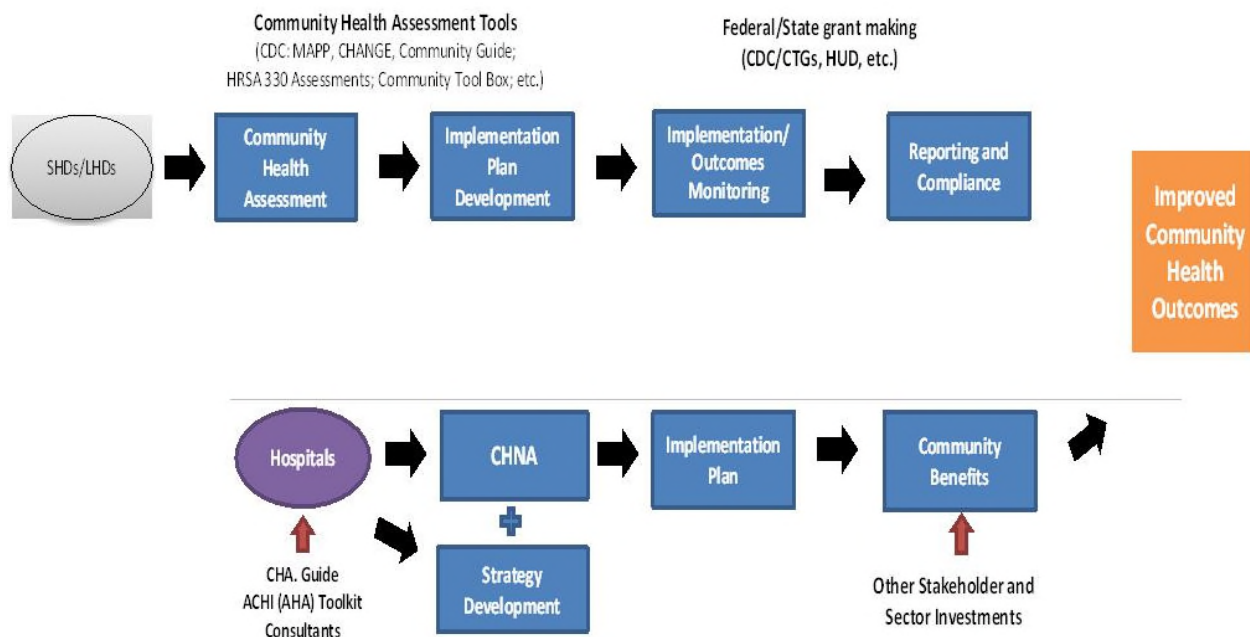
The Notice provides that a CHNA will be considered to be "conducted" in the taxable year that the written report of the CHNA findings is made widely available to the public. The Notice also indicates that the IRS intends to pattern its rules for **making a CHNA "widely available to the public"** after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



### **JOB #3: Adopt an Implementation Strategy by Hospital**

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

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



## **IRS Notice 2011-52 Overview**

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

#### **Applicability of CHNA Requirements to “Hospital Organizations”**

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

#### **How and When to Conduct a CHNA**

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

#### **Determining the Community Served**

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

#### **Persons Representing the Community Served**

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

## Required Documentation

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

## Making a CHNA Widely Available to the Public

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

## How and When to Adopt an Implementation Strategy

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

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

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

ACCOUNTING TODAY 1/2/15

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

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

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

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

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

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

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

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

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

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

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

RICH DALY, HFMA SENIOR WRITER/EDITOR

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

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

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

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

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

## Reasons for Revocation

Hospital 501(r) requirements include:

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

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

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

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

### Widespread Vulnerability

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

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

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

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

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

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

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

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

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

# Public Health Criteria:

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

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

### **DOMAIN 1 includes 4 STANDARDS:**

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

### **Required CHNA Planning Process Requirements:**

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

### **Seven Steps of Public Health Department Accreditation (PHAB):**

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



## **II. Methodology**

### **b) Collaborating CHNA Parties**

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

#### **Susan B. Allen Memorial Hospital**

**720 W. Central**

**El Dorado, KS 67042**

**316-321-3300**

**CEO: Jim Kirkbride**

Susan B. Allen Memorial Hospital is a not-for-profit, general acute care hospital that includes a home health agency and a cancer center. The Hospital is governed by a local board of citizens, and is accredited by the Joint Commission.

#### **Mission**

The mission of Susan B. Allen Memorial Hospital is to provide compassionate, professional healthcare to the people we serve.

#### **Vision**

The vision of Susan B. Allen Memorial Hospital is to create a culture of service and operational excellence - always making the Hospital a better place for our patients to receive care, our employees to work, and our physicians to practice. The Susan B. Allen Emergency Department is a fully staffed and equipped emergency department providing services 24 hours a day.

#### **Services**

Adult Diabetes Education Program

Ambulatory Services Unit

- Provides services associated with outpatient surgery, or same-day surgery.

Cancer Center

- Full service cancer treatment facility, providing radiation oncology treatment as well as medical oncology treatment.

Cardiac Rehabilitation

Emergency Department

Home Healthcare Services

- Skilled Nursing
- Physical Therapy
- Speech Therapy
- Occupational Therapy

- Social Work Services

- Home Health Aides.

Lifeline

Obstetrics

Physical Rehabilitation Department

- Physical
- Occupational
- Speech therapy for patients on an inpatient and outpatient basis

Radiology/Diagnostic Imaging

Surgery

- Laparoscopic and Laser Procedures
- Ophthalmologic Procedures
- Orthopedic Procedures
- Urological Procedures

Volunteer Program

## **Butler County Health Department**

**206 N. Griffith, Suite B**

**El Dorado, KS 67042**

**(316) 321-3400**

**~Hours by Appointment**

**Director: Jamie Downs**

The Butler County Health Department was established in 1948 and became the Butler-Greenwood Bi-County Health Department December 31, 1949. The Bi-County Health Department was governed by a Board of Health consisting of three county commissioners from Butler County and three county commissioners from Greenwood County and had offices located in Eureka, El Dorado, and Augusta. Beginning in 1999 the Bi-County Health Department was dissolved and became the Butler County Health Department. The Board of Health consists solely of the Butler County Commissioners.

The Health Department office is located at 206 N Griffith, Suite B, El Dorado KS 67042. A second location in Augusta was closed in 2011 but immunization clinics are held at the Butler County Western Office at least once a month, to meet the needs of that part of the community, with additional clinics added during high demand times such as school enrollment and flu season.

### **Mission**

The Butler County Health Department is committed to protecting the public's health and environment, preventing disease, and promoting an optimum level of health for all persons.

### **Vision**

The Butler County Health Department is committed to protecting the public's health and environment, preventing disease, and promoting an optimum level of health for all persons.

### **Services**

- Child Care Licensing
- Family Planning
- Health Education
- Healthy Start home visits
- Immunizations
- Maternal and Infant health
- Public Health preparedness
- STD testing and counseling
- Support Services
- TB Testing

## **South Central Mental Health Center**

**524 N. Main**

**El Dorado, KS 67042**

**(316) 321-6036**

**Executive Director: Dan Rice**

South Central Mental Health opened our doors in 1962 to become one of the first community mental health centers (CMHC) in the state of Kansas. It was recognized by a group of citizens in Butler County that there was a need to address a person's psychological health in addition to their physical health. In addition, the group firmly believed that persons with severe mental illnesses could be better cared for in their own communities than in the large psychiatric hospitals that existed at that time. Susan B. Allen hospital generously donated space for our fledgling organization. "Women's Worry" educational groups became very popular at the time as did Parenting Teens and Grief groups. The long journey towards reducing stigma regarding mental health and treatment had begun.

In 1965 the Community Mental Health Center Act was signed into law by President John F. Kennedy. The State of Kansas followed with a mandate that all counties in Kansas provide financial support for a local CMHC. The center gave presentations to various county commissions and opened its doors to officials from around the state to help provide models for others to develop CMHC's. There are now 26 CMHC's in Kansas.

SCMH has continued to help develop, cultivate, and support social service organizations in Butler County and around the state of Kansas. Our partnerships are wide and varied but our singular goal is simply to assist building healthy individuals and communities in order to help shape promising futures.

### **Mission**

The Center provides quality mental health services that empower individuals, families, and communities of Butler County to help shape promising futures.

### **Vision**

Exceptional care that results in a meaningful difference.

### **Values**

Humility, Optimism, and Strong Work Ethic

## II. Methodology

### b) Collaborating CHNA Parties Continued Consultant Qualifications



#### **VVV Consultants LLC**

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

**Vince Vandelaar MBA, Principal Consultant & Adjunct** (913) 302-7264

[VVV@VandelaarMarketing.com](mailto:VVV@VandelaarMarketing.com)

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

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

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

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

#### **Collaborating Support:**

Tessa Taylor BBA BA - VVV Consultants LLC  
Associate Consultant

## II. Methodology

### c) CHNA and Town Hall Research Process

Wave #3 Community Health Needs Assessment (CHNA) process began in January 2019 for SBAMH to meet IRS CHNA requirements.

In January a meeting was called by SBAMH (Butler County, KS) to review possible CHNA collaborative options, in collaboration with Butler County Health Department and South Central Mental Health Center. Note: VVV Consultants LLC from Olathe, KS was asked to facilitate this discussion with the following agenda: VVV CHNA experience, review CHNA requirements (regulations) and discuss CHNA steps/options to meet IRS requirements and to discuss next steps. Outcomes from discussion led to Susan B. Allen Memorial Hospital requesting VVV Consultants LLC to complete a CHNA IRS aligned comprehensive report.

#### VVV CHNA Deliverables:

- Document Hospital Primary Service Area - meets the 80-20 Patient Origin Rule.
- Uncover / document basic secondary research county health data, organized by 10 tabs.
- Conduct / report CHNA Community Check-in Feedback Findings (primary research).
- Conduct a Town Hall meeting to discuss with community secondary & primary data findings leading to determining (prioritizing) county health needs.
- Prepare & publish CHNA report which meets ACA requirements.

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

Source: Hospital Internal Records				TOTAL	202,009	100.0%	
Susan B. Allen Memorial Hospital				IP/OP/ER (Yr16-18)			
TARG	ZIP	City	County	Totals	%	Accum	
PSA	67042	El Dorado	BUTLER	106,508	52.7%	52.7%	
PSA	67010	Augusta	BUTLER	31,624	15.7%	68.4%	
PSA	67144	Towanda	BUTLER	9,028	4.5%	72.8%	
PSA	67074	Leon	BUTLER	7,488	3.7%	76.6%	
PSA	67039	Douglass	BUTLER	3,228	1.6%	78.2%	
PSA	67132	Rosalia	BUTLER	2,044	1.0%	79.2%	
PSA	67017	Benton	BUTLER	1,907	0.9%	80.1%	
PSA	67123	Potwin	BUTLER	1,853	0.9%	81.0%	
PSA	67002	Andover	BUTLER	1,548	0.8%	81.8%	
PSA	66842	Cassoday	BUTLER	1,482	0.7%	82.5%	
PSA	67072	Latham	BUTLER	660	0.3%	82.9%	
PSA	67133	Rose Hill	BUTLER	646	0.3%	83.2%	
PSA	67154	Whitewater	BUTLER	641	0.3%	83.5%	
PSA	67012	Beaumont	BUTLER	259	0.13%	83.6%	
PSA	67041	Elbing	BUTLER	99	0.05%	83.7%	
SSA	67045	Eureka	GREENWOOD	7,033	3.5%	87.1%	
SSA	66840	Burns	MARION	2,401	1.2%	88.3%	
SSA	67349	Howard	ELK	1,359	0.7%	89.0%	
SSA	67137	Severy	GREENWOOD	1,004	0.5%	89.5%	

Specific CHNA roles, responsibility and project timelines are documented by the following calendar.

## SBAMH (Butler Co KS) - CHNA Wave #3

### Option C - Project Timeline and Roles 2019

Step	Date (Start-Finish)	Lead	Task
1	1/2/2019	VVV	Sent VVV quote for review.
2	1/16/2019	Hosp	Select CHNA Option A/B/C. Approve and sign VVV CHNA quote.
3	2/21/2019	VVV	Send out REQCommInvite Excel file. Hospital and health department to fill in PSA stakeholders names, addresses and emails.
4	2/21/2019	VVV	Request client to send KHA PO101, PO103 and TOT223 PO Reports for FFY 16, 17 and 18. In addition, request three year historical PSA IP/OP/ER/Clinic patient origin file (Use ZipPSA_3yrPOrigin.xls).
5	On or before 3/1/2019	VVV	Prepare CHNA Wave #3 stakeholder feedback online link. Send text link for hospital review.
6	On or before 3/5/2019	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming CHNA work. Hospital to place.
7	On or before 3/5/2019	VVV / Hosp	Prepare Email request to Roster Stakeholders announcing online CHNA Wave #3 feedback. BCC email from HCH Admin
8	By 3/15/2019	VVV	Launch and conduct online survey to stakeholders. Hospital Admin will e-mail announcement to participate to all stakeholders.
9	April-May 2019	VVV	Assemble and complete secondary research. Find and populate 10 TABS. Create Town Hall PowerPoint for presentation.
10	On or before 4/20/2019	Hosp	Prepare and send out community Town Hall invite letter and place local ad.
11	On or before 4/20/2019	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming Town Hall. VVV will mock up PR release to media sources.
12	TBD Week prior to Town Hall	All	Conduct conference call ( <i>time TBD</i> ) with hospital and health department to review Town Hall data and flow.
13	Friday, May 10th, 2019 (11:30am-1:00pm)	VVV	Conduct CHNA Town Hall from 11:30 a.m. to 1:00 p.m. at Butler Community College. Review and discuss basic health data plus rank health needs.
14	On or before 7/15/2019	VVV	Complete analysis. Release draft one and seek feedback from leaders at hospital and health department.
15	On or before 8/1/2019	VVV	Produce and release final CHNA report. Hospital will post CHNA online.
16	30 days prior to end of hospital fiscal year	TBD	Hold board meetings to discuss CHNA needs and create and adopt an Implementation Plan. Communicate CHNA plan to community.

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

**Phase I—Discovery:**

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

**Phase II—Qualify Community Need:**

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

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

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

**Phase III—Quantify Community Need:**

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

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

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

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

Phase I: Discovery.....	Jan 2019
Phase II: Secondary / Primary Research.....	Feb – Apr 2019
Phase III: Town Hall Meeting.....	May 10, 2019
Phase IV: Prepare / Release CHNA report.....	Jun- Jul 2019

**Detail CHNA Development Steps Include:**

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

Susan B. Allen Memorial Hospital (Butler Co, KS), in collaboration with Butler County Health Department and South Central Mental Health Center, town hall meeting was held on Friday, May 10<sup>th</sup>, 2019 from 11:30 a.m. to 1:00 p.m. at Butler Community College (901 S Haverhill Rd, El Dorado, KS 67042). Vince Vandehaar facilitated this 1 ½ hour session with forty-nine (49) attendees. (Note: a detailed roster of Town Hall attendees is listed in Section V a).

The following Town Hall agenda was conducted:

1. Welcome & Introductions
2. Review Purpose for the CHNA Town Hall & Process Roles
3. Present / Review of Historical County Health Indicators (10 TABS)
4. Facilitate Town Hall participant discussion of data (probe health strengths / concerns). Reflect on size and seriousness of any health concerns cited and discuss current community health strengths.
5. Engage Town Hall participants to rank health needs (using 4 dots to cast votes on priority issues). Tally & rank top community health concerns cited.
6. Close meeting by reflecting on the health needs / community voting results. Inform participants on “next steps.”

At the end of each Town Hall session, VVV encouraged all community members to continue to contribute ideas to both hospital / 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 strengths & items to change or improve.

## Community Health Needs Assessment Town Hall Meeting – Butler County KS on behalf of Susan B. Allen Memorial Hospital



**Vince Vandehaar, MBA**  
**VVV Consultants LLC**  
Principal / Adjunct Full Professor

Olathe, Kansas 66061  
VVV@VandehaarMarketing.com  
913-302-7264

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## I. Introduction:

### Background and Experience



**Vince Vandehaar, MBA**

VVV Consultants LLC - Principal Consultant

Olathe, KS 913 302-7264

- Professional Consulting Services: Strategic Planning, Marketing Management, Business Research & Development
- Focus: Strategy, Research, Deployment
- 30+ years of experience with Tillinghast, BCBSKC, Saint Luke's

**Adjunct Full Professor - Marketing & MHA 31+ years**

- Avila University
- Webster University
- Rockhurst University

**Tessa Taylor, BBA BA - Associate Consultant**

- University of Wisconsin Whitewater
- AMA Chapter President (2 years)

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## Community Health Needs Assessment (CHNA) Town Hall Discussion Agenda

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

2

## 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

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## I. Introductions: A Conversation with the Community

Community members and organizations invited to CHNA Town Hall

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

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

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

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

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## Purpose—Why Conduct a CHNA?

- To determine health-related trends and issues of the community
- To understand / evaluate health delivery programs in place.
- To meet Federal requirements – both local hospital and health department
- To develop strategies to address unmet health needs (4-6 weeks after Town Hall)

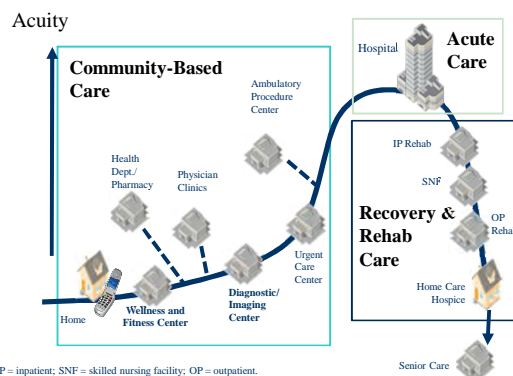
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## II. Review CHNA Definition

- 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.)
- A 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.

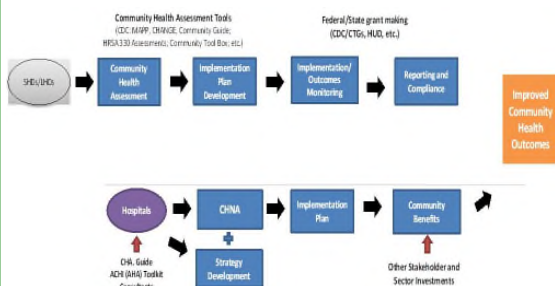
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## Future System of Care—Sg2



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## Community Health Needs Assessment Joint Process: Hospital & Local Health Department



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## III. Review Current County Health Status: Secondary Data by 10 Tab Categories & State Rankings

Trends: Good Same Poor

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

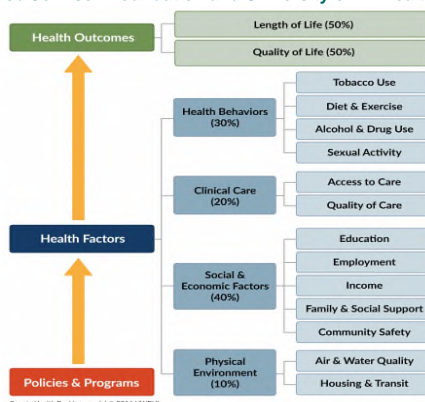
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## II. IRS Hospital CHNA Written Report Documentation

- a description of the community served
- a description of the CHNA process
- the identity of any and all organizations and 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

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



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

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## 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 _____

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## IV. Collect Community Health Perspectives

### Ask your opinion. Your thoughts?

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

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## Community Health Needs Assessment

### Questions; Next Steps?

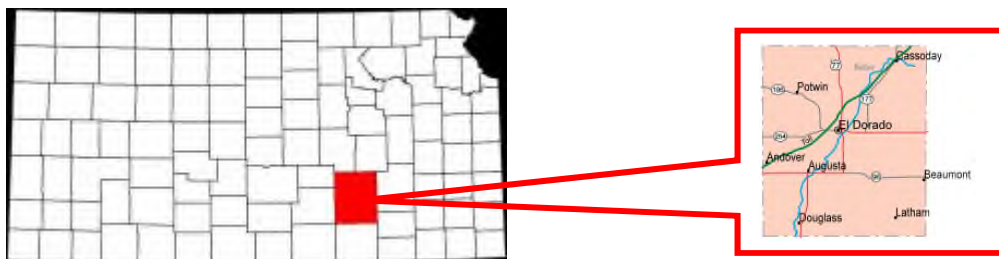
VVV Consultants LLC  
VVV@VandehaarMarketing.com  
(913) 302-7264

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## II. Methodology

**d) Community Profile (A Description of Community Served)**

## **Butler County, Kansas Community Profile**



**The population of Butler County was estimated to be 69,056 citizens** in 2018 and a population density of 48 persons per square mile. Butler County's major cities are: Andover, Augusta, Benton, Cassoday, Douglass, El Dorado, Elbing, Latham, Leon, Potwin, Rosalia, Rose Hill, Towanda and Whitewater.

## Butler County (KS) Pubic Airports<sup>1</sup>

Name	USGS Topo Map
Airpark Estates Airport	Augusta
Alley Field	Gordon
Augusta Municipal Airport	Sante Fe Lake
Beaumont Hotel Airport	Beaumont
Brady-Pippin Airport	Sante Fe Lake
Butler Airpark	Douglass
Daniel's Landing	Sante Fe Lake
El Dorado / Captain Jack Thomas Memorial Airport	El Dorado
Foster Field	Pontiac
Heape Field	Augusta
Lloyd Stearman Field	Benton
LMN 120 Airport	Gordon
Patty Field	El Dorado
Pilot Pointe Estates Airport	Udall
Riverbend Ranch Airport	Leon
Sills Air Park	Sante Fe Lake
Taylor Airport	Benton

<sup>1</sup> <https://kansas.hometownlocator.com/features/cultural.class.airport.scfips.20015.cfm>

## Schools in Butler County (KS): Public Schools<sup>2</sup>

Name	Address	Phone	Levels
Andover Central High	603 E Central Andover, KS 67002	316-218-4722	9-12
Andover Central Middle	903 E Central Andover, KS 67002	316-218-4710	6-8
Andover High	1744 N Andover Rd Andover, KS 67002	316-218-4600	9-12
Andover Middle	1628 N Andover Rd Andover, KS 67002	316-218-4610	6-8
Augusta Middle	1001 State St Augusta, KS 67010	316-775-6383	6-8
Augusta Sr High	2020 Ohio Augusta, KS 67010	316-775-5461	9-12
Bluestem Elem	501 Mill Rd Leon, KS 67074	316-742-3291	PK-6
Bluestem Jr/Sr High	500 Bluestem Dr Leon, KS 67074	316-742-3281	7-12
Circle Benton Elem	350 S Kansas St Benton, KS 67017	316-778-1151	PK-6
Circle High	905 Main Towanda, KS 67144	316-541-2277	9-12
Circle Middle	14697 Sw 20th Benton, KS 67017	316-778-1470	7-8
Circle Oil Hill Elem	2700 W 6th Ave El Dorado, KS 67042	316-321-9515	PK-6
Circle Towanda Elem	516 North St Towanda, KS 67144	316-536-2281	PK-6
Cottonwood Elem	1747 N Andover Rd Andover, KS 67002	316-218-4620	K-5
Douglass High	910 E First Douglass, KS 67039	316-747-3310	9-12
El Dorado High	401 McCollum Rd El Dorado, KS 67042	316-322-4810	9-12
El Dorado Middle	440 E Wildcat Way El Dorado, KS 67042	316-322-4820	6-8
Ewalt Elem	2340 Greyhound Dr Augusta, KS 67010	316-775-0056	PK-5
Flinthills High	806 Se Rosalia Rd Rosalia, KS 67132	620-476-2215	9-12

<sup>2</sup> <https://kansas.hometownlocator.com/schools/sorted-by-county,n,butler.cfm>

### Schools in Butler County (KS): Public Schools (Continued)<sup>3</sup>

Name	Address	Phone	Levels
Flinthills Intermediate	806 Se Rosalia Rd Rosalia, KS 67132	620-476-2218	3-6
Flinthills Middle	806 Se Rosalia Rd Rosalia, KS 67132	620-476-2218	7-8
Flinthills Primary	200 N Washington Cassoday, KS 66842	620-735-4428	K-2
Frederic Remington High	8850 Nw Meadowlark Rd Whitewater, KS 67154	316-799-2123	9-12
Garfield Elem	1053 Osage Augusta, KS 67010	316-775-6601	PK-5
Grandview Elem	1300 Lawndale St El Dorado, KS 67042	316-322-4830	PK-5
Jefferson Elem	1216 W Third El Dorado, KS 67042	316-322-4840	PK-1
Leonard C Seal Elem	230 S Chestnut Douglass, KS 67039	316-747-3350	PK-5
Lincoln Elem	522 West 5th St El Dorado, KS 67042	316-322-4850	2-5
Lincoln Elem	1812 Cron Augusta, KS 67010	316-775-5415	PK-5
Marvin Sisk Middle	950 E 1st Douglass, KS 67039	316-747-3340	6-8
Meadowlark Elem	1411 N Main Andover, KS 67002	316-218-4630	K-5
Prairie Creek Elem	654 YMCA Dr Andover, KS 67002	316-218-4630	PK-5
Remington Elem at Potwin	200 E Ellis Potwin, KS 67123	620-752-3239	PK-4
Remington Middle	316 E Topeka Whitewater, KS 67154	316-799-2131	5-8
Rober M. Martin Elem	2342 N 159th St East Wichita, KS 67228	316-218-4720	K-5
Robinson Elem	1301 Helen Augusta, KS 67010	316-775-7561	PK-5
Rose Hill High	710 S Rose Hill Rd Rose Hill, KS 67133	316-776-3360	9-12
Rose Hill Intermediate	409 E School St Rose Hill, KS 67133	316-776-3300	3-5
Rose Hill Middle	212 Rocket Dr Rose Hill, KS 67133	316-776-3320	6-8
Rose Hill Primary	409 E School St Rose Hill, KS 67133	316-776-3340	PK-2
Sunflower Elem	616 E Douglas Andover, KS 67002	316-218-4730	PK-5

<sup>3</sup> <https://kansas.hometownlocator.com/schools/sorted-by-county,n,butler.cfm>



Demographics - Butler Co (KS)										
Zip	Name	ST	County	Population			Households			Per Capita
				YR 2018	YR 2023	Chg.	YR 2018	YR 2023	Size	Inc 18
66842	Cassoday	KS	BUTLER	343	354	3.2%	142	146	2	\$28,361
67002	Andover	KS	BUTLER	15801	16883	6.8%	5475	5857	3	\$35,877
67010	Augusta	KS	BUTLER	14145	14399	1.8%	5470	5572	3	\$27,766
67012	Beaumont	KS	BUTLER	87	86	-1.1%	37	37	2	\$31,154
67017	Benton	KS	BUTLER	2371	2552	7.6%	861	926	3	\$32,500
67039	Douglass	KS	BUTLER	3336	3382	1.4%	1228	1245	3	\$28,593
67041	Elbing	KS	BUTLER	279	288	3.2%	92	94	3	\$22,561
67042	El Dorado	KS	BUTLER	17982	18230	1.4%	6587	6686	2	\$25,978
67072	Latham	KS	BUTLER	232	230	-0.9%	106	105	2	\$32,978
67074	Leon	KS	BUTLER	1681	1674	-0.4%	652	651	2	\$28,646
67123	Potwin	KS	BUTLER	876	905	3.3%	331	342	3	\$29,124
67132	Rosalia	KS	BUTLER	410	407	-0.7%	149	148	3	\$26,298
67133	Rose Hill	KS	BUTLER	6780	7024	3.6%	2317	2404	3	\$33,191
67144	Towanda	KS	BUTLER	3089	3244	5.0%	1113	1167	3	\$31,792
67154	Whitewater	KS	BUTLER	1530	1579	3.2%	532	549	3	\$31,332
Totals				68,942	71,237	3.3%	25,092	25,929	3	\$31,332
Zip	Name	ST	County	Pop18 65+	Pop18 <=18	Females	White	Black	Amer. Ind.	Hisp.
66842	Cassoday	KS	BUTLER	61	96	164	328	5	3	7
67002	Andover	KS	BUTLER	1859	4937	8096	14307	197	87	885
67010	Augusta	KS	BUTLER	2441	3753	7233	13152	78	162	640
67012	Beaumont	KS	BUTLER	16	23	42	83	0	1	3
67017	Benton	KS	BUTLER	402	637	1176	2223	37	17	96
67039	Douglass	KS	BUTLER	561	867	1671	3181	20	29	94
67041	Elbing	KS	BUTLER	50	79	134	268	4	2	6
67042	El Dorado	KS	BUTLER	2929	4553	8526	15831	1019	194	1208
67072	Latham	KS	BUTLER	41	57	111	219	1	3	8
67074	Leon	KS	BUTLER	297	378	784	1559	37	24	62
67123	Potwin	KS	BUTLER	161	214	437	807	3	12	39
67132	Rosalia	KS	BUTLER	71	104	200	388	2	6	13
67133	Rose Hill	KS	BUTLER	1044	1637	3424	6348	33	43	257
67144	Towanda	KS	BUTLER	460	848	1520	2904	13	30	100
67154	Whitewater	KS	BUTLER	297	367	756	1435	9	16	47
Totals				10,690	18,550	34,274	63,033	1,458	629	3,465
Percentages				15.5%	26.9%	49.7%	91.4%	2.1%	0.9%	5.0%

## **III. Community Health Status**

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[VVV Consultants LLC]

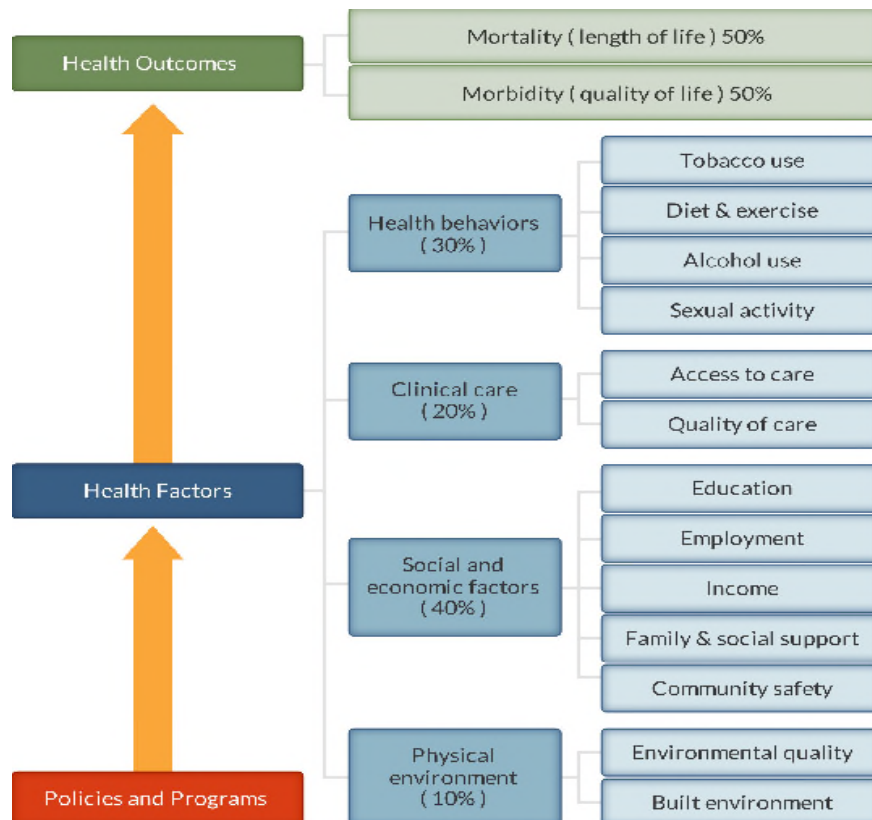
### III. Community Health Status

#### a) Historical Health Statistics- Secondary Research

##### Health Status Profile

This section of the CHNA reviews published quantitative community health indicators from public health sources and results of community primary research. To produce this profile, VVV Consultants LLC staff analyzed & trended 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 2019 RWJ County Health Rankings and conversations from Town Hall participants. Each table published reflects a Trend column, with GREEN denoting growing/high performance indicators, YELLOW denoting minimal change/average performance indicators and RED denoting declining/low performance indicators.

Note: The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to release annual *County Health Rankings*. As seen below, RWJ's model use a number of health factors to rank each county.>



County Health Rankings model ©2012 UWPHI

## National Research – Year 2019 RWJ Health Rankings:

#	KS Rankings - 105 Counties	Definitions	Butler Co KS	TREND	KS Rural 25 Norm
1	Health Outcomes		33		52
2	Mortality	Length of Life	27		54
3	Morbidity	Quality of Life	56		48
4	Health Factors		55		57
5	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	80		59
6	Clinical Care	Access to care / Quality of Care	22		45
7	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	40		57
8	Physical Environment	Environmental quality	93		66
KS Rural 25 Norm includes the following counties: Russell, Ellsworth, Rice, Lincoln, McPherson, Butler, Cowley, Lyon, Greenwood, Marion, Harvey, Montgomery, Labette, Chautauqua, Wilson, Dickinson, Clay, Marion, Morris, Atchison, Jackson, Brown, Jefferson, Nemaha, Doniphan, Pottawatomie.					
<a href="http://www.countyhealthrankings.org">http://www.countyhealthrankings.org</a> , released 2019					

## PSA Secondary Research:

When studying community health, it's important to document health data by topical areas for primary service area (PSA). Below is a summary of key findings organized by subject area.

### Tab 1 Demographic Profile

Understanding population and household make-up is vital to start CHNA evaluation.

Tab	Health Indicator	Butler Co KS	Trend	State of KS	KS Rural 25 Norm	Source
1a	a Population estimates, July 1, 2017, (V2017)	66,878		2,913,123	17,601	People Quick Facts
	b Population, percent change - April 1, 2010 (estimates base) to July 1, 2017, (V2017)	1.5%		2.1%	-3.3%	People Quick Facts
	c Population per square mile, 2010	46		35	24	Geography Quick Facts
	d Persons under 5 years, percent, July 1, 2017, (V2017)	6.1%		6.6%	6.0%	People Quick Facts
	e Persons 65 years and over, percent, July 1, 2017, (V2017)	14.7%		15.4%	19.9%	People Quick Facts
	f Female persons, percent, July 1, 2017, (V2017)	49.8%		50.2%	49.9%	People Quick Facts
	g White alone, percent, July 1, 2017, (V2017)	93.0%		86.5%	92.6%	People Quick Facts
	h Black or African American alone, percent, July 1, 2017	2.0%		6.2%	1.9%	People Quick Facts
	i Hispanic or Latino, percent, July 1, 2017, (V2017)	4.8%		11.9%	5.6%	People Quick Facts
	j Foreign born persons, percent, 2013-2017	2.4%		7.0%	2.0%	People Quick Facts
	k Language other than English spoken at home, percent of persons age 5 years+, 2013-2017	3.4%		11.5%	3.9%	People Quick Facts
	l Living in same house 1 year ago, percent of persons age 1 year+, 2013-2017	85.9%		83.7%	85.8%	People Quick Facts
	m Children in single-parent households, percent, 2013-2017	23.0%		29.0%	27.6%	County Health Rankings
	n Total Veterans, 2012-2016	4,634		185,292	1,246	People Quick Facts

### Tab 2 Economic/Business Profile

Monetary resources will (at times) drive health “access” and self-care.

Tab	Health Indicator	Butler Co KS	Trend	State of KS	KS Rural 25 Norm	Source
2	a Per capita income in past 12 months (in 2017 dollars), 2013-2017	\$28,478		\$29,600	\$25,530	People Quick Facts
	b Persons in poverty, percent	10.1%		11.9%	12.6%	People Quick Facts
	c Total Housing units, July 1, 2017, (V2017)	26,914		1,273,742	8,146	People Quick Facts
	d Total Persons per household, 2013-2017	2.6		2.5	2.4	People Quick Facts
	e Severe housing problems, percent, 2011-2015	11.0%		13.0%	10.6%	County Health Rankings
	f Total of All firms, 2012	5,064		239,118	1,474	Business Quick Facts
	g Unemployment, percent, 2017 (Percentage of population ages 16 and older unemployed but seeking work)	3.8%		3.6%	3.7%	County Health Rankings
	h Food insecurity, percent, 2016	12.0%		13.0%	13.1%	County Health Rankings
	i Limited access to healthy foods, percent, 2015	7.0%		8.0%	8.0%	County Health Rankings
	j Low income and low access to store, percent, 2015 (% of people in a county with low income and living more than 10 miles from a supermarket or large grocery store if in a rural area.)	6.8%		NA	8.1%	U.S. Department of Agriculture - Food Environment Atlas
	k Long commute - driving alone, percent, 2013-2017 (Percentage that commute more than 30 minutes)	33.0%		82.0%	24.9%	County Health Rankings

### Tab 3 Educational Profile

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

Tab	Health Indicator	Butler Co KS	Trend	State of KS	KS Rural 25 Norm	Source
3	a Children eligible for free or reduced price lunch, percent, 2016-2017	28.0%		48.0%	50.3%	County Health Rankings
	b High school graduate or higher, percent of persons age 25 years+, 2013-2017	92.3%		90.5%	90.9%	People Quick Facts
	c Bachelor's degree or higher, percent of persons age 25 years+, 2013-2017	29.3%		32.3%	22.1%	People Quick Facts

### Tab 4 Maternal and Infant Profile

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

#	Criteria - Vital Statistics	Butler Co KS	Trend	Kansas	KS Rural 25 Norm
a	Total Live Births, 2013	751		38,805	214
b	Total Live Births, 2014	749		39,193	214
c	Total Live Births, 2015	744		39,126	214
d	Total Live Births, 2016	757		38,048	210
e	Total Live Births, 2017	763		36,464	202
f	Total Live Births, 2013- 2017 - Five year Rate (per 1,000 pop)	11.3		13.2	11.6

Source: Kansas Department of Health and Environment

**Tab 4 Maternal and Infant Profile (Continued)**

Tab	Health Indicator	Butler Co KS	Trend	State of KS	KS Rural 25 Norm	Source
4	a Percent of Births Where Prenatal Care began in First Trimester, 2015-2017	84.8%		81.2%	80.6%	Kansas Health Matters
	b Percentage of Premature Births, 2015-2017	10.1%		9.1%	9.2%	Kansas Health Matters
	c Percent of Infants up to 24 months that received full Immunizations, 2016-2017	71.4%		69.2%	71.1%	Kansas Health Matters
	d Percent of Births with Low Birth Weight, 2015-2017	6.8%		7.1%	6.6%	Kansas Health Matters
	e Percent of WIC Mothers Breastfeeding Exclusively, percent, 2017	15.3%		13.8%	17.1%	Kansas Health Matters
	f Percent of all Births Occurring to Teens (15-19), 2015-2017	6.0%		5.9%	6.0%	Kansas Health Matters
	g Percent of Births Occurring to Unmarried Women, 2015-2017	30.7%		35.9%	33.9%	Kansas Health Matters
	h Percent of births Where Mother Smoked During Pregnancy, 2015-2017	14.3%		10.5%	15.1%	Kansas Health Matters

**Tab 5 Hospitalization/Provider Profile**

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

Tab	Health Indicator	Butler Co KS	Trend	State of KS	KS Rural 25 Norm	Source
5	a Primary care physicians (MD or DO only) Ratio of population to PCP, 2019	1,460:1		1,310:1	1,966:1	County Health Rankings
	b Preventable hospital stays, 2016 (lower the better) Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees	4,036		4,078	4,459	County Health Rankings
	c Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)	80.0%		77.0%	79.7%	CMS Hospital Compare, 10/1/2015-9/30/2016
	d Patients Who Reported Yes, They Would Definitely Recommend the Hospital	76.0%		77.0%	76.6%	CMS Hospital Compare, 10/1/2015-9/30/2016
	e Average Time Patients Spent in the Emergency Dept. Before They Were Seen by a HC Professional (Minutes)	35		40	42	CMS Hospital Compare, 10/1/2015-9/30/2016

**Tab 5 Hospitalization/Provider Profile (Continued)**

#	Inpatient - KHA PO103	Butler Co KS - ALL IP		
		FFY18	FFY17	FFY16
1	Total Discharges	5491	5422	5,336
2	Pediatric Age 0-17	277	242	290
3	Adult Medical/Surgical Age 18-44	533	563	539
4	Adult Medical/Surgical Age 45-64	1013	1064	1,043
5	Adult Medical/Surgical Age 65-74	758	730	712
6	Adult Medical/Surgical Age 75+	1140	1090	998
7	Psychiatric	299	255	260
8	Obstetric	754	769	757
#	Inpatient - KHA PO103	SBAMH IP Only		
		FFY18	FFY17	FFY16
1	Total Discharges	1599	1580	1,428
2	Pediatric Age 0-17	14	28	26
3	Adult Medical/Surgical Age 18-44	158	133	118
4	Adult Medical/Surgical Age 45-64	257	288	230
5	Adult Medical/Surgical Age 65-74	257	233	214
6	Adult Medical/Surgical Age 75+	520	489	458
7	Psychiatric	12	10	17
8	Obstetric	196	206	181
#	KHA TOT223E -	FFY18	FFY17	FFY16
	Total Emergency - Butler Co	18,614	18,831	18,408
	SBAMH Emergency Only	11,820	11,826	12,241
	% ER served in Butler Co. KS	63.5%	62.8%	66.5%

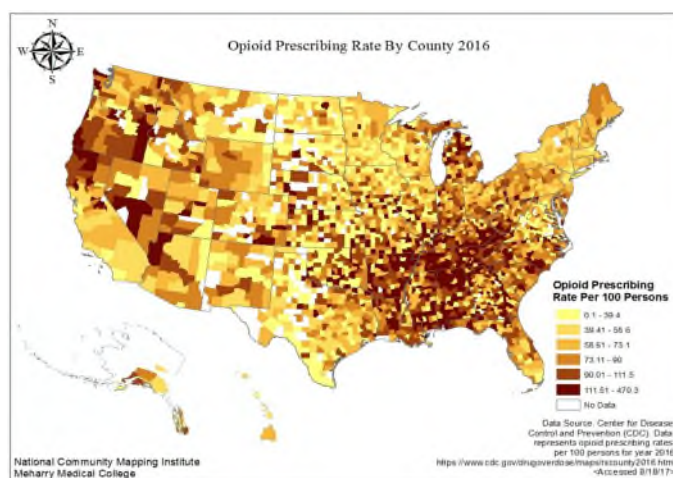
**Tab 6 Behavioral Profile**

Behavioral healthcare provides another important indicator of community health status.

Tab	Health Indicator	Butler Co KS	Trend	State of KS	KS Rural 25 Norm	Source
6	a Depression: Medicare Population, percent, 2017	17.6%		18.9%	17.7%	CMS (OEDA), Jan 2019
	b Age-adjusted Suicide Mortality Rate per 100,000 population, 2015-2017 (lower is better)	25.70		17.6	21.5	Kansas Health Matters
	c Poor mental health days, 2019	3.4		3.3	3.3	County Health Rankings

### Tab 6 Behavioral Profile (Continued)

Opioid Prescription Rate per 100 – 2017 (Butler = 88.9 and Kansas= 69.8)



### Tab 7a Risk Indicators & Factors Profile

Knowing community health risk factors and disease patterns can aid in the understanding next steps to improve health.

Tab	Health Indicator	Butler Co KS	Trend	State of KS	KS Rural 25 Norm	Source
7a	a Adult obesity, percent, 2019	35.0%		33.0%	35.6%	County Health Rankings
	b Adult smoking, percent, 2019	18.0%		17.0%	16.6%	County Health Rankings
	c Excessive drinking, percent, 2019	18.0%		17.0%	15.9%	County Health Rankings
	d Physical inactivity, percent, 2019	27.0%		24.0%	28.1%	County Health Rankings
	e Poor physical health days, 2019	3.1		3.1	3.2	County Health Rankings
	f Sexually transmitted infections, rate per 100,000, 2019	256.2		417.6	252.5	County Health Rankings



**Tab 7b Risk Indicators & Factors Profile (Continued)**

Tab	Health Indicator	Butler Co KS	Trend	State of KS	KS Rural 25 Norm	Source
7b	a Hypertension: Medicare Population, 2017	55.2%		55.2%	55.4%	CMS (OEDA), Jan 2019
	b Hyperlipidemia: Medicare Population, 2017	37.6%		37.1%	33.2%	CMS (OEDA), Jan 2019
	c Heart Failure: Medicare Population, 2017	15.7%		13.4%	14.1%	CMS (OEDA), Jan 2019
	d Chronic Kidney Disease: Medicare Pop, 2017	21.5%		21.8%	20.0%	CMS (OEDA), Jan 2019
	e COPD: Medicare Population, 2017	11.3%		11.9%	13.0%	CMS (OEDA), Jan 2019
	f Atrial Fibrillation: Medicare Population, 2017	8.9%		8.8%	9.1%	CMS (OEDA), Jan 2019
	g Cancer: Medicare Population, 2017	7.9%		8.1%	8.0%	CMS (OEDA), Jan 2019
	h Osteoporosis: Medicare Population, 2017	4.1%		6.1%	5.2%	CMS (OEDA), Jan 2019
	i Asthma: Medicare Population, 2017	3.1%		4.3%	3.7%	CMS (OEDA), Jan 2019
	j Stroke: Medicare Population, 2017	2.8%		3.1%	2.9%	CMS (OEDA), Jan 2019

**Tab 8a Uninsured Profile/Community Benefit**

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

Tab	Health Indicator	Butler Co KS	Trend	State of KS	KS Rural 25 Norm	Source
8	a Uninsured, percent, 2019 (Percentage of population under age 65 without health insurance)	8.0%		10.0%	10.0%	County Health Rankings

Source: Hospital Internal Records				
	Susan B Allen Memorial Hospital	YR 2018	YR 2017	YR 2016
a	Bad Debt	\$6,261,582	\$4,763,652	\$4,405,411
b	Charity Care	\$1,877,743	\$1,019,000	\$527,000

The Local Health Department Provides the following:

Source: Internal Records -				
	Community Dollars- Butler County (KS) Health Dept Operations	YR 2018	YR 2017	YR 2016
1	Child Care Inspections	\$12,013	\$11,363	\$11,070
2	Immunizations/Vaccine	\$42,416	\$55,743	\$27,374
	Counts	884	809	817
3	Screenings: Blood pressure / STD	\$1,984	\$2,047	\$1,109
	Counts	157	281	232
4	Vaccine - received from State	\$22,135	\$14,759	\$15,124
	Counts	398	241	241

### Tab 9 Mortality Profile

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

Tab	Health Indicator	Butler Co KS	Trend	State of KS	KS Rural 25 Norm	Source
9 a	Life Expectancy for Males, 2015	76.0		76.5	76.1	Kansas Health Matters
b	Life Expectancy for Females, 2015	80.0		81.0	80.7	Kansas Health Matters
c	Age-adjusted Cancer Mortality Rate per 100k population, 2015-2017 (lower is better)	181.6		158.8	165.8	Kansas Health Matters
d	Age-adjusted Heart Disease Mortality Rate per 100k population, 2015-2017 (lower is better)	170.0		157.2	181.9	Kansas Health Matters
e	Age-adjusted Chronic Lower Respiratory Disease Mortality Rate per 100k population, 2015-2017 (lower is better)	64.0		49.7	56.2	Kansas Health Matters
f	Alcohol-impaired driving deaths, percent, 2013-2017	22.0%		24.0%	28.0%	County Health Rankings

**Tab 9 Mortality Profile (Continued)**

Causes of Death by County of Residence, KS 2017	Butler Co KS	%	Trend	Kansas	%
Total Deaths 2017	635	100.0%		26,725	100.0%
All other diseases (residual)	77	12.1%		3,045	11.4%
Other chronic lower respiratory diseases	42	6.6%		1,677	6.3%
All other forms of chronic ischemic heart disease	42	6.6%		2,004	7.5%
Malignant neoplasms of trachea/bronchus/lung	35	5.5%		1,367	5.1%
All other forms of heart disease	27	4.3%		1,186	4.4%
Heart failure	27	4.3%		730	2.7%
Malignant neoplasms (bladder, pancreas, brain, liver, stomach, kidney, pelvis)	27	4.3%		1,327	5.0%
Cerebrovascular diseases	24	3.8%		863	3.2%
Acute myocardial infarction	21	3.3%		459	1.7%
Symptoms / signs / ill-defined conditions - except SIDS	21	3.3%		390	1.5%
Atherosclerotic cardiovascular disease, so described	19	3.0%		683	2.6%
Other and unspecified malignant neoplasms	17	2.7%		425	1.6%
Pneumonia	17	2.7%		864	3.2%
Diabetes mellitus	16	2.5%		522	2.0%
Renal failure	15	2.4%		886	3.3%
Alzheimer's disease	15	2.4%		342	1.3%

**Tab 10 Preventive Quality Measures Profile**

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

Tab	Health Indicator	Butler Co KS	Trend	State of KS	KS Rural 25 Norm	Source
10	a Access to exercise opportunities, percent, 2019	68.0%		80.0%	58.0%	County Health Rankings
	b Diabetes, Percentage of adults age 20+ diagnosed, 2015	10.0%		10.0%	11.0%	County Health Rankings
	c Mammography screening, percent, 2016	38.0%		43.0%	42.0%	County Health Rankings
	d Percent Annual Check-Up Visit with PCP	TBD		TBD	TBD	TBD
	e Percent Annual Check-Up Visit with Dentist	TBD		TBD	TBD	TBD
	f Percent Annual Check-Up Visit with Eye Doctor	TBD		TBD	TBD	TBD

## b) Online Research- Health Status

### PSA Primary Research:

For each CHNA Wave # 3 evaluation, a community stakeholder survey has been created and administered to collect “current” healthcare information for PSA. Response for Butler County online survey equals 161 residents. Below are two charts reviewing survey demographics.

**Chart #1 – Butler Co KS PSA Online Feedback Response N=161**

<b>Community Health Needs Assessment Wave #3</b>			
For reporting purposes, are you involved in or are you a .... ?	Butler Co N=161	Trend	Rural Norms 25 Co N=4,367
Business / Merchant	10.8%		9.7%
Community Board Member	8.6%		8.3%
Case Manager / Discharge Planner	5.4%		1.3%
Clergy	1.1%		1.4%
College / University	4.3%		2.0%
Consumer Advocate	6.5%		1.8%
Dentist / Eye Doctor / Chiropractor	0.0%		0.6%
Elected Official - City/County	0.0%		2.0%
EMS / Emergency	9.7%		2.5%
Farmer / Rancher	3.2%		5.9%
Hospital / Health Dept	17.2%		17.8%
Housing / Builder	1.1%		0.6%
Insurance	0.0%		1.0%
Labor	1.1%		2.3%
Law Enforcement	8.6%		1.7%
Mental Health	19.4%		2.7%
Other Health Professional	15.1%		10.4%
Parent / Caregiver	23.7%		15.4%
Pharmacy / Clinic	0.0%		2.2%
Media (Paper/TV/Radio)	0.0%		0.6%
Senior Care	1.1%		2.7%
Teacher / School Admin	14.0%		5.9%
Veteran	2.2%		2.8%
Unemployed / Other	19.4%		6.8%
Rural 25 Norms Include the following counties: Appanoose IA, Barton, Butler KS, Carroll IA, Cowley, Decatur IA, Edwards, Ellsworth, Fremont IA, Furnas NE, Marion MO, Hays, Hoxie, Jasper IA, Kiowa, Linn, Miami, Nemaha, Osborne, Page IA, Pawnee, Pike MO, Russell, Smith, Trego.			

**Chart #2 - Quality of Healthcare Delivery Community Rating**

<b>Community Health Needs Assessment Wave #3</b>			
How would you rate the "Overall Quality" of healthcare delivery in our community?	Butler Co N=161	Trend	Rural Norms 25 Co N=4,367
<b>Top Box %</b>	<b>7.5%</b>		<b>22.5%</b>
<b>Top 2 Boxes %</b>	<b>49.1%</b>		<b>67.5%</b>
Very Poor	0.6%		1.2%
Poor	11.8%		5.1%
Average	37.3%		25.8%
Good	41.6%		45.0%
Very Good	7.5%		22.5%

**Chart #3 – Overall Community Health Quality Trend**

<b>Community Health Needs Assessment Wave #3</b>			
When considering "overall community health quality", is it ...	Butler Co N=161	Trend	Rural Norms 25 Co N=4,367
Increasing - moving up	28.6%		42.9%
Not really changing much	42.2%		39.0%
Decreasing - slipping	17.4%		9.8%

**Chart #4 – Re-evaluate Past Community Health Needs Assessment Needs**

CHNA Wave #3		Butler Co N=161			
Past CHNAs health needs identified		Ongoing Problem			Pressing
#	Topic	Votes	%	Trend	RANK
1	Substance Abuse	94	80.3%		1
2	Poverty	87	74.4%		3
3	Mental Health Services	78	66.7%		2
4	Obesity	67	57.3%		7
5	Suicide	51	43.6%		5
6	Abuse / Violence	50	42.7%		6
7	Access to Healthcare	49	41.9%		4
8	Diabetes	41	35.0%		9
9	Nutrition and Wellness Education	40	34.2%		8
10	Cancer	32	27.4%		11
11	Prenatal Care	21	18.0%		13
12	STD Education	20	17.1%		14
13	Immunizations	19	16.2%		10
14	Urgent Care	14	12.0%		12

**Chart #5 - Community Health Needs Assessment “Causes of Poor Health”**

Community Health Needs Assessment Wave #3			
In your opinion, what are the root causes of "poor health" in our community?	Butler Co N=161	Trend	Rural Norms 25 Co N=4,367
Finance & Insurance Coverage*	26.1%		11.5%
Lack of awareness of existing local programs, providers, and services	14.5%		19.2%
Limited access to mental health assistance	16.7%		17.4%
Elder assistance programs	4.7%		9.9%
Lack of health & wellness education	10.4%		12.0%
Family assistance programs	7.5%		7.7%
Chronic disease prevention	6.3%		10.1%
Case management assistance	6.6%		6.5%
Other (please specify)	7.2%		5.8%

*Note: \*Finance & Insurance Coverage Norm is for 11 counties.*

**Chart #6 – Community Rating of HC Delivery Services (Perceptions)**

<b>CHNA Wave #3</b>	<b>Butler Co N=161</b>			<b>Rural Norms 25 Co N=4,367</b>	
<b>How would our community rate each of the following?</b>	<b>Top 2 boxes</b>	<b>Bottom 2 boxes</b>	<b>Trend</b>	<b>Top 2 boxes</b>	<b>Bottom 2 boxes</b>
<b>Ambulance Services</b>	83.8%	0.0%		85.3%	2.4%
<b>Child Care</b>	30.0%	20.0%		50.7%	12.1%
<b>Chiropractors</b>	56.0%	5.5%		74.9%	5.1%
<b>Dentists</b>	67.0%	11.6%		60.5%	16.3%
<b>Emergency Room</b>	51.8%	19.6%		69.1%	9.9%
<b>Eye Doctor/Optometrlist</b>	84.8%	1.8%		73.5%	7.9%
<b>Family Planning Services</b>	47.2%	10.4%		40.6%	17.7%
<b>Home Health</b>	43.6%	9.1%		57.6%	9.9%
<b>Hospice</b>	57.9%	3.7%		68.1%	7.3%
<b>Inpatient Services</b>	49.5%	13.1%		74.1%	6.2%
<b>Mental Health</b>	31.2%	33.9%		24.3%	36.2%
<b>Nursing Home</b>	28.4%	25.7%		44.4%	18.5%
<b>Outpatient Services</b>	62.4%	4.6%		75.1%	4.3%
<b>Pharmacy</b>	84.5%	2.7%		88.2%	2.4%
<b>Physician Clinics</b>	69.7%	6.4%		79.0%	4.4%
<b>Public Health</b>	47.2%	14.2%		61.9%	7.6%
<b>School Nurse</b>	53.3%	16.8%		62.3%	9.1%
<b>Specialists</b>	47.7%	15.6%		57.6%	12.9%

**Chart #7 – Community Health Readiness**

Community Health Needs Assessment Wave #3		Bottom 2 boxes	
Community Health Readiness is vital. How would you rate each of the following? (% Poor / Very Poor)	Butler Co N=161	Trend	Rural Norms 25 Co N=4,367
Early Childhood Development Programs	9.5%		11.0%
Emergency Preparedness	3.7%		8.4%
Food and Nutrition Services/Education	15.4%		13.8%
Health Screenings (asthma, hearing, vision, scoliosis)	11.1%		13.0%
Immunization Programs	9.2%		6.6%
Obesity Prevention & Treatment	46.3%		31.6%
Prenatal / Child Health Programs	10.4%		11.3%
Sexually Transmitted Disease Testing	13.0%		15.0%
Spiritual Health Support	15.1%		11.7%
Substance Use Treatment & Education	51.0%		33.1%
Tobacco Prevention & Cessation Programs	30.5%		27.9%
Violence Prevention	40.0%		31.8%
Women's Wellness Programs	21.9%		16.1%
WIC Nutrition Program	7.8%		6.8%
Poverty / Financial Health	44.9%		33.9%

Note: The calculated Norm for Poverty/Financial Health is for 7 counties.

**Chart #8 – Healthcare Delivery “Outside our Community”**

Community Health Needs Assessment Wave #3				Specialties:	
In the past 2 years, did you or someone you know receive HC outside of our community?	Butler Co N=161	Trend	Rural Norms 25 Co N=4,367	SPS	CTS
Yes	86.7%		81.3%	SURG	17
No	8.0%		13.7%	ORTH	13
I don't know	5.3%		5.0%	SPEC	11
				OBG	9
				DENT	7
				CARD	5
				PEDS	5
				PRIM	5

**Chart #8 – Healthcare Delivery “Outside our Community” (Continued)**

Community Health Needs Assessment Wave #3			
Are we actively working together to address community health?	Butler Co N=161	Trend	Rural Norms 25 Co N=4,367
Yes	39.3%		48.1%
No	18.8%		12.2%
I don't know	42.0%		39.1%



**Chart #9 – What Healthcare topics need to be discussed in future Town Hall Meeting**

<b>Community Health Needs Assessment Wave #3</b>			
What needs to be discussed further at our CHNA Town Hall meeting?	Butler Co N=161	Trend	Rural Norms 25 Co N=4,367
Abuse/Violence	6.0%		5.5%
Alcohol	4.1%		5.1%
Breast Feeding Friendly Workplace	2.7%		1.7%
Cancer	1.2%		4.0%
Diabetes	3.3%		4.2%
Drugs/Substance Abuse	12.9%		9.6%
Family Planning	2.3%		2.8%
Heart Disease	1.9%		3.1%
Lead Exposure	0.6%		0.9%
Mental Illness	11.6%		10.9%
Nutrition	4.6%		4.7%
Obesity	5.6%		7.9%
Environmental Health	3.3%		1.1%
Physical Exercise	3.9%		6.0%
Poverty	11.0%		7.2%
Lung Disease	1.0%		1.9%
Sexually Transmitted Diseases	2.1%		2.3%
Smoke-Free Workplace	0.6%		1.5%
Suicide	6.8%		7.3%
Teen Pregnancy	2.9%		3.2%
Tobacco Use	2.7%		3.6%
Vaccinations	1.7%		2.7%
Water Quality	1.7%		3.5%
Wellness Education	5.4%		6.1%

# **IV. Inventory of Community Health Resources**

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[VVV Consultants LLC]

Inventory of Health Services Butler County KS - 2019				
Cat	HC Services Offered in PSA: Yes / No	Hospital	HLTH Dept	Other
Clinic	Primary Care			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	Yes	
Hosp	Burn Care			
Hosp	Cardiac Rehabilitation	Yes		
Hosp	Cardiac Surgery			
Hosp	Cardiology services	Yes		
Hosp	Case Management	Yes		
Hosp	Chaplaincy/pastoral care services	Yes		
Hosp	Chemotherapy	Yes		
Hosp	Colonoscopy	Yes		
Hosp	Crisis Prevention			
Hosp	CT Scanner	Yes		
Hosp	Diagnostic Radioisotope Facility	Yes		
Hosp	Diagnostic/Invasive Catheterization			
Hosp	Electron Beam Computed Tomography (EBCT)			
Hosp	Enrollment Assistance Services			
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)	Yes		
Hosp	Fertility Clinic			
Hosp	FullField Digital Mammography (FFDM)	Yes		
Hosp	Genetic Testing/Counseling	Yes		
Hosp	Geriatric Services	Yes	Yes	
Hosp	Heart			
Hosp	Hemodialysis	Yes		
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	Yes		
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			
Hosp	Multislice Spiral Computed Tomography (<64 slice CT)	Yes		
Hosp	Multislice Spiral Computed Tomography (<64+ slice CT)	Yes		
Hosp	Neonatal			
Hosp	Neurological services			
Hosp	Obstetrics	Yes	Yes	
Hosp	Occupational Health Services	Yes		
Hosp	Oncology Services	Yes		
Hosp	Orthopedic services	Yes		
Hosp	Outpatient Surgery	Yes		
Hosp	Pain Management	Yes		
Hosp	Palliative Care Program			

Inventory of Health Services Butler County KS - 2019				
Cat	HC Services Offered in PSA: Yes / No	Hospital	HLTH Dept	Other
Hosp	Pediatric	Yes	Yes	
Hosp	Physical Rehabilitation	Yes		
Hosp	Positron Emission Tomography (PET)			
Hosp	Positron Emission Tomography/CT (PET/CT)	Yes		
Hosp	Psychiatric Services			
Hosp	Radiology, Diagnostic	Yes		
Hosp	Radiology, Therapeutic	Yes		
Hosp	Reproductive Health	Yes	Yes	
Hosp	Robotic Surgery			
Hosp	Shaped Beam Radiation System 161			
Hosp	Single Photon Emission Computerized Tomography			
Hosp	Sleep Center	Yes		
Hosp	Social Work Services	Yes		
Hosp	Sports Medicine	Yes		
Hosp	Stereotactic Radiosurgery	Yes		
Hosp	Swing Bed Services	Yes		
Hosp	Transplant Services			
Hosp	Trauma Center -Level IV			
Hosp	Ultrasound	Yes		
Hosp	Women's Health Services	Yes		
Hosp	Wound Care	Yes		
SR	Adult Day Care Program			
SR	Assisted Living			Yes
SR	Home Health Services	Yes		
SR	Hospice			Yes
SR	LongTerm Care			Yes
SR	Nursing Home Services			Yes
SR	Retirement Housing			Yes
SR	Skilled Nursing Care	Yes		
ER	Emergency Services	Yes		
ER	Urgent Care Center			
ER	Ambulance Services			Yes
SERV	Alcoholism-Drug Abuse			
SERV	Blood Donor Center			
SERV	Chiropractic Services			Yes
SERV	Complementary Medicine Services			
SERV	Dental Services			Yes
SERV	Fitness Center			Yes
SERV	Health Education Classes	Yes	Yes	
SERV	Health Fair (Annual)		Yes	Yes
SERV	Health Information Center		Yes	
SERV	Health Screenings	Yes	Yes	
SERV	Meals on Wheels	Yes		
SERV	Nutrition Programs	Yes	Yes	
SERV	Patient Education Center			
SERV	Support Groups			Yes
SERV	Teen Outreach Services			
SERV	Tobacco Treatment/Cessation Program		Yes	
SERV	Transportation to Health Facilities			Yes
SERV	Wellness Program			

## Providers Delivering Care in SBAMH PSA Butler County, Kansas - 2019

# of FTE Providers working in county	Officed DRs	Visiting DRs *	FTE Allied Staff
<b>Primary Care:</b>			
Family Practice	8.0		
Internal Medicine / Geriatrician	4.0		
Obstetrics/Gynecology	2.0		
Pediatrics	1.0		
<b>Medicine Specialists:</b>			
Allergy/Immunology	1.0		
Cardiology		6.0	
Dermatology		1.0	
Endocrinology			
Gastroenterology			
Oncology/RADO		9.0	
Infectious Diseases		1.0	
Nephrology		10.0	
Neurology		1.0	
Psychiatry			
Pulmonary		3.0	
Rheumatology			
<b>Surgery Specialists:</b>			
General Surgery / Colon / Oral	1.0		
Neurosurgery			
Ophthalmology		1.0	
Orthopedics	2.0	13.0	
Otolaryngology (ENT)		1.0	
Plastic/Reconstructive			
Thoracic/Cardiovascular/Vasc			
Urology			
<b>Hospital Based:</b>			
Anesthesia/Pain		1.0	
Emergency	19.0		
Radiology		32.0	
Pathology		6.0	
Hospitalist	12.0		
Neonatal/Perinatal			
Physical Medicine/Rehab			
Occ Medicine			
Podiatry	1.0	2.0	
Chiropractor			
Optometrist OD		3.0	
Dentists			
<b>TOTALS</b>	<b>51.0</b>	<b>90.0</b>	<b>0.0</b>

\* Total # of FTE Specialists serving community whose office outside PSA.

Visiting Specialists to SBAMH PSA - 2019					
SPECIALTY	Provider Name	Group Name	Office Location (City/State)	SCHEDULE	Annual Days FTE
Cardiology	Hasam Backdash	Heartland Cardiology	Wichita, KS	Wed 8am - 12pm	48
Cardiology	Aziz Maksoud	Cardiovascular Consultants of Kansas	Wichita, KS	Mon/Thurs 8am - 12pm	96
Dermatology	Steven Passman	Mid-Kansas Dermatology	Wichita, KS	Wed 8am - 12pm	48
Hematology/Oncology	Pavan Reddy	Cancer Center of Kansas	El Dorado Outreach, El Dorado, KS	Every Tuesday, 1 Thursday per month	60
Hematology/Oncology	Barbara Luder	Wichita Radiological Group	SBA Cancer Center, El Dorado, KS	Every Monday and Thursday	96
Neurology	Sarab Alseoudi	Advanced Neurology Consultants	Newton, KS	1st, 3rd, 5th Thurs 12pm - 4pm	36
Neurology	Matthew Henry	Abay Neuroscience Center	El Dorado Outreach, El Dorado, KS	Once a month	12
Nephrology	Jason Taylor	Kansas Nephrology Physicians	El Dorado Outreach, El Dorado, KS	Once a month	12
Pulmonology	John Flesher	Sunflower Pulmonary & Sleep Medicine	El Dorado Outreach, El Dorado, KS	Once a week	12
Pulmonology	Victor Salloum	Pulmonary & Sleep Consultants of Kansas	El Dorado Outreach, El Dorado, KS	Once a week	12
Pulmonology	Chloe Steinshouer	Pulmonary & Sleep Consultants of Kansas	El Dorado Outreach, El Dorado, KS	Once a week	12
Ophthalmology	Mark Wellemeyer	Greene Vision Group	Wichita, KS	Twice a Month	24
Otolaryngology	Glen Kubina	Mid-Kansas ENT	Wichita, KS	Twice a Month	24
Orthopedics	Rebecca Sanders	Kansas Spine & Specialty Pain Center	El Dorado Outreach, El Dorado, KS	Once a week	12
Urology	George Zakharia	Wichita Urology Group	Wichita, KS	Fri 8am - 12pm	48
Nephrology	Matthew Reed	Kansas Nephrology Physicians	El Dorado Outreach, El Dorado, KS	Once a month	12
Nephrology	Ushasri Challa	Wichita Nephrology Group	Wichita, KS	Consulting only	
Nephrology	Kenneth Kovach	Kansas Nephrology Physicians	Wichita, KS	Consulting only	
Nephrology	Paul Maraj	Wichita Nephrology Group	Wichita, KS	Consulting only	
Nephrology	Joseph N. Meouchy	Wichita Nephrology Group	Wichita, KS	Consulting only	
Nephrology	Ronnie Moussa	Wichita Nephrology Group	Wichita, KS	Consulting only	
Nephrology	Rayane Nassar	Kansas Nephrology Physicians	Wichita, KS	Consulting only	
Nephrology	Dennis L. Ross	Wichita Nephrology Group	Wichita, KS	Consulting only	
Nephrology	Bassem Rouphael	Kansas Nephrology Physicians	Wichita, KS	Consulting only	

# **SBAMH PRIMARY SERVICE AREA**

## **Healthcare Area Health Services**

### **Emergency Numbers**

<b>Police/Sheriff</b>	<b>911</b>
<b>Fire</b>	<b>911</b>
<b>Ambulance</b>	<b>911</b>

### **Non-Emergency Numbers**

<b>Butler County Sheriff</b>	<b>(316) 322-4254</b>
<b>Butler County Ambulance</b>	<b>(316) 321-9260</b>
<b>Greenwood County Police/Sheriff</b>	<b>(620) 583-5568</b>

### **Municipal Non-Emergency Numbers**

	<b>Police</b>	<b>Fire</b>
Andover	(316) 733-2911	(316) 733-1863
Augusta	(316) 775-4500	(316) 775-4500
Benton	(316) 778-1625	(316) 778-1155
Eureka	(620) 583-5568	(620) 583-6142
El Dorado	(316) 321-9120	(316) 322-4426
Leon	(316) 742-3438	(316) 745-3658
Rose Hill	(316) 776-0191	(316) 776-0401

**ADDICTION COUNSELING/SUPPORT**

7th Direction  
452-5562

Alanon (for families of alcoholics)  
322-0601

Alcoholics Anonymous  
321-2956

Alcohol and Drug Helpline  
1-800-645-8216

Alcohol and Drug Program of SE Kansas  
1-866-720-3784

Flint Hills Regional Prevention Center  
321-6628

Gambling/Substance Abuse  
1-800-522-4700

Journey to Recovery  
435-5101

**ADULT DAY CARE**

Covenant Care  
733-1700 or 655-9996

El Dorado Care and Rehabilitation  
316-321-4444

Premier Living by Warden  
945-2028

The Mapleton  
530-1253

Wheat State Manor  
799-2181

**ADVOCACY**

KanCare Ombudsman  
1-855-643-8180  
TTY 7-1-1

Kansas Advocates for Better Care  
1-800-525-1782  
Website [www.kabc.org](http://www.kabc.org)  
Email [info@kabc.org](mailto:info@kabc.org)

Long Term Care Ombudsman  
1-877-662-8362

Midwest Healthcare Advocates, LLC  
316-302-5112

RN Patient Advocates

371-1924  
Email [simone.khan@patientadvocates.com](mailto:simone.khan@patientadvocates.com)

**AGENCIES**

Aging & Disabilities Resource Center  
1-855-200-2372

Alzheimer's Association  
267-7333  
Toll-free 1-800-272-3900

Butler County Health Department  
321-3400  
Toll-free 1-800-940-6083

Butler County Department on Aging  
775-0500  
Toll-free 1-800-279-3655  
Website: [www.bucoks.com](http://www.bucoks.com)

Central Plains Area Agency on Aging  
660-5120  
Toll-free 1-800-367-7298

Kansas Department for Aging & Disabilities  
1-800-432-3535

Kansas Department for Health and Environment  
1-785-296-1500  
Website: [www.kdheks.gov](http://www.kdheks.gov)

Mid-Kansas Community Action Program  
775-3000  
Toll-free 1-800-281-6373

Resource Center for Independent Living  
322-7853  
Toll-free 1-800-960-7853

**ALZHEIMER'S CARE AND SERVICES**

Salvation Army  
321-4070

Alzheimer's Association (Central & Western KS Chapter)  
267-7333

Helpline  
1-800-272-3900

El Dorado Healthcare and Rehabilitation  
321-4444

Homestead of Augusta  
775-1000

Eureka Nursing Center  
620-583-7418



Homestead of El Dorado  
321-7777

Wheat State Manor  
799-2181

**APARTMENT COMPLEXES see Senior Apartment  
ASSISTED LIVING/RESIDENTIAL CARE  
FACILITIES**

Andover Court Assisted Living  
733-2662

Covenant Care  
733-1700 or 655-9996

Homestead of Augusta  
775-1000

Homestead of El Dorado  
321-7777

Fountainview Nursing & Rehab Center  
776-2194

Lakepoint of Augusta Assisted Living  
775-6333  
320-4140

Legend Senior Living – The Regent  
631-3900

The Mapleton  
530-1253

Peace of Mind Homes  
789-3897

Premier Living by Warden  
945-2028

Via Christi Village Broadmoor  
636-5101

Victoria Falls Assisted Living  
733-0334

Vintage Park at Eureka  
620-583-7473

**ASSISTIVE/ADAPTIVE EQUIPMENT**  
Broadway Home Medical  
264-8600

Cooper Drug  
775-2289

El Dorado True Care Pharmacy  
321-5330

Fittings for You  
945-4722

Medical Loan Closet of Wichita  
779-8989

Hart Pharmacy & Home Medical Equipment  
683-5330

Susan B. Allen Home Medical Equipment  
322-4549

Taylor Drug/Central Plains Lifts  
1-800-567-3733

**CAREGIVING**

Alzheimer's Association  
267-7333

Butler County Dept. on Aging  
775-0500  
Toll Free 1-800-279-3655

Prairie View (caregiver counseling)  
284-6400 or 634-4700

VA Med Ctr Extended Care/Caregiver Support  
1-855-260-3274

See also Support Groups and/or Respite and/or  
Websites

**CLOTHING**

Augusta Community Caring Center  
775-3342

Goodwill Industries (Andover)  
218-1800

Goodwill Industries (El Dorado)  
321-3125

House of Mercy  
322-7811  
321-6130

**COMMUNICATIONS ASSISTANCE**

20/20 Captioning Services  
1-866-554-2099  
Website  
[www.2020captioning.com](http://www.2020captioning.com)

American Sign Language (ASL) Interpreters  
785-840-5220

Audio-Reader  
1-800-772-8898

Caption Call  
1-877-447-2227  
Kansas Commission for the Deaf & Hard of Hearing

Interpreter Referral Service  
785-368-8034  
Toll-Free 1-800-432-0698

Telecommunications Access Program (TAP)  
785-234-0200  
TTY 785-234-0207  
Email: tap@kstelecom.com  
Website: www.kansastap.org

Kansas Relay Center (TDD Telephone)  
1-800-766-3777

## **COMPLAINTS**

Adult Abuse  
1-800-922-5330

Adult Abuse-Nursing Homes  
1-800-842-0078

Better Business Bureau  
263-3542  
Toll-Free 1-800-856-2417

Butler County Commissioners' Office  
322-4300

Central Plains Area Agency on Aging  
1-800-367-7298

Charitable Contributions complaints  
785-296-4564  
Website: www.KsCharityCheck.org

Consumer Protection  
Butler County Attorney  
321-6999

Attorney General's Hotline  
1-800-432-2310

Disability Rights Center of Kansas  
1-877-776-1541  
Email info@drckansas.org

HUD Fraud, Waste, and Abuse  
1-800-347-3735

KanCare Ombudsman  
1-855-643-8180  
TTY 7-1-1

Kansas Advocates for Better Care  
1-800-525-1782  
Website www.kabc.org  
Email info@kabc.org  
Kansas Dept. for Aging & Disabilities Complaints (re:  
home health, hospice, licensed care facilities)

1-800-842-0078  
Website: www.agingkansas.org

Kansas Dept of Commerce & Housing Hotline  
1-800-752-4422

Kansas Insurance Department  
1-800-842-2484  
TTY:1-800-437-7697

Kansas State Board of Mortuary Arts (funeral homes)  
785-296-3980

Long Term Care Ombudsman  
1-877-662-8362

Medicaid/Public Assistance Fraud  
1-866-551-6328

No Call List Registration  
1-888-382-1222  
Online: www.donotcall.gov

Office for Civil Rights (re: discrimination)  
1-800-368-1019  
TTY 1-800-537-7697

Office of Fair Housing/Urban Development  
1-800-669-9777

Postal Crime Hotline  
1-800-564-8896

Public Housing General Complaints  
1-800-955-2232

Section 8, Tenant based, complaints (Federal—HUD)  
1-800-669-9777

## **COUNSELING/SPECIAL NEEDS**

Butler County Victim-Witness Coordinator 321-  
6999

Counseling Centers (South Central Mental Health):  
2365 W. Central, El Dorado  
321-6036  
217 Ira Court, Andover  
733-5047  
2821 Brookside Dr, Augusta  
425-0073

Harry Hynes Memorial Hospice, Bereavement  
Program  
265-9441  
Toll-free 1-800-767-4965  
The Doan Center for Counseling  
322-7057

Prairie View  
284-6400  
Toll-free 1-800-362-0180

Prairie View 24 hr Psychiatric Emergency  
1-800-992-6292

SafeHouse/Family Life Center  
321-7104  
115 S. Washington, El Dorado  
1-800-870-6967

### **DENTAL**

Delta Dental of Kansas (dental insurance)  
1-800-234-3375

Dental Hygiene Clinic (Wichita State University)  
978-3614

Donated Dental Program  
1-888-870-2066

E.C. Tyree Health & Dental Clinic  
681-2545

Grace Med  
866-2000

Hunter Health Clinic, Inc.  
269-0677

### **EDUCATION**

Andover Library  
558-3500

Augusta Public Library  
775-2681

Bradford Memorial Library  
321-3363

Butler County Community College  
321-2222

Butler County Extension Office  
321-9660

Talking Books, South Central Kansas  
1-800-234-0529

Wichita Public Library  
261-8500

YMCA (Andover) 733-9622  
YMCA (El Dorado) 320-9622

### **EMERGENCY/CRISIS**

Adult Abuse

1-800-922-5330

Adult Abuse – Nursing Homes  
1-800-842-0078  
Toll-Free 1-800-279-3655

Disaster Distress Helpline  
1-800-965-5990

Domestic Violence & Rape Hotline  
321-7491

Domestic Violence Hotline (National)  
1-800-799-SAFE

Kansas Crisis Hotline  
1-888-363-2287

Natural Disaster Assistance, American Red Cross  
321-2308

Prairie View 24 hr Psychiatric Emergency  
1-800-992-6292

Safehouse for Battered Women  
321-7104

Suicide Hotline for Kansas  
1-800-784-2433  
TTY: 1-800-799-4889

### **FINANCIAL MANAGEMENT ASSISTANCE**

Consumer Credit Counseling  
265-2000  
Toll-free 1-888-257-6899

### **EMPLOYMENT**

Butler Workforce Center  
321-2350

Foster Grandparent Program (Butler County Dept. on  
Aging)  
775-0500  
Toll-free 1-800-279-3655

Goodwill Industries  
744-9291

Independent Living Center of South Central Kansas,  
Inc. 942-6300

Kansas Works [www.kansasworks.com](http://www.kansasworks.com)

Older Kansans Employment Program (OKEP)  
1-800-794-2440  
SER Jobs for Progress  
264-5372

Senior Companion Program  
685-1821

Senior Employment Program (Senior Services, Inc.)  
267-0302

Senior Community Service Employment Program  
771-6750

Vocational Rehabilitation Services SRS  
337-7230

### **FOOD/MEALS**

12 Baskets 390-8727

Andover Community Food Bank  
733-1664

Andover Senior Center  
733-4441

Augusta Community Caring Center  
775-3342

Andover Senior Center  
733-4441

Bountiful Baskets Food Co-Op  
website: [www.bountifulbaskets.org](http://www.bountifulbaskets.org)

Commodity Supplemental Food Program  
775-0500

Department for Children & Families  
321-4200

Douglass Senior Center  
746-3227

El Dorado Senior Center  
321-0142

Freezer Meals (Butler County Dept. on Aging)  
775-0500  
Toll-free: 1-800-279-3655  
Website: <https://www.bucoks.com/141/Aging>

Friendship Meals (Aging Projects, Inc.)  
316-688-9392

Or Heritage House Apt. service coordinator  
316-321-3291

Granny's Healthy Kitchen  
316-323-0861  
Website: [GrannysHealthyKitchen.com](http://GrannysHealthyKitchen.com)

Leon Senior Center

745-9200

Meals for the Hungry  
320-1504 (Linda)

Meals on Wheels of El Dorado  
322-4570

Meals on Wheels of Augusta  
775-6333

Mom's Meals  
1-866-971-6667  
Email [info@momsmeals.com](mailto:info@momsmeals.com)

### **GRANDPARENTS ASSISTANCE**

Kansas Children's Service League  
1-877-530-5275  
Website: [www.kcsl.org](http://www.kcsl.org)

Grandparents as Caregivers Program  
321-4200

### **HEARING IMPAIRMENT SERVICES**

Caption Call  
1-877-557-2227

Clears Captions  
816-602-0838

EarCare Hearing Aid Centers  
1-800-828-4442

Hear Now (Starkey Hearing Foundation)  
1-800-328-8602  
Email [hearnow@starkey.com](mailto:hearnow@starkey.com)  
Website [www.starkeyhearingfoundation.org](http://www.starkeyhearingfoundation.org)

Hearing Health Care Mid-Kansas  
618-0331  
Toll Free: 1-866-243-7621

Kansas Commission for Deaf & Hard of Hearing  
1-800-432-0698

Kansas Telecommunications Access Program  
785-234-0200  
TTY: 785-234-2304

Talking Books Service  
1-800-362-0699

Wichita Miracle-Ear  
681-7446

Wichita State University Language/Hearing Clinic  
978-3289  
See also "Communications Assistance"

**HOME CARE & NURSING CARE**

For additional listings, see "Home Health Services" in the "Yellow Pages" of the telephone directory.

Amedysis Home Care 945-9797

Always There Senior Care 946-9222

Always Best Care 494-2218

Angels Care Home Health 636-4000

Associated Home Care 320-0473

First Light Home Care 776-4685

Heartland Home Health & Hospice 788-7626

Home Health of Kansas 869-0015

Home Instead 612-7541

Interim Healthcare 265-4295

Mercy Home Care 733-9400

Right at Home 721-6001

Serenity Home Health, LLC 866-2929

Susan B. Allen Home Health 322-4540

Trust Home Care 683-7700

Visiting Angels 928-2196

Visiting Physicians 221-2184

**HOMELESS SERVICES**

Butler Homeless Initiative  
321-1454

Catholic Charities  
316-308-4845

Community Aid Network (El Dorado)  
321-3266

Mid-Kansas Community Action Program  
775-3000  
Toll Free 1-800-281-6373

National Call Center for Homeless Veterans  
1-877-424-3838

SafeHouse/Family Life Center  
321-7104  
115 S. Washington, El Dorado

1-800-870-6967

Salvation Army  
321-4070

**HOMEMAKER/PERSONAL CARE PROGRAMS**

Butler County Department on Aging  
775-0500  
Toll-Free 1-800-279-3655

**HOME REPAIR (MINOR REPAIR & WEATHERIZATION)**

Butler County Dept. on Aging  
775-0500  
Toll-Free 1-800-279-3655  
Website: [www.bucoks.com](http://www.bucoks.com)

East Central KS Community Action Agency (ECKAN)  
785-242-6413  
Toll-Free: 1-888-833-0832

Kansas Rural Development  
(785) 271-2700

Mennonite Housing  
942-4848

Resource Center for Independent Living  
322-7853  
Toll-free: 1-800-960-7853

**HOSPICE AGENCIES**

Amedysis (Total) Home Care and Hospice  
945-9797  
Toll-free: 1-866-708-6560

Encompass Home Health & Hospice  
267-4663

Good Shepherd Hospice  
616-2277  
Toll-free: 1-877-598-2277

Kindred Hospice  
559-2049  
Toll-free: 1-866-403-0097

Harry Hynes Memorial Hospice  
265-9441

Heart & Soul Hospice  
652-6212

Heartland Home Health & Hospice  
788-7626

Home Health & Hospice of Kansas  
869-0155

Progressive Home Health & Hospice  
249-1194

Interim Healthcare and Hospice  
265-4295

Rivercross Hospice  
260-9690  
Toll-free: 1-877-291-9690

Serenity Hospice  
687-2273

### **HOSPITALS/CLINICS**

Andover Family Medicine  
733-5120

Augusta Family Practice  
775-9191

Butler County Family Medicine  
320-3100

Butler County Surgical Group  
321-5630

Butler County Health Department  
321-3400  
Toll-Free: 1-800-940-6083

Cancer Center of Kansas (Susan B. Allen Hospital)  
889-0096

El Dorado Clinic PA  
321-2010

El Dorado Sports & Family Medicine Clinic  
320-9191

Kansas Assoc. for Medically Underserved  
1-785-233-8483

Kansas Medical Center, LLC  
300-4000

Preferred Medical Specialists of Andover  
733-1331

Susan B. Allen Immediate Care  
558-5575

El Dorado Internal Medicine  
321-2100

Veterans Administration  
Main Hospital  
685-2221  
Outpatient Clinic

685-2221, ext. 3331

Via Christi Clinic - Andover  
733-1331

Women's Clinic, P.A.  
321-7596

### **HOUSING COST ASSISTANCE**

Habitat for Humanity  
321-5858  
HUD Resource Locator (mobile app & website)  
[resources.hud.gov](https://resources.hud.gov)

Butler County Dept. on Aging  
775-0500  
Toll-Free: 1-800-279-3655

Mennonite Housing Rehabilitation Services  
942-4848

Mid-Kansas Community Action Program  
775-3000  
Toll-Free: 1-800-281-6373

Wichita Housing Authority (Section 8 Housing)  
462-3700

### **INFORMATION & REFERRAL SERVICES**

Aging and Disabilities Resource Center  
1-855-200-2372

Andover Public Library 558-3500

Augusta Public Library 775-2681

Bradford Memorial Library 321-3363

Butler County Department on Aging  
775-0500  
Toll-Free 1-800-279-3655  
Email [DeptonAging@bucoks.com](mailto:DeptonAging@bucoks.com)  
Website: <https://www.bucoks.com/141/Aging>

Mid-Kansas Community Action Program  
775-3000  
Toll-Free 1-800-281-6373

Resource Center for Independent Living (RCIL)  
322-7853  
Toll-Free: 1-800-960-7853  
Self-Help Network of Kansas (support groups)  
978-3843  
Website: [www.selfhelpnetwork.wichita.edu](http://www.selfhelpnetwork.wichita.edu)

United Way of the Plains 2-1-1

## **INSURANCE**

Insurance Commissioner – State of Kansas

1-800-432-2484

Website: [www.ksinsurance.org](http://www.ksinsurance.org)

KanCare Customer Service

1-800-792-4884 TTY: 1-800-792-4292

KanCare MCOs

Aetna: 1-866-305-5147 TTY: 1-800-766-3777

Sunflower

1-877-644-4623 TTY: 1-888-282-6428

United

1-877-542-9238 TTY: 711

Kansas Insurance Department

1-800-432-2484

Website: [www.ksinsurance.org](http://www.ksinsurance.org)

Medicare Supplement Insurance Shopper's Guide

<http://www.ksinsurance.org/documents/department/publications/medicare-supplement-ins-shoppers-guide-2015.pdf>

Medicaid (KanCare Clearinghouse)

1-800-792-4884

Website: [www.kdheks.gov](http://www.kdheks.gov)

Medicare (enrollment)

685-3000

Part A & B (Claim)

1-800-432-3531

Questions/Advice (Part A,B, or D)

1-800-633-4227

Social Security Administration

1-866-931-9173

Kansas Insurance Department

1-800-432-2484

TTY: 1-877-235-3151

Email: [commissioner@ksinsurance.org](mailto:commissioner@ksinsurance.org)

Website: [www.ksinsurance.org](http://www.ksinsurance.org)

Medicaid (KanCare Clearinghouse)

1-800-792-4884

Medicare Coordination of Benefits Contractor

(Medicare Secondary Payer and who pays first)

1-800-999-1118 TTY: 1-800-318-8782

Railroad Retirement Board

1-877-772-5772

Senior Health Insurance Counseling for

Kansas (SHICK)—Sedgwick County Extension Office:

660-0100

Toll-Free: 1-800-860-5260

## **LAW ENFORCEMENT AGENCIES**

IN CASE OF EMERGENCY CALL 911

The following are daytime, non-emergency numbers:

Andover Police Department (909 N. Andover Rd.)

733-5177

Augusta Police Department (2100 Ohio) 775-4500

Beaumont 1-800-794-0190

Benton 1-800-794-0190

Cassoday 1-800-794-0190

Douglass 1-800-794-0190

El Dorado (220 E. First) 321-9100

Latham 1-800-794-0190

Leon 1-800-794-0190

Potwin 1-800-794-0190

Rosalia 1-800-794-0190

Rose Hill (306 N. Rose Hill Road) 776-0191

Towanda 1-800-794-0190

Whitewater 1-800-794-0190

Butler County Sheriff's Office

1-800-794-0190

114 W. Central, El Dorado

322-4254

Sub-Station, Augusta Airport

733-1300

## **LEGAL**

American Civil Liberties Union of Kansas

1-816-756-3113

Butler County Attorney

321-6999

Toll-Free: 1-800-822-6374

Consumer Protection

636-1921

Kansas Attorney General

1-800-432-2310

Crime Victim Services Division  
1-800-828-9745

Disability Rights Center of Kansas  
1-877-776-1541  
Toll Free TDD: 1-877-335-3725

Elder Law Hotline  
1-888-353-5337

Kansas Attorney General's office  
785-296-2215  
Website: <http://ag.ks.gov>

Kansas Guardianship Program  
1-800-672-0086  
Website: [www.ksgprog.org](http://www.ksgprog.org)

Kansas Legal Service  
265-2252  
Toll-free (Elder Law Hotline): 1-888-353-5337

Kansas Bar Association  
785-234-5696

Lawyer Referral Service  
1-800-928-3111

Reduced Fee Program  
265-9681

Kansas Human Rights Commission  
337-6270 Toll Free: 1-888-793-6874

Kansas Bureau of Investigations (background checks)  
785-296-8200  
Website: [www.accesskansas.org/kbi/criminalhistory](http://www.accesskansas.org/kbi/criminalhistory)

Lawyer Advice Line 1-800-928-3111

Wichita Bar Association 263-2251

## **LEGISLATIVE CONTACTS**

Governor's Office  
1-877-579-6757

Kansas Attorney General  
785-296-2215

Kansas Help Center  
1-800-452-6727

Kansas Legislature Administrative Service  
1-785-296-2391  
Kansas Legislative Hotline  
1-800-432-3924

Kansas Department on Aging & Disability

1-800-432-3535

## **LIBRARY/READING PROGRAMS**

Andover Public Library  
558-3500  
Website: [www.andoverlibrary.org](http://www.andoverlibrary.org)

Audio-Reader  
1-800-772-8898

Augusta Public Library  
775-2681  
Website: [www.augustalibrary.com](http://www.augustalibrary.com)

Bradford Memorial Outreach Programs  
321-3363  
Website: [www.skyways.lib.ks.us/library/bradford](http://www.skyways.lib.ks.us/library/bradford)

Douglass Public Library  
746-2600

Kansas State Library  
1-800-432-3919  
Website : <http://www.kslib.info/>

Leon Public Library  
742-3438 (city office)

Potwin Public Library  
620-752-3421

Rose Hill Public Library  
776-3013

Talking Books Service  
1-800-362-0699

Towanda Public Library  
536-2464

Whitewater Public Library  
799-2471

Wichita Public Library  
261-8500

## **MEDICAL ALERT SYSTEMS**

ConnectAmerica  
1-866-922-8339

Cooper Drug of Augusta  
775-2289  
Home Buddy  
262-8339  
Toll Free: 1-866-922-8339

Home Technology Solutions  
265-1700



Home & Wellness Senior Monitoring System  
1-888-851-4291

Trust Home Care  
683-7700  
Email: [info@trustrhomecare.com](mailto:info@trustrhomecare.com)

Via Christi InMyHome Technology  
291-4663

Walgreens Ready Response  
1-866-310-9061

**MEDICAL EQUIPMENT AND SUPPLIES**  
Augusta Community Caring Center  
775-3342

Broadway Home Health  
264-8600  
Toll-free: 1-800-705-0208

Central Plains Lifts  
1-800-567-3733

Cooper Drug of Augusta  
775-2289

Envision Every Day.  
440-1680  
Toll-Free: 1-888-319-4646

Hart Pharmacy & Home Medical Equipment  
683-5621

Home & Wellness Co. Senior Safety System  
641-9868

Household Goods Closet (Independent Living Ctr.)  
942-6300

Hunter Health Clinic (Diabetic Supplies)  
262-3611

Jay Hatfield Mobility  
260-9250  
Toll-free: 1-866-885-2593

Medical Equipment Recycling Network (MERN)  
942-6300  
Toll Free: 1-800-479-5861  
Email: [mern@ilrcks.org](mailto:mern@ilrcks.org)

Medical Loan Closet of Wichita  
200-2005

PT Plus  
775-0700

Resource Center for Independent Living  
322-7853  
Toll-free: 1-800-960-7853

Susan B. Allen Medical Equipment  
322-4540

Taylor Drug  
1-800-567-3733

Therapeutic Medical Supply, Inc.  
945-0040

True Care Pharmacy  
321-5330

Victory in the Valley (wigs, prostheses)  
682-7400

Wigs (cancer patients) American Cancer Society  
265-3400

**MEDICARE**  
Medicare  
1-800-633-4227  
Website: [www.medicare.gov](http://www.medicare.gov)

Medicare Fraud in Kansas  
1-800-860-5260

SHICK (Senior Health Insurance Counseling for KS)  
1-800-860-5260

Social Security Administration  
1-800-772-1213

**MEDICATION DISPENSER SERVICES**  
Cooper Drug "Synchronize Your Prescriptions"  
775-2289  
Website: [www.cooperdrugstore.com](http://www.cooperdrugstore.com)

Home Buddy  
262-8339  
Toll Free: 1-866-922-8339  
Website: [www.homebuddy.org](http://www.homebuddy.org)

Home Technology Solutions  
682-0624  
Website: [www.homets.org](http://www.homets.org)

Right At Home 721-6001  
Trust Home Care  
683-7700  
Website: [www.trustrhomecare.com](http://www.trustrhomecare.com)

**MENTAL HEALTH NEEDS**  
Active Aging  
942-5385

View online: <http://theactiveage.com>

Butler County Dept. on Aging American Senior  
Newsletter

775-0500

Toll-Free: 1-800-279-3655

View online:

[www.bucoks.com/DocumentCenter/View/1505](http://www.bucoks.com/DocumentCenter/View/1505)

Butler County Times-Gazette  
321-1120

Shoppers Guide  
321-1120

### **NURSING FACILITIES/ALTERNATIVES**

Andover Life Care Center  
733-1349

El Dorado Healthcare and Rehabilitation Center  
321-4444

Fountainview Nursing & Rehab Center  
776-2194

Homestead of El Dorado (Alzheimer's Unit) 321-  
7777

Medicalodge of Douglass  
747-2157

Lakepoint Nursing Center of Augusta  
775-6333

Lakepoint Nursing Center of El Dorado  
320-4140

Kansas Advocates for Better Care  
1-800-525-1782

Susan B. Allen Memorial Hospital  
321-3300

Wheat State Manor  
799-2181

Victoria Falls Nursing Facility  
733-0654

### **PHYSICAL THERAPY**

Advanced Physical Therapy  
202-0195  
PT Plus  
775-0700

SERC Physical Therapy  
452-5033

Susan B. Allen Memorial Hospital Physical  
Rehabilitation  
322-4580

### **PODIATRY SERVICES**

SBA Medical Clinic West (Dr. Posge)  
321-8757

Toe Truck, Inc.  
644-9523  
[www.medicare.gov](http://www.medicare.gov)

NACO Prescription Discount Card  
Contact Butler County Department on Aging  
775-0500  
Toll-free: 1-800-279-3655

Prescription Network of Kansas  
1-800-279-3022  
Website: [www.prescriptionnetwork.info](http://www.prescriptionnetwork.info)

SHICK (Senior Health Insurance Counseling for KS)  
1-800-860-5260

### **RECREATION**

Life Enrichment Program  
218-6355

El Dorado Parks & Recreation Dept.  
322-7400

YMCA (Andover)  
733-9622

YMCA (El Dorado)  
320-9622  
Also contact your local city office for activities in your  
area.

### **RESpite CARE (Relief of a Caregiver)**

Alzheimer's Association  
267-7333  
Toll-free: 1-800-272-3900

Butler County Department on Aging  
775-0500  
Toll-free: 1-800-279-3655

VA Med Ctr. Extended Care/Caregiver Support  
685-2221, ext 57053

### **RETIREE PROGRAMS**

Butler County Dept. on Aging  
775-0500  
Toll-Free: 1-800-279-3655  
Website <https://www.bucoks.com/141/Aging>

Butler County Life Enrichment  
322-3193 or 733-3193

Elder Care Locator (Information on community services)  
1-800-677-1116  
Wesley Friends  
316-962-8400  
Toll-Free: 1-888-508-6644

### **SENIOR APARTMENTS**

Augusta Heights  
417-673-1444

Benton Senior Residences  
263-2215

Brookside Cottages (Augusta)  
775-2670

Country Club Towers (Augusta)  
775-5636

Cottonwood Point (Augusta)  
775-0368

Eastridge Villa (Douglass)  
no phone/call Douglass city offices

Gardenwalk Apartments (Augusta)  
775-5690

Gordy Square Apartments (El Dorado)  
321-0560

Heritage House of El Dorado  
321-0560

Heritage Townhomes of Rose Hill  
775-6637

Latham Apartments  
263-7064

Lawndale Senior Complex (El Dorado)  
321-5518

Osage Manor (Augusta)  
775-6971

Sawyer Memorial Senior Housing (El Dorado)  
321-3300  
Silverwood Apartments (El Dorado)  
321-6745

Summerfield Senior Residences (Andover)  
733-7899

Sunflower Apartments of Andover  
733-0658

Sunflower Apartments of Whitewater  
799-2241

Towanda Gables  
536-2662

Walnut Grove Senior Housing (contact Leon city offices)  
742-3438

### **SENIOR CENTERS & CLUBS**

Andover Senior Center  
733-4441

Augusta Senior Center  
775-1189

Butler County Life Enrichment  
218-6355

Douglass Senior Center  
746-3227

El Dorado Senior Center  
321-0142

Leon Senior Center  
745-9200

Rose Hill Senior Center  
776-0170

Towanda Senior Center  
536-8999

Butler County Department on Aging  
775-0500  
Toll-Free: 1-800-279-3655

Benton Golden Agers

Cassoday Senior Citizens

Whitewater Senior Citizens

### **SHOPPING**

Shopping for Seniors (Butler County Dept. on Aging)  
775-0855  
Toll-Free: 1-800-279-3655

### **SUICIDE PREVENTION**

South Central Kansas Mental Health Department  
(Counseling Ctr. Inc.)  
El Dorado  
321-6036

Andover  
733-5047  
Augusta  
775-5491

Crisis Suicide Prevention (24 hr)  
1-800-273-8255

Suicide Hotline  
1-800-784-2433  
TTY: 1-800-799-4889

Veterans Crisis Line  
1-800-273-TALK

### **SUPPORT GROUPS/ORGANIZATIONS**

Al-Anon  
266-8499

Alcoholics Anonymous  
320-3447 or 322-7617

Alcoholics Anonymous  
619-2662

Alzheimer's Support Group (Andover)  
733-4441

Alzheimer's Support Group (Augusta)  
775-1000

Alzheimer's Support Group (El Dorado)  
321-0339 Or call 620-476-2281

Alzheimer's Association  
267-7333  
Toll-Free: 1-800-272-3900

American Cancer Society  
265-3400  
Toll-Free: 1-800-478-4788

American Diabetes Assoc.  
684-6091  
Toll-Free: 1-800-342-2383

American Diabetes Assoc. Support Group  
321-5172

American Heart Association  
265-4238  
Toll-Free: 1-800-242-8721

American Lung Association  
1-800-586-4872

Arthritis Foundation of Kansas  
262-2233

Cardiac Support  
322-4517

Caregiver Support Group (meets in Andover)  
1-800-362-0180

Compassionate Friends of Butler County  
321-9341

Domestic Violence Support Group  
321-7104

Good Grief of Kansas (El Dorado chapter)  
775-6679

Grandparents Raising Grandchildren  
942-4261, ext. 1312

Grief & Loss support group  
316-733-5047

Journey to Recovery  
435-5101

Kirby-Morris Funeral Home Support Group (Grief)  
655-5679

Lupus  
262-6180

MADD (Mothers Against Drunk Driving)  
321-9113

Multiple Sclerosis  
320-9025

Parents, Family & Friends of Lesbians & Gays  
683-4643

Parkinson's Support Group  
321-6606

POMC (Parents of Murdered Children)  
265-1600

Persons w/ Disabilities  
775-6277

Sexual Assault Support Group  
321-7104

Veterans Crisis Line  
1-800-273-8255 press 1  
WSU Center for Community Support & Research  
1-800-445-0116

To search listing of support groups  
<https://supportgroupsinkansas.org/>

### **TAX/FINANCIAL MANAGEMENT**

Consumer Credit Counseling  
1-800-383-0217

Internal Revenue Service, Federal  
352-7401

Kansas Dept. of Revenue  
785-368-8222

Kansas Dept. of Revenue Tax Refund Status Line  
1-800-894-0318

Kansas Guardianship Program  
1-800-672-0086

### **TELEPHONE REASSURANCE**

Good Morning Andover  
733-5177  
Project Good Morning (El Dorado Police Dept.)  
321-9100

### **TRANSPORTATION**

Anywhere/Anytime  
316-775-1591

Butler County Transit  
Local line : 775-0855  
Toll-Free: 1-800-279-3655  
Website: [www.bucoks.com](http://www.bucoks.com)

DAV (Ambulatory Veterans Only)  
651-3606

### **UTILITIES ASSISTANCE**

Butler County Department on Aging  
775-0500

Community Aid Network (El Dorado)  
321-3266

Department of Children & Families (heating bills only)  
316-321-4200

Project Deserve (Center of Hope, Inc.)  
267-0222  
Website: [www.centerofhopeinc.org](http://www.centerofhopeinc.org)

Salvation Army  
321-4070

### **VETERANS/MILITARY**

American Legion  
Andover Post 406  
712-3391 or 733-0804

Facebook: Post 406 American Legion Andover,  
Kansas

Augusta Post 6746  
655-1995

Clubhouse (El Dorado)  
321-3767

American Legion Veterans Family Assistance  
Program  
265-8450

National Call Center for Homeless Veterans  
1-877-424-3838

Right at Home (in-home care)  
721-6001  
VetAssist Program  
1-888-314-6075  
Website: [www.veternashomecare.com](http://www.veternashomecare.com)

Veterans Admin. Medical Center  
685-2211

Veterans Admin. Regional Office  
1-800-827-1000 or 264-9123

VA Med Ctr Extended Care/Caregiver Support1-855-  
260-3274

VA Home Front  
877-424-3838  
Website: [www.va.gov/homeless](http://www.va.gov/homeless)

Veterans Admin. Medical Admissions 651-3614

Outpatient Appointments 651-3562

Dental Hygiene Clinic 651-3621

Hospital Based Home Care 651-3653

Respite Care Program 651-3532

Social Work Service 651-3632

McConnell Family Support Center 759-3182

### **VISION**

AT&T Special Needs Dept.  
1-866-241-6568

Envision  
440-1600

Envision Every Day.  
1-888-311-2299

Kansas Braille Transcription Institute  
265-9692

Kansas Services for the Blind & Visually Impaired  
1-800-547-5789

National Federation of the Blind  
265-2882

Talking Books South Central Kansas  
1-800-362-0699

Wichita Eye Foundation  
260-8220

Wichita Radio Reading Service  
978-6600

Foster Grandparent Program (Butler County Dept. on Aging)  
775-0500  
Toll-free: 1-800-279-3655

Harry Hynes Memorial Hospice, Inc.  
265-9441

Meals on Wheels (El Dorado)  
322-4573

Meals on Wheels (Augusta)  
775-6333

Mennonite Housing Rehabilitation Services  
942-4848

Resource Center for Independent Living  
322-7853  
Toll-Free: 1-800-960-7853

Retired Senior Volunteer Program (RSVP)  
775-0500  
Email: [deptonaging-RSVP@bucoks.com](mailto:deptonaging-RSVP@bucoks.com)  
Toll-Free: 1-800-279-3655

Senior Ambassadors of El Dorado  
21-3150

Senior Companion Program  
685-1821

Susan B. Allen Memorial Hospital--Volunteer Coordinator 322-4578

Tri-County CASA 320-0238

USD #205 Bluestem, Haverhill, Leon 745-3261

USD #206 Remington 799-2115

USD #375 Towanda (Circle) 536-2577

USD #385 Andover 733-5017

USD #396 Douglass 746-2183

USD #402 Augusta 775-5484

USD #490 El Dorado 321-2780

USE #492 Cassoday 735-4428

Wheat State Manor 799-2181

Veterans Admin. Voluntary Services  
685-2221 ext. 3222

## WEBSITES

AARP  
[www.aarp.org](http://www.aarp.org)

Alzheimer's Association  
[www.alz.org](http://www.alz.org)

American Cancer Society  
[www.cancer.org](http://www.cancer.org)

Benefits Check Up  
[www.benefitscheckup.org](http://www.benefitscheckup.org)

Butler County Department on Aging  
<https://www.bucoks.com/141/Aging>

Butler County Government  
[www.bucoks.com](http://www.bucoks.com)

Butler County Emergency Management  
<https://www.bucoks.com/206/Emergency-Management>

Caregiver Empowerment  
[www.care-givers.com](http://www.care-givers.com)

Eldercare Locator  
[www.eldercare.gov](http://www.eldercare.gov)

Get Mental Help, Inc.  
[www.mental-health-matters.com](http://www.mental-health-matters.com)

KanCare online application (adult services)  
<https://www.kancare.ks.gov/consumers/apply-for-kancare>

Kansas Advocates for Better Care  
[www.kabc.org](http://www.kabc.org)

Kansas Attorney General

[www.ag.ks.gov](http://www.ag.ks.gov)

Kansas Department for Aging & Disabilities

[www.kdads.ks.gov](http://www.kdads.ks.gov)

Kansas Dept. for Children & Family Services

[www.dcf.ks.gov](http://www.dcf.ks.gov)

Kansas Department of Health & Environment

[www.kdheks.gov](http://www.kdheks.gov)

Kansas Foundation for Medical Care

[www.kfmc.org](http://www.kfmc.org)

Medicare

[www.Medicare.gov](http://www.Medicare.gov)

National Alliance for Caregiving (NAC)

[www.caregiving.org](http://www.caregiving.org)

National Council on Aging (NFCA)

[www.ncoa.org](http://www.ncoa.org)

National Family Caregivers Association

[www.nfcacares.org](http://www.nfcacares.org)

Older Kansans Information Forum (OKIF)

[www.skyways.lib.ks.us/okif](http://www.skyways.lib.ks.us/okif)

Social Security Administration

[www.ssa.gov](http://www.ssa.gov)

Telecommunications Access Program

[www.kansastap.org](http://www.kansastap.org)

# **V. Detail Exhibits**

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**[VVV Consultants LLC]**



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## a) Patient Origin Source Files

[VVV Consultants LLC]



**Patient Origin by Region - Inpatient**  
Butler, KS Residents Treated in KHA Reporting Area  
Federal Fiscal Year: 2018

Hospital	Total Discharges		Pediatric		Adult Medical/Surgical								Psychiatric		Obstetric		Newborn		Surg %
	Cases	%	Cases	%	Age 0 - 17	Age 18 - 44	Age 45 - 64	Age 65 - 74	Age 75+	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%
Wesley Healthcare - Wichita, KS	1,847	33.6%	187	10.1%	171	9.3%	271	14.7%	196	10.6%	227	12.3%	15	0.8%	397	21.5%	383	20.7%	28.0%
Susan B. Allen Memorial Hospital - El Dorado, KS	1,589	29.1%	14	0.9%	158	9.9%	257	16.1%	257	16.1%	520	32.5%	12	0.8%	196	12.3%	185	11.6%	14.9%
Ascension Via Christi Hospitals St. Francis - Wichita, KS	1,464	26.7%	32	2.2%	122	8.3%	354	24.9%	237	16.2%	282	19.3%	179	12.2%	129	8.8%	119	8.1%	25.5%
Wesley Woodlawn Hospital & ER - Wichita, KS	149	2.7%	0		30	20.1%	59	39.6%	33	22.1%	27	18.1%	0		0		0		26.2%
Newton Medical Center - Newton, KS	116	2.1%	2	1.7%	4	3.4%	11	9.5%	9	7.8%	39	33.6%	3	2.6%	24	20.7%	24	20.7%	16.4%
The University of Kansas Health System - Kansas City, KS	60	1.1%	0		19	31.7%	18	30.0%	14	23.3%	4	6.7%	5	8.3%	0		0		56.7%
Children's Mercy Kansas City - Kansas City, MO	34	0.6%	28	82.4%	0		0		0		0		0		3	8.8%	3	8.8%	38.2%
Kansas Residents/Other Missouri Hospitals	30	0.5%	5	16.7%	3	10.0%	7	23.3%	2	6.7%	7	23.3%	6	20.0%	0		0		43.3%
Stormont Vail Health - Topeka, KS	29	0.5%	0		1	3.4%	1	3.4%	0		2	6.9%	25	86.2%	0		0		3.4%
South Central Kansas Medical Center - Arkansas City, KS	27	0.5%	0		0		0		0		0		27	100.0%	0		0		
Sumner Community Hospital - Wellington, KS	26	0.5%	0		0		0		3	11.5%	11	42.3%	12	46.2%	0		0		
Ascension Via Christi Hospital St. Teresa - Wichita, KS	16	0.3%	0		5	31.2%	4	25.0%	1	6.2%	6	37.5%	0		0		0		43.6%
Saint Luke's Hospital of Kansas City - Kansas City, MO	9	0.2%	0		4	44.4%	3	33.3%	2	22.2%	0		0		0		0		88.9%
Salina Regional Health Center - Salina, KS	8	0.1%	0		2	25.0%	1	12.5%	0		0		5	62.5%	0		0		
Kansas Residents/Nebraska Hospitals	8	0.1%	0		1	16.7%	3	60.0%	0		2	33.3%	0		0		0		16.7%
William Newton Hospital - Winfield, KS	6	0.1%	0		0		1	16.7%	0		3	60.0%	0		2	33.3%	0		
Children's Mercy Hospital Kansas - Overland Park, KS	6	0.1%	6	100.0%	0		0		0		0		0		0		0		
Hutchinson Regional Medical Center - Hutchinson, KS	5	0.1%	0		0		3	60.0%	1	20.0%	0		1	20.0%	0		0		
Other Hospitals	53	1.0%	3	5.7%	12	22.6%	10	18.9%	3	5.7%	10	18.9%	9	17.0%	3	5.7%	3	5.7%	30.2%
<b>Hospital Total</b>	<b>5,491</b>	<b>100.0%</b>	<b>277</b>	<b>5.0%</b>	<b>513</b>	<b>9.3%</b>	<b>1,613</b>	<b>18.4%</b>	<b>758</b>	<b>13.8%</b>	<b>1,140</b>	<b>20.8%</b>	<b>291</b>	<b>5.4%</b>	<b>764</b>	<b>13.7%</b>	<b>717</b>	<b>13.1%</b>	<b>23.3%</b>



**Patient Origin by Region - Inpatient**  
Butler, KS Residents Treated in KHA Reporting Area  
Federal Fiscal Year: 2017

Hospital	Total Discharges		Pediatric		Adult Medical/Surgical								Psychiatric		Obstetric		Newborn		Surg %
	Cases	%	Cases	%	Age 0 - 17	Age 18 - 44	Age 45 - 64	Age 65 - 74	Age 75+	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%
Wesley Healthcare - Wichita, KS	1,866	34.4%	148	7.9%	159	8.5%	297	15.9%	195	10.5%	213	11.4%	15	0.8%	438	23.0%	401	21.5%	30.4%
Susan B. Allen Memorial Hospital - El Dorado, KS	1,580	29.1%	28	1.8%	133	8.4%	268	18.2%	233	14.7%	489	30.9%	10	0.6%	206	13.0%	193	12.2%	13.1%
Ascension Via Christi Hospitals St. Francis - Wichita, KS	1,464	27.0%	31	2.1%	188	12.8%	371	25.3%	238	16.1%	268	18.3%	162	11.1%	108	7.2%	102	7.0%	28.0%
Wesley Woodlawn Hospital & ER - Wichita, KS	145	2.7%	0		33	22.8%	37	25.5%	32	22.1%	41	28.3%	2	1.4%	0		0		34.5%
Newton Medical Center - Newton, KS	98	1.8%	1	1.0%	5	5.1%	13	13.3%	8	8.2%	43	43.9%	7	7.1%	12	12.2%	9	9.2%	21.4%
The University of Kansas Health System - Kansas City, KS	63	1.2%	1	1.6%	19	30.2%	30	47.6%	10	15.9%	2	3.2%	1	1.6%	0		0		41.3%
Children's Mercy Kansas City - Kansas City, MO	24	0.4%	21	87.5%	1	4.2%	0		0		0		0		1	4.2%	1	4.2%	33.3%
Stormont Vail Health - Topeka, KS	20	0.4%	1	5.0%	1	5.0%	0		0		1	5.0%	17	85.0%	0		0		5.0%
Kansas Residents/Other Missouri Hospitals	14	0.3%	3	21.4%	0		3	21.4%	3	21.4%	0		5	35.7%	0		0		50.0%
Salina Regional Health Center - Salina, KS	12	0.2%	0		0		1	8.3%	0		1	8.3%	10	83.3%	0		0		
Hutchinson Regional Medical Center - Hutchinson, KS	12	0.2%	0		1	8.3%	0		1	8.3%	1	8.3%	9	75.0%	0		0		8.3%
Ascension Via Christi Hospital St. Teresa - Wichita, KS	11	0.2%	0		0		4	36.4%	1	9.1%	6	54.5%	0		0		0		90.9%
Saint Luke's Hospital of Kansas City - Kansas City, MO	10	0.2%	0		4	40.0%	2	20.0%	0		4	40.0%	0		0		0		60.0%
Sumner Community Hospital - Wellington, KS	8	0.1%	0		0		0		0		3	37.5%	2	25.0%	1	12.5%	2	25.0%	12.5%
South Central Kansas Medical Center - Arkansas City, KS	7	0.1%	0		0		0		0		0		7	100.0%	0		0		
Kansas Residents/Missouri Hospitals	6	0.1%	0		2	33.3%	3	50.0%	0		1	16.7%	0		0		0		83.3%
Ashland Health Center - Ashland, KS	6	0.1%	0		0		0		0		6	100.0%	0		0		0		
Children's Mercy Hospital Kansas - Overland Park, KS	6	0.1%	6	100.0%	0		0		0		0		0		0		0		
Kansas Residents/Nebraska Hospitals	5	0.1%	0		2	40.0%	2	40.0%	0		1	20.0%	0		0		0		100.0%
Frederick Regional Hospital - Frederick, KS	5	0.1%	0		0		0		0		0		5	100.0%	0		0		
William Newton Hospital - Winfield, KS	5	0.1%	0		0		0		0		1	20.0%	0		0		0		100.0%
Arkansas Health Shawnee Mission - Shawnee Mission, KS	5	0.1%	0		1	20.0%	2	40.0%	0		1	20.0%	0		0		0		50.0%
Other Hospitals	41	0.8%	1	2.4%	19	59.3%	10	24.4%	7	17.1%	7	17.1%	3	7.3%	1	2.4%	1	2.4%	81.1%
<b>Hospital Total</b>	<b>5,422</b>	<b>100.0%</b>	<b>242</b>	<b>4.5%</b>	<b>563</b>	<b>10.4%</b>	<b>1,664</b>	<b>18.6%</b>	<b>730</b>	<b>13.5%</b>	<b>1,080</b>	<b>20.1%</b>	<b>255</b>	<b>4.7%</b>	<b>769</b>	<b>14.2%</b>	<b>708</b>	<b>13.1%</b>	<b>24.8%</b>



**Patient Origin by Region - Inpatient**  
Butler, KS Residents Treated in KHA Reporting Area  
Federal Fiscal Year: 2016

Hospital	Total Discharges		Pediatric		Adult Medical/Surgical								Psychiatric		Obstetric		Newborn		Surg %
	Cases	%	Cases	%	Age 18 - 44	%	Age 45 - 64	%	Age 65 - 74	%	Age 75+	%	Cases	%	Cases	%	Cases	%	
Wesley Healthcare - Wichita, KS	1,942	34.5%	155	8.4%	160	8.7%	313	17.0%	143	7.8%	191	10.4%	9	0.5%	444	24.1%	427	23.2%	28.7%
Ascension Via Christi Hospitals St. Francis - Wichita, KS	1,553	29.1%	50	3.2%	176	11.3%	366	25.4%	280	18.0%	294	16.4%	192	12.4%	104	6.7%	102	6.6%	29.9%
Susan B. Allen Memorial Hospital - El Dorado, KS	1,428	26.8%	26	1.8%	118	8.3%	230	16.1%	214	15.0%	458	32.1%	17	1.2%	181	12.7%	184	12.9%	14.4%
Wesley Woodlawn Hospital & ER - Wichita, KS	131	2.5%	0		35	26.7%	31	23.7%	35	26.7%	29	22.1%	1	0.8%	0		0		32.1%
Newton Medical Center - Newton, KS	113	2.1%	2	1.8%	7	6.2%	13	11.5%	13	11.5%	39	34.5%	12	10.6%	14	12.4%	13	11.5%	26.5%
The University of Kansas Health System - Kansas City, KS	64	1.2%	3	4.7%	16	25.0%	33	51.6%	9	14.1%	2	3.1%	0		1	1.6%	0		54.7%
Children's Mercy Kansas City - Kansas City, MO	52	1.0%	46	88.5%	2	3.8%	0		0		0		0		2	3.8%	2	3.8%	28.8%
Kansas Residents/Other Missouri Hospitals	17	0.3%	0		5	29.4%	5	29.4%	2	11.8%	2	11.8%	2	11.8%	1	5.9%	0		35.3%
William Newton Hospital - Winfield, KS	14	0.3%	0		1	7.1%	0		0		8	57.1%	0		5	35.7%	0		35.7%
Stormont Vail Health - Topeka, KS	13	0.2%	1	7.7%	0		1	7.7%	0		0		11	84.6%	0		0		7.7%
Saint Luke's Hospital of Kansas City - Kansas City, MO	9	0.2%	0		4	44.4%	2	22.2%	0		3	33.3%	0		0		0		55.6%
Kansas Residents/Minnesota Hospitals	8	0.1%	0		2	25.0%	2	25.0%	4	50.0%	0		0		0		0		75.0%
Hutchinson Regional Medical Center - Hutchinson, KS	7	0.1%	1	14.3%	0		0		0		1	14.3%	2	28.6%	1	14.3%	2	28.6%	28.6%
Newman Regional Health - Emporia, KS	6	0.1%	0		1	16.7%	0		2	33.3%	1	16.7%	0		1	16.7%	1	16.7%	16.7%
The University of Kansas Health System St. Francis Campus - Topeka, KS	6	0.1%	0		2	33.3%	3	50.0%	0		0		0		0		1	16.7%	50.0%
Salina Regional Health Center - Salina, KS	6	0.1%	1	16.7%	0		1	16.7%	0		0		3	50.0%	1	16.7%	0		50.0%
Sumner Community Hospital - Wellington, KS	6	0.1%	0		0		0		1	16.7%	2	33.3%	3	50.0%	0		0		
Ascension Via Christi Hospital St. Teresa - Wichita, KS	6	0.1%	0		0		6	100.0%	0		0		0		0		0		66.7%
AdventHealth Shawnee Mission - Shawnee Mission, KS	0	0.1%	0		1	100.0%	0		0		0		1	100.0%	0		0		100.0%
Other Hospitals	42	0.8%	5	11.9%	0		0		5	14.3%	7	16.7%	6	14.3%	2	4.8%	3	7.1%	16.7%
<b>Hospital Total</b>	<b>5,336</b>	<b>100.0%</b>	<b>250</b>	<b>8.4%</b>	<b>538</b>	<b>10.1%</b>	<b>1,643</b>	<b>18.9%</b>	<b>712</b>	<b>13.3%</b>	<b>893</b>	<b>16.7%</b>	<b>260</b>	<b>4.9%</b>	<b>757</b>	<b>14.2%</b>	<b>737</b>	<b>13.8%</b>	<b>25.7%</b>

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## b) Town Hall Attendees, Notes, & Feedback

[VVV Consultants LLC]

# CHNA SBAMH PSA (Butler County) Town Hall Friday, May 10, 2019 11:30am - 1:00pm N=49

IRS Category	Attend	Last	First	Title	Organization	City	ST	Zip
Physicians.	1	Aitchison	Matt	PAC	El Dorado Clinic	Augusta		67010
Community leaders	1	Banks	John		Community Member	El Dorado	KS	67042
Pharmacy	1	Bellesine	Mike		El Dorado TrueCare Pharmacy	El Dorado	KS	67042
Directors or staff of health and human service organizations.	1	Benedict	Phil	Executive Director	Thrive! Butler	Andover	KS	67002
Education officials and staff	1	Black	John	Superintendent	Augusta USD 402	Augusta	KS	67010
Directors or staff of health and human service organizations.	1	Carpenter	Ann	Director	13th JD Community Corrections	El Dorado	KS	67042
Political, appointed and elected officials.	1	Carpenter	Will	State representative	State of Kansas	El Dorado		67042
Local clergy and congregational leaders.	1	Carroll	Amber	Lead Pastor	Hope Covenant Church	El Dorado	KS	67042
Community leaders	1	Crawford	Robin		Retired	Augusta	KS	67010
Leaders health care organizations.	1	Daharsh	Garrett		Susan B Allen Memorial Hospital	El Dorado	KS	67042
City/Community planners and development officials.	1	Dillner	David	City Manager	City of El Dorado	El Dorado	KS	67042
Directors or staff of health and human service organizations.	1	Downs	Jamie	Administrator	Butler County Health Dept.	El Dorado	KS	67042
The hospital organization's board members.	1	Gard	Ed	Trustee	SBAMH Board	El Dorado	KS	67042
Leaders health care organizations.	1	Goebel	Cecilia		Susan B Allen Memorial Hospital	El Dorado	KS	67042
Community leaders	1	Goedent	Joe		Community National Bank			
Leaders health care organizations.	1	Heilman Felt	Diane		Susan B Allen Memorial Hospital	El Dorado	KS	67042
Directors or staff of health and human service organizations.	1	Hiebert	Tori	Executive Director	LakePoint El Dorado	El Dorado	KS	67042
Community leaders	1	Johnson	Tobey	Business Banker	Emprise Bank	El Dorado	KS	67042
Community leaders	1	Jones	Terry		Retired	El Dorado	KS	67042
Leaders health care organizations.	1	King	Susan	Pharmacy Manager	Susan B Allen Memorial Hospital	El Dorado	KS	67042
The hospital organization's board members.	1	Kirkbride	Jim	CEO	Susan B Allen Memorial Hospital	El Dorado	KS	67042
Local colleges and universities	1	Krull	Kimberly	President	Butler Community College	El Dorado	KS	67042
Presidents or chairs of civic or service clubs -- Chamber of Commerce, veterans' organizations, Lions, Rotary, etc.	1	Liess	Ryan	Community Bank President	INTRUST Bank	El Dorado	KS	6042
Community leaders	1	Lill	Wilma		Retired	El Dorado	KS	67042
The hospital organization's board members.	1	Locke	Suzie	Board of Trustees	Susan B Allen Memorial Hospital	El Dorado	KS	67042
Political, appointed and elected officials.	1	Luper	Debbie	District Director	Office of Congressman Ron Estes			
Welfare and social service agency staff.	1	Maier	Deb	Social Worker	DCF	El Dorado	KS	67042
Welfare and social service agency staff.	1	Maier	Debra	Social Worker Specialist	DCF	El Dorado	KS	67042
Welfare and social service agency staff.	1	Mason	Pamela	PPS Supervisor	El Dorado DCF	El Dorado	KS	67124
Directors or staff of health and human service organizations.	1	McArthur	Dillon	Quality Improvement Director	Butler County EMS	El Dorado	KS	67042
Leaders health care organizations.	1	McClure	Angela	Client advocate	Family Life Center- Safehouse	El Dorado	KS	67042
Presidents or chairs of civic or service clubs -- Chamber of Commerce, veterans' organizations, Lions, Rotary, etc.	1	Owens	Lonnie	President	OCI	El Dorado	KS	67042
Business people and merchants (e.g., who sell tobacco, alcohol, or other drugs).	1	Owens	Monica	Business Services Rep	Workforce Center	El Dorado	KS	67042
Community leaders	1	Price	Dewey	Marketing manager	Susan B Allen Memorial Hospital	El Dorado	KS	67042
Directors or staff of health and human service organizations.	1	Rall	Jessica	Branch Director	YMCA - El Dorado Branch	El Dorado	KS	67042
Directors or staff of health and human service organizations.	1	Rayfield	Lauren	Director of Inpatient services	Susan B Allen Memorial Hospital	El Dorado	KS	67042
Directors or staff of health and human service organizations.	1	Rice	Dan	Executive Director	South Central Mental Health	Augusta	KS	67010
Directors or staff of health and human service organizations.	1	Rook	Mark	COO-CIO	Susan B Allen Memorial Hospital	El Dorado	KS	67042

**CHNA SBAMH PSA (Butler County) Town Hall Friday, May 10, 2019 11:30am - 1:00pm N=49**

IRS Category	Attend	Last	First	Title	Organization	City	ST	Zip
Directors or staff of health and human service organizations.	1	Roths	Barbara	Extension Agent	K-State Research and Extension, Butler Co.	El Dorado	KS	67042
Community leaders	1	Scanlon	Renee		Community National Bank	El Dorado	KS	67042
Leaders health care organizations.	1	Seymour	Celestia	Laboratory Manager	Susan B Allen Memorial Hospital	El Dorado	KS	67042
Welfare and social service agency staff.	1	Stewart	Kim	Child Protection Specialist	Department for Children and Families	El Dorado	KS	67042
Local colleges and universities	1	Streeter	Christy	Dean - Health, Education and Public Services	Butler Community College	El Dorado	KS	67042
Local colleges and universities	1	Streeter	Christy	Dean - Health, Education and Public Services	Butler Community College	El Dorado	KS	67042
Local colleges and universities	1	Stultz	Shelley	Assoc VP of Human Resources	Butler Community College	El Dorado	KS	67042
Directors or staff of health and human service organizations.	1	Sundgren	Becky	Administration	Susan B Allen Memorial Hospital	El Dorado	KS	67042
Directors or staff of health and human service organizations.	1	Underwood	Christine	Administrator	LakePoint El Dorado	El Dorado	KS	67042
Directors or staff of health and human service organizations.	1	Van Auken	Andrea	Executive Director	United Way of El Dorado	El Dorado	KS	67042
Nurse Specialist	1	Wilken	Darla	Infection prevention RN	Susan B Allen Memorial Hospital	El Dorado	KS	67042

**Susan B Allen Memorial Hospital – Butler County Town Hall N=49**

**Friday, May 10<sup>th</sup> 11:30-1:00pm**

Schools: Screenings are being done.

Drugs: Meth, Marijuana, Heroin, Opioids, Over the Counter, Cocaine, Hemp

Celebrate Recovery transportation system is coming to El Dorado soon.

**Strengths:**

- Community Collaboration
- Caring Community
- Numbers of Providers giving care in PSA
- Two Access Points/ Two Hospitals
- Ambulance Services
- Diagnostic Equipment - Technology
- Urgent Care Facilities
- Educational Opportunities / Education Levels are high
- YMCA
- Outdoor Activities
- Butler Community College
- In county Heart Cath Lab
- Non-Profit providing free services to community
- Growing Population
- Pain Mgt Specialist at SBA
- Community Mental Health Services – Access
- Access to services

**Things to Improve:**

- Mental Health
- FQHC Center for Routine HC Services
- Substance Abuse, Drinking and Drugs
- Affordable HC Services
- Knowledge of HC Services
- Sexual Assault Program
- Bad Debt- Affordable Insurance
- Special Needs Services
- Local Political Awareness / Advocacy
- Births to Unwed Mothers
- Smoking Moms
- Suicides
- Poverty – Employee Readiness
- Senior Health
- Access to Health Education
- Obesity (Eating and Exercising)
- Housing
- Women's Wellness
- Child Care
- Foster Homes
- Public Transportation
- Specialists: OB, Peds, Surg, Ortho
- Access to Healthy Foods

# Wave #3 CHNA - SBAMH PSA

## Town Hall Conversation - Strengths (Color Cards) N= 49

Card #	C1	Today: What are the strengths of our community that contribute to health?	Card #	C1	Today: What are the strengths of our community that contribute to health?
2	ACC	Access to health care	34	NUTR	Kids Need to Eat lunch program
3	ACC	I think access to health care is good	21	ORTH	Need orthopedic - bone
8	ACC	Accessible services	22	ORTH	Orthopedic group from Wichita
12	ACC	Access to metropolitan area	4	OTHR	Schools, the churches
13	ACC	Accessibility to metropolitan area	12	OTHR	This event
15	ACC	Access to education	13	OTHR	This conversation is happening
19	ACC	Accessibility to wellness in variety of locations	13	OTHR	Educational opportunities PreK and university (high grad rates)
20	ACC	Accessible health care	15	OTHR	Growing community
26	ACC	Good access	15	OTHR	High graduation rate
29	ACC	Access to health care needs (mental, physical, etc.)	16	OTHR	Big hearted community filled with people that want to make improvement
32	ACC	Access to healthcare - eSusanB, urgent care	17	OTHR	Recycle
35	ACC	Healthcare accessibility (drs, ER, minor care, etc.)	18	OTHR	Non-profit faith-based organizations that support the population & work to address needs
17	AIR	Clean environment	18	OTHR	Great school systems
4	AMB	Ambulance and fire services	19	OTHR	Non-profits/faith-based association
8	AMB	Ambulance/ fire service	20	OTHR	Large number of community action organizations
4	BH	South Central Mental Health	20	OTHR	3 large communities to support our county
32	CLIN	Expanded community care clinic	20	OTHR	School systems
40	CLIN	Weekend clinic	23	OTHR	Professionals and volunteers throughout the county willing to work on health-related issues - integrate efforts
2	CORP	Coordination between SBA-YMCA	24	OTHR	We have people who care
3	CORP	Good cooperation between hospital/YMCA/mental health	25	OTHR	Lot of people who care and give grants
8	CORP	Cooperation/collaboration	25	OTHR	Education levels
19	CORP	Collaborations with companies	28	OTHR	Community members willingness to help and pull together
28	CORP	Collaborating among organizations	30	OTHR	Relatively high levels of education
31	CORP	Increased collaboration between disciplines and with employers	32	OTHR	Keep services local
34	CORP	Partnerships within the community independent/business/education	33	OTHR	Many churches and spiritual outlets
36	CORP	SBA partnerships with YMCA	33	OTHR	Caring community/ open to change even at cost
38	CORP	New cooperative initiatives	34	OTHR	Passionate teachers and school administrators
40	CORP	Hospital partners with existing organizers to improve and enhance well-being	37	OTHR	Non-profits: free services, cooperative
5	DOCS	Prof. medical services	11	OTHR	Health care responses appear to be higher
5	DOCS	Collaboration between providers	37	PAIN	Pain management specialist
6	DOCS	Good physicians, new specialties coming to town (only certain days of the week but coming)	13	PHY	Celebrate Recovery in Andover and soon El Dorado
8	DOCS	Good professionals	27	POV	I think we have a lot of program available for low-income or under-served population
25	DOCS	New physicians	34	POV	Butler Homeless Initiative
5	DOH	Services by county health	35	POV	Non-profits - multiple organizations that offer free services to those in need
13	DOH	Good community health services	31	PREV	Employers are becoming more focused on preventative health to keep employees healthy, reduce costs of ins and reduce absentees...



# Wave #3 CHNA - SBAMH PSA

## Town Hall Conversation - Strengths (Color Cards) N= 49

Card #	C1	Today: What are the strengths of our community that contribute to health?	Card #	C1	Today: What are the strengths of our community that contribute to health?
13	DOH	Health department & partnership programs	22	PRIM	Primary care physicians
13	ECON	Low unemployment	39	PRIM	Physicians - primary care
15	ECON	Low unemployment	1	REC	YMCA
17	FAC	Access to medical facilities in Andover/ELDO	4	REC	The Y
24	FAC	We have some great resources - bike path, SBA, YMCA, athletic events	6	REC	YMCA
29	FAC	Great health care facilities	7	REC	We have a YMCA that offers activities
30	FAC	Access to quality health care facilities within the county	8	REC	YMCA
34	FAM	Pregnancy Family Resource Center	22	REC	YMCA (&partnership with hospital)
22	FINA	Grants to teach nutrition/activity	22	REC	Bike path
2	FIT	Availability to exercise - YMCA	25	REC	Bike/walk path
13	FIT	Availability of gym (YMCA)	25	REC	Waterparks
18	FIT	Exercise options - lake, walking paths, biking paths	25	REC	Equipment
33	FIT	YMCA - access for most to activities and physical exercise	26	REC	YMCA
32	HH	Growing home health to meet needs	32	REC	Partnerships YMCA
1	HOSP	Hospital in Butler County	34	REC	2 YMCAs
3	HOSP	Hospital attempting to create more outreach such as urgent care	34	REC	Bike paths
4	HOSP	HOSP.	37	REC	2 YMCA Locations and partnerships
6	HOSP	Good hospital, lots of services	40	REC	YMCA kiosk
7	HOSP	Hospital	22	SNUR	SBA services - school nurse
10	HOSP	CMHS vcs	25	SNUR	Help to school nurses
18	HOSP	SBA	18	SPEC	Close proximity to lots of specialists in El Dorado area
25	HOSP	SBA services	30	SPEC	Close proximity to specialty & higher level care (in Wichita)
26	HOSP	good hospital	36	SPEC	Specialists partnering with SBA
28	HOSP	2 hospitals in the county	37	SPEC	Specialist partnerships
31	HOSP	that the community is looking at C.H. and all is good	38	SPEC	Specialists - new
33	HOSP	Good hospital	9	TPRG	Teen pregnancy is somewhat low
33	HOSP	SBAMH	1	URG	Urgent care
34	HOSP	Independent community hospital	8	URG	Urgent care
36	HOSP	Hospital involved in communities	36	URG	Urgent care facility
37	HOSP	SBAMH movement into the comm	37	URG	Urgent care facilities
39	HOSP	Hospital - serving provided	38	URG	Urgent care
12	KID	Schools	12	WELL	Wellness opportunities through YMCA and SBA
14	KID	School education	13	WELL	Wellness
28	MAN	Progressive CEO at Susan B	14	WELL	Resources that are available
40	MAN	The hospital administration and leaders are actively pursuing ways to bring care to the community	30	WELL	Senior health resources (education, sr centers, etc)
22	NURSE	Butler nursing program (to educate students for nursing/care)	32	WELL	Community education
21	NUTR	Kids Need to Eat	33	WELL	SBA provides education (health) one regular basis
22	NUTR	Organization of kids meals in summer	34	WELL	Thrive Butler County
25	NUTR	4H Classes/cooking	38	WELL	SBA moving more into community wellness

# Wave #3 CHNA - SBAMH PSA

## Town Hall Conversation - Weakness (Color Cards) N= 49

Card #	C1	Today: What are the weaknesses of our community that contribute to health?	Card #	C1	Today: What are the weaknesses of our community that contribute to health?
19	ACC	Access to healthcare	40	NUTR	Food access
21	ACC	Access to healthcare	3	NUTR	School lunch nutrition
25	ACC	Access to healthcare	4	NUTR	Access to healthy food
29	ACC	Access to care	9	NUTR	Healthy food access
38	ACC	Access to affordable care	10	NUTR	Better access to healthy food choices
6	AGE	Senior care	12	NUTR	Eating habits/lifestyle
20	AGE	More opportunities for seniors to be actively involved in community	34	NUTR	No healthy fast food options, just nasty junk food
21	AGE	Improve Elderly Assistance Program	39	NUTR	Educating citizens on ways to eat healthy
25	AGE	Elder Assistance Programs	4	OBES	Obesity
28	AGE	Senior health	5	OBES	Obesity programs
35	AGE	Elderly- finance/wellness/healthcare	9	OBES	Obesity
5	AIR	Pollution	15	OBES	Obesity
9	ALC	Alcohol abuse	16	OBES	Obesity
22	ALC	Need local inpatient alcohol/drug treatment facility	25	OBES	Obesity
25	ALC	Drinking	35	OBES	Wellness obesity
37	ALC	Alcohol education	23	ORTH	Number of ortho doctors
3	BH	Mental health education/services	35	ORTH	Full high quality orthopedics
5	BH	Better mental health/ substance abuse services	1	OTHR	Housing
9	BH	Mental/behavioral health access	40	OTHR	Being better neighbors
15	BH	Mental health	6	OTHR	Continuum of care
16	BH	Mental health services need to be expanded	11	OTHR	Housing
22	BH	More local mental health facilities for teenagers	15	OTHR	Housing is a real problem that has to improve
24	BH	More mental health services for children	17	OTHR	Housing
25	BH	Mental health issues	18	OTHR	SANE/SART Examiners
28	BH	Mental health access and facilities	22	OTHR	More foster homes
28	BH	Mental health care within jails/prisons	24	OTHR	Affordable housing
29	BH	Mental health education	26	OTHR	SANE Program
32	BH	Access to inpatient mental health care	27	OTHR	Personal responsibility
39	BH	Behavioral - suicide, mental health, depression	34	OTHR	How to increase neighborhood support. Neighbors caring for each other!
10	CHRON	Chronic disease issues	38	OTHR	Animosity between community centers restricts access and growth
25	CHRON	Chronic condition - heart and kidney	38	OTHR	Willingness to change - innovate
35	CHRON	Chronic condition	1	POV	Poverty level in the community
2	CLIN	Health care clinic that operates on sliding scale for routine health care issues	6	POV	Low income management
3	COMM	Communication/awareness	7	POV	Poverty reduction
2	COMM	Things are out there and people don't know about it	11	POV	Poverty/support families
8	COMM	Education of opportunities	15	POV	Poverty
25	COMM	Knowing resources that are available	17	POV	Poverty level
26	COMM	Full list of community resources	19	POV	Poverty - employment/training
27	COMM	Education about available services	25	POV	Poverty - especially senior poverty/ 1 parent households
21	CORP	Cooperation between healthcare agencies	34	POV	Need to address poverty and break the cycle
25	CORP	Increase cooperation between all agencies	36	POV	Outreach to poor or disadvantaged persons
6	DOCS	More physicians	6	PREV	Access to preventative or disease management
1	DRUG	Drug problem	8	PREV	Health prevention

# Wave #3 CHNA - SBAMH PSA

## Town Hall Conversation - Weakness (Color Cards) N= 49

Card #	C1	Today: What are the weaknesses of our community that contribute to health?	Card #	C1	Today: What are the weaknesses of our community that contribute to health?
9	DRUG	Substance abuse	10	PREV	Increased groups with focus on preventative health care (walking, running, yoga groups)
11	DRUG	Reduce drug use	28	PREV	ID/Prevention (mental health/substance abuse)
15	DRUG	Drugs	25	SMOK	Smoking
16	DRUG	Drug addiction (need treatment for addicts, prevention)	35	SMOK	Smoking
17	DRUG	Drugs	1	SPEC	More specialty providers
19	DRUG	Substance abuse	40	SPEC	Specialists
22	DRUG	Need AID evaluation-free for substance abusers	5	SPEC	More services at SBA - specialists
22	DRUG	Substance abuse pregnant women	13	SPEC	Need to increase hospital volumes so we can have more specialties available
24	DRUG	Substance abuse treatment	17	SPEC	More providers (specialty)
25	DRUG	Drug problems	38	SPEC	Specialist providers
29	DRUG	Substance abuse services	39	STFF	Therapists? How many do we have in town to help with addiction/abuse
31	DRUG	Community outreach for substance abuse	40	SUIC	Suicide
31	DRUG	Opioid program	11	SUIC	Suicide prevention services
35	DRUG	Opioid	17	SUIC	Suicide
5	ECON	Economic downturns	29	SUIC	Suicide education
33	ECON	Lack of employment for certain categories	37	SUIC	Suicide
4	FAC	Access to safe places to be active	19	TPRG	Teen pregnancy
16	FAM	Births to unwed mothers	16	TRAN	Transportation is lacking for elderly and poor citizens
9	FEM	Women's wellness - improve access along continuum	20	TRAN	Access to public transportation
7	FINA	Medical bad debt	21	TRAN	Access to transportation
14	FINA	Financial reimbursement for hospital?	25	TRAN	Access to public transportation
3	FIT	Activity levels - youth and adults	34	TRAN	Transportation in town for access to work
4	FIT	Physical activity	6	URG	Access to urgent care
4	INSU	Uninsured - improve access to healthcare - affordable and appropriate	19	VIO	Violence prevention
6	INSU	Affordable insurance or healthcare	25	VIO	Abuse/violence
13	INSU	Affordability of healthcare is below average	29	VIO	Violence prevention
20	INSU	Medicaid expansion needed	40	WELL	Wellness education
25	INSU	Medicaid expansion	7	WELL	Health education
35	INSU	Insurance/care access	8	WELL	Affordable opportunities to improve family health and wellness
37	INSU	Health insurance	10	WELL	Nutrition education
40	KID	Early access to wellness education for children and teens	13	WELL	Need to develop affordable wellness programs
2	KID	need to increase child care availability that is also affordable	23	WELL	Obesity education
5	KID	More services for kids/special needs	33	WELL	School programs
8	KID	More affordable childcare	36	WELL	Wellness habits
10	KID	Childcare	36	WELL	Education about what will happen if you don't take care of yourself. Specific behaviors and consequences
19	KID	Child care	37	WELL	Wellness and nutritional classes
30	MRKT	We have to do a better job of marketing the availability of MH services, health dept & medical, homeless or elderly - such done generally have access to internet	37	WELL	Youth education
23	NH	Perception of nursing homes	39	WELL	Wellness education

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## c) Public Notice & Requests

[VVV Consultants LLC]

To: Stakeholders, hospital staff, community leaders  
Subject: **Community Health Needs Assessment Feedback Survey to Begin This Week**

From: [jkirkbride@sbamh.org](mailto:jkirkbride@sbamh.org)

Date: 3/8/2019

In order to gauge the overall community health needs, Susan B. Allen Memorial Hospital, in partnership with Butler County Health Department and South Central Mental Health, are conducting a community wide health needs assessment. This assessment survey tool is being mailed out late this week and should provide a number of benefits for the community as a whole.

Results from the survey will increase the knowledge of community health needs and resources, as well as create a common understanding of the priorities of the community's health needs.

If you would like to participate in the health assessment, it is available at:

[https://www.surveymonkey.com/r/ButlerCo\\_CHNA2019](https://www.surveymonkey.com/r/ButlerCo_CHNA2019)

It is important that all assessment surveys be completed by **Friday, April 12<sup>th</sup>, 2019**. All responses are confidential, and we thank you in advance. Vince Vandehaar, MBA, with VVV Consultants LLC, has been retained to conduct this community-wide research.

In addition, a **Town Hall meeting will be held on Friday, May 10<sup>th</sup>, 2019** from 11:30 a.m. – 1:00 p.m at Butler Community College in the Hubbard Welcome Center- Clifford/Stone Room (901 S. Haverhill Rd, El Dorado, KS 67042) to review results. For more information regarding the community health needs assessment project, please contact Dewey Price at (316) 322-4543 #4543 or [DPrice@sbamh.org](mailto:DPrice@sbamh.org).

Thank you for your participation,

Jim Kirkbride

To: Stakeholders, hospital staff, community leaders  
Subject: **Butler County Community Health Needs – Town Hall**  
From: [jkirkbride@sbamh.org](mailto:jkirkbride@sbamh.org)  
Date: 4/12/2019

In order to gauge the overall community health needs, Susan B. Allen Memorial Hospital, in partnership with Butler County Health Department and South Central Mental Health, are conducting a community wide health needs assessment. Results from the survey will increase the knowledge of community health needs and resources, as well as create a common understanding of the priorities of the community's health needs.

**Butler County Town Hall meeting will be held on Friday, May 10<sup>th</sup>, 2019 from 11:30 a.m. – 1:00 p.m at Butler Community College in the Hubbard Welcome Center- Clifford/Stone Room (901 S. Haverhill Rd, El Dorado, KS 67042).**

Please RSVP here if you plan to attend the Town Hall:  
[https://www.surveymonkey.com/r/ButlerCo\\_RSVP2019](https://www.surveymonkey.com/r/ButlerCo_RSVP2019)

Vince Vandehaar, MBA, with VVV Consultants LLC, has been retained to conduct this community-wide research. For more information regarding the community health needs assessment project, please contact Dewey Price at (316) 322-4543 #4543 or [DPrice@sbamh.org](mailto:DPrice@sbamh.org).

Thank you,

Jim Kirkbride

## News Release 3/8/2019

Contact: Dewey Price (316) 322-4543 #4543 DPrice@sbamh.org

# Community Health Needs Assessment Feedback Survey to Begin This Week

## For Immediate Release

March 8, 2019

In order to gauge the overall community health needs, Susan B. Allen Memorial Hospital, in partnership with Butler County Health Department and South Central Mental Health, are conducting a community wide health needs assessment. This assessment survey tool is being mailed out late this week and should provide a number of benefits for the community as a whole.

Results from the survey will increase the knowledge of community health needs and resources, as well as create a common understanding of the priorities of the community's health needs.

"We see this project as a cooperative effort to gain understanding of community needs, and to help those involved in providing health services for our communities learn what our priorities should be," said James Kirkbride, CEO of Susan B. Allen Memorial Hospital.

If you would like to participate in the health assessment, it is available online at: [https://www.surveymonkey.com/r/ButlerCo\\_CHNA2019](https://www.surveymonkey.com/r/ButlerCo_CHNA2019)

It is important that all assessment surveys be completed by **Friday, April 12<sup>th</sup>, 2019. All responses are confidential, and we thank you in advance.** Vince Vandelaar, MBA, with VVV Consultants LLC, has been retained to conduct this community-wide research.

In addition, a **Town Hall meeting will be held on Friday, May 10<sup>th</sup>, 2019** from 11:30 a.m. – 1:00 p.m. at Butler Community College in the Hubbard Welcome Center- Clifford/Stone Room (901 S. Haverhill Rd, El Dorado, KS 67042) to review results. For more information regarding the community health needs assessment project, please contact Dewey Price at (316) 322-4543 #4543 or [DPrice@sbamh.org](mailto:DPrice@sbamh.org).

# Community Health needs assessment feedback survey begins next week

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Butler County Times Gazette By TG News Report 3/9/19 10:00 AM

## SBA wants to gauge the community health needs

El Dorado – In order to gauge the overall community health needs, Susan B. Allen Memorial Hospital, in partnership with Butler County Health Department and South Central Mental Health, are conducting a community wide health needs assessment. This assessment survey tool should provide a number of benefits for the community as a whole.

Results from the survey will increase the knowledge of community health needs and resources, as well as create a common understanding of the priorities of the community's health needs. "We see this project as a cooperative effort to gain understanding of community needs, and to help those involved in providing health services for our communities learn what our priorities should be," said Jim Kirkbride, President and CEO of Susan B. Allen Memorial Hospital.

If you would like to participate in the health assessment, it is available online at:  
[https://www.surveymonkey.com/r/ButlerCo\\_CHNA2019](https://www.surveymonkey.com/r/ButlerCo_CHNA2019)

It is important that all assessment surveys be completed by Friday, April 12, 2019. All responses are confidential, and we thank you in advance. Vince Vandehaar, MBA, with VVV Consultants LLC, has been retained to conduct this community-wide research.

In addition, a Town Hall meeting will be held on Friday, May 10 from 11:30 a.m. to 1 p.m. at Butler Community College in the Hubbard Welcome Center- Clifford/Stone Room (901 S. Haverhill Rd, El Dorado) to review results. For more information regarding the community health needs assessment project, please contact Dewey Price at (316) 322-4543 or [DPrice@sbamh.org](mailto:DPrice@sbamh.org).



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## d) Primary Research Detail

Neighborhood Roundtables & Online Research

[VVV Consultants LLC]

CHNA 2019 Community Feedback - SBAMH PSA N=161							
ID	Zip	Overall	Movement	c1	c2	c3	In your opinion, are there any healthcare services or delivery issues that you feel need to be improved, worked on and / or changed?
1139	67042	Average	Not really changing much	ACC	POV	INSU	access for low income individuals on state insurance or uninsured to PCP, mental health services, dental services.
1083	67042	Good	Decreasing - slipping downward	ACC	QUAL	BH	I am concerned with the availability and quality of mental health care in our community.
1046		Average	Not really changing much	ACC	SURG	ENT	Another surgeon so that it doesn't take so long to get in to see one. Full time Ear/Nose/Throat or Heart Dr. etc. so the wait is not so long to get in to see them.
1070	67144	Good	Not really changing much	ACC			Need doctors office to have weekend hours.
1061	67042	Good	Increasing - moving up	ACC			The YMCA needs to be more affordable.
1034	67002	Average	Decreasing - slipping downward	BH	AGE		Not enough attention is given to the importance of mental health - especially for the elderly.
1020	67042	Good	Not really changing much	BH	FINA		More mental health treatment paid for by grants or other programs.
1053	67042	Very Good	Increasing - moving up	BH	INSU	TRAV	Mental Health! There is only 1 service in town and my insurance doesn't cover it. So I either go there and pay \$150-200 per visit, or I have to drive 1 hour EACH way to and from the place I can go in Wichita
1102	67042	Good	Increasing - moving up	BH	KID		better collaboration with mental health especially need children's mental health specialists and not just throw drugs at them.
1118	67010	Poor	Not really changing much	BH	SUIC	TRAN	A better understanding of Mental health and suicide. Also outreach to those that have no transportation yet physical issues.
1051		Average	Increasing - moving up	BH			I think better resources for mental health is extremely important.
1125	67042	Good	Not really changing much	BH			Mental health
1132	67042	Very Good	Increasing - moving up	BH			Mental health - dependency treatment options
1092		Average	Decreasing - slipping downward	BH			Mental health access/treatment/collaboration
1024	67042	Average	Not really changing much	BH			Mental Health outreach.
1155		Very Good	Increasing - moving up	BH			Mental/Behavioral Health
1146	67144	Good	Decreasing - slipping downward	CARD	ACC		Much of cardiac screening is done in Wichita. Wish more were available here.
1023	67010	Good	Decreasing - slipping downward	CARD			I feel Cardiology is an important field that needs to be improved in our community.
1056	67017	Good	Increasing - moving up	CLIN	INSU	DENT	We need a medical clinic that serves the uninsured/underinsured on a sliding scale fee basis like Grace Med or Hunter Health and offers not only medical but dental and vision services.
1026	67010	Good	Not really changing much	CLIN	QUAL		The "instacare" clinic options seemed like a great addition; however, we've been very dissatisfied with them as they don't seem equipped (or the NP isn't confident enough) to handle much more than the most minor emergency. Been referred to the ER every time we've visited the one in Augusta. More capability at this level of care would be beneficial.
1088	67010	Average	Not really changing much	CORP	MRKT	WELL	Yes - The biggest barrier I have experienced is difficulty getting SBA and other community programs to partner and collaborate on community health projects/programs. Collaboratively marketing health programs for families is often put to the side and/or forgotten about, and many families and individuals do not get referred to beneficial community programs/services due to networking barriers between community programs and businesses. (i.e. individuals not responding to phone calls, emails, no follow-through, etc.).
1104		Average	Increasing - moving up	CORP	MRKT		Most likely I feel just the overall outreach of the already provided services, more advertisement to the community so they know what is offered.
1003	67042	Very Poor	Decreasing - slipping downward	CORP			corrupt, for-profit system.
1117	67042	Poor	Decreasing - slipping downward	CORP			I think SBA needs a new CEO. I think it is not managed well. I think the out source of Dr.'s are ridiculous, I think the billing Dept. needs help as well.
1147		Average	Decreasing - slipping downward	CORP			Less emphasis on sba as a profit making institution and more on care of patients
1029	67042	Average	Not really changing much	DIAB	URG		What's happened with the Diabetes Management program? What is the value of Urgent Care?

CHNA 2019 Community Feedback - SBAMH PSA N=161							
ID	Zip	Overall	Movement	c1	c2	c3	In your opinion, are there any healthcare services or delivery issues that you feel need to be improved, worked on and / or changed?
1100	67144	Average	Not really changing much	DOCS	KID	BH	Would be nice to have more choice in healthcare providers, especially for children on the autism spectrum
1133	67042	Poor	Decreasing - slipping downward	DOCS			Need to support loyal long-term medical providers here in El Dorado instead of contracting with Wichita providers.
1077	67042	Good	Decreasing - slipping downward	DOCS			We need physicians who live in our community and are part of our community. We seem to have Wichita physicians come in and take the majority of patients to Wichita never giving back to our community.
1078		Poor	Decreasing - slipping downward	DOCS			You can have all the best equipment. However the best doctors need to go with that
1019	67042	Good	Decreasing - slipping downward	DRUG	PHY	DENT	Affordable and accessible addictions treatment on request. Affordable and accessible birth control. Ditto oral health care. Access to affordable medications such as insulin.
1021	67042	Poor	Not really changing much	DRUG	PHY	STFF	Addiction treatment locally. More knowledge of the issues surrounding poverty and addiction by ER staff
1063	67042	Good	Increasing - moving up	DRUG	POV	BH	Drug abuse, poverty, mental health
1067	67042	Poor	Decreasing - slipping downward	EMER	QUAL		ER and quality of care provided
1096	67042	Average	Decreasing - slipping downward	EMER	STFF	BH	We need better training of the ER staff to deal with people that have mental illness. They treat you different as soon as they see you are on psychotropic drugs. We also need a peer respite center
1128	67042	Poor	Not really changing much	EMER	STFF		emergency room rehire a full-time or part-time chaplain
1101	67042	Good	Increasing - moving up	EMER	WAIT		The ER at SBA needs improvements on the time spent waiting to be seen by a doctor or nurse.
1082	66840	Average	Not really changing much	EMER			Emergency services
1059	67042	Good	Increasing - moving up	EMS	WAIT		EMS seems redundant. Too many people show up. They take forever and the cost is outrageous
1141	67010	Good	Increasing - moving up	FAM			Social/emotional needs of families and children could be improved. This is based on seeing more individuals with social emotional needs.
1054	67133	Good	Increasing - moving up	HOSP	CLIN	URG	SBA is a very progressive and easy to work-with entity. It is really neat to see the SBA clinic opening up in the YMCA & an Urgent Care center now available in El Dorado. The Urgent Care center is a great step in the right direction. Unknown as to what needs to be improved at this time as I see many of the steps I would have suggested as being taken in the recent past.
1076		Good	Increasing - moving up	HOSP	DOCS		Personally I'm not fond and do not like the hospitalist concept. It is very important for a trusting relationship between patients and physicians.
1093	67010	Average	Decreasing - slipping downward	HOSP	EMER	QUAL	We need small town hospital, they are essential. Subpar ER care at SBA main.
1017	67002	Average	Not really changing much	HOSP			Hospital services
1028	67154	Average	Not really changing much	HOSP			SBAMH needs to be able to admit and keep more patients
1159	67042	Good	Decreasing - slipping downward	HOSP			There are a lot of rumors about the hospital, many substantiated by published data. This needs to greatly improve.
1142	67144	Average	Not really changing much	INSU	OTHR		Care for the uninsured, and a PET scan machine that is not on a truck
1048	67042	Poor	Not really changing much	INSU	QUAL		Services at SBA are extremely expensive so rather than stay in town for services, I would rather go to Wichita. Also the quality of service in town is very low. I'm not sure if it's due to management/moral of employees, but it doesn't seem like people care or have the knowledge to care for you if you use one of the facilities.
1109	66842	Average	Not really changing much	INSU			improved healthcare services for uninsured
1072		Good	Not really changing much	IP	DRUG	ALC	There is a great need for medical detox and then inpatient drug and alcohol treatment immediately following.
1114	67144	Average	Increasing - moving up	IP	PSY		More availability to inpatient psychiatric care.
1090	67042	Average	Increasing - moving up	MRKT	CORP	BH	I believe there needs to be more community outreach and that when doing so all partners in mental health and also hospital care and aging should work together as a united one. This makes the community empowered and gives them a sense of comfort for all kinds of treatments.
1115	67010	Good	Increasing - moving up	MRKT			More information given out to the community as a whole.
1038	67206	Good	Not really changing much	NEO			We need more perinatal services

CHNA 2019 Community Feedback - SBAMH PSA N=161							
ID	Zip	Overall	Movement	c1	c2	c3	In your opinion, are there any healthcare services or delivery issues that you feel need to be improved, worked on and / or changed?
1143	67042	Good	Not really changing much	NO			Nothing personally, but there will always be people that have both positive and negative experiences. I haven't heard of anything major and consistent that seems to be changed.
1084	67042	Poor	Decreasing - slipping downward	NURSE			Better patient to nurse ratios
1002	67042	Good	Not really changing much	NUTR	WELL		It would be great if there was some kind of nutritional class offered free.
1040	67042	Average	Decreasing - slipping downward	OTHR	INSU		The billing process of SBAMH is non existent for customer access. Unable to obtain cost of a procedure prior to obtaining services. Insurance companies expect the consumer to do cost analysis prior to services and it is not available for our local hospital therefore one must consider what the out of pocket charge difference will be for services provided locally vs other hospitals that can give a actual cost of the procedure in advance. Personal experience on MRI, XRay cost research resulted in 4 messages left on machine (liaison office) and NO return call or contact beyond PBX operator)
1144	67017	Very Good	Increasing - moving up	OTHR	PUL	HH	In the past few months, I have had to navigate the health care system due to an aging grandfather. It has been very convenient to receive quality radiology, PET scan, minor procedure and pulmonary needs in El Dorado. The home health services provided by SBA have been fantastic and have helped his overall progress tremendously. Meals on Wheels services have also been a life saver!
1105	67024	Poor	Increasing - moving up	OTHR			counselors and workers that are familiar with the ct's diagnosis
1066	67010	Good	Increasing - moving up	OTHR			I would love to see the smaller communities served within their community somehow. Providers willing to travel once a month? Partner with the school for space?
1044		Good	Not really changing much	OTHR			SBA billing
1086	67042	Good	Increasing - moving up	OTHR			The prices at SBA are much more competitive now.
1151	67041	Average	Not really changing much	PREV			More preventative care
1001	67010	Good	Not really changing much	PRIM			Need more primary care physicians
1065	67123	Poor	Not really changing much	PSY	CLIN		once a month medical and psychological clinic in our community would be helpful
1009	67010	Average	Not really changing much	QUAL	DOCS		Augusta Immediate care we have been there and they told us there was nothing they could do for us and then we went to the doctor on Monday and he prescribed medicine for me. Get some good doctors down there. Also I had to have stitches and within a couple of days they came out I didn't go back.
1007	67010	Poor	Decreasing - slipping downward	QUAL	STFF		Some services are expensive to begin with while some individuals assisting with the services have an unpleasant bedside manner. This makes people feel uncomfortable.
1032	67010	Poor	Decreasing - slipping downward	QUAL	STFF		Work to retain well-seasoned quality medical people, provide better OJT for new personnel, and improve staffing levels.
1073	67042	Average	Not really changing much	QUAL			Listen to people.
1122	67042	Poor	Decreasing - slipping downward	SPEC	WELL	AGE	Lack of critical care needs in hospital to deal with specialties such as pulmonology or cardiology. Lack of orthopedic needs to be addressed related to surgery needs after clinic hours or on weekends. Poor education to elderly community in regards to healthcare with limited availability for patients to access specialty services. Patients end up having to go to Wichita or have procedures done at larger facility.
1158	67042	Very Good	Not really changing much	SPEC			Attract more specialists.
1012	67042	Average	Not really changing much	SPEC			Mostly need more specialists at SBA.
1085		Average	Not really changing much	TRAN	DRUG		Transportation for those that dont have any. The drug abuse problem.
1156	67042	Average	Not really changing much	TRAN	DRUG		Transportation to and from doctors appointments/hospital stays, mental health/substance use meeting transportation services, detox center/medical detox
1071	67042	Good	Not really changing much	TRAN			Access to non emergency transportation in and around butler county for healthcare access, including evenings, weekends and nights.

CHNA 2019 Community Feedback - SBAMH PSA N=161							
ID	Zip	Overall	Movement	c1	c2	c3	In your opinion, are there any healthcare services or delivery issues that you feel need to be improved, worked on and / or changed?
1106	67010	Good	Increasing - moving up	URG	CORP		Improve triage and referral to the most appropriate level and form of care. More integrated care to remove barriers to treatment. Spend less on ineffective community outreach activities such as building parks in low income neighborhoods and PR. Spend more on meaningful engagement and evidenced based care.
1107		Good	Increasing - moving up	URG	CORP		Improvement in triage and referral to the most appropriate type and level of care. More integration in care.
1030	67010	Good	Decreasing - slipping downward	URG	PRIM	INSU	Our community could benefit from a 24-hour urgent care and more primary care physicians that accept state insurance.
1153	67042	Average	Not really changing much	URG			Critical care
1035	67042	Average	Decreasing - slipping downward	URG			SCMH needs a complete overhaul. People that need urgent services are not helped in a timely fashion.
1131	67042	Good	Decreasing - slipping downward	WELL	HUTR	REC	We need to foster an atmosphere of healthy habits in schools, and in healthcare system. Create a wellness navigator for community. Make sure everyone has opportunity to learn healthy eating\ shopping habits. Set up community to foster wellness, sidewalks, bike paths.

CHNA 2019 Community Feedback - SBAMH PSA N=161							
ID	Zip	Overall	Movement	c1	c2	c3	What "new" community health programs should be created to meet current community health needs? Can we partner somehow with others?
1109	66842	Average	Not really changing much	AGE	INSU		additional services for the elderly, uninsured services, medication availability when unable to afford
1053	67042	Very Good	Increasing - moving up	BH	AGE	BH	We need better mental health care. What if we're had some local support groups? The are all kinds of topics that could be included in various sort groups. A group for adult caregivers of their elderly parents, a group for mothers who are struggling with post partum depression, etc.
1020	67042	Good	Not really changing much	BH	DRUG		Mental health/addiction
1048	67042	Poor	Not really changing much	BH	INSU	FAM	mental health programs insurance/financial help (explanation of covered procedures) parenting programs
1077	67042	Good	Decreasing - slipping downward	BH	STFF	OTHR	Mental health. The problem is the entire country suffers from inadequate mental health care. Bring our hospital chaplain back. He was very important to the mental health of the employees and patients thru spiritual reflection
1096	67042	Average	Decreasing - slipping downward	BH	SUIC	PREV	The whole community could be involved in educating people on mental health, and suicide prevention. More law Enforcement needs training in CIT
1116	67010	Average	Not really changing much	BH			Mental health care in the school system.
1001	67010	Good	Not really changing much	CARD	STRK		Cardiac/stroke screenings
1072		Good	Not really changing much	CLIN	DRUG	ALC	Indigent clinics. Drug and alcohol treatment programs.
1121	67010	Poor	Not really changing much	CLIN	INSU	POV	We need a clinic for uninsured, low income adults. Many people do without basic healthcare because of affordability. Dental services for these people are badly needed.
1019	67042	Good	Decreasing - slipping downward	CLIN	NUTR	WELL	We would benefit from having a Health & Wellness Coalition similar to the one in Wichita. Leon needs a health care clinic. We would initiate a Refresh Kansas initiative. We need to do so much more in terms of nutrition education, and agencies/programs being roll models. Local businesses, agencies and programs could be invited to take a Wellness Pledge. Check out the "Make Your Workplace a Sugar Smart Pledge, and the WHO "Be the Change" strategies.
1065	67123	Poor	Not really changing much	CLIN			Possibly start with monthly clinics in rural towns to reach these people and have a chance for assessment.
1088	67010	Average	Not really changing much	COMM			A community referral hub would be ideal for providers to directly refer to community programs/partners for a family. There is a program called IRIS, managed by KU, that our community might benefit from. This would allow all community partners to refer a child/family to necessary program and have more awareness of programs available to families in our community.
1106	67010	Good	Increasing - moving up	CORP	BH	EMER	Partnerships between the CMHC and SBA in the following manner: Behavioral health support in the emergency room to provide assessment and referral. Perhaps a lab agreement for referring diabetic screening, etc... Prenatal behavioral health support and prevention.
1090	67042	Average	Increasing - moving up	CORP	BH	VACC	There needs to be a community outreach mobile unit for mental health, immunizations and health screenings. Break the city into groups and get out in the community and have BBQ, games and get involvement.
1056	67017	Good	Increasing - moving up	CORP	CLIN	POV	Partner with the health department or another clinic like Grace Med to start a medical clinic for those underserved.
1099	67042	Good	Not really changing much	CORP			Better coordination of existing programs in order to better spread information on programs already available.
1131	67042	Good	Decreasing - slipping downward	CORP			Partner w college? Partner w larger employers like Holly
1028	67154	Average	Not really changing much	DOCS			Coalition of healthcare providers
1023	67010	Good	Decreasing - slipping downward	DOH	BH		Community Health Systems. Work to cover the gap from hospital to home. Better Mental health coverage.
1071	67042	Good	Not really changing much	DRUG	DOCS	HOSP	Drug abuse. LEO, community, physicians and SBA.
1052	67042	Good	Increasing - moving up	DRUG	KID		substance abuse, child abuse and neglect

CHNA 2019 Community Feedback - SBAMH PSA N=161							
ID	Zip	Overall	Movement	c1	c2	c3	What "new" community health programs should be created to meet current community health needs? Can we partner somehow with others?
1021	67042	Poor	Not really changing much	DRUG	PHY		There aren't any addiction treatment services/meetings. Only AlAnon. The addiction crisis will hit here, we need to be ready to help those with a substance abuse disorder. This town is SEVERELY uneducated about addiction. We need to begin to change the mindset and the vocabulary of how we talk about it.
1003	67042	Very Poor	Decreasing - slipping downward	DRUG			substance abuse INCLUDING prescription DRUGS!!!
1038	67206	Good	Not really changing much	FEM	BH		maternal mental health
1073	67042	Average	Not really changing much	FINA	CLIN		Low reduced fee clinic
1076		Good	Increasing - moving up	FINA	POV		Yes, a Grace Med opportunity here locally for people who need a sliding scale health care for people who have no money. Needs are not met because of poverty.
1083	67042	Good	Decreasing - slipping downward	FINA			Maybe nothing new, maybe work on making sure you can sustain the programs already initiated.
1030	67010	Good	Decreasing - slipping downward	FINA			We have good base programs that could all be bolstered by more financial support.
1093	67010	Average	Decreasing - slipping downward	HSP			SBA needs a hospice division in the community
1040	67042	Average	Decreasing - slipping downward	INSU			We need to have programs that help the working class so they feel like they can obtain health care also. The persons with state insurance are getting more needs met than the working poor.
1014	67042	Average	Not really changing much	KID	INSU		A free child health screening day for children without insurance.
1146	67144	Good	Decreasing - slipping downward	KID	NUTR	EYE	The high free and reduced lunch percentage in our schools indicates the need for services to make sure the children in our community are getting adequate nutrition. If this is the case, health care is probably not a top priority in their families either. We need to continue the Kids need 2 eat summer program and look at ways eye exams, dental care and health assessments can be incorporated to serve the needs of our low income families.
1063	67042	Good	Increasing - moving up	KID	PREV	WELL	Coalitions for children (Safe kids), which can include preventative education and resources made available so a generation from now, the same challenges don't appear on this survey. A website or organization that databases all of the healthcare resources available, with a short description and contact information.
1066	67010	Good	Increasing - moving up	KID	VACC	BH	Partner with the schools. USD 206 would love to offer space or assist in some way. We'd love to see immunizations for our students, physicals and MH services provided.
1086	67042	Good	Increasing - moving up	KID			There needs to be an increase in services that would decrease adverse childhood experiences.
1159	67042	Good	Decreasing - slipping downward	MRKT	COMM		Enhanced publicity on each of the current community health programs would increase awareness of what is available and therefore reach more people for treatment. Making annual reports available online with public notification would also increase awareness of what is being done to meet community needs.
1007	67010	Poor	Decreasing - slipping downward	MRKT			There are few programs that are not out there available. Most people do not have knowledge of them.
1029	67042	Average	Not really changing much	NUTR	ACC		Make healthy food choices more available and affordable
1002	67042	Good	Not really changing much	NUTR	OBES		We really need assistance in nutritional planning. Diets, to prevent obesity. And how to overcome it when we have it.
1070	67144	Good	Not really changing much	OBES	CLIN	URG	Obesity treatment Healthcare clinics open on weekends.
1142	67144	Average	Not really changing much	OBG	URL	CANC	More choices for obgyn, urology, PET scan machine for local cancer center.
1153	67042	Average	Not really changing much	OTHR			Free CPR/First Aid
1067	67042	Poor	Decreasing - slipping downward	POV	FAC		Assistance with homelessness and having a year round homeless shelter.
1117	67042	Poor	Decreasing - slipping downward	POV	FAM	KID	A Program to teach people on welfare to apply for job, pick up applications, to learn to be responsible. A program to help parents pay more attention to their kids, instead of being on their phone. Program to teach kids some respect. Program to help the elderly with food and medical assistance. More religious/spiritual programs. I THINK THEY NEED A SCARED STRAIGHT PROGRAM FOR KIDS!



CHNA 2019 Community Feedback - SBAMH PSA N=161							
ID	Zip	Overall	Movement	c1	c2	c3	What "new" community health programs should be created to meet current community health needs? Can we partner somehow with others?
1054	67133	Good	Increasing - moving up	POV	MRKT	NUTR	Poverty training - partner with THRIVE! Butler and help spread the word and educate people on how to make healthy life choices (not just nutritionally.)
1059	67042	Good	Increasing - moving up	POV	WELL		Poor and Homeless need education and screening
1016	67042	Good	Increasing - moving up	POV			Services for financially challenged
1084	67042	Poor	Decreasing - slipping downward	POV			Something to help treat the homeless people living in El Dorado.
1151	67041	Average	Not really changing much	PREV	WELL	OBES	Preventative health, health coaching, obesity education/awareness, fitness
1032	67010	Poor	Decreasing - slipping downward	QUAL			Learn from the best facilities such as Mayo Clinic and incorporate evidence-based best practices. Get away from punitive practices in the medical fields and move towards learning and implementing corrective actions as a result of medical errors.
1010		Good	Increasing - moving up	REC	FAC		I wish there was a place to walk indoors in the winter other than the YMCA.
1012	67042	Average	Not really changing much	SPEC	HOSP		specialist partners with other hospital's would be a great start
1105	67024	Poor	Increasing - moving up	SPEC			bring in and align with Specialist in their field
1137		Poor	Not really changing much	STFF			Sexual Assault nurses
1034	67002	Average	Decreasing - slipping downward	SUIC	AGE	BH	Suicide is on the rise. I feel attention needs to be given to screening the elderly for depression, anxiety, etc.
1115	67010	Good	Increasing - moving up	SUIC	PREV	DRUG	More on suicide prevention for teens. Drug use among teens
1113	67002	Average	Increasing - moving up	SUIC	WELL		Increase in suicide risk assessment, education, and resources for students/parents/teachers. Health fairs.
1132	67042	Very Good	Increasing - moving up	TEL			more telemedicine specialties
1156	67042	Average	Not really changing much	TRAN	IP		Transportation services, medical detox
1055	67042	Good	Increasing - moving up	VETS			VETERANS NEEDS A VA HERE
1122	67042	Poor	Decreasing - slipping downward	WELL	FEM	MAMO	Increase education and screening for women to enable free mammograms. This service is under utilized. Education regarding using condoms and STD's in schools with community health, hospital and school cooperation. Teaching kids how to use a condom. Sex education for not only heterosexual couples but also homosexual couples. Being honest about STD treatment and follow up.
1101	67042	Good	Increasing - moving up	WELL	STD	FAM	More education on STD's and classes for new parents
1144	67017	Very Good	Increasing - moving up	WELL			I have appreciated SBA's willingness to partner with my employer on wellness education and activities.



## Let Your Voice Be Heard!

**Susan B. Allen Memorial Hospital (SBAMH) is partnering with Butler County Health Department and South Central Mental Health in order to create a 2019-2021 Butler County, Kansas Community Health Needs Assessment (CHNA). To collect "up to date" community feedback, a short online survey has been created to uncover any current community health issues and evaluate local health delivery.**

**While your participation is voluntary and confidential, all community input is valued. Thank you for your attention! Deadline to participate is Friday, April 12th, 2019.**

1. In your opinion, how would you rate the "Overall Quality" of healthcare delivery in our community?

☐ Very Poor ☐ Poor ☐ Average ☐ Good ☐ Very Good

2. When considering "overall community health quality", is it ...

☐ Increasing - moving up ☐ Decreasing - slipping downward  
☐ Not really changing much

Why? (please specify)

3. In your opinion, are there any healthcare services or delivery issues that you feel need to be improved, worked on and/or changed? (Please be specific.)

4. In your own words, what is the general community perception of healthcare providers (i.e. hospitals, doctors, public health, etc.) serving our community? (Please be specific.)

5. From past health assessments of our community, a number of health needs were identified as priorities. Are any of these an ongoing problem for our community? Please select all that apply.

- |   |  |
|---|--|
| <input type="checkbox"/> Abuse / Violence                 | <input type="checkbox"/> Obesity         |
| <input type="checkbox"/> Access to Healthcare             | <input type="checkbox"/> Poverty         |
| <input type="checkbox"/> Cancer                           | <input type="checkbox"/> Prenatal Care   |
| <input type="checkbox"/> Diabetes                         | <input type="checkbox"/> STD Education   |
| <input type="checkbox"/> Immunizations                    | <input type="checkbox"/> Substance Abuse |
| <input type="checkbox"/> Mental Health Services           | <input type="checkbox"/> Suicide         |
| <input type="checkbox"/> Nutrition and Wellness Education | <input type="checkbox"/> Urgent Care     |

6. Which past health assessment of our community need is NOW the "most pressing" for improvement? Please select top THREE.

- |   |  |
|---|--|
| <input type="checkbox"/> Abuse / Violence                 | <input type="checkbox"/> Obesity         |
| <input type="checkbox"/> Access to Healthcare             | <input type="checkbox"/> Poverty         |
| <input type="checkbox"/> Cancer                           | <input type="checkbox"/> Prenatal Care   |
| <input type="checkbox"/> Diabetes                         | <input type="checkbox"/> STD Education   |
| <input type="checkbox"/> Immunizations                    | <input type="checkbox"/> Substance Abuse |
| <input type="checkbox"/> Mental Health Services           | <input type="checkbox"/> Suicide         |
| <input type="checkbox"/> Nutrition and Wellness Education | <input type="checkbox"/> Urgent Care     |

7. In your opinion, what are the root causes of "poor health" in our community? Please select top THREE.

- |   |  |
|---|--|
| <input type="checkbox"/> Health & wellness education                | <input type="checkbox"/> Elder assistance programs                                     |
| <input type="checkbox"/> Chronic disease prevention                 | <input type="checkbox"/> Family assistance programs                                    |
| <input type="checkbox"/> Limited access to mental health assistance | <input type="checkbox"/> Awareness of existing local programs, providers, and services |
| <input type="checkbox"/> Case management assistance                 | <input type="checkbox"/> Finance & Insurance coverage                                  |

Other (please specify)

8. How would our community area residents rate each of the following health services?

	Very Good	Good	Fair	Poor	Very Poor
Ambulance Services	<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"/>
Chiropractors	<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"/>
Emergency Room	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eye Doctor/Optomtrist	<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"/>
Home Health	<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"/>

9. How would our community area residents rate each of the following health services? Continued.

	Very Good	Good	Fair	Poor	Very Poor
Inpatient Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health	<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"/>
Outpatient Services	<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"/>
Physician Clinics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public Health	<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"/>
Specialists/Medical Providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Community Health Readiness is vital. How would you rate each of the following?

	Very Good	Good	Fair	Poor	Very Poor
Early Childhood Development Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency Preparedness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food and Nutrition Services/Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poverty/Financial HEalth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health Screenings (such as asthma, hearing, vision, wellness)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Immunization Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obesity Prevention & Treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Community Health Readiness is vital. How would you rate each of the following? Continued.

	Very Good	Good	Fair	Poor	Very Poor
Spiritual Health Support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prenatal / Child Health Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexually Transmitted Disease Testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance Use Treatment & Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco Prevention & Cessation Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Violence Prevention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Women's Wellness Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
WIC Nutrition Program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. In the past 2 years, did you or someone you know receive healthcare services outside of our community?

- ☐ Yes ☐ I don't know
- ☐ No

If YES, please specify the healthcare services received.

13. Are our healthcare organizations, providers and community members actively working together to address/improve health in our community?

- ☐ Yes ☐ I don't know
- ☐ No

Please explain

14. What "new" community health programs should be created to meet current community health needs?  
Can we partner somehow with others?

15. Are there any other health needs (listed below) that need to be discussed further at our upcoming CHNA Town Hall meeting? (Please select all that apply.)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Abuse/Violence                    | <input type="checkbox"/> Lead Exposure            | <input type="checkbox"/> Sexually Transmitted Diseases |
| <input type="checkbox"/> Alcohol                           | <input type="checkbox"/> Mental Illness           | <input type="checkbox"/> Smoke-Free Workplace          |
| <input type="checkbox"/> Breast Feeding Friendly Workplace | <input type="checkbox"/> Nutrition/Access to Food | <input type="checkbox"/> Suicide                       |
| <input type="checkbox"/> Cancer                            | <input type="checkbox"/> Obesity                  | <input type="checkbox"/> Teen Pregnancy                |
| <input type="checkbox"/> Diabetes                          | <input type="checkbox"/> Environmental health     | <input type="checkbox"/> Tobacco Use                   |
| <input type="checkbox"/> Drugs/Substance Abuse             | <input type="checkbox"/> Physical Exercise        | <input type="checkbox"/> Vaccinations                  |
| <input type="checkbox"/> Family Planning                   | <input type="checkbox"/> Poverty                  | <input type="checkbox"/> Water Quality                 |
| <input type="checkbox"/> Heart Disease                     | <input type="checkbox"/> Lung Disease             | <input type="checkbox"/> Wellness Education            |

Other (please specify)

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

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Business / Merchant                 | <input type="checkbox"/> EMS / Emergency        | <input type="checkbox"/> Other Health Professional |
| <input type="checkbox"/> Community Board Member              | <input type="checkbox"/> Farmer / Rancher       | <input type="checkbox"/> Parent / Caregiver        |
| <input type="checkbox"/> Case Manager / Discharge Planner    | <input type="checkbox"/> Hospital / Health Dept | <input type="checkbox"/> Pharmacy / Clinic         |
| <input type="checkbox"/> Clergy                              | <input type="checkbox"/> Housing / Builder      | <input type="checkbox"/> Media (Paper/TV/Radio)    |
| <input type="checkbox"/> College / University                | <input type="checkbox"/> Insurance              | <input type="checkbox"/> Senior Care               |
| <input type="checkbox"/> Consumer Advocate                   | <input type="checkbox"/> Labor                  | <input type="checkbox"/> Teacher / School Admin    |
| <input type="checkbox"/> Dentist / Eye Doctor / Chiropractor | <input type="checkbox"/> Law Enforcement        | <input type="checkbox"/> Veteran                   |
| <input type="checkbox"/> Elected Official - City/County      | <input type="checkbox"/> Mental Health          | <input type="checkbox"/> Unemployed                |

Other (please specify)

17. What is your home ZIP code? Please enter 5-digit ZIP code; for example 00544 or 95305



## VVV Consultants LLC

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