

Report on 2020 Community Healthcare Needs survey

The best surveys tell a story. And that story helps us to understand where we are currently, and what new goals we should set for the future. First, a bit of background on our 2020 survey collection, then we'll see what we can learn from the tapestry woven by the 2020 survey answers. And we will also compare some key points between the 2018 and 2020 surveys (addendum A).

2020 survey background

- Early May: CHW began designing/creating the 24-question survey (the Survey Monkey online version, and the USPS-mailed paper version) – the same questions appear in both.
- July 23rd: Public distribution of the online survey.
- July 30th: Paper survey mailed to all 782 in-county postal addresses in our catchment area.
- August 31st: Deadline to complete/return all versions of the survey.
- Total received: 90 (9 filled out online; 81 paper surveys by return mail & hand delivery)

A few additional 2020 survey analysis parameters:

What did we seek to learn from our 24-question survey?

About those who responded:

Is your PCP with Asher?
Why seek healthcare outside County?
Do you face discrimination, or other limiting factors?
What chronic conditions do you struggle with?

Social Determinants of Health:

Financial strain or difficulty?
Food availability or insecurity?
Is there access to Transportation?

Are you getting needed help for

Mental Health? Substance abuse?

Are you receiving help needed for:

Medical care? Dental care? Medications?
...If not, why not?

What is your community perception of
Opioid or other pain medication abuse?

... the Goal Posts:

Their overall healthcare concerns,
then drilled down to their biggest one.

What do they want to see in the future
to improve our local healthcare?

- All paper-survey responses (*except the hand-written side notes) were carefully hand-entered into the Survey Monkey database alongside the online submitted responses. They were all tagged to differentiate between online submission vs paper copy.
- I entered the paper-surveys into Survey Monkey to allow for a coordinated analysis of results for ALL methods/ ALL responses.
- * Copies of the hand-written side notes are attached to the final report as addendum D.

Overview - what can we learn

(If needed for quick reference, a single-page list of all the survey questions is attached as addendum B. Also, the questions plus answer data is included as addendum C)

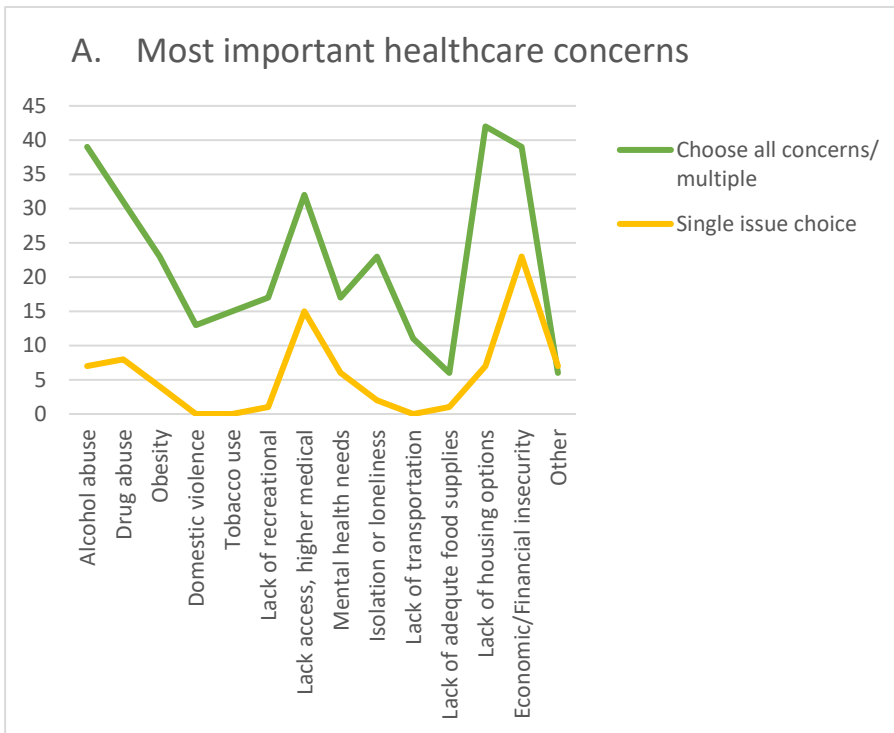
These are only highlights; the full data has been included for individual discernment.

Is their PCP (primary care provider) with Asher CHC or not, and what were their reasons for obtaining care outside of Wheeler County?

Many who answered that their Primary Care Provider is indeed at Asher CHC also gave reasons for obtaining care elsewhere. This illustrates that while many respondents do consider Asher as their healthcare home, they also recognize the need to travel for specialty care or higher-level medical services. They did not see it as an "either – or" choice.

What are our citizen’s observations of barriers to healthcare, such as discrimination (gender, race, ethnicity, sexual orientation, income or education level), or limiting factors such as age or disability? “Residing in a remote rural location” can certainly be a barrier, and it was the top reason given (18%). It is interesting to note however, 72% of the respondents didn’t feel that identifying *any* barrier was applicable to their situation.

Current Concerns: To learn what the respondents see as the biggest local healthcare gaps and concerns, we asked two questions – and started with a ‘big net’: providing a list of common concerns and allowing for *multiple* affirmative answers. Next, we asked them to drill it down to a *single* concern. (see table A)



Since “Economic/ Financial Insecurity” received high marks, it seems surprising that “Lack of Adequate Food Supplies” was so low. Is this due in part to local food support and resources such as CAPECO’s nutritional food-share programs, senior meal sites, SNAP and Frontier Veggie RX? Was the economic/ financial insecurity due to uncertainty from the rising of Covid-19?

When choosing multiple concerns, top ranked was “Lack of Housing Options”, but then that ranked much lower on the ‘single biggest concern’ drill down.

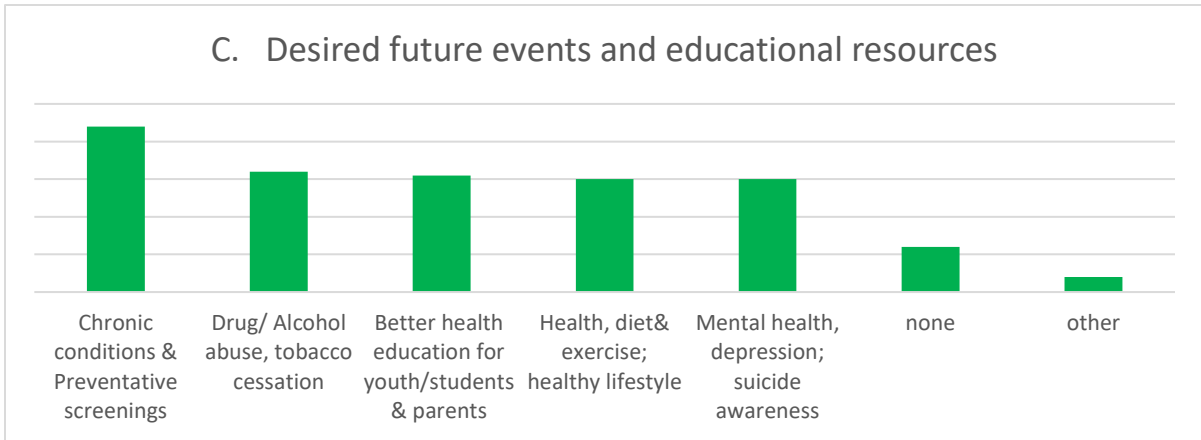
What’s needed – ideas for the future: When asked to give their single best idea for improving access to healthcare locally, respondents gave the top ranking to “More Primary Care Providers” (29%).

A strong second choice was “Expanded Clinic Hours” (25%). (table B)

And interestingly, 14% said ‘No Improvement Needed’.

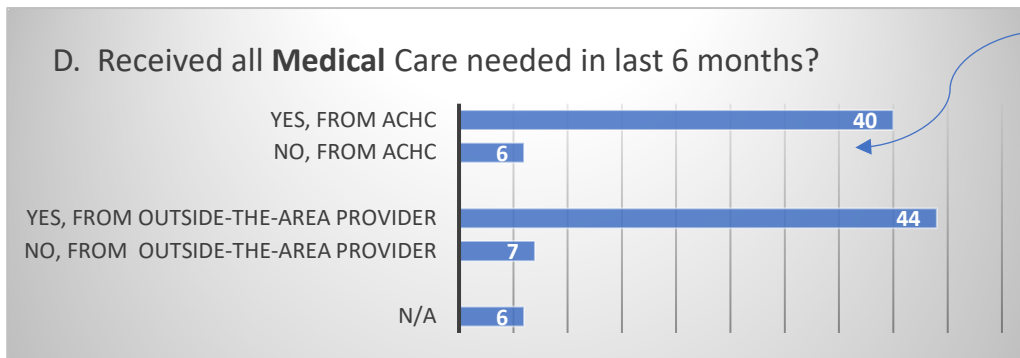


And what countywide healthcare events and educational resources do they feel are most needed? (table C)



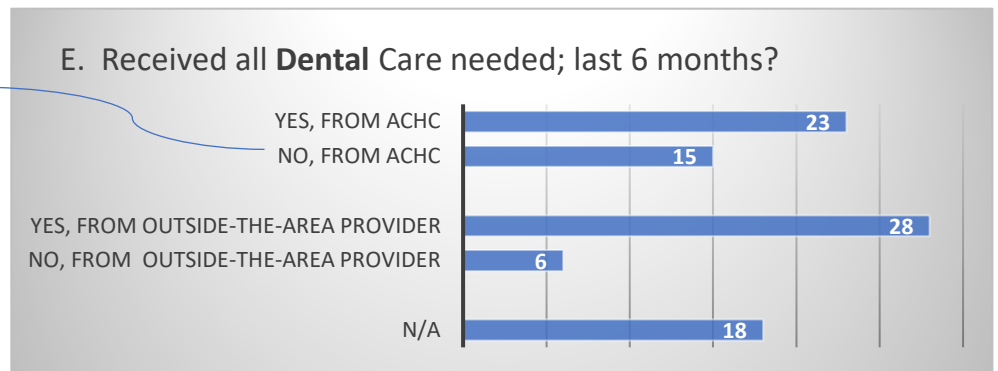
Every category received high marks. And again, 14% answered "none".

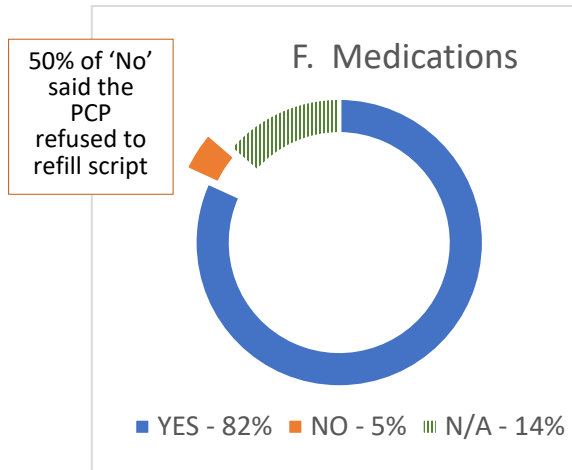
Getting the care needed? And if not, why not? The next 4 category questions seek to understand if the respondents believe they are getting all the care or medications needed, and if not—why not. There were some hand-written notations on the paper-copy surveys that indicated Coronavirus (Covid -19) played a role in preventing them at times from obtaining the care they needed.



For those that said no they didn't get the care needed from ACHC, 50% said it was due to not getting a timely appointment. The other 50% said it was for 'other' reasons.

With Dental Care, the top issues given by those saying 'No, from ACHC', was: 57% said 'other' with some notations of Covid-19 as the problem. This was followed by: 'costs too much' (29%), and then a 'lack of timely appointment' (14%).





Needed Medications: 83% of the respondents said they are getting all the medications they needed in the last 6 months. (table F) For those that said 'No', half said the PCP refused to refill the prescription.

Needed Treatment for Mental Health issues or Substance Abuse: The majority (76%) said they didn't have anyone in their household that needed this treatment in the last 6 months.

For those that said they did, the main reason they didn't get the help needed was: Costs too much- 12.5%, Couldn't get appt w-local provider- 12.5%, The person didn't believe they needed help- 12.5%, and 62.5% said 'other' or 'N/A'.

Pain medication / Opioid Abuse: Opioid and pain medication abuse has become a national issue, with opioids being involved in 46,802 overdose deaths in 2018 (the most recent complete data)—and in Oregon in 2018, there were 339 drug overdose deaths involving opioids¹. The respondents to our 2020 survey Q-16 have a perception with this subject currently, very much like they had two years ago.

Q-16: *“Do you, or does someone you know, struggle with prescription pain medication or opioid medication abuse?”* In 2018: 94% answered no. In 2020: 99% answered no. Although “drug abuse” and “opioid abuse” are not the same thing, it is interesting to note that of those who answered ‘no’ to Q-16 in 2020, 38% of those respondents said they felt drug abuse was a serious local concern. On another side note, 36% of them would like to see more local community resources for drug and substance abuse.

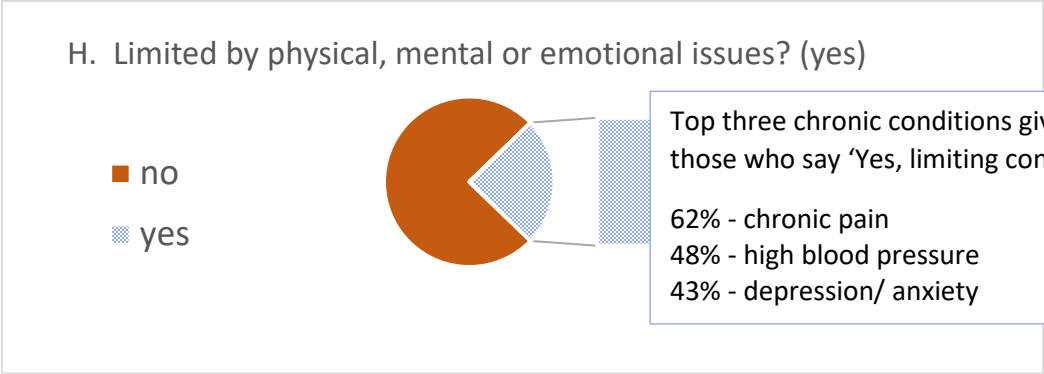
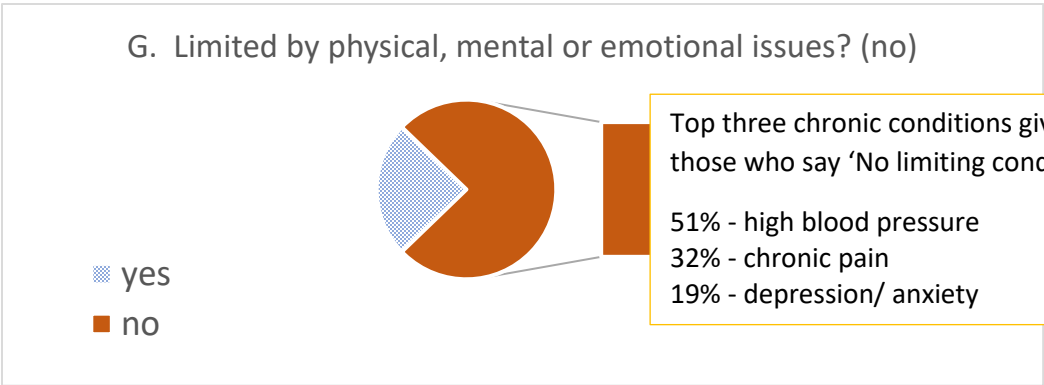
Self-assessment, Mental Health: 68% of respondents (average of both Q-17 and Q-18) didn't feel that they were bothered in the last 6 months by feeling down, depressed or hopeless. Of those that did, 15% said it was ‘only occasionally’. Troubling to note that approximately 11% were feeling down, depressed or hopeless as often as “every day; more than half the time; or several days” in the last 6 months.

Interesting to note, when I filter the answers of those who said ‘no’ to Q-17 ‘feeling little interest or pleasure in last 6 months’, 7% said they *did* indeed feel down, depressed or hopeless occasionally or once/twice in the last 6 months (Q-18).

Physical, Mental, Emotional problems limitations? The majority of respondents (76%) don't feel they are limited by physical, emotional or mental problems (Q-19). Do we attribute these results to stoicism and strong fortitude, or to lack of higher resources readily available?

Q-24 looks at the diagnosed chronic conditions the respondents have. It was interesting to compare the yes-and-no respondents of Q-19 against the diagnosed chronic conditions provided in Q-24 (tables G & H). Each way (and also in the all-respondent results), three chronic conditions float to the top. Do these three chronic conditions align with our priorities for patient education and resources?

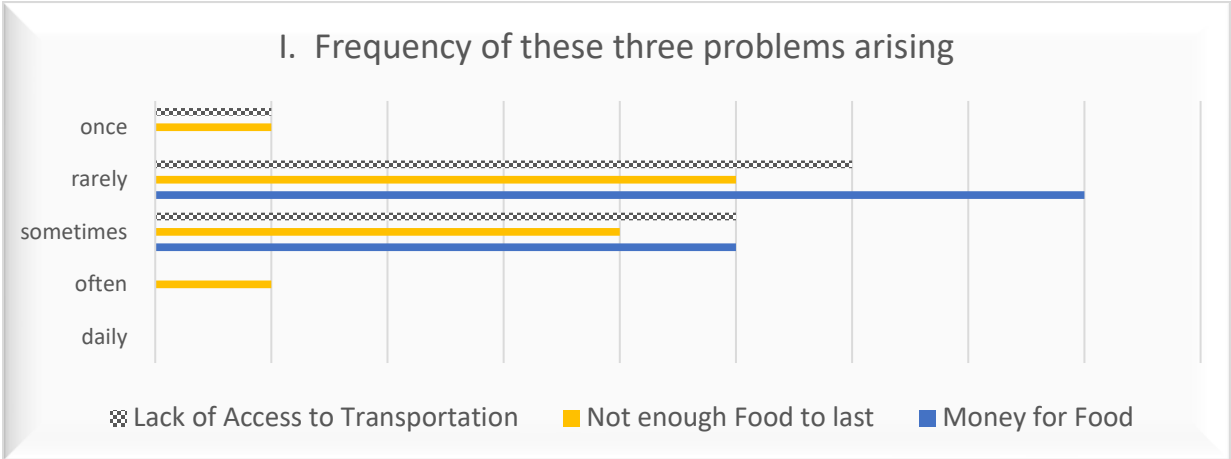
¹ NIDA. 2020, April 3. Oregon: Opioid-Involved Deaths and Related Harms. Retrieved from <https://www.drugabuse.gov/drug-topics/opioids/opioid-summaries-by-state/oregon-opioid-involved-deaths-related-harms> on 2020, September 30.



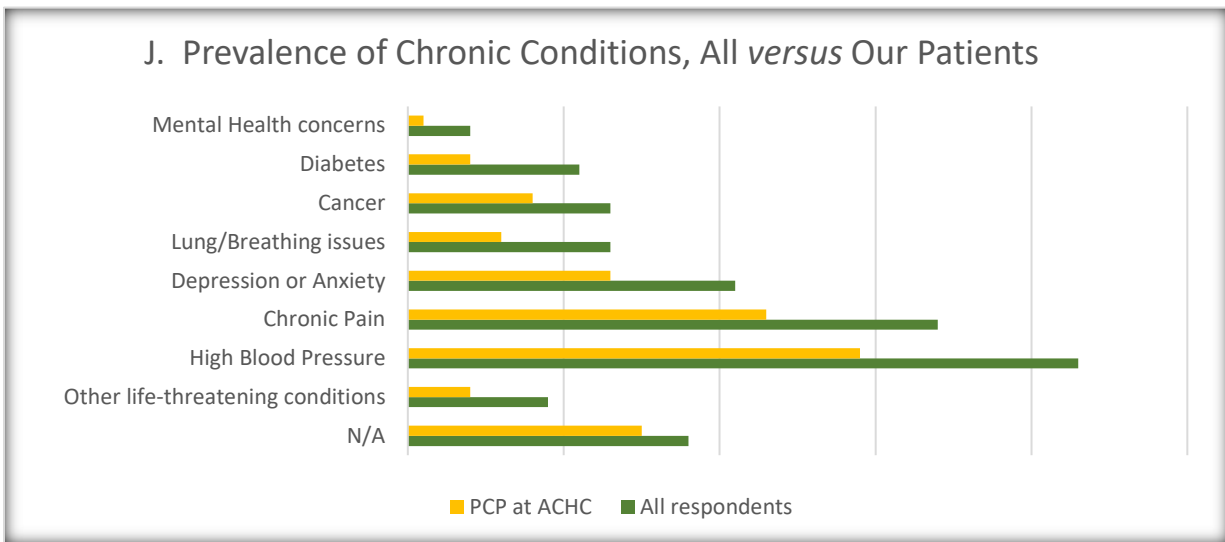
Social Determinants of Health (SDH): Three determinant-areas (Financial, Food, Transportation) were covered with four questions (Q-20 to Q-23).

Financial Strain / Insecurity: The first question was a simple 'yes-no' regarding financial insecurity during the last 12 months, with 94% answering 'No', they were able to pay rent, mortgage and utilities.

Money for Food, Enough Food to Last, Lack of Access to Transportation: The majority of respondents in these areas felt that this was not applicable to their situation (answering N/A at 85%, 88%, and 86% respectively). For those that did give an affirmative answer, the frequency is shown below (table I). After 'not applicable', the most frequent answer was "rarely".



Chronic Conditions: When we consider the chronic conditions our respondents have been diagnosed with, we find that the top three issues are: High Blood Pressure, Chronic Pain, and Depression or Anxiety. This stays consistent when we filter the results to show only our patients.



Coronavirus, Covid-19: In this survey we did not have questions dealing specifically with Covid-19 and the pandemic, and what effect it has had on our respondent’s lives and healthcare. This was due to:

- a desired consistency with earlier years survey questions to better spot trends over time
- lookback period – several survey questions ask for responses based on the previous 6-12 months
- the survey’s final questions were actually selected early in the year and Covid-19 had not hit its eventual height of social impact

It would be helpful at some point in the near future to conduct a brief patient survey focused on how significantly the pandemic has interrupted healthcare and the delivery of medical services for our constituents.

We know that in the last few months there was indeed a serious impact; we heard from patients directly as we had to curtail the clinic’s operations during the shut-down. Even with no coronavirus specific questions, five respondents (6%) took the time to note on the survey pages that Covid-19 was a factor in why they answered as they did.

If we understand specifically what issues were the most problematic with this pandemic, we may be able to proactively decrease the negative impact in the future if a similar situation arises.

Do we really know what healthcare impact the pandemic had on our local constituents?

- When they couldn’t get an in-person provider appointment, would a virtual visit have sufficed?
- What alternate ways could ACHC help those with chronic conditions stay on track with compliance and monitoring?
- When travel out of the area was discouraged and avoided, could we have filled a healthcare need for those who were not previously a patient of ours? If so, how could we have reached them?
- For some of our constituents, feeling disconnected and alone might be the most harmful health impact during this time of masks and distancing.
- Asking our patients themselves what actions we could do in the future to help, might lead us into solutions we haven’t dreamt of yet.

2020 Community Healthcare Needs Summary Table: *(Both written and online)*

EOCCO: Eastern Oregon Coordinated Care Org.
 GOBHI: Greater Oregon Behavioral Health, Inc.
 CCS: Community Counseling Solutions
 CHW: Community Health Worker
 RAP: Rental Assistance Program

CAPECO: Community Action Program of East
 Central Oregon
 VOCA: Victims of Crime Act
 HITS: screening, "Hurt, Insult, Threaten, Scream"
 SNAP: Supplemental Nutrition Assistance Prog.

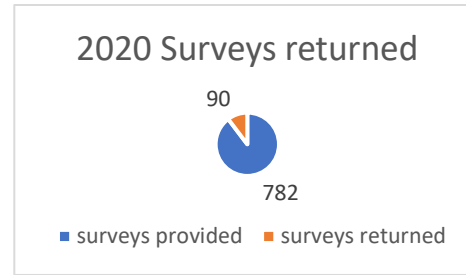
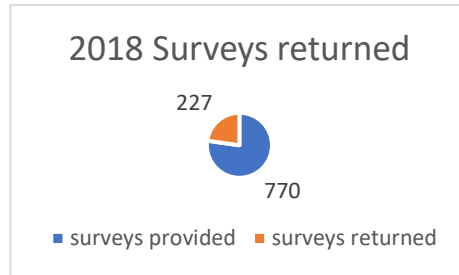
Q-4: Which of the following present serious local concerns?	Issue listed by Order of Importance	Alternative/ Appropriate Entities	ACHC's Plan to Address ◆ = Items we already do, or can do. ❖ = Budget, Time, or Personnel restrictions.	Comment
	Lack of housing	Haven House/ GOBHI RAP	Social determinants of health screening; referral to one of two GOBHI rental assistance programs	◆
	Economic/ Financial insecurity	SNAP/ DHS	Refer to resources	◆
	Alcohol abuse	GOBHI/ CCS	Screenings, referrals, supportive medical services, community education, MediPlay outreach, ACHC website listing	◆
	Lack of access to higher medical care		Referrals, tele health, St Alphonsus, contractual relationships, facilitate assistance for Pt transportation	◆
	Drug abuse	GOBHI/ CCS	Screenings, referrals, supportive medical services, community education, MediPlay outreach, ACHC website listing	◆
	Obesity		Tele health nutritional counseling, CHW referral, Provider directed care plan, MediPlay outreach	◆
	Isolation / loneliness	CCS / <i>(some isolation is by personal preference)</i>	Referrals to CCS Peer Support or Warmline, community outreach and education of programs, CHW outreach	◆
	Lack of rec facilities	City or County		
	Mental health needs	CCS/ GOBHI	Screenings, referrals, networking between providers for continuity of care, staff trainings, MediPlay outreach, ACHC website listing	◆
	Tobacco use	Wheeler Co. Public Health	Screening, counseling, prescriptions, MediPlay outreach, ACHC website listing	◆
	Domestic violence	Law enforcement/ VOCA aide	HITS screenings, referral, educational materials, MediPlay outreach	◆
	Lack of transportation	WCCT/ EOCCO	Provider distributes cards with WCCT contact info, ACHC website listing, social determinants of health screenings, MediPlay outreach	◆
	Lack of adequate food supplies	LCAC/ SNAP/ CAPECO / Food Bank	Refer to Veggie RX, CHW nutritional drink samples give-away, referral to services, social determinants of health screening	◆

Q-6: If you could do one thing to improve local access to health care... (Future Dreams)	Issue by Order of Importance	Alternative/ Appropriate Entities	ACHC's Plan to Address ◆ = Items we already do, or can do. ❖ = Budget, Time, or Personnel restrictions.	Comment
	More PCPs		Added 3 rd provider	◆
	Expanded clinic hours			❖
	More in-home services		Re-focus CHW program; virtual provider visits	◆
	Lower costs		340B program with local pharmacy; medical sliding fee scale; dental sliding fee program revised	◆
	Wider variety of tele-health		Negotiating Cardiology tele health program; look for additional opportunities	◆
Q-3: Have any of the following limited your ability to receive adequate health care? (Discrimination)	Issue by Order of Importance	Alternative/ Appropriate Entities	ACHC's Plan to Address ◆ = Items we already do, or can do. = Budget, Time, or Personnel restrictions.	Comment
	Reside in remote rural location- 18%	WCCT/ EOCCO	CHW home visits, St Alphonsus, Tele health, virtual visits, in-home provider visits	◆
	Income Level- 4%		Sliding fee scale, free sports physicals & BP checks, vaccines for children, Cultural competency staff training, community health fair screening events, Social determinants of health screening	◆
	Education Level-2%		As much as possible using clear simple language forms, closed loop communication used,	◆
	Gender- 1%		Cultural competency staff training	◆
	Sexual Orientation- 1%		Cultural competency staff training	◆
	Age- 1%		As much as possible using clear simple language forms, closed loop communication used	◆
	Disability- 1%		Cultural competency staff training, ADA accessible facilities	◆
	Race, ethnicity, cultural barrier- 0%		Cultural competency staff training	◆

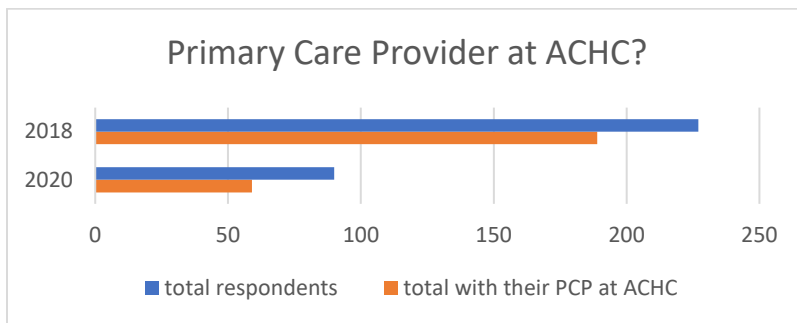
Addendum A

Comparisons between 2018 survey and 2020 survey – **key points:**

We had a larger number of surveys returned two years ago.



In 2018, we sent the survey in an eye-catching envelope that included a pre-addressed return envelope. In 2020, we sent the survey as a single-fold mailer, with a fold-option providing a smaller measure of return mail privacy. Many of the 2020 returned surveys were substantially taped or stapled on all sides.



In 2018, 83% of the respondents said their Primary Care Provider was from Asher CHC.

In 2020, 66% their PCP is at Asher CHC. *(A decline)*

Comparison of “Single highest concerns for healthcare in our communities today”:

2018 biggest single concern:

- 1st Drug abuse
- 2nd Alcohol abuse
- 3rd Lack of access to higher medical care
- 4th Obesity

2020 biggest single concern:

- 1st Economic/Financial insecurity
- 2nd Lack of access to higher medical care
- 3rd Drug abuse
- 4th tie: Alcohol abuse *and* lack of housing options

“Multiple serious concerns in 2020 for our communities today” – When respondents could check as many categories as needed, below were the top rankings for a variety local healthcare concerns in 2020:

- 1st Lack of housing options
- 2nd tie: Alcohol abuse *and* Economic/Financial insecurity
- 3rd Lack of access to higher medical care
- 4th Drug abuse

Main reason for seeking care outside Wheeler County: **2018:** 48% - needed care can’t get locally (1st)
2020: 54% - needed care can’t get locally (1st)

Biggest barrier to receiving adequate healthcare: **2018:** 12% - remote rural location (2nd), and 78% - not applicable to their situation (1st)
2020: 18% - remote rural location (2nd), and 72% - not applicable to their situation (1st)

Addendum B

1. Is your primary Medical Provider associated with Asher CHC?
2. If you regularly seek care outside of Wheeler County, what are the main reasons why?
3. Do you feel any of the following have limited your ability to receive adequate health care, due to any of the following reasons?
4. Which of the following do you feel present serious concerns our communities today? (check as many as needed)
5. Which do you feel is the most important health concern our communities are facing today? Please select ONE only
6. If you could do ONE thing to improve our community's access to health care, what would it be?
7. Regarding future County-wide health care events, what concerns would you like to see addressed? (Mark all that apply)
8. MEDICAL CARE: If you or someone in your household needed medical care in the last 6 months, did they get all the medical care they needed?
9. If you or they didn't get the needed medical care, what were the main reasons? (Mark all that apply)
10. DENTAL CARE: If you or someone in your household needed dental care in the last 6 months, and did you or they get all the dental care needed?
11. If you or they didn't get all the dental care needed, what was the main reason they didn't?
12. MEDICATIONS: If you or someone in your household needed prescription medications in the last 6 months, did they get all the medications they needed?
13. If they didn't get the medications needed, what was the main reason?
14. MENTAL HEALTH / SUBSTANCE USE: In the last 6 months, was there a time when you or someone in your household needed treatment for mental health or substance use?
15. If they didn't get the mental health or substance use treatment help they needed, what was the main reason?
16. Do you, or does someone you know, struggle with prescription pain medication or opioid medication abuse?
17. If you have been bothered by having little interest or pleasure in doing things in the past 6 months, how often?
18. If you have been bothered by feeling down, depressed, or hopeless in the last 6 months, how often?
19. Does a physical, mental, or emotional problem limit your ability to work or perform routine tasks?
20. In the last 12 months, were you or other members of your household unable to pay your rent, mortgage, or utility bills?
21. If in the last 12 months you had to cut the size of meals or you skipped meals because there wasn't enough money for food, how often?
22. If in the last 12 months you have been worried that your food would run out before you got money to buy more, how often?
23. If in the last 12 months it was difficult to access transportation when you needed it, how often?
24. Have you ever been told by a doctor or other health professional that you have any of the following conditions? (Mark all that apply)

Q1 Is your primary Medical Provider associated with Asher CHC?

Answered: 90 Skipped: 0

ANSWER CHOICES	RESPONSES	
Yes	65.56%	59
No	34.44%	31
TOTAL		90

Q2 If you regularly seek care outside of Wheeler County, what are the main reasons why?

Answered: 84 Skipped: 6

ANSWER CHOICES	RESPONSES	
Needed care that I can't get locally	53.57%	45
Had established care elsewhere before moving here; continuing that	25.00%	21
N/A	20.24%	17
Small community; concern with privacy	8.33%	7
Do not have confidence with local providers	7.14%	6
Total Respondents: 84		

Q3 Do you feel any of the following have limited your ability to receive adequate health care, due to any of the following reasons? (check as many as needed)

Answered: 82 Skipped: 8

ANSWER CHOICES	RESPONSES	
N/A	71.95%	59
Reside in remote rural location	18.29%	15
Income level	3.66%	3
Educational level	2.44%	2
Gender	1.22%	1
Sexual orientation	1.22%	1
Age	1.22%	1
Disability	1.22%	1
Race or ethnicity; cultural barrier	0.00%	0
Total Respondents: 82		

Q4 Which of the following do you feel present serious concerns our communities today? (check as many as needed)

Answered: 79 Skipped: 11

ANSWER CHOICES	RESPONSES	
Lack of housing options	53.16%	42
Alcohol abuse	49.37%	39
Economic/Financial insecurity	49.37%	39
Lack of access to higher medical care	40.51%	32
Drug abuse	39.24%	31
Obesity	29.11%	23
Isolation or loneliness	29.11%	23
Lack of recreational facilities	21.52%	17
Mental health needs	21.52%	17
Tobacco use	18.99%	15
Domestic violence	16.46%	13
Lack of transportation	13.92%	11
Lack of adequate food supplies	7.59%	6
Other	7.59%	6
Total Respondents: 79		

Q5 If you could only pick ONE, which do you feel is the most important health concern our communities are facing today? (Please select ONE only)

Answered: 81 Skipped: 9

ANSWER CHOICES	RESPONSES	
Economic/Financial insecurity	28.40%	23
Lack of access to higher medical care	18.52%	15
Drug abuse	9.88%	8
Alcohol abuse	8.64%	7
Lack of housing options	8.64%	7
Other	8.64%	7
Mental health needs	7.41%	6
Obesity	4.94%	4
Isolation or loneliness	2.47%	2
Lack of recreational facilities	1.23%	1
Lack of adequate food supplies	1.23%	1
Domestic violence	0.00%	0
Tobacco use	0.00%	0
Lack of transportation	0.00%	0
TOTAL		81

Q6 If you could do ONE thing to improve our community's access to health care, what would it be?

Answered: 87 Skipped: 3

ANSWER CHOICES	RESPONSES	
More Primary Care Providers	28.74%	25
Expanded Clinic hours	25.29%	22
More in-home services	13.79%	12
No improvement needed	13.79%	12
Lower costs	9.20%	8
Other	6.90%	6
Wider variety of Tele-Health	2.30%	2
TOTAL		87

Q7 Regarding future County-wide health care events, what concerns would you like to see addressed? (Mark all that apply)

Answered: 87 Skipped: 3

ANSWER CHOICES	RESPONSES	
Chronic conditions & preventative screenings	50.57%	44
drug /alcohol abuse, tobacco cessation	36.78%	32
Better health education for our youth/students, and their parents	35.63%	31
Health, diet and exercise; healthy lifestyle	34.48%	30
Mental health, depression, suicide awareness	34.48%	30
None	13.79%	12
Other	4.60%	4
Total Respondents: 87		

Q8 MEDICAL CARE: If you or someone in your household needed medical care in the last 6 months, did they get all the medical care they needed?

Answered: 88 Skipped: 2

ANSWER CHOICES	RESPONSES	
Yes, from an outside-the-area provider	50.00%	44
Yes, from ACHC	45.45%	40
No, from an outside-the-area provider	7.95%	7
No, from ACHC	6.82%	6
N/A	6.82%	6
Total Respondents: 88		

Q9 If you or they didn't get the needed medical care, what were the main reasons? (Mark all that apply)

Answered: 69 Skipped: 21

ANSWER CHOICES	RESPONSES	
N/A	60.87%	42
Other	21.74%	15
Couldn't get a timely appointment with ACHC	14.49%	10
Costs too much	7.25%	5
Referral to a specialist was denied	4.35%	3
Couldn't get transportation to ACHC	0.00%	0
Total Respondents: 69		

Q10 DENTAL CARE: If you or someone in your household needed dental care in the last 6 months, and did you or they get all the dental care needed?

Answered: 84 Skipped: 6

ANSWER CHOICES	RESPONSES	
Yes, from an outside-the-area provider	33.33%	28
Yes, from ACHC	27.38%	23
N/A	21.43%	18
No, from ACHC	17.86%	15
No, from an outside-the-area provider	7.14%	6
Total Respondents: 84		

Q11 If you or they didn't get all the dental care needed, what was the main reason they didn't?

Answered: 73 Skipped: 17

ANSWER CHOICES	RESPONSES	
N/A	58.90%	43
Other	24.66%	18
Costs too much	12.33%	9
Couldn't get a timely appointment with ACHC	5.48%	4
Couldn't get transportation to ACHC	0.00%	0
Referral to a specialist was denied	0.00%	0
Total Respondents: 73		

Q12 MEDICATIONS: If you or someone in your household needed prescription medications in the last 6 months, did they get all the medications they needed?

Answered: 88 Skipped: 2

ANSWER CHOICES	RESPONSES	
Yes	81.82%	72
N/A	13.64%	12
No	4.55%	4
TOTAL		88

Q13 If they didn't get the medications needed, what was the main reason?

Answered: 65 Skipped: 25

ANSWER CHOICES	RESPONSES	
N/A	87.69%	57
Other	4.62%	3
Costs too much	3.08%	2
PCP refused to refill the prescription	3.08%	2
Couldn't get prescription delivered to home	1.54%	1
Couldn't pick up the prescription	0.00%	0
TOTAL		65

Q14 MENTAL HEALTH / SUBSTANCE USE: In the last 6 months, was there a time when you or someone in your household needed treatment for mental health or substance use?

Answered: 88 Skipped: 2

ANSWER CHOICES	RESPONSES	
No	76.14%	67
N/A	13.64%	12
Yes	10.23%	9
TOTAL		88

Q15 If they didn't get the mental health or substance use treatment help they needed, what was the main reason?

Answered: 68 Skipped: 22

ANSWER CHOICES	RESPONSES	
N/A	89.71%	61
Other	4.41%	3
The person didn't believe they needed help	2.94%	2
Costs too much	1.47%	1
Couldn't get an appt with local provider	1.47%	1
No transportation to the local provider; couldn't get there	0.00%	0
No transportation to the outside provider; couldn't get there	0.00%	0
TOTAL		68

Q16 Do you, or does someone you know, struggle with prescription pain medication or opioid medication abuse?

Answered: 90 Skipped: 0

ANSWER CHOICES	RESPONSES	
No	98.89%	89
Yes	1.11%	1
N/A	0.00%	0
TOTAL		90

Q17 If you have been bothered by having little interest or pleasure in doing things in the past 6 months, how often?

Answered: 88 Skipped: 2

ANSWER CHOICES	RESPONSES	
N/A	67.05%	59
Only occasionally	15.91%	14
Only once or twice	6.82%	6
Every day	4.55%	4
More than half the time	3.41%	3
Several days	2.27%	2
TOTAL		88

Q18 If you have been bothered by feeling down, depressed, or hopeless in the last 6 months, how often?

Answered: 85 Skipped: 5

ANSWER CHOICES	RESPONSES	
N/A	69.41%	59
Only occasionally	12.94%	11
Only once or twice	7.06%	6
Several days	5.88%	5
More than half the time	3.53%	3
Every day	1.18%	1
TOTAL		85

Q19 Does a physical, mental, or emotional problem limit your ability to work or perform routine tasks?

Answered: 86 Skipped: 4

ANSWER CHOICES	RESPONSES	
No	75.58%	65
Yes	24.42%	21
TOTAL		86

Q20 In the last 12 months, were you or other members of your household unable to pay your rent, mortgage, or utility bills?

Answered: 87 Skipped: 3

ANSWER CHOICES	RESPONSES	
No	94.25%	82
Yes	5.75%	5
TOTAL		87

Q21 If in the last 12 months you had to cut the size of meals or you skipped meals because there wasn't enough money for food, how often?

Answered: 87 Skipped: 3

ANSWER CHOICES	RESPONSES	
N/A	85.06%	74
Rarely	9.20%	8
Sometimes	5.75%	5
Daily	0.00%	0
Often	0.00%	0
Once	0.00%	0
TOTAL		87

Q22 If in the last 12 months you have been worried that your food would run out before you got money to buy more, how often?

Answered: 88 Skipped: 2

ANSWER CHOICES	RESPONSES	
N/A	87.50%	77
Rarely	5.68%	5
Sometimes	4.55%	4
Often	1.14%	1
Once	1.14%	1
Daily	0.00%	0
TOTAL		88

Q23 If in the last 12 months it was difficult to access transportation when you needed it, how often?

Answered: 87 Skipped: 3

ANSWER CHOICES	RESPONSES	
N/A	86.21%	75
Rarely	6.90%	6
Sometimes	5.75%	5
Once	1.15%	1
Daily	0.00%	0
Often	0.00%	0
TOTAL		87

Q24 Have you ever been told by a doctor or other health professional that you have any of the following conditions? (Mark all that apply)

Answered: 86 Skipped: 4

ANSWER CHOICES	RESPONSES	
High Blood Pressure	50.00%	43
Chronic pain (such as Arthritis or other pain- related conditions)	39.53%	34
Depression or Anxiety	24.42%	21
N/A	20.93%	18
Lung or breathing issues	15.12%	13
Cancer	15.12%	13
Diabetes	12.79%	11
Other life-threatening conditions	10.47%	9
Mental health concerns	4.65%	4
Total Respondents: 86		

Q25 Do you have any other comments?

- Our community needs physical therapy available and reliable dental in Mitchell and Spray
- Pediatric care would greatly benefit the community
- Imperative (clinic staff) is confidential and does not announce appointment information on Main Street and publicly. We have tried to schedule 7 different appointments over the last 6 months and (clinic staff) shared we could be seen in 2 to 3 weeks. We called South Gilliam County Medical and had appointments same day or by the next day. We would love to support ACHC, but rather difficult if you are never available for patients and we have limited privacy.
- Very satisfied with care from ACHC and very pleased to see Dan Allen back

ADDENDUM D

11. If you or they didn't get all the dental care needed, what was the main reason they didn't?

<input type="checkbox"/> Costs too much	<input type="checkbox"/> Couldn't get a timely appointment with ACHC
<input type="checkbox"/> Couldn't get transportation to ACHC	<input type="checkbox"/> Referral to a specialist was denied
<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Other <i>COVID, don't dare come in</i>

12. MEDICATIONS: If you or someone in your household needed prescription medications in the last 6

COVID- DON'T DARE COME IN

11. If you or they didn't get all the dental care needed, what was the main reason they didn't?

<input type="checkbox"/> Costs too much	<input type="checkbox"/> Couldn't get a timely appointment with ACHC
<input type="checkbox"/> Couldn't get transportation to ACHC	<input type="checkbox"/> Referral to a specialist was denied
<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Other <i>COVID-19 shut down</i>

12. MEDICATIONS: If you or someone in your household needed prescription medications in the last 6

COVID-19 SHUT DOWN

11. If you or they didn't get all the dental care needed, what was the main reason they didn't?

<input type="checkbox"/> Costs too much	<input type="checkbox"/> Couldn't get a timely appointment with ACHC
<input type="checkbox"/> Couldn't get transportation to ACHC	<input type="checkbox"/> Referral to a specialist was denied
<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Other <i>VIRUS</i>

VIRUS

10. DENTAL CARE: If you or someone in your household needed dental care in the last 6 months, and did you or they get all the dental care needed?

<input type="checkbox"/> Yes, from ACHC	<input checked="" type="checkbox"/> No, from ACHC <i>COVID-19</i>	<input type="checkbox"/> N/A
<input type="checkbox"/> Yes, from an outside-the-area provider	<input type="checkbox"/> No, from an outside-the-area provider	

11. If you or they didn't get all the dental care needed, what was the main reason they didn't?

<input type="checkbox"/> Costs too much	<input type="checkbox"/> Couldn't get a timely appointment with ACHC
<input type="checkbox"/> Couldn't get transportation to ACHC	<input type="checkbox"/> Referral to a specialist was denied
<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Other <i>COVID-19</i>

COVID-19 (twice)

11. If you or they didn't get all the dental care needed, what was the main reason they didn't?

<input type="checkbox"/> Costs too much	<input type="checkbox"/> Couldn't get a timely appointment with ACHC
<input type="checkbox"/> Couldn't get transportation to ACHC	<input type="checkbox"/> Referral to a specialist was denied
<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Other <i>COVID</i>

COVID

ADDENDUM D

1. Is your primary Medical Provider associated with Asher CHC? Yes No

2. If you regularly seek care outside of Wheeler County, what are the main reasons why?
 Needed care that I can't get locally Small community; concern with privacy
 Care established elsewhere; continuing that Do not have confidence with local providers
 N/A I simply want an internist

3. Do you feel any of the following have limited your ability to receive adequate health care, due to any of the following reasons? Gender Race or ethnicity; cultural Income level
 Educational level Sexual orientation Age

I SIMPLY WANT AN INTERNIST

1. Is your primary Medical Provider associated with Asher CHC? Yes No

2. If you regularly seek care outside of Wheeler County, what are the main reasons why?
 Needed care that I can't get locally Small community; concern with privacy
 Care established elsewhere; continuing that Do not have confidence with local providers
 N/A ^{was} I needed care right away but was told I would need to wait four weeks. Office was short medical personnel

3. Do you feel any of the following have limited your ability to receive adequate health care, due to any of the following reasons?

Q-1: "NO, WAS" ----- Q-2: I NEEDED CARE RIGHT AWAY BUT WAS TOLD I WOULD NEED TO WAIT FOUR WEEKS. OFFICE WAS SHORT MEDICAL PERSONNEL.

1. Is your primary Medical Provider associated with Asher CHC? Yes No

2. If you regularly seek care outside of Wheeler County, what are the main reasons why?
 Needed care that I can't get locally Small community; concern with privacy
 Care established elsewhere; continuing that Do not have confidence with local providers-Staff
 N/A

3. Do you feel any of the following have limited your ability to receive adequate health care, due to any of the following reasons?

STAFF

8. MEDICAL CARE: If you or someone in your household needed medical care in the last 6 months, did they get all the medical care they needed? Yes, from ACHC No, from ACHC
 Yes, from an outside-the-area provider No, from an outside-the-area provider N/A
 Yes - Asher & then referred to outside specialist

9. If you or they didn't get the needed medical care, what were the main reasons? (Mark all that apply)
 Costs too much Couldn't get timely appointment with ACHC
 Couldn't get transportation to ACHC Referral to a specialist was denied
 N/A Other

YES - ASHER & THEN REFERRED TO OUTSIDE SPECIALIST.

ADDENDUM D

If you have any additional comments, please include an extra page.

Asher Health center and staff are by far the Best in all of Central Oregon

Please drop off the completed survey at one of the ACHC Clinics during open hours, or mail to:
Asher Community Health Center, PO Box 307, Fossil, OR 97830 (Attn: "Survey")

ACHC Fossil Clinic – Mon thru Thurs, 8 am to 6 pm, and Fri 8 am to 12 noon

ASHER HEALTH CENTER AND STAFF ARE BY FAR THE BEST IN ALL OF CENTRAL OREGON.

1. Is your primary Medical Provider associated with Asher CHC? Yes No

2. If you regularly seek care outside of Wheeler County, what are the main reasons why?

Needed care that I can't get locally Small community; concern with privacy
 Care established elsewhere; continuing that Do not have confidence with local providers
 N/A *I don't have confidence in outside the area providers*

3. Do you feel any of the following have limited your ability to receive adequate health care, due to any of the following reasons?

<input type="checkbox"/> Gender	<input type="checkbox"/> Race or ethnicity; cultural barrier	<input type="checkbox"/> Income level
<input type="checkbox"/> Educational level	<input type="checkbox"/> Sexual orientation	<input type="checkbox"/> Age

I DON'T HAVE CONFIDENCE IN OUTSIDE THE AREA PROVIDERS

ADDENDUM D

1. If in the last 12 months you had to cut the size of meals or you skipped meals because there wasn't enough money for food, how often?
 Daily Often Sometimes Rarely Once N/A
I make donation to MERC to cover bills for some like eat
2. If in the last 12 months you have been worried that your food would run out before you got money to buy more, how often?
 Daily Often Sometimes Rarely Once N/A
pay
3. If in the last 12 months it was difficult to access transportation when you needed it, how often?
 Daily Often Sometimes Rarely Once N/A
4. Have you ever been told by a doctor or other health professional that you have any of the following conditions? (Mark all that apply)
 High Blood Pressure Diabetes
 Depression or Anxiety Mental health concerns Lung or breathing issues
 Chronic pain (such as Arthritis or other pain-related conditions) Cancer
 Other life-threatening conditions N/A

I MAKE DONATION TO MERC TO COVER BILLS FOR SOME WHO CAN'T PAY

Name: _____ (adding your name is **OPTIONAL**, not required)
 (If you have any additional comments, please include an extra page)

Please drop off the completed survey at one of the ACHC Clinics during open hours, or mail to:
Asher Community Health Center, PO Box 307, Fossil, OR 97830 (Attn: "Survey")

I THINK THE WORLD OF AMANDA.
 SHE IS SMART AND WELL TRAINED.

ACHC Fossil Clinic – Mon thru Thurs, 8 am to 6 pm, and Fri 8 am to 12 noon
 ACHC Spray Clinic – Wed 8 am to 2 pm, and Fri 1 pm to 4 pm
 ACHC Mitchell Clinic – Tues and Thurs, from 8 am to 2 pm

I think the world of Amanda. She is smart and well trained.

 Return by Aug 31, 2020

1. Is your primary Medical Provider associated with Asher CHC? Yes No
2. If you regularly seek care outside of Wheeler County, what are the main reasons why?
 Needed care that I can't get locally Small community; concern with privacy
 Care established elsewhere; continuing that Do not have confidence with local providers
 N/A *what to change*
3. Do you feel any of the following have limited your ability to receive adequate health care due to any of

WHAT TO CHANGE (WANT TO CHANGE?)

- N/A
3. Do you feel any of the following have limited your ability to receive adequate health care, due to any of the following reasons?
 Gender Race or ethnicity; cultural barrier Income level
 Educational level *(my level too high for this area)* Sexual orientation Age
 Disability Reside in remote rural location N/A
4. Which of the following do you feel present serious concerns our communities today? (check as many as

MY LEVEL (EDUCATION) TOO HIGH FOR THIS AREA.

ADDENDUM D

2. If you regularly seek care outside of Wheeler County, what are the main reasons why?

Needed care that I can't get locally Small community; concern with privacy
 Care established elsewhere; continuing that Do not have confidence with local providers
 N/A *Do NOT NEED TO GO*

3. Do you feel any of the following have limited your ability to receive adequate health care, due to any of the following reasons? Gender Race or ethnicity/cultural barrier Income level

DO NOT NEED TO

1. Is your primary Medical Provider associated with Asher CHC? Yes No
Don't have one but when needed I will use Asher Clinic

2. If you regularly seek care outside of Wheeler County, what are the main reasons why?

Needed care that I can't get locally Small community; concern with privacy
 Care established elsewhere; continuing that Do not have confidence with local providers
 N/A

DON'T HAVE ONE BUT WHEN NEEDED I WILL USE ASHER CLINIC.

22. If in the last 12 months you have been worried that your food would run out before you got money to buy more, how often? Daily Often Sometimes Rarely Once N/A
We have an excellent food pantry!!

23. If in the last 12 months it was difficult to access transportation when you needed it, how often?
 Daily Often Sometimes Rarely Once N/A
We have Wheeler County Transportation.

24. Have you ever been told by a doctor or other health professional that you have any of the following

WE HAVE AN EXCELLENT FOOD PANTRY! ---- WE HAVE WHEELER COUNTY TRANSPORTATION.

20. In the last 12 months, were you or other members of your household unable to pay your rent, mortgage, or utility bills? Yes No *probably next year - a \$ prob.*

21. If in the last 12 months you had to cut the size of meals or you skipped meals because there wasn't enough money for food, how often?
 Daily Often Sometimes Rarely Once N/A

22. If in the last 12 months you have been worried that your food would run out before you got money to buy more, how often? Daily Often Sometimes Rarely Once N/A

23. If in the last 12 months it was difficult to access transportation when you needed it, how often?
 Daily Often Sometimes Rarely Once N/A
we need more drivers - a NON-SMOKER!

24. Have you ever been told by a doctor or other health professional that you have any of the following conditions? (Mark all that apply)

<input checked="" type="checkbox"/> High Blood Pressure	<input type="checkbox"/> Diabetes
<input type="checkbox"/> Depression or Anxiety	<input checked="" type="checkbox"/> Lung or breathing issues
<input checked="" type="checkbox"/> Chronic pain (such as Arthritis or other pain-related conditions)	<input type="checkbox"/> Cancer
<input type="checkbox"/> Other life-threatening conditions	<input type="checkbox"/> N/A <i>Heart prob.</i>

PROBABLY NEXT YEAR—A \$ PROBLEM. ---- WE NEED MORE DRIVERS – NON SMOKERS! -- HEART PROBLEMS.

ADDENDUM D

4. Which of the following do you feel present serious concerns our communities today? (check as many as needed)

No serious consequences on drug or alcohol

Alcohol abuse Drug abuse Obesity Domestic violence Tobacco use
 Lack of recreational facilities Lack of access to higher medical care Mental health needs
 Isolation or loneliness Lack of transportation Lack of adequate food supplies
 Lack of housing options Economic/Financial insecurity Other

5. Which do you feel is the most important health concern our communities are facing today? **Please select ONE only**

Alcohol abuse Drug abuse Obesity Domestic violence Tobacco use
 Lack of recreational facilities Lack of access to higher medical care Mental health needs
 Isolation or loneliness Lack of transportation Lack of adequate food supplies
 Lack of housing options Economic/Financial insecurity Other

6. If you could do ONE thing to improve our community's access to health care, what would it be?

More Primary Care Providers Expanded Clinic hours Lower costs
 More in-home services
 Wider variety of Tele-Health No improvement needed Other *Adult Foster Care*

7. Regarding future County-wide health care events, what concerns would you like to see addressed? (Mark all that apply)

Health, diet and exercise; healthy lifestyle Chronic conditions & preventative screenings
 Mental health, depression, suicide awareness
 Better health education for our youth/students, and their parents
 drug /alcohol abuse, tobacco cessation None Other *dealing with physical pain*

NO SERIOUS CONSEQUENCES ON DRUG OR ALCOHOL. – ADULT FOSTER CARE. --- DEALING WITH PHYSICAL PAIN.

Lack of housing options Economic/Financial insecurity Other

6. If you could do ONE thing to improve our community's access to health care, what would it be?

More Primary Care Providers Expanded Clinic hours Lower costs
 More in-home services
 Wider variety of Tele-Health No improvement needed Other *PHYSICAL THERAPY*

7. Regarding future County-wide health care events, what concerns would you like to see addressed? (Mark all that apply)

Health, diet and exercise; healthy lifestyle Chronic conditions & preventative screenings

PHYSICAL THERAPY

s, please include an extra page)

Appreciate all the efforts for the various health checkups

Please drop off the completed survey at one of the ACHC Clinics during open hours, or mail to:
Asher Community Health Center, PO Box 307, Fossil, OR 97830 (Attn: "Survey")

APPRECIATE ALL THE EFFORTS FOR THE VARIOUS HEALTH CHECKUPS.

ADDENDUM D

2. If you regularly seek care outside of Wheeler County, what are the main reasons why?

- Needed care that I can't get locally
Small community; concern with privacy
Care established elsewhere; continuing that
Do not have confidence with local providers
N/A

3. Do you feel any of the following have limited your ability to receive adequate health care, due to any of the following reasons?

- Gender, Race or ethnicity; cultural barrier, Income level, Educational level, Sexual orientation, Age, Disability, Reside in remote rural location, N/A

4. Which of the following do you feel present serious concerns our communities today? (check as many as needed)

- Alcohol abuse, Drug abuse, Obesity, Domestic violence, Tobacco use, Lack of recreational facilities, Lack of access to higher medical care, Mental health needs, Isolation or loneliness, Lack of transportation, Lack of adequate food supplies, Lack of housing options, Economic/Financial insecurity, Other

5. Which do you feel is the most important health concern our communities are facing today? Please select ONE only

- Alcohol abuse, Drug abuse, Obesity, Domestic violence, Tobacco use, Lack of recreational facilities, Lack of access to higher medical care, Mental health needs, Isolation or loneliness, Lack of transportation, Lack of adequate food supplies, Lack of housing options, Economic/Financial insecurity, Other

6. If you could do ONE thing to improve our community's access to health care, what would it be?

- More Primary Care Providers, Expanded Clinic hours, Lower costs, More in-home services, Wider variety of Tele-Health, No improvement needed, Other

X-RAYS

GO TO V.A. ----- X-RAYS

6. If you could do ONE thing to improve our community's access to health care, what would it be?

- More Primary Care Providers, Expanded Clinic hours, Lower costs, More in-home services, Wider variety of Tele-Health, No improvement needed, Other

Better care!

7. Regarding future County-wide health care events, what concerns would you like to see addressed? (Mark all that apply)

BETTER CARE

ADDENDUM D

Lack of housing options Economic/Financial insecurity Other

6. If you could do ONE thing to improve our community's access to health care, what would it be?

More Primary Care Providers Expanded Clinic hours Lower costs
 More in-home services
 Wider variety of Tele-Health No improvement needed Other *need more p...*

7. Regarding future County-wide health care events, what concerns would you like to see addressed?
 (Mark all that apply)

HEALTH CARE FOR ALL

Lack of housing options Economic/Financial insecurity Other

6. If you could do ONE thing to improve our community's access to health care, what would it be?

More Primary Care Providers Expanded Clinic hours Lower costs
 More in-home services *Weekends!*
 Wider variety of Tele-Health No improvement needed Other

WEEKENDS!

4. Which of the following do you feel present serious concerns our communities today? (check as many as needed)

Alcohol abuse Drug abuse Obesity Domestic violence Tobacco use
 Lack of recreational facilities Lack of access to higher medical care Mental health needs
 Isolation or loneliness Lack of transportation Lack of adequate food supplies
 Lack of housing options Economic/Financial insecurity Other
Volunteers getting older...

5. Which do you feel is the most important health concern our communities are facing today? **Please select ONE only**

Alcohol abuse Drug abuse Obesity Domestic violence Tobacco use
 Lack of recreational facilities Lack of access to higher medical care Mental health needs

VOLUNTEERS GETTING OLDER

ADDENDUM D

4. Which of the following do you feel present serious concerns our communities today? (check as many as needed)

- Alcohol abuse, Drug abuse, Obesity, Domestic violence, Tobacco use, Lack of recreational facilities, Lack of access to higher medical care, Mental health needs, Isolation or loneliness, Lack of transportation, Lack of adequate food supplies, Lack of housing options, Economic/Financial insecurity, Other

in spray

5. Which do you feel is the most important health concern our communities are facing today? Please select ONE only

- Alcohol abuse, Drug abuse, Obesity, Domestic violence, Tobacco use, Lack of recreational facilities, Lack of access to higher medical care, Mental health needs, Isolation or loneliness, Lack of transportation, Lack of adequate food supplies, Lack of housing options, Economic/Financial insecurity, Other

in spray

6. If you could do ONE thing to improve our community's access to health care, what would it be?

- More Primary Care Providers, Expanded Clinic hours, Lower costs

IN SPRAY (twice)

13. If they didn't get the medications needed, what was the main reason?

- Costs too much, Couldn't get prescription delivered to home, Couldn't pick up the prescription, PCP refused to refill the prescription, N/A, Other I USE MAIL ORDER

14. MENTAL HEALTH / SUBSTANCE USE: In the last 6 months, was there a time when you or someone in your household needed treatment for mental health or substance use?

- Yes, No, N/A

15. If they didn't get the mental health or substance use treatment help they needed, what was the main

I USE MAIL ORDER

- Yes, from an outside-the-area provider, No, from an outside-the-area provider, N/A

9. If you or they didn't get the needed medical care, what were the main reasons? (Mark all that apply)

- Costs too much, Couldn't get timely appointment with ACHC, Couldn't get transportation to ACHC, Referral to a specialist was denied, Other AFTER HOURS EMERGENCY

10. DENTAL CARE: If you or someone in your household needed dental care in the last 6 months, and did

AFTER HOURS EMERGENCY

ADDENDUM D

24. Have you ever been told by a doctor or other health professional that you have any of the following conditions? (Mark all that apply)
- | | |
|--|---|
| <input type="checkbox"/> High Blood Pressure | <input checked="" type="checkbox"/> Diabetes |
| <input type="checkbox"/> Depression or Anxiety | <input type="checkbox"/> Lung or breathing issues |
| <input type="checkbox"/> Mental health concerns | <input type="checkbox"/> Cancer |
| <input type="checkbox"/> Chronic pain (such as Arthritis or other pain-related conditions) | <input type="checkbox"/> N/A |
| <input type="checkbox"/> Other life-threatening conditions | |

I HAVE HAD TO USE URGENT CARE IN REDMOND 3 TIMES. LAST TIME WAS FRACTURE OF LEG 6 MO AGO ON A SATURDAY.

Name: _____ (adding your name is **OPTIONAL**, not required)
(If you have any additional comments, please include an extra page)

I HAVE HAD TO USE URGENT CARE IN REDMOND 3 TIMES. LAST TIME WAS FRACTURE OF LEG 6 MONTHS AGO ON A SATURDAY.

- Lack of housing options Economic/Financial insecurity Other

5. Which do you feel is the **most important health concern** our communities are facing today? **Please select ONE only**

- | | | | | |
|---|---|--|--|--------------------------------------|
| <input type="checkbox"/> Alcohol abuse | <input type="checkbox"/> Drug abuse | <input type="checkbox"/> Obesity | <input type="checkbox"/> Domestic violence | <input type="checkbox"/> Tobacco use |
| <input type="checkbox"/> Lack of recreational facilities | <input checked="" type="checkbox"/> Lack of access to higher medical care | <input type="checkbox"/> Mental health needs | | |
| <input type="checkbox"/> Isolation or loneliness | <input checked="" type="checkbox"/> Lack of transportation | <input checked="" type="checkbox"/> Lack of adequate food supplies | | |
| <input checked="" type="checkbox"/> Lack of housing options | <input checked="" type="checkbox"/> Economic/Financial insecurity | <input type="checkbox"/> Other | | |

6. If you could do ONE thing to improve our community's access to health care, what would it be?

ONE WON'T CUT IT

18. If you have been bothered by feeling down, depressed, or hopeless in the last 6 months, how often?

- | | | |
|--|--|------------------------------------|
| <input type="checkbox"/> Several days | <input type="checkbox"/> More than half the time | <input type="checkbox"/> Every day |
| <input type="checkbox"/> Only occasionally | <input checked="" type="checkbox"/> Only once or twice | <input type="checkbox"/> N/A |

19. Does a physical, mental, or emotional problem limit your ability to work or perform routine tasks?

- Yes No

BROUGHT ON BY SOCIAL DISTANCING AND MASKS

If you are mailing the survey back to us: Place survey in an envelope, OR you can fold Survey page 4 back over the completed survey, tape sides closed, and affix postage.

Suggestions-
Get better P.A.'s.
Get someone at the reception area who will answer the phone. Waiting 5-10 minutes is not an option.
"Thank you for your help!"

ADDENDUM D

SUGGESTIONS- GET BETTER PA's. GET SOMEONE AT THE RECEPTION AREA WHO WILL ANSWER THE PHONE. WAITING 5-10 MINUTES IS NOT AN OPTION.

ADDENDUM D

10. DENTAL CARE: If you or someone in your household needed dental care in the last 6 months, and did you or they get all the dental care needed? Yes, from ACHC No, from ACHC
 Yes, from an outside-the-area provider No, from an outside-the-area provider N/A
Cost makes it unobtainable

11. If you or they didn't get all the dental care needed, what was the main reason they didn't?
 Costs too much Couldn't get a timely appointment with ACHC
 Couldn't get transportation to ACHC Referral to a specialist was denied
 N/A Other

12. MEDICATIONS: If you or someone in your household needed prescription medications in the last 6 months, did they get all the medications they needed? Yes No N/A

13. If they didn't get the medications needed, what was the main reason?
 Costs too much *when she hits* Couldn't get prescription delivered to home
 Couldn't pick up the prescription *the* PCP refused to refill the prescription
 N/A *doughnut hole* Other

14. MENTAL HEALTH / SUBSTANCE USE: In the last 6 months, was there a time when you or someone in your household needed treatment for mental health or substance use? Yes No N/A

15. If they didn't get the mental health or substance use treatment help they needed, what was the main

COST MAKES IT UNOBTAINABLE. -- WHEN ONE HITS THE DOUGHNUT HOLE.

10. DENTAL CARE: If you or someone in your household needed dental care in the last 6 months, and did you or they get all the dental care needed? Yes, from ACHC No, from ACHC
 Yes, from an outside-the-area provider No, from an outside-the-area provider N/A
I plan on making appt with local dentist

11. If you or they didn't get all the dental care needed, what was the main reason they didn't?
 Costs too much Couldn't get a timely appointment with ACHC
 Couldn't get transportation to ACHC Referral to a specialist was denied
 N/A Other

12. MEDICATIONS: If you or someone in your household needed prescription medications in the last 6 months, did they get all the medications they needed? Yes No N/A

13. If they didn't get the medications needed, what was the main reason?
 Costs too much Couldn't get prescription delivered to home
 Couldn't pick up the prescription PCP refused to refill the prescription
 N/A Other

14. MENTAL HEALTH / SUBSTANCE USE: In the last 6 months, was there a time when you or someone in your household needed treatment for mental health or substance use? Yes No N/A

15. If they didn't get the mental health or substance use treatment help they needed, what was the main reason?
 Costs too much Couldn't get appt with local provider
 No transportation to local provider; couldn't get there
 No transportation to outside provider; couldn't get there
 The person didn't believe they needed help
 N/A Other

16. Do you, or does someone you know, struggle with prescription pain medication or opioid medication use? Yes No

17. If you have been bothered by having little interest or pleasure in doing things in the past 6 months, how often?
 Several days More than half the time Every day
 Only occasionally Only once or twice N/A

ADDENDUM D

Just by the time we did, we had to wait so long

I PLAN ON MAKING APPT WITH LOCAL DENTIST, BUT THE ONE TIME WE DID, WE HAD TO WAIT SO LONG.

ADDENDUM D

10. DENTAL CARE: If you or someone in your household needed dental care in the last 6 months, and did you or they get all the dental care needed? Yes, from ACHC No, from ACHC
 Yes, from an outside-the-area provider No, from an outside-the-area provider N/A

Could not get dental care at all

11. If you or they didn't get all the dental care needed, what was the main reason they didn't?
 Costs too much Couldn't get a timely appointment with ACHC
 Couldn't get transportation to ACHC Referral to a specialist was denied
 N/A Other

COULD NOT GET DENTAL CARE AT ALL.

you or they get all the dental care needed? Yes, from ACHC No, from ACHC
 Yes, from an outside-the-area provider No, from an outside-the-area provider N/A

11. If you or they didn't get all the dental care needed, what was the main reason they didn't?
 Costs too much Couldn't get a timely appointment with ACHC
 Couldn't get transportation to ACHC Referral to a specialist was denied
 N/A Other *usage of established office*

12. MEDICATIONS: If you or someone in your household needed prescription medications in the last 6 months, did they get all the medications they needed? Yes No N/A

USAGE OF ESTABLISHED OFFICE.