



Kiowa County, KS

Community Health Needs Assessment Round #2



May 2015

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

Community Health Needs Assessment

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I. Executive Summary

[VVV Research & Development, LLC]

I. Executive Summary

Kiowa County, KS - 2015 Community Health Needs Assessment (CHNA) Round #2

Creating healthy communities requires a high level of mutual understanding and collaboration among community leaders. The development of this assessment brings together community health leaders and providers, along with local residents, to research and prioritize county health needs and document community health delivery successes. This health assessment will serve as the foundation for community health improvement efforts for the next three years. The last CHNA for Kiowa County KS was published in May of 2012. <Note: The Patient Protection and Affordable Care Act (ACA) require not-for-profit hospitals to conduct a CHNA every three years and adopt an implementation strategy to meet the needs identified by the CHNA.> This assessment was coordinated and produced by VVV Research & Development, LLC (Olathe, Kansas) under the direction of Vince Vandelaar, MBA.

Important CHNA benefits for both the local hospital and health department, as well as for the community, are as follows: 1) Increases knowledge of community health needs and resources, 2) Creates a common understanding of the priorities of the community's health needs, 3) Enhances relationships and mutual understanding between and among stakeholders, 4) Provides a basis upon which community stakeholders can make decisions about how they can contribute to improving the health of the community, 5) Provides rationale for current and potential funders to support efforts to improve the health of the community, 6) Creates opportunities for collaboration in delivery of services to the community and 7) Provides guidance to the hospital and local health department for how they can align their services and community benefit programs to best meet needs.

Town Hall "Community Health Strengths" cited for Kiowa County Memorial Hospital's Primary Service Area are as follows:

Community Health "Strengths" Year 2015 Kiowa County KS			
#	Topic	#	Topic
1	Top KS County health rankings	6	Access to quality mid-levels
2	Broad scope of services	7	Quality hospital facilities
3	Access to services	8	Outstanding KCMH staff
4	Good communication amongst area health providers	9	Good relations with Visiting Specialist
5	Qualified provider available - 24 by 7 coverage	10	Top quality Lab services

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

Community Health Needs Assessment -2015 Ranking				
Kiowa County KS (Kiowa County Memorial Hospital PSA)				
Town Hall CHNA Priorities (12 Attendees)				
#	Health Needs to Change and/or Improve	Votes	%	Accum
1	Develop Child Care Outside of Hospital	7	25.0%	25.0%
2	Increase Fundraising/Reimbursement	5	17.9%	42.9%
3	Improve Public Transportation for Healthcare	5	17.9%	60.7%
4	Increase Awareness of Health Services	5	17.9%	78.6%
5	Develop Home Care service options	3	10.7%	89.3%
6	Increase Frequency of Visiting Specialists	1	3.6%	92.9%
7	Educate on Adult Prevention/Wellness	1	3.6%	96.4%
8	Start Evening/Weekend Clinic Hours	1	3.6%	100.0%
Total Town Hall Votes		28	100.0%	

Key Community Health Needs Assessment Conclusions from secondary research for Kiowa County Memorial Hospital’s Primary Service Area are as follows:

KS HEALTH RANKINGS: According to the 2014 RWJ County Health Rankings study, Kiowa County’s highest State of Kansas rankings (of 105 counties) were in Physical Environment, Morbidity and Social & Economic Factors.

- TAB 1: Kiowa County has a population of 2,523 residents as of 2013, a reduction of 2.1% since year 2010. 19.3% of Kiowa County’s population consists of the elderly (65+), and over 23.6% percent of these elderly people (65+) are living alone. The percent of Hispanics and Latinos in Kiowa County is 5.4%. 22% percent of children in Kiowa County live in single-parent households. The percent of people living below the poverty level in is 12.3%. There is a high number of people with limited access to healthy foods (42%), compared to the Kansas rural average of 8%.
- TAB 2: Kiowa County per capita income equals \$23,136. The median value of owner-occupied housing units is \$100,300, higher than the Kansas rural norm of \$75,775. The percent of unemployed workers in the civilian labor force in Kiowa County is 2.6%. Kiowa County has a higher percentage of low-income persons with low access to a grocery store (41.7%), compared to the Kansas rural norm of 15.4%. The percent of solo drivers with a long commute is 12.9%.

- TAB 3: In Kiowa County, 31.1% of students are eligible for the free or reduced lunch program. The county maintains a 31.2% high school graduation rate, which is significantly lower than the Kansas rural norm of 84.6%. The percent of persons (25+) with a Bachelor's degree or higher in Kiowa County is 21.4%.
- TAB 4: The percent of births where prenatal care began in the first trimester in Kiowa County is 72.2%. The percent of births with low birth weights is 6.4%. The percent of birth occurring in Kiowa County where mothers smoked during pregnancy is 7.1%. The average monthly WIC participation rate in Kiowa County is 33.3%, higher than the Kansas rural average of 20.9%. The percent of WIC mother's breastfeeding exclusively in Kiowa County is 45.5%, much higher than the Kansas rural average of 14.6%.
- TAB 5: The ratio of the population in Kiowa County to primary care physicians is 2,338. The staffed hospital bed ratio in Kiowa County is 6%. The COPD hospital admission rate (94) in Kiowa County is much lower than the Kansas rural norm of 194.
- TAB 6: The depression rate for the Medicare population in Kiowa County is 13.4%. The percent of alcohol-impaired driving deaths in Kiowa County (25%) are lower than the Kansas rural norm of 36.4%. The percentage of people in Kiowa County with inadequate social support is 10% lower than the Kansas rural norm.
- TAB 7: The adult obesity rate in Kiowa County is 29%. The percent of adults who binge drink in Kiowa County (0%) is significantly lower than the Kansas rural norm of 16.7%. The percent of people in Kiowa County who are physically inactive is 27%. The population in Kiowa County served unaffected by SDWA Nitrate violations (58.9%) is much lower than the Kansas rural norm of 96.2%. Diabetes in the Medicare population is 17.3% and Alzheimer's disease or Dementia in the Medicare population is 11.2%.
- TAB 8: Kiowa County's local hospital charity care has gone down \$8,000 since 2012. The uninsured adult population rate in Kiowa County is 17%.
- TAB 9: Major cardiovascular diseases and diseases of the heart are the major causes of mortality for Kiowa County. The age-adjusted years of potential life lost due to traffic injury is 730, much lower than the Kansas rural average of 1541. The mortality rate in Kiowa County is 72.
- TAB 10: The percentage of infants fully immunized at 24 months is 70.8%, which is lower than the Kansas rural norm. The percent of diabetic screenings in Kiowa County is 89%.

Key 2015 Community Feedback Conclusions: Still a need for 1) Drug / Alcohol / Prescription Abuse, 2) Public HC Transportation, Home Care Services and Awareness of County HC Services Offerings.

CHNA Round #2 Feedback 2015 - Kiowa Co N=103					
From our last CHNA(2012), a number of health needs were identified as a priority. Are any of these 2012 CHNA needs still an "ongoing problem" in our community?	Not a problem anymore	Somewhat of a Problem	Major Problem	Problem Areas	Most Pressing RANK
Drug / Alcohol / Prescription Abuse	22.4%	48.2%	29.4%	77.6%	1
Public Transportation for healthcare	26.3%	48.8%	25.0%	73.8%	3
Home Care	31.3%	48.8%	20.0%	68.8%	4
Awareness of Services	32.9%	62.4%	4.7%	67.1%	2
Behavioral Health Transfer Process	39.5%	48.1%	12.3%	60.5%	10
Long Term Care Services	40.7%	50.6%	8.6%	59.3%	9
Funding / Reimbursement	45.9%	35.1%	18.9%	54.1%	5
Adult Prevention / Wellness	46.3%	46.3%	7.5%	53.8%	6
Frequency of Visiting Specialists	50.0%	43.8%	6.3%	50.0%	7
Increased # of Cred Medicaid Doctors	53.7%	36.6%	9.8%	46.3%	8

II. Methodology

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II. Methodology

a) Scope and Purpose

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

JOB #1: Meet/Report IRS 990 Required Documentation

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

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

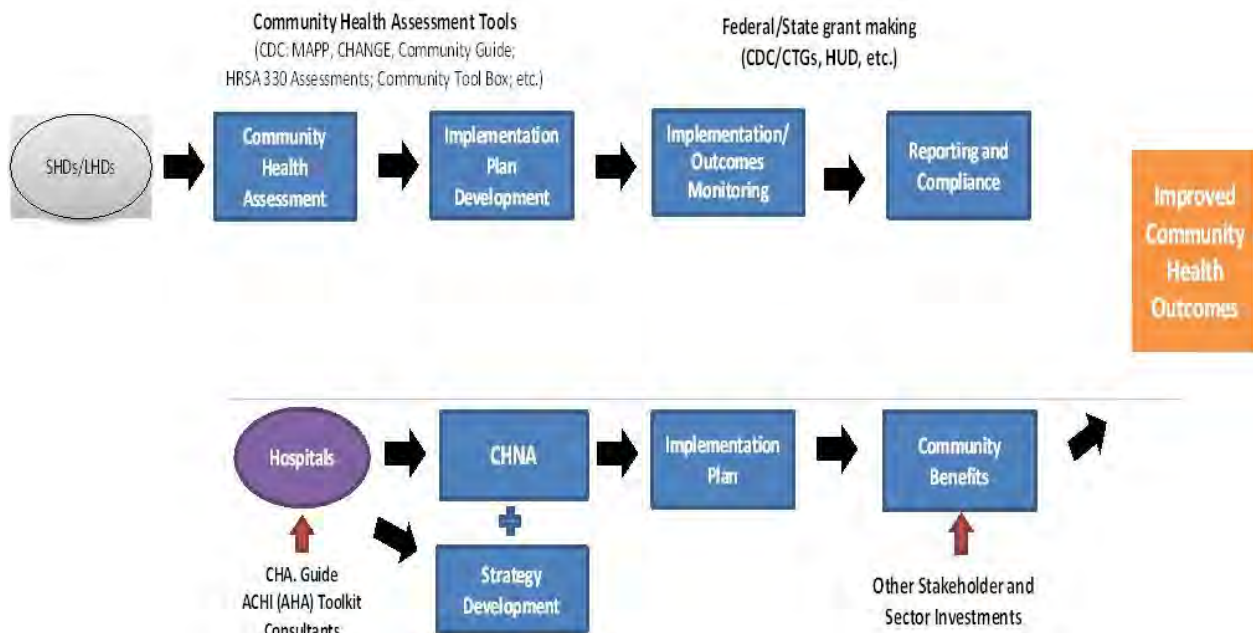
JOB #2: Making a CHNA Widely Available to the Public

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

JOB #3: Adopt an Implementation Strategy by Hospital

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

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



IRS Notice 2011-52 Overview

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

Applicability of CHNA Requirements to “Hospital Organizations”

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

How and When to Conduct a CHNA

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

Determining the Community Served

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

Persons Representing the Community Served

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

Required Documentation

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

Making a CHNA Widely Available to the Public

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

How and When to Adopt an Implementation Strategy

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

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

Year 2015 - IRS and Treasury Finalize Patient Protection Rules for Tax-Exempt Hospitals

ACCOUNTING TODAY 1/2/15

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

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

The ACA also added a new Section 4959, which imposes an excise tax for failure to meet the CHNA requirements, and added reporting requirements. These final regulations provide guidance on the entities that must meet these requirements, the reporting obligations relating to these requirements and the consequences for failing to satisfy the requirements. "Charitable hospitals represent more than half of the nation's hospitals and play a key role in improving the health of the communities they serve," wrote Emily McMahon, Deputy Assistant Secretary for Tax Policy at the U.S. Department of the Treasury, in a **blog post** Monday explaining the requirements. "But reports that some charitable hospitals have used aggressive debt collection practices, including allowing debt collectors to pursue collections in emergency rooms, have highlighted the need for clear rules to protect patients. For hospitals to be tax-exempt, they should be held to a higher standard. That is why the Affordable Care Act included additional consumer protection requirements for charitable hospitals, so that patients are protected from abusive collections practices and have access to information about financial assistance at all tax-exempt hospitals."

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

continuing to provide meaningful guidance on protections for patients and requirements to assess community health needs," she added.

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

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

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

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

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

II. Methodology

b) Collaborating CHNA Parties

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

Kiowa County Memorial Hospital Profile

721 W. Kansas, Greensburg, KS 67054
Administrator: Mary Sweet

History: Construction of Kiowa County Memorial Hospital was begun in 1948 with the total cost of the hospital being \$192,000. The hospital opened with 20 beds on March 7, 1950 with a contract with the Mennonite Board of Missions and Charities of Elkhart, Indiana to manage the hospital. The first medical staff of the hospital included: Edwin P. Deal, M.D. Florence Friesen, M.D. J.R. Bradley, M.D. M. H. Waldorf, Jr., M.D.

The Tornado: On May 4, 2007, the hospital was destroyed by an EF5 tornado. On May 21, 2007, the hospital reopened in a temporary tent hospital (Emeds unit) brought in by the Air National Guard, Topeka, Kansas. The ER was opened first and other departments were brought on board. August 1, 2007, we opened Greensburg Family Practice in a modular building. By December 2007, the facility consisted of 4 tents and 6 modulares. We offered onsite ER, acute inpatient, lab, X-ray, Daycare, administration, medical records, materials management, business office and maintenance departments. Ground for the new building was on October 28, 2008. Health Facility Group, Wichita, Kansas was the architect and Murray Group was the contraction manager. Open House for the new 50,000 square foot hospital and clinic was held on March 12, 2010. A retail Pharmacy was added to the hospital site in January 2012.

Mission Statement: The mission of Kiowa County Memorial Hospital is to provide high quality health related services in a spirit of Christian concern to meet the personal needs and improve the health status of the people and communities we serve. (To improve lives through compassionate, quality healthcare).

Vision: KMCH will distinguish itself as a leader in Community Healthcare, utilizing a multidisciplinary team approach to care that will achieve cost-effective quality outcomes.

Kiowa County Memorial Hospital offers the following services to its community:

- Acute Hospital Admission
- Swing Bed Skilled and Intermediate Care Admissions
- 24 Hour Emergency Care
- Laboratory Services
- Radiology Services
- X-Ray and Cat Scans Services
- Full Time Physical Therapy
- Rural Health Clinic Appointments
- Ambulance Services
- Specialty Services:
 - o Cardiology, Dental, Optometry, Epidural/Steroid Injections, Endoscopy Services/Surgical Consults, Neurology
- Child Care Center

Kiowa County Health Department Profile

211 E. Florida, Greensburg, KS 67054

Health Director: Mitzi Hesser, RN

The Kiowa County Health Department was established in November 1965. Our mission has always been to provide our citizens with comprehensive, cost-effective, and quality health services. Our primary goal is to provide information and help prevent acute illness and diseases. We feel that all people are entitled to adequate health care. This department's objective is to provide a scope of preventative health services to all residents including, but not limited to: immunizations, nutritional information, education in caring for infants and children, well-person health assessments, early intervention health and development screening, family planning and women's health services, disease investigation, and adult screenings and foot care.

Offerings: The Health Department offers immunizations, nutritional information, infant and child education, health assessments, early intervention screenings, family planning, women's health, disease investigation, licensing of childcare providers, foot care, and adult screenings

Screenings: Concepts (large and fine motor development), communication/ speech skills, social and self-help developments, vision, hearing, and immunizations.

Mission: To provide our citizens with comprehensive, cost-effective, and quality health services.

II. Methodology

b) Collaborating CHNA Parties Continued

Consultant Qualifications



VVW Research & Development, LLC

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

VINCE VANDEHAAR, MBA

Principal Consultant & Owner of VVW Research & Development, LLC

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

VVW Research & Development, LLC consultants have in-depth experience helping hospitals work with local Health Departments to engage community residents & leaders to identify gaps between existing health community resources & needs and construct detailed strategies to meet those needs - while still adhering to the hospital's mission and budget. Over the past 20 years, Vandehaar has completed 8 comprehensive Baldrige aligned Community Health Needs Assessments for Saint Luke's of Kansas City System facilities (3 campuses) and was contracted to conduct 2 additional independent Dept. of Health consulting projects (prior to IRS 990 regs). To date, VVW has completed 39 CHNA IRS aligned assessments for Kansas, Iowa and Missouri hospitals & Health Departments.

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

Collaborating Consultants

Alexa Backman, MBA 2015 - VVW Research & Development, LLC
Lead Business Development Analyst

II. Methodology

c) CHNA and Town Hall Research Process

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

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

VVV CHNA Deliverables:

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

**VVV CHNA Work Plan - Kiowa County Memorial Hospital
Project Timeline & Roles 2015**

Step	Date (Start-Finish)	LEAD	Task
1	12/11/2014	VVV	Hold kickoff Northwest Alliance review.
2	1/1/2015	Hosp	Select CHNA Option A/B/C. Approve (sign) VVV CHNA quote.
3	1/20/2015	VVV	Send out REQCommInvite Excel file. Hosp & Hlth Dept to fill in PSA stakeholders names/address/e-mail.
4	1/20/2015	VVV	Request Hosp client to send KHA PO reports (PO101, 103 and TOT223E) to document service area for FFY 11, 12 and 13. In addition, request Hosp to complete 3 year historical PSA IP/OP/ER/Clinic patient origin file (Use ZipPSA_3yrPOrigin.xls).
5	On or Before 01/28/15	VVV	Prepare CHNA Round#2 stakeholder feedback "online link." Send text link for Hosp review.
6	On or Before 1/28/2015	VVV / Hosp	Prepare/send out PR story to local media announcing upcoming CHNA work (general story). Hosp to place.
7	2/2/2015	VVV	Launch/conduct online survey to stakeholders: Hosp will e-mail invite to participate to all stakeholders.
9	2/11/2015	VVV / Hosp	Prepare/send out PR story to local media CHNA survey announcing "online CHNA Round #2 feedback." Request public to participate.
10	On or Before 2/15/2015	VVV	Assemble & complete secondary research - Find/populate 10 TABS. Create Town Hall Ppt for presentation.
11	2/18/2015	Hosp	Prepare/send out community Town Hall invite letter and place local ad.
12	2/18/2015	VVV / Hosp	Prepare/send out PR story to local media announcing upcoming Town Hall. VVV will mock-up PR release to media sources.
13	3/6/2015	All	Conduct conference call (time TBD) with Hosp/Public Hlth to review Town Hall data/flow.
14	3/11/2015	VVV	Conduct CHNA Town Hall. Dinner 5:30-7pm at KCMH. Review & discuss basic health data plus rank health needs.
15	On or Before 04/30/15	VVV	Complete analysis - release draft 1- seek feedback from leaders (Hosp & Hlth Dept).
16	On or Before 05/31/15	VVV	Produce & release final CHNA report. Hosp will post CHNA online (website).
17	On or Before 05/31/15	Hosp	Conduct client implementation plan PSA leadership meeting.
18	30 Days Prior to End of Hosp Fiscal Year	Hosp	Hold board meetings discuss CHNA needs, create & adopt an implementation plan. Communicate CHNA plan to community.

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

Phase I – Discovery:

Conduct a 30 minute conference call with CHNA hospital client and County Health Department. Review / confirm CHNA calendar of events, explain / coach client to complete required participants database and schedule / organize all Phase II activities.

Phase II – QUALIFY Community Need:

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

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

B) Gather historical primary research to uncover public health needs, practices and perceptions for hospital primary service areas.

Phase III – QUANTIFY Community Need:

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

Phase IV - Complete data analysis & create comprehensive Community Health Needs Assessment:

Post CHNA report findings to meet IRS CHNA criteria.

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

Phase I: Discovery.....	January 2015
Phase II: Secondary / Primary Research.....	Jan - Feb 2015
Phase III: Town Hall Meeting.....	March 12, 2015
Phase IV: Prepare / Release CHNA report.....	May 2015

Detail CHNA Development Steps Include:

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

Overview of Town Hall Community Priority Setting Process

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

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

Kiowa County Memorial Hospital's Town Hall was held on Wednesday March 11th, 2015 at Kiowa County Memorial Hospital. Vince Vandehaar and Alexa Backman facilitated this 1 ½ hour session with twelve (12) attendees. (Note: a detail roster of Town Hall attendees is listed in Section V-b).

The following Town Hall agenda was conducted:

1. Welcome & Introductions
2. Review Purpose for the CHNA Town Hall and Roles in the Process
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 and health department leaders via e-mail or personal conversations.

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

Community Health Needs Assessment Kiowa County KS Town Hall Meeting on behalf of Kiowa County Memorial Hospital

Vince Vandelaar, MBA
VVV Marketing & Development LLC.
Owner and Adjunct Marketing Professor

Olathe, Kansas 66061
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www.vandelaarmarketing.com
913-302-7264

Community Health Needs Assessment (CHNA) Town Hall Discussion Agenda

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

VVV Marketing & Development INC.

I. Introduction:

Background and Experience



Vince Vandelaar MBA,
VVV Marketing & Development LLC Principal Consultant, Olathe,
KS 913 302-7264

- > – Professional Consulting Services: Strategic Planning, Marketing Management, Business Research & Development Focus : Strategy, Research, Deployment
- > – Over 25 years of experience with Tillinghast, BCBSKC, Saint Luke's

Adjunct Professor - Marketing / Health Admin.- 26 years +

- > Webster University (1988 – present)
- > Rockhurst University (2010 – present)

Alexa Backman MBA 2015, VVV Collaborative Analyst

Town Hall Participation (You)

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

I. Introductions: a conversation with the community. Community members and organizations invited to CHNA Town Hall

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

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

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

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

II. Purpose: Why conduct Community Health Needs Assessment?

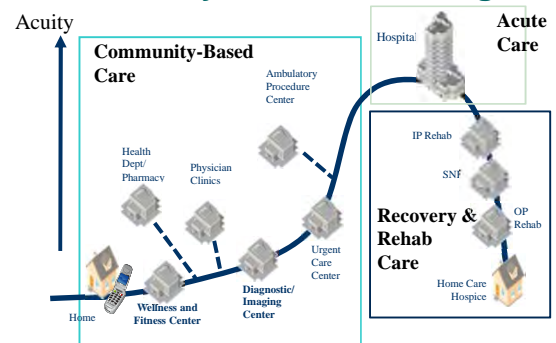
- To determine health-related trends and issues of the community.
- To understand/evaluate health delivery programs in place.
- To develop strategies to address unmet health needs.
- To meet Federal requirements – both local hospital & Health Department.

II. Review CHNA Definition

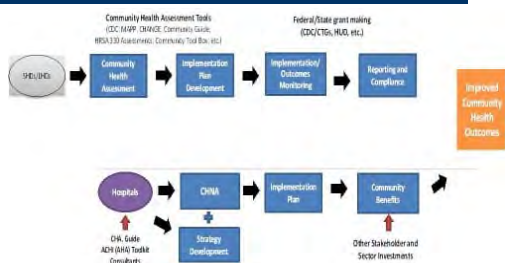
A Community Health Needs Assessment (CHNA) is a systematic collection, assembly, analysis, and dissemination of information about the health of the community. *<NOTE: Some the data has already been collected (published) by local, state and federal public health organizations. Some data will be collected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

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

Future System of CARE Sg2



Community Health Needs Assessment Joint Process: Hospital & Health Department



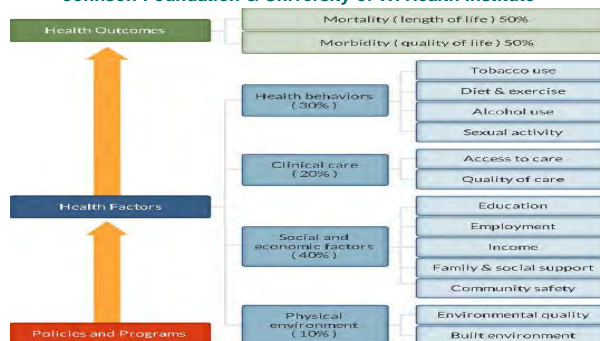
II. Required Written Report IRS 990 Documentation

- a **description of the community served**
- a **description of the CHNA process**
- the **identity of any and all organizations & third parties** which collaborated to assist with the CHNA;
- a **description of how** the organization considered the input of persons representing the community (*e.g., through meetings, focus groups, interviews, etc.*), who those persons are, and their qualifications;
- a **prioritized description of all of the community needs identified by the CHNA and**
- a **description of the existing health care facilities and other resources within the community** available to meet the needs identified through the CHNA.

III. Review Current County "Health Status" – Secondary Data by 10 TAB Categories plus RWJ State Rankings

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

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



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

IV. Collect Community Health Perspectives

Ask your opinion. Your thoughts?

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

V. Have we forgotten anything ?

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

Community Health Needs Assessment

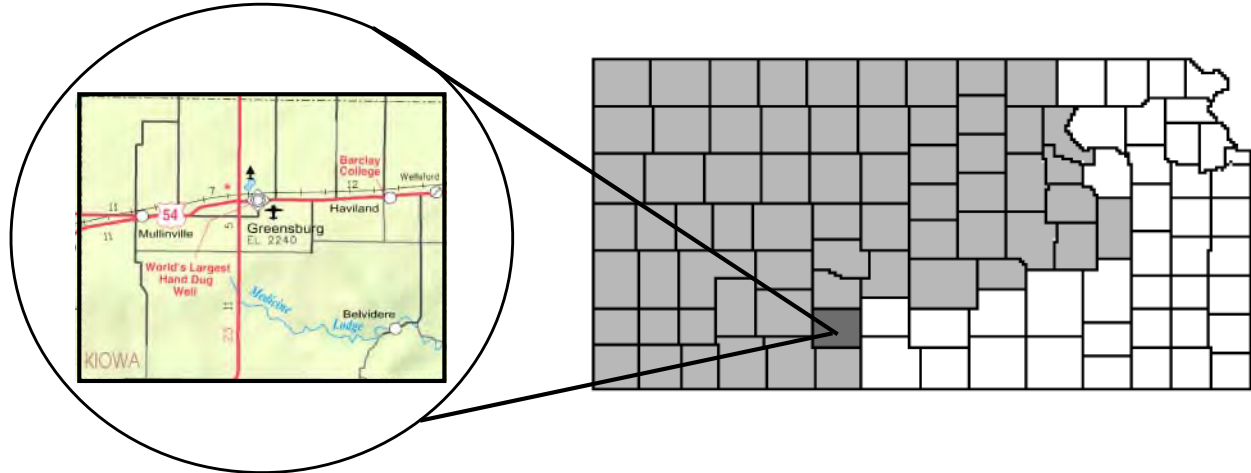
Questions Next Steps ?

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II. Methodology

d) Community Profile (A Description of Community Served)

Kiowa County Community Profile



Demographics

The population of Kiowa County was estimated to be **2,623 citizens** in 2014, and had a 0.64% change in population from 2010–2014. The county covers 722.6 square miles and this area includes Lost Lake, Cradle Park, Kiowa County State Park and Washington Park¹. The county has an overall population density of 4 persons per square mile. The county is located in South Central Kansas and education, health and social services, agriculture, forestry, fishing, hunting and mining are the most common industries in its economy². The county was founded in 1886 and the county seat is Greensburg³.

The major highway transportation access to Kiowa County is primarily state and county roads. Kansas highway 183 runs North–South through the center of the county and Kansas highway 400 and 54 run East–West in the center of the county. The major U.S. interstate, I-70 runs North of the county and Interstate 135 is East of the county.

¹ <http://kansas.hometownlocator.com/ks/kiowa/>

² http://www.city-data.com/county/Kiowa_County-KS.html

³ <http://www.skyways.org/counties/KW/>

Kiowa County, KS Airports⁴

Name	USGS Topo Map
Gail Ballard Airport	Haviland

Schools in Kiowa County⁵

Public Schools

Name	Level
21 st Century Learning Academy Charter Elem	Primary
21 st Century Learning Academy Charter High	High
Kiowa Co Elem	Primary
Kiowa Co High	High

⁴ <http://kansas.hometownlocator.com/features/cultural,class,airport,scfips,20097.cfm>

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

Detail Demographic Profile

ZIP	NAME	County	Population:			Households		HH	Per Capita
			Yr2014	Yr2019	Chg	Yr2014	Yr2019	Avg Size	Income 14
67054	Greensburg	KIOWA	1,206	1,267	5.1%	526	551	2.29	\$22,496
67059	Haviland	KIOWA	1,133	1,121	-1.1%	413	407	2.39	\$19,944
67109	Mullinville	KIOWA	382	383	0.3%	151	151	2.53	\$22,598
Totals			2,721	2,771	4.3%	1,090	1,109	2.40	\$21,679

ZIP	NAME	County	Population 2014:			GenY	YR 2014		Females
			Yr2014	POP65p	KIDS<18		MALES	FEMALES	Age20_35
67054	Greensburg	KIOWA	1,206	253	277	321	586	620	96
67059	Haviland	KIOWA	1,133	198	295	351	558	575	110
67109	Mullinville	KIOWA	382	74	90	108	196	186	27
Totals			2,721	525	662	780	1,340	1,381	233

ZIP	NAME	County	Population 2014:				Aver	Hholds	HH \$50K+
			White	Black	Amer IN	Hisp	HH Inc14	Yr2014	
67054	Greensburg	KIOWA	1,134	7	12	54	\$51,561	526	195
67059	Haviland	KIOWA	1,062	15	16	71	\$53,029	413	140
67109	Mullinville	KIOWA	356	3	1	20	\$57,170	151	58
Totals			2,552	25	29	145	\$53,920	1,090	393

Source: ERSA Demographics

III. Community Health Status

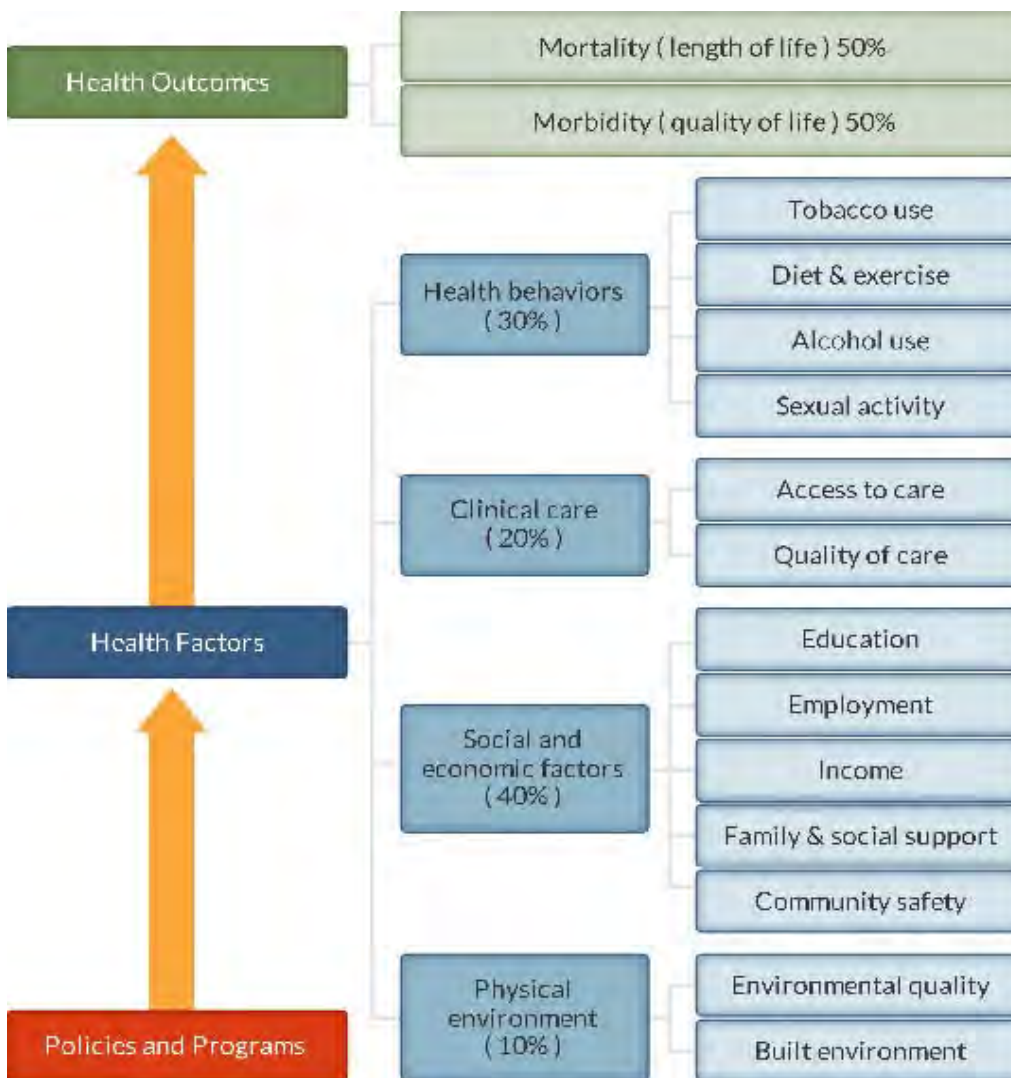
[VVV Research & Development, LLC]

III. Community Health Status

a) Historical Health Statistics

Health Status Profile

This section of the CHNA reviews published quantitative community health indicators and results of our recent CHNA Town Hall. To produce this profile, VVV Research & Development staff analyzed data from multiple sources. This analysis focuses on a set of published health indicators organized by ten areas of focus (10 TABS), results from the 2015 County Health Rankings and conversations from Town Hall primary research. (Note: The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to release annual *County Health Rankings*. As seen below in model, these rankings are based on a number of health factors).



County Health Rankings model ©2012 UWPHI

Secondary Research

2015 State Health Rankings for Kiowa County, KS

#	Kansas 2015 County Health Rankings (105 counties)	Definitions	KIOWA CO 2015	Trend	NW Alliance (12)
1	Physical Environment	Environmental quality	100		50
2	Health Factors		7		26
2a	Clinical Care	Access to care / Quality of Care	18		41
2b	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	45		29
3	Health Outcomes		19		44
3a	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activitiy	7		34
3b	Morbidity	Quality of life	51		48
3c	Mortality	Length of life	4		42
	OVERALL RANK		19		44
NW KS Norms include the following 12 counties: Barton, Ellis, Gove, Kiowa, Norton, Osborne, Pawnee, Phillips, Russell, Sheridan, Smith and Thomas http://www.countyhealthrankings.org					

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

Tab 1 Demographic Profile

Health Indicator		KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
a	Veterans, 2008-2012	213		NA	18,731	People Quick Facts
b	Population per square mile, 2010	3.5		31.6	17	Geography Quick Facts
c	Violent crime rate (Rate of Violent Crime per 1,000)	0.4		3.5	2.1%	Kansas Bureau of Investigation
d	Children in single-parent households	22%		NA	29%	County Health Rankings
e	People Living Below Poverty Level, 2009-2013	12.3%		13.7%	12.5%	American Community Survey
f	Children Living Below Poverty Level, 2009-2013	14.8%		18.7%	18.1%	American Community Survey
g	Limited access to healthy foods	42%		NA	8%	County Health Rankings
h	People 65+ Living Below Poverty Level, 2009-2013	6.1%		7.6%	8.5%	American Community Survey
i	People 65+ with Low Access to a Grocery Store, 2010	18.8%		NA	9.5%	U.S. Department of Agriculture - Food Environment Atlas
j	Voter Turnout, 2012	75.3%		66.8%	71.0%	Kansas Secretary of State

TAB	Health Indicator	KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
1a a	Population, 2013 estimate	2,523		2,895,801	104,831	People Quick Facts
1a b	Population, 2010	2,553		2,853,118	104,876	People Quick Facts
1a c	Pop Growth % - April 1,10 to July 1, 13	-1.2%		2.1%	-0.5%	People Quick Facts
1a d	Persons under 5 years, percent, 2013	6.2%		6.9%	6.0%	People Quick Facts
1a e	Persons under 18 years, percent, 2013	20.3%		21.8%	22.1%	People Quick Facts
1a f	Persons 65 years and over, percent, 2013	19.3%		13.6%	20.4%	People Quick Facts
1a g	Female persons, percent, 2013	50.4%		49.7%	49.2%	People Quick Facts
1a h	White alone, percent, 2013 (a)	95.9%		95.6%	95.4%	People Quick Facts
1a i	Black or African American alone,% 2013 (a)	0.8%		1.0%	1.7%	People Quick Facts
1a j	Hispanic or Latino, percent, 2013 (b)	5.4%		5.4%	5.2%	People Quick Facts
1a k	Foreign born persons, percent, 2008-2012	2.6%		2.6%	2.1%	People Quick Facts
1a l	% Language other than English spoken at home	4.6%		7.6%	4.7%	People Quick Facts
1a m	% Living in same house 1 year +, 2008-2012	82.4%		75.8%	86.6%	People Quick Facts
1a n	People 65+ Living Alone, 2009-2013	23.6%		29.4%	32.4%	American Community Survey

Tab 2 Economic Profiles

TAB		Health Indicator	KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
2a	a	Households, 2008-2012	1,064		1,110,440	42,866	People Quick Facts
2a	b	Median household income, 2009-2013	\$44,650		\$51,332	\$44,017	American Community Survey
2a	c	Per capita money income in past 12 months (2012 dollars), 2008-2012	\$23,136		\$24,625	\$25,046	People Quick Facts
2a	d	Households with Cash Public Assistance Income, 2009-2013	1.8%		2.3%	1.6%	American Community Survey
2a	e	Housing units, 2013	1,225		NA	106,387	People Quick Facts
2a	f	Median value of owner-occupied housing units, 2008-2012	\$100,300		\$134,700	\$75,775	People Quick Facts
2a	g	Homeownership rate, 2009-2013	56.4%		60.7%	62.6%	American Community Survey
2a	h	Housing units in multi-unit structures, % 2008-2012	11.4%		23.4%	9.0%	People Quick Facts
2a	i	Persons per household, 2008-2012	2.2		2.3	2.3	People Quick Facts
2a	j	Severe Housing Problems, 2006-2010	6.0%		12.8%	8.5%	County Health Rankings
2a	k	Homeowner Vacancy Rate, 2009-2013	2.2%		2.0%	1.8%	American Community Survey
2a	l	Renters Spending 30% or More of Household Income on Rent, 2009-2013	38.3%		45.5%	37.0%	American Community Survey

TAB		Health Indicator	KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
2b	a	Retail sales per capita, 2007	\$5,385		\$18,264	\$9,577	Business Quick Facts
2b	b	Total number of firms, 2007	327		237,040	10,781	Business Quick Facts
2b	c	Unemployed Workers in Civilian Labor Force, 2014	2.6%		3.9%	2.7%	U.S. Bureau of Labor Statistics
2b	d	Private nonfarm employment, percent change, 2011-2012	-9.3%		4.6%	5.3%	Business Quick Facts
2a	e	Households with No Car and Low Access to a Grocery Store, 2010	4.6%			2.1%	U.S. Department of Agriculture - Food Environment Atlas
2b	f	Child Food Insecurity Rate, 2012	21.5%		22.5%	20.8%	Feeding America
2a	g	Grocery Store Density, 2011	0.0%			0.4%	U.S. Department of Agriculture - Food Environment Atlas
2b	h	Low-Income and Low Access to a Grocery Store, 2010	41.7%			15.4%	U.S. Department of Agriculture - Food Environment Atlas
2b	i	Low-Income Persons who are SNAP Participants, 2007	8.9%			12.3%	U.S. Department of Agriculture - Food Environment Atlas
2b	j	Households without a Vehicle, 2009-2013	8.7%		5.3%	4.2%	American Community Survey
2b	k	Mean travel time to work (minutes), workers age 16+, 2008-2012	13.6		12.7	14	People Quick Facts
2b	l	Solo Drivers with a Long Commute, 2008-2012	12.9%		19.5%	12.2%	County Health Rankings
2b	m	Workers who Walk to Work, 2009-2013	8.9%		2.4%	4.6%	American Community Survey

Tab 3 Public Schools Health Delivery Profile

Currently school districts are providing onsite primary health screenings and basic care.

TAB		Health Indicator	KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
3	a	Students Eligible for the Free Lunch Program, 2011-2012	31.1%		38.9%	34.2%	National Center for Education Statistics
3	b	Poverty Status by School Enrollment, 2009-2013	7.8%		12.9%	12.6%	American Community Survey
3	c	Student-to-Teacher Ratio (% Student / Teacher), 2011-2012	10.3		13	9.4	National Center for Education Statistics
3	d	High School Graduation, 2013	31.2%		85.8%	84.6%	Annie E. Casey Foundation
3	e	Bachelor's degree or higher, percent of persons age 25+, 2008-2012	21.4%		32.1%	20.5%	People Quick Facts

#	Indicators	Kiowa 2015	Kiowa 2012	Trend
1	Total # Public School Nurses	1	2	
2	School Nurse is part of the IEP team Yes/No	N	N	
3	School Wellness Plan (Active)	N	N	
4	VISION: # Screened / Referred to Prof / Seen by Professional	272/20/?	402/30/?	
5	HEARING: # Screened / Referred to Prof / Seen by Professional	272/3/?	402/30/?	
6	ORAL HEALTH: # Screened / Referred to Prof / Seen by Professional	NA	NA	
7	SCOLIOSIS: # Screened / Referred to Prof / Seen by Professional	25/9/?	57/7/?	
8	# of Students served with no identified chronic health concerns	NA	NA	
9	School has a suicide prevention program	N	N	
10	Compliance on required vaccinations (%)	97%	90%	

TAB 4 Maternal and Infant Health Profile

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

#	Criteria - Vital Statistics	KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)
a	Total Live Births, 2008	23		41,815	1,293
b	Total Live Births, 2009	29		41,388	1,317
c	Total Live Births, 2010	28		40,439	1,274
d	Total Live Births, 2011	38		39,628	1,315
e	Total Live Births, 2012	32		40,304	1,370
f	Total Live Births, 2008-2012 - Five year Rate (%)	10.8%		14.5%	11.5%

TAB	Health Indicator	KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
4 a	Percent of Births Where Prenatal Care began in First Trimester, 2011-2013	72.2%		78.4%	78.9%	Kansas Department of Health and Environment
4 b	Percentage of Premature Births, 2011-2013	5.5%		9.0%	8.9%	Kansas Department of Health and Environment
4 c	Percent of Births with Low Birth Weight, 2011-2013	6.4%		7.1%	7.6%	Kansas Department of Health and Environment
4 d	Percent of births Where Mother Smoked During Pregnancy, 2010-2012	7.1%		13.5%	NA	Kansas Department of Health and Environment
4 e	Percent of all Births Occurring to Teens (15-19), 2011-2013	6.3%		8.1%	7.6%	Kansas Department of Health and Environment
4 f	Percent of Births Occurring to Unmarried Women, 2011-2013	10.1%		36.7%	31.3%	Kansas Department of Health and Environment
4 g	Average Monthly WIC Participation per 1,000 population, 2013	33.3%		23.6%	20.9%	Kansas Department of Health and Environment
4 h	Percent of WIC Mothers Breastfeeding Exclusively, 2013	45.5%		12.9%	14.6%	Kansas Department of Health and Environment

TAB 5 Hospitalization/Provider Profile

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

#		KS Hospital Assoc PO103	Kiowa County IP 2015			Trend
			FFY2011	FFY2012	FFY2013	
1		Total Discharges	336	332	296	
2		Total IP Discharges-Age 0-17 Ped	12	10	6	
3		Total IP Discharges-Age 18-44	12	14	15	
4		Total IP Discharges-Age 45-64	61	55	63	
5		Total IP Discharges-Age 65-74	29	37	36	
6		Total IP Discharges-Age 75+	98	109	76	
7		Psychiatric	51	55	52	
8		Obstetric	36	25	9	
9		Surgical %	20.5%	17.2%	23.0%	
#		KS Hospital Assoc PO103	Kiowa County Mem Hosp			Trend
			FFY2011	FFY2012	FFY2013	
1		Total Discharges	56	103	62	
2		Total IP Discharges-Age 0-17 Ped	1	2	1	
3		Total IP Discharges-Age 18-44	3	6	4	
4		Total IP Discharges-Age 45-64	14	21	15	
5		Total IP Discharges-Age 65-74	7	18	11	
6		Total IP Discharges-Age 75+	29	55	29	
7		Psychiatric	2	1	2	
8		Obstetric	0	0	0	
9		Surgical %	NA	NA	NA	
#	Kansas Hospital Assoc OP TOT223E		FFY2011	FFY2012	FFY2013	Trend
2		ER Market Share - Kiowa Co Mem	66.9%	64.5%	71.2%	
4		Visiting Dr Market Share - Kiowa Co	78.3%	84.6%	59.6%	
6		Total OP Market Share - Kiowa Co	81.3%	81.7%	79.0%	

TAB	Health Indicator	KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
5 a	Ratio of Population to Primary Care Physicians, 2013	2338		1816	2114	Kansas Department of Health and Environment
5 b	Staffed Hospital Bed Ratio (per 1,000 Pop), 2012	6.0%		3.4%	13.1%	Kansas Hospital Association
5 c	Percent of Births with Inadequate Birth Spacing, 2011-2013	10.9%		11.0%	10.8%	Kansas Department of Health and Environment
5 d	Preventable hospital stays	NA		NA	64	County Health Rankings
5 e	Heart Disease Hospital Admission Rate, 2009-2011	190		300	262	Kansas Department of Health and Environment
5 f	Congestive Heart Failure Hospital Admission Rate, 2009-2011	178		199	191	Kansas Department of Health and Environment
5 g	(COPD) Hospital Admission Rate, 2009-2011	94		136	194	Kansas Department of Health and Environment
5 h	Bacterial Pneumonia Hospital Admission Rate, 2009-2011	513		269	488	Kansas Department of Health and Environment
5 i	Injury Hospital Admission Rate, 2009-2011	730		915	691	Kansas Department of Health and Environment

TAB 6 Social & Rehab Services Profile

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

TAB		Health Indicator	KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
6	a	Depression: Medicare Population, 2012	13.4%		16.2%	15.2%	Centers for Medicare & Medicaid Services
6	b	Alcohol-Impaired Driving Deaths, 2008-2012	25.0%		34.7%	36.4%	County Health Rankings
6	c	Inadequate social support	6%		NA	16%	County Health Rankings
6	d	Poor mental health days	NA		NA	2.8	County Health Rankings

TAB 7 Health Risk Profiles

Knowing community health risk factors and disease patterns can aid in the understanding “next steps” to improve health. Being overweight/obese; smoking, drinking in excess, not exercising etc can lead to poor health.

TAB		Health Indicator	KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
7a	a	% of Adults with High Cholesterol, 2013	NA		38.1%	41.0%	Kansas Department of Health and Environment
7a	b	Adult obesity	29%		30%	30%	countyhealthrankings.org
7a	c	Percent of Adults Who are Binge Drinkers, 2013	0.0%		15.4%	16.7%	Kansas Department of Health and Environment
7a	d	Percent of Adults Who Currently Smoke Cigarettes, 2013	NA		20.0%	22.0%	Kansas Department of Health and Environment
7a	e	% of Adults with Diagnosed Hypertension, 2013	NA		31.3%	31.7%	Kansas Department of Health and Environment
7a	f	% of Adults with Doctor Diagnosed Arthritis, 2013	NA		23.9%	23.3%	Kansas Department of Health and Environment
7a	g	% Physical inactivity	27.0%		NA	25.0%	countyhealthrankings.org
7a	h	% of Adults with Fair or Poor Self-Perceived Health Status, 2013	NA		15.4%	12.4%	Kansas Department of Health and Environment
7a	i	Population Served Unaffected by SDWA Nitrate Violations, 2013	58.9%		99.7%	96.2%	Kansas Department of Health and Environment
7a	j	Sexually transmitted infections	NA		NA	369	countyhealthrankings.org

TAB 7 Health Risk Profiles

TAB		Health Indicator	KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
7b	a	Hypertension: Medicare Population, 2012	45.2%		52.7%	55.2%	Centers for Medicare & Medicaid Services
7b	b	Hyperlipidemia: Medicare Population, 2012	36.4%		39.3%	38.1%	Centers for Medicare & Medicaid Services
7b	c	Rheumatoid Arthritis: Medicare Population, 2012	19.9%		27.7%	33.5%	Centers for Medicare & Medicaid Services
7b	d	Ischemic Heart Disease: Medicare Population, 2012	25.8%		26.7%	29.7%	Centers for Medicare & Medicaid Services
7b	e	Diabetes: Medicare Population, 2012	17.3%		24.6%	23.0%	Centers for Medicare & Medicaid Services
7b	f	Heart Failure: Medicare Population, 2012	16.5%		14.0%	18.3%	Centers for Medicare & Medicaid Services
7b	g	Chronic Kidney Disease: Medicare Population, 2012	12.6%		13.9%	13.1%	Centers for Medicare & Medicaid Services
7b	h	COPD: Medicare Population, 2012	8.6%		11.0%	12.9%	Centers for Medicare & Medicaid Services
7b	i	Alzheimer's Disease or Dementia: Medicare Pop 2012	11.2%		9.9%	10.6%	Centers for Medicare & Medicaid Services
7b	j	Atrial Fibrillation: Medicare Population, 2012	6.1%		8.0%	9.3%	Centers for Medicare & Medicaid Services
7b	k	Cancer: Medicare Population, 2012	6.5%		8.0%	9.1%	Centers for Medicare & Medicaid Services
7b	l	Osteoporosis: Medicare Population, 2012	7.2%		6.1%	8.2%	Centers for Medicare & Medicaid Services
7b	m	Asthma: Medicare Population, 2012	2.2%		3.8%	3.5%	Centers for Medicare & Medicaid Services
7b	n	Stroke: Medicare Population, 2012	3.0%		3.2%	2.6%	Centers for Medicare & Medicaid Services

TAB 8 Uninsured Profiles

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

Health Indicator		KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)
a	Uninsured Adult Pop Rate, 2012	17.0%		17.6%	17.4%
#	Charity Care by Individual Facility	YR12	YR13	YR14	Trend
1	Local Hosp Charity Care - Kiowa	\$20,464	\$17,257	\$12,598	

TAB 9 Mortality Profile

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

TAB	Health Indicator	KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
9 a	Life Expectancy for Females, 2010	81		81	81	Institute for Health Metrics and Evaluation
9 b	Life Expectancy for Males, 2010	77		76	76	Institute for Health Metrics and Evaluation
9 c	Infant Mortality Rate, 2009-2013	NA		6.4%	3.9%	Kansas Department of Health and Environment
9 d	Age-adjusted Mortality Rate per 100,000 population, 2011-2013	714		757	740	Kansas Department of Health and Environment
9 e	Age-Adjusted Years of Potential Life Lost Traffic Injury, 2011-2013	730		490	1541	Kansas Department of Health and Environment
9 f	Age-adjusted Cancer Mortality Rate per 100,000 population, 2011-2013	145		166	148	Kansas Department of Health and Environment
9 g	Age-adjusted Heart Disease Mortality Rate per 100,000 population, 2011-2013	129		156	166	Kansas Department of Health and Environment
9 h	Disease Mortality Rate per 100,000 population, 2009-2013	52		51	51	Kansas Department of Health and Environment
9 i	Age-adjusted Traffic Injury Mortality Rate per 100,000 population, 2011-2013	NA		13	25	Kansas Department of Health and Environment
9 j	Mortality Rate per 100,000 population, 2011-2013	72		40	66	Kansas Department of Health and Environment
9 k	Age-adjusted Suicide Mortality Rate per 100,000 population, 2003-2013	NA		15	14	Kansas Department of Health and Environment

#	Causes of Death by County of Residence, KS 2012	KIOWA CO 2015	Trend	KANSAS	NW Alliance (12)
	TOTAL	54		43,262	2,013
1	Major Cardiovascular Diseases	10		7,458	341
2	Diseases of Heart	8		5,406	256
3	All Other Causes	7		5,314	259
4	Cerebrovascular Diseases	6		2,156	100
5	All Malignant Neoplasms	5		4,215	194
6	Chronic Lower Respiratory Diseases	3		1,331	53
7	Diabetes mellitus	3		894	39
8	Malignant Neoplasms of Breast	2		1,288	51
9	Malignant Neoplasms of Urinary Tract	2		500	24
10	Motor Vehicle Accidents	2		1,145	48
11	Other Malignant Neoplasms	2		621	37

TAB 10 Preventive Health Profile

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

TAB		Health Indicator	KIOWA CO 2015	TREND	KANSAS	NW Alliance (12)	SOURCE
10	a	Access to Exercise Opportunities, 2014	45.9%		70.9%	51.3%	County Health Rankings
10	b	% of Infants Fully Immunized at 24 Mo, 2011-2013	70.8%		71.7%	78.6%	Kansas Department of Health and Environment
10	c	Were Immunized Against Influenza Past 12 Mo, 2013	NA		64.8%	NA	Kansas Department of Health and Environment
10	d	Consuming Fruit Less than 1 Time Per Day, 2013	NA		41.7%	NA	Kansas Department of Health and Environment
10	e	Consuming Vegetables Less than 1 Time Per Day, 2013	NA		22.9%	NA	Kansas Department of Health and Environment
10	f	Diabetic screening	89%		NA	86%	County Health Rankings
10	g	Mammography screening	73%		NA	64%	County Health Rankings
10	h	% Annual check-up visit with PCP	NA		NA	NA	TBD
10	i	% Annual check-up visit with Dentist	NA		NA	NA	TBD
10	j	% Annual check-up visit with Eye Doctor	NA		NA	NA	TBD

Community Feedback Research

For CHNA Round #2, it also important to gather community perspective from key stakeholders on their views of progress to address baseline CHNA needs documented 3 years ago. Below are findings of this online community primary research:

Question 1- Overall Quality Ranking

CHNA Round #2 Feedback 2015 - Community Feedback						
1. Three years ago a Community Health Needs Assessment was completed. This assessment identified a number of health needs for our community. Today we are updating this assessment and would like to know how you rate the "Overall Quality" of healthcare delivery in our community?						
Answer Options	Very Good	Good	Fair	Poor	Very Poor	Response N
Kiowa County N=106	28	56	15	4	0	103
Top 2 Boxes (Very Good / Good)	81.6%					
NW Alliance (5) Totals	203	306	105	11	0	625
Top 2 Boxes (Very Good / Good)	81.4%					

Questions 5 & 6- Community Ranking of Healthcare Services 2015

CHNA Round #2 Feedback 2015 - Community Feedback			
5. How would our community rate each of the following ?	NW Alliance (5) Lower 2 Box %	Kiowa CO N=106	Trend
Ambulance Services	1.8%	1.1%	Green
Child Care	13.3%	7.0%	Yellow
Chiropractors	10.3%	45.1%	Red
Dentists	18.0%	36.3%	Red
Emergency Room	4.0%	6.9%	Yellow
Eye Doctor / Optometrist	12.3%	13.1%	Red
Family Planning Services	15.7%	14.9%	Red
Home Health	14.2%	23.6%	Red
Hospice	11.1%	19.2%	Red
Inpatient Services	2.3%	2.4%	Green
Mental Health Services	24.0%	7.6%	Yellow
Nursing Home	14.6%	6.9%	Yellow
Outpatient Services	1.7%	2.4%	Green
Pharmacy	4.6%	0.0%	Green
Primary Care	3.9%	4.8%	Green
Public Health Dept.	2.1%	0.0%	Green
School Nurse	3.4%	5.3%	Yellow
Visiting Specialists	10.2%	11.1%	Red

Question 7- Receiving Healthcare Services Outside our Community

CHNA Round #2 Feedback 2015			
7. Over the past 2 years, did you or do you know someone who received health care services outside of our community?	NW Alliance (10) Lower 2 Box %	Kiowa Co N=110	Trend
Yes	83.5%	85.4%	
No	7.9%	5.6%	
Don't know	8.6%	9.0%	
TOTALS	100.0%	100.0%	

Question 8- Requested Discussion Items for Town Hall Agenda

8. Are there any other health needs that we need to discuss at our upcoming CHNA Town Hall meeting?	NW Alliance (Opt C 8) %	Kiowa Co N=110	Trend
Abuse / Violence	5.3%	3.0%	
Alcohol	5.0%	3.9%	
Cancer	5.7%	3.6%	
Diabetes	4.8%	5.0%	
Drugs / Substance Abuse	7.6%	9.7%	
Family Planning	2.7%	2.5%	
Heart Disease	3.6%	3.9%	
Lead Exposure	1.0%	1.4%	
Mental Illness	6.4%	5.5%	
Nutrition	5.4%	6.6%	
Obesity	8.0%	8.9%	
Ozone (Air)	1.3%	1.4%	
Physical Exercise	6.6%	8.0%	
Poverty	5.0%	4.2%	
Respiratory Disease	2.7%	2.8%	
Sexual Transmitted Diseases	1.6%	2.5%	
Suicide	3.5%	2.2%	
Teen Pregnancy	3.0%	3.9%	
Tobacco Use	3.7%	3.9%	
Vaccinations	6.3%	6.1%	
Water Quality	4.2%	4.2%	
Wellness Education	6.0%	6.4%	
Some Other Need (please specify below)	0.8%	0.6%	
TOTAL	100.0%	100.0%	

IV. Inventory of Community Health Resources

[VVV Research & Development, LLC]

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

Inventory of Health Services - Kiowa County, KS				
Cat	HC Services Offered in county: Yes / No	Hospital	HLTH Dept	Other
Hosp	Radiology, Diagnostic	YES	NO	NO
Hosp	Radiology, Therapeutic	NO	NO	NO
Hosp	Reproductive Health	NO	NO	NO
Hosp	Robotic Surgery	NO	NO	NO
Hosp	Shaped Beam Radiation System 161	NO	NO	NO
Hosp	Single Photon Emission Computerized Tomography (SPECT)	NO	NO	NO
Hosp	Sleep Center	NO	NO	NO
Hosp	Social Work Services	NO	NO	NO
Hosp	Sports Medicine	NO	NO	NO
Hosp	Stereotactic Radiosurgery	NO	NO	NO
Hosp	Swing Bed Services	YES	NO	NO
Hosp	Transplant Services	NO	NO	NO
Hosp	Trauma Center	NO	NO	NO
Hosp	Ultrasound	YES	NO	NO
Hosp	Women's Health Services	YES	YES	NO
Hosp	Wound Care	YES	NO	NO
SR	Adult Day Care Program	NO	NO	NO
SR	Assisted Living	NO	NO	Carriage House
SR	Home Health Services	NO	NO	NO
SR	Hospice	NO	NO	Hospice
SR	Long Term Care	NO	NO	NO
SR	Nursing Home Services	NO	NO	NO
SR	Retirement Housing	NO	NO	Elmore Heights/Komotara
SR	Skilled Nursing Care	YES	NO	NO
ER	Emergency Services	YES	NO	NO
ER	Urgent Care Center	NO	NO	NO
ER	Ambulance Services	YES	NO	NO
SERV	Alcoholism-Drug Abuse	NO	NO	Mental Health Center
SERV	Blood Donor Center	NO	NO	NO
SERV	Chiropractic Services	NO	NO	?
SERV	Complementary Medicine Services	NO	NO	NO
SERV	Dental Services	NO	NO	Dr. Sweet
SERV	Fitness Center	Yes		School and County Rec
SERV	Health Education Classes	NO	NO	NO
SERV	Health Fair (Annual)	NO	Yes	NO
SERV	Health Information Center	YES	YES	YES
SERV	Health Screenings	NO	Yes	YES
SERV	Meals on Wheels	YES - for Church Daycare	NO	Senior Center
SERV	Nutrition Programs	NO	NO	NO
SERV	Patient Education Center	YES	YES	YES
SERV	Support Groups	NO	NO	Mental Health Center
SERV	Teen Outreach Services	NO	NO	Youth for Christ
SERV	Tobacco Treatment/Cessation Program	NO	NO	NO
SERV	Transportation to Health Facilities	NO	NO	Senior Center
SERV	Wellness Program	YES	NO	Senior Center

Physician Manpower - Kiowa County, KS

# of FTE Providers	Supply working in County		
	FTE County Based	FTE Visting	PA/NP
Primary Care:			
Family Practice	0.0	0.0	0.0
Internal Medicine	1.0	0.0	2.5
Obstetrics/Gynecology	0.0	0.0	0.0
Pediatrics	0.0	0.0	0.0
Medicine Specialists:			
Allergy/Immunology	0.0	0.0	
Cardiology	0.0	0.1	
Dermatology	0.0	0.0	
Endocrinology	0.0	0.0	
Gastroenterology	0.0	0.0	
Oncology/RADO	0.0	0.0	
Infectious Diseases	0.0	0.0	
Nephrology	0.0	0.0	
Neurology	0.0	0.0	
Psychiatry	0.0	0.0	
Pulmonary	0.0	0.0	
Rheumatology	0.00	0.00	
Surgery Specialists:			
General Surgery	0.00	0.05	
Neurosurgery	0.00	0.00	
Ophthalmology	0.00	0.00	
Orthopedics	0.00	0.00	
Otolaryngology (ENT)	0.00	0.00	
Plastic/Reconstructive	0.00	0.00	
Thoracic/Cardiovascular/Vasc	0.00	0.00	
Urology	0.00	0.00	
Hospital Based:			
Anesthesia/Pain	0.00	0.00	
Emergency	0.00	0.00	0.00
Radiology	0.00	0.00	
Pathology	0.00	0.00	
Hospitalist *	0.00	0.00	
Neonatal/Perinatal	0.00	0.00	
Physical Medicine/Rehab	0.00	0.00	
Others			
Optometry	0.00	0.05	
Podiatry		0.05	
Denistry	0.00	0.05	
TOTALS	1.00	0.25	2.50

Kiowa Co, KS – Greensburg Visiting Specialists

Specialty	Schedule	Contact for Appointment	Location of Clinic
Neurology Dr. Abay's Office	Twice a Month	877 685 2525	721 W. Kansas, Greensburg, KS (Main Office - Wichita, KS)
Optometry Dr. Maydew	Every Other Thursday	6290 672 5934	721 W. Kansas, Greensburg, KS (Main Office – Pratt, KS)
Cardiology Dr. Steckley	Once Monthly	800 362 1093	721 W. Kansas, Greensburg, KS (Main Office – Wichita, KS)
Dentistry Dr. Sweet	Three Times/Month	620 723 4256	721 W. Kansas, Greensburg, KS (Main Office – Hutchinson, KS)
Endoscopic Services Dr. Wiltshire	Every Other Month	800 794 3092	721 W. Kansas, Greensburg, KS (Main Office – Pratt, KS)

***Schedules are tentative subject to holidays and vacations**

Kiowa County Area Health Services Directory

Emergency Numbers

Police/Sheriff 911

Fire 911

Ambulance 911

Non-Emergency Numbers

Kiowa County Sheriff 723-2182

Kiowa County Ambulance 723-3341

Municipal Non-Emergency Numbers

	<u>Police/Sheriff</u>	<u>Fire</u>
Greensburg	723-2182	862-5317
Haviland	723-2182	862-5317
Mullinville	723-2182	862-5317

To provide updated information or to add new health and medical services to this directory, please contact:

Kiowa County Extension
320 South Main Street, Suite 110 (Greensburg)
620-723-2156
www.kiowa.ksu.edu

Other Emergency Numbers

Kansas Child/Adult Abuse and Neglect Hotline

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

Domestic Violence Hotline

800-799-7233
www.ndvh.org

Emergency Management (Topeka)

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

Federal Bureau of Investigation

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

Kansas Arson/Crime Hotline

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

Kansas Bureau of Investigation (Topeka)

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

Kansas Crisis Hotline (Domestic Violence/Sexual Assault)

888-END-ABUSE
www.kcsdv.org

Kansas Road Conditions

866-511-KDOT
511
www.ksdot.org

Poison Control Center

800-222-1222
www.aapcc.org

Suicide Prevention Hotline

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

Toxic Chemical and Oil Spills

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

Health Services

Hospitals

Kiowa County Memorial Hospital

721 West Kansas (Greensburg)
723-3341
www.kcmh.net

Health Department

Kiowa County Health Department

Courthouse (Greensburg)
723-2136
www.kiowacountyks.org/courthouseoffices/healthdepartment.html

Kiowa County Health Department Services Include:

Adult Screenings
Disease Investigation
Early Intervention Health & Development Screenings
Family Planning
Foot Care
Immunizations
Infant and Children Care Education
Licensing of Child Care Providers
Nutritional Information
Well-Person Health Assessments
Women's Health Services

Mental Health

Iroquois Center – Human Development

610 East Grant Avenue (Greensburg)
723-2272
www.irqcenter.com

Medical Professionals

Chiropractors

Bucklin Chiropractic Center

710 West Center Street (Bucklin)
826-3539

Coldwater Chiropractic Center

132 East Main Street (Coldwater)
582-2060

Commerford Chiropractic

103 North New York Street (Coldwater)
582-2397

Kinsley Chiropractic Center

600 Emerson Avenue (Kinsley)
659-2302

Clinics

Greensburg Family Practice

704 West Kansas Avenue (Greensburg)
723-3341

Haviland Clinic

106 North Main Street (Haviland)
862-5471

Dentists

New Image Dental Care
207 South Washington Street (Coldwater)
582-2423

Optometrists

ThibaultMaydew
721 West Kansas Avenue (Greensburg)
672-5934

Pharmacies

Kiowa County Pharmacy
721 West Kansas Avenue (Greensburg)
723-3112

Rehabilitation Services

Lakewood Rehab Center
200 North main Street (Haviland)
862-5315

Social & Rehabilitation Services
116 South Pine Street (Greensburg)
723-3321

Other Health Care Services

General Health Services

Stafford County Health Department
610 East 1st Street (St. John)
549-3504

Stafford District Home Health Service
502 South Buckeye Street (Stafford)
234-6210

Assisted Living/Nursing Homes/TLC

Home Again Senior Living
321 North Main Street (Haviland)
862-5867

Lakepoint Assisted Living
723 South Elm Street (Greensburg)
723-3400
www.lakepointnc.com

Diabetes

Arriva Medical
800-375-5137

Diabetes Care Club
888-395-6009

Disability Services

American Disability Group
877-790-8899

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

Domestic/Family Violence

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

Family Crisis Center
(Great Bend)
Hotline: 792-1885
Business Line: 793-1965

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

Kansas Crisis Hotline
Manhattan
785-539-7935

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

Educational Training Opportunities

Association of Continuing Education
620-792-3218

Food Programs

Kansas Food 4 Life
4 Northwest 25th Road (Great Bend)
793-7100

Kansas Food Bank
1919 East Douglas (Wichita)
316-265-4421
www.kansasfoodbank.org

Government Healthcare

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

Kansas Department of Health and Environment (KDHE)
CurtisStateOfficeBuilding
1000 SW Jackson
Topeka, KS66603

785-296-1500
www.kdheks.gov/contact.html

MEDICAID

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

MEDICARE

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

Southwest Kansas Area Agency on Aging

236 San Jose Drive
Dodge City, KS 67801
620-225-8230
www.swkaaa.org

Social & Rehabilitation Services (SRS)

3000 Broadway
Hays, KS 67601
785-628-1066

Social Security Administration

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

Health and Fitness Centers

Greensburg Recreation Commission
(Greensburg)
723-1110

Massage Therapy

Feel-N-Good Massage Therapy

320 Colony Avenue (Kinsley)
289-3618

Linda's Massage

312 Atwood Avenue (Kinsley)
659-2524

Medical Equipment and Supplies

American Medical Sales and Repair
866-637-6803

School Nurses

21st Century Learning Academy

110 South Main (Mullinville)
548-2289
www.mullinville.org

Haviland Public Schools – USD 474

400 North Topeka (Haviland)

862-5277
www.usd474.org

Kiowa County Schools – USD 422

710 South Main (Greensburg)
Elementary School
723-2332
High School
723-2019
www.usd422.org

Senior Services

Elder Care, Inc.

PO Box 1364 (Great Bend)
792-5942

Older Kansans Employment

Southwest Kansas Area Agency on Aging
240 San Jose Drive
Dodge City, KS 67801
(316) 225-8230
<http://www.swkaaa.org/>

Veterinary Services

Greensburg Veterinary Clinic

204 West Florida Avenue (Greensburg)
723-2117

Robert G Skaggs

513 North Maple Street (Greensburg)
723-2462

Local Government, Community, and Social Services

Adult Protection

Adult Protective Services (SRS)

800-922-5330
www.srskansas.org/ISD/ees/adult.htm

Elder Abuse Hotline

800-842-0078
www.elderabusecenter.org

Kansas Department of Social and Rehabilitation Services West Region Protection Reporting Center

800-922-5330

Alcohol and Drug Treatment

Alcohol and Drug Abuse Services

800-586-3690
http://www.srskansas.org/services/alc-drug_assess.htm

Alcohol Detoxification 24-Hour Helpline

877-403-3387
www.ACenterForRecovery.com

Alcoholics Anonymous
302 Belmont Road (Pratt)
672-2533
www.aa.org

Center for Recovery
877-403-6236

G&G Addiction Treatment Center
866-439-1807

Road Less Traveled
866-486-1812

Seabrook House
800-579-0377

The Treatment Center
888-433-9869

Child Protection

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

Children and Youth

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

Kansas Children's Service League
800-332-6378
www.kcsl.org

Crime Prevention

Kiowa County Sheriff Office
200 East Wisconsin Avenue (Greensburg)
723-2182
www.kiowacountyks.org/emergencyservices/sheriff.html

Day Care Providers – Adult

Home Again Senior Living
321 North Main (Haviland)
862-5867
www.homeagainseniorliving.com

Day Care Providers - Children

First United Methodist Church
600 West Lincoln Avenue (Greensburg)

723-3324

Special World Daycare
220 North Locust (Mullinville)
548-2328

William Martie's Day Care
301 North Emporia Street (Haviland)
862-5361

Extension Office

Kiowa County Extension
320 South Main Street, Suite 110 (Greensburg)
723-2156
www.kiowa.ksu.edu

Funeral Homes

Fleener Funeral Home
514 South Main (Greensburg)
723-2612
www.fleenerfuneralhome.com

Housing

Community Housing Services
122 East Illinois Avenue (Greensburg)
723-3231

Corp Housing Equity
14482 West 118th Terrace (Olathe)
261-8067

Kiowa County Housing Authority
408 South Main Street (Greensburg)
723-1097

Legal Services

Kiowa County Attorney
211 East Florida (Greensburg)
723-2721

Martindell Swearer Shaffer Ridenour
BTI Wind Energy Building
15477 US 54 Highway (Greensburg)
723-3478
www.martindell.com

Southwest Kansas Area Agency on Aging
240 San Jose Drive
Dodge City, KS 67801
(316) 225-8230
<http://www.swkaaa.org/>

Libraries, Parks and Recreation

Greensburg Recreation Commission
600 South Main Street (Greensburg)
723-1110

Greensburg Swimming Pool
206 North Olive Street (Greensburg)
723-2850

Haviland Library
112 North Main Street (Haviland)
862-5349

Kiowa County Conservation
122 East Illinois Avenue (Greensburg)
723-2146

Kiowa County Library
320 South Main Street (Greensburg)
723-1118
www.skyways.org/towns/greensburg/library.htm

Mullinville Library
115 North Main Street (Mullinville)
548-2630

Mullinville Recreation Commission
200 North Main Street (Mullinville)
548-2207

Worden Memorial Library
100 East Cherry Street (Haviland)
862-5274

Pregnancy Services

Adoption is a Choice
877-524-5614

Adoption Network
888-281-8054

Adoption Spacebook
866-881-4376

Graceful Adoptions
888-896-7787

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

Kiowa County Health Department
Courthouse (Greensburg)
723-2136
www.kiowacountyks.org/courthouseoffices/healthdepartment.html

Public Information

Kiowa County Chamber of Commerce
101 South Main Street, #103 (Greensburg)
723-3188
www.kiowacountychamber.com

Greensburg City Hall
300 South Main Street (Greensburg)
723-2751

Rape

Domestic Violence and Rape Hotline
888-874-1499

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

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

Red Cross

American Red Cross
114 N Main St. (Pratt)
620-672-3651
www.redcross.org

Social Security

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

Transportation

Gail Ballard Airport
Highway 54 (Haviland)
862-5678

Transportation Department
210 North Poplar Street (Greensburg)
723-2503

State and National Information, Services, Support

Adult Protection

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

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

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

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

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

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

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

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

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

National Suicide Prevention Lifeline
1-800-273-8255

Poison Center
1-800-222-1222

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

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

Suicide Prevention Helpline
1-785-841-2345

800-586-3690
http://www.srskansas.org/services/alc-drug_assess.htm

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

Alcohol and Drug Helpline
1-800-821-4357

Center Alcoholism/Drug Addiction Treatment
800-477-3447

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

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

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

Recovery Connection
www.recoveryconnection.org

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

Alcohol and Drug Treatment Programs

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

AAAAAH
1-800-993-3869

Abandon A Addiction
1-800-405-4810

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

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

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

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

Alcohol and Drug Abuse Hotline
800-ALCOHOL

Alcohol and Drug Abuse Services

Better Business Bureau

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

Children and Youth

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

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

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

Child Abuse Hotline
1-800-922-5330

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

Child Abuse National Hotline

1-800-4-A-CHILD (422-4453)

www.childabuse.com

Child Find of America

1-800-426-5678

Child Help USA National Child Abuse Hotline

1-800-422-4453

Child Protective Services

800-922-5330

www.srskansas.org/services/child_protective_services.htm

HealthWave

P.O. Box 3599

Topeka, KS66601

1-800-792-4884

1-800-792-4292 (TTY)

www.kansashealthwave.org

Heartspring (Institute of Logopedics)

8700 E. 29TH North

Wichita, KS67226

www.heartspring.org

Kansas Big Brothers/Big Sisters

1-888-KS4-BIGS

www.ksbbbs.org

Kansas Children's Service League (Hays)

785-625-2244

1-877-530-5275

www.kcsl.org

Kansas Department of Health and Environment

785-296-1500

www.kdheks.gov

e-mail: info@kdheks.gov

Kansas Society for Crippled Children

106 W. Douglas, Suite 900

Wichita, KS67202

1-800-624-4530

316-262-4676

www.kssociety.org

National Runaway Switchboard

1-800-RUNAWAY

www.1800runaway.org/

National Society for Missing and Exploited Children

1-800-THE-LOST (843-5678)

www.missingkids.com

Parents Anonymous Help Line

800-345-5044

<http://www.parentsanonymous.org/paIndex10.html>

Runaway Line

800-621-4000

800-621-0394 (TDD)

<http://www.1800runaway.org/>

Talking Books

800-362-0699

http://skyways.lib.ks.us/KSL/talking/ksl_bph.html

Community Action**Peace Corps**

800-424-8580

www.peacecorps.gov

Public Affairs Hotline (Kansas Corporation Commission)

800-662-0027

www.kcc.state.ks.us

Counseling**Care Counseling**

Family counseling services for Kansas and Missouri

1-888-999-2196

Carl Feril Counseling

608 North Exchange (St. John)

620-549-6411

CastlewoodTreatmentCenter for Eating Disorders

1-888-822-8938

www.castlewoodtc.com

Catholic Charities

1-888-468-6909

www.catholiccharitiessalina.org

Center for Counseling

5815 West Broadway (Great Bend)

800-875-2544

Central Kansas Mental HealthCenter

1-800-794-8281

Will roll over after hours to a crisis number.

Consumer Credit Counseling Services

800-279-2227

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

Kansas Problem Gambling Hotline

866-662-3800

<http://www.ksmhc.org/Services/gambling.htm>

National Hopeline Network

1-800-SUICIDE (785-2433)

www.hopeline.com

National Problem Gambling Hotline

1-800-552-4700

www.npgaw.org

SamaritanCounselingCenter

1602 N. Main Street

Hutchinson, KS67501

620-662-7835

<http://cmc.pdswebpro.com/>

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

Senior Health Insurance Counseling
1-800-860-5260
www.agingkansas.org

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

Disability Services

American Association of People with Disabilities (AAPD)
www.aapd.com

American Council for the Blind
1-800-424-8666
www.acb.org

Americans with Disabilities Act Information Hotline
1-800-514-0301
1-800-514-0383 (TTY)
www.ada.gov

Disability Advocates of Kansas, Incorporated
1-866-529-3824
www.disabilitysecrets.com

Disability Group, Incorporated
1-888-236-3348
www.disabilitygroup.com

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

Hearing Healthcare Associates
800-448-0215

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

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

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

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

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

Environment

Environmental Protection Agency
1-800-223-0425
913-321-9516 (TTY)
www.epa.gov

Kansas Department of Health and Environment
Salina 785-827-9639
Hays 785-625-5663
Topeka 785-296-1500
www.kdheks.gov

Food and Drug

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

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

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

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

Poison Hotline
1-800-222-1222

Health Services

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

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

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

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

American Lung Association

800-586-4872

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

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

Elder Care Helpline
www.eldercarelink.com

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

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

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

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

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

Hospice

Hospice-Kansas Association
800-767-4965

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

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

Housing

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

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

Legal Services

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

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

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

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

Southwest Kansas Area Agency on Aging
240 San Jose Drive
Dodge City, KS 67801
(316) 225-8230
<http://www.swkaaa.org/>

Medicaid Services

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

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

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

Medicare Information
800-MEDICARE
www.medicare.gov

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

Mental Health Services

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

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

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

Make a Difference

1-800-332-6262

Mental Health America

1-800-969-6MHA (969-6642)

National Alliance for the Mentally Ill**Helpline**

1-800-950-NAMI (950-6264) or 703-516-7227 (TTY)

www.nami.org**National Institute of Mental Health**

1-866-615-6464 or 1-866-415-8051 (TTY)

www.nimh.nih.gov**National Library Services for Blind and Physically Handicapped**

1-800-424-8567

www.loc.gov/nls/music/index.html**National Mental Health Association**

800-969-6642

800-433-5959 (TTY)

www.nmha.org**Pawnee Mental Health****State Mental Health Agency**

KS Department of Social and Rehabilitation Services

915 SW Harrison Street

Topeka, KS66612

785-296-3959

www.srskansas.org**Suicide Prevention Hotline**

1-800-SUICIDE [784-2433]

www.hopeline.com**Nutrition****American Dietetic Association**

1-800-877-1600

www.eatright.org**American Dietetic Association Consumer Nutrition Hotline**

800-366-1655

Department of Human Nutrition

KansasStateUniversity

119 Justin Hall

Manhattan, KS66506

785-532-5500

www.humec.k-state.edu/hn/**Eating Disorders Awareness and Prevention**

1-800-931-2237

www.nationaleatingdisorders.org**Food Stamps**

Kansas Department of Social and Rehabilitation Services (SRS)

1-888-369-4777 or Local SRS office

www.srskansas.org/ISD/ees/food_stamps.htm**Kansas Department of Health and Environment**

1000 SW Jackson, Suite 220

Topeka, KS66612

785-296-1320

www.kdheks.gov/news-wic/index.html**Road and Weather Conditions****Kansas Road Conditions**

866-511-KDOT

511

<http://kdot1.ksdot.org/divplanning/roadrpt/>**Senior Services****Alzheimer's Association**

1-800-487-2585

American Association of Retired Persons (AARP)

1-888-OUR-AARP (687-2277)

www.aarp.org**Americans with Disabilities Act Information Line**

1-800-514-0301 or 1-800-514-0383 [TTY]

www.usdoj.gov/crt/ada**American Association of Retired Persons**

888-687-2277

www.aarp.org**Area Agency on Aging**

800-432-2703

Eldercare Locator

1-800-677-1116

www.eldercare.gov/eldercare/public/home.asp**Home Buddy**

1-866-922-8339

www.homebuddy.org**Home Health Complaints**

Kansas Department of Social and Rehabilitation Services (SRS)

1-800-842-0078

Kansas Advocates for Better Care Inc.

Consumer Information

1-800-525-1782

www.kabc.org**Kansas Department on Aging**

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

www.agingkansas.org/index.htm**Kansas Foundation for Medical Care, Inc.**

Medicare Beneficiary Information

1-800-432-0407

Kansas Tobacco Use Quitline

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

Older Kansans Employment Programs (OKEP)

785-296-7842
www.kansascommerce.com

Older Kansans Hotline
800-742-9531

Older Kansans Information Reference Sources on Aging (OKIRSA)
1-800-432-3535

Senior Health Insurance Counseling for Kansas
1-800-860-5260
www.agingkansas.org/SHICK/shick_index.html

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

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

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

Suicide Prevention

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

Veterans

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

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

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

Health Resource Center
877-222-8387

Insurance Center
800-669-8477

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

U.S. Department of Veterans Affairs

Mammography Helpline

888-492-7844

Other Benefits
800-827-1000

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

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

Veterans Administration

Veterans Administration Benefits
800-669-8477

Life Insurance
800-669-8477

Education (GI Bill)
888-442-4551

Health Care Benefits
877-222-8387

Income Verification and Means

Testing
800-929-8387

Mammography Helpline
888-492-7844

Gulf War/Agent Orange Helpline
800-749-8387

Status of Headstones and Markers
800-697-6947

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

Benefits Information and Assistance
800-827-1000

Debt Management
800-827-0648

Life Insurance Information and Service
800-669-8477

Welfare Fraud Hotline

Welfare Fraud Hotline
800-432-3913

V. Detail Exhibits

[VVV Research & Development, LLC]

Patient Origin & Access

[VWV Research & Development, LLC]

#	KS Hospital Assoc PO103	Kiowa County IP 2015			Trend
		FFY2011	FFY2012	FFY2013	
1	Total Discharges	336	332	296	
2	Total IP Discharges-Age 0-17 Ped	12	10	6	
3	Total IP Discharges-Age 18-44	12	14	15	
4	Total IP Discharges-Age 45-64	61	55	63	
5	Total IP Discharges-Age 65-74	29	37	36	
6	Total IP Discharges-Age 75+	98	109	76	
7	Psychiatric	51	55	52	
8	Obstetric	36	25	9	
9	Surgical %	20.5%	17.2%	23.0%	
#	KS Hospital Assoc PO103	Kiowa County Mem Hosp (Only)			Trend
		FFY2011	FFY2012	FFY2013	
1	Total Discharges	56	103	62	
2	Total IP Discharges-Age 0-17 Ped	1	2	1	
3	Total IP Discharges-Age 18-44	3	6	4	
4	Total IP Discharges-Age 45-64	14	21	15	
5	Total IP Discharges-Age 65-74	7	18	11	
6	Total IP Discharges-Age 75+	29	55	29	
7	Psychiatric	2	1	2	
8	Obstetric	0	0	0	
9	Surgical %	NA	NA	NA	
#	Kansas Hospital AssocOP TOT223E	FFY2011	FFY2012	FFY2013	Trend
2	ER Market Share - Kiowa Co Mem	66.9%	64.5%	71.2%	
4	Visiting Dr Market Share - Kiowa Co	78.3%	84.6%	59.6%	
6	Total OP Market Share - Kiowa Co	81.3%	81.7%	79.0%	

Town Hall Attendees Notes & Feedback

[VWV Research & Development, LLC]

Kiowa County, KS Town Hall Roster N=12

Date: 03/11/15				
First	Last	Title	Organization	Address/City/ST/Zip
Mike	Case	Member	Hospital Board	712 E Grant, Greensburg, KS 67054
Carolyn	Irvin		SHICK Volunteer	
Haley	Kern	Clinic Manager	KCMH	521 S Elm, Greensburg, KS 67054
Marsha	Klein		Kiowa County Health	Greensburg, KS 67054
Dennis	McKinney		Past State Treasurer	1220 S Main, Greensburg, KS 67054
Mary	Sweet	CEO	KCMH	721 W Kansas, Greensburg, KS
Kerri	Ulirch		KCHD	211 E Florida, Greensburg, KS 67054
Jeremy	Hoous	IT Director	KCMH	721 W Kansas, Greensburg, KS 67054
Molly	Webb	Director	KCMH	721 W Kansas, Greensburg, KS 67054
Rebecca	McFadden			7352 J. St, Mullinville, KS 67109
Kyla	McDonald	Daycare Director	KCMH	721 W Kansas, Greensburg, KS 67054
Tish	Smith	RN	KCMH	804 W Grant Ave, Greensburg, KS 67054

Kiowa County Community Health Needs Assessment Meeting Notes

03.11.15

n=12

-“Small communities have it better between Hospital and Health Department”

-Primary Research Slide: All their bad scores are from providers they can't afford/keep in their area, i.e. Dentist, Optometrist, Chiropractors. Don't see it as their fault (Government doesn't care *why*). CEO herself says she seeks treatment outside their community because it doesn't make sense to keep them here.

TAB 1: Demographic Profile

- Veteran in the room said he goes to Wichita for care because it is impossible here
- CEO says they have fixed things and now accept their insurance

TAB 5: Hospitalization & Provider Profile

- “Do they take into accounts Mid-Levels?”- No
- Asked us then to change this to “Providers”

TAB 7: Risk Indicators/Factors Profile

- Not too worried about Drinking and Smoking numbers

TAB 8: Uninsured Profile

- “We don't have an exchange”
- Not seeing any new cards coming in
- Have seen a “Critical Care” card

TAB 10: Preventative Quality Measure Profile

- Said they are giving a lot of flu shots and keeping track
- Between the two, they are catching almost everybody
- State doesn't know because they don't require them to report it the same way as other vaccines. They don't know who to give them to.
- To find numbers they would have to do it by zip code of all the providers
- They were the only health department out of 9 surrounding counties to get their flu shots, everyone else was on back order
- They offer mammograms but some go out of town because they need an ultrasound and other things they cannot get here, so might as well just make their appointments out of town so they can knock it all out in one visit.
- Can't bring dentist or eye doctor full time because they don't have enough demand to keep them, but they do know they need them.

STRENGTHS:

- Good Health Rankings from RWJ
- Scope of Services
- Access to Services
- Good communication amongst entities
- 24/7 Coverage from a Qualified Provider
- Good Mid-Levels
- Excellent Facilities
- Outstanding Staff
- Good Specialist Relationships
- Good lab

WEAKNESSES:

- Awareness of Services
- Child Care Outside of Hospital Benefits
- Behavioral Health Transfer Process
- Evenings/Weekend Hours at the Clinic
- Funding/Reimbursement
- Hospice
- Public Transportation for Healthcare
- Drug/Alcohol/Prescription Abuse
- Home Care
- Frequency of Visiting Specialists
- Adult Prevention/Wellness
- Long Term Care

Public Notice & Invitation

[VWV Research & Development, LLC]

Round #2 Community Health Needs Assessment – Kiowa County Memorial Hospital

Media Release: 01/26/2015

Over the next three months, Kiowa County Memorial Hospital will be updating the 2012 Kiowa County Community Health Needs Assessment (CHNA). (Note: This assessment update is a follow-up to meet final IRS regulations released on 01/02/2015, requiring all 501(c)(3) hospitals to conduct a community health needs assessment and adopt an implementation strategy at least once every three years).

The goal of this assessment update is to understand progress in addressing community needs cited in the 2012 report and to collect up-to-date community health care perceptions. To accomplish this work, a short online survey has been developed: <https://www.surveymonkey.com/s/KiowaCHNA>

“We hope that the community and health professionals will take advantage of this opportunity to provide input into the future of healthcare delivery,” comments Mary Sweet, CEO.

All community residents and business leaders are encouraged to complete the online 2015 CHNA survey and to attend the upcoming Town Hall dinner on March 11th from 5:30-7pm at Kiowa County Memorial Hospital. VVV Research & Development LLC, an independent research firm from Olathe, Kansas has been retained to conduct this countywide research.

If you have any questions about CHNA activities, please call 620-723-3341.



Community Health Needs Assessment

Community Town Hall Meeting

Kiowa County Memorial Hospital and
Kiowa County Public Health
will be sponsoring a
Town Hall Meeting on 03/11/15,
from 5:30-7pm.
at Kiowa County Memorial Hospital Cafeteria

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

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

Thank you in advance for your participation.



From: CEO

Date: February 2015

To: Community Leaders, Providers, Hospital Board and Staff

Subject: Community Health Needs Assessment

Round #2 Online Survey 2015

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

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

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

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

CHNA Round #2 due date for survey completion is Tuesday, February 24th. All responses are confidential. Thank you in advance for your time and support in participating with this important request.

Sincerely,
Mary Sweet
CEO

YOUR Logo

Date: Feb 13, 2015

Dear Community Member,

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

On Thursday, March 12th, you are invited to attend a Pawnee County Town Hall meeting. We have retained the services Vince Vandelaar of VVV Research and Development LLC. from Olathe, KS, to facilitate this meeting and prepare our report.

Your input is valuable, and will be incorporated into our final report. Please join us on THURS March 12th, from 11:30-1:00 p.m. at Glory Be. A light meal will be served starting at 11 a.m.

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

Sincerely,

Mary Sweet
CEO

Kiowa County Health Fair

Saturday, March 28, 2015

7 a.m.-11 a.m.

at the
Kiowa County School auxiliary gym
710 S. Main, Greensburg, KS

Basic blood work-\$25
PSA (for men) blood test-\$10
Fast for 12 hours prior to test

bone density and skin cancer screenings available by donation

*Breakfast will be provided by the Upward Strivers 4H club by donation

Any questions or to reserve a booth, please call:

Kiowa County Health Dept.

(620)723-2136



March 5K for MATCH

Run or Walk for Mentoring!

Sunday, March 29th @ 2:00pm

Greensburg Teen Center :: 211 E Garfield

\$20 per person OR \$20 per Mentor/Mentee pair!

**Help support Match: Mentor a Teen; Create Hope and
school-based Maverick MATCH**

Registration Name _____ Age _____

Address: _____ Phone Number _____

Shirt Size: Adult S M L XL Youth S M **Cost:** \$20 per person or \$20 for Mentor/Mentee Pair

The undersigned agrees and does hereby release from all liability and hold harmless the Greensburg Recreation Center and Youth for Christ and any of the employees representing or related to the Greensburg Recreation Center and Youth for Christ South Central Kansas. This liability release is for any and all liability for personal injuries including death or property losses including in connection with any activity or accommodation of the above mentioned businesses.

Sign: _____ Date: _____

Please return this form to Cinda Morhead at the Rec Center or Whitney Kregar at the Teen Center.

KIOWA COUNTY

Public Information Update

Sunday, February 8th - 14th, 2015

LIGHTHOUSE WORSHIP CENTER

Free Community Meal every Wednesday from January 28th - March 11th from 6 pm to 7pm. Lighthouse Worship at 804 W. Wisconsin, Greensburg.

ST. JOSEPH CATHOLIC CHURCH

Annual Enchilada Sale by St. Joseph Catholic Church in Greensburg. Please place orders by February 6th with Ellen Peters, 620-255-3636, Tracy Little, 620-474-1245, or any parishioner. The Enchiladas are \$15 per dozen and will be available for pick up on February 14th from 10 am to 3 pm at St. Joseph Catholic Church or (ask about our delivery service).

FIRST UNITED METHODIST CHURCH

Dave Ramey's Financial Peace University will be at Greensburg First United Methodist Church on Monday, February 9th at 7:00 pm. For more information call 620-723-3338

VALENTINES' DAY BRUNCH

Treat someone you love to a "Fancy" Valentine's Day breakfast.

Let us spoil you a bit by serving you a full breakfast: of Ham, Hash Brown Casserole, Croissant, Fresh fruit, non-alcoholic Mimosa's (Orange Juice & Sparkling Cider), and Coffee. We will even break out the fancy tablecloths and our fancy plates (that survived the tornado)!! Come and enjoy! Call Kari at 723-2288 for reservation's (required). Free Will Donation.

KIOWA COUNTY MEMORIAL HOSPITAL

The Kiowa County Memorial Hospital is partnering with the Kiowa County Health Department to update the 2012 Community Health Needs Assessment. (*Note:* This assessment update is a follow-up to meet final IRS regulations released on 01/02/2015, requiring all 501(c)(3) hospitals to conduct a Community Health Needs Assessment and adopt an implementation strategy at least once every three years). Your feedback and suggestions regarding community health delivery are very important to collect in order to complete the 2015 Community Health Needs

Assessment and implementation plan updates. To accomplish this work, a short online survey has been developed:

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

CHNA Round #2 due date for survey completion is Tuesday, February 24th. All responses are confidential. Thank you in advance for your time and support in participating with this important request.

KIOWA COUNTY HEALTH FAIR

The Health Fair is on Saturday, March 28, from 7a.m to 11 a.m. We will be set up at the Kiowa County School auxiliary gym located at 710 S. Main. More details on the attached flyer.

MARCH FOR MATCH 5K

Run or Walk for Mentoring!
Sunday, March 29th @ 2:00pm.
Greensburg Teen Center @ 211 E. Garfield. \$20 per person or \$20 per Mentor/Mentee pair!
Registration form is attached in Email.

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BURN WORKSHOP IN PRATT, KS ON FEBRUARY 25TH, 2015
Pheasants Forever and Quail Forever, in conjunction with the Kanas Prescribed Fire Council, USDA-Natural Resource

Conservation Service, Pratt County Conservation District, and K-State Research and Extension, is hosting a prescribed fire workshop focusing on reasons to burn CRP and rangeland, weather conditions for safe burning, and ways to reduce the risk of fire escapes. The workshop will be held at the Pratt County Fairgrounds 4-H Center on Wednesday, February 25th. Registration cost for the workshop is \$10 per person. This will be due the day of the workshop and will be payable by cash or check. Check in for the workshop will begin at 9:30 AM and presentations will start at 10:00 AM. The training will last approximately four hours, and lunch will be provided—courtesy of the Pratt County Conservation District, Pheasants Forever, and Quail Forever. Presentations will cover reasons to burn and prescribed burning’s effect on wildlife, safe weather in which to conduct a burn, a preview of 2015 fire season forecasts by the National Weather Service, burning equipment, regulations, liability issues, and more. The workshop will also offer participants a chance to discuss the best ways to burn their properties with trained burn planning professionals. To register or request more information, please contact Zac

Eddy with Pheasants Forever and Quail Forever or Mark Ploger with K-State Research and Extension. Zac can be reached at 620-338-7132 or zeddy@pheasantsforever.org. Mark can be reached at 620-672-6121 or mploger@ksu.edu. Please be sure to RSVP by February 20th, and let them know if you require any special accommodations. This will allow planners to prepare enough meals and ensure that handout materials are available for all attendees. The workshop will take place in the Pratt County Fairgrounds 4-H Center at 81 Lake Road, Pratt, Kansas.

USDA ACCEPTING APPLICATIONS FOR THE CONSERVATION STEWARDSHIP PROGRAM

U.S. Department of Agriculture's (USDA) Natural Resources Conservation Service (NRCS) will make available \$100 million this year through the Conservation Stewardship Program (CSP) and although applications are accepted all year, farmers, ranchers, and forest landowners should submit applications by February 27, 2015, to ensure they are considered for this year's funding.

CSP will also help broaden the impacts of NRCS Landscape Conservation Initiatives through a new pilot effort, which accelerates private lands conservation activities to address particular goals, such as creating habitat for at-risk species and conserving water. In Kansas, they include the Lesser Prairie-Chicken Initiative and the Ogallala Aquifer Initiative.

Applications should be submitted to local NRCS offices. As part of the CSP application process, applicants will work with NRCS field personnel to complete a resource inventory of their land, which will help determine the conservation performance for existing and new conservation activities. To be eligible for this year's enrollment, eligible landowners and operators in Kansas must have their applications submitted to NRCS by the February 27, 2015, closing date.

A CSP self-screening checklist is available to help producers determine if the program is suitable for their operation. The checklist highlights basic

information about CSP eligibility requirements, stewardship threshold requirements, stewardship threshold requirements, and payment types.

For the checklist and additional information, visit the CSP Web site <http://www.nrcs.usda.gov/wps/port al/nrcs/main/national/programs/financial/csp/> or visit your local USDA NRCS office. USDA is an equal opportunity provider and employer.

REGIONAL CONSERVATION PARTNERSHIP PROGRAM (RCPP) GRASSLAND INITIATIVE

Eric B. Banks, Natural Resources Conservation Service (NRCS) State Conservationist in Kansas announced the Kansas Grazing Lands Coalition, the Kansas Department of Wildlife, Parks and Tourism, and others will partner with NRCS for the new Regional Conservation Partnership Program (RCPP).

“This RCPP project will target at-risk bird species habitat on pastures and agricultural lands, enhance water and soil quality,

and improve plant productivity limited by undesirable invasive plant species,” said Banks. “The Flint Hills region of Kansas along with parts of Iowa, Missouri, and Nebraska are included in this project.”

According to Banks, the Regional Grassland Bird and Grazing Land Enhancement Initiative will receive funding through RCPP once partnership agreements have been finalized. With the funding, the KGLC, KDWPT, and partners will be able to create and implement management strategies that integrate habitat needs of grassland-dependent birds on grazing lands, maintain the tall grass prairie ecosystem, and enroll high quality grasslands into contracts.

For more information on Kansas RCPP projects, visit the Kansas NRCS Web site, www.ks.nrcs.usda.gov. To learn about technical and financial assistance available through conservation programs, visit www.nrcs.usda.gov/GetStarted or local USDA service center. For more on the 2014 Farm Bill, visit www.nrcs.usda.gov/FarmBill.

USDA is an equal opportunity provider and employer.

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KIOWA COUNTY HEALTH DEPARTMENT

The Kiowa County Health Department is always here to serve you. We can help you with a wide range of services and want to be sure that folks are staying healthy. If you will call for an appointment, we can then answer any questions that you may have. Please call 620-723-2136 or send an email at mitzi.hesser@kiowacountyks.org.

If you are new in the community or have not used our services before take a look at all the things we can offer. Whether you have children in the home or over 80 yrs. of age we want to see that everyone stays as healthy as possible. Services Provided:

- **Immunization** for children and adults
 - (Private Pay, Insurance billed or Vaccine For Children (who have no insurance))
- **Family Planning Service** (Sliding Scale Fee) completely confidential for all ages
- **Physicals**

- Kan-Be-Healthy (for Medical cards)
- Preschool and School entrance
- Well child checks (lead screening, office calls)
- **Foot Care**
- **Screenings**
 - Blood Pressure, Hemoglobin, Blood Sugar, Urinalysis, Pregnancy Test, Ear Wash
- **Allergy Injections**
- **Health Promotion Information and Talks**
- **WIC** (Women, Infant and Children Nutritional Program)
- **Safe Haven Place** (Newborn Infant Protection Act)

KIOWA COUNTY TEEN CENTER

The Teen Center is open to any student between 5th and 12th grades.

Hours of operation are: Monday & Friday 3:15 to 5:00pm Saturday Nights 9-midnight (High School students only) If you have questions or would like more information please call: 620-723-2727.

KIOWA COUNTY GOVERNMENT

All Office's Hours: Monday – Friday 8 a.m. to 5 pm

County website:

kiowacountyks.org Check out the website for the latest information including County Commission meeting minutes.

- **County Offices** are located at 211 E. Florida Ave., Greensburg.
- **County Commission** meetings are held on the 1st and 3rd Mondays and the last working day of the month at 9:00 a.m. in the Commissioner's Meeting Room located in the Northeast corner of the lower level of the courthouse.
- **Health Department** hours are Mon-Thurs 8-5 and Fri 8-12. Please call for an appointment.
- **South Landfill** hours are Tuesday – Saturday 8 a.m. to 4:30 p.m. except holidays. The landfill charges \$10.00 per cubic yard for C/D and \$20.00 per cubic yard for concrete.
- **Recycling** There are recycle areas set up in Mullinville, Greensburg (block N of recycle center, and Haviland (behind Haviland Care Center). County is still accepting household hazardous waste by appointment.

HAVILAND CITY GOVERNMENT

- **City Hall hours** are Monday – Friday 10 a.m. to 2 p.m.

- **City Hall phone number** is 620-862-5317. Please call if you have questions.
- **City Council** meetings are held the second Monday of the month at 7 p.m. in the community room.
- http://www.havilandks.com/City_Information.html

GREENSBURG CITY GOVERNMENT

- **City Hall Hours** are 9 a.m. to 5 p.m. Monday - Friday.
- **City Hall Phone Number** is 620-723-2751.
- **City website** is www.greensburgks.org check out the website for city services, photos, news and the latest information.
- **City Council** meetings are held the 1st and 3rd Mondays of the month. The meetings begin at 6:00 p.m. and will be held at City Hall.
- **Greensburg Planning Commission** meetings are held on Wednesdays on a fluctuating schedule at 6:30 p.m. Check with Christy at 620-723-4109 for the next date.
- **Greensburg Trash Routes** are running for the entire city on Wednesdays. Trash must be out by 8 a.m. or it will not be picked up.
- **Greensburg Recycle Routes** are running for East/West streets on the 2nd Wednesday of the

month and for North/South streets on the 3rd Wednesday of the month.

MULLINVILLE CITY GOVERNMENT

- **City Hall hours** are Monday – Friday 7 to 8 a.m., Saturday 9 a.m. to 12 p.m., Thursday 8 a.m. to 12 pm.
- **City Hall phone number** is 620-548-2539. Please call if you have questions.
- **City Council** meetings are held the third Monday of the month at 7 p.m. in City hall.
- <http://www.mullinvilleks.com/city-of-mullinville.html>

CHURCH SERVICES

Greensburg

- Bethel Mennonite Church is located 3 miles south and 1 mile west of the highway 183/54 interchange. Sunday school begins at 10 a.m. Morning worship starts at 11 a.m. Evening worship begins at 7 p.m. Contact Mark Dirks at 620-723-2941 for more information.
- Bible Baptist Church is meeting at 605 S. Elm Dr, Greensburg. Sunday school begins at 10 a.m. and Church begins at 11 a.m. For more information, Wesley Carlton at 620-723-2834.
- Faith Tabernacle is located at 611 W. Illinois St., Greensburg. Service begins at 10 a.m. Call Rev. Willard Olinger at 723-2745 for more details.
- First Baptist Church is located at 200 W. Kansas, Greensburg. Sunday school is at 9:30 and Church begins at 10:30am. For more information, contact Pastor Franklin Ruff at 723-2747.
- First United Methodist Church is located at 600 W. Lincoln, Greensburg. Worship at 9:30 a.m. and Sunday School at 10:45 a.m. Contact Pastor Mayhew at 620-723-3338 with questions or concerns.
- Greensburg Christian Church is located at 1210 S. Main St. Service begins at 10:30 a.m. Call the Church office at 723-2507 weekday mornings for more information.
- Greensburg Mennonite Church is located at 310 West Pennsylvania. Sunday school begins at 9:30, age's nursery to senior adults. Worship begins at 10:30 a.m. Call Pastor Jeff Blackburn at 620-723-2620 for more information.

- Lighthouse Worship Center is located at 804 W. Wisconsin, Greensburg. Sunday school for all ages starts at 9:30 a.m. Worship and Children's Church starts at 10:45 a.m. Wednesday Food for thought/Free Community Meal from 6 pm – 7pm. Call Pastor Jeff Miller at 620-723-3028 for more information.
- Peace Lutheran Church is located at 321 S. Walnut, Greensburg. Worship begins at 11 a.m. For more information, call Pastor Merlyn Lohkre, 620-298-2762.
- St. Joseph Catholic Church is located at 820 S. Walnut, Greensburg. Services are held on the first and third weekends of the month at 5:30 p.m. on Saturday evening. On the 2nd, 4th, and 5th weekends, Mass is at 11:00 a.m. on Sunday mornings. Contact Ellen Peters, Parish Life Coordinator at 620-255-3636 with questions and concerns.

Haviland:

<http://www.havilandks.com/Churches.html>

- Haviland United Methodist Church is located at 322 N Main St., Haviland. Sunday school is at 9:30am. Sunday morning fellowship is at 10:30 am with

worship services following at 11:00am. Youth group meets at the Kiowa County Senior Center on Sunday evenings at 7:00pm. For more information, call Pastor Mark Fillmore at 620-862-5267 or 620-862-5470.

- Friends Church is located at 205 N. Kingman, Haviland. Sunday School and Adult classes 9:30am; Congregational Worship 10:30am; Wednesday 5:30pm Community meal; 6pm Faith Weaver Friends (K-5), Jr. High Youth Group; 8pm High School Youth Group

Mullinville:

<http://www.mullinvilleks.com/Churches.html>

- Mullinville United Methodist Church is located at 220 N. Locust. Sunday school begins at 10:30 a.m., Church Service at 9:30 a.m. A Fellowship Meal is held every 2nd Sunday. Youth Group is Sunday evening at the Kiowa County Senior Center starting at 7:00 p.m. Call Pastor Mark Fillmore at 620-548-2585 or 620-862-5470 for more information.
- Mullinville Church of Christ is located at 100 S Maple. Sunday Bible Classes for all ages begin at 10:00am and Worship is at 11:00. Wednesday evening

Bible Classes for all ages is at 7:00pm. Minister, Russell Scott, can be reached at 620-253-2629 for more information. Visit their website for online services or more information:
<http://www.mullinvillecoc.com>

Wellsford:

- Wellsford Community Church is located at 202 N Jones. Service begins at 11 a.m.

NON-PROFIT ORGANIZATION MEETINGS

- **Kiowa County Chamber of Commerce** meetings are held the second Tuesday of the month at 7:00pm in the meeting room at the Incubator building. If you have any questions, please email Dea Corns at:
dea@corns.us
For more info:
<http://www.kiowacountychamber.com/>
- The **Kiowa County Council on Aging** meets on the fourth Tuesday of each month at 3:30 pm at the Senior Center (431 S. Main) in Greensburg. The November and December 2014 meetings will be combined on December 16th at 3:30.
- The **Kiowa County Historical Society** meetings are held on

the 4th Thursdays of the month at 6:30 p.m. at the Kiowa County Commons Conference Room.

- The **Kiowa County Kansas Media Center Foundation** board meetings are held on the 1st Thursday at 6:30 p.m. at the Media Center located in the Commons Building. Please contact Matt Christenson at 723-1117 for more information.
<http://www.kwksmedia.org/>
- The **Kiowa County Library** board meets the first Monday of each month at 4:30 p.m. in the Kiowa County Commons conference room. If the first Monday is a county holiday, the meeting will be held the following Tuesday.
- The **Iroquois Center for Human Development** board meets the third Tuesday of each month at 6 pm in their office (610 E. Grant). Please call 723-2272 for more information.
- The **Kiowa County Local Emergency Planning Committee's** next meeting will be Tuesday, February 2, 2015 at the Community Center at 5:30pm. Everyone is welcome and encouraged to attend. Please call 620-723-4154 for more information.

- The **Greensburg Rotary** meets each Wednesday at 12:00pm at the Kiowa County Memorial hospital basement conference room. If you have questions or would like more information on these meetings please call 620-723-2761
- The **Kiowa County Housing Authority** meets the 4th Tuesday of the month at 5:30pm at the prairie Pointe Meeting Room.

Detail Primary Research Primary Service Area

[VVV Research & Development, LLC]

Community Health Needs Assessment Round #2 Community Feedback

Methodology

A community feedback survey was created on behalf of the CHNA client to gather PSA stakeholder feedback on health perception and progress in addressing previous CHNA community needs. All community residents were encouraged to take the survey online by entering the following address into personal browser: <https://www.surveymonkey.com/s/Kiowa15>. In addition, an invite letter was sent to all PSA stakeholders (i.e. Schools, County, City, Clergy, Public Health Leaders).

Below is a summary of public response:

CHNA Round #2 Feedback 2015 - NORMS			
9. For reporting purposes, are you involved in or are you a	NW Alliance (Opt C 8) %	Kiowa Co N=110	Trend
Board Member -Local	1.7%	4.9%	
Business / Merchant	2.3%	2.5%	
Case Manager / Discharge	0.2%	1.2%	
Civic Club / Chamber	1.9%	1.2%	
Charitable Foundation	1.3%	1.9%	
Clergy / Congregational Leader	0.4%	1.2%	
College / University	0.5%	2.5%	
Consumer Advocate	0.4%	1.2%	
Consumers of Health Care	3.5%	5.6%	
Dentist	0.0%	0.6%	
Economic Development	0.6%	2.5%	
Education Official / Teacher	3.5%	7.4%	
Elected Official - City / County	0.8%	2.5%	
EMS / Emergency	0.4%	1.2%	
Farmer / Rancher	1.7%	4.9%	
Health Department	0.6%	1.9%	
Housing / Builder	0.2%	11.7%	
Insurance	0.4%	1.9%	
Labor	0.6%	0.6%	
Law Enforcement	0.2%	1.2%	
Low Income / Free Clinics	0.3%	1.9%	
Mental Health	0.8%	0.0%	
Nursing	3.7%	5.6%	
Other Health Professional	1.9%	9.3%	
Parent / Caregiver	5.5%	3.1%	
Pharmacy	0.2%	11.7%	
Physician (MD / DO)	0.0%	0.6%	
Physician Clinic	0.6%	0.6%	
Press (Paper, TV, Radio)	0.1%	3.7%	
Senior Care / Nursing Home	0.4%	0.0%	
Veteran	0.9%	0.0%	
Welfare / Social Service	0.0%	0.6%	
Other (Please note below)	1.4%	1.2%	
TOTAL	100.0%	0.0%	

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Let Your Voice Be Heard!

This Community Health Needs Assessment is being conducted in partnership with other area health providers. Feedback from this survey will identify current health issues in our community. Participation is voluntary and all answers will be kept confidential.

All CHNA Round #2 feedback is due by Tuesday, February 24, 2015. Thank you for your participation.

Part I: Introduction

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

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

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

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

	Not a problem anymore	Somewhat of a Problem	Major Problem
Adult Prevention / Wellness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Awareness of Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Behavioral Health Transfer Process	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drug / Alcohol / Prescription Abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Frequency of Visiting Specialists	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Funding / Reimbursement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Home Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increased # of Credentialed Medicaid Doctors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long Term Care Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public Transportation for healthcare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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

- | | |
|--|---|
| <input type="checkbox"/> Adult Prevention / Wellness | <input type="checkbox"/> Funding / Reimbursement |
| <input type="checkbox"/> Awareness of Services | <input type="checkbox"/> Home Care |
| <input type="checkbox"/> Behavioral Health Transfer Process | <input type="checkbox"/> Increased # of Credentialed Medicaid Doctors |
| <input type="checkbox"/> Drug / Alcohol / Prescription Abuse | <input type="checkbox"/> Long Term Care Services |
| <input type="checkbox"/> Frequency of Visiting Specialists | <input type="checkbox"/> Public Transportation for healthcare |

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

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

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

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

7. Over the past two years, did you or do you know someone who received health care services outside of our community?

- Yes
- No
- Don't know

If yes, please specify the healthcare services received

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

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

Other (please specify)

Demographics

9. For reporting purposes, are you involved in or are you a (Check all that apply)

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

Other (please specify)

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* 10. What is your home zip code?

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

Again, thank you for your participation.

**CHNA Report
contact :**



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