



# 2024 Community Healthcare Needs Survey

Thank you for helping your community and Asher Community Health Center (ACHC) by participating in the 2024 Community Healthcare Needs Survey. ~ The survey can be taken online instead at:

[https://www.surveymonkey.com/r/ACHC\\_2024\\_Survey](https://www.surveymonkey.com/r/ACHC_2024_Survey)

In order to best understand and keep track of local healthcare needs and care-gaps, it's very important to know YOUR perspective. As you fill out the survey, please keep in mind that it isn't only about Asher Community Health Center – it's about identifying ANY healthcare gaps you experience living here. It's important to know what is needed so ACHC can plan for the Clinic's future, our partner agencies can design useful community projects, and all of us know what projects to support. Some of the survey questions are specific to ACHC, but most of the questions want you to consider our County as a whole.

As this 2024 Survey was being prepared, our region was still in the grip of a large-scale emergency event, the **Lone Rock wildfire**. Along with typical survey questions about frontier-rural community healthcare needs during *normal* times, we also want to know your thoughts about community healthcare needs during *emergency* events – what was good, and what was lacking. What about **local emergency Ambulance** services? Are they a critical healthcare resource? Give voice to your observations.

**This survey is meant to be a tool for change.** Your name won't be connected to your comments so please speak freely. A variety of public service agencies, including ACHC, will use this published survey data to improve everyone's quality of life in our Wheeler County region.

What are your comments about healthcare resources such as **local Ambulance**? Or healthcare services during Emergencies, such as our recent **Lone Rock Wildfire**?

- What's good? What healthcare services do we need to keep in place during *future* local emergencies?
- What's lacking? How can we collectively work to correct healthcare gaps during unexpected emergency events?

*For these comments, use the back of this paper (or any extra paper) and include with survey pages.*

Please either mail the paper survey back or drop off at an Asher Clinic location (Fossil-Mitchell-Spray) during open hours **NO LATER THAN August 15, 2024.** ACHC questions? Call: 541-763-2725.

Questions on survey? Email Joan Field at: [JoanF@AsherHealth.net](mailto:JoanF@AsherHealth.net).

Thank you again for taking the time to participate in this important outreach survey.

**DEADLINE to return survey: Thurs., August 15, 2024**

If preferred, this survey can be taken **online** at:

[https://www.surveymonkey.com/r/ACHC\\_2024\\_Survey](https://www.surveymonkey.com/r/ACHC_2024_Survey)



**1. Which of the following do you feel presents a serious concern to our local Wheeler County communities today? (Mark all that apply)**

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

**2. If you could ONLY PICK ONE, which do you feel is the MOST IMPORTANT health concern we have in our local communities?**

**Please select ONE ONLY:**

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

**3. In your opinion, what things would improve **our community's access to health care**?**

- ☐ More local Primary Care Providers
- ☐ Expanded Clinic hours
- ☐ Lower costs
- ☐ More in-home services
- ☐ Wider variety of Tele-Health
- ☐ No improvement needed
- ☐ Other: \_\_\_\_\_

**4. Regarding future County-wide health care events, what topics would you like to see?**

- ☐ Health, diet, exercise; healthy lifestyle
- ☐ Preventative healthcare
- ☐ Chronic conditions education/screening
- ☐ Hearing or Eyesight/eyeglasses screenings
- ☐ Mental health, depression, suicide awareness
- ☐ Better health education for our youth/students, and their parents
- ☐ Drug /alcohol abuse, tobacco cessation
- ☐ None
- ☐ Other: \_\_\_\_\_

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

- ☐ High Blood Pressure
- ☐ Diabetes
- ☐ Depression or Anxiety
- ☐ Mental health concerns
- ☐ Lung or breathing issues
- ☐ Chronic pain (such as Arthritis or other pain-related conditions)
- ☐ Cancer
- ☐ Other life-threatening conditions: \_\_\_\_\_
- ☐ N/A

**Turn page over for next question...**

## MEDICAL CARE:

6. If you or someone in your household needed medical care in the last 6 months, **did they get all the medical care they needed?**

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

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

- ☐ Costs too much  
☐ Couldn't get a timely appointment at ACHC  
☐ Couldn't get transportation to ACHC  
☐ Referral to a specialist was denied  
☐ N/A  
☐ Other: \_\_\_\_\_

## DENTAL CARE:

8. If you or someone in your household needed dental care in the last 6 months, and did you or they **get all the dental care needed?**

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

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

- ☐ Costs too much  
☐ Couldn't get a timely appointment at ACHC  
☐ Couldn't get transportation to ACHC  
☐ Referral to a specialist was denied  
☐ N/A  
☐ Other: \_\_\_\_\_

## MEDICATIONS:

10. If you or someone in your household needed prescription medications in the last 6 months, did they **get all the medications they needed?**

- ☐ Yes  
☐ No  
☐ N/A

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

- ☐ Costs too much  
☐ Couldn't get prescription delivered to home  
☐ Couldn't pick up the prescription  
☐ PCP refused to refill the prescription  
☐ N/A  
☐ Other: \_\_\_\_\_

## MENTAL HEALTH:

12. In the last 6 months, was there a time when you or someone in your household needed treatment for **mental health or substance use?**

- ☐ Yes  
☐ No  
☐ N/A

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

- ☐ Costs too much  
☐ Couldn't get an appt with local provider  
☐ No transportation to the local provider; couldn't get there  
☐ No transportation to the outside provider; couldn't get there  
☐ The person didn't believe they needed help  
☐ N/A  
☐ Other: \_\_\_\_\_

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14. Do you, or does someone you know, struggle with **prescription pain medication or opioid medication use**?

- ☐ Yes  
☐ No

15. Have you been bothered by **having little interest or pleasure in doing things, or feeling down, depressed, or hopeless** recently? How often?

- ☐ Several days  
☐ More than half the time  
☐ Every day  
☐ Only occasionally  
☐ Only once or twice  
☐ N/A

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

- ☐ Yes  
☐ No

17. Have you sought counseling or help from a medical professional?

- ☐ Yes  
☐ No

If not, why not? \_\_\_\_\_

### SOCIAL / ENVIRONMENTAL:

18. How hard is it for you (or your household) to pay for the very basics like food, housing, heating, medical care and medications?

- ☐ Not hard at all  
☐ Somewhat hard  
☐ Very hard  
☐ N/A

19. Do you have a **secure place to live**?

- ☐ Yes  
☐ No

Comment: \_\_\_\_\_

20. In the past 12 months, has **lack of transportation** kept you (or your household) from getting to medical appointments, meetings, work or from getting things you've needed?

- ☐ Yes, it has kept me from critical things like medical care, getting my medications, work, or accessing food  
☐ Yes, it has kept me from things that were not critical (meetings, etc)  
☐ No  
☐ N/A

21. In the last 12 months, did you cut the size of meals or skip meals because there **wasn't enough money for food**? Or have you been **worried that your food would run out before you got money to buy more**? How often?

- ☐ Daily  
☐ Often  
☐ Sometimes  
☐ Rarely  
☐ Once  
☐ N/A

22. Is your primary Medical Provider **associated with Asher CHC**?

- ☐ Yes  
☐ No

If No, why not? \_\_\_\_\_

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

- ☐ Needed care that I can't get locally
- ☐ Small community; concern with privacy
- ☐ Had established care elsewhere before moving here; continuing that
- ☐ Do not have confidence with local providers
- ☐ N/A
- ☐ Other: \_\_\_\_\_

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

- ☐ Gender
- ☐ Race or ethnicity; cultural barrier
- ☐ Income level
- ☐ Educational level
- ☐ Sexual orientation
- ☐ Age
- ☐ Disability
- ☐ Reside in remote rural location
- ☐ Other: \_\_\_\_\_
- ☐ N/A – no limitations or does not apply to me

**25.** In your own personal effort to have better health, **what are things that would help you on that journey** that you don't have now?

☐ This would help me: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*(if you need more room, use additional page)*

☐ I am not currently trying to better my health

**26.** Do you feel **isolated or cut off** living in our rural area? Do you wish you had more opportunities to be around other people for social activities?

- ☐ Yes                      ☐ No

**27.** Are **"in-home"** healthcare and medical services important to you? If yes, why?

- ☐ Yes                      ☐ No

Why? \_\_\_\_\_  
 \_\_\_\_\_

**28.** Asher Community Health Center observes a Sliding Fee Scale Program for patients who qualify.

The nominal fee for a MEDICAL visit is \$20 – do you think this is affordable?

- ☐ Yes                      ☐ No

**29.** The nominal fee for a DENTAL visit is \$30 – do you think this is affordable?

- ☐ Yes                      ☐ No

**Emergency Events** *(Use extra paper for answers)*

**30.** What are your comments on local **Ambulance** services? Are they a critical resource? What about emergency resources during big events? (**Lone Rock Wildfire**)

- What's good? What healthcare services do we need to keep during future local emergencies?
- What's lacking? How can we collectively work to correct healthcare gaps during an emergency event? *(Use extra paper for answers)*

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*This completes the survey!*

***You do not need to provide your name.***

However, if you would like someone from ACHC to contact you about your needs, please provide:

**31.** Name: \_\_\_\_\_

How to contact me: \_\_\_\_\_  
 \_\_\_\_\_



**Thank you!** Please return completed survey by **August 15, 2024** at one of the ACHC Clinics by dropping off during open hours, or by postal mail.