

Rawlins County

Public Health Department



Public Health
Prevent. Promote. Protect.

2020 - 2021
COMMUNITY HEALTH NEEDS ASSESSMENT
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Greater Northwest Kansas
COMMUNITY FOUNDATION

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This CHNA was a collaborative effort by the following organizations:



RAWLINS COUNTY
Dental Clinic



Atwood
Second
Century

Rawlins County Community Health Needs Assessment 2020 - 2021

Table of Contents

I. EXECUTIVE SUMMARY	1
CHNA PURPOSE	1
CHNA SURVEY	1
LEGAL REQUIREMENTS	2
CHNA TIMELINE	3
II. METHODOLOGY	3
PROCESS OVERVIEW	3
OBJECTIVES	4
TASK FORCE	5
III. CHNA SURVEY RESULTS	6
DEMOGRAPHICS	6
COMMUNITY FEEDBACK RESULTS	10
HEALTH CARE SYSTEMS RESULTS	13
BEHAVIORAL / MENTAL HEALTH CARE SERVICES	17
PROGRESS ON 2018 CHNA PRIORITIES	18
IV. PRIORITIZATION OF NEEDS	19
TASK FORCE	19
PUBLIC FORUM	22
V. COMMUNITY HEALTH STATUS	26
HEALTH STATISTICS FOR RAWLINS	26
VI. LOCAL COUNTY HEALTH RESOURCES	28
MEDICAL HEALTH CARE	28
MENTAL / BEHAVIOR HEALTH CARE / ADDICTION SERVICES	30
OTHER HEALTH CARE RESOURCES	30
VII. REFERENCE OF RESOURCES	33
VIII. CHNA CONSULTANT INFORMATION	34
IX. SUPPORTING DOCUMENTATION TO FOLLOW	34
A. CHNA SURVEY TOOL	
B. MARKETING THE SURVEY	
C. EXECUTIVE SUMMARY	
D. MARKETING THE PUBLIC FORUM	
E. POWERPOINT PRESENTATION – PUBLIC FORUM PRESENTATION	
F. POWERPOINT PRESENTATION – STRATEGIC DOING PRESENTATION	
G. PUBLIC FORUM PUBLICITY	

I. Executive Summary

Community Health is not just the physical health of individuals living within a geographic area, it is the intersection of physical health, mental health, economic health, and social support that impacts the ability for individuals, businesses, and the community at-large to thrive. When needs are not being met in any one of these areas, the “health” of the community is at jeopardy.

Thomas G. Bognanno, President and CEO of Community Health Charities, said it best: “Community health impacts everything—educational achievement, safety and crime, people’s ability to work and be financially healthy, life expectancy, happiness and more. Health impacts every other facet of life, from a child’s ability to learn to an adult’s ability to work, so health is critical for education and financial well-being.”¹

CHNA Purpose

Communities need to complete a Community Health Needs Assessment (CHNA), a process to develop a strategic plan to improve community health and wellness, every 3 to 5 years. Federal and State Governments, Community Hospitals and Health Centers, Safety-Net Clinics, Community Dental Clinics, County Health Departments, and Community Development Organizations complete a CHNA for planning, funding, and achieving positive outcomes.

Beyond the legal requirement, health leaders in Rawlins County believe that by conducting a CHNA periodically, a snapshot of the overall health of the community can be captured and reviewed by the public with the goal of addressing the unmet needs. These needs may be appropriate for the health department, dental clinic, or health center to address, but some findings may require being addressed by other community groups or organizations. This process can be a conduit to collaboration. The survey data helps facilitate community discussions to remove barriers which keep individuals and the entire community from thriving.

There is no one definition of “community health need.” This is up to the interpretation of the stakeholders engaged in the process. To assess the health needs of the community, a broad representation of the community must be surveyed to identify the significant health needs of the population. Health requirements and potential resources are then identified. Resources can include organizations, facilities, and programs in the community, including those of the hospital facility, health clinic, dental clinic, or public health department, potentially available to address those health needs.

CHNA Survey

The most recent CHNA prior to this assessment was conducted in 2018. In that survey, 8.9% of the adult population of Rawlins County responded to the survey with the top concerns being:

- Access to Care / Transportation,
- Drug and Alcohol Abuse,
- Elder Care Services,
- Exercise / Physical Activity / Obesity,
- High Risk of Heart Disease / Stroke, and
- Mental Health / Depression / Suicide.

Over the past three years, health care providers and leaders in Rawlins County have created programs and projects to address these concerns. This current CHNA continues to build on past priorities by providing the data to support additional programs and changes to continue improvement of the overall health of Rawlins County.

The 2020-2021 CHNA was conducted by a third-party consultant, Carol Sloper of Greater Northwest Kansas Community Foundation of Bird City, Kansas. Mrs. Sloper has a bachelor’s in Journalism and Mathematics Education and has experience with large and small hospital operations in both urban and rural settings. Her

impartial view of the data helped facilitate robust discussion of the information gleaned from the survey and process.

The 2020-21 survey tool (*see Supporting Document A*) resulted in a 17.0% response rate (334 out of 1,969 people ages 18 and over). As is typical with surveys, some participants did not complete the entire questionnaire. By the end of the survey, there were 276 respondents (14%) remaining through the last question. The overall responses provided adequate data for analysis of community needs.

The primary community concerns which emerged from the 2020-21 CHNA include:

- Economic development: attracting and retaining youth / businesses (decreased population, shop at home);
- Cost of health care / living (including high taxes and health care insurance);
- Health care providers / staff (retain, recruit, consistency, availability, quality);
- Mental health services (local availability and cost, including substance abuse);
- Elder care services (keeping elderly home longer, options for assisted living, financial resources);
- Childcare services (availability, quality, and affordability); and
- Confidentiality / trust (communication).

Two of these top concerns were also deemed priorities in the 2018 CHNA:

- Mental health services (local availability and cost, including substance abuse), and
- Elder care services.

Rawlins County health department, hospital, health clinic, and dental clinic leaders acknowledge that they may not be able to have a direct hand in change for some of these top concerns, but they most certainly will have implementation strategies to address issues such as health care providers, local access to medical specialists, and confidentiality / trust (health care communication). Other organizations and businesses in the community will need to collaborate to address the economic concerns, childcare services, and the cost of living. An alliance already exists and is actively working to address Mental Health Services at a regional level.

Legal Requirements

As stated previously, federal and state policies require a community health needs assessment (CHNA) to be completed every three to five years for community hospitals and health centers, safety-net clinics, community dental clinics, and county health departments and to adopt an implementation strategy to meet the community health needs identified through the process. To conduct a CHNA, the following steps should be completed:

1. **Define the community it serves.** (*Rawlins County and surrounding area citizens who obtain health care in Rawlins County.*)
2. **Assess the health needs of that community.** (*Survey tool widely distributed, not to just a single faction, including multilingual survey tool.*)
3. In assessing the community's health needs, **solicit and consider input received from persons who represent the broad interests of that community**, including those with special knowledge of or expertise in public health. (*Establish an assessment committee of stakeholders to review the community health needs data that represents a broad spectrum of the population served. Solicit input from public at a community forum.*)
4. **Document the CHNA in a written report** that is provided for use by the health care leadership teams and governing boards of health care organizations. (*Based on this CHNA written report, health care boards or administration should develop and implement actionable strategic initiatives to address results.*)
5. **Make the CHNA report widely available to the public.** (*Publish online, publish highlight of results in local newspaper, have printed copies available at patient facing locations throughout the health complex.*)

CHNA Timeline

The CHNA process began with a kick-off meeting by the designated task force on July 21, 2020. Fourteen of the 24 people identified to comprise the task force attended the meeting. The purpose of the gathering was to discuss the scope, purpose, and requirements of the CHNA; determine the scope / content of the survey instrument; discuss community stakeholders in the process; and establish a timeline for completion.

The primary milestones included:

- Survey questions were determined by a subcommittee of the task force in August / September 2020.
- An online and paper survey was created in September 2020 by the consultant.
- The survey was distributed from October 1 – November 15, 2020. During that time, all task force members participated in marketing the survey via social media, newspaper ads / press releases, radio announcements, business cards, flyers, and word of mouth (**see examples in Supporting Document B**).
- Data was compiled by the consultant in November through December 2020.
- The draft Executive Summary of data was provided via email to the task force in January 2021.
- Twelve of the 24 task force members met February 17, 2021, to discuss survey findings and establish proposed priorities.
- In February and March 2021, the Public Forum was advertised broadly throughout Rawlins County in the newspaper, social media, flyers, direct emails to specific stakeholders, and personal invitations (**see examples in Supporting Document C**).
- The final Executive Summary (**see Supporting Document D**) was shared by task force members at the Public Forum. The meeting was held March 25, 2021, at the Columbian Club in Atwood and was co-hosted by ACE Foundation (a community foundation focused on Rawlins County). Approximately 40 people attended the meeting, both in person and via Zoom.
- The final CHNA Report was completed in June 2021.
- In June 2021, the CHNA was published on Rawlins County Health Center and Rawlins County Dental Clinic websites for public access and announced in the local newspaper and on social media.
- In July 2021 and beyond, each health care organization's leadership team and/or board will establish and implement a community health improvement plan.

II. Methodology

Process Overview

The process was developed and implemented utilizing the contracted professional services of Greater Northwest Kansas Community Foundation (GNWKCF). The CHNA Task Force, comprised of health leaders in Rawlins County, came together to develop the survey questionnaire. Past CHNA survey tools were reviewed, and some questions from prior surveys included to maintain continuity in reporting trends. Emerging concerns were considered, and questions added for a deeper dive for needs such as mental health issues which surface repeatedly in CHNA survey results.

It is important to note that in 2020, the world was amid the novel coronavirus (SARS-CoV-2) pandemic. Due to the contagious nature of this virus, extra caution was required when conducting public projects. In past years, the hospital was able to conduct the survey in conjunction with a public health fair, attend community meetings to discuss the CHNA, and visit one-on-one with people to increase distribution of the survey. Distribution of the survey in 2020 required non-personal methods of delivery. Likewise, the Public Forum was less attended than in past years, even with the option of joining through web-conferencing.

The CHNA survey was conducted October 1 – November 15, 2020. The target audience was Rawlins County citizens ages 18 and above (1,969 persons²). Based on best practices for selecting a sample size for a statistically valid survey with (+/-) 5% confidence level, a sample size of 322 (16%) at the minimum was the target result.

Every effort was made to reach the following demographics to ensure the survey adequately represented each faction of the population: Atwood – 67%, McDonald – 13%, Herndon – 10%, Ludell – 4%, and 6% - other non-incorporated areas; elderly persons 65 and older – 35.7%; minorities – 8.6%; poverty level - 12.9%; and living at or below 200% Federal Poverty Level (FPL) – 32.3%.

The primary survey was conducted through an online link in both Spanish and English. Printed copies in both languages were available and distributed throughout the county. The CHNA assessment consisted of 31 questions that focused on four main areas.

Survey was conducted from October 1-November 15, 2020

<ul style="list-style-type: none"> • Survey with 31 questions <ul style="list-style-type: none"> • Community Concerns / Opinions • Delivery of Health Care Services / Barriers • Behavior / Mental Health Care Services • Demographics • Administered by Third Party (GNWKCF) <p style="color: red; font-style: italic; margin-top: 10px;">Due to Covid-19 pandemic, Health System staff members did NOT meet with public groups to discuss the survey as would have been the case in normal years.</p>	<ul style="list-style-type: none"> • Widely distributed: <ul style="list-style-type: none"> • Online Link (Formstack) • Business Cards at Key Businesses • Published in Newspaper (articles & ads) • Radio Ads • Shared on Social Media • Shared on Hospital / Dental Clinic Website • Reminders Given at Points of Contact • Notices Posted Throughout County
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After the survey ended, data was compiled by the consultant and shared with the task force for review. The group performed a data review and determined initial priorities, noted trends, and discussed interesting results.

A public forum was then held to review the survey findings and provide an opportunity for citizens to have input on the findings, ask questions, and prioritize community health needs. At the end of the public forum, citizens were encouraged to sign up to serve on committees to further explore the main priorities through a Strategic Doing Process with a third-party facilitator, Betty Johnson of Betty Johnson & Associates of Lawrence, Kansas.

The findings and results of these efforts are documented in this Rawlins County CHNA Report, Section III – CHNA Survey Results.

The final step is the creation of an implementation strategy plans by Rawlins County Public Health Department, Rawlins County Health Center, and Rawlins County Dental Clinic leadership teams to be adopted by the respective boards. This final phase is being completed outside the scope of this document and is available for public review upon request. The leadership teams will use criteria such as urgency, severity, feasibility, disparities, or community established priorities to determine the needs in which they will formally address.

Objectives

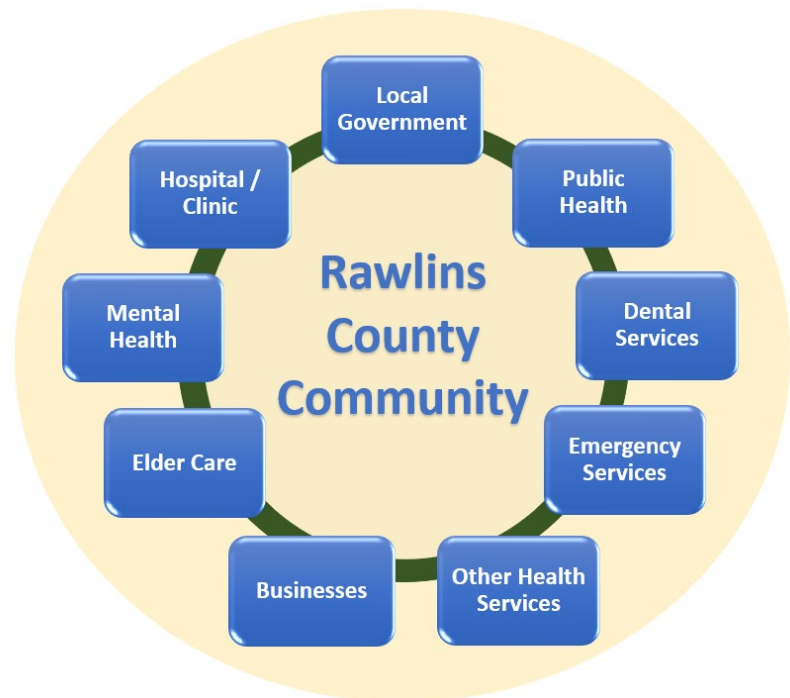
The objectives of this assessment include:

- **Identify priorities** by gathering data from our community (**SURVEY**),
- **Analyze indicators** based on the data gathered (**TASK FORCE**),
- **Review and discuss findings** with stakeholders and the community to determine and rank priorities (**PUBLIC FORUM**), and
- **Create a Community Health Improvement Plan** to address those priorities (**HOSPITAL, HEALTH CARE CLINIC, DENTAL CLINIC, and COUNTY LEADERSHIP**).

Task Force

The CHNA Task Force, comprised of health leaders in Rawlins County, included the following representation:

- Rawlins County Health Department (RCHD):
 - *Karla Heble, BSN, RN, County Health Administrator / Health Officer*
- Rawlins County Dental Clinic (RCDC):
 - *Deb Pochop, CEO, and Diahonia Olson, Administrative Manager*
- Rawlins County Health Center (RCHC) Interim CEO / Administrator:
 - *Andy Flemer, Centura (2021)*
 - *Ron Robinson, MD, Centura (2020)*
- Centura:
 - *Josh Neff, Vice President of Integration*
- RCHC Providers:
 - *Travis Daise, MD and Tamara Robbins, MD*
- RCHC Director of Nursing:
 - *Kim Sramek, RN*
- RCHC – Rawlins Clinic Operations Director:
 - *Jennifer Hurst, LPN II*
- RCHC Foundation / Communication Director:
 - *Suzanna Koel*
- RCHC Quality Assurance:
 - *Christy Pemberton, RN*
- Rawlins County Emergency Medical Services:
 - *Darla Jarmer, Director*
- LiveWell Northwest Kansas:
 - *Travis Rickford, Executive Director*
- Northwest Kansas Home Health:
 - *Celeste Hays, RN, Director*
- Northwest Kansas Hospice:
 - *Sandy Kuhlman, RN*
- Atwood Good Samaritan Society:
 - *Jenna Tande, RN, Director of Nursing / Administrator*
- High Plains Mental Health:
 - *Kaley Conner*



- Developmental Services of Northwest Kansas:
 - *Roger Prideaux*
- Vision Services
 - *Dr. Sam Funk and Dr. Jordan Hagler*
- Pharmacy
 - *James Hampton*
- Chiropractic Services
 - *Dr. April Green*
- Rawlins County
 - *Rachel Finley, Clerk*
- City of Herndon
 - *Kelsey Wahrman*
- City of McDonald:
 - *Eileen Porbusky*
- ACE Foundation:
 - *Scott Chvatal, Travis Rickford*
- Business Community
 - *Chris Sramek and Joe Vyzourek*
- Church/Religious Organizations:
 - *Abby Caseman, United Methodist Church*

III. CHNA Survey Results

Demographics

The more closely the response demographics match the actual Census demographics, the more representative the results are likely to be of the population. Overall, when reviewing the demographic data of the Rawlins County CHNA, there are many similarities between those people responding to the survey and the actual population of Rawlins County with a few exceptions.

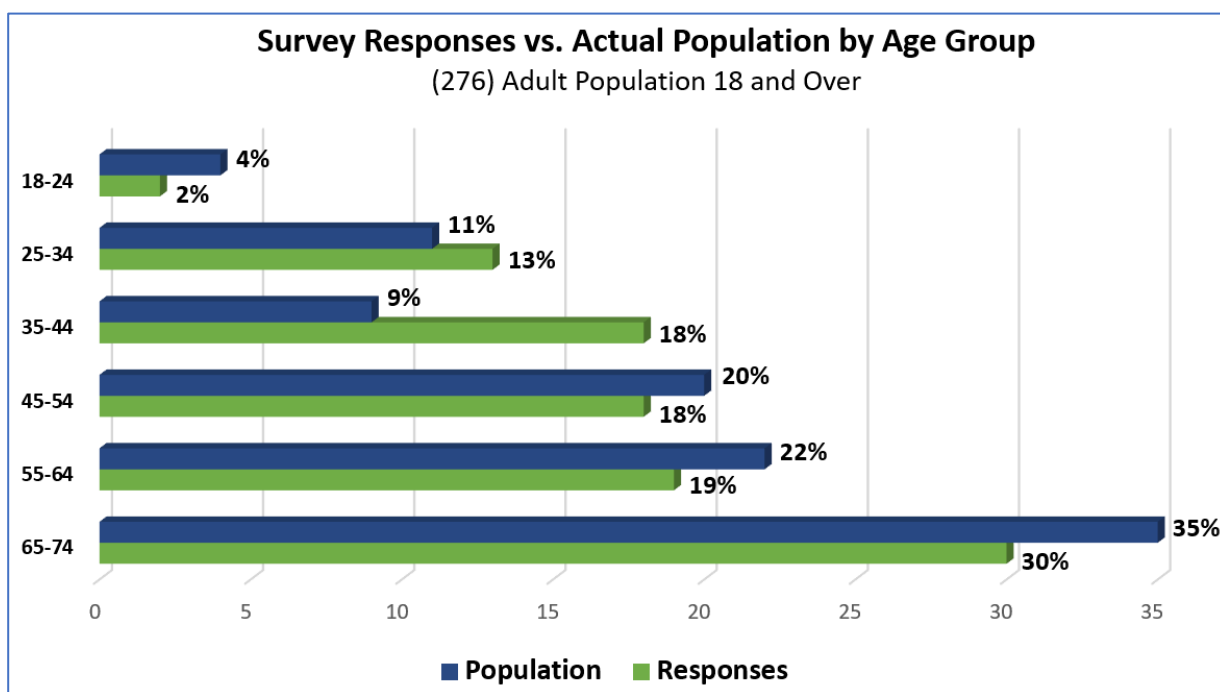
RESPONSE RATE: 17.0% (334 out of 1,969 people – Adults 18 and over).

The total response rate was slightly above the required 16% to indicate a statistically valid survey with (+-) 5% confidence. This was an improvement of 8.1% from the 2018 CHNA survey response rate.

AGE:

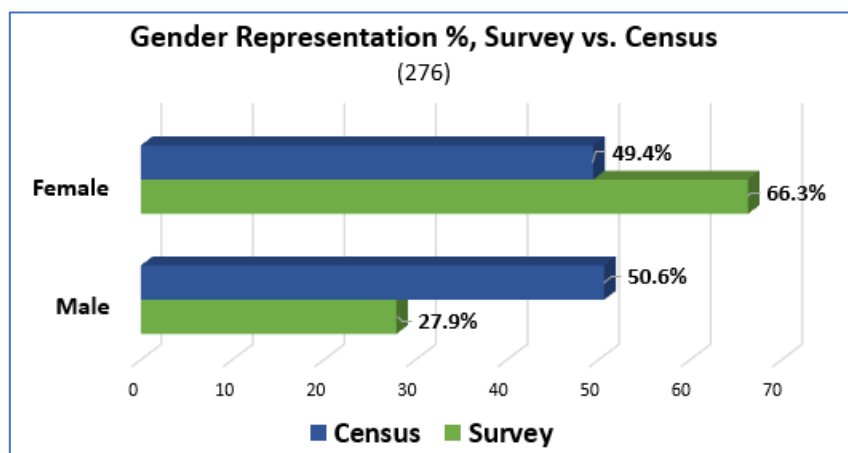
The population between 25 to 44 years old was over-represented.

All other age groups were slightly under-represented.



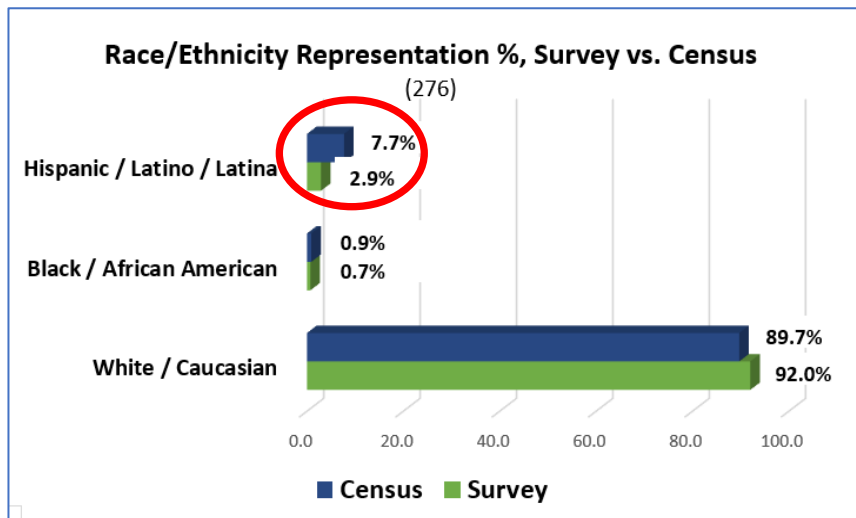
GENDER:

Despite efforts to obtain additional male participation, the female population remained over-represented.

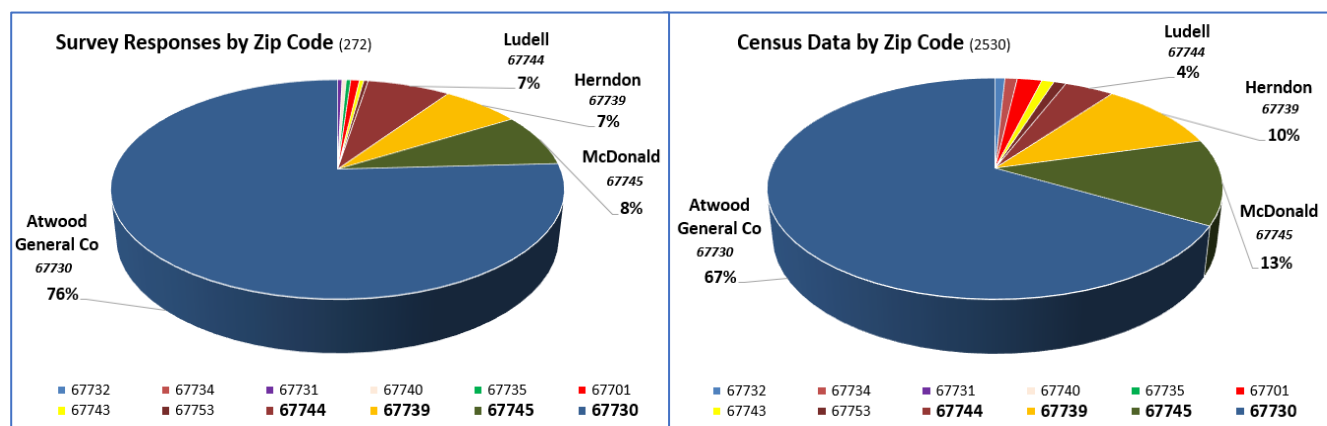


RACE / ETHNICITY:

The Hispanic population was under-represented. Both online and paper surveys were available in Spanish. Social media and other advertising were also created with Spanish versions. Direct outreach to the Hispanic community was attempted by task force members.



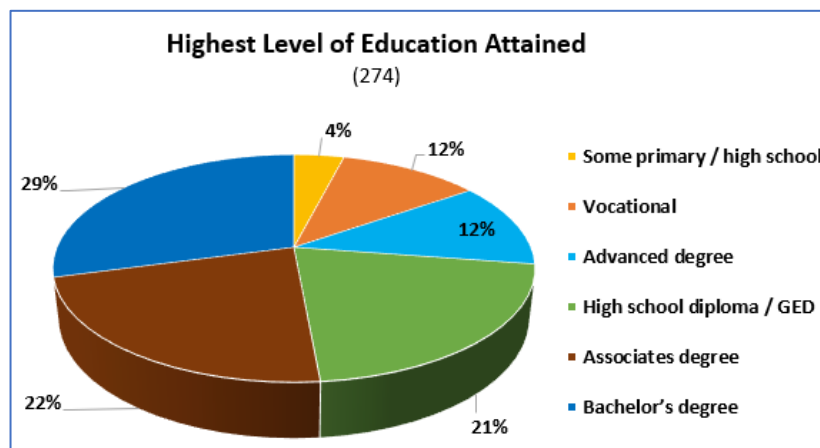
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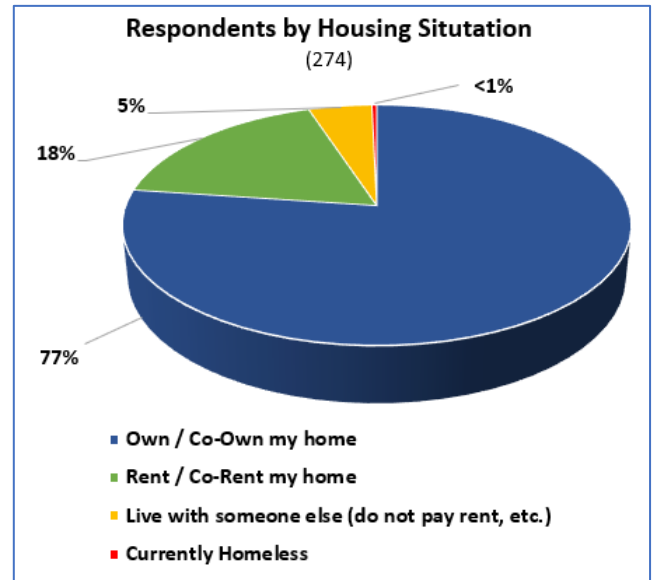
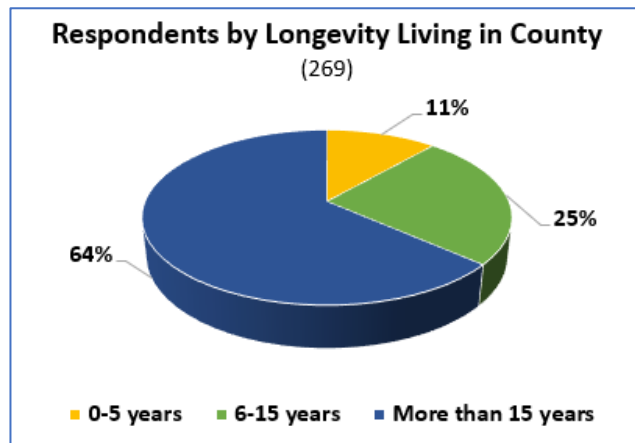
With regards to where people live within the county, respondents for those living in the largest city, Atwood, were slightly over-represented. The city of McDonald was slightly under-represented, while the cities of Ludell and Herndon were well represented.

EDUCATION LEVEL

Nearly 84% of survey participants have received education beyond high school with almost half of those having attained a bachelor's degree or above. This is higher than the actual Census data which indicates only 24.1% of people living in Rawlins County have an advanced degree.



HOUSING SITUATION

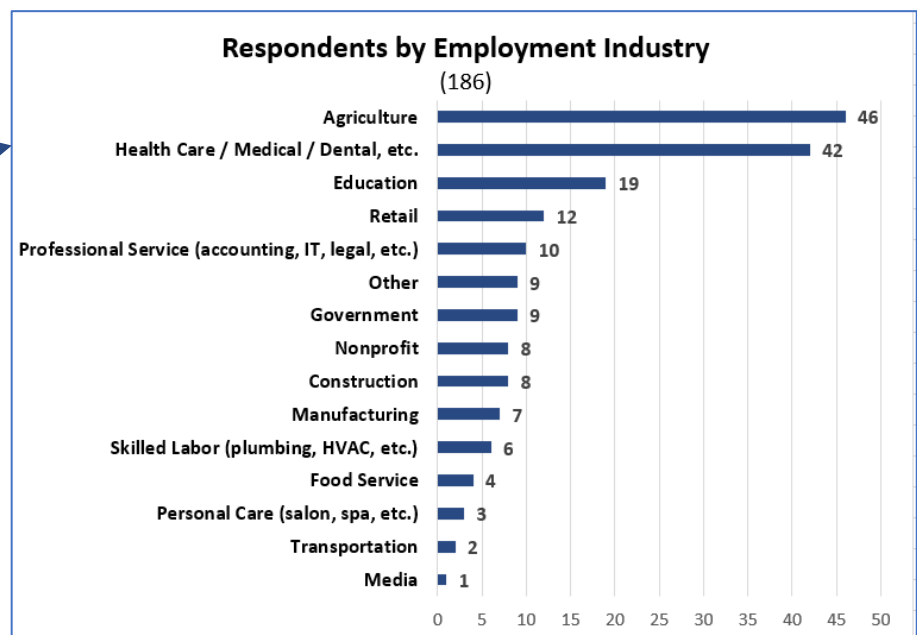
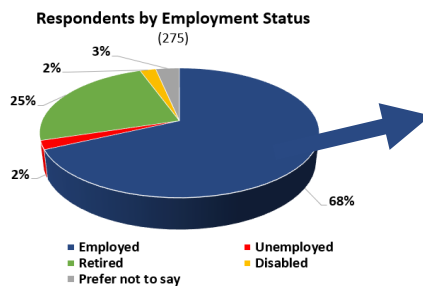


According to 2010 U.S. Census data, homeownership in Rawlins County is 75.9%. The response group very strongly represented this fact as 77% of participants indicated they own their own home.

Most persons answering the survey have lived in Rawlins County for more than 15 years. An impressive 11% of respondents indicate having just recently relocated to Rawlins County within the past five years. According to World Population Review⁵, this would be consistent with a small reversal of the trend for a previously declining population. Rawlins County has encountered growth rates of 1% or more since 2017.

EMPLOYMENT STATUS

The survey provided good representation of unemployed vs. employed persons in the county. The unemployment rate in Rawlins County at the time of the survey was 2.2%, and 2.0% of unemployed persons answered the survey.



INCOME:

The Federal Poverty Level (FPL) is an economic measure that is used to decide whether the income level of an individual qualifies them for certain federal and state benefits and programs. Generally families living **at or below 200% FPL** are considered to be vulnerable families in need of assistance. Regarding survey data, **30.3%** of responses fall into this **low income / vulnerable population**.

Some families living at or below 300% FPL are still eligible for certain financial assistance programs including the Affordable Health Care Act.

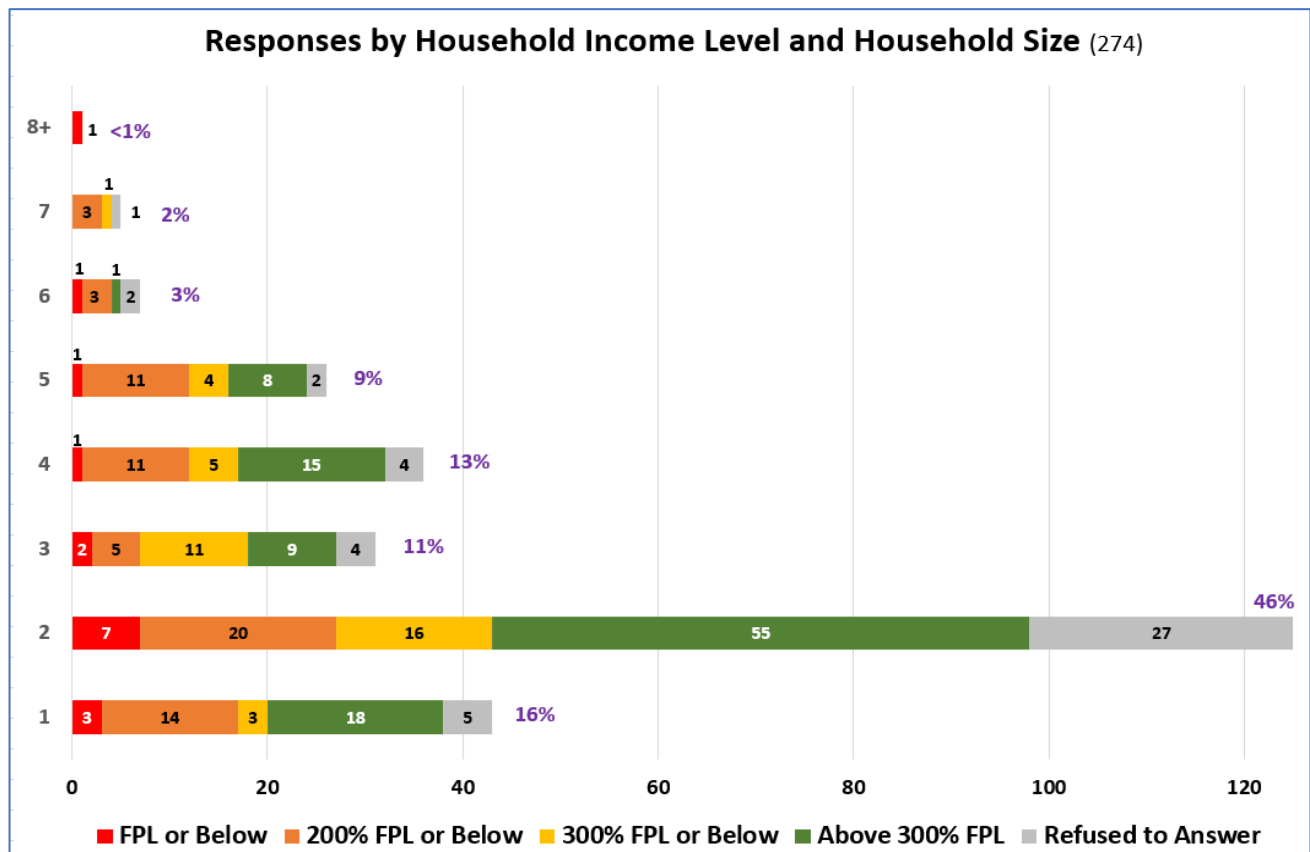
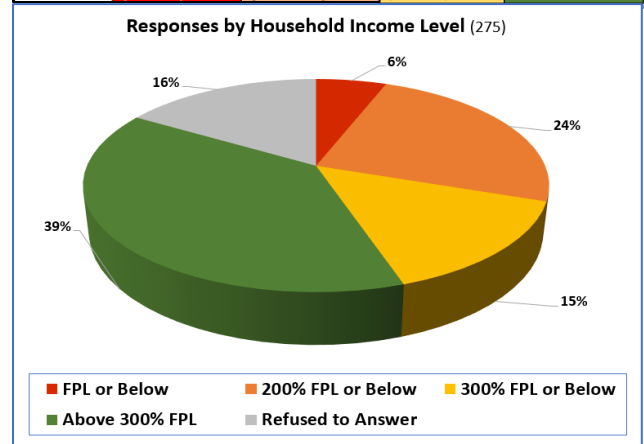
According to the 2010 U.S. Census, 12.9% of the Rawlins County population lives at or below FPL. Those living at or below poverty were under-represented with just 5.8% total responses.

However, 30.3% answered that they live at or below 200% FPL. According to Kansas Health Matters data, 32.3% of Rawlins County residents live below 200% FPL indicating the survey responses for those 200% or below FPL closely mirrors the actual population.

For homes with only one person in the household, 40% of respondents are living at or below 200% of FPL.

The average number of people per household in Rawlins County per Census data is 2.1 persons. The average number of people per household for those that responded to the survey is 2.69 persons, and 44% of this demographic live above 300% FPL.

Size of Household	100% FPL	200% FPL	300% FPL	> 300% FPL
1	\$ 12,760.00	\$ 25,520.00	\$ 38,280.00	Above
2	\$ 17,240.00	\$ 34,480.00	\$ 51,720.00	Above
3	\$ 21,720.00	\$ 43,440.00	\$ 65,160.00	Above
4	\$ 26,200.00	\$ 52,400.00	\$ 78,600.00	Above
5	\$ 30,680.00	\$ 61,360.00	\$ 92,040.00	Above
6	\$ 35,160.00	\$ 70,320.00	\$ 105,480.00	Above
7	\$ 39,640.00	\$ 79,280.00	\$ 118,920.00	Above
8+	\$ 44,120.00	\$ 88,240.00	\$ 132,360.00	Above

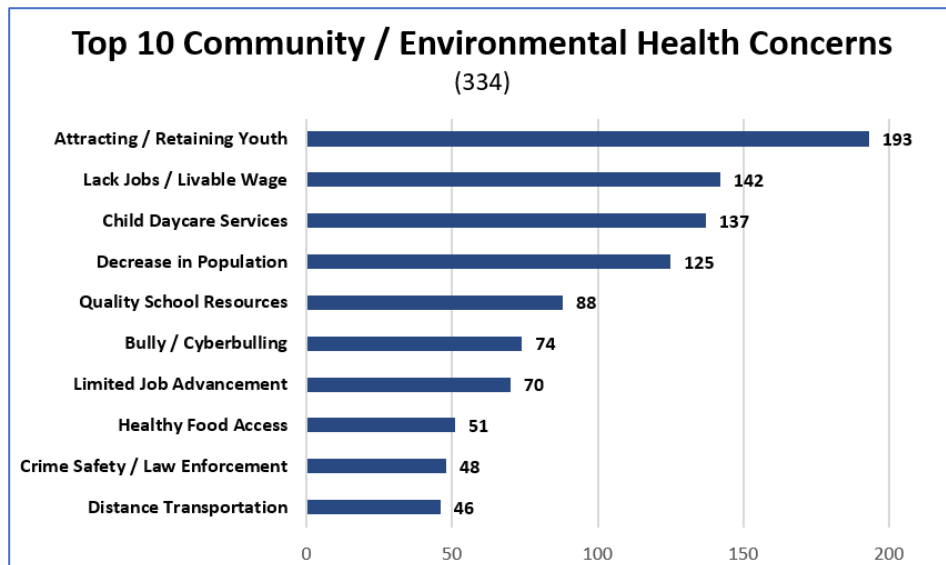


Community Feedback Results

COMMUNITY ASSETS AND CONCERNS

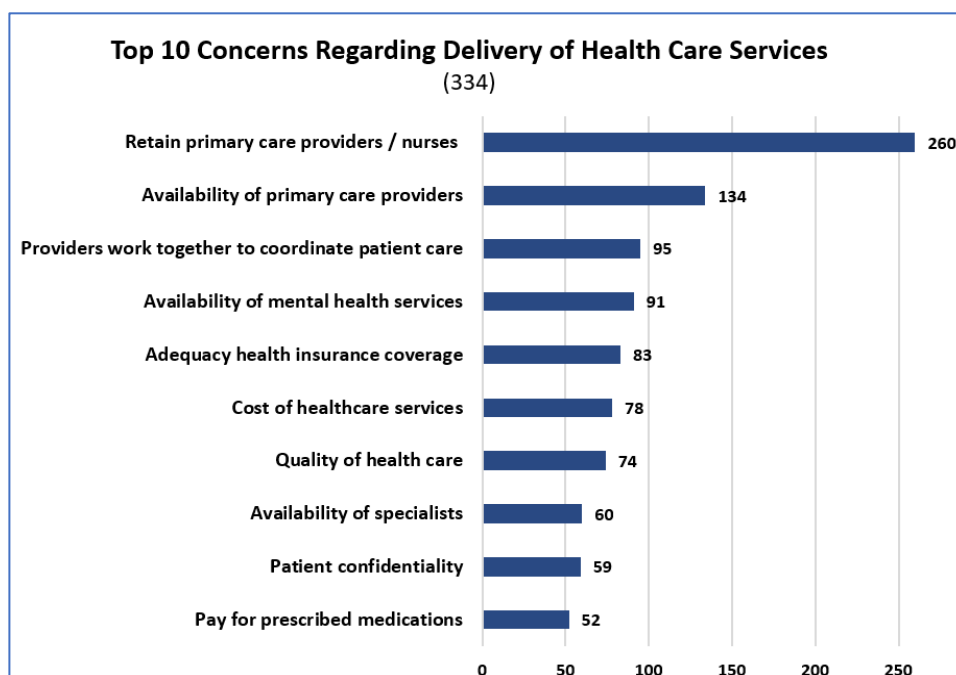
1. Considering QUALITY-OF-LIFE, the biggest concerns are:

- Attracting / Retaining Youth
- Lack of Jobs / Livable Wages
- Lack of Childcare / Daycare Services
- Decrease in Population
- Quality School Resources



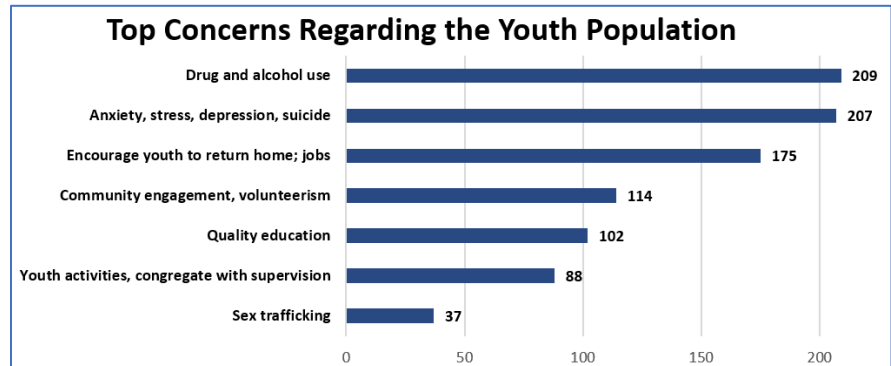
2. Considering HEALTH CARE DELIVERY, the biggest concerns are:

- Retaining Primary Care **Providers** and Medical Staff (**BY ALMOST DOUBLE!**)
- Availability of **Primary Care Providers**
- **Providers** Collaborating to Coordinate Patient Care
- Availability of Mental Health Services
- Adequacy of Health Insurance / Cost of Health Care Services

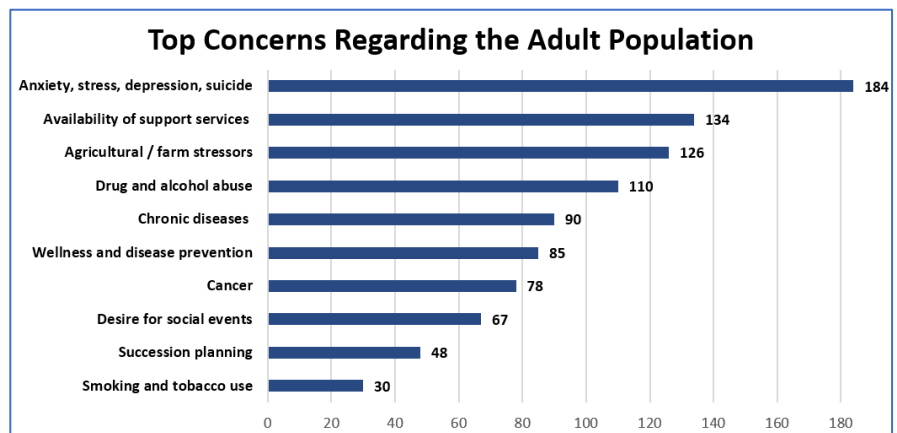


3. Top concerns based on all age group of the population mostly centered around mental health and cost of living.

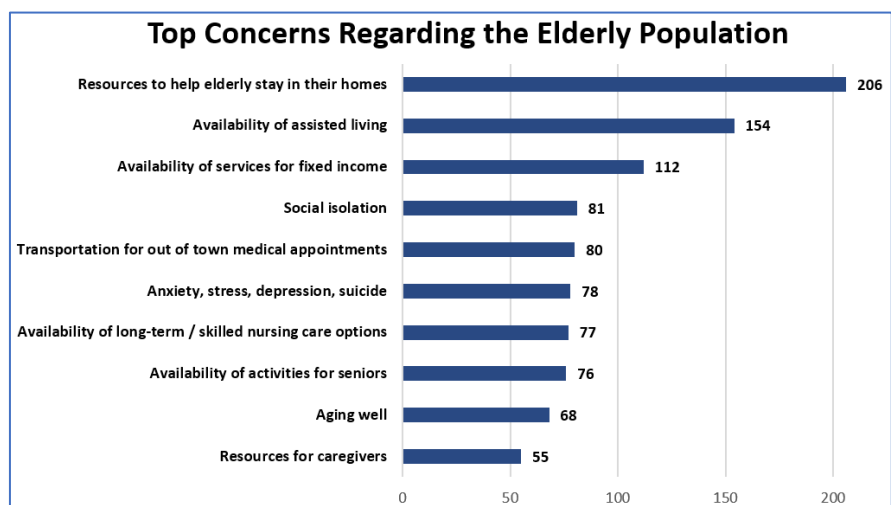
- **Youth Population:**
drug and alcohol use,
mental health
(anxiety, stress,
depression, suicide),
and encouraging
youth to return home /
retain youth



- **Adult Population:**
mental health
(anxiety, stress,
depression, suicide),
availability of support
services (fiscal,
health, behavioral),
and agricultural / farm
stressors



- **Elderly Population:**
resources to help
elderly stay at home,
availability of assisted
living, and availability
of services for those
on a fixed income



LARGEST CHALLENGE:

The **top concerns** expressed across multiple questions (community or delivery of health care) included (in no particular order):

- Attracting and Retaining Youth / Businesses; Decrease in Population; Shop at Home
- Childcare Services
- Confidentiality / Trust
- Cost of Health Care / Living; Including High Taxes and Health Insurance
- **Elder Care Services**
- Health Care Providers / Staff (Retain, Recruit, Consistency, Availability, Quality)
- **Mental Health Services** (Local Availability and Cost); Including Substance Abuse

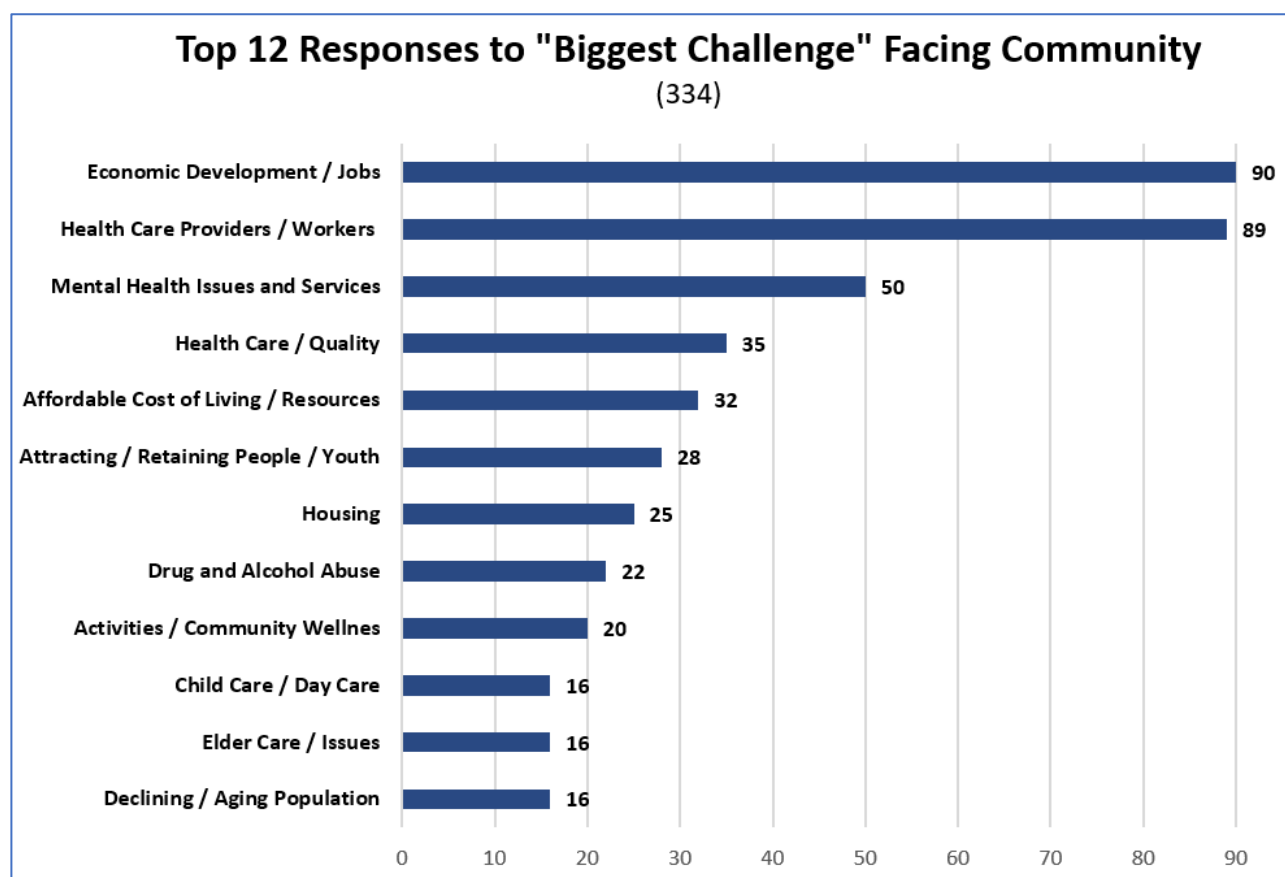
Two of these concerns have been a **top concern** expressed in the 2018 CHNA survey as well:

- **Mental Health Services**
- **Elder Care Services**

By far, the two challenges that rose to the top as concerns with nearly double any other response included:

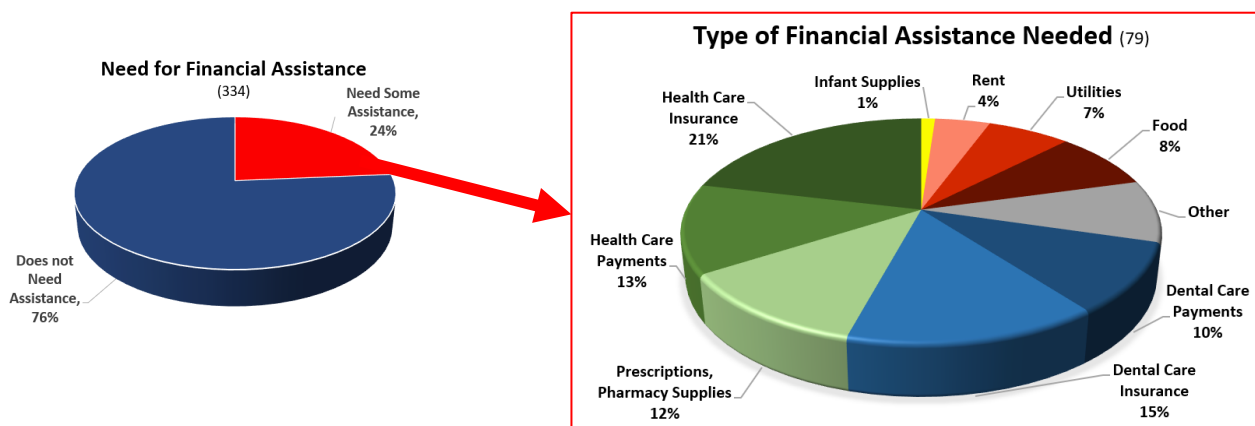
- Economic Development / Jobs, and
- Health Care Providers / Workers.

One of the most frequent comments made throughout the survey was to “support local businesses, people must **shop at home**.” In these comments, shopping at home included more than just groceries; it also referenced selecting local providers for health care services, pharmacy, vision care and dental care.



FINANCIAL ASSISTANCE

Rawlins County, Kansas has a 12.9% poverty rate according to 2010 U.S. Census data; and 32.3% of people live below 200% FPL according to Kansas Health Matters. In the survey, 24% indicated they required some sort of financial aid with living expenses which indicates that the survey slightly under-represented this vulnerable population. The chart below indicates the types of assistance required or received. Health Care (shades of green in the chart below) and Dental Care (shades of blue in the chart below) expenses comprised 71% of the type of financial assistance needed.



Health Care Systems Results

DELIVERY OF HEALTH CARE SERVICES

Regarding **Delivery of Health Care Services**, 61% of those responding to the survey seek general health care within Rawlins County. For the 39% of respondents that look outside of Rawlins County (to places such as St. Francis, Colby, or McCook Nebraska) for health care services, the top three reasons (61.2%) provided included:

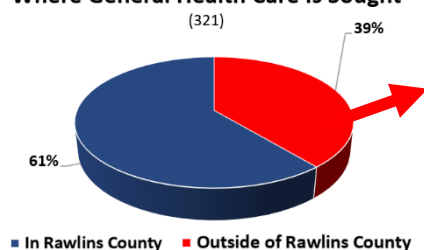
- Continuity of Care (unable to see the same provider or lack of coordination of care),
- Prefer a Medical Doctor (MD or DO), not a Physician's Assistant (PA), and
- Established with a provider out of county.

With nearly 40% of patients "shopping" for health care outside of the county, those individuals are likely to shop for other items in those other communities while there seeking health care. This could result in an additional financial strain on an already fragile local health care system.

Confidentiality or concerns of health information privacy comprised 14.1% of responses, and quality of care or consistency of care was included in 12.4% of all responses.

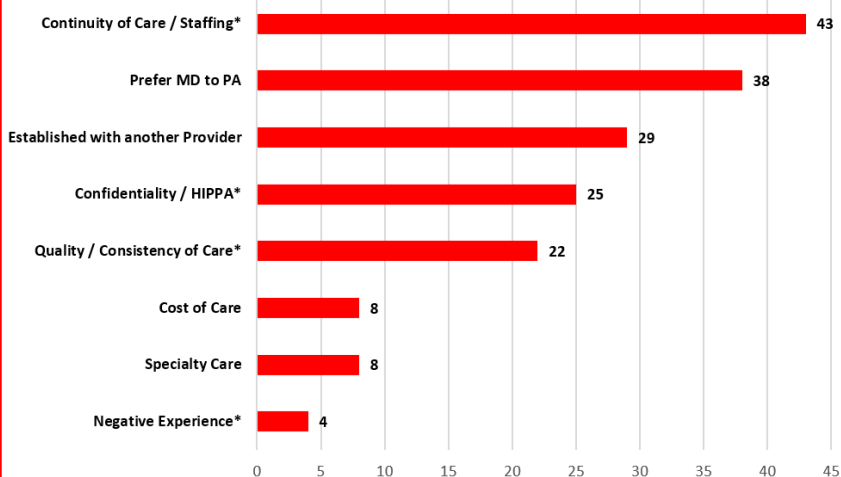
Cost was only a factor for 4.5% of answers. This was surprising given that 24% of the survey population indicated they required some financial assistance, and nearly half (46%) of those needing financial support specified they needed help with health care related expenses.

Where General Health Care Is Sought



* Category could be directly addressed by medical health care providers.

Top Reasons for Not Seeking Health Care Locally



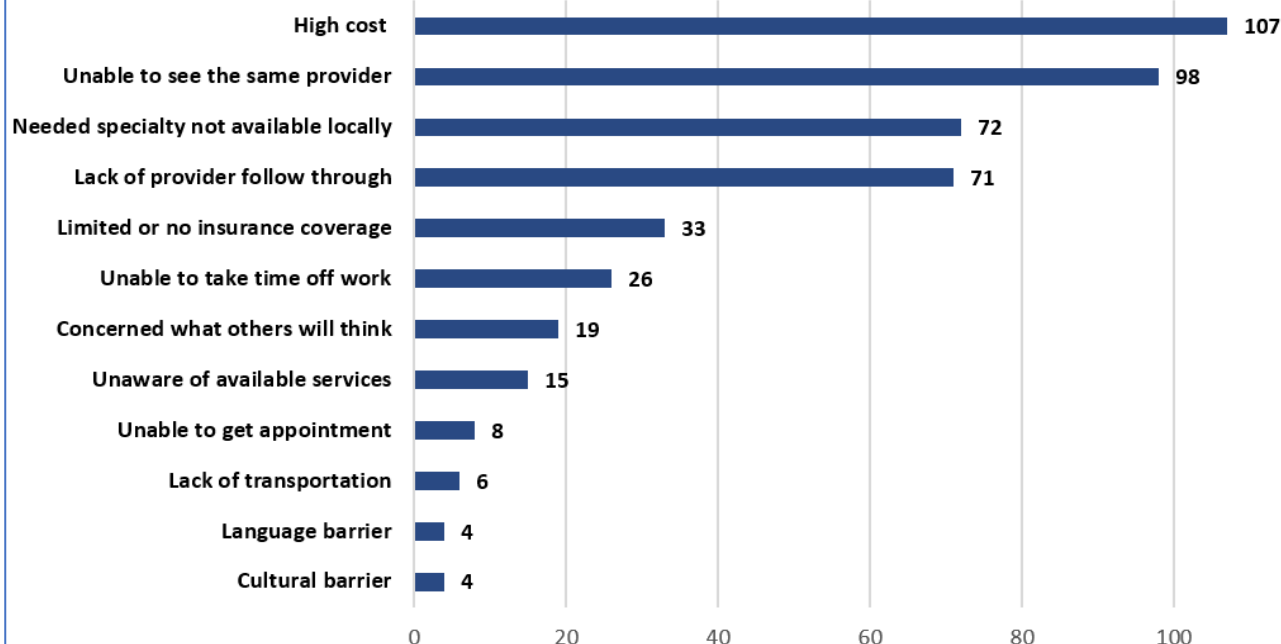
An overwhelming majority (70%) of respondents indicated there was some form of a **barrier that kept them or family members from receiving health care.**

Of those experiencing obstacles to obtain medical care, 32% indicated the **high cost of co-pays, prescriptions or other health care services** keep them from seeking medical care, followed closely by not being able to see the same provider each time (consistency / continuity of care).

While the overall answers show a small number of **language and cultural barrier** responses, they represent 36% of the minority population that participated making it noteworthy.

Barriers to Seeking Medical Care

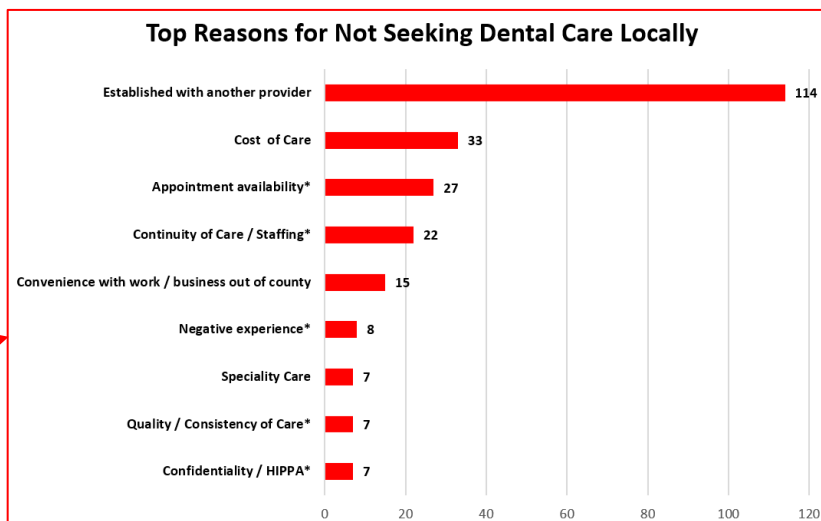
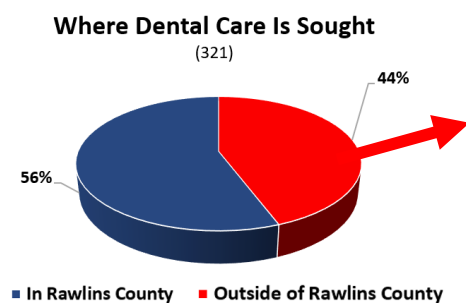
(321)



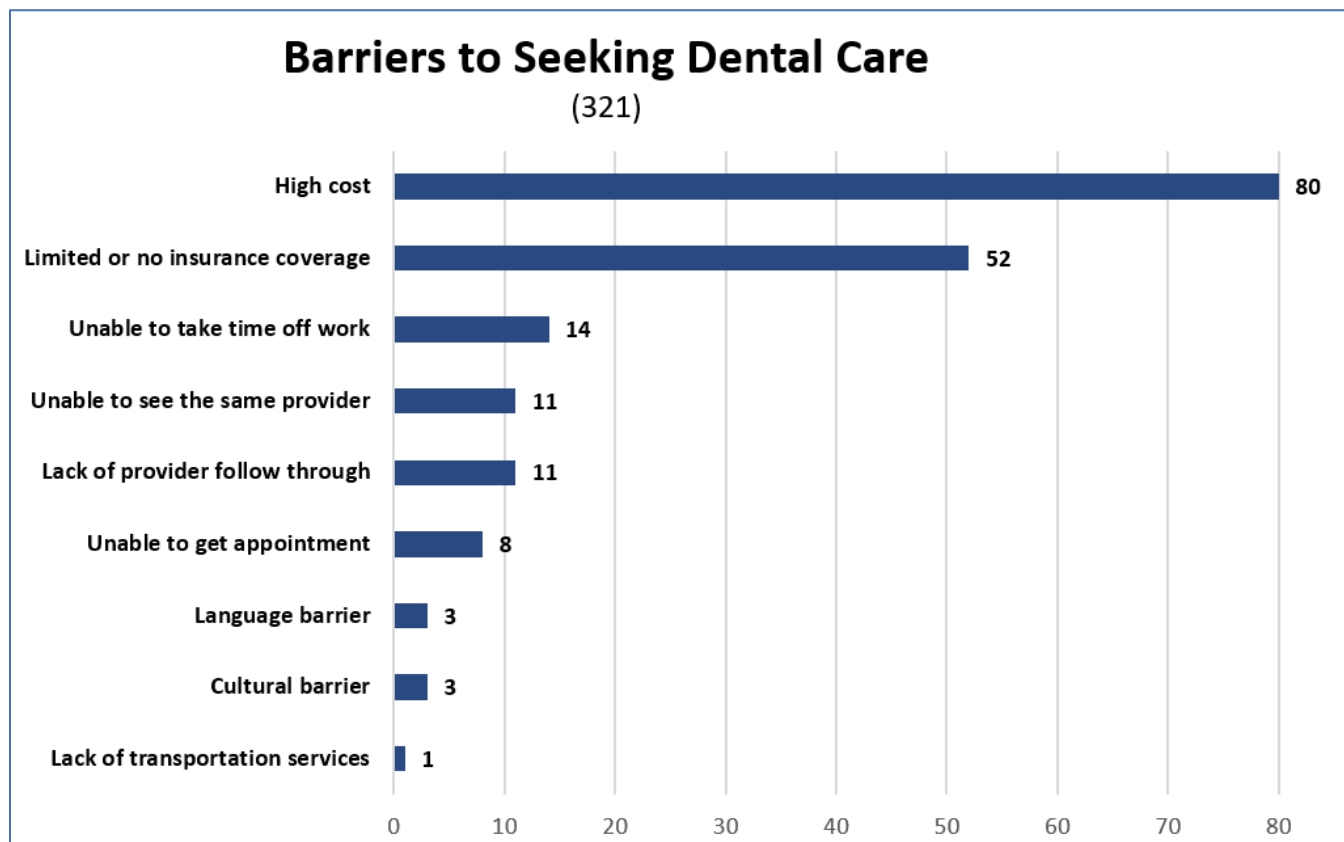
DELIVERY OF DENTAL CARE

Regarding **Delivery of Dental Care**, more than half of all answers (56%) indicated the person seeks dental care within Rawlins County. Of the 44% that get care outside of the county, nearly half indicated that they receive care in other counties because they are established with a provider and do not wish to change.

* Category could be directly addressed by dental care providers.



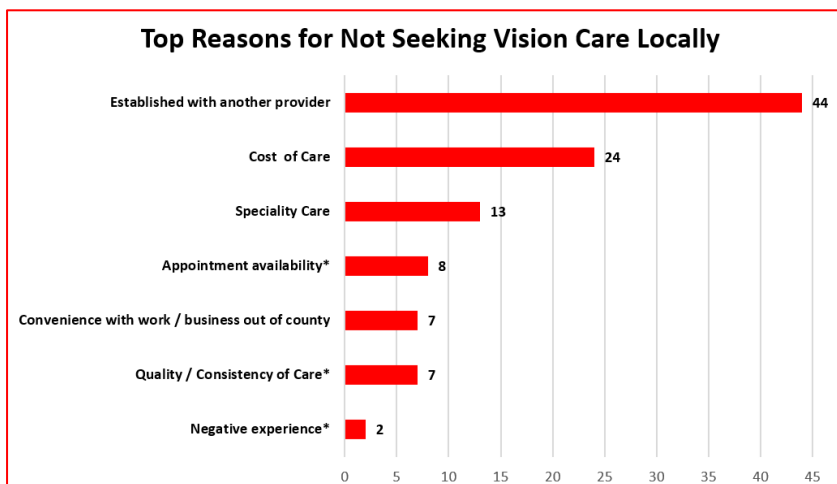
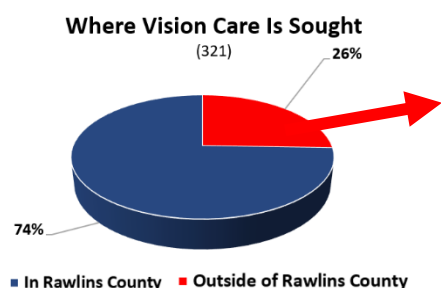
The cost of dental care and lack of insurance are major factors in not seeking dental care.



DELIVERY OF VISION SERVICES

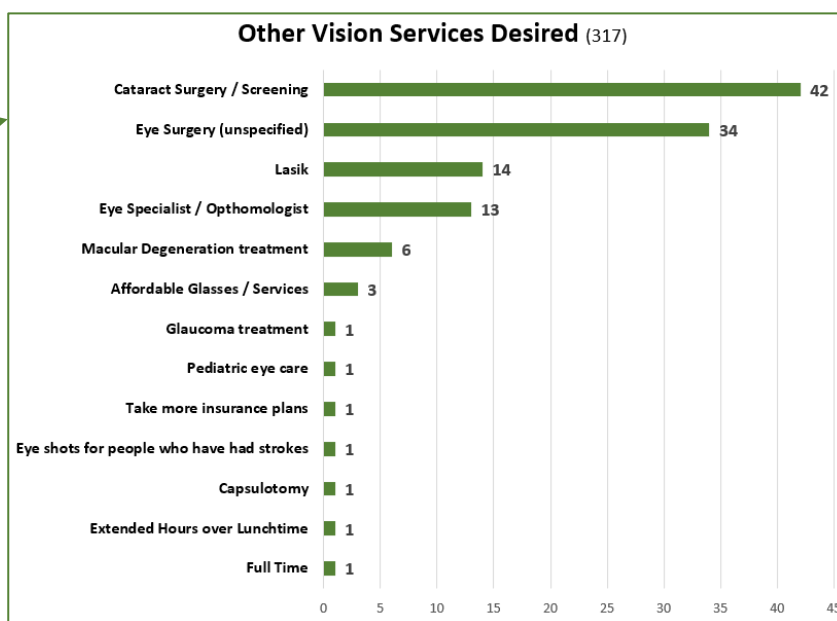
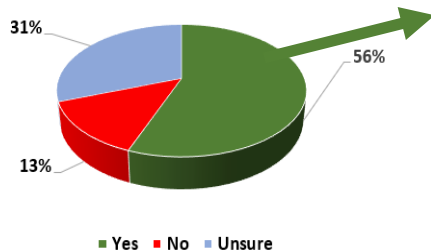
Nearly three-quarters of respondents obtain vision care locally. As is the case with dental care, the same reasons top the list for seeking vision services out of county: established with a provider out of county and the prohibitive cost of services.

**Category could be directly addressed by vision care providers.*



A majority of responses indicated people would consider local eye surgery if available, with the top services desired being cataract screening and surgery.

Consider Minor Eye Care Surgical Procedures Locally if Available (317)

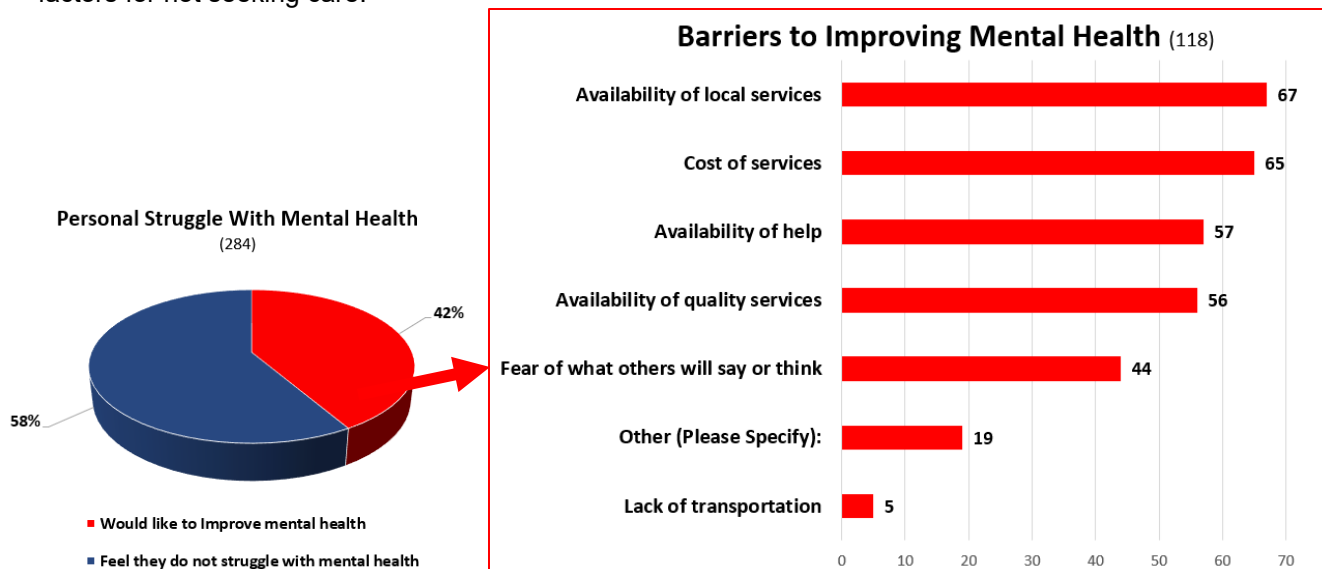


Behavioral / Mental Health Care Services

Regional community members from Northwest Kansas including Rawlins, Thomas, Cheyenne, and Sherman Counties have been participating in ongoing area behavioral / mental health care initiatives over the past 3 years. Mental health care has risen to be one of the top concerns in all these counties. The 2020-21 survey sought to determine the barriers and stigma associated with these important health care services.

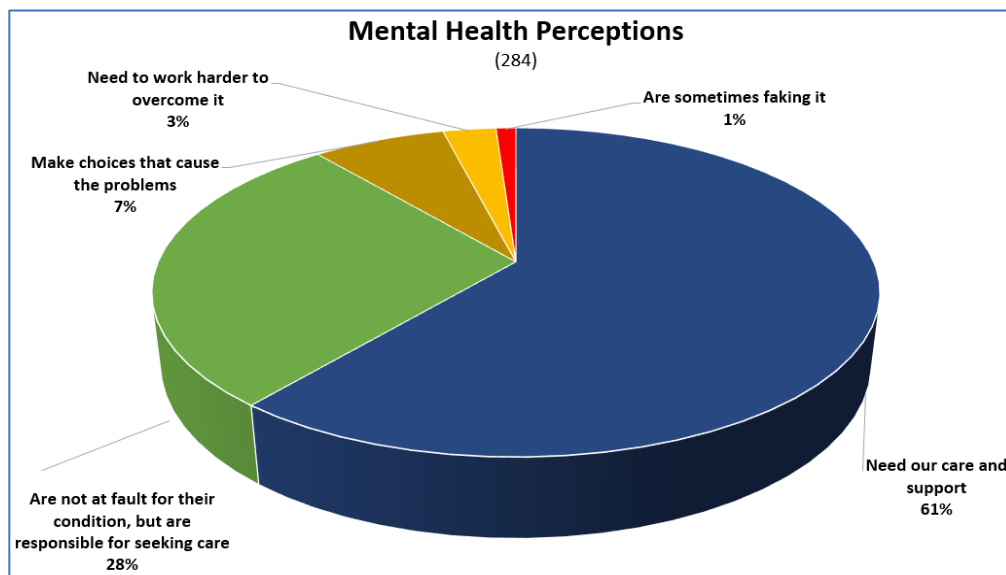
BARRIERS

More than half of respondents indicated they do not struggle in this area. Those wishing to improve their mental or behavioral health cited the lack of locally available or quality mental health services as leading factors for not seeking care.



STIGMA

Overwhelmingly, most people (89%) were empathetic toward those dealing with mental and/or behavioral conditions and indicated people need care and support. A small percentage of respondents have the perception that mental or behavioral health problems are caused by the person with the condition or are not real.



Progress on 2018 CHNA Priorities

The survey included a matrix of priorities identified in the 2018 CHNA and opinions as to whether there has been progress evident on these community problems over the past three years. Based on respondent opinions:

- **Transportation** has improved in the county most likely due to expansion and adoption of Rawlins County's public transportation program. In the new survey, there were comments regarding the continued need for out-of-county or interstate transportation.
- **Substance Abuse** and **Heart Disease / Stroke Risk** remain mostly unchanged. Substance Abuse, as a subset of mental health issues, continues to be a community priority in the 2020-21 survey.
- **Elder Care Services** have mostly remained unchanged with a slight trend toward improvement. The availability of home health services in Rawlins County has expanded over the past three years. The city of McDonald has added an 8-bed skilled nursing facility. This category surfaced again in 2020-21 as a continued priority.
- **Exercise / Physical Activity** has seen improvement. Community projects, such as outdoor exercise equipment available to the public at the Atwood Lake, have directly addressed this priority.
- **Mental Health Issues** continue to be an ongoing problem with a slight trend toward worsening. This category surfaced again in the 2020-21 survey as a priority.

	Significantly Improved	Slightly Improved	No Change	Worsened	Unsure
Access to care (Transportation)	90 30.2%	76 25.5%	51 17.1%	2 0.7%	79 26.5%
Drug and alcohol abuse	5 1.7%	24 8.1%	112 37.7%	30 10.1%	126 42.4%
Elder care services	2 0.7%	53 17.8%	96 32.3%	28 9.4%	118 39.7%
Exercise / physical activity (obesity)	21 7.1%	92 31.1%	78 26.4%	12 4.1%	93 31.4%
High risk of heart disease and stroke	4 1.4%	47 15.9%	102 34.5%	10 3.4%	133 44.9%
Mental health / depression / suicide	8 2.7%	32 10.8%	94 31.8%	58 19.0%	104 35.1%

Legend:

Improved

Unchanged

Worsened

IV. Prioritization of Needs

Task Force

At the February 17, 2021, Task Force Survey Review Meeting held at Rawlins County Health Center's Education Room and via Zoom, 12 members of the review team discussed the survey results and considered initial priorities. The 16 team members not in attendance had an opportunity to share thoughts electronically prior to the meeting. Each member expressed their overall impression regarding the results. The survey was reviewed question-by-question with the following noteworthy highlights:

1. Provider Recruitment / Retention

- Josh Neff, Centura Vice President of Integration, discussed the challenges of recruiting providers to rural areas. Typically, potential providers to fill rural health care positions are either at the end of their career wishing to move away from an urban area or at the beginning of their career seeking to gain experience in a rural setting. Unfortunately, if there is no tie to the community it is difficult to obtain a long-term commitment. He also expressed that today's providers are looking for 8 a.m. to 5 p.m. jobs and want limited on-call and emergency responsibilities. He stated that the approach of having a consistent, dedicated provider is not practical in today's health care world. Centura, the management company for Rawlins County Health Center, must be creative in staffing providers in rural areas.
- Other team members chimed in that community economic development factors directly impact health care worker recruitment / retention. Without these needs being met, the community risks losing out on quality health care workers. Specific aspects mentioned included:
 - Affordable housing;
 - Available daycare;
 - Reliable, high-speed internet; and
 - Jobs (for family members).

2. Continuity of Health Care

- Jennifer Hurst, RCHC Clinic Operations Director, indicated that in recent years, provider turnover and the challenge of recruiting providers to rural areas left RCHC in a position of just trying to find quality coverage for shifts. At the time the CHNA survey was being conducted, they knew that Dr. Tamara Robbins M.D. was going to be relocating to be a dedicated provider in Rawlins County, but management struggled just to fill shifts during the transition. The provider team is more stable in 2021, and she is hopeful that in future surveys, the community will notice more consistency with providers. Even with the dedicated provider, management will still need to be creative in staffing quality providers to cover all needed shifts.

3. Communication

- Josh Neff expressed that the real challenge is how to educate the rural public and reset expectations in the new reality of providers in rural areas. Centura and RCHC management teams have been working to improve recruitment, retention, and continuity of care, but the real need is to improve communication and education regarding this matter with the community being served.
- Communication is a challenge. Not every community member reads the newspaper, some individuals use social media for local news, and other people get local announcements from community message boards or word of mouth. The team will need to brainstorm how to best convey the message consistently and over multiple platforms.
- People in the community do not necessarily "trust" those in health care that deliver the message. It may be effective to engage non-healthcare community members to engage people and share the message.

4. Mental Health / Telehealth

- Task force members indicated there were two suicides before the CHNA survey was released in 2020. Mental Health was on more people's minds as a result.

- RCHC has relationships with both University of Kansas Medical Center (KU) and High Plains Mental Health (HPMH). Between the two mental health providers, professional care is available up to 4 times per month locally. Mental health appointments are also conducted through Telehealth. While Covid brought a host of other issues, including more need for mental health support, it did foster an acceptance of Telehealth that was not present prior to Covid. Referrals to Valley Hope Addiction Treatment and Recovery Center have increased since the onset of the pandemic.
- Travis Rickford, LiveWell Northwest Kansas, and Karla Heble, Rawlins County Health Department, indicated that there is a regional effort to address mental health in eight northwest Kansas counties. Numerous forums have taken place at a regional level over the past two years to explore collaboration. Efforts for regional collaboration are continuing.
- The group discussed that the real gap in mental health services is long-term mental health care. Between KU, HPMH and Valley Hope, the acute needs can be met. When ongoing long-term treatment and care is needed, it must be referred out of the area, generally to Colorado. That poses great challenges to those that need the help who may not have a way to travel out of county, cannot take time off work, and / or cannot afford treatment plans.
- There is a component of mental health that is directly related to physical health. There is a need for education that these are symbiotic.
- The community needs a plan around destigmatizing mental health. It should be viewed no differently than routine check-ups for physical health.
- Mental Health First Aid training has occurred for first responders in Rawlins County. If it is not used consistently or certification renewed periodically, those skills can lapse.
- Rawlins County school district has used the Adverse Childhood Experiences (ACEs) program, but there needs to be a continued effort to make a long-term difference.

5. Cost of Care / High Cost of Insurance

- The group discussed that the cost of health care is driven largely by health insurance providers. Without managed care contracts, which are controlled by insurance providers, the cost of care is extremely high. Smaller employers or those without access to group policies face high out-of-pocket costs. RCHC and Rawlins County Dental Clinic (RCDC) are both part of the community-based primary care clinic program and are required to offer sliding scale fees and charity care.
- During the second quarter of 2020 after Covid hit the area, rural health care clinic volumes were down 80% while insurance providers recorded record profits.
- Josh Neff indicated Centura is talking with legislators in Colorado about health care costs, but Kansas is more of a challenge. State regulations tie small rural health care systems' hands in what they can and cannot do and how they get reimbursed.
- The clinic and hospital have staff available to help enroll people in Presumptive Eligibility through Medicaid.
- Once year, each clinic patient is surveyed regarding income and household size. This helps clinic management identify people who could be served through a sliding fee scale or charity care.
- Transparency of pricing, which is in development at RCHC, would help patients make informed decisions regarding the cost of care and options for treatment.
- One suggestion was that a "navigator role" could be added to help individuals understand health insurance options and possibly work with area employers on leveraging managed care contracts, cost share group insurance, and employee assistance (EAP) plans.

6. Confidentiality

- Confidentiality and HIPAA are not synonymous. The public cannot necessarily be made aware of exactly what happens when a HIPAA violation occurs.
- Confidentiality is harder to control in a small town. Shared personal information may happen from non-health care sources, but health care workers may be blamed. One example is that the flight-for-life helicopter lands at the hospital and attracts attention. The public can see the cars that are at the hospital and deduce who is being treated.

- Patients being treated at the hospital or clinic may see or hear things while in the health care complex and share things. Education for patients regarding their personal responsibility when it comes to confidentiality is needed.

7. Economic Development / Jobs / Retaining Youth

- “Shop Local” means shop local for health care too, not just groceries, gas, etc. If the local community does not support the local health care system, local health care organizations cannot survive.
- Recommendations were made to develop programs to educate high school students as to what careers exist locally and the training needed to obtain those positions (especially around health care): 4-year degrees are not always necessary. The goals would be to educate students on careers, income potential, cost to obtain certification or education, and then incentivize youth to return home after obtaining education or experience outside the county.

8. Elder Care

- Care of senior citizens has improved since 2018.
 - McDonald added an 8-bed nursing home which helps provide extra capacity.
 - Home Health is more active in Rawlins County which helps the elderly stay in their homes longer.
- Adopting Telehealth with seniors helps them not venture out as it may be difficult for the elderly to travel or be transported, especially out of county.

9. Specialty Providers

- Telehealth is the future of specialty services. Rural health care systems cannot justify the cost to bring in a specialist for one or two appointments per week when it requires significant travel expense to the provider.
- Offering telehealth for specialty services is a viable option and it still helps leverage the local laboratory services which can generate some income for the local hospital or clinic.

10. Dental

- Rawlins County Dental Clinic (RCDC) is Medicaid approved and is actively working to accept more private insurance.
- Rawlins County citizens do not make up the largest part of the local dental clinic's patients. Sherman County residents that qualify for Medicaid make up the majority of the RCDC patient-base.
- Rural dental clinics face the same provider shortage experienced by the medical health care organizations.

11. Cultural / Language Barrier

- RCHC has a nurse practitioner that grew up in Mexico and is fluent in Spanish.

12. Wellness / Physical Exercise

- Since the 2018 survey, a literacy trail was added at Atwood Lake along with outdoor fitness equipment around the walking path. There is also a privately owned fitness center that continues to add equipment and be well used.

PRIORITIZE KEY FINDINGS FROM DATA

After a thorough discussion of all the data, task force members took part in a priority exercise. While keeping in mind concerns and needs which are within the scope of the local health care providers to address, each participant listed the top three priorities based on data in their opinion and then ranked those priorities. The total from this exercise was tallied with the results in the chart below.

Community Need	Priority 1	Priority 2	Priority 3	Total	Rank
Mental Health (Resources, Education, Destigmatization)	4	2	2	8	1
Economic Development (Jobs / Livable Wages / Housing, Daycare / Retaining Youth)	2	3	4	9	2
Building Community Trust / Communication	1	2	1	4	3
Provider Retention / Availability / Coordination of Care	1	1	1	3	4

There was consensus that these four community needs should be the focus of a strategic implementation plans and further discussed at the public forum.

Public Forum

A public forum was held on March 25, 2021, from 6:00 to 8:30 p.m. at the Columbian Club in Atwood, Kansas and via Zoom. The purpose was to encourage community involvement and seek public input in establishing priorities regarding community health needs. A boxed lunch was provided by ACE Foundation, the Rawlins County community foundation based in Atwood. Each attendee was provided a copy of the survey data presentation and executive summary. A total of 33 individuals attended in person, and six people joined by Zoom. The room was setup for social distancing and masks were encouraged.

Attendees represented a variety of factions (individuals may be represented in more than one faction) within Rawlins County:

- Age Groups:
 - 30 and under – 0
 - 31-64 – 29
 - >=65 – 10
- Arts Community – 0
- Business Community – 5
- Local Government (county or city) – 1
- Medical Health Care Provider (works with hospital or clinic in a patient facing role) – 5
- Public Health – 2
- Other Health Care Provider (dental, vision, chiro, etc.) - 3
- Families with young children – 10
- Female population – 27
- Male population – 12
- Low Income Families – 3
- Mental Health Provider or Advocate – 2
- Elder Care Provider or Advocate – 1
- Nonprofits (including community foundation) – 15
- Public Schools – 1
- Minority (non-white) – 1
- Geographic Location:
 - Atwood – 21
 - Herndon – 3
 - Ludell – 3
 - Other – 12

DATA PRESENTATION

Rawlins County Public Health Administrator / Health Officer, Karla Heble, welcomed participants at the start of the meeting. She provided an overview of the CHNA Process, reviewed the task force composition, project objectives, and scope for the CHNA.

Task force members Karla Heble, Deb Pochop (Rawlins County Dental Clinic), Suzanna Koel (Rawlins County Health Center), and Travis Rickford (LiveWell Northwest Kansas / ACE Foundation) presented the PowerPoint presentation of the survey data results (*see Supporting Document E*).

PRIORITY EXERCISE

After the survey data presentation and a short break, participants were given three post-it notes and instructed to list the top three community needs that they felt were important or needed to be addressed at a community level. This was the same activity conducted at the task force survey data review meeting.

Participants were asked to rank those three topics from most important to least. Responses were posted on public white boards in the room forming three categories: Priority 1, Priority 2, and Priority 3. Participants attending by Zoom submitted responses via chat, and these answers were added to the white boards. After the votes were tallied by the CHNA consultant, the priorities were the ranked.

Rank	Topic	P1	P2	P3	Total
1	Mental Health	9	9	5	23
2	Economic Development	5	9	9	23
3	Health Care Providers	8	4	2	14
4	Child Care	3	5	3	11
5	Elder Care	3	3	3	9
6	Housing	2	4	1	7
7	Trust / Communication	4	1	0	5
8	Wellness / Activities	0	0	4	4

The top two ranked priorities for both the task force and the public forum were the same: mental health and economic development. There were differences in the other community needs listed by the task force and public forum participants. Below is a review of the community needs identified by the task force members at the February survey review meeting.

Community Need	Priority 1	Priority 2	Priority 3	Total	Rank
Mental Health (Resources, Education, Destigmatization)	4	2	2	8	1
Economic Development (Jobs / Livable Wages / Housing, Daycare / Retaining Youth)	2	3	4	9	2
Building Community Trust / Communication	1	2	1	4	3
Provider Retention / Availability / Coordination of Care	1	1	1	3	4

COMMUNITY FOUNDATION RESOURCE INFORMATION

After the priority exercise, ACE Foundation board chair, Scott Chvatal, provided a review of the Rawlins County community foundation's mission. He reviewed many of the grants funded by the foundation to address issues identified in past CHNA surveys. ACE Foundation's grant funds are used specifically to address community needs in Rawlins County.

STRATEGIC DOING

Consultant Betty Johnson presented a PowerPoint presentation on the Strategic Doing process (**see Supporting Documents F**). She discussed the results of the priority exercise in relation to the survey data. After her presentation, discussion was encouraged.

- **Elder Care Concerns** – One attendee was surprised Elder Care did not rank higher as a top priority, especially regarding the need for transportation out of town or state for health care. The county transportation program does not permit the van to leave the county (or state) under the current program. Discussion included potentially using volunteers to fill this gap.
- **Student / Youth Involvement** - Dr. Tamara Robbins expressed that she would like to see student involvement from the local schools in whatever projects emerge from Strategic Doing, but especially for economic development. She stated that it is important to encourage students to move back home after obtaining post-secondary education. If students are involved before they finish high school, they are more likely to stay or return (engaged equals invested). Efforts should focus on eliminating the stigma that it is negative to stay or return to Rawlins County after high school graduation (need to change the mindset). Ideas that were discussed included:
 - Need to educate youth regarding local career opportunities and the skills needed to perform the work. Post-secondary education is expensive, and not all jobs require a college degree for a successful career. Encourage and guide youth to find the right path for obtaining the

- needed skills (mentored, certified in a trade, technical school degree, associate's, or bachelor's degree, or more).
- Expose students to local government processes.
- Hold a “shop local” campaign focused on the youth. They may put pressure on parents to shop local.
- Facilitate health care job shadowing with students to expose them to the various types of careers in the medical field.
- Hold entrepreneur fairs at school. An example of one success story was shared: a student had a boarding pets business idea in the high school entrepreneur fair. She has since returned to Atwood and successfully made that business a reality.
- Conduct the First Impressions Program with Nadine Sigel (Dane G. Hansen Foundation) and engage the youth to complete the assessment. Get them to consider what they would like their community to look like.
- There may be a barrier getting administrative staff at the local schools on-board with these creative ideas. Administrative approval would be required to involve students. It was suggested that a group of people from tonight's meeting take ideas to the schools to begin to discuss ideas with students.
- **Economic Development** – Need more local jobs, people to shop local, and get young people to move back home after college or stay after high school.
 - The question was asked if there a dedicated person focused on economic development in Rawlins County? Deb Minkler, in attendance, stated that she lives in Decatur County and has a child that attends school in Rawlins County. She just joined K-State Extension & Research in November and is involved in economic development for both counties. She is an asset that needs to be involved with the strategic doing initiatives.
 - Social gathering with young professionals may encourage new ideas.
 - Shared community workspaces could help encourage remote workers.
 - Housing and childcare availability directly impact people's ability to move into the area. If they cannot find an affordable place to live and reliable, quality childcare, they may choose to relocate elsewhere.
- **Mental Health** was mentioned as a priority, but no specific ideas were discussed.

At the end of the discussion, Ms. Johnson encouraged everyone in attendance to share what happened at the meeting with at least five people. She also encouraged groups to start with the “big easy” projects: high impact and low energy. She recommended taking small steps to start the process, get a win, take the next step, get a win, and then gain momentum to tackle larger projects.

MEETING CONCLUSION

Andy Flemer, Rawlins County Health Center's interim CEO, concluded the program by thanking the presenters, task force, and everyone who attended meeting. He thanked ACE Foundation for providing the facility and the meal. He entertained questions regarding the Rawlins County Health Center. Dr. Tamara Robbins shared the changes which are happening at the Health Center to address the CHNA feedback regarding the lack of consistency in providers. She expects to see positive progress on that front soon. Mr. Flemer stated that he is pleased with the new provider team and is confident they will work as a team and collaborate for patient health.

After the meeting, participants had an opportunity to sign up to start a (or join an existing) Strategic Doing project on the top eight priorities expressed at this meeting. Ms. Johnson offered to travel to Rawlins County to facilitate Strategic Doing meetings for any of these topics at no charge with the host of ACE Foundation. Ms. Johnson's services are funded by the Dane G. Hansen Foundation. The Strategic Doing initiative is designed to work with leaders in Northwest Kansas to strengthen and support local communities, improve economic opportunities, and reverse the population decline.

Strategic Doing committees identified included:

1. **Mental Health:** Jennifer Hurst, Kathy Halepeska, Sam Ross, Lisa Johnson, Phil Studer, Beth Holle, Abby Caseman, Kathy Davis Vrbas, Mark Mosley, Andy Flemer, Suzanna Koel
2. **Economic Development:** Dr. Tamara Robbins, Travis Rickford, Ryan Marvin, Melody Bearley, Deb Minkler, Beth Holle, Kathy Davis Vrbas, Cathy Horton and Richard Fernandez (involving schools / first impressions); Scott Chvatal, Gary Nemeth, Tara Bowles
3. **Health Care Providers:** Scott Chvatal, Suzanna Koel, (Hospital, Dental, and County Leadership)
4. **Childcare:** Kathy Ross
5. **Elder Care:** Kathy Ross, Lisa Johnson, Kathy Halepeska, Deb Minkler, Phil Studer, Harlan Holste, Gary Nemeth
6. **Housing:** Abby Caseman, Mark Mosley
7. **Trust / Communication:** (Hospital / County leadership)
8. **Wellness / Activities:** Mary Wilkinson

An article recapping the public form (**see Supporting Documents G**), CHNA, and an open invitation to join a Strategic Doing planning group was published in *Rawlins County Square Deal* in the April 1, 2021, edition.

V. Community Health Status

Health Statistics for Rawlins

Per the “County Health Rankings & Roadmaps”³ published by A Robert Wood Johnson Foundation in 2021, Rawlins County ranked 44 out of 104 counties with regards to Health Outcomes which has improved significantly from 80 at the time of the last CHNA in 2018.

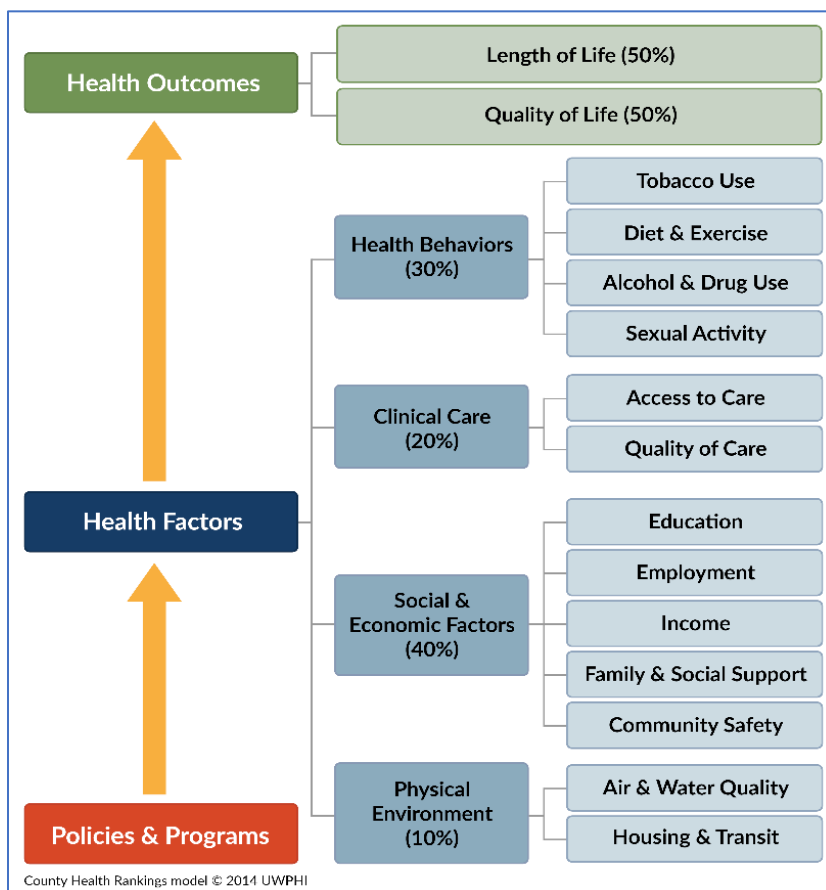
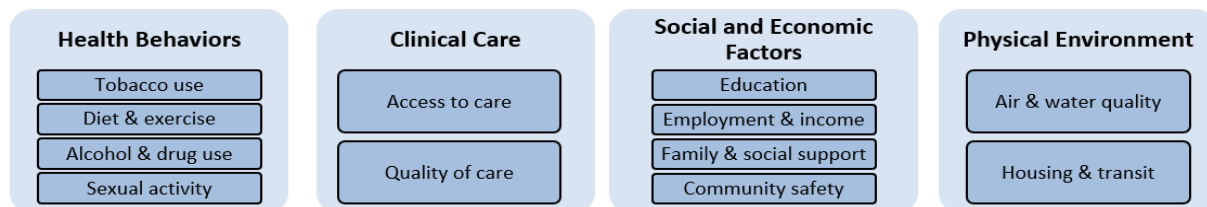
The county health rankings provide some insight on what influences community health and how long and well citizens in each community live. The rankings take in account many different health factors, policies and programs, and health outcomes in determining the results.

Differences in Health Factors

What are Health Factors?

Many factors shape our opportunities to be healthy and influence how well and how long we live. Health factors represent the things we can change to improve health for all, like opportunities for quality education, good paying jobs, access to quality clinical care, healthy foods, green spaces, and secure and affordable housing. We measure four health factor areas.

Chart used with permission from University of Wisconsin Population Health Institute, County Health Rankings & Roadmaps



According to the Kansas Health Matters dashboard⁴ for Rawlins County, the following health indicators experience a **higher rate** in Rawlins County than the overall Kansas average and are of **concern** to community health in an adverse way:

Health Indicator	Kansas Value	Rawlins Co. Value
Health / Alcohol & Drug Use: % Medicare Part D Beneficiaries Having Daily Opioid Dosage >= 50 MME	33.3%	35.3%
Health / Cancer: Adults with Cancer	6.9% (US Value)	10.1%
Health / Cancer: Colorectal Cancer Rate (per 100,000)	39.8	74.6
Health / Health Care Access & Quality: Adults without Health Insurance	12.2% (US Value)	13.9%
Health / Health Care Access & Quality: Primary Care Provider Rate (per 100,000)	76 KS 75 US	40
Health / Heart Disease & Stroke: Adults Who Experienced a Stroke	3.4% (US Value)	4.2%
Health / Heart Disease & Stroke: Adults Who Experienced Coronary Heart Disease	6.8% (US Value)	9.5%
Health / Heart Disease & Stroke: Atrial Fibrillation: Medicare Population	8.9% KS 8.4% US	10.3%
Health / Heart Disease & Stroke: Heart Failure: Medicare Population	13.5% KS 14.0% US	19.0%
Health / Heart Disease & Stroke: High Blood Pressure Prevalence	32.4% KS 26.9% US	40.7%
Health / Heart Disease & Stroke: High Cholesterol Prevalence Adults 18+	34.1% (US Value)	39.4%
Health / Immunizations & Infectious Diseases: % Medicare Eligible Beneficiaries 65+ Receiving Pneumococcal Polysaccharide Vaccine (PPV)	57.4%	40.0%
Health / Mortality Data: Age-adjusted Chronic Lower Respiratory Disease Mortality Rate (per 100,000)	49.7 KS 41.6 US	54.7
Health / Mortality Data: Age-adjusted Heart Disease Mortality Rate (per 100,000)	158.7 KS 165.0 US	166.0
Health / Mortality Data: Age-adjusted Unintentional Injuries Mortality Rate (per 100,000)	47.2	88.1
Health / Older Adults: Adults with Arthritis	25.8% (US Value)	33.7%
Health / Older Adults: Alzheimer's or Dementia: Medicare Population	10.9% KS 10.8% US	11.4%
Health / Older Adults: Osteoporosis: Medicare Population	6.4% KS 6.6% US	12.4%
Health / Respiratory Diseases: Adults with COPD	6.9% (US Value)	8.6%
Health / Respiratory Diseases: Asthma Hospital Admission Rate (per 10,000)	3.5	15.5
Health / Respiratory Diseases: COPD Hospital Admission Rate (per 10,000)	12.5	19.0
Health / Respiratory Diseases: Pneumonia (Bacterial) Hospital Admission Rate (per 10,000)	22.5	25.1
Community / Public Safety: Alcohol-Impaired Driving Deaths	19.9% KS 27.0% US	60.0%
Economy / Poverty: Families Living Below Poverty Level	7.8%	8.1%
Economy / Poverty: People 65+ Living Below Poverty Level	7.5%	10.8%
Economy / Poverty: Uninsured Adult Population Rate	12.3%	14.6%
Economy / Poverty: People Living 200% Above Poverty Level	70.2% KS 69.1% US	64.6%
Environmental Health / Built Environment: Access to Exercise Opportunities	80.1% KS 84.0% US	59.2%

Using the same data set from Kansas Health Matters, the following are health and social determinants which are at a **lower rate** for Rawlins County compared to the State of Kansas Average which is a **positive** trend towards good health:

Health Indicator	Kansas Value	Rawlins Co. Value
Health / Cancer: Female Breast Cancer Rate (per 100,000)	124.9	87.9
Health / Cancer: Lung & Bronchus Cancer Rate (per 100,000)	58.6	31.5
Health / Disease: Diabetes Hospital Admission Rate (per 10,000)	16.9	7.7
Health / Heart Disease & Stroke: Congestive Heart Failure Hospital Admission Rate (per 10,000)	24.7	12.6
Health / Heart Disease & Stroke: Heart Disease Hospital Admission Rate (per 10,000)	117.1	63.0
Health / Immunizations & Infectious Diseases: % of Infants Fully Immunized at 24 months	71.1%	83.3%
Health / Mental Health & Mental Disorders: Depression: Medicare Population	19.8% KS 18.4% US	16.2%
Health / Mental Health & Mental Disorders: Mental Behavior Hospital Admission Rate (per 10,000)	75.1	17.5
Health / Mortality Data: Age-adjusted Years of Potential Life Lost - Cancer (per 100,000)	1206.5	724.9
Health / Mortality Data: Age-adjusted Years of Potential Life Lost – Heart Disease (per 100,000)	847.5	775.9
Health / Older Adults: Adults 65+ Who Received Recommended Preventative Services: Female	28.4% (US Value)	33.5%
Health / Respiratory Diseases: Asthma Medicare Population	4.2%	2.7%
Economy / Food Insecurity: Child Food Insecurity Rate	18.4%	16.5%
Economy / Food Insecurity: Food Insecurity Rate	12.7%	11.9%
Economy / Food Insecurity: Households Receiving SNAP with Children	51.7% KS 50.1% US	46.2%
Economy / Income: Households that are Above the Asset Limited, Income Constrained, Employed Threshold (ALICE)	61.4%	68.1%
Economy / Poverty: Children Living Below Poverty Level	14.9% KS 18.5% US	8.0%
Economy / Poverty: Young Children Living Below Poverty Level	17.1% KS 20.3% US	7.0%
Education / Educational Attainment: People 25+ with a High School Degree or Higher	91.0% KS 88.0% US	95.8%
Education / Educational Attainment: K-12 Performance, High School Graduation	87.3% KS 85.8% US	100%
Economy / Employment: Unemployed Workers in Civilian Labor Force	3.9% KS 6.6% US	1.8% (February 2021)

VI. Local County Health Resources

Medical Health Care

RAWLINS COUNTY HEALTH CENTER (RCHC)

707 Grant Street, Atwood, KS 67730
785-626-3211
www.rchc.us

Mission: To improve the health and quality of life for the individuals and communities we serve.

Vision: To Set the Standard for Patient-Centered Quality Healthcare.

Rawlins County Hospital began as an idea originating in the Atwood Rotary Club through the untiring efforts of Dr. C.E. Henneberger, MD. The facility opened in 1950 as Rawlins County Hospital. The hospital was leased to and operated by the Sisters of St. Joseph until 1969, when Rawlins County Hospital, Inc., a private, non-profit corporation, was formed. In 1989 the status of the hospital was changed to a public, county-owned operational hospital under the direction of a nine-member elected board, an act which also placed the hospital in full compliance with the County Hospital Act, K.S.A 19-4601 - 19-4625.

In 1992, the hospital entered into a management agreement with Great Plains Health Alliance, allowing access to many professional consultants and group purchasing benefits. In 1997, the hospital's name was changed to Rawlins County Health Center to reflect the partnership between the hospital, the rural health clinics, and the new Prairie Plaza Retirement Community. In 1998, the hospital was converted to Critical Access Hospital status.

In 2010, Rawlins County Health Center began the renovation and expansion of the 60-year-old facility. Through a Kansas Department of Commerce Community Service Tax Credit Award and a Community Development Block Grant Stimulus Award, new cardiac rehab and physical therapy departments, new patient parking areas, and a new front entrance and admissions area were completed. Rawlins County Health Center also received a \$7 million-dollar USDA loan to construct a 10,170 sq. ft. patient wing, ER, lab, and x-ray plus the renovation of 10,000 sq. ft. of existing hospital space.

Construction continued at the facility as the Rural Health Clinic moved into the former patient wing. The development of the new Surgical Suite began with a Kansas Department of Commerce Community Service Tax Credit Award and a Community Development Block Grant. Phase II of the Surgical Suite was completed in 2017, with the addition of a central sterile room with the new equipment funded by the Dane G. Hansen Foundation.

Rawlins County Health Center provides professional services to all patients through the medical practices of a local physician, outreach specialists, two physician assistants, two advanced nurse practitioners, and more than 70 employees. The hospital maintains a full-service emergency room with adjacent radiology and laboratory departments and is open 24x7, 365 days per year. The health care facility maintains a rural health clinic in Atwood. Rawlins County Health Center provides a specialty clinic within the hospital complex for patient access to outreach specialists who fly, drive, or provide telehealth to serve Atwood patients.

Currently, RCHC is an affiliate of Centura Health, has a Level IV Trauma Center designation, and includes a community-based primary care clinic.

Specialty services offered include:

- Cardiology;
- Cardiovascular Screening / Stress Testing;
- General Surgery;
- Imaging Services: MRI, Bone Density, Mammography, Ultrasound, Nuclear Medicine, and CT Scan;
- Nephrology;
- Orthopedics;
- Urology; and
- Wound Care.

RAWLINS CLINIC - ATWOOD

707 Grant Street, Atwood, KS 67730

785-646-3241

Hours: M-F, 8 a.m. – 5 p.m. and Saturday walk-in from 9 a.m. - Noon

The rural health clinic is in the Rawlins County Health Center facility. It is best described as a frontier rural

hospital-based, community based primary care clinic. Care is provided by primary care providers to individuals who present for care regardless of their ability to pay. Charity Care is available to patients who are uninsured or under-insured and have a household income of 300% or more below poverty level.

RAWLINS COUNTY PUBLIC HEALTH DEPARTMENT

216 S. Fourth Street, Atwood, KS 67730
Rawlins County Health Officer / Administrator: Karla Heble
785-626-3968

The Rawlins County Health Department through partnership with the Kansas Department of Health and Environment, promotes healthy lifestyles within the county by providing health, environmental and educational services to maintain and promote healthy living for individuals, families, and the community. Many services include but are not limited to adult and childhood immunizations, school health, Early Detection Works, Farmworkers Health program, reportable disease investigation, emergency preparedness, health screenings and health education programming.

Mental / Behavior Health Care / Addiction Services

ALCOHOL ANONYMOUS

PDC Meeting Room, 208 S 4th Street, Atwood, KS 67730
785-626-3625, meets Tuesday 8 – 9 p.m.

HIGH PLAINS MENTAL HEALTH SERVICES

High Plains Mental Health Services
208 E 7th Street, Hays, KS 67601
785-625-2871

Contracted for Telehealth and onsite services as needed (PRN) at Rawlins County Health Center

2020 Directory of Mental Health Resources in Kansas from the Kansas Department for Aging and Disability Services: https://www.kdads.ks.gov/docs/default-source/csp/bhs-documents/mental-health-resource-directory.pdf?sfvrsn=95ab29ee_120.

NARCOTICS ANONYMOUS

Call 866-801-6621 for information on NA groups in the Rawlins County Area Other Health Care Partners

Other Health Care Resources

AUDITORY / HEARING SERVICES

Precision Hearing Solutions, (available at RCHC on the last Thursday of each month)
1208 Main Street, Goodland KS 67735
785-899-3166

CHIROPRACTIC CARE

Active Balance Chiropractic & Acupuncture Clinic, April Green D.C
418 Main Street, Atwood, KS 67730
785-626-3274

DENTAL SERVICES

Rawlins County Dental Clinic (RCDC)

515 State Street, Atwood, KS 67730
785-626-8290

Mission: To operate a self-sustaining state-of-the-art dental clinic that serves all patients including those who are uninsured, underinsured, or Medicaid participants in Northwest Kansas and surrounding areas. RCDC strives to improve the overall health of patients while promoting access to comprehensive medical care in the tri-state region.

Vision: To enhance the oral health and oral health care access for the residents including the underserved of Northwest Kansas

Goal: To provide quality dental care while decreasing restrictions on access to that care.

RCDC sees all patients regardless of income or insurance status. It is a 501(c)(3) charitable nonprofit.

After several years of hard work and in-depth research, in April 2009 Rawlins County Dental Clinic opened its doors in a rented space provided by RCHC with one part-time dentist, one full-time hygienist / CEO, two part-time dental assistants, and one full-time receptionist. To serve a growing patient base, the dental clinic moved into its own building in November 2010 doubling the physical capacity. The new space was made possible by two granting entities: The Kansas Association for the Medically Underserved and the United Methodist Health Ministry Fund.

Today, the clinic continues to grow with over 10,000 patients in over 18 counties in Kansas and surrounding areas. The dental clinic has the capacity to employ three dentists, four registered dental hygienists, and support staff to accommodate most dental needs. RCDC management is in planning the potential construction of a larger, permanent building to accommodate the continued growth. In addition, they hope to increase the out-reach program to include mobile restorative dental services for our most vulnerable populations including nursing home residents and those with special needs.

HOME HEALTH SERVICES

Good Samaritan Society of Northwest Kansas Home Health Agency (Care in Multiple NW KS Counties)

820 S. Denison, St. Francis, KS 67756
785-332-3588

Skilled Nursing Care, Home Health Aide Service, Home Maker Service, Physical Therapy, Occupational Therapy, Speech Pathology Service

Hospice Services of Northwest Kansas Inc. (Care in Multiple NW KS Counties)

Home Health Practice
438 N Franklin Ave., Colby, KS 67701
785-462-6710

HOSPICE SERVICES

Hospice Services of Northwest Kansas Inc. (Care in Multiple NW KS Counties)

424 8th Street, Phillipsburg, KS 67661
785-543-2900 or 800-315-5122

OPTOMETRIST SERVICES

Funk Optometry, Tuesdays in Atwood

414 Main Street, Atwood, KS 67730
785-626-3102 or 785-462-3348

Vision Source

118 S. Fourth Street, Atwood, KS 67730
785-626-9234

PHARMACY SERVICE**Currier Drug**

416 State Street, Atwood, KS 67730
785-626-3214

SENIOR HOUSING**Housing Authority / Wheatridge Manor**

Atwood, 785-626-9572

Prairie Plaza Apartments

906 Logan Street, Atwood, KS 67730
785-626-3211 x 400

SKILLED NURSING CARE**Rawlins County Good Samaritan Center**

605 Lake Road, Atwood, KS 67730
785-626-9015

Wheat Haven

304 Marion Street, McDonald, KS 67745
785-899-9009

Other Community Resources**AGING SERVICES****Adult Day Care / Respite Care**

Good Samaritan Society – Atwood
785-626-9015

Atwood Senior Center

205 S 5th Street, Atwood, KS 67730
785-626-3341

Herndon Senior Center

522 Quincy Avenue, Herndon, KS 67739
785-322-5375

McDonald Senior Center

200 Rawlins Avenue, McDonald, KS 67745
785-538-2536

Northwest Kansas Area on Aging

Provides Discounted In-Home Services, Caregiver Program, Senior Health Insurance Counseling, Home Delivered Meal Programs and Other Information for the Elderly.
301 W 13th St., Hays, KS, 67601, 800-432-7422, 785-628-8204
Elder Abuse Line: 800-842-0078

FOOD PANTRY

Distributions made from the following organizations:

Atwood Senior Center, contact Genevieve Magee at 785-626-3341

Herndon Senior Center, contact Sharon Frick at 785-332-5375

Immanuel United Methodist Church in Bird City (for McDonald citizens), contact Carol Partch at 785-734-2739

RAWLINS COUNTY PUBLIC TRANSPORTATION

Rawlins County Clerk's Office

607 Main Street, Suite C, Atwood, KS 67730

785-626-9625

On-demand service Monday through Friday, 9 a.m. – 5 p.m., Holidays excluded

SCHOOL DISTRICTS

USD 103 – Cheylin Schools, 605 Bird Ave., Bird City, KS 67731, 785-734-2341

USD 105 – Rawlins County Schools, 205 North 4th Street, Suite 1, Atwood, KS 67730, 785-626-3236

PHYSICAL FITNESS FACILITIES

The Bar

802 Sherman Street, Atwood, KS 67730

785-626-5012

Rawlins County Health Center, Cardiac Wellness Department

785-626-3211 x 280

RAWLINS COUNTY SHERIFF / DISPATCH

607 Main Street, Suite G, Atwood, KS 67730

Non-Emergencies: 785-626-3865

Emergencies: 911

CodeRED Community Notification System Enrollment: <https://public.coderedweb.com/CNE/en-US/BF44D25748D8> (to receive community emergency notifications and/or weather alerts)

VII. Reference of Resources

1. Rasmussen College Health and Wellness Study, "What is Community Health and Why Is It Important?" by Ashley Brooks, 3/4/2019. <https://www.rasmussen.edu/degrees/health-sciences/blog/what-is-community-health/>
2. 2010 U.S. Census Data: <https://www.census.gov/quickfacts/>
3. A Robert Wood Johnson Foundation 2020, "County Health Rankings & Roadmaps." <https://www.countyhealthrankings.org/reports/state-reports/2020-kansas-report>
4. Kansas Health Matters Dashboard. <https://www.kansashealthmatters.org>
5. World Population Review: <https://worldpopulationreview.com/us-counties/ks/rawlins-county-population> compiled from most recent state estimates from the Census Bureau's Population Estimates Program.

VIII. CHNA Consultant Information

Greater Northwest Kansas Community Foundation (GNWKCF) is an organization exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, a public charity, and a non-profit corporation organized in the State of Kansas. The organization provides grant writing and project consultation in addition to services to community foundations in 12 Northwest Kansas counties: Cheyenne, Decatur, Gove, Graham, Logan, Norton, Phillips, Rawlins, Sheridan, Sherman, Thomas, and Wallace.

105 W 4th Street
PO Box 593
Bird City, KS 67731
785-734-2406
www.gnwkcf.org

Carol Sloper has worked for GNWKCF since 2017 as the Director of Grants and Scholarships. She has experience as a grant writer for Cheyenne County, Kansas and worked in Information Technology for various industries since 1997. Included in that experience is three years at Children's Hospital of Denver and two years at Cheyenne County Hospital. Her experience at hospitals have given her insight to overall hospital operations at a macro level for both urban and rural hospitals. While at Cheyenne County Hospital, she was project manager for the Rural Health Care Collaboration Project and assisted with the 2014 CHNA. Carol has dual Bachelor of Arts degrees from Kansas State University in Mathematics and Journalism Education.

IX. Supporting Documentation to Follow

- A. CHNA Survey Tool**
- B. Marketing the Survey**
- C. Executive Summary**
- D. Marketing the Public Forum**
- E. PowerPoint Presentation – Public Forum Presentation**
- F. PowerPoint Presentation – Strategic Doing Presentation**
- G. Public Forum Publicity**

Supporting Document A - CHNA Survey Tool

2020 Rawlins County Community Health Needs Assessment

Introduction

Rawlins County, in conjunction with Rawlins County Health Department, Health Center and Clinic, and Dental Clinic want to hear from you regarding community health needs and concerns.

The purpose of this survey is to:

- Identify positives in our community as well as concerns.
- Understand perceptions and attitudes about the health of individuals and the overall community.
- Receive and gather feedback for how our local health systems can improve.
- Learn more about how local health services are used by you and the community.

Please complete this survey no later than November 15, 2020.

All responses are confidential and anonymous.

Surveys will be tabulated by Greater Northwest Kansas Community Foundation. Your responses will be combined with other answers and reported only in total. If you have any questions regarding this survey, please contact Carol Sloper at 785-734- 2406 or info@gnwkcf.org.

Your opinion matters! Thank you in advance for participating!

You may complete this survey online at:

Or you may complete this printed survey and return it to:

Greater Northwest Kansas Community Foundation
Attn: CHNA
PO Box 593
Bird City, KS 67731

Or, you may drop it off at the Rawlins County Health Department, Rawlins County Clerk's Office, Rawlins County Health Center front desk, or the Rawlins County Dental Clinic front desk.

Section 1 - Community Assets and Concerns

For the purpose of this survey, “health” is defined as the following: a state of complete physical, psychological and social wellbeing of an individual, not merely the absence of disease or chronic conditions.

Please tell us about your community by choosing **up to three (3) options** you **most agree** within each category below.

1.1 Considering the **community/environmental health** in your community, what **concerns** you the most is:

- ☐ Attracting and retaining young individuals
- ☐ Bullying/cyberbullying
- ☐ Crime and safety, adequate law enforcement
- ☐ Decrease in population
- ☐ Having enough child daycare services (affordable)
- ☐ Having enough quality school resources
- ☐ Healthy food access
- ☐ Limited Job Advancement, degree options
- ☐ Limited youth activities
- ☐ Need for distance transportation options
- ☐ Not enough exercise and wellness activities
- ☐ Not enough jobs with livable wages, not enough to live on
- ☐ Physical, domestic violence, child abuse, or sexual abuse
- ☐ Other (Please Specify):

1.2 Considering the **availability/delivery of health services** in your community, what **concerns** you the most is:

- ☐ Ability of healthcare providers to work together to coordinate patient care within the health system
- ☐ Ability to get medical appointments within 48 hours
- ☐ Ability to pay for prescribed medications
- ☐ Ability to retain primary care providers (MD, PA, NP) and nurses in the community
- ☐ Ability to retain dental providers (DDS, RHS)
- ☐ Adequacy of health insurance coverage (out of pocket expenses too high)
- ☐ Adequacy of dental insurance coverage
- ☐ Availability of dental services
- ☐ Availability of primary care providers
- ☐ Availability of specialists
- ☐ Availability of mental health services
- ☐ Availability of substance use disorder/treatment services
- ☐ Cost of healthcare services
- ☐ Emergency services (ambulance and 911) availability 24/7
- ☐ Extended health appointment hours, evenings and weekends
- ☐ Not comfortable seeking care where I know the employees at the facility
- ☐ Patient confidentiality (inappropriate sharing of personal health information)
- ☐ Quality of health care
- ☐ Wellness and disease prevention services
- ☐ Other (Please Specify):
- ☐

1.3 Considering the **youth population** (0-17) in the community, what **concerns you most** is:

- ☐ Anxiety, stress, depression, suicide
- ☐ Community engagement, volunteerism
- ☐ Drug and alcohol use
- ☐ How to encourage youth to return home; have adequate jobs for them
- ☐ Quality education
- ☐ Sex trafficking
- ☐ Youth activities, places they can congregate with supervision
- ☐ Other (please specify):

1.4 Considering the **adult population** (18-64) in the community, what **concerns you most** is:

- ☐ Agricultural/farm stressors
- ☐ Anxiety, stress, depression, suicide
- ☐ Availability of support services (financial, health, behavioral)
- ☐ Cancer
- ☐ Chronic diseases (health issue that is managed rather than cured)
- ☐ Desire for social events
- ☐ Drug and alcohol abuse
- ☐ Smoking and tobacco use
- ☐ Succession planning
- ☐ Wellness and disease prevention
- ☐ Other (please specify):

1.5 Considering the **senior population** (65 and over) in the community, what **concerns you most** is:

- ☐ Aging well
- ☐ Anxiety, stress, depression, suicide
- ☐ Availability of activities for seniors
- ☐ Availability of assisted living
- ☐ Availability of long-term / skilled nursing care options
- ☐ Availability of resources to help elderly stay in their homes
- ☐ Availability of support services for those on a fixed income
- ☐ Chronic diseases
- ☐ Dementia/Alzheimer's
- ☐ Elder abuse
- ☐ Knowledge of resources for family and friends caring for elders
- ☐ Social isolation/lack of local support system
- ☐ Transportation for out of town medical appointments
- ☐ Other (please specify):

1.6 Which of the following is **MOST needed** to **improve the health of our community**? (Select up to 3)

- ☐ Clean air and water
- ☐ Drug and alcohol rehabilitation services
- ☐ Healthier food choices
- ☐ Mental health services
- ☐ Recreation facilities
- ☐ Safe childcare choices
- ☐ Safe eldercare choices
- ☐ Safe places to walk/play
- ☐ Safe worksites
- ☐ Smoking cessation programs
- ☐ Weight loss programs
- ☐ Transportation
- ☐ Other (Please Specify):

1.7 What **single issue** do you feel is the **biggest challenge** facing our community?

1.8 What **gaps** exist that keep you from **thriving** (to flourish and live the best life)? (Select all that apply)

- ☐ Lack of knowledge of available resources or opportunities
- ☐ Lack of organized exercise or wellness opportunities
- ☐ Personal motivation
- ☐ Resources (cost, time, facility)
- ☐ I feel that I am thriving
- ☐ Other (Please specify):

1.9 What is needed for Rawlins County **businesses to thrive**?

1.10 Do you feel Rawlins County citizens would benefit from collaborating with neighboring communities to address community health needs?

- ☐ Yes
- ☐ No
- ☐ I am not sure

1.11 Do you need or receive financial assistance with any of the living expenses listed below? (Select all that apply)

- ☐ Food
- ☐ Dental Care Insurance
- ☐ Dental Care Payments
- ☐ Health Care Insurance
- ☐ Health Care Payments
- ☐ Infant Supplies
- ☐ Prescriptions/Pharmacy Supplies
- ☐ Rent
- ☐ Utilities
- ☐ I do not need or receive financial assistance
- ☐ Other (Please Specify):

Section 2 – Delivery of Medical / Dental / Vision / Health Care Services

2.1 Where do you seek general health care most frequently (primary care / routine doctor visits)?

- ☐ In Rawlins County
- ☐ Outside of Rawlins County

2.1.1 If you selected, Outside of Rawlins County, why do you seek care outside of Rawlins County?

2.2 Where do you seek dental care most frequently?

- ☐ In Rawlins County
- ☐ Outside of Rawlins County

2.2.1 If you selected, Outside of Rawlins County, why do you seek care outside of Rawlins County?

2.3 Where do you seek eye and vision care most frequently?

- ☐ In Rawlins County
- ☐ Outside of Rawlins County

2.3.1 If you selected, Outside of Rawlins County, why do you seek care outside of Rawlins County?

2.4. If minor eye care surgical procedures (YAG capsulotomy, lumps and bumps remove from the eyelid, etc.) were available in Rawlins County, would you or a family member consider having procedures done locally?

- ☐ Yes
- ☐ No
- ☐ Unsure

2.5. What other eye or vision services that are not available locally would you like to see offered in Rawlins County?

2.6 What **prevents** you or your immediate family from **seeking medical care**? (Select all that apply)

- ☐ Concerned about what others will think
- ☐ Cultural barrier
- ☐ Don't know what services are available
- ☐ High cost / out of pocket expenses (co pays, medications, travel)
- ☐ Lack of provider/healthcare staff follow through (prescriptions, consults, referrals)
- ☐ Lack of transportation services

- ☐ Language barrier
- ☐ Limited or no insurance coverage
- ☐ Needed specialty not available locally
- ☐ Not able to get appointments at the clinic
- ☐ Not able to see same provider each time
- ☐ Not able to take time away from work for appointments
- ☐ I do not experience any barriers in receiving health care
- ☐ Other (Please Specify):

2.7. What **prevents** you or your immediate family from **seeking dental care**? (Select all that apply)

- ☐ Cultural barrier
- ☐ High cost / out of pocket expenses (co pays, medications, travel)
- ☐ Lack of provider/staff follow through (prescriptions, consults, referrals)
- ☐ Lack of transportation services
- ☐ Language barrier
- ☐ Limited or no insurance coverage
- ☐ Not able to get appointments at the clinic
- ☐ Not able to see same provider each time
- ☐ Not able to take time away from work for appointments
- ☐ I do not experience any barriers in receiving dental care
- ☐ Other (Please Specify):

2.8 What health screening or education/information services are needed in our community? (Select all that apply)

- ☐ Blood Pressure
- ☐ Cancer
- ☐ Cholesterol
- ☐ Dental
- ☐ Diabetes
- ☐ Drug and alcohol abuse
- ☐ Eating disorders
- ☐ Elder care service
- ☐ Emergency preparedness
- ☐ Exercise / physical activity (obesity)
- ☐ Financial and informational resources for those in poverty
- ☐ Heart Disease
- ☐ Importance of routine well checkups
- ☐ Mental health / depression / suicide
- ☐ Nutrition
- ☐ Prenatal / postnatal care
- ☐ Sexually transmitted diseases / Infections
- ☐ Vaccination / immunizations
- ☐ Other (Please specify):

2.9 In the 2018 CHNA, the following were identified as priority areas to change and/or improve. Please respond with your opinion on the progress in addressing these issues within Rawlins County over the past two years:

	Worsened	No Change	Slightly Improved	Significantly Improved	I don't know
Access to care (transportation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug and alcohol abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elder care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exercise / physical activity (obesity)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
High risk of heart disease and stroke	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health/depression/suicide	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 3 – Behavioral / Mental Health Care Services

Behavioral / mental health conditions include but are not limited to depression, learning disorders, ADHD, addiction, anxiety, trauma, mood disorders, stress, eating disorders, relationship problems, etc.

3.1 What prevents you from improving your behavioral / mental health? (Select all that apply)

- ☐ Availability of help
- ☐ Availability of local services
- ☐ Availability of quality services
- ☐ Cost of services
- ☐ Fear of what others will say or think
- ☐ Lack of transportation
- ☐ I don't struggle in this area
- ☐ Other (Please Specify):

3.2 Select one response that best completes this sentence when you think about people with behavior / mental health conditions. **I think people with behavioral health conditions:** (select only one)

- ☐ Need to work harder to overcome it
- ☐ Need our care and support
- ☐ Make choices that cause the problems
- ☐ Are not at fault for their condition, but are responsible for seeking care
- ☐ Are sometimes faking it

Section 4 – Demographic Information

Again, this information is confidential and anonymous. The information in this section is used to help us analyze trends based on age, gender, and other social determinants when considering answers later in the survey. This information will not be used for any purpose other than to analyze trends for health needs in Rawlins County.

4.1 What is your age?

- ☐ Under 18
- ☐ 18-24
- ☐ 25-34
- ☐ 35-44
- ☐ 45-54
- ☐ 55-64
- ☐ 65-74
- ☐ 75+

4.2 What is your gender?

- ☐ Female
- ☐ Male
- ☐ Transgender
- ☐ Prefer not to say
- ☐ Other (Please Specify):

4.3 What is your Race / Ethnicity?

- ☐ White / Caucasian
- ☐ Black / African American
- ☐ Hispanic / Latino / Latina
- ☐ Asian or Asian American
- ☐ American Indian or Alaska Native
- ☐ Native Hawaiian or other Pacific Islander
- ☐ Other Race
- ☐ Prefer not to say

4.4 Do you live in Rawlins County?

- ☐ Yes
 - 4.4.1 Enter zip code:
 - 4.4.2 How long have you lived in Rawlins County?
 - ☐ 0-5 years
 - ☐ 6-15 years
 - ☐ More than 15 years
- ☐ No
 - 4.4.3 Enter zip code:

4.5 For my primary residence, I:

- ☐ Own / Co-Own my home
- ☐ Rent / Co-Rent my home
- ☐ Live with someone else (do not pay rent, etc.)
- ☐ Am currently homeless

4.6 The highest level of education I have completed is:

- ☐ Some primary / high school
- ☐ High school diploma / GED
- ☐ Vocational Certification or degree
- ☐ Associates degree
- ☐ Bachelor's degree
- ☐ Advanced degree (Masters, Doctorate, etc.)

4.7 What is your employment status?

- ☐ Employed (Branch to Q32, otherwise skip to 34)
- ☐ Unemployed
- ☐ Retired
- ☐ Disabled
- ☐ Prefer not to say

4.7.1 **If you answered, Employed above**, please select the your primary industry you work in:

- ☐ Agriculture
- ☐ Construction
- ☐ Education
- ☐ Food Service
- ☐ Government
- ☐ Health Care / Medical / Dental, etc.
- ☐ Manufacturing
- ☐ Media
- ☐ Nonprofit
- ☐ Personal Care (salon, spa, etc.)
- ☐ Professional Service (accounting, IT, legal, etc.)
- ☐ Retail
- ☐ Skilled Labor (plumbing, HVAC, etc.)
- ☐ Transportation
- ☐ Other (Please Specify):

4.8 For your household, which of the following most describes you?

- ☐ I am the primary wage earner
- ☐ I share equally in earning wages
- ☐ I am not the primary wage earner

4.9 How many people live at your address? (And then select the corresponding gross income for your selection). Again, this information is CONFIDENTIAL and ANONYMOUS.

☐ 1

4.9.1 What is your gross household income?

- ☐ <= \$12,760
- ☐ <= \$25,520
- ☐ <= \$38,280
- ☐ > \$38,280
- ☐ Refuse to Answer

☐ 2

4.9.2 What is your gross household income?

- ☐ <= \$17,240
- ☐ <= \$34,480
- ☐ <= \$51,720
- ☐ > \$51,720
- ☐ Refuse to Answer

☐ 3

4.9.3 What is your gross household income?

- ☐ <= \$21,720
- ☐ <= \$43,440
- ☐ <= \$65,160
- ☐ > \$65,160
- ☐ Refuse to Answer

☐ 4

4.9.4 What is your gross household income?

- ☐ <= \$26,200
- ☐ <= \$52,400
- ☐ <= \$78,600
- ☐ > \$78,600
- ☐ Refuse to Answer

☐ 5

4.9.5 What is your gross household income?

- ☐ <= \$30,680
- ☐ <= \$61,360
- ☐ <= \$92,040
- ☐ > \$92,040
- ☐ Refuse to Answer

☐ 6

4.9.6 What is your gross household income?

- ☐ <= \$35,160
- ☐ <= \$70,320
- ☐ <= \$105,480
- ☐ > \$105,480
- ☐ Refuse to Answer

☐ 7

4.9.7 What is your gross household income?

- ☐ <= \$39,640
- ☐ <= \$79,280
- ☐ <= \$118,920
- ☐ > \$118,920
- ☐ Refuse to Answer

☐ 8+

4.9.8 What is your gross household income?

- ☐ <= \$44,120
- ☐ <= \$99,240
- ☐ <= \$132,360
- ☐ > \$132,360
- ☐ Refuse to Answer

Newspaper Articles and Advertisements:

Page 8

Rawlins County Square Deal, Thursday, Sept. 24, 2020

County seeks local input on health needs

Rawlins County is conducting a Community Health Needs Assessment (CHNA) from October 1 through 31. The purpose of this assessment is to identify major community health challenges, gaps in service, and other factors that may contribute to unmet health needs locally.

"We hope that every Rawlins County resident, ages 18 and over, will participate in the survey," said Karla Heble, Rawlins County Health Officer. "All of the health service providers in the county – whether medical, dental, vision, or other alternative medicine – need to understand what the true needs of our residents are, what prevents people from receiving care, and how we can improve services to better meet those needs."

Produced every three years, the CHNA provides critical data gathered from public surveys and focus groups to determine the health needs of Rawlins County citizens. The report will be published on the Rawlins County Health Center (RCHC), Rawlins County Dental Clinic (RCDC) and Rawlins County Health Department's websites and printed copies are available upon request from these organization.

The first step in the CHNA process is a citizen survey, which is being conducted by a third party, Greater Northwest Kansas Community Foundation (GNWKCF). The public survey will open October 1. The goal is to get as many Rawlins County citizens as possible to respond to ensure every voice is heard.

Surveys can be completed online at <https://gmedctr.formstack.com/forms/2020racochna> until November 15. A Spanish version of the survey is also available online at <https://gmedctr.formstack.com/forms/2020raspanish>. Paper copies in English or Spanish are available upon request by calling Rawlins County Health Department at 785-626-3968 or by emailing info@gnwkc.org.

"The survey is completely anonymous," stated Carol Sloper, consultant from GNWKCF. "I know some people are hesitant to provide personal data or opinions in surveys, but there is no way to link responses to any individual. These surveys are confidential and anonymous. Without honest and complete feedback, the CHNA will not paint the true picture of Rawlins County's needs."

Responses from citizens will help guide action steps in addressing the

health needs in Rawlins County. Once the survey is complete, community input will be sought through a stakeholder forum open to the public to help prioritize goals, develop objectives, and establish a strategic plan to improve the health outcomes of Rawlins County.

"The CHNA is an essential part of the hospital leadership teams visioning," stated Ronald Robinson, RCHC CEO and Administrator. "While it's a requirement of critical access hospitals to comply with the Patient Protection and Affordable Care Act of 2010, we view it as more than just checking a box. It helps us take a look at the services we provide and how they are delivered compared to what our community really needs. It is a chance to make adjustments to ensure health equity in Rawlins County."

In 2018, the CHNA outlined concerns regarding physical exercise / obesity, mental health, dental care, and access to care (including transportation). One question on the 2020 survey is to gauge whether there have been improvements made in any of these areas.

For more information, contact Suzanna Koel at RCHC at skoel@rchc.us or 785-626-3211.

Rawlins County Square Deal, Thursday, Oct. 1, 2020

Page 3

Health survey needs you

Rawlins County is conducting a Community Health Needs Assessment, CHNA, from Oct. 1 to Nov. 15 and public input from anyone age 18 and older is urgently encouraged.

The purpose of the survey is to identify major community health challenges in the medical, dental and visual fields.

"We want to understand what the true needs of our residents are," Karla Heble, RN, Rawlins

County Health Officer said. "We want to know what prevents them from receiving care and how we can improve services to better meet those needs."

The survey can be completed online at <https://gmedctr.formstack.com/forms/2020racochna>. Paper forms are available by calling Rawlins County Health Department at 626-3968 or emailing @gnwkc.org.

Page 8

Rawlins County Square Deal, Thursday, Oct. 15, 2020

♦ All Rawlins County Residents ♦

Community Health Needs Assessment Survey

Go online to:

<https://gmedctr.formstack.com/forms/2020racochna> (English)

<https://gmedctr.formstack.com/forms/2020raspanish> (Spanish)


For assistance or to request a paper copy contact:

- Karla Heble, County Health Dept., 785-626-3968
- Suzanna Koel, RCHC, 785-626-3211 x220
- Deb Pochop, RCDC, 785-626-8290

Complete the survey anytime between October 1 and November 15, 2020

All responses are ANONYMOUS and CONFIDENTIAL

Participate Now!
Your voice is needed!





October Newsletter



Rawlins Clinic Provider Schedule

Dr. Travis Daise: Mary Wilkinson, DC, FNP-C:
Oct 6, 20 Oct 2, 5-7, 9, 12-14, 16, 19-21,
23, 26-28, 30

Jason Kearns, PA-C: Jose Renteria, FNP-C:
Oct 1, 12-13, 22-12 Oct 5-9, 19-21, 30

Paul Young, PA-C:
Oct 14-16, 26-29

Specialty Clinic Schedule

Cardiologists
Dr. Denney: Nov 5
Dr. Markiewicz: Oct 12

Orthopedists
Dr. Sears:
Nov 11

Surgeon
Dr. Kopriva: Oct 21

Telebehavioral Health
Oct 8, 19, 22

Urologist
Dr. Cantanese:
Call to Schedule

Mental Health
High Plains Mental Health: Oct 8, 22

Wound Care Center:
Oct 6, 13, 20, 27

Diabetic Counseling
Diane Sis: Oct 7, 14, 21,
28

Oncology

Pelvic Floor

RCHC Provider Update

Rawlins County Health Center is excited to announce that Dr. Tamara Robbins will begin her Atwood practice in January 2021.

Rawlins County Health Center is also excited to announce that Paul Young, PA-C, and Brian Holmgren, PA-C from SLV Medical will be working in the block provider schedule with Jason and Jose. Paul has already begun seeing patients, and Brian will start in November.

Rawlins Clinic also has Mary Wilkinson, DC, FNP, and Dr. Travis Daise to allow for many providers to choose from. To learn more about the providers at Rawlins County Health Center, visit www.rchc.us/physicians/.



COVID-19 TESTING

Rawlins County residents have multiple ways available in the county to be tested for COVID-19. You can call the Rawlins County Public Health Department (626-3968) and schedule a KDHE test that is available Tuesday through Friday via drive-through at the hospital. You can also speak with a provider in the Rawlins Clinic (626-3241) to be tested through the hospital. Those tests are sent to Pathology Services in North Platte, NE, and should be covered through your insurance. If you do not have insurance, you still have the option of the KDHE testing or testing through the hospital lab, as the hospital has funds available for COVID-19 testing for uninsured individuals.

CHNA SURVEY LINKS!

Your feedback is needed by November 15th as part of the Rawlins County Community Health Needs Survey. More information is available at <https://www.rchc.us/health-needs-survey/>.

English survey:
<https://gmedctr.formstack.com/forms/2020racochna>
El survey en Espanol:
<https://gmedctr.formstack.com/forms/2020raspanish>

\$1 **RAWLINS COUNTY**

SQUARE DEAL

e-mail: atwood.news@rawlinsas.com "A Voice for New Frontiers"

VOL. 28, NO. 59 8 PAGES PHONE: (785) 626-3600 ATWOOD, KAN. 67730 THURSDAY, NOV. 5, 2020

News at a Glance

Health Needs Survey

Be a good neighbor! Fill out the County Health Needs Assessment on line: gmedctr.formstack.com/forms/2020racochna. or pick up a paper copy at the health department, dental clinic or hospital.



DON'T BE AFRAID TO TAKE THE 'RAWLINS COUNTY COMMUNITY HEALTH NEEDS ASSESSMENT' SURVEY!

Go online to:
<https://gmedctr.formstack.com/forms/2020racochna>

now to complete the survey

Deadline is **November 15, 2020**

All responses are **CONFIDENTIAL** and **ANONYMOUS**

Contact us at 785-332-2104 or info@rawlinscounty.org to request a paper survey in English or Spanish

\$1 **RAWLINS COUNTY**

SQUARE DEAL

e-mail: atwood.news@rawlinsas.com "A Voice for New Frontiers"

VOL. 28, NO. 60 10 PAGES PHONE: (785) 626-3600 ATWOOD, KAN. 67730 THURSDAY, NOV. 12, 2020

News at a Glance

Health Needs Survey

Be a good neighbor! Fill out the County Health Needs Assessment on line: <https://gmedctr.formstack.com/forms/2020racochna> or pick up a paper copy at the health department, dental clinic or hospital.

Social Media Posts:

Posts were crossposted at Rawlins County Health Center, Rawlins County Dental Clinic and Rawlins County Health Department.

Rawlins County Health Center www.rchc.us

@rawlinscountyhealthcenter · Hospital



Rawlins County Public Health Department

Rawlins County Dental Clinic

@RawlinsCountyDentalClinic · General Dentist

Rawlins County Health Center www.rchc.us
October 1, 2020 · 🌐

Help Rawlins County Improve! Take the Community Health Needs Assessment Now. Every answer is important. Surveys are CONFIDENTIAL and ANONYMOUS. Take the survey now at <https://gmedctr.formstack.com/forms/2020racochna> (English) or <https://gmedctr.formstack.com/forms/2020raspanish> (Spanish) by November 15. Paper copies in English or Spanish are available upon request by calling Suzanna Koel at RCHC, 785-626-3211 ext. 220, or by emailing info@gnwkc.org. This assessment will help... See More

♦ **All Rawlins County Residents ♦**
Community Health Needs Assessment Survey

Go online to:

<https://gmedctr.formstack.com/forms/2020racochna> (English)
<https://gmedctr.formstack.com/forms/2020raspanish> (Spanish)

For assistance or to request a paper copy contact:

- Karla Heble, County Health Dept., 785-626-3968
- Suzanna Koel, RCHC, 785-626-3211 x220
- Deb Pochop, RCHC, 785-626-6290

Complete the survey anytime between October 1 and November 15, 2020
All responses are ANONYMOUS and CONFIDENTIAL

Participate Now!
Your voice is needed!

Rawlins County Health Center www.rchc.us
October 5, 2020 · 🌐

Tome el survey en español ahora en <https://gmedctr.formstack.com/forms/2020raspanish> antes del 15 de noviembre.

See Translation

♦ **Todos los residentes del condado de Rawlins ♦**
Encuesta de evaluación de las necesidades sanitarias de la comunidad

Vaya en línea a:

<https://gmedctr.formstack.com/forms/2020raspanish>

Para obtener ayuda o solicitar un contacto con copia en papel:

- Roxaana Romero, 785-538-0016
- Maribel Chacon-Pinon, 785-734-7091

Complete la encuesta en cualquier momento entre el 1 de octubre y el 15 de noviembre de 2020
Todas las respuestas son ANONYMOUS y CONFIDENTIAL

¡Participa ahora!
¡Tu voz es necesaria!

Rawlins County Health Center www.rchc.us
October 7, 2020 · 🌐

What will rise to the top as Rawlins County's needs in 2020? We'll only know if you respond now! The Rawlins County Community Health Needs Assessment is underway. All citizens of Rawlins County are encouraged to take this survey. You can take the CONFIDENTIAL and ANONYMOUS survey now at <https://gmedctr.formstack.com/forms/2020racochna> (English) or <https://gmedctr.formstack.com/forms/2020raspanish> (Spanish) by November 15.

How's the Health of Rawlins County?

Rawlins County Health Center www.rchc.us
October 16, 2020 · 🌐

Have you shared your opinion with us yet? If so, help your elderly neighbor or a friend take the survey too! Rawlins County is conducting a Community Health Needs Assessment which helps inform health care providers in Rawlins County how we can continue to be a trusted partner in our community. If you live in Rawlins County, we want to hear from you. Surveys are CONFIDENTIAL and ANONYMOUS. <https://gmedctr.formstack.com/forms/2020racochna> (English) or <https://gmedctr.formstack.com/forms/2020raspanish> (Spanish) See More

Rawlins County Health Center www.rchc.us
October 30, 2020 · 🌐

No Trick! And it's not Scary! Take the Rawlins County Community Health Needs Assessment today to help Rawlins County health care providers meet your needs! If you live in Rawlins County, we want to hear from you. Surveys are CONFIDENTIAL and ANONYMOUS. <https://gmedctr.formstack.com/forms/2020racochna> (English) or <https://gmedctr.formstack.com/forms/2020raspanish> (Spanish) Deadline is November 15 to participate.

Don't be afraid to take the Community Health Needs Assessment Survey!

Rawlins County Health Center www.rchc.us
October 21, 2020 · 🌐

Help us help YOU! Complete the Rawlins County Community Health Needs Assessment online today at <https://gmedctr.formstack.com/forms/2020racochna> (English) or <https://gmedctr.formstack.com/forms/2020raspanish> (Spanish) by November 15. If you know someone who does not have online access, offer to help them take the survey too! All responses will help health care leaders in Rawlins County address gaps and concerns expressed through this CONFIDENTIAL and ANONYMOUS survey.

♦ **All Rawlins County Residents ♦**
Community Health Needs Assessment Survey

Go online to:

<https://gmedctr.formstack.com/forms/2020racochna> (English)
<https://gmedctr.formstack.com/forms/2020raspanish> (Spanish)

For assistance or to request a paper copy contact:

- Karla Heble, County Health Dept., 785-626-3968
- Suzanna Koel, RCHC, 785-626-3211 x220
- Deb Pochop, RCHC, 785-626-6290

Complete the survey anytime between October 1 and November 15, 2020
All responses are ANONYMOUS and CONFIDENTIAL

Participate Now!
Your voice is needed!

Rawlins County Health Center www.rchc.us
November 3, 2020 · 🌐

Be sure to go to the polls and VOTE today. And afterward, take 5 minutes to share your opinions by taking the Rawlins County Community Health Needs Assessment survey!
<https://gmedctr.formstack.com/forms/2020aracochna> (English) or
<https://gmedctr.formstack.com/forms/2020raspanish> (Spanish)
 Produced every three years, the CHNA provides critical data gathered from public surveys and focus groups to determine the health needs of Rawlins County citizens.
 The first step in the C... See More

Vote Today!
Then Take our Survey!

YOUR VOICE MATTERS!

Rawlins County Health Center www.rchc.us
November 15, 2020 · 🌐

LAST CALL! Make your voice heard! The deadline is today. Help Rawlins County Help YOU by taking the Community Health Needs Assessment Now. Every answer is important. Surveys are CONFIDENTIAL and ANONYMOUS. Take the survey now at <https://gmedctr.formstack.com/forms/2020aracochna> (English) or <https://gmedctr.formstack.com/forms/2020raspanish> (Spanish). Responses from citizens will help guide action steps in addressing the health needs in Rawlins County. Once the survey is comp... See More

• Todos los residentes del condado de Rawlins •
 Encuesta de evaluación de las necesidades sanitarias de la comunidad
 Vaya en línea a:
<https://gmedctr.formstack.com/forms/2020raspanish>

Para obtener ayuda o solicitar un contacto con copia en papel:
 • Roxana Romero, 785-538-0016
 • Maribel Chacon-Pinon, 785-734-7091

• Participa ahora! ¡Tu voz es necesaria!

• All Rawlins County Residents •
 Community Health Needs Assessment Survey
 Go online to:
<https://gmedctr.formstack.com/forms/2020aracochna> (English)
<https://gmedctr.formstack.com/forms/2020raspanish> (Spanish)

For assistance or to request a paper copy contact:
 • Karla Heble, County Health Dept., 785-626-3968
 • Suzanne Koel, RCHC, 785-626-3211 x220
 • Deb Pothos, RCHC, 785-626-6290

Complete the survey anytime between October 1 and November 15, 2020
 All responses are ANONYMOUS and CONFIDENTIAL

Rawlins County Health Center www.rchc.us
November 5, 2020 · 🌐

<https://gmedctr.formstack.com/forms/2020raspanish>

• Todos los residentes del condado de Rawlins •
 Encuesta de evaluación de las necesidades sanitarias de la comunidad
 Vaya en línea a:
<https://gmedctr.formstack.com/forms/2020raspanish>

Para obtener ayuda o solicitar un contacto con copia en papel:
 • Roxana Romero, 785-538-0016
 • Maribel Chacon-Pinon, 785-734-7091

Complete la encuesta en cualquier momento entre el 1 de octubre y el 15 de noviembre de 2020
 Todas las respuestas son ANONYMOUS y CONFIDENTIAL

¡ Participa ahora! ¡ Tu voz es necesaria!

Rawlins County Health Center www.rchc.us
November 10, 2020 · 🌐

There's still time to share your opinion!
 Take the Rawlins County Community Health Needs Assessment now. The deadline to respond is November 15. Every answer is important. Surveys are CONFIDENTIAL and ANONYMOUS.
 Take the survey now at <https://gmedctr.formstack.com/forms/2020aracochna> (English) or <https://gmedctr.formstack.com/forms/2020raspanish> (Spanish). This assessment will help Rawlins County health providers identify major community health challenges, gaps in service, ... See More

How's the Health of Rawlins County?

TAKE THIS SURVEY & LET US KNOW!
 TAKE NOW

Printed Business Cards Distributed Throughout the Community:

Rawlins County
 Community Health Needs Assessment Survey
 Go online to:
<https://gmedctr.formstack.com/forms/2020aracochna>

For assistance or to request a paper copy (English or Spanish) contact:
 • Karla Heble, 785-626-3968
 • Suzanne Koel, 785-626-3211 x220

Complete the survey anytime between October 1 and November 15, 2020

Rawlins County
 Encuesta de evaluación de las necesidades sanitarias de la comunidad
 Vaya en línea a:
<https://gmedctr.formstack.com/forms/2020raspanish>


Para asistencia, póngase en contacto con:
 • Roxana Romero, 785-538-0016
 • Maribel Chacon-Pinon, 785-734-7091

Completa entre el 1 de octubre y el 15 de noviembre de 2020

Supporting Document C – Marketing the Public Forum

Page 8

Rawlins County Square Deal, Thursday, March 4, 2021




March Newsletter


Work Anniversary
Ronnie Weigel, MLT celebrates his 5-year anniversary at RCHC on March 14, 2021! Glad to have you in our laboratory!

New Employees
Welcome back, Deb Pochop, PTA! Deb will work a few hours a month in Physical Therapy.


Meet the RCHC Providers




Tamara Robbins, MD is a Board Certified Family Doctor. Dr. Robbins and her family recently moved from Indiana to Rawlins County and are excited to join our community. Dr. Robbins will be in the Rawlins Clinic on Tuesdays and Thursdays.




Paul Young is a Certified Physician Assistant who provides extensive ER experience from a Level I Trauma Center in Colorado and emergency management disaster relief efforts. Paul provides ER coverage and is on the rotating provider schedule. You can schedule an appointment with Paul on March 3-5, 15-18, and 29-30.



Mary Wilkinson is a certified Family Nurse Practitioner. Mary and her daughter returned to Atwood last year. Mary will be in the Rawlins Clinic Mondays through Wednesdays and Fridays.




Jose Renteria is a certified Acute Care and Family Nurse Practitioner. He is bilingual in Spanish and English and brings extensive experience in rural hospital acute care medicine. Jose provides ER coverage and is on a rotating provider schedule. Jose will be in the clinic on March 1-2, 11-13, and 19-20.



Brian Holmgren is a Certified Physician Assistant with extensive ER experience in two major Level I Trauma Centers. Brian also has a background in paramedicine. He provides ER coverage and is on the rotating provider schedule. March clinic days for Brian are 8-10, 19, 22, and 29.

Radiology Services
The Radiology Department at RCHC provides many diagnostic and preventative options for patients. Services available include Ultrasound, MRI, Mammography, Nuclear Medicine, including stress testing, X-Ray, EKG, and CT scans. We also offer DEXA bone density tests that measure bone loss and are used in diagnosing osteoporosis, and CT Cardiac Calcium Scoring, a non-invasive test used to measure calcified plaque buildup in your coronary arteries to help determine your risk for a heart attack. Call RCHC, Extension 6, to speak with our Radiology Department.

Rawlins County CHNA Community Forum
The public is welcome to join the discussion on March 25, 2021, from 6-8 pm at the Columbian Hall in Atwood regarding the Community Health Needs Assessment results, top needs for the county, and improving health care in Rawlins County. A light supper will be provided by the ACE Foundation, and a ZOOM option is available for anyone wanting to participate remotely. Please call or email Suzanna Koel at 785-626-3211 ext. 220 or skoel@rchc.us for the ZOOM information, or to RSVP for supper.




Rawlins County Health Center www.rchc.us
March 22 •

Join in the discussion on March 25, 2021, from 6 – 8 pm at the Columbian Hall in Atwood regarding the Community Health Needs Assessment results, top needs for the county, and improving health care in Rawlins County. A Strategic Doing process will be part of the evening activities and a light supper will be provided by the ACE Foundation. A Zoom option will be available as well. Please call or email Suzanna Koel at 785-626-3211 ext. 220 or skoel@rchc.us for the Zoom information... See More

RAWLINS COUNTY COMMUNITY FORUM

March 25, 2021 6-8pm at the Columbian Hall - Atwood, KS
Take this opportunity to be a part of the discussion on improving health care in Rawlins County



The public is welcome to join the discussion on Community Health Needs Assessment results, top needs for the county, & improving health care in Rawlins County.

ACE FOUNDATION
AN AFFILIATE OF GEORGE MEYERSON'S RAILROAD COMMUNITY FOUNDATION

Rawlins County Health Center www.rchc.us
March 15 •

Please join us in a discussion on March 25, 2021, from 6-8 pm at the Columbian Hall in Atwood regarding the Community Health Needs Assessment results, top needs for the county, & improving health care in Rawlins County. A supper will be provided. A ZOOM option is available for anyone wanting to participate remotely. Please call or email Suzanna Koel at 785-626-3211 ext. 220 or skoel@rchc.us for ZOOM instructions and to RSVP for the meal.

RAWLINS COUNTY



e-mail: atwood.news@rawlinsks.com

SQUARE DEAL

"A Voice for New Frontiers"

VOL. 29, NO. 12 8 PAGES PHONE: (785) 626-3600 ATWOOD, KAN. 67730 THURSDAY, MARCH 25, 2021

Page 6

Rawlins County Square Deal, March 18, 2021

RAWLINS COUNTY COMMUNITY FORUM

March 25, 2021 6-8pm at the Columbian Hall - Atwood, KS

The public is welcome to join the discussion on the Community Health Needs Assessment results, the county's top priorities, & improving health care in Rawlins County



Supper will be provided. RSVP to Suzanna Koel at 785-626-3211 ext. 220 or skoel@rchc.us. There will also be a virtual attendance option via Zoom

News at a Glance

Free Food Boxes
Free Food Boxes will be available at 2 p.m., Tuesday March 30 on the street west of the courthouse.

Simply Produce
Simply Produce baskets will be ready from noon to 12:30 p.m. April 2 at the warehouse north of Jamboree Foods for those who have ordered them.

Public Health Forum
The community health needs assessment public forum will be held from 6-8 p.m., Thursday, March 25 at the Columbian Hall. Attendees will learn results of the county health needs survey taken last fall. Sponsors are ACE Foundation and Strategic Doing.

Supporting Document D - Executive Summary

Rawlins County

Community Health Needs Assessment (CHNA)

Executive Summary

Conducted October 1 – November 15, 2020

Final Report to be available by June 2021, available online at <https://www.rchc.us>

Scope and Purpose:

Community Health Needs Assessments (CHNA) are part strategic plan and part grounding rod. The Patient Protection and Affordable Care Act of 2010 (ACA) requires critical access hospitals and community dental clinics to complete a CHNA every three years. While it is a required activity for compliance, it is a tool to help health care leadership throughout the community develop strategic plans which address community health needs and concerns.

There is no one definition of “community health need.” This is up to the interpretation of the stakeholders engaged in the process. To assess the health needs of its community, a broad representation of the community must be surveyed to identify the significant health needs to address. The leadership team must also prioritize those health needs, as well as identify potential resources available to tackle the needs. Resources can include, but are not limited to: organizations, facilities, groups, programs or individuals from a number of sources including the hospital / medical clinic facility, dental clinic, vision care, county health department, emergency medical services, mental health provider, pharmacy or other organizations.

CHNA Methodology:

The process was developed and implemented utilizing the contracted professional services of Greater Northwest Kansas Community Foundation (GNWKCF). The CHNA Taskforce, comprised of health leaders in Rawlins County, included the following representation:

- | | | |
|-----------------------------------|---------------------------------|---------------------------------|
| • Rawlins County Health Nurse | • Hospital Quality Management | • Developmental Services of |
| • Rawlins County Elected Official | • Hospital Director of Nursing | Northwest Kansas Representative |
| • Hospital CEO | • Skilled Nursing Home Director | • LiveWell Kansas |
| • Hospital Medical Director | • Northwest Kansas Home Health | • City of Atwood, McDonald, and |
| • Health Care Clinic Manager | Director | Herndon Representatives |
| • Dental Clinic Manager | • Northwest Kansas Hospice | • Local Media Representative |
| • Vision Services Representative | Director | • Local Business Owner / |
| • Chiropractic Services | • EMS Director | Community Advocate |
| • Representative | • High Plains Mental Health | |
| • Local Pharmacist | Representative | |

The CHNA Task Force conducted the health needs assessment October 1 through November 15, 2020. The target audience was Rawlins County citizens age 18 and above (1,969 persons, based on 2010 census data.) The survey was widely distributed so that all Rawlins County citizens could respond. The survey was announced in the local newspaper including press releases and advertisements, posted on social media, and advertised on local radio shows. Business cards and flyers were distributed throughout the county via gathering places, churches and other public areas.

The primary survey was conducted through an online link (in both English and Spanish); however, printed copies in both languages were available and distributed throughout the county to Hispanic and elderly persons. The survey included 33 questions focused on the following main areas:

- | | |
|---|---|
| • Section 1: Community Assets and Concerns | • Section 3: Behavior / Mental Health Care Services |
| • Section 2: Delivery of Health Care Services | • Section 4: Demographic Information |

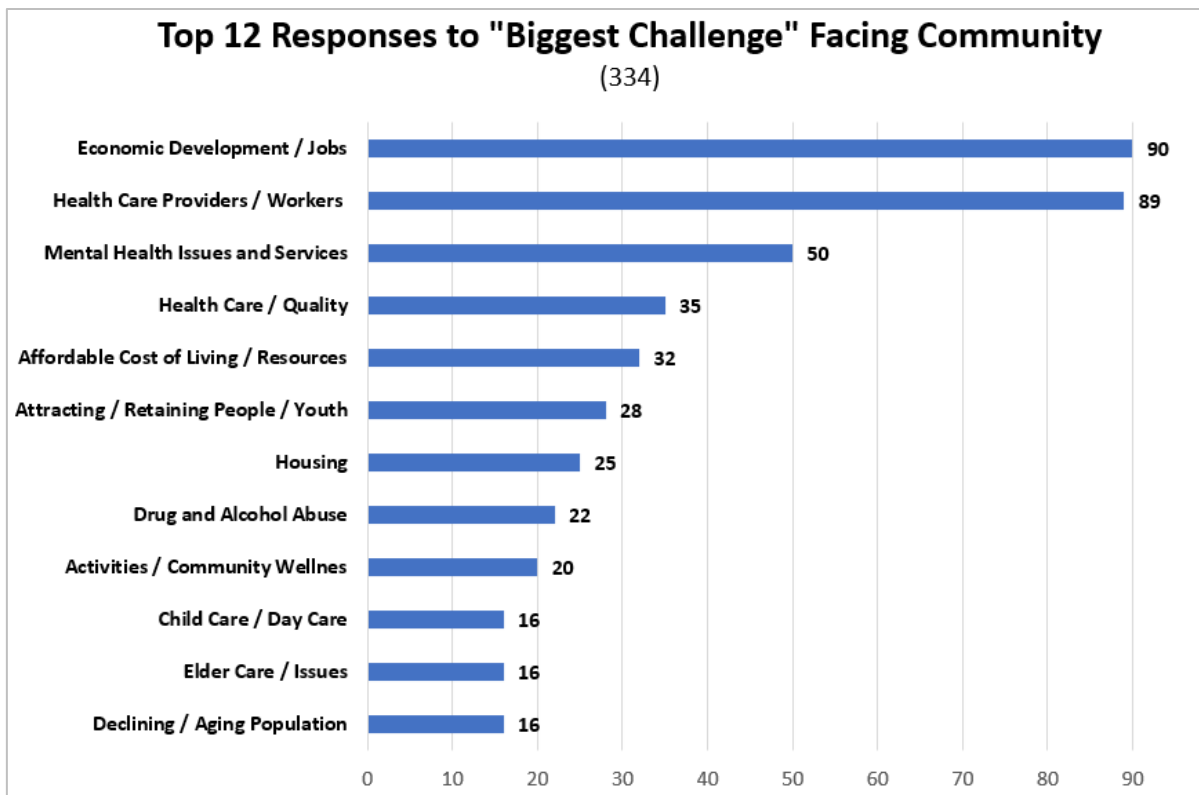
After the survey ended, data was compiled by GNWKCF staff and shared with the CHNA Taskforce for review. The Taskforce will perform a data interpretation of results and determine initial priorities which will be shared and discussed at a Public Forum in the Spring of 2021.

Survey Highlights

Section 1: Community Assets and Concerns

Overall, 334 total responses were received from the target population of 1,969 (17%). As is typical with surveys, some respondents did not complete the entire survey. By the end of the survey, there were 276 respondents (14%) remaining through the last question. The overall responses provided adequate data for analysis of community needs.

1. Considering **Community / Environmental Health in Rawlins County**, the biggest concerns are:
 - Attracting / Retaining Youth
 - Lack of Jobs / Livable Wages
 - Lack of Child Daycare Services
 - Decrease in Population
 - Quality School Resources
2. Considering **Availability / Delivery of Health Services**, the biggest concerns are:
 - Retaining Primary Care Providers and Medical Staff
 - Availability of Primary Care Providers
 - Providers Collaborating to Coordinate Patient Care
 - Availability of Mental Health Services
 - Adequacy of Health Insurance / Cost of Health Care Services
3. Top concerns based on age group of population mostly centered around **mental health** and **cost of living**.
 - **Youth Population:** drug and alcohol use, mental health (anxiety, stress, depression, suicide), and encouraging youth to return home / retain youth.
 - **Adult Population:** mental health (anxiety, stress, depression, suicide), availability of support services (fiscal, health, behavioral), and agricultural / farm stressors.
 - **Elderly Population:** resources to help elderly stay at home, availability of assisted living, and availability of services for those on a fixed income.
4. The top responses to the question "**What Is the Biggest Challenge Facing the Community**" are ranked in the graph below.



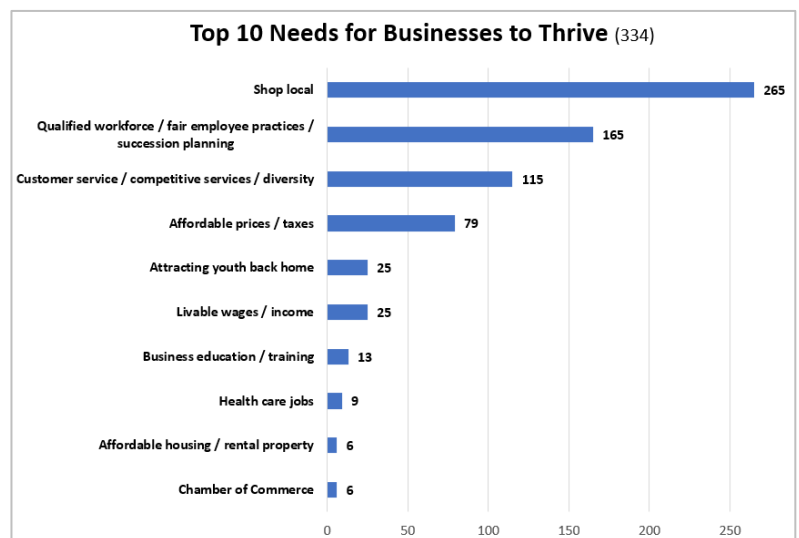
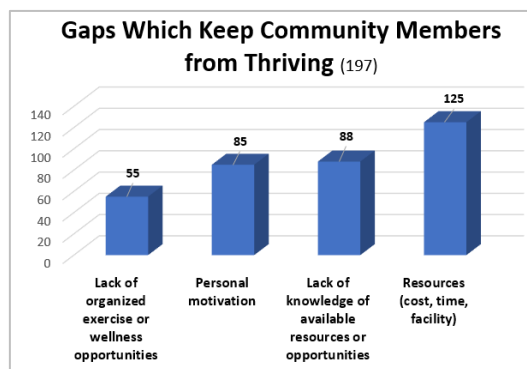
5. The most common **top concerns** expressed across multiple questions (community or delivery of health care) include (not in any particular order):
- Attracting and Retaining Youth / Businesses; Decrease in Population; Shop at Home
 - Cost of Health Care / Living; Including High Taxes and Health Insurance
 - Health Care Providers / Staff (Retain, Recruit, Consistency, Availability, Quality)
 - Mental Health Services (Local Availability and Cost); Including Substance Abuse
 - Elder Care Services
 - Child Care Services
 - Confidentiality / Trust

Two of these concerns were also **top concerns** expressed in the 2018 CHNA survey:

- Mental Health Services; Substance Abuse
- Elder Care Services

6. When asked what is impacting community members from thriving (to flourish and live the best life), 41% felt they are thriving. Of the remaining 59%, the majority indicated a lack of resources (cost, time or facility).

When asked a similar question regarding what is needed to ensure local businesses can thrive, nearly 80% of respondents indicated people need to **shop locally to support the community**.

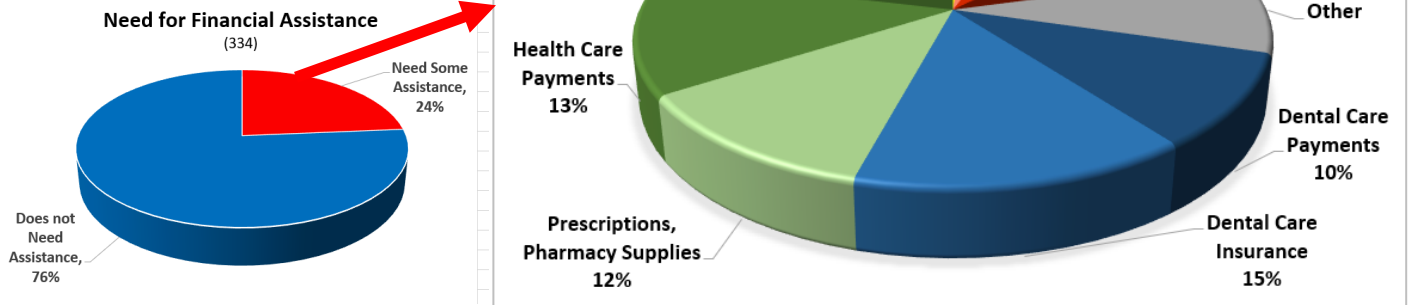


7. Respondents indicated that there has been some improvement on the community needs identified in the 2018 CHNA. Access to care (transportation) showed significant improvement, most likely as a result of the county purchasing a second transportation vehicle to serve the public needs.

Survey indications are that mental health issues remain relatively unchanged or have worsened in the past three years. Mental health continued to pop up as a top concern throughout the 2020 survey responses.

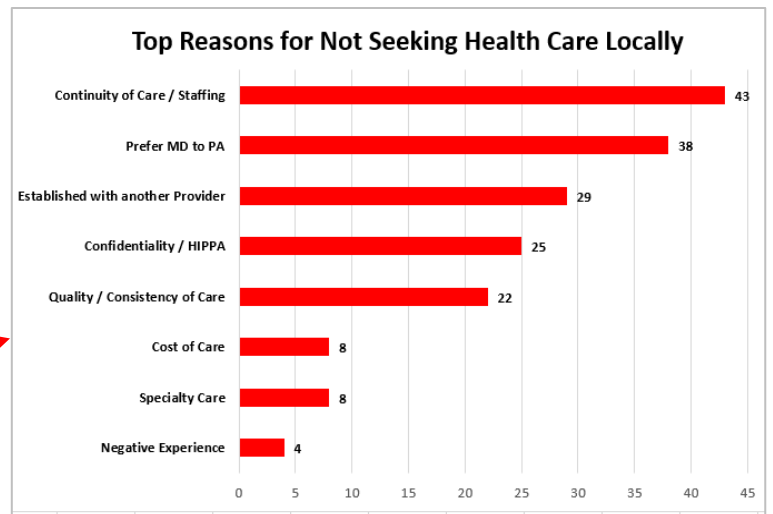
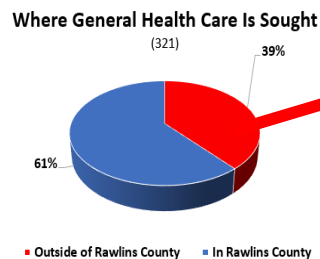
	Significantly Improved	Slightly Improved	No Change	Worsened	Unsure
Access to care (Transportation)	90 30.2%	76 25.5%	51 17.1%	2 0.7%	79 26.5%
Drug and alcohol abuse	5 1.7%	24 8.1%	112 37.7%	30 10.1%	126 42.4%
Elder care services	2 0.7%	53 17.8%	96 32.3%	28 9.4%	118 39.7%
Exercise / physical activity (obesity)	21 7.1%	92 31.1%	78 26.4%	12 4.1%	93 31.4%
High risk of heart disease and stroke	4 1.4%	47 15.9%	102 34.5%	10 3.4%	133 44.9%
Mental health / depression / suicide	8 2.7%	32 10.8%	94 31.8%	58 19.0%	104 35.1%

8. More than three quarters of respondents (76%) indicated they do not need or receive financial assistance. The remaining 24% indicated they need some type of assistance (46% are medical related payments – colored in green in the chart to the right; 25% are dental related payments – colored in blue).



Section 2: Delivery of Health Care Services

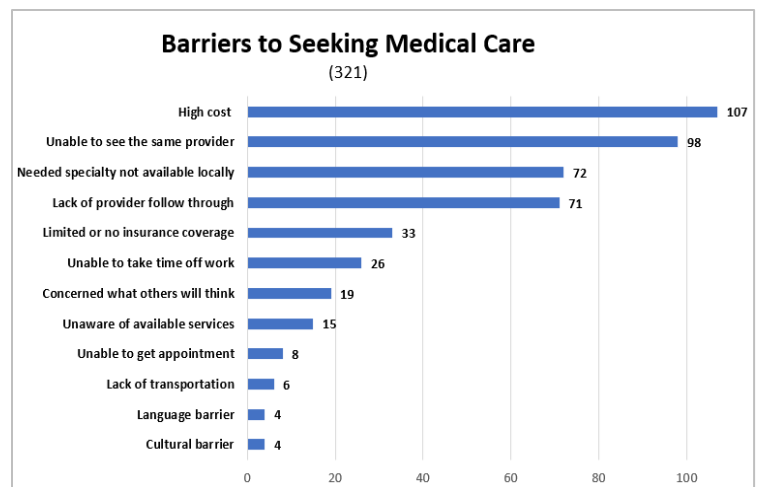
9. Regarding **Delivery of Health Care Services**, 61% of respondents indicated they seek general health care within Rawlins County. For the 39% of respondents that look outside of Rawlins County for health care services, the reasons provided were as follows in the chart to the right.



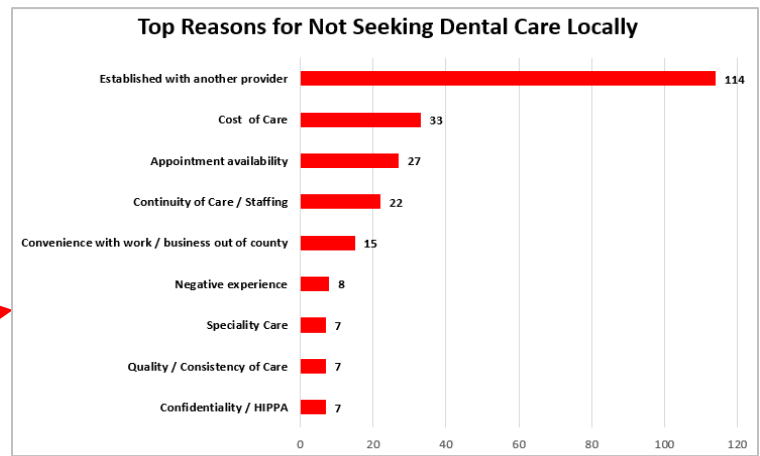
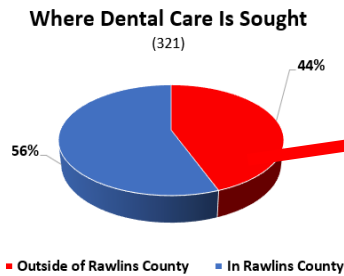
10. An overwhelming majority (70%) of respondents indicated there was some form of a **barrier that kept them or their family from receiving health care**.

Of those experiencing obstacles, 32% indicated the **high cost of co-pays, prescriptions or other health care services** keep them from seeking medical care, followed closely by not being able to see the same provider each time (consistency / continuity of care).

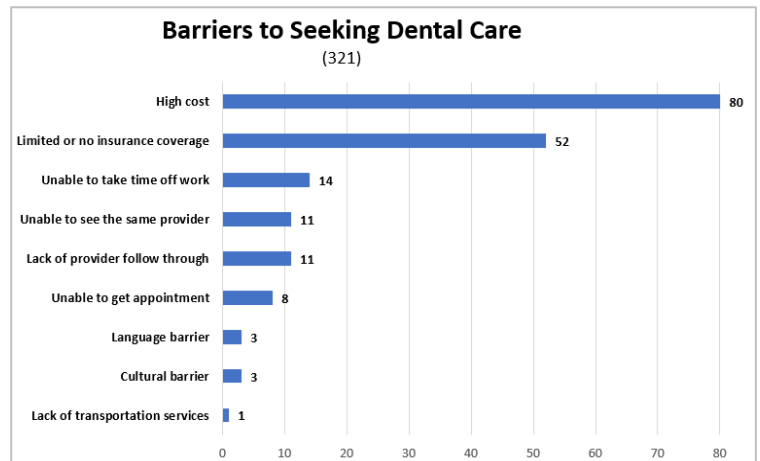
While the overall responses show a small number of **language and cultural barrier** responses, they represent 36% of the minority population that participated making it noteworthy.



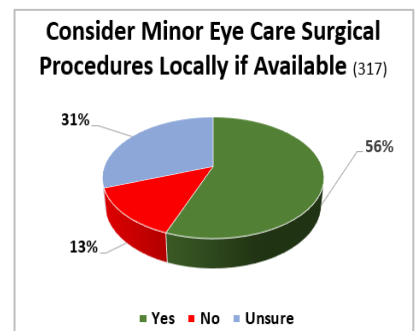
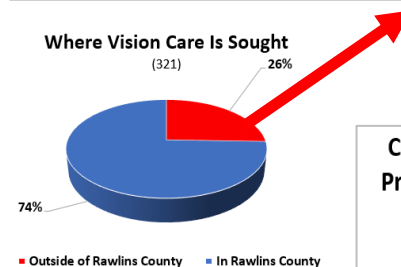
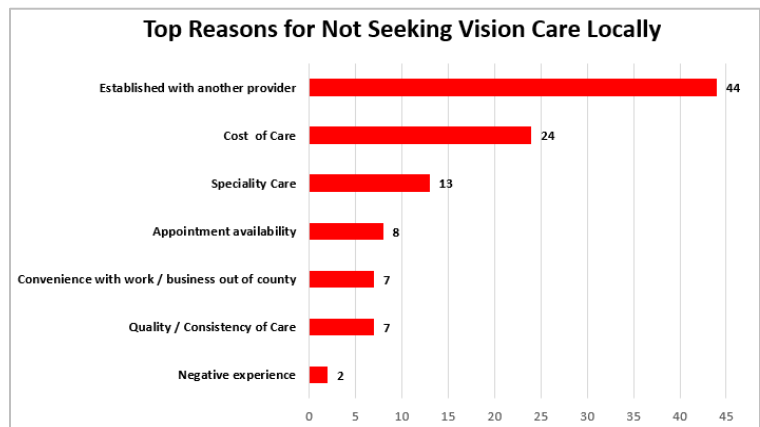
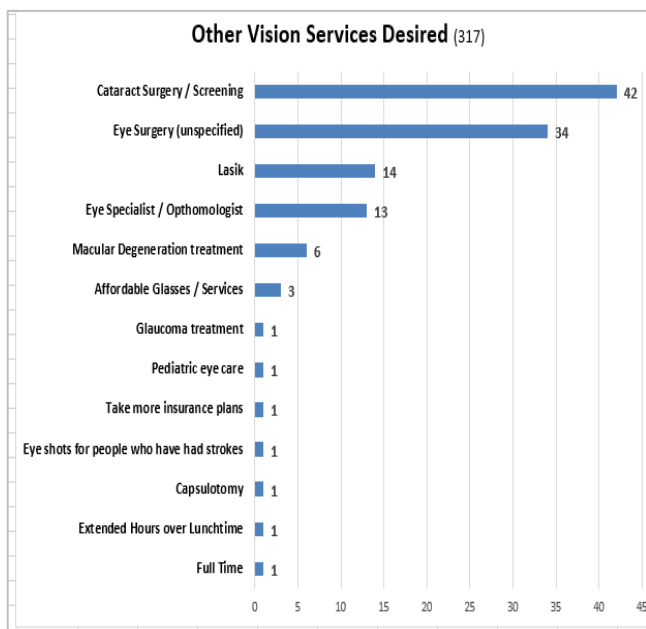
11. More than half of the respondents (56%) seek dental care within Rawlins County. Of the 44% that seek care outside the county, the reasons given are in the chart to the right.



12. Just over half of the respondents (54%) indicated they do not experience any barriers with regards to seeking dental care. Of the 46% that expressed some obstacle, 24% cited the high cost as a barrier followed closely by the lack of insurance.

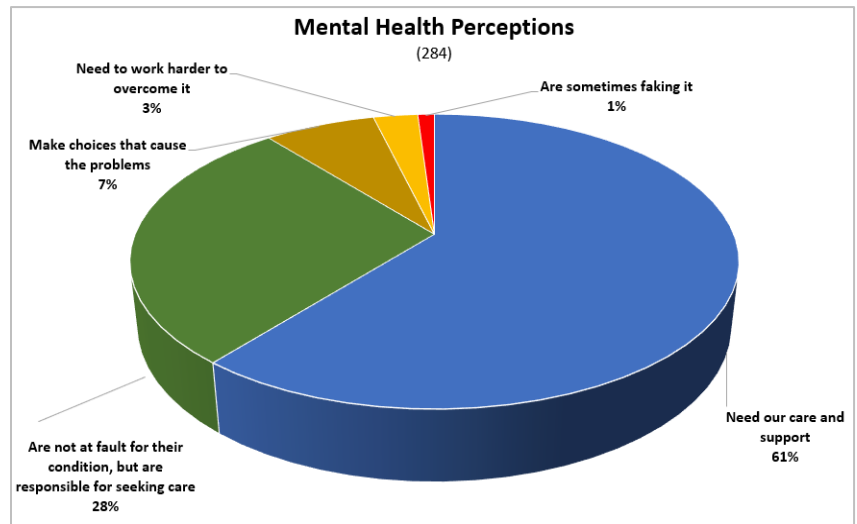


13. Nearly three-quarters (74%) of the respondents seek vision care within Rawlins County. Of the 26% that go outside of county for vision services, the reasons given are in the chart to the right.

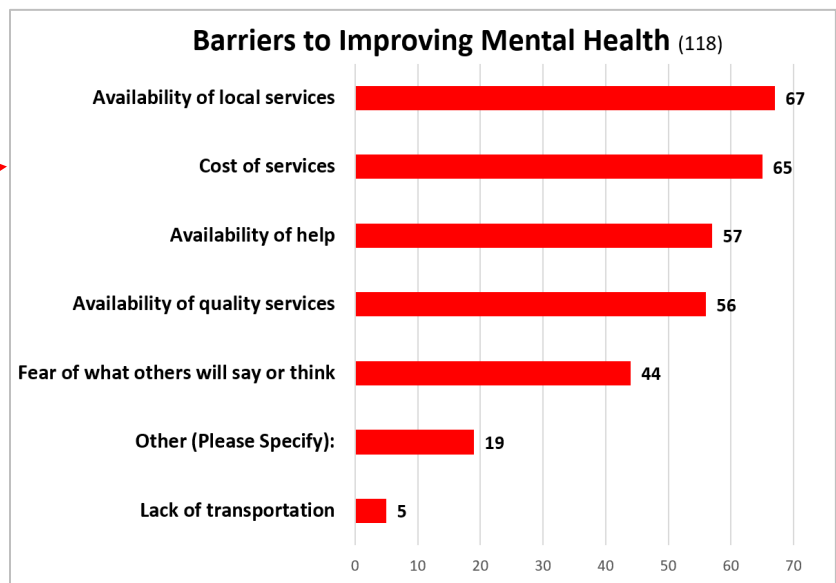
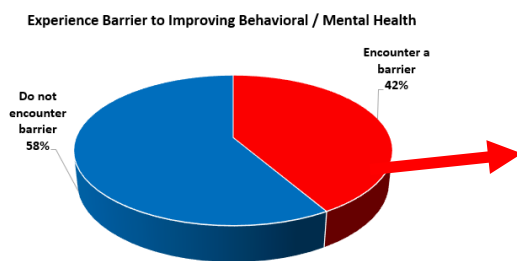


Section 3: Behavioral / Mental Health Care Services

14. With regards to perception of people with mental / behavior health issues, overwhelmingly most people (89%) responded that they are sympathetic and indicate these people need care and support.



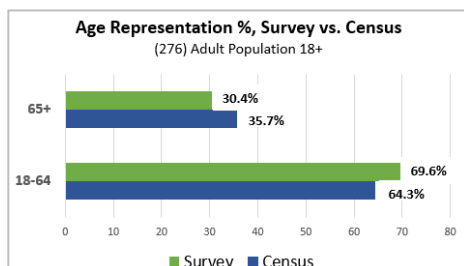
15. More than 40% of respondents indicated they struggle with improving behavioral / mental health. Availability of local services and the cost of service were evident barriers for improving behavioral / mental health.



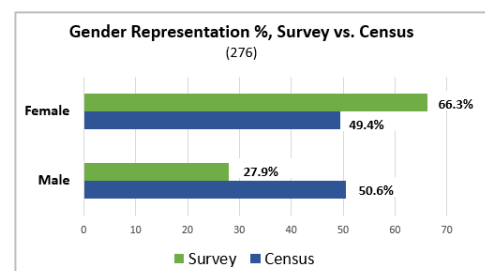
Section 4: Demographic Information

Respondents closely mirrored age groups and geographic locations within the county (based on zip code) compared to the actual population. Females were over-represented compared to census demographic information. The Hispanic / Latino / Latina population was under-represented despite efforts by the task force members to reach out to this population directly including providing a Spanish version of the survey both online and in hard copy.

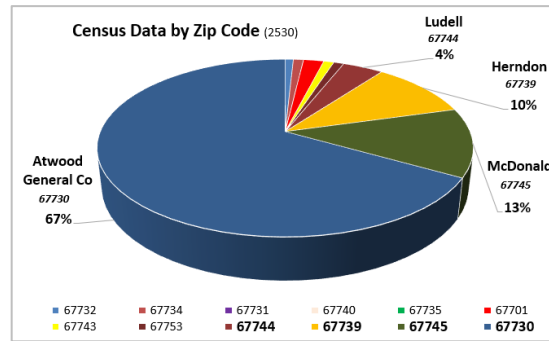
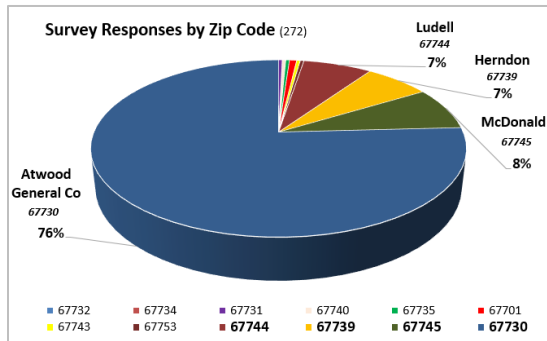
Responses by Age:



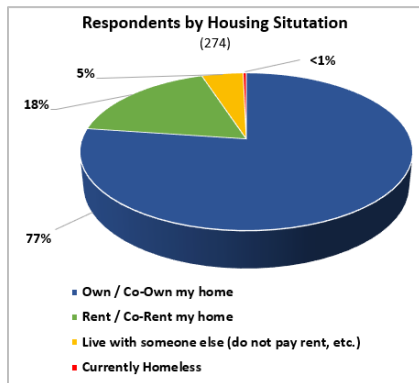
Responses by Gender:



Responses by Zip Code:

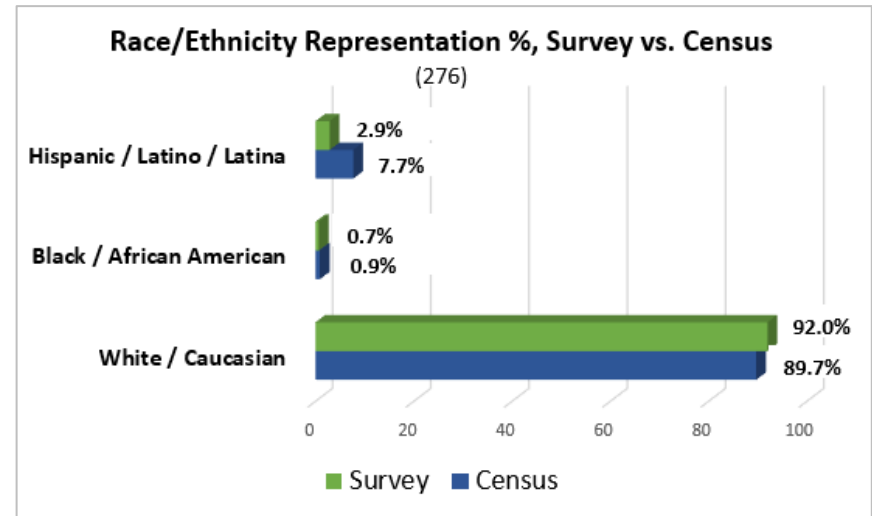
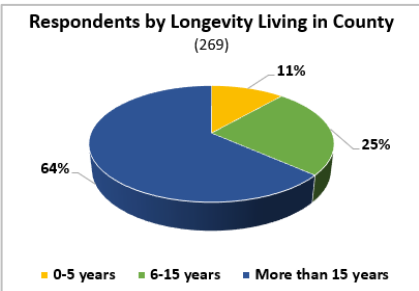


Responses by Housing Situation:

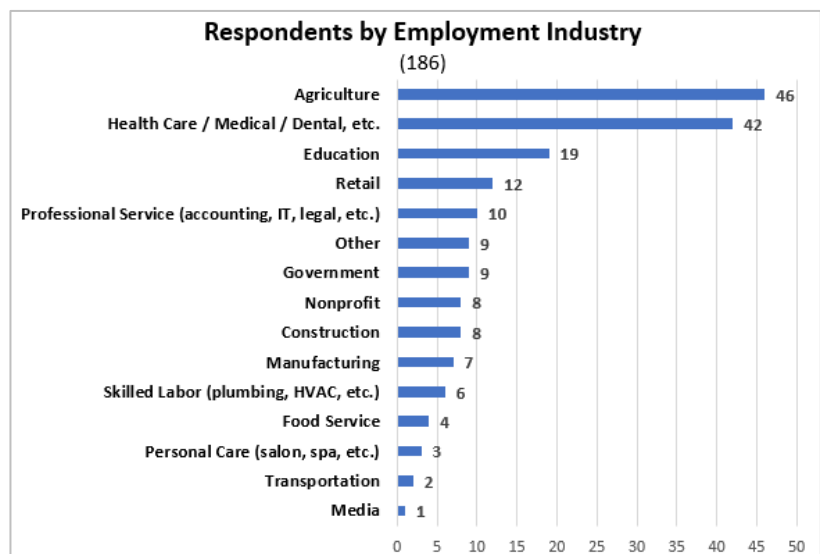
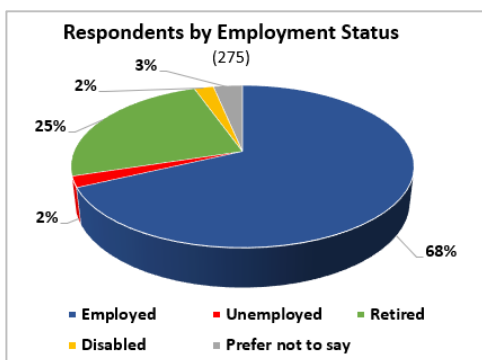


The average number of people per household for Rawlins County per the 2010 census data is 2.1 persons. The average number of people per household for those that responded to the survey is 2.69 persons.

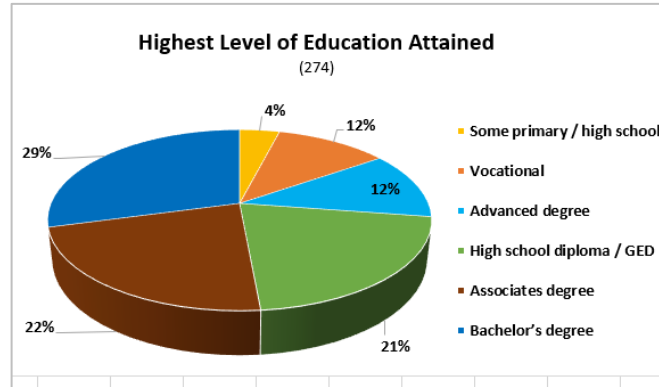
Responses by Ethnicity/Race:



Responses by Employment Status:

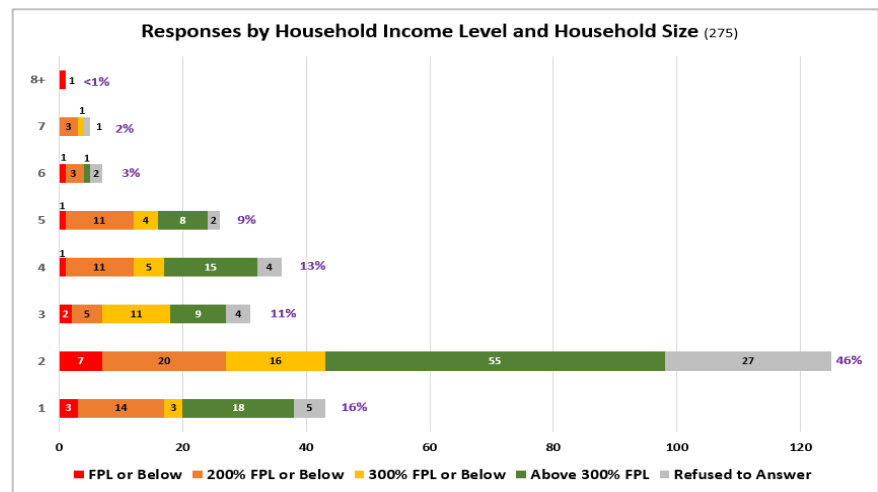
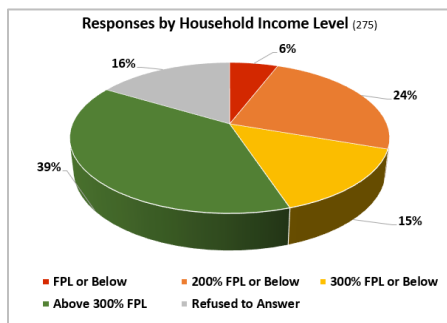


Responses by Education Level Attained:



Responses by Income and Household Size:

The Federal Poverty Level (FPL) is an economic measure, based on household size and correlating household income, which is used to decide whether the income level of an individual or family qualifies them for certain federal and state assistance programs. Those at or below the Federal Poverty Level generally qualify for Medicaid and Child Health Insurance Program (CHIP) benefits. **Generally, all households living at or below 200% FPL are considered to be families in need of assistance.** Some families living at or below 300% FPL are still eligible for some financial assistance programs including premium tax credits based on the Affordable Health Care Act. Households earning above 300% FPL are considered to be at a livable financial level with limited or no federal or state assistance.



Income Chart for Federal Poverty Level (FPL)

Size of Household	100% FPL	200% FPL
1	\$ 12,760.00	\$ 25,520.00
2	\$ 17,240.00	\$ 34,480.00
3	\$ 21,720.00	\$ 43,440.00
4	\$ 26,200.00	\$ 52,400.00
5	\$ 30,680.00	\$ 61,360.00
6	\$ 35,160.00	\$ 70,320.00
7	\$ 39,640.00	\$ 79,280.00
8+	\$ 44,120.00	\$ 88,240.00

Size of Household	300% FPL	> 300% FPL
1	\$ 38,280.00	Above
2	\$ 51,720.00	Above
3	\$ 65,160.00	Above
4	\$ 78,600.00	Above
5	\$ 92,040.00	Above
6	\$ 105,480.00	Above
7	\$ 118,920.00	Above
8+	\$ 132,360.00	Above

According to the 2010 US Census, 12.9% of the Rawlins County population lives at or below FPL. Survey respondents living at or below poverty were under-represented with just 5.8% responses.

However, 30.3% responded that they live at or below 200% FPL. According to Kansas Health Matters data, 32.3% of Rawlins County residents live below 200% FPL indicating the survey responses for those 200% or below FPL do mirror the actual population.

40% of respondents with only one person in the household indicated they are living at or below 200% of FPL.

Next Steps

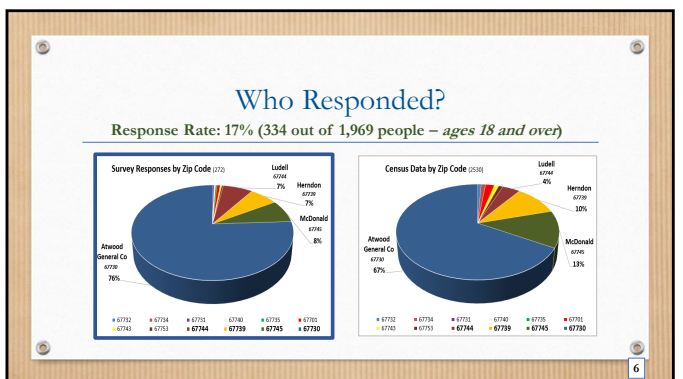
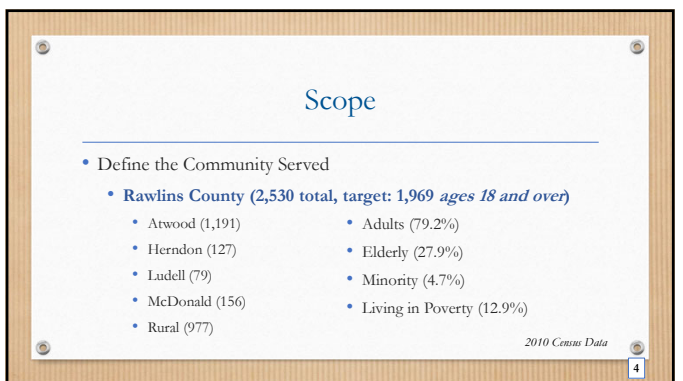
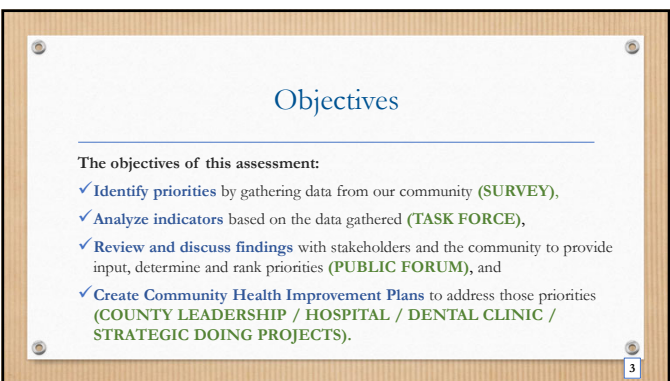
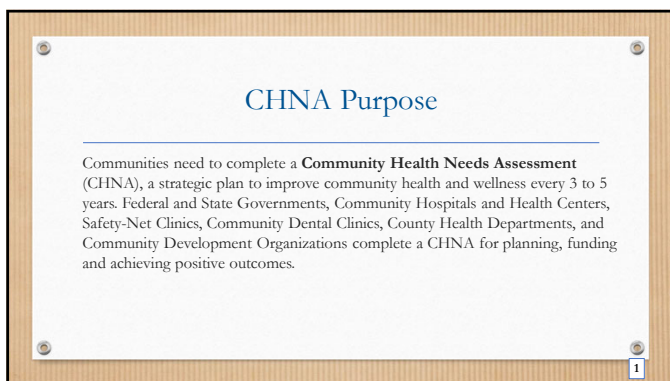
With the community health needs survey completed and results compiled, the next step in the Community Health Needs Assessment process was to seek input from the CHNA Task Force. The team met on February 17, 2021 to review these findings and establish potential priorities to share with the general public.

A Stakeholder Forum / Town Hall Meeting should be scheduled in March or April 2021 to present these findings to the community and seek input from stakeholders that represent a broad spectrum of the Rawlins County population. The purpose of the public forum is to determine overall priorities, resources needed to address those priorities, and action plans to tackle these community needs and concerns. Due to the Covid-19 pandemic, it will be necessary to include an online option to participate to ensure public safety.

Based on the Task Force review meeting and the public forum, a final report will be developed by the consultant. This CHNA report will be used to assist local health care leaders at the county, hospital/clinic, dental clinic, and other health care providers create action plans for improvement.

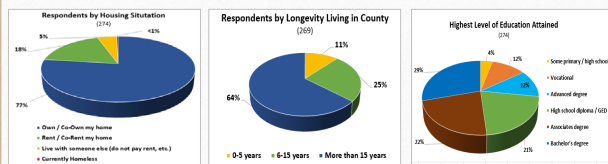
Results compiled by Carol Sloper, Consultant, Greater Northwest Kansas Community Foundation, PO Box 593, Bird City, KS 67731, 785-734-2406, carol@gnwkc.org.

Supporting Document E - Public Forum Presentation



Who Responded?

Average persons per household Census is 2.1, Survey 2.69



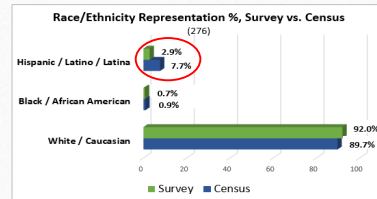
Census: 75.9% Own Home

Census: 24.1% Attained Bachelor's Degree or Above

7

Who Responded?

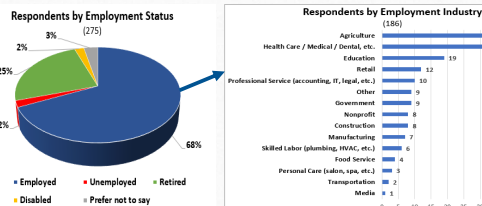
Survey was offered online / paper in Spanish and English



8

Who Responded?

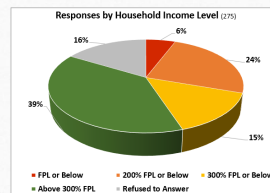
The average unemployment rate in Rawlins County at the end of 2020 was 2.2%
2.0% unemployed persons answered the survey



9

Who Responded?

30% of respondents are considered low income / vulnerable populations,
32.3% based on Census data are at or below 200% FPL



The FEDERAL POVERTY LEVEL is an economic measure that is used to decide whether the income level of an individual qualified them for certain federal and state benefits and programs.

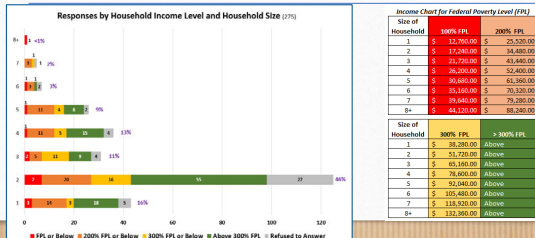
Generally, families living **at or below 200% FPL** are considered to be families in need of assistance.

Some families living at or below 300% FPL are still eligible for some financial assistance programs including the Affordable Health Care Act.

10

Who Responded?

40% of respondents with only 1 person in the household live at or below 200% FPL



11

How Did People Respond?

QUALITY-OF-LIFE factors for living in Rawlins County:

- Economic Factors - Retain Youth
- Liveable Wage Jobs
- Child Care Services

Top 10 Community / Environmental Health Concerns (334)



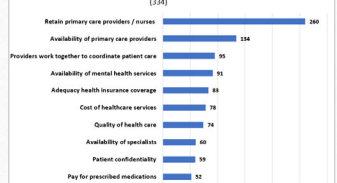
12

How Did People Respond?

HEALTHCARE DELIVERY factors for living in Rawlins County:

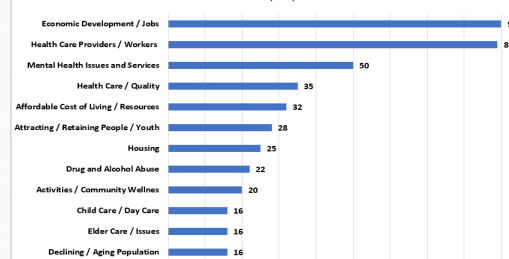
- Providers, Providers, Providers.
- Mental Health

Top 10 Concerns Regarding Delivery of Health Care Services (334)



13

Top 12 Responses to "Biggest Challenge" Facing Community (334)



14

How Did People Respond?

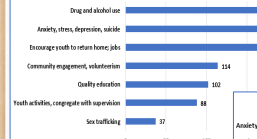
- Top **CONCERNS** of living in Rawlins County:
 - Attracting and Retaining Youth / Businesses; Decrease in Population; Shop at Home
 - Cost of Health Care / Living; Including High Taxes and Health Insurance
 - Health Care Providers / Staff (Retain, Recruit, Consistency, Availability, Quality)
 - Mental Health Services** (Local Availability and Cost); Including **Substance Abuse**
 - Elder Care Services**
 - Child Care Services
 - Confidentiality / Trust

* Top concerns also expressed in 2017 CHNA surveys.

15

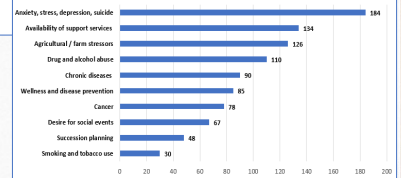
Concerns Based on Age of Population

Top Concerns Regarding the Youth Population



Mental health related issues **anxiety, stress, depression and suicide** are high on the list for both youth and adults

Top Concerns Regarding the Adult Population

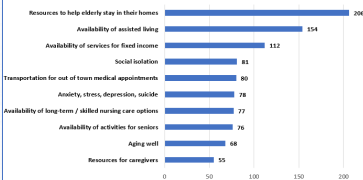


16

Concerns Regarding Elderly Population

For the elderly, the main concerns revolve around **remaining home, assisted living, and affordable living services**

Top Concerns Regarding the Elderly Population



17

Progress on 2018 CHNA Identified Priorities

	Significantly Improved	Slightly Improved	No Change	Worsened	Unsure
Access to care (Transportation)	90 80.2%	76 25.5%	51 17.1%	2 0.7%	79 26.5%
Drug and alcohol abuse	5 1.7%	24 8.1%	112 37.2%	90 10.1%	126 42.4%
Elder care services	2 0.7%	53 17.8%	96 32.3%	28 9.4%	118 39.7%
Exercise / physical activity (obesity)	21 7.1%	92 31.1%	79 26.4%	12 4.1%	93 31.4%
High risk of heart disease and stroke	4 1.4%	47 15.9%	102 34.5%	10 3.4%	133 44.9%
Mental health / depression / suicide	8 2.7%	32 10.8%	94 31.8%	58 19.0%	104 35.1%

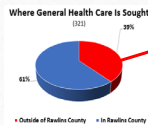
Based on respondent opinions,

- Mental Health Issues** continue to be an ongoing problem with a trend to **worsening**.
- Transportation** has improved most likely due to the County's public transportation program.
- Elder Care Services / Physical Activity** have experienced some **improvement** since the 2018 survey.
- Substance Abuse and Heart Disease / Stroke** have had remained **mostly unchanged**.

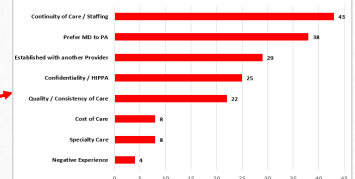
18

Delivery of Health Care Services

61% of respondents seek health care within Rawlins County.



Top Reasons for Not Seeking Health Care Locally



19

Delivery of Health Care Services

Description of going out of county and why:

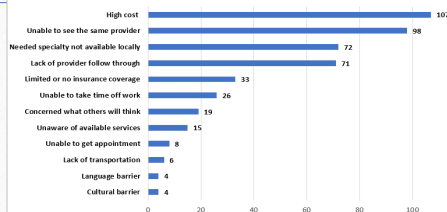
- The top 3 reasons (62.1%) for going out of county are **Provider or Medical Staff** related:
 - Continuity of Care (unable to see same Provider or lack of coordination of care)
 - Prefer a Medical Doctor, not Physicians Assistant
 - Established with a Provider out of county.
- Confidentiality** and/or HIPPA concerns (14.1%)
- Quality / Consistency of Care** (12.4%)
- Cost** was a factor for only 4.5%

20

Barriers to Receiving Health Care

70% of all respondents indicated they experience some barrier that keeps them from seeking medical care.

Barriers to Seeking Medical Care (321)



21

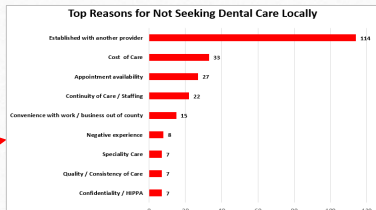
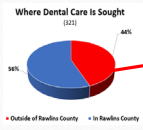
Barriers to Receiving Health Care

- Of the 70% that experience some sort of barrier to receiving health care, the top concerns were:
 - 32% indicated the **high cost of co-pays, prescriptions or health care insurance** keep them from seeking medical care,
 - 21% stated **not** being able to see the same provider each time keeps them from seeking health care (**consistency / continuity of care**).
 - While the overall responses show a small number of **language and cultural barrier** responses, they represent 36% of the minority population, making it noteworthy.

22

Delivery of Dental Care

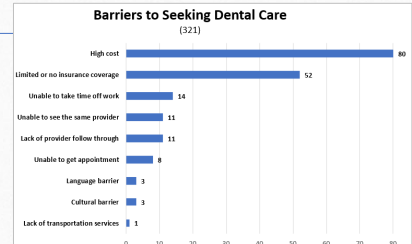
56% of all respondents seek dental care locally.



23

Barriers to Receiving Dental Care

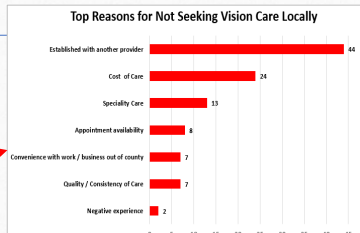
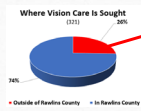
46% of all respondents indicated they experience some barrier that keeps them from seeking dental care.



24

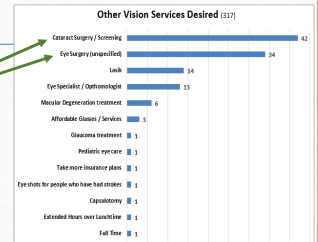
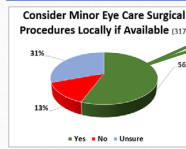
Delivery of Vision Care

74% of all respondents seek vision care locally



25

Local Vision Care Services



26

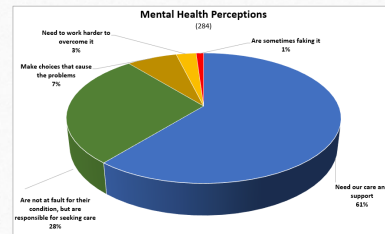
Financial Assistance Needs

32.3% of people in Rawlins County live below 200% FPL. 24% of respondents indicated they need some form of assistance.



27

Mental Health Stigma

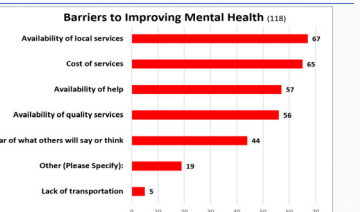
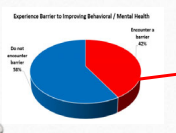


Most respondents felt empathetic toward those dealing with behavioral / mental health issues.

28

Access to Mental Health Services

42% of respondents indicated they encounter a barrier to improving mental health.



29

2018 CHNA

Response Rate: 8.9% (233 responses)

Top Concerns

Access to Care: Transportation

Drug and Alcohol Abuse

Elder Care Services

Exercise / Physical Activity: Obesity

High Risk of Heart Disease / Stroke

Mental Health: Depression, Suicide

2021 CHNA

Response Rate: 17.0% (334 responses)

Top Concerns

Economic Development: Attracting and Retaining Youth / Businesses, SHOP LOCAL, Affordable Housing

Health Care Providers / Workers: Retention, Recruitment, Quality, Availability, Coordination of Care (Consistency)

Mental Health Services: Local Availability, Quality, Cost, Substance Abuse Treatment

Elder Care Services: Keeping elderly home longer, assisted living, financial resources

Child Care Services: Availability / Quality / Affordable

Confidentiality / Trust: Building Community Trust, Communication

30

What Should the Priorities Be?



YOU DECIDE!

31

What Does This All Mean?



32

Supporting Document F - Strategic Doing Presentation

Introduction to Strategic Doing

Atwood, KS
March 24, 2021

Betty Johnson, CFRE
Lawrence, KS



What is Strategic Doing?

- used to develop & implement strategy
- based on collaboration and open networks
- asset based (using what you have)
- leads to shared, measurable outcomes and a roadmap to follow

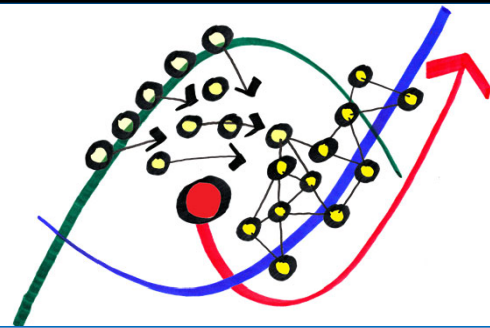
Creates hope through the power of taking action with assets or gifts we all ready possess, to tell a new story of opportunity and possibility, and it gives us the power to change our communities. Bob Brown, Flint, MI

Question: Who makes the iPhone?

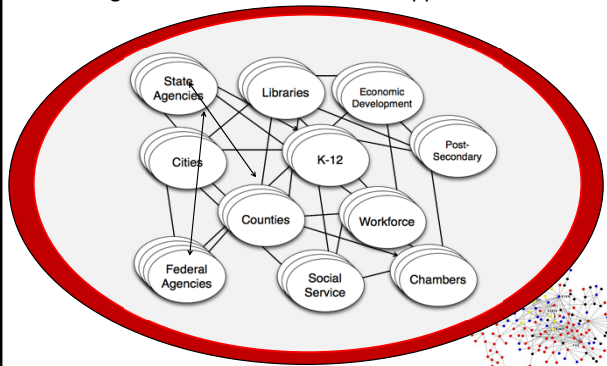


Answer:
A network led by Apple

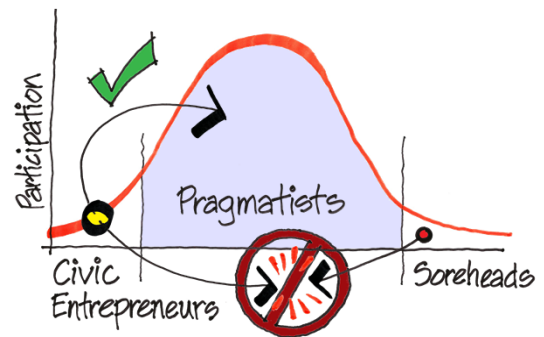
New networks can move older assets to new opportunities



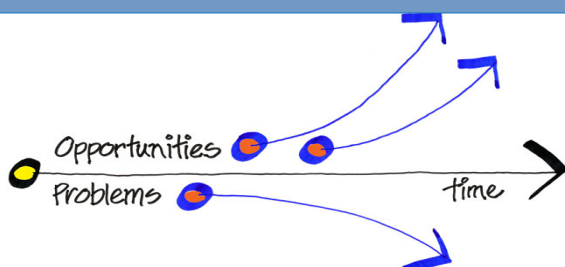
In today's networked world, we must link, leverage and align our assets to look for new opportunities.



Don't be stalled by soreheads



We move in the direction of our conversations



Transforming communities involves collaborating and connecting our assets and opportunities ...

To manage this transition,
Strategic Doing
was developed

What is Strategic Doing?

A discipline to guide open, loosely-joined networks.

Strategic Doing was designed to:

*develop complex collaborations quickly,
keep them on course,
promote continuous learning,
provide measurable outcomes.*

It is agile and adoptive.

It works for all size communities.

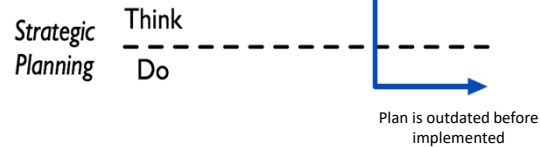
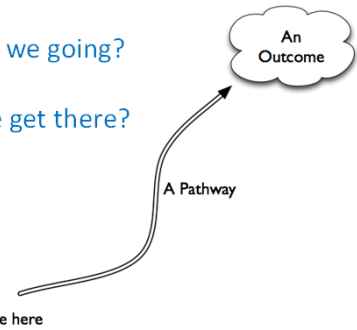


Strategy answers two questions:

1. Where are we going?
2. How will we get there?



We are here



Strategic Doing is a flexible, iterative process with fast cycles of thinking and doing to figure out “what works”. **It’s a process, not a project.**

The Strategic Doing process is simple, but not easy. It takes practice focused on these four key questions...



We then outline a project and an action plan that will move us to our outcome



Link Assets;
Leverage
Innovation

Easily said, but more difficult to put in practice.

Strategic Doing makes it easier and has worked for thousands of initiatives globally and in Northwest Kansas!



That’s it.....simple, right?

Welcome to Strategic Doing!



\$1

RAWLINS COUNTY

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SQUARE DEAL

"A Voice for New Frontiers"

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8 PAGES

PHONE: (785) 626-3600

ATWOOD, KAN. 67730

THURSDAY, APRIL 1, 2021

Community forum addresses needs survey

By Rosalie Ross

A group of community supporters from across the county gathered March 25 to review the results of the community needs assessment survey that was taken last fall.

Carol Sloper, from the Greater Northwest Kansas Community

Foundation, reviewed the data and statistics gathered from the survey. The survey itself was widely distributed across the county's adults 18 and over and there was enough response to provide adequate data for analysis of community needs.

Last fall, the top 12 responses to "Biggest Challenge" fac-

ing the communities were in descending order: economic development, health care providers, mental health services, health care quality, affordable cost of living resources, attracting and retaining people/youth, housing, drug and alcohol abuse, community wellness, child care/day care elder care and aging

population.

Six months later, an informal survey during the public forum Thursday revealed a shift in priorities with a need for mental health solutions topping the list. That was followed by economic development, child care, elder-

See FORUM, Page 3

Rawlins County Square Deal, Thursday, April 1, 2021

Page 3



Carol Sloper, left, and Betty Johnson confer after the public forum at the Columbian Hall March 25. The women were presenters at the Community Health Needs Assessment meeting to share the results of a county survey done last fall and to learn more about public priorities and assets and to plan for future improvements.

Photo by Rosalie Ross

Forum —

From Page 1

care and affordable housing.

Scott Chvatal, representing ACE Foundation, reviewed the history and data about the

dollar amount the foundation has collected and awarded in grants and donations.

Betty Johnson, a consultant for Dane G. Hansen Foundation, led a stimulating discus-

sion on "Strategic Doing." She challenged each person present to pick an area of interest and begin working on ways to bring about improvement.