



# **2019 Community Health Needs Assessment Crawford County, Kansas**

## **Ascension Via Christi Hospital in Pittsburg**

**Randy Cason, President**  
**Pete Mayo, Manager of Ministry Formation**  
**Renée Hanrahan, Community Benefit Director**  
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**Ascension Via Christi Pittsburg  
2019 Community Health Needs Assessment for Crawford County  
June 2019**

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**Approved by the Board of Directors on May 9, 2019**

## EXECUTIVE SUMMARY

### **Ascension Via Christi Hospital in Pittsburg Mission**

Rooted in the loving ministry of Jesus as healer, we commit ourselves to serving all persons with special attention to those who are poor and vulnerable. Our Catholic health ministry is dedicated to spiritually-centered, holistic care which sustains and improves the health of individuals and communities. We are advocates for a compassionate and just society through our actions and our words.

### **Vision**

We envision a strong, vibrant Catholic health ministry in the United States which will lead to the transformation of healthcare. We will ensure service that is committed to health and well-being for our communities and that responds to the needs of individuals throughout the life cycle. We will expand the role of laity, in both leadership and sponsorship, to ensure a Catholic health ministry in the future.

### **Purpose of This Community Health Needs Assessment**

The purpose of this Community Health Needs Assessment (CHNA) is to identify and prioritize the significant health needs of Crawford County served by Ascension Via Christi Pittsburg (AVCHP). The priorities which have been identified in this report by the community help to guide the hospital's leadership and other stakeholders in planning for community health improvement programs and community benefit activities. Additionally, these priorities will encourage collaborative efforts with other organizations that share in our mission and desire to improve community health. The objectives of this CHNA are to:

- Increase the understanding of the health needs and assets of the area;
- Build capacity through partnership development and collaboration in working toward improving health in the communities we serve;
- Align and integrate population health and community health improvement goals with mission, vision and strategic plans of the hospital; and
- Ensure those living in poverty and who are most vulnerable remain high in our focus as a moral priority for services.

This CHNA report also meets the requirements of the Patient Protection and Affordable Care Act in which not-for-profit hospitals must conduct a CHNA at least once every three years. This CHNA is being conducted a year early due to a special request from Ascension to have all CHNAs conducted in the same fiscal year.

## **Ascension Via Christi Hospital Pittsburg**

Ascension Via Christi Hospital Pittsburg (AVCHP) is a Catholic not-for-profit hospital founded by the Sisters of St. Joseph in 1903 where their legacy continues through the current staff and volunteers striving every day to make a difference in the lives of their patients they are privileged to serve.

Within the walls of the hospital, AVCHP offers 3D mammography services; a state-of-the-art surgical center which operates the da Vinci Robotic Surgical System; the Dr. M.K. Parsi Women's Center, which includes a level II nursery and central fetal monitoring system; the VC Heart Center, which, supported by the newly renovated Cardiac Stepdown Unit and catheterization lab; 24/7 Emergency Room, which is recognized as a Level III Trauma Center by the Committee on Trauma of the American College of Surgeons; and an extensive specialty service line which includes diagnostics, surgery, physical therapy and occupational health.

AVCHP is accredited by the Joint Commission on Accreditation of Healthcare Organizations and holds memberships in the American Hospital Association, the Kansas Hospital Association and the Catholic Health Association. The hospital is currently training associates to become a High Reliability Organization to increase safety for patients, visitors and employees.

## **Crawford County Community Profile**

The geographical area of Crawford County was chosen for this CHNA because that is where Ascension Via Christi Hospital in Pittsburg (AVCHP) is located and where the bulk of the hospital's patients live or work. Crawford County, located in Southeast Kansas, is considered a rural area. The population of Crawford County is around 39,200 people. The most populous city in Crawford County is Pittsburg. The county itself is located halfway between Kansas City, Missouri and Tulsa, Oklahoma and shares a rich history of coal mining with its neighboring counties and is still known for its mining today.

The population is 88.5 percent Caucasian, which is less diverse than the State of Kansas which reports 77.8 percent. The median household income for Crawford County is \$34,080 which is significantly lower than the \$48,844 reported for the State of Kansas. Crawford County and its surrounding neighboring counties, represent one of the poorest areas in the State.

## **CHNA Methodology**

The methodology adopted for this CHNA effort included secondary data analysis (e.g. United States Census Bureau, Healthy Communities, Robert Wood Johnson's County Health Rankings, etc.). There were personal interviews held with community leaders and two focus groups conducted in Crawford County with health care providers and others representing the broad interests of the community in the Fall of 2018.

The actual interview instrument is available in Appendix I of this report. The list of people participating in the one-on-one interviews or in focus groups, as well as the organizations they represented, is available in Appendix II.

## **CHNA Findings**

The top five significant needs identified by the 2019 CHNA participants included

- Mental health (Identified in 2017 CHNA)
- Drug abuse (Identified in 2017 CHNA)
- Alcohol abuse (Identified in 2017 CHNA)
- Diabetes (Inferred in 2017 CHNA but called out specifically in 2019 CHNA)
- Obesity (Identified in 2017 CHNA)

The process used to determine these priorities included the number of times an issue was identified as a community need through interviews and focus group discussions; whether the issue had been identified in a previous CHNA as a priority; assessing how many people are currently impacted by the issue; whether there is an opportunity for the hospital to intervene at a prevention level; whether other community organizations are already addressing the issue and whether AVCHP has the available resources and expertise to address the problem.

## **Available Community Resources**

While there are some available resources already in Pittsburg for the five top areas identified in the 2019 CHNA, focus group respondents and interviewees stated there are not enough to meet the growing demands and they are concerned for the long-term quality of life for those who are experiencing these issues and their families.

Currently in the Southeast area of the State of Kansas, the following organizations or governmental agencies are providing services addressing these issues, according to the United Way of the Plains' 2-1-1 guide.<sup>1</sup>

### **Mental Health Resources**

- Community Health Center of Southeast Kansas – Maternal & Child Health Department – 3011 N. Michigan, Pittsburg, KS 620.231-9873 – Case/care management, prenatal care, postpartum care, childbirth education, nutrition education, school-based teen parent/pregnant teen counseling.
- FACT (Families and Children Together) – 411 E Madison, Pittsburg, KS, 620.232.3228 - Substance use disorder counseling, mental health information/education, mental health screening, sexual assault counseling, parent counseling, child guidance, adolescent/youth counseling, individual counseling, family counseling, case/care management, attendant services for people with disabilities.

- Crawford County Community Mental Health Center – 911 E. Centennial, Pittsburg, KS; 620.231.5130 – Substance use disorder day treatment, substance use disorder counseling, mental health information/education; psychiatric medication services; psychiatric day treatment, psychiatric case management, psychological assessment, mental health screening, suicide prevention hotline, mental health hotline, suicide counseling, sexual assault counseling, psychiatric disorder counseling, general counseling services, individual counseling, family counseling, case/care management, attendant services for people with disabilities.
- Senior Behavioral Health –302 N. Hospital Dr., Girard, KS – 620.724.7288 - Outpatient and inpatient mental health facility.
- Wildcat District EFNEP – 667 South Hwy 69, Pittsburg, 620.232.1930. - Family counseling, parenting skills classes, prenatal care, breastfeeding support programs and nutrition education.
- Wildcat District Extension Office – 120 E Buffalo St., Girard, KS, 620.724.8233 – Family counseling, youth agriculture programs, nutrition education, general health education programs, and food production.

### **Drug and Alcohol Abuse Resources**

- Crawford County Community Mental Health Center – 911 E. Centennial, Pittsburg, KS; 620.231.5130 – Substance use disorder day treatment, substance use disorder counseling, mental health information/education; psychiatric medication services; psychiatric day treatment, psychiatric case management, psychological assessment, mental health screening, suicide prevention hotline, mental health hotline, suicide counseling, sexual assault counseling, psychiatric disorder counseling, general counseling services, individual counseling, family counseling, case/care management, attendant services for people with disabilities.
- FACT (Families and Children Together) – 411 E Madison, Pittsburg, KS, 620.232.3228 - Substance use disorder counseling, mental health information/education, mental health screening, sexual assault counseling, parent counseling, child guidance, adolescent/youth counseling, individual counseling, family counseling, case/care management, attendant services for people with disabilities.
- Women’s Center at Renewal House – 606 E Atkinson, Pittsburg, KS, 620.235.7180 – Substance use disorder counseling, inpatient substance use disorder treatment facilities, comprehensive outpatient substance use disorder treatment, case/care management.
- Elm Acres Recovery Services – 1102 S Rouse St., Pittsburg, KS, 620.231.5310 – Substance use disorder day treatment, substance use disorder counseling, drug use disorder education/prevention, alcohol use disorder education/prevention.

### **Diabetes and Obesity**

- Diabetes Prevention Program – 410 E Atkinson, Pittsburg, KS, 620.231.5411 – Diabetes management clinics.

- Crawford County Health Department – 410 E Atkinson, Ste A, Pittsburg, KS, 620.231.5411 – Provide tobacco use education/prevention, WIC, immunizations, public clinics, general health education programs, general physical examinations, lead poisoning screening, mammograms, breast examinations, blood pressure screening, communicable disease control, school-based teen parent/pregnant teen programs, and child care provider licensing.
- Community Health Center of Southeast Kansas – Maternal & Child Health Department – 3011 N. Michigan, Pittsburg, KS 620.231-9873 – Case/care management, prenatal care, postpartum care, childbirth education, nutrition education, and school-based teen parent/pregnant teen counseling.
- Wildcat District EFNEP – 667 South Hwy 69, Pittsburg, 620.232.1930. - Family counseling, parenting skills classes, prenatal care, breastfeeding support programs and nutrition education.
- Wildcat District Extension Office – 120 E Buffalo St., Girard, KS, 620.724.8233 – Family counseling, youth agriculture programs, nutrition education, general health education programs, and food production.

## **Conclusion**

All five of the health needs identified above are complicated, challenging and expensive issues to resolve. There are no quick fixes and no one agency is in the position to solve these issues without adequate resources from the state as well as the support and cooperation from the people who are directly impacted by these issues.

By working together with other community groups – State of Kansas, local law enforcement agencies, professional counselors, the not-for-profit community, health providers and others maybe some of the people who are impacted by these issues can make progress in their overall health through access to health care, affordable medications and health insurance, counseling, stable jobs with living incomes and affordable housing.

These problems are all interconnected and it will take an effort on multiple fronts to get positive results on the impact our efforts are having on the overall health of the community.

## INTRODUCTION

Access to health care is an important public health measurement that needs periodic monitoring to ensure effectiveness and quality of life for all residents. Community health needs assessments (CHNA) provide information for policy development which support community health efforts and impetus for change when needed.

Access to health care is one of twelve national Leading Health Indicators (LHI).<sup>2</sup> According to the Healthy People research, almost one in four Americans do not have a primary care provider or health center where they can receive regular medical services. In addition, approximately 20 percent of Americans are not covered by any form of medical insurance. As a result, these folks are at risk for serious health conditions and when they are sick enough, they enter the health care arena through the ER when their conditions are treated and may be costly.

Improving access to health care is a priority for AVCHP but there are numerous barriers to accessing health care services. The cost of health care, particularly for those without insurance, is the most frequently cited barrier. Even when people are covered by insurance, the deductibles are so expensive that many forego going to the doctor until it is necessary thus making it more difficult and challenging to treat their illnesses or chronic conditions.

By far, the most common barrier to accessing health care services is related to income. People living in poverty or who are living on very limited incomes are more likely to have poor health outcomes. Having access to affordable, high-quality and timely health care is critical in preventing the spread of disease and insuring good quality of life through all developmental stages.

So, beginning in 2010, Ascension Via Christi Hospital in Pittsburg has been involved in assessing the community needs in and around the Crawford County area on a periodic basis. Some assessments were conducted with other partnering organizations when possible and some were completed only by AVCHP due to the new requirements imposed by the Accountable Care Act (ACA). All assessments have been posted to AVCHP website [www.viachristi.org](http://www.viachristi.org) once they were completed; however, currently only the latest and immediately preceding assessments are located there now as required by the ACA.

This 2019 Community Health Needs Assessment (CHNA) is the fifth time that Crawford County has been studied with residents providing information and perceptions about the needs of Crawford County. This assessment, like most of the CHNAs before it, focuses primarily on the health needs given the mission of AVCHP. However, because health can be impacted by the quality of life one experiences in their neighborhood, people interviewed for this CHNA, as well as those who participated in the focus groups represent various professions and backgrounds.



## PURPOSE

The main purpose of conducting a community health needs assessment is to better understand the health challenges and health conditions of the residents that are living in and around the area where the hospital is located. Ascension Via Christi Pittsburg has used different methodologies in reaching out to the residents since it began conducting CHNAs in 2010 and it welcomes feedback from the community on the findings produced by each one of them on our webpage. In 2017, the CHNA involved using a survey in partnerships with County Health Departments representing the lower eight counties of Southeast Kansas. In 2019, AVCHP is focusing on Crawford County only since this CHNA is being done a year early at the request of Ascension Health (AH), and other partnering agencies were not available to participate at this time. AH goal is to try and get all hospitals under their umbrella to conduct CHNAs within the same fiscal year if possible.

## OBJECTIVES

The objectives of this community health needs assessment are:

- To better understand the health care needs of the Crawford County population,
- To involve professionals working with the poor and/or vulnerable in a community dialogue to garner a better idea what they are seeing and hearing from their clients on a day-to-day basis regarding their health status and quality of life challenges, and
- To assist the AVCHP leadership in establishing priorities based on the feedback gained from this research effort.

## ASCENSION VIA CHRISTI HOSPITAL IN PITTSBURG

Ascension Via Christi Hospital in Pittsburg is a healthcare leader in southeastern Kansas. In addition to the hospital in Pittsburg, Kansas, AVCHP has increased access to care for area residents within the last year with a joint venture clinic between AVCHP and Mercy Hospital in Joplin, Missouri. The clinic, adjacent to the hospital, offers primary care and immediate walk-in health care services.

In addition to opening a new joint venture clinic to take care of Crawford County residents, Via Christi Mercy Clinic the primary care specialists are focused in providing care to the entire family through wellness care, immunizations, school and sports physicals, treatment of acute illnesses and injuries and management of chronic health conditions. The clinic is open seven days a week and does offer immediate care services in addition to appointments.

Among the hospital's features are:

- 3D mammography services,
- 40,000-square-foot Surgery Center which includes state-of-the art technology, including robotic-assisted, minimally invasive surgeries with the da Vinci Robotic Surgical System,

- The Dr. M. K. Parsi Women's Center, which includes a level II nursery and central fetal monitoring system,
- The Via Christi Heart Center, which, supported by the newly renovated \$2.6 million Cardiac Stepdown Unit, features a state-of-the-art catheterization lab,
- The Emergency Room, which is recognized as a Level III Trauma Center by the Committee on Trauma of the American College of Surgeons,
- An extensive specialty service line, which includes diagnostics, surgery, physical therapy and occupational health.

Ascension Via Christi Hospital in Pittsburg is accredited by the Joint Commission on Accreditation of Healthcare Organizations and holds memberships in the American Hospital Association, the Kansas Hospital Association and the Catholic Health Association. The hospital is currently training associates for to become a High Reliability Organization to increase safety for patients, visitors and employees. Quality measurement data for Ascension Via Christi Hospital may be found at the Hospital Compare website.

(<https://www.medicare.gov/HospitalCompare/search.html>)

Other services offered in Pittsburg at the hospital include:

### **Emergency Room**

The ER at AVCHP offers high-quality medical services by physicians with specialty training in emergency and family medicine. It is equipped to handle all situations, from emergencies such as heart attacks, to other urgent illnesses and injuries. In addition to physicians who specialize in emergency medicine, physicians in other medical specialties throughout the Ascension community are available for consultation with the ER.



The ER is physician-staffed 24 hours a day, with physician assistants, nurses, technicians and other staff providing additional support. It is recognized as a Level III Trauma Center by the Committee on Trauma of the American College of Surgeons.

### **Ascension Via Christi Heart Center**



The Ascension Via Christi Heart Center, which, supported by a renovated \$2.6 million Cardiac Stepdown Unit, features a state-of-the-art catheterization lab. Heart and cardiac care at AVCHP allows residents of the region to receive quality diagnostic and interventional cardiac services without traveling far from home. Cardiology services at AVCHP includes: ambulatory blood pressure monitoring; cardiac event monitoring; cardiac rehabilitation; cardiac stress testing using standard Bruce protocols,

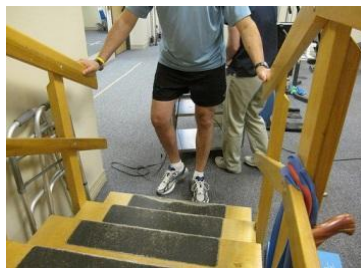
thallium and dual isotope exams and pharmacologic; echocardiogram; electrocardiogram; full-service catheterization lab testing for diagnostic procedures, stent placements, angioplasty and peripheral capabilities; holter monitoring and vascular ultrasound.

### **The Dr. M.K. Parsi Women's Center**

The AVCHP Dr. M.K. Parsi Women's Center gives women patients the best of both worlds. AVCHP offers advanced medical services and technologies, including a Level II nursery and central fetal monitoring system, to keep mother and child safe in a family-focused environment. The family-centered model includes: a homelike environment for labor delivery and recovery; state-of-the-art monitoring equipment for the safety of each new mom and her baby; a breastfeeding-friendly facility where a lactation consultant can assist the new mom with questions on feeding.



### **Physical Rehabilitation and Therapy**

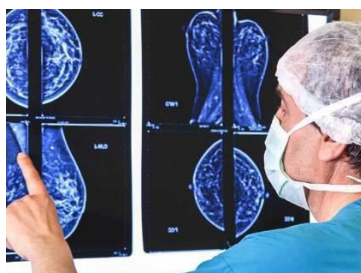


Rehabilitation services at AVCHP provide treatment for patients of all ages and diagnoses. Whether the patient is hospitalized, recovering in the inpatient rehabilitation unit, or receiving treatment on an outpatient basis, AVCHP rehabilitation team will help each patient regain as much independence as possible by rebuilding important skills and abilities lost due to illness, injury or disability. Services may include worker rehabilitation, pre-

employment screens, voice therapy, swallowing dysfunction, lymphedema, women's health, speech therapy, physical therapy, cardiac rehabilitation, occupational therapy or multiple types of treatment in addition to education, support and introduction of the latest equipment to augment each patient's quality of life.

The inpatient rehabilitation team works with patients who have been diagnosed with a variety of illnesses or injuries, including but not limited to: stroke, multiple trauma, orthopedic injury or surgery, joint replacement, neurological disorders, heart disease, arthritis, brain injury, amputation, Parkinson's, pneumonia, hip fracture or spinal surgery.

### **3-D Mammography Services**



Researchers suggests that the three-dimensional mammograms are better at picking up invasive tumors and avoiding false alarms than traditional breast cancer screening methods, based on a study of 13 United States hospitals. In the USA, 3D mammography has been available since 2011 and was originally approved by the Food and Drug Administration to be used along with standard,

two-dimensional digital mammograms. However, in 2013, the agency approved a 3D system can be used alone. The contrast between the two machines is the 3D scanner moves in an arc over the breasts, taking images from various angles to improve the doctors' ability to spot small tumors and reduce the number of false positives on tests.<sup>3</sup>

## CRAWFORD COUNTY DESCRIPTION

Crawford County located in Southeast Kansas is close to the Missouri and Oklahoma borders.

Map 1: Map of Kansas with Crawford County Boundaries Shaded



According to the 2018 United States Census estimates, the county has a total area of 590 square miles of land with a population of 66.4 people per square mile. In addition, there were 18,137 housing units with owner-occupied housing unit rate at 59.5 percent with the median value of owner-occupied housing units at \$87,300. The median gross rent for Crawford County is \$702.<sup>4</sup> The median household income for Crawford County (in 2017 dollars) was \$38,017. This was nearly \$17,500 less than what was reported as the median household income for all Kansans. In addition, 18.9 percent of the Crawford County residents are living in poverty compared to 11.9 percent in the State.

The racial composition of Crawford County in 2018 was 91.6 percent white, 5.5 percent Hispanic or Latino, 2.4 percent Black or African American, 1.2 percent American Indian or Alaska Native, 1.8 percent Asian, 0.3 percent Native Hawaiian and other Pacific Islander and 2.7 percent reporting multiple races.<sup>5</sup>

In 2018, there were 14,974 estimated households in Crawford County in which on average 2.5 people were living. Approximately six percent of the households identified that another language, other than English, was spoken at home although four percent identified they were born in a different country.

Approximately 21.7 percent of the population is under the age of 18 and 15.4 percent over the age of 65. In 2018, females represented 49.9 percent of the population compared to the 50.1 percent of their male counterparts. In the last 18 years, the population of Crawford County has increased by 0.4 percent compared to the State which increased by 8.3 percent during the same time. The County's total population projection for 2018 is 39,034.

The education achievement of residents living in Crawford County is slightly lower than those living in the State of Kansas as 90.3 percent reported graduating from high school compared to 90.5 percent for State residents and 28.9 percent reported having a bachelor's degree or higher compared to 32.3 percent for the State.

According to 2018 Quick Facts, 12 percent of the Crawford County residents, under the age of 65, live with a disability compared to 8.8 percent for the State of Kansas. In addition, 11.4 percent of Crawford County residents, under the age of 65, reported having no health insurance coverage compared to 10.2 percent for the State.

## **COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) METHODOLOGY**

### **Description of CHNA Process and Methods**

The 2019 Community Needs Assessment conducted by Ascension Via Christi Hospital Pittsburg centered on one-on-one interviews and focus groups. This method was chosen because one-on-one interviews allow you to go much deeper into topic areas and focus groups are a good way to exchange viewpoints and discuss disagreements between varieties of people representing differing opinions. Conducted in the fall of 2018, the interviews and focus groups included individuals representing businesses, healthcare providers, government agencies, school districts, faith communities and not-for-profits Crawford County. Previous assessments included survey research and shared partnerships with area Health Departments and other not-for-profit organizations. But taking the findings from previous CHNAs and diving deeper into some of the consistent issues was thought to be an important step in identifying possible solutions. The results from this effort as well as the previous CHNA can be seen in the following website - <https://www.viachristi.org/about-via-christi/mission/community-benefit>.

### **Data Collection**

The 2019 CHNA gathered data from three major sources:

- Secondary data collected by others but shared in written reports or articles available for download from the internet were used when appropriate. All sources used for this part of the analysis have been identified in the footnotes.

- Notes taken during one-on-one interviews with area residents representing business, government leaders, caregivers, school leaders, retirees, parents, and not-for-profit representatives. Notes were also gathered during the focus group discussions with law enforcement, not-for-profits, school social workers, elected officials, representatives from community coalitions and others.

The primary purpose of this CHNA is to help AVCHP and others identify and prioritize the significant health needs of Crawford County. The priorities identified in this report will help to guide the hospital's leadership in assessing their community health improvement programs and community benefit activities, as well as its collaborative efforts done in conjunction with other area organizations that share in the mission to improve community health.

This CHNA also meets the reporting requirements of the Patient Protection and Affordable Care Act that not-for-profit hospitals conduct a community health needs assessment at least once every three years and makes it publicly available for others to review and use. Outside secondary data resources are used to supplement the CHNA analysis and focus group participants brought experience and perspectives on the needs of underrepresented segments of the community.

## COMMUNITY HEALTH NEEDS ASSESSMENT FINDINGS

### **Question 1 – What are the factors that make for a healthy community?**

In response to the question what people believe are the most important factors in making a community healthy, the majority responded good jobs, access to health care, good schools and low crime statistics making for a safe neighborhood.

Through directed discussions regarding what constitutes a “good job” most respondents stated receiving a living wage for the type of work produced. Many cited that employers used to cover a larger portion of the health insurance cost but because of the increase in insurance costs, those increases are passed down to employees through higher deductibles resulting in less disposable incomes.

During this discussion, transportation came up as well. People see that there is currently some transportation provided for medical appointments but trying to find affordable transportation to the county seat for court appointments or mental health treatments and/or addiction services in neighboring communities can be both costly and challenging to find.

Other characteristics of a healthy community identified by interviewees included affordable child care, food and housing, access to specialized emergency services and timely health services, nice environment with more trails, and development of a community-wide culture of making healthier choices.

Several interviewees believe that people don't know enough about how their food selection choices will impact their health as they age. Being overweight and choosing an inactive lifestyle is leading more people to obesity and ultimately for many to diabetes. However, interviewees recognize that people living on fixed incomes may not be able to afford fruit and vegetables or worse may have to choose between healthy foods or paying rent, utilities or medications.

Some discussion suggested that there needs to be more outreach effort to take services to where the targeted populations congregate. For example, the schools are being challenged by behaviors they have not experienced before that is affecting student lives and their school performance. So, some believe that better outcomes might be achieved if mental health care providers were located within the schools where services could be provided at the right time instead of parents having to get off work for a scheduled appointment at a different location.

Table 1 shows the changes in non-healthy behavior indicators that have been tracked by *County Health Rankings and Roadmaps*, Robert Wood Johnson Foundation for both 2013 and 2018 reports. These statistics are concerning when you look at the lifestyles of Crawford County residents and how they are continuing to negatively impact residents even though the area of Clinical Care has shown remarkable improvement over the previous five years.

**Table 1: Health Behaviors and/or Outcomes for Crawford County, Kansas  
2013 and 2018 Comparison<sup>6</sup>**

Rankings Areas	Crawford Co	
	2013 (102)	2018 (103)
Health Outcomes	81	82
Health Factors	88	92
Health Behaviors	87	92
Clinical Care	60	29
Social & Economic Factors	91	92

According to the researchers at Robert Wood Johnson Foundation (RWJF), Crawford County ranked 92nd out of 103 Kansas counties in outcomes for health factors, health behaviors and social and economic factors in 2018. This ranking is near the bottom of the heap when it comes to Kansas counties and what is really puzzling is that Crawford County ranked 29<sup>th</sup> out of 103 counties in Clinical Care. This latter ranking shows that there have been some major improvements in the level of clinical care during the last five years, but this hasn't had much influence on other health rankings.<sup>7</sup>

The uninsured population decreased from a high of 18 percent in 2013 to 11 percent in 2018. The number of primary care physicians to patients' ratio improved going from 1,631:1 in 2013 to 1,270:1 in 2018. The number of preventable hospitalization stays decreased from 99 in 2013 to 56 in 2018.<sup>8</sup>

Table 2 shows some of the significant changes observed in the categories where Crawford County has made good progress. During this five-year period no change has been reported for people categorizing their health as poor or fair (17%); adult obesity (35%); or physical inactivity (28%)<sup>9</sup>

While some areas have shown some improvement, there is still a lot of opportunity for not-for-profit organizations which support healthy behaviors, to work together to have a better quality of life for all.

**Table 2: Five Year Health Comparison of Health Behaviors and/or Outcomes for Crawford County Reporting Negative Measures<sup>10</sup>**

<b>Health Behaviors and/or Outcomes Measures</b>	<b>2013</b>	<b>2018</b>
Poor physical health days	3.4	3.5
Poor mental health days	3.4	3.8
Excessive drinking	15%	17%
Sexually transmitted infections	279	371.6
Children in single-parent households	28%	30%

**Table 3: Five Year Health Comparison of Health Behaviors and/or Outcomes for Crawford County Reporting Positive Measures<sup>11</sup>**

<b>Health Behaviors and/or Outcomes Measures</b>	<b>2013</b>	<b>2018</b>
Low birthweight	7.9%	7.0%
Adult smoking	20%	19%
Teen births	41	29
Uninsured	18%	11%
Diabetes monitoring	83%	86%
Mammography screening	58.9%	60.0%
Mental health providers	1,506:1	500:1
High school graduation rates	81%	86%
Some college	67.4%	70.0%
Unemployment	7.7%	5.0%
Children in poverty	27%	23%
Violent crime incidents	403	320

## **Question 2 - How is Ascension Via Christi Hospital in Pittsburg in addressing social determinants?**

The responses to this question were varied but one theme that consistently came through is that Ascension Via Christi Pittsburg (AVCHP) was typically at the discussion table brainstorming with other not-for-profits and government agencies on how best to address the issues being raised.



Some interviewees and/or focus group participants gave concrete examples (e.g. coordination of CareVan, provision of specialists with the Community Health Center of Southeast Kansas, actively participating on community coalitions like Aging and Living Well, providing volunteer support to the Lord's Diner and Meals on Wheels, hospital leaders actively attend and participate on community boards and committees, consistently partnering with the Family Resource Center in providing healthy food to the children attending child care within that facility, etc.)

Many more examples were given on how AVCHP is working cooperatively with the community in addressing health and social needs, but some also gave suggestions on how AVCHP could do a little more. For example: offering health fairs on a periodic basis; developing resources which can assist people in knowing where to go when help is needed; providing information on Juuls so youth and parents so they know the dangers in using them, and better promotion of free educational opportunities within the Crawford County area.

**Question 3 – The 2017 CHNA identified mental health, cancers, heart disease/strokes, aging problems and diabetes as the top five health problems in and around Crawford County. Which of these two areas concerns you the most and why?**

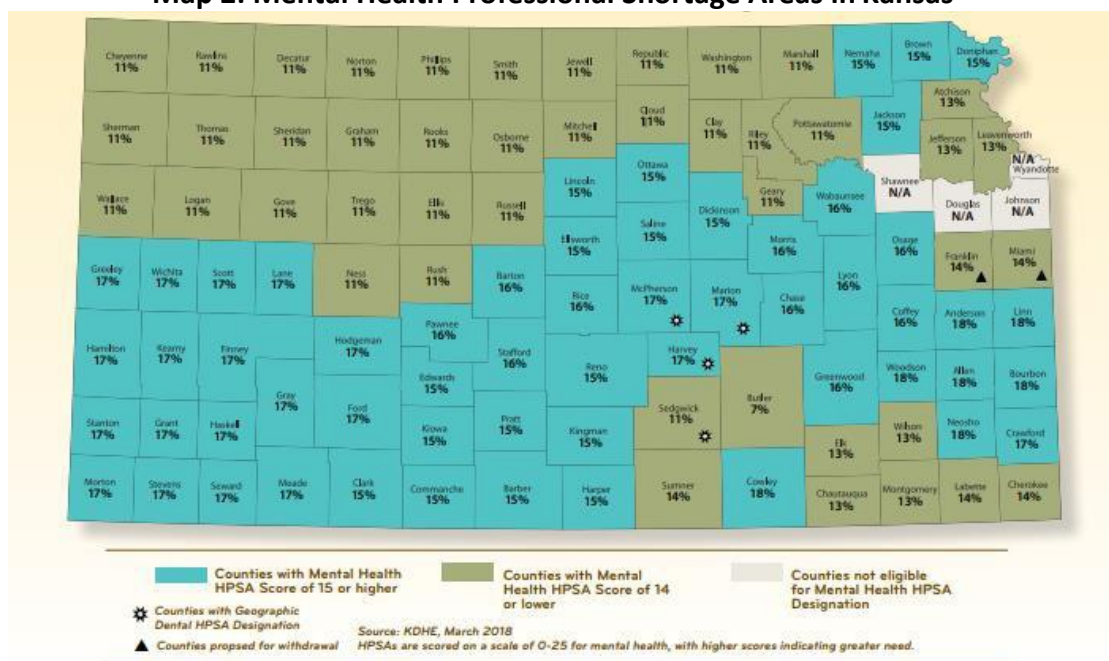
Over 94 percent of the interviewees and/or focus group respondents are most concerned about **mental health** related issues with diabetes coming in second at 47 percent. Interviewees and focus group participants stated that Crawford County used to have a homeless shelter, but funding was lost so the homeless have no place to go and end up taking up residency on the streets or in vacant buildings.

Crawford County does offer opportunities for family, friends, as well as the mentally ill to learn more about mental illness on a regular basis. Here are just two examples identified during this CHNA effort:

- Families and Children Together Inc., along with other community partners, held their second annual mental health awareness day event at Pittsburg State University in October and offered free lunches, games for the children attending, information booths and vendors, door prizes and raffles to promote more awareness and understanding regarding mental health issues. The event was reported a success and the not-for-profit are planning to hold a similar event in 2019.
- Adult Mental Health First Aid is a class offered by the Crawford County Mental Health Department for a nominal fee. In this class, attendees learn a 5-step action plan to offer initial help to people with the signs and symptoms of a mental illness or in a crisis and connect them with the appropriate professional, peer, social group or self-help care. This class has been taken by law enforcement officers, hospital staff, family members and others who are concerned about dealing with those who may be in crisis and need outside assistance.

According to the Kansas Health Foundation, 18.2 percent of Kansas adults (or 387,000 people) experience mental health problems every year.<sup>12</sup> In addition, a little more than five out of every 1,000 children and adolescents (under 18) have received a mental health diagnosis.<sup>13</sup> Most of Kansas is in a Mental Health Professional Shortage Area, Crawford County rated a score of 17 (0-25) when it comes to mental health coverage. See Map 2 to see how Crawford County compares to other Kansas counties when it comes to mental health professionals. In Kansas alone, untreated mental illness is associated with an estimated 128 suicides, 21,000 incarcerations, and 29,000 unemployed adults at a cost of nearly \$429 million per year.<sup>14</sup>

**Map 2: Mental Health Professional Shortage Areas in Kansas<sup>15</sup>**



While drug/alcohol abuse prevention and treatment were not a choice given in this question, several interviewees and focus group participants raised the issue in their response to this question because of what they have witnessed or heard from family and friends. Some also tied the use of drug/alcohol abuse to the mental health issue citing that when people are brought into the Emergency Room for an overdose, the ER staff is not specifically trained to deal with this population and yet there is no alternative.

Several felt that Crawford County needed a homeless shelter, an additional food pantry, a mental health treatment center and a detox center. One individual suggested that they have seen multiple generations of the same family suffering from mental illness due to drug abuse and that these families are having large families who in turn are reenacting the behavior of their parents and grandparents. They felt like the current welfare system makes babies a cash cow as more than 50 percent of births are to unwed mothers.

Kansas has an obesity rate of 31.2 percent. This percentage is the 22<sup>nd</sup> highest in the nation. While obesity is typically seen to be greater in populations who are low income and less educated. Statistics on Kansans who are obese do not dramatically support that hypothesis. There is little difference between households making less than \$15,000 to just under \$50,000 when it comes to obesity. However, the higher the income over \$50,000 the percentage of obese households does decline.<sup>16</sup>

### Map 3: Percentage of Obese Adults by Kansas County<sup>19</sup>



**Cancer** was selected by nearly 30 percent and **heart disease** by almost 18 percent of those interviewed or participating in a focus group as a major concern because those issues tended to run in their families or the families of close friends. When looking at statistics for Crawford County, the incidence of diagnosis of cancers, as well as deaths related to cancers, are higher than for Kansas or the United States. See Graphs 1 and 2.<sup>20</sup>

**Graph 1: Deaths from Cancer (Malignant Neoplasms)**



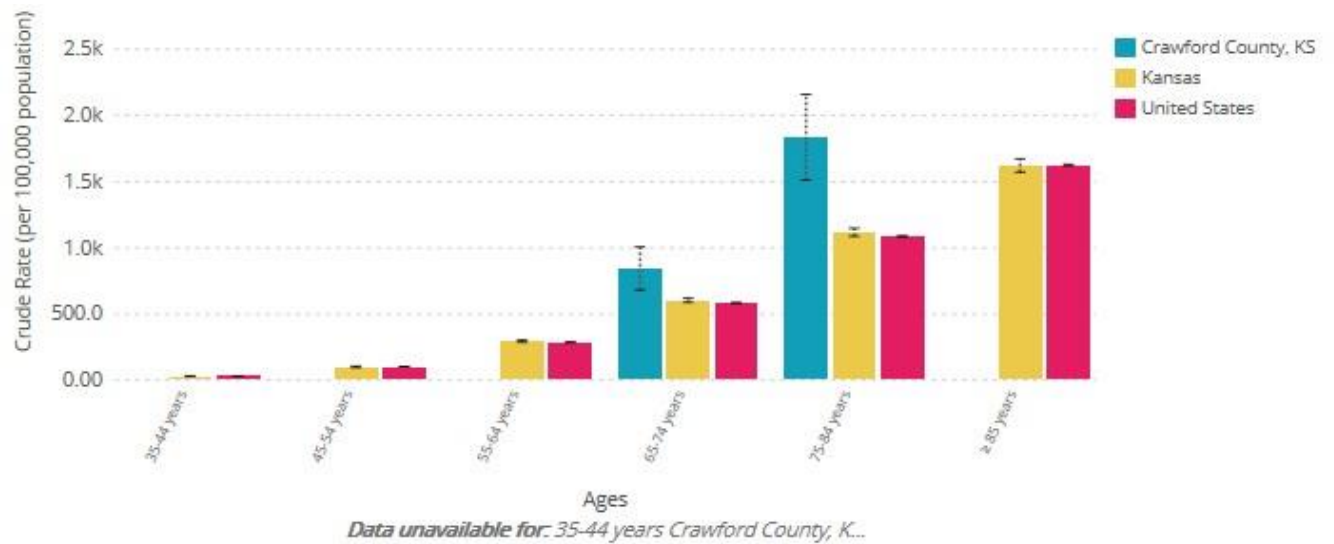
Overall, deaths from cancer are showing a decline, however, the incidence rate of new cancer cases has remained relatively stable. Over the past decade of available data, cancer incidence for men decreased by about two percent but remained stable for women. The decline in men may be due to reduced smoking and more men participating in prostate screenings.

When looking at the effects age has on cancer morbidity, one can see that cancer disproportionately affects the elderly. While many young people also die from cancer, it is rare when compared to the total population in the United States. See Graph 2 below.<sup>21</sup>

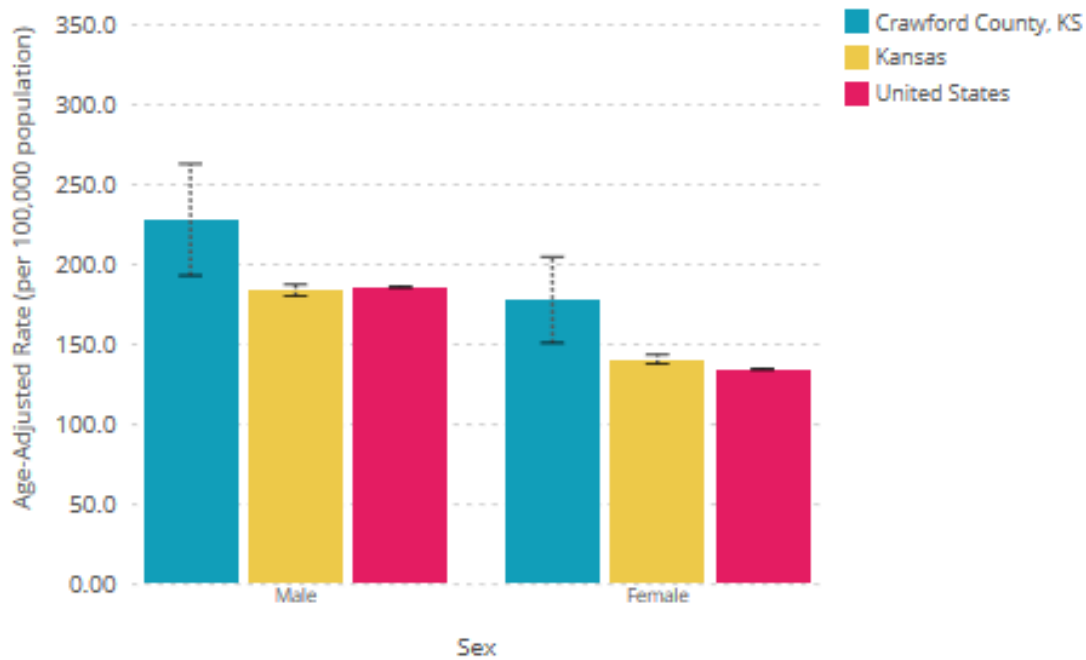
Nationally, research shows that men are more likely to die from cancer than women. In 2016, 185 men per 100,000 died from cancer; for women, the rate was 134 deaths per 100,000. See Graph 3 for a breakout of Crawford County which clearly shows how Crawford County seems to have higher rates by gender.

**Question 4 – There were four major areas of concern identified by the regional work groups of the 2017 community survey (chronic disease, mental health, drugs and alcohol abuse and obesity). Which of these four areas do you believe are the top two focus areas and why?**

**Graph 2: Deaths from Cancer (Malignant Neoplasms) by Age (2016)**



**Graph 3: Deaths from Cancer (Malignant Neoplasms) by Gender (2016)**



Again, mental health was identified as the number one issue that the community should be focused on while drug abuse was a close second. See Table 4 for specific breakout by focus area.

**Table 4: Areas which should remain as Crawford County's Top Two Focus Areas**

Focus Area	% of Responses
Mental Health	82.35
Drug Abuse	76.47
Alcohol Abuse	58.82
Obesity	35.29
Chronic Disease	17.65
Other	29.41

One of the major reasons mental health and drug abuse is so high is the growing and escalating problem being seen in Crawford County with methamphetamines (meth) and opioids. According to the Kansas Department of Health and Environment, there were 35 overdose deaths in 2000 attributed to opioids. In 2016, that number climbed to 159 throughout the State in Kansas.<sup>22</sup>

There were a couple of interviewees who suggested they are aware of an increase in marijuana, meth and opioid use at the local college. In fact, it was suggested that the use of marijuana is no longer thought to be dangerous by most college-age students since it is becoming legal in so many other states. The students feel like recreational use of marijuana is akin to beer parties held on weekends by previous generations.

In looking at mental health in Kansas, it appears that the percentage of adults who reported their mental health was not good continues to climb. In the 2018 United Health Foundation's Annual Report, it suggested that in the past three years, frequent mental distress increased 24 percent from a low of 9.2 percent to 11.4 percent of adults in Kansas.<sup>23</sup>

"Poor mental health days" refers to the number of days in the past 30 days where adults reported their mental health was not good. The healthiest mental health state appears to be Minnesota reporting 3.0 days of poor mental health days out of 30 for their adults. The least healthy state is West Virginia which is reporting 5.2 days. Adults in Kansas are reporting 3.7 days in 2018.

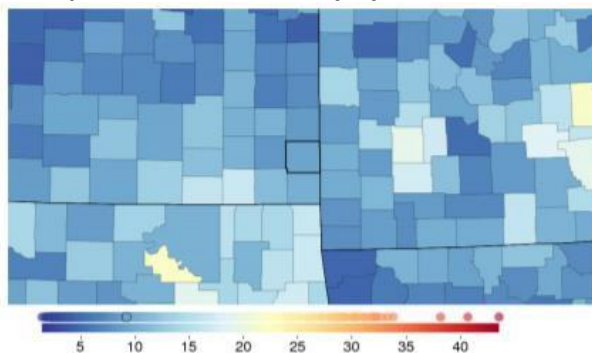
So, why is this measure important? According to the Centers for Disease Control and Prevention, poor mental health days play a role in measuring the burden of chronic disease in diverse populations. This measure also provides a general indication of wellness, quality of life and along with other self-reported measures may be a significant predictor in suicide ideation. Suicide is the tenth leading cause of death for all ages and the second-leading cause of death among youth and adults aged 15 to 34 in the USA.

According to the America's Health Rankings' analysis of the 2017 *Behavioral Risk Factor Surveillance System* several populations experience greater prevalence of poor mental health days including: women (4.3 days) compared to men (3.1 days); younger adults, high school dropouts (5.1 days) compared to college graduates (2.1 days) and low-income adults.<sup>24</sup>

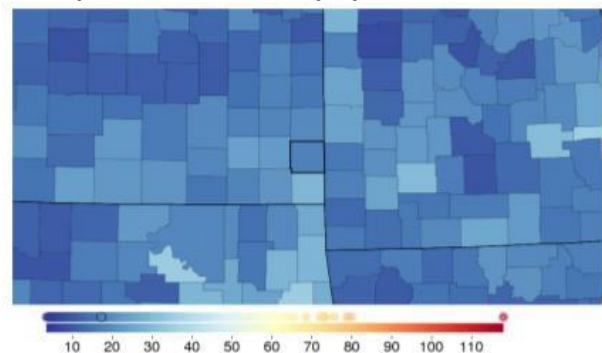
**Question 5 – What do you think are the three most important “risky behaviors” being exhibited in Crawford County? (The top five in 2017 were drug abuse, alcohol abuse, being overweight, poor eating habits and lack of exercise).**

Drug abuse was identified as the riskiest behaviors being exhibited in Crawford County currently. Over 82 percent of the interviewees and focus group respondents stated their concern for this growing trend as they are seeing an increase in white collar users, prescription drug addictions and a major explosion in the use of meth and opioids. Graphs 4 and 5 show the mental and substance use disorders mortality for Crawford County by gender reported for 2014. What this graph doesn't show is the percent of growth from 1980 to 2014. For Crawford County's female population, the rate per 100,000 population was 9.2 compared to 7.9 for Kansas and 8.2 for USA. This represents a 670.3 percent increase since 1980. Likewise, for Crawford County's male population, the rate per 100,000 was 17.3 compared to 15.1 for Kansas and 18.7 for USA. So, overall, the mortality rate for males in Crawford County is less than for the USA but higher than the rest of the State of Kansas. This represents a 370.8 percent increase since 1980.<sup>25</sup>

**Graph 4: Female Mortality by Kansas Counties**



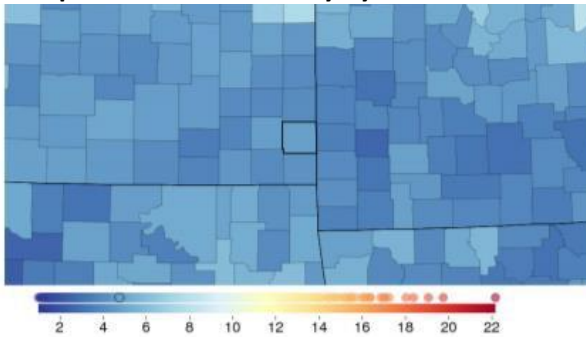
**Graph 5: Male Mortality by Kansas Counties**



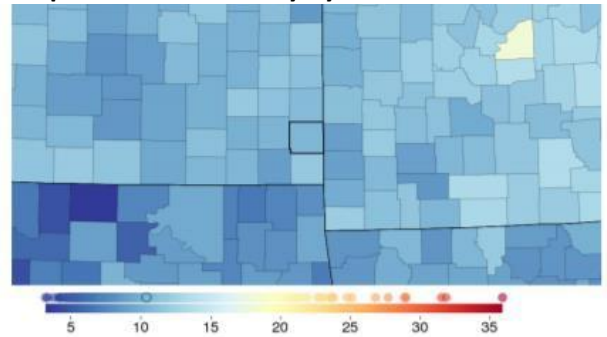
1. Alcohol abuse was cited as the second most risky behavior being exhibited in Crawford County and statistics bear that behavior out when looking at heavy drinking. Heavy drinking by Crawford County women increased by 36.7 percent between 2005 and 2012 compared to 25.3 percent for men. While binge drinking also increased for both genders, the percentage increase was a lot lower – 2.3 percent for women and 7.7 percent for men between 2002 and 2012. See Graphs 6 and 7 which shows by gender the heavy drinking habits by gender for 2012.<sup>26</sup>



**Graph 6: Female Mortality by Kansas Counties**



**Graph 7: Male Mortality by Kansas Counties**



A growing trend being seen by teachers, law enforcement officers, parents and others is the use of Juuls by high school age children. These fruit flavored apparatuses look like flash drives or asthma inhalers but mimics the sensation smokers get from inhaling on a cigarette. They're known as a beginner's vaping kit and the design is meant to be discreet, so people are unaware of its contents. They come in mango, cool mint, fruit medley, crème brulee and other flavors to appeal to the younger generation. Each Juul pod is designed to last for around 200 puffs with a rechargeable battery, 100 percent refillable with cost for flavored pods ranging from \$17 - \$40 off the internet. So, they're easily accessible for anyone with Wi-Fi access.



Other behaviors that were identified as risky behavior included unprotected sex, human trafficking, gambling, domestic abuse, homelessness, tobacco use and lack of money for affordable fresh foods.

**Question 6 – Technology has changed the world around us in ways we never dreamt possible (e.g. virtual visits, EMR, Fitbit monitoring, etc.). What does your “ideal” healthcare system look like in five to ten years when it comes to your use of technology for you and your family?**

This question invited a lot of discussion as interviewees and focus group respondents dared to dream what technology of the future holds in store for all of us. The future of healthcare is quickly changing due to artificial intelligence, health care coverage, delivery models, genetic testing and reimbursement plans based on health outcomes.

Others, while dreaming about possible future uses by medical professionals and hospitals, also shared concerned about privacy of medical records with so many computer hackers tapping into large financial institutions, hospitals, and government servers already. Not many were willing to jump onto the bandwagon of full electronic medical record access without added security measures being developed, tested and proven to be hack-proof.

It was interesting to note how many of those being interviewed or participating in focus groups were wearing Fitbit watches but weren't really using their full capability for health improvement purposes.



Some people reported being in contests with friends and family members to see who could accumulate the most steps in a week; however, one individual stated that his wife was caught putting her Fitbit on their dog before sending him outside to run around the backyard!

Some of the “out-of-the-box” thinking about the use of technology included: advanced and more specialized virtual visits; quicker access to health care providers resulting in more affordable health care options; enhanced electronic monitoring that could provide immediate feedback to health care professionals without needed hospitalizations or clinic appointments; increased and enhanced telemedicine opportunities for rural populations, especially during winter months when traveling may be limited or compromised due to extreme weather conditions; electronic medical records that are permanent with world-wide availability; easier access to other specialists for second opinions for both the general public and other health care providers who would have access to up-to-the-minute readings from patients; improved communications between hospital systems when caring for the same patient who may have complicated diseases and/or injuries; improved communications between pharmacies to thwart off multiple prescriptions being filled by addicts; immediate management of some chronic diseases that can be read in a timely fashion (e.g. diabetes); pharmaceutical deliveries by drones; quicker and more efficient way of making appointments with primary care physicians and specialists; notifications from concierge physicians about their time of arrival to the patient’s house or place of work; appointments by Skype type technology to avoid required trips to the doctor’s office for simple injuries and/or illnesses; and more sophisticated robotic interactions replacing the human touch of a physician and surgeon.



Where the old horse and buggy doctor carried all he needed in his little black bag in the 1900s to the very sophisticated and highly trained specialist who can order a new limb from a 3-D printer when she encounters an accident victim in the modern-day emergency room. What happens next will be very exciting and challenging! As Doctor McCoy used to say on the television show, *Star Trek*.....”beam me up Scotty” may not be all that far-fetched.

**Question 7 – Do you have any concerns about the future of health care services for you and your family? If so, what are they?**

Accessibility and affordability of healthcare was on the minds of most interviewees and focus group participants. In a state where Medicaid expansion has not yet materialized and smaller hospitals closing, these two concerns were very real for the majority of those participating in this research effort. Many are concerned that if Medicaid does expand and no new doctors are recruited into the area, how long will they have to wait to see their primary care doctor even if they have insurance?

Cost for insurance coverage, even with the implementation of the Affordable Care Act, is still too costly for many. If the insurance coverage is affordable, the deductibles may be so high that seeing a doctor is the last line of defense when home remedies have not been successful. In addition, pharmaceutical costs continue to rise and for the chronically ill patients who require multiple prescriptions report making difficult decisions when it comes to paying for their needed medications versus food, rent and/or utilities.



Limitations on Medicare concern some and they wonder why vision and dental care is not included in this coverage as other health related expenses may be avoided by offering these two additional services. One person gave the example if annual eye exams were covered, it may lower the number of falls experienced by seniors who need to get up during the night but end up going to the hospital for broken bones. Annual dental check-ups may assist with extractions of bad teeth before infections develop limiting people's ability to eat or worse eliminate the spread of the infection throughout the body.

Elderly people, living in rural areas, continue to have access problems due to limited transportation alternatives. Even if telemedicine does become a reality, teaching the elderly population to use a smart phone or computer equipment may be challenging and/or intimidating without additional outreach navigators.

Many nursing home and assisted living beds are providing care to Medicaid recipients. However, many of these places are talking about closing as the Medicaid system appears to be broken and owners of these places are no longer willing to keep them open due to the low cost of return on their investment. So, where will these people go?

Other concerns raised by those participating in the community health needs assessment included the rationing of care due to costs and accessibility; the narrowing of protocols of who gets medications; burnout of good healthcare providers who are growing weary of all the government red tape; the additional confusion about what is covered by the Medicaid/Medicare programs; the political climate which seems to add to the confusion of what is covered, especially when it comes to preexisting conditions; and the need for specialists who are willing to settle in smaller cities to provide care for a growing elderly and low-income population base when compared to other areas of Kansas.

#### **Question 8 – How would you describe Ascension Via Christi Hospital Pittsburg's current community benefit activities?**

While a few people didn't seem to know much about AVCHP's outside community involvement, the majority of interviewees and focus group participants did. Many felt the hospital leadership was extremely involved in different things ranging from human trafficking, providing medical

transportation through the CareVan program, educating the public with the Lunch and Learn presentation, the collaboration by hospital specialists with the Community Health Clinic of Southeast Kansas (CHCSEK), the new joint venture clinic between AVCHP and Mercy Hospital in Joplin, IMPACT testing of school athletes, outreach programs, the growing and positive commitment of providing quality healthcare in the community through its reputation of the heart, cancer and robotic service areas.

One person stated that they had not heard anything negative about AVCHP services and knew that the hospital is extremely giving when it comes to supporting community initiatives like Project Warmth, the Lord's Diner, the community food pantry and its hospital financial assistance program for those in need.

**Question 9 – What opportunities exist for Ascension Via Christi Hospital Pittsburg to improve the health of your community?**

The number one theme was the recruitment of more primary care physicians and specialists who could not only work with the hospital but would be willing to collaborate with the CHCSEK. The second highest theme centered on mental health and the need for more inpatient beds as well as practitioners who were trained and experienced in working with this population group.

A few people suggested that better communication be shared with the community about what services are currently available from the hospital, as well as other groups so that people are informed where they can go for help with the need arises.

One suggestion was to employ a patient navigator who could interface with the Law Enforcement HOT team in making house calls to avoid over utilization of the ER. Another opportunity that would work closely with law enforcement is a full-time SANE/SART nurse.

Several respondents felt the hospital is doing a pretty good job of interacting with the community already given the limited resources they have and are appreciative of the collaboration the hospital has built with existing agencies and is always willing to attend meetings where needs are discussed and solutions explored.

The respondents recognize that some of the problems are so big that the hospital cannot solve them alone (e.g. homelessness, a need for a detox center and an inpatient mental health facility) but wants the leadership to continue to work with other leaders, including the State offices to provide funding and assist with addressing these growing needs.

A couple of folks suggested that screenings, immunizations and Lunch and Learn activities be offered outside the hospital walls where public transportation is more readily available and affordable than traveling across Pittsburg. Hosting events like a dental clinic, medical mission of mercy with a holistic screening would be very beneficial for those who have no health insurance or primary care giver.

One concrete example for an internal improvement of the hospital facility was to offer more nutritious and affordable food choices in the cafeteria, including but not limited to vegan diets. Variety is appreciated but it is critical for the hospital to set the stage of selecting healthy food choices if they hope to change the behaviors of employees, patients and guests when it comes to healthy eating habits.

**Question 10 – If you had the power to change anything in the community, what would you select to improve the community's health?**

On this question there was a variety and multiple responses given by most interviewees and focus group attendees. Food insecurity assistance was cited most frequently ranging from having fewer fast food restaurants available in the community, the ability to offer more affordable fruits and vegetables and to establish multiple sites with high tunnel food production facilities. Developing a culture of selecting better food choices by making fresh food more affordable and having a personal commitment to good health were also seen as important in making community health improvements.



Affordable quality housing, transitional housing, homeless shelters was also seen to be important factors that needed to be developed for building a healthier community.

Health related issues included accessible health care for all, financial assistance for health



care and prescriptions for the poor and vulnerable, transportation for those needing it for health care and treatment of chronic diseases, improved availability of needed mental health services, especially for those in crisis situations, less expensive medications and supplies for those with long-term diseases like diabetes, drug and alcohol treatment centers, classes on various diseases like heart and hypertension, and more outreach services to attend to those who have health needs but traveling outside the home causes hardships on family and friends due to mobility limitations.

Other issues that were identified included securing a AVCHP branch on the other side of town to improve accessibility, developing a reward program for positive health behaviors, having employers provide a living wage to their employees at all levels, required education for all on anti-bullying and domestic violence for people of all ages, better communication between healthcare providers who share patients and provision of a triage outreach mobile unit.

## **SIGNIFICANT COMMUNITY HEALTH NEEDS**

### **Prioritizing Significant Needs**

Needs are prioritized based on the findings of the CHNA and the available resources that AVCHP has to effectively change behaviors, the number of people impacted, whether other organizations are already addressing the need, and whether the needs are aligned with the hospital's strategic plans.

### **What Are the Significant Needs in 2019?**

The top five needs identified by the 2019 CHNA participants included:

- 1) Access to health care
- 2) Mental health services
- 3) Drugs and alcohol services
- 4) Diabetes/obesity services
- 5) Education and treatment on cancer

These problems are not new to Crawford County as they have all been raised in previous CHNAs as well. However, these are all complicated issues and cannot be turned around without adequate government funding at both the State and Federal levels and a community-wide partnership approach.

In the last few years, other states have expanded Medicaid improving access to health care services; but Kansas has not. More importantly, the State of Kansas has reduced funding for mental health services and closed mental institutions so that those diagnosed with mental illness could be treated in their local communities. However, increased government funding at the local level did not keep pace with the growing need for behavioral services. Successfully addressing these issues is going to take “a village” approach for improved prevention, education and treatment.

### **How Ascension Via Christi Hospital in Pittsburg is Addressing these Significant Needs**

#### **Access to Health Care**

Hospital staff regularly attends Health and Human Services Committee meetings in the State Capitol and advocate and give testimony to legislators on need for expansion of Medicaid and additional resources needed for mental health care services.

When Mercy Hospital in Fort Scott Kansas Hospital announced its closure, AVCHP offered to continue to operate the ER because in an emergency, time matters and Pittsburg would be too far away to ensure positive outcomes.

In 2010 CHNA, one of the consistent challenges raised was the limited access to specialty care without traveling outside of Crawford County. Because of that finding, AVCHP stepped up to the plate and partnered with the Community Health Clinic of Southeast Kansas to provide specialists at their clinics during normal work hours so that the FQHC's Medicaid and low-income patients have access to both primary and specialty care when needed. That was nine years ago, and that specialty partnership continues to this day.

When patients come into the hospital or visit the joint venture clinic, questions are asked about their current health care coverage. When the social worker, working with the patient or their primary caregiver, discovers that they may be eligible for Medicaid or financial assistance, the social worker may assist them in filling out the proper application to ensure that future visits may be covered.

Due to challenges with transportation, AVCHP's CareVan program shuttles eligible patients to and from health care services to ensure they can keep appointments. This service allows the physically challenged, elderly and the poor and vulnerable access to health care services that helps them to live independently for as long as possible.

### **Mental Health Services**

AVCHP regularly seeks to find new physicians, including psychiatrists, who may be interested in moving into the Pittsburg area. There has been some success in getting new practitioners to set-up practices in the area but psychiatrists, especially child psychiatrists are in great demand and difficult to recruit to a small city. But the staff of the hospital continues to try.

Given the reduction of financial support from the State of Kansas for mental health, it is difficult to recruit highly trained mental health specialists locally. The current demand for services is greater than the resources available making the waiting time longer than is expected by patients and their families and problematic for providers especially in critical situations or families may have to seek treatment in Oklahoma or Missouri if waiting is not a viable option.

AVCHP arranges and pays for secure transportation for low-income or uninsured persons when they need to be transported to a different hospital for specialized treatment that may not be available locally (e.g. Osawatomie Psychiatric Hospital). However, there may be long waits involved in getting a patient admitted to a psychiatric bed so AVCHP may be forced to use their resources to ensure patient and staff safety in crisis.

### **Drugs and Alcohol Services**

Patients brought in by family members, law enforcement agencies or Emergency Medical Service teams are triaged in the ER, stabilized and admitted when necessary for their own safety. The hospital does not have a dedicated detox unit but will treat the individual so long as they are at risk. If warranted, AVCHP will work with other agencies in the local market to get the individual where they can best be helped with their addiction.

AVCHP staff will go out into the community to provide information on the effects that drugs and alcohol abuse may have on the chemical composition of the body, especially when an overdose can occur so that people understand the risks they are taking when experimenting with illegal substances.

Serving on local committees like Living Well and other groups allow AVCHP staff to hear how illegal drugs and alcohol abuse is negatively impacting the quality of life for those who have these addictions but also for the families who love them but don't know how to help or where to turn for long-term treatment. Networking with others who have more expertise following crisis intervention helps to inform ER staff on new services available to them and/or helps them to know the trends being seen in the field that don't always make it into the ER for crisis intervention.

### **Diabetes/Obesity Services**

AVCHP Diabetes education department is dedicated to serving people with diabetes and their families. Their purpose is to educate the patient about diabetes, assist them in developing the confidence to manage the daily challenges of living with diabetes and prevent long-term complications for those living with diabetes and their caregivers through training and educational opportunities.

Accredited by the American Diabetes Association, AVCHP program is designed to help patients at any stage of their disease, whether they were recently diagnosed with diabetes or are looking for ongoing support. With a staff of trained diabetes educators, AVCHP offers information, classes, and one-on-one support to help patients and their caregivers to become informed so they can experience a quality lifestyle. Not only are these classes staffed by nurses but also includes dieticians who can assist in meal preparation and the establishment of good eating habits.

Classes include information on general diabetes, nutritional management and carb counting, exercise guidelines, medication usage, self-monitoring techniques, preventing and detecting risks and complications and healthy coping and developing positive behavior changes.

### **Cancer Education and Treatment**

At the Ascension Via Christi Cancer Center in Pittsburg (AVCCCP), advanced technology and compassion are combined to offer hope for cancer patients and their families. This facility offers state-of-the-art cancer detection and treatment services including sophisticated radiation therapy equipment, chemotherapy, cancer specialists and support staff.

The AVCCCP brings together all the resources a cancer patient and his/her family will need to fight this disease in the most positive, supportive environment possible. Patients do not need to travel great distances any more to receive the most advanced treatment available.

In addition to cancer care, other services needed and desired by cancer patients and their families are available including nutritional counseling, spiritual and emotional support, and patient and family education.

The AVCCCP offers several diagnostic procedures to assist physicians in the diagnosis and treatment of cancer. This includes:

- AVCCCP is home to the area's first 128-slice Computerized Tomography machine.
- Ascension Via Christi's Women's Imaging Center offers #D mammography, one of the most advanced technologies in breast cancer detection today.
- AVCHP's Magnetic Resonance Imaging is a painless, non-surgical procedure with no known side effects.
- Nuclear Medicine at AVCHP uses radioactive substances, sometimes called radiopharmaceuticals or tracers, to create images of the internal organs.
- AVCHP, in cooperation with DMS Imaging, is pleased to offer Positron Emission Tomography
- A Single Photon Emission Computer Tomography is a three-dimensional imaging technique used in conjunction with a number of Nuclear Medicine studies and is available at AVCHP.
- Stereotactic Breast Biopsy, is a less invasive, non-surgical outpatient procedure which can determine if an abnormality is cancerous.

AVCHP hosts monthly support group meetings for cancer patients and their caregivers. The support group meeting usually has a speaker and a moderator who will talk about the challenges of a cancer diagnosis, what the prognosis may be for certain cancer types, as well as treatments. The speaker also addresses the psychological challenges that comes with a cancer diagnosis and will spend time answering questions from the audiences on their own specific cases.

In addition to the clinical challenges dealing with a cancer diagnosis, AVCHP also addresses the spiritual side of terminal diagnoses. Hospital staff is requested by members of the community to make presentations on death and dying, bereavement and other health related topics that have a spiritual connection to the hospital's health care mission.

Staff support community events like health/safety fairs and when appropriate may conduct screenings on patients who are concerned about skin cancer. One of the events where AVCHP participates is the Four State Farm Show where staff may distribute sunblock and teach people the importance of regularly using this type of product to avoid skin cancer or its recurrence.



## SIGNIFICANT NEEDS NOT BEING ADDRESSED WITH OTHER RESOURCES IDENTIFIED

The resources identified under each heading is not intended to be an exhaustive list but offers the reader a few suggestions on where they can turn for assistance. Most resources cited are in Pittsburg, but a few may be in neighboring cities. Some additional ones are in Joplin, Missouri or Oklahoma City, Oklahoma or may be national hotlines that can provide information regarding other programs that better serve the need of the person experiencing a specific problem.

**Affordable Health Insurance** – the hospital does not have the resources to go above and beyond what it is currently providing through its financial assistance program. It does offer health care to its own employees and their family, but its resources are limited when it comes to providing health insurance for the community.

Resources Available:

- 1) Health Insurance Marketplace Call Center (800) 318-2596
- 2) Kansas Insurance Department (800) 432-2482
- 3) Senior Health Insurance Counseling for KS (SHICK) (800) 860-5260
- 4) Kansas Statewide Farmworker Health Program (KDHE) (785) 296-1200
- 5) KanCare – (800) 792-4884

**Affordable Prescriptions** – while the hospital doesn't directly address this on a wide scale, AVCHP will assist with some limited prescriptions for patients by contacting the manufacturer to see if there are samples available if an individual has no other options or resources. The pharmacy must diligently fill out the required paperwork and submit it in a timely fashion to get the prescriptions needed as most times the patient is waiting for the required medicine upon discharge.

Resources Available:

- 1) Kansas Statewide Farmworker Health Program (KDHE) (785) 296-1200
- 2) National Organization for Rare Disorders (800) 999-6673
- 3) Kansas Drug Card – (913) 638-8415
- 4) Familywize – (800) 222-2818

**Substance Abuse Prevention/Treatment** – while many times the hospital will treat these individuals because they have been brought to the ER by law enforcement, family or friends, the hospital is not currently able to treat large volumes of these types of patients due to limited resources and staff expertise. There are other organizations who are the experts in dealing with addictions by offering counseling, education/prevention for drug use disorders as well as alcohol, psychological testing and assessment, mental health hotlines, and psychiatric medication services.

Resources Available:

- 1) Crawford County Community Mental Health Center (620) 231-5130
- 2) Community Health Center of Southeast Kansas (620) 231-9873
- 3) Families and Children Together (620) 232-3228
- 4) Elm Acres Recovery Services (620) 231-5310
- 5) Adolescent Center for Treatment (Residential Substance Abuse) (913) 782-0283

**IMPACT EVALUATION OF EACH SIGNIFICANT NEED BEING ADDRESSED BASED ON GOALS FOR 2019 – 2022**

AVCHP will continue to work with the community organizations on a variety of issues; however, to focus on the significant health need identified by the 2019 CHNA, the hospital leadership is looking to establish some specific measurable goals to see how their efforts are making an impact in the community. Listed below are two measures for each of the high priority areas that go beyond the work that the hospital is already doing to address the needs of these special target populations.

**Mental Health**

- 1) Increase the proportion of primary care physician office visits where adults 19 years and older are screened for depression.
- 2) Increase the proportion of primary care physician office visits where youth aged 12 to 18 are screened for depression.

**Substance Abuse**

- 1) Working with community organizations, increase the education of teens, young adults, parents and staff on the negative health outcomes associated with the use of Juuls.
- 2) Develop an information sheet on Juuls and distribute widely as an educational tool for parents as a resource to discuss with their family members.

**Diabetes/Obesity**

- 1) Develop a pre and post- test to be used in a Diabetes class showing the effectiveness of the training in the level of knowledge being attained by the class participants.
- 2) Continue involvement with Eat Well and Live Well coalitions to promote the development of measurable goals with healthy outcomes for Crawford County.

**Ascension Via Christi Hospital – Pittsburg**  
**2019 Community Health Needs Assessment**  
**APPENDIX I**

**INTERVIEW & FOCUS GROUP DISCUSSION QUESTIONS**

- 1) What do you believe are the most important factors for a healthy community?
- 2) Prior national CHNA research has shown that communities have learned that teamwork is needed to address issues like poverty, health, education, economy and lifestyle changes. With that said, how does Ascension Via Christi Hospital in Pittsburg assist as a team member in addressing these concerns locally? Give some examples.
- 3) The 2017 CHNA identified mental health, cancers, heart disease and stroke, aging problems and diabetes as the top five health problems in the Southeast corner of Kansas. Which of these two areas concerns you the most and why?
- 4) The four major areas of concern identified by the regional work groups of the 2017 CHNA included chronic disease, mental health, drugs and alcohol abuse, and obesity. Which of these four areas do you believe should remain the top two focus areas and why?
- 5) What do you think are the three most important “risky behaviors” being exhibited in your county?
- 6) Technology has changed the world around us in ways we never dreamt possible (e.g. virtual visits, EMR, Fitbit monitoring, etc.). What does your “ideal” healthcare system look like in five to 10 years when it comes to your use of technology for you and your family?
- 7) Do you have any concerns about the future of health care services for you and your family? If so, what are they?
- 8) What three adjectives would you use in describing AVCH-P current Community Benefit activities? What is AVCH-P doing well that improves the health of the community?
- 9) What opportunities exist for the hospital to improve the health of the community?
- 10) If you had the power to change anything in the community, what would you select to improve the community’s health?

**Ascension Via Christi Hospital Pittsburg**  
**2019 Community Health Needs Assessment**  
**APPENDIX II**

**INTERVIEWEES & FOCUS GROUP PARTICIPANTS**

<b>NAME</b>	<b>TITLE</b>	<b>ORGANIZATION</b>
Rebecca Adamson	County Health Officer	Crawford County Health Department
Carrie Amershek	Director of Quality & Risk Management	Ascension Via Christi Hospital-Pittsburg
Dr. Linda Bean	Chief Medical Officer	Community Health Center of SE Kansas
Marcee Binder	Executive Director & Pastor	Wesley House
Casey Brown	Program Director	Catholic Charities
Randy Cason	President	Ascension Via Christi Hospital-Pittsburg
Cheryl Craig	Director of Acute, Rehab, ICU, IP & Surgery	Ascension Via Christi Hospital-Pittsburg
Jamie Cravens	Infection Control	Ascension Via Christi Hospital-Pittsburg
Jami Crowder	Housing Case Manager	Catholic Charities
Michael Ehling	Health & Family Services Director	Crawford County Mental Health Dept
Ann Elliot	Executive Director	The Family Center
Dr. Katie Falk	Hospitalist	Ascension Via Christi Hospital-Pittsburg
Jordon Garrison	Crime Analyst	Pittsburg Police Department
Christi Graham	Representative Payee Coordinator	Salvation Army
Shelly Gromer	Vice President of Operations	Guest Homes Estates
Lt. Mylee Hadden	Pastor	Salvation Army
Daron Hall	City Manager	Pittsburg City Hall
Dick Horton	Community Engagement Director	SEK-CAP
Hope Harmon	Nurse	Crawford County Health Department
Courtney Koenig	Community Health Specialist	KS Dept of Health & Environment
Stacy Kratz	Director of Operations	Crawford County Mental health
Cindy Lane	Executive Director	SE Kansas Area Agency on Aging
Brian Listwan	Human Resources	Pittsburg Police Department
Steve Lohr	Executive Director	SEK-CAP
Sgt. Rebekah Lynch	Detective	Pittsburg Police Department
Brent Narges	Interim Chief	Pittsburg Police Department

NAME	TITLE	ORGANIZATION
Dr. Rodney Odgers	Hospitalist	Ascension Via Christi Hospital-Pittsburg
Chris Okeke	Director of Pharmacy	Ascension Via Christi Hospital-Pittsburg
Matt O'Malley	Health Equity Grant Coordinator & Liaison	Live Well Crawford County
Cheryl Mayo	Director	Mother to Mother Ministry
Lynette Olson	Provost & VP Academic Affairs	Pittsburg State University
Richard Pfeiffer	Executive Administrator	Crawford Co. Health, Mental Health & Juvenile Services Department
Krista Postie	Executive Director	Community Health Center of SE Kansas
Naomi Powers	Director of ED & Trauma	Ascension Via Christi Hospital-Pittsburg
Rich Proffitt	Superintendent	Unified School District #250
Kelly Pulliam	Homeless Case Manager	Catholic Charities
Jeff Ruffin	Associate Pastor	Salvation Army
Charlotte Russell	Director Physician Practice Operations	Ascension Via Christi Hospital-Pittsburg
Tawney Sandifer	Chief Nursing Officer	Ascension Via Christi Hospital-Pittsburg
Heather Spaur	Director of Personnel	Crawford County Mental Health
Dr. Timothy Stebbens	ER Medical Director	Ascension Via Christi Hospital-Pittsburg
Brad Stroud	Executive Director	Live Well Crawford County
Drew Talbott	Vice President of Operation	Ascension Via Christi Hospital-Pittsburg
Lt. Tim Tompkins	Administrative Services	Pittsburg Police Department
Nancy Tyler	RN Manager-Nursing	Ascension Via Christi Hospital-Pittsburg
Janelle Wade	Director Women Services	Ascension Via Christi Hospital-Pittsburg
Kristie Watson-Bell	Social Worker	Ascension Via Christi Hospital-Pittsburg
Jason Wesco	Executive Vice President	Community Health Center of SE Kansas
Astrid Zagorski	Retired Registered Nurse	Community Volunteer

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- <sup>2</sup> Healthy People's *Leading Health Indicators* for 2020. Available at <https://www.healthypeople.gov/2020/leading-health-indicators/2020-lhi-topics/Access-to-Health-Services>
- <sup>3</sup> *HealthDay Reporter*, <https://www.webmd.com/breast-cancer/news/20140624/3d-mammograms-may-improve-breast-cancer-screening#1>, downloaded March 8, 2019.
- <sup>4</sup> United States Census Bureau, QuickFacts, Crawford County, Kansas, Population estimates, July 1, 2018. Downloaded from <https://www.census.gov/quickfacts/crawfordcountykansas> on March 19, 2019.
- <sup>5</sup> Ibid.
- <sup>6</sup> Robert Wood Johnson Foundation, County Health Rankings and Roadmaps for 2013 and 2018. Downloaded from <http://www.countyhealthrankings.org/app/kansas>.
- <sup>7</sup> Ibid.
- <sup>8</sup> Ibid.
- <sup>9</sup> Ibid.
- <sup>10</sup> Ibid.
- <sup>11</sup> Ibid.
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- <sup>13</sup> Ibid. Source: *KIDS COUNT* Data Center, 2016.
- <sup>14</sup> Ibid. Source: Kansas Mental Health Coalition, 2018.
- <sup>15</sup> Ibid. Source: KDHE, March 2018.
- <sup>16</sup> Ibid. Source: Behavioral Risk Factor Surveillance System. 2016.
- <sup>17</sup> Ibid.
- <sup>18</sup> Ibid. 2017 State of Obesity, page 34.
- <sup>19</sup> Ibid. page 34.
- <sup>20</sup> LiveStories, Crawford County Cancer Death Statistics. Downloaded March 22, 2019 from <https://www.livestories.com/statistics/kansas/crawford-county-cancer-deaths-mortality>
- <sup>21</sup> Ibid.
- <sup>22</sup> Stavola, Michael, **Salina Journal**, "Opioid death rates in Kansas on the rise," October 28, 2017. Downloaded April 9, 2019 from <https://www.salina.com/news/20171028/opioid-death-rates-in-kansas-on-rise>.
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- <sup>24</sup> Ibid., downloaded April 9, 2019 from <https://www.americashealthrankings.org/explore/annual/measure/MentalHealth/state/KS?edition-year=2018>
- <sup>25</sup> Institute for Health Metrics and Evaluation at the University of Washington. Crawford County, Kansas Profile, downloaded April 9, 2019 from <http://www.healthdata.org>
- <sup>26</sup> Ibid.