

Wamego Health Center Community Health Needs Assessment

Pottawatomie County Market

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Ascension

Wamego Health Center Community Health Needs Assessment Pottawatomie County market

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Ascension Via Christi Health, Wichita, Kansas, May 15, 2020

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Executive Summary

The purpose of this Community Health Needs Assessment (CHNA) is to identify and prioritize the significant health needs of Pottawatomie County served by Wamego Health Center in Wamego, Kansas. 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 the mission to improve community health. This CHNA report meets the requirements of the Patient Protection and Affordable Care Act in which not-for-profit hospitals conduct a CHNA at least once every three years.

The geographical area of Pottawatomie County was chosen for this CHNA because that is where Wamego Health Center Ascension in Wamego, Kansas (WHC) is located and where the bulk of their patients live or work. The actual survey instrument is available for review in Appendix B of this report.

In an effort to gain insights from the community for the purposes of planning and community improvement, Wichita State University's Center for Applied Research and Evaluation (WSU-CARE) was contracted by the Flint Hills Wellness Coalition¹ to conduct a community-wide needs assessment for Pottawatomie County, which included the compilation of selected secondary data, administration of a community survey, and focus groups. Secondary data, which is publicly available data such as the Census, Kansas Behavioral Risk Factor Surveillance System (BRFSS), and others, were compiled for the most recent years available.

The community survey was conducted online and through administration at public locations or meetings to gather input from residents regarding their perceptions of community strengths and needs in 10 topic areas (Quality of Life, Physical Health, Mental Health, Social Issues, Children and Youth, Education, Aging, Housing, Transportation, and Economics/Personal Finance). A total of 262 surveys were used for analysis. Although significant efforts were made to solicit participation by a representative sample of community members, survey respondents were largely white, female, middle-aged, educated, with slightly higher incomes than average.

In order to gain additional insight on the issues addressed in the survey as well as any other concerns, two focus groups were held with community/governmental organization representatives and parents. The strengths and needs that were identified for Pottawatomie County were relatively consistent across all methods of data collection.

The overarching themes for all of the data collected are that Pottawatomie County is a community that enjoys a high quality of life, but lacks a number of needed services. Respondents noted the need for more activities/services for children and youth, including child care, more mental health services, and concerns about housing and cost of living. More specifically, the primary findings across all methods are:

- **NEED FOR SERVICES FOR CHILDREN/YOUTH** – This issue came up repeatedly across the survey and focus group participants. The concerns related to this theme included high cost and

¹ See listing of Flint Hills Wellness Coalition organizations and funding sources of this CHNA on page 11 of this report.

lack of options for child care, lack of recreation and after school activities, lack of employment opportunities for teens (to some extent because adults are taking the lower wage jobs typically held by teens), and general lack of resources to support healthy child and youth development.

- **HIGH QUALITY OF LIFE** – In general, this theme came through in both the surveys and the focus groups, with people noting the good schools, safe neighborhoods, good place for raising children, and relatively affordable cost of living as some of the main things they appreciate about the county. Although they recognize that a smaller, more rural area will typically have fewer resources, they seemed satisfied that the benefits outweigh the concerns for most people.
- **LACK OF MENTAL HEALTH SERVICES** – Participants acknowledged that there have been efforts to address the lack of mental health services in the area, but they are still concerned there are not enough options for adults and youth, and transportation can sometimes be a barrier to accessing the services available in Topeka or Manhattan.
- **LACK OF AFFORDABLE HOUSING** – For Pottawatomie County, the percentage of home ownership is higher than the state average, but so is the median cost of a house. Participants in focus groups noted the lack of available options for people with mid-level incomes to buy a house. They felt most options in the community are either for those with higher incomes or for renters. Additionally, over 30% of respondents to the survey report spending more than 30% of their income on housing. Respondents to the survey tended to have higher than average incomes, so the number saying their housing costs exceed what is considered affordable is an indication of the problem.
- **TRANSPORTATION** – This issue was raised across all methods and is characterized by specific concerns regarding transportation for healthcare. Because many of the healthcare options are outside of Pottawatomie (i.e., major hospitals and specialists), those without reliable transportation have great difficulty accessing the services they need. Additionally, even though the aTa bus serves Wamego and the area, many do not know how or where to access it. And bus routes are limited and still cannot accommodate those who need to get to other communities for services such as healthcare.
- **LACK OF LIVING WAGE JOBS** – In a rural county where Wamego is the largest town, jobs can be scarce. This is particularly true for those who have skills beyond entry level. Additionally, focus group participants noted that the scarcity of jobs is pushing adults to take lower paying jobs that would typically be filled by young people. This contributes to not only difficulty for adults in meeting their basic needs, but also a lack of jobs suitable for teens.

Significant needs in 2020

The top five needs identified by the 2020 CHNA respondents for the various target populations are:

Physical Health

1. Affordable health services
2. Affordable health insurance
3. Facilities for physical activity
4. Affordable prescriptions
5. Access to healthy food options

Mental Health

1. Affordable mental health services
2. Affordable health insurance that includes mental health care (new)
3. Increased number of mental health providers
4. High quality mental health services
5. Children's mental health services

Children birth to age 12

1. Child care for children 0-5 (new)
2. After school programs
3. Recreational activities (new)
4. Parenting education/skills development (new)
5. Mentoring programs for children (new)

Teens (13 to 18 years old)

1. Employment opportunities for teens
2. Workforce training for teens (new)
3. Mental healthcare (new)
4. Financial skills training (new)
5. Substance abuse prevention/treatment

Older Adults

1. Affordable prescriptions
2. Independent living in the home (new)
3. Medical care (new)
4. Affordable housing
5. Home health care options (new)

Themes from Focus Group discussions

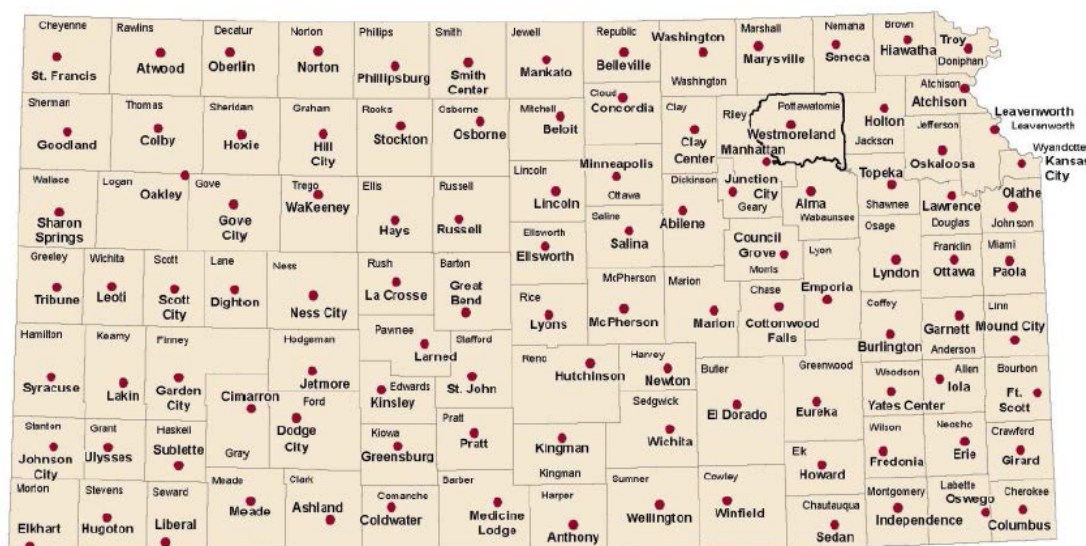
1. Good quality of life
2. Need for behavioral health services
3. Lack of child care and activities
4. Transportation
5. Housing and cost of living
6. Lack of accessible/affordable healthcare

Pottawatomie County community profile

Pottawatomie County is located in the northeast portion of the State of Kansas. The population estimate on July 1, 2018 reported by the United States Census Bureau was 24,277.² The county seat for Pottawatomie County is Westmoreland, Kansas.

According to the 2010 United States Census, the Pottawatomie County has a total area of 841 square miles of land in Northeast Kansas with approximately 26 persons per square mile (compared to an average of 35 persons per square mile across Kansas). The total population of Pottawatomie County in 2018 was estimated at 24,277. Wamego is the largest town in the county with a population of 4,762 (2018 Census Population Estimate).

Figure 1: Map of Kansas with Pottawatomie County Outlined³



Source: Institute for Policy & Social Research, The University of Kansas.

Pottawatomie County is slightly less diverse than the norm for the state with approximately 94% white, 1% African American, 5% Hispanic or Latino, 1% Asian, 3% two or more races, 1% American Indian and Alaskan Native, and less than 1% Native American or Pacific Islander. The population median age is similar to the state average (35.2 in Pottawatomie county and 36.3 in Kansas overall).

Health care and educational services play a large role in the economy of Pottawatomie County, with the largest employer of Pottawatomie *residents* being Kansas State University. The largest employer in Pottawatomie County is The Onyx Collection, Inc. in Belvue, Kansas. Pottawatomie County typically experiences lower rates of unemployment, crime, and a number of other indicators that negatively impact quality of life as compared to state averages and is rated as the third healthiest county in

² United States Census Bureau, QuickFacts, Pottawatomie County, Kansas, downloaded on Jan. 22, 2020 from <https://www.census.gov/quickfacts/fact/table/pottawatomiecountykansas,KS,US/PST045219#qf-flag-NA>

³ Institute for Policy & Social Research, The University of Kansas, downloaded March 12, 2018 from <http://ipsr.ku.edu/ksdata/ksah/ksa34.shtml>

Kansas according to the 2019 Robert Wood Johnson Foundation's County Health Rankings and Roadmaps.

In addition, there were 9,838 housing units and the owner-occupied housing unit rate was 76.8 percent with the median value of owner-occupied housing units at \$181,200. The median gross rent for Pottawatomie County residents is \$766 which is \$65 less a month than other Kansans pay and \$172 less than residents of the neighboring county of Riley pay per month for rent.⁴

In 2019, there were 8,695 households in which on average 2.7 people were living. Approximately 4.3 percent of the households identified that another language, other than English, was spoken at home although 2.7 percent identified they were born in a different country.⁵

Approximately 29 percent of the population is under the age of 18 and 14.3 percent over the age of 65. In contrast, only 16.7 percent of Riley County is under the age of 18 and 9.5 percent over the age of 65. In 2019, females represented 50.3 percent of the population compared to the 49.7 percent of their male counterparts.⁶

The education achievement of residents living in Pottawatomie County is higher than those living in the State of Kansas as 94.7 percent reported graduating from high school compared to 90.7 percent for all Kansas residents. However, Pottawatomie County residents are nearly the same as other Kansas residents when it comes to bachelor degrees as 34.5 percent reported having a college degree or higher compared to 32.9 percent for the State.⁷

According to 2019 Quick Facts, 7.3 percent of the Pottawatomie County residents live with a disability; these are people under the age of 65. In addition, 7.3 percent under the age of 65 reported having no health insurance coverage.⁸

The median household income for Pottawatomie County (in 2018 dollars) was \$64,657. This was approximately seven thousand dollars more than what was reported as the median household income for all Kansans. Approximately 8 percent of the Pottawatomie County residents are living in poverty compared to 12.0 percent in the State.⁹

⁴ United States Census Bureau, QuickFacts, Pottawatomie County, Kansas, downloaded on Jan. 22, 2020 from <https://www.census.gov/quickfacts/fact/table/pottawatomiecountykansas,KS,US/PST045219#qf-flag-NA>

⁵ Ibid

⁶ Ibid

⁷ Ibid

⁸ Ibid

⁹ Ibid



Wamego Health Center and community participant descriptions

About Ascension and Wamego Health Center¹⁰

Wamego Health Center (WHC), a part of Ascension, has a rich history of serving the people of Kansas and the surrounding region dating back more than 100 years to the healing ministries of our founding congregations. Today, Ascension Via Christi is the largest provider of healthcare services in Kansas. AVC serves Kansas through our doctors, hospitals and health services. In fiscal year 2019, AVC provided \$33.7 million in benefit to the communities we serve.

Ascension Via Christi values include:

Service of the Poor – Generosity of spirit, especially for persons most in need

Reverence – Respect and compassion for the dignity and diversity of life

Integrity – Inspiring trust through personal leadership

Wisdom – Integrating excellence and stewardship

Creativity – Courageous innovation

Dedication – Affirming the hope and joy of the AVC ministry

About Ascension

Ascension is a faith-based healthcare organization dedicated to transformation through innovation across the continuum of care. As the largest non-profit health system in the U.S. and the world's largest Catholic health system, Ascension is committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable. Ascension includes approximately 150,000 associates and 40,000 aligned providers. Ascension's Healthcare Division operates 2,600 sites of care – including 150 hospitals and more than 50 senior living facilities – in 20 states and the District of Columbia.

About Wamego Health Center in Wamego, Kansas¹¹

Wamego Health Center is a 25 bed Critical Access Hospital, located in the center of the Wamego community. The hospital's Emergency Department provides care 24 hours a day, 7 days a week. WHC operates its own Laboratory, Imaging and Rehabilitation departments giving patients a full range of services with the convenience of one visit. With the Wamego Family Clinic located on the WHC's site,

¹⁰ Ascension Via Christi (2020) Via Christi Hospital Locations and Services webpage. Downloaded on Jan. 14, 2020 from viachristi.org/about-via-christi

¹¹ Wamego Health Center Services webpage. Downloaded on Jan. 22, 2020 from <https://wamegohealthcenter.org/services/>

patients are able to conveniently access the services of Primary Care Physicians, an Internal Medicine Provider and a Nurse Practitioner.

Heart Care and Cardiac Rehabilitation

The cardiac rehabilitation program at WHC is a medically supervised program that helps people with heart conditions strengthen their hearts and get back to living life. The specialized staff collaborates with the patient and their physician to formulate a care plan that is specific to the patients needs with the goal to improving their strength and stamina. The program includes state of the art exercise equipment; nutrition, exercise and smoking cessation education; continuous telemetry monitoring during exercise and the ability to print progress reports for each patient to share with their cardiologist.

Emergency room

The ER at WHC offers high-quality medical services by board certified physicians, Advanced Practice RN's (ARNPs) and Physician Assistants (PAs). It is equipped to handle almost all situations but in rare cases has the ability to stabilize patients that require transport to other facilities. In addition, the hospital operates a full-service laboratory and there is immediate access to radiology examinations for definitive diagnosis.

Heartland Rehabilitation

Heartland Rehabilitation Center, housed within WHC, offers a full scope of therapy services for both community members and Wamego Health Center's patients. Heartland's licensed and certified professionals use state of the art technologies and equipment to provide the most advanced care possible. The atmosphere is friendly and comfortable and the therapists take great pride in providing compassionate therapy based on each patient's individual needs. Specific services include physical, occupational and speech therapy. A few of the rehabilitation techniques provided include:

1. Manual therapy, which consists of a variety of hands-on techniques to address bone and muscle pain and dysfunction.
2. Therapeutic exercise, including programs customized for each patient using state of the art rehabilitation equipment.
3. Modalities, which include therapy such as electrical stimulation and ultrasound used to re-educate muscles and decrease inflammation and pain.
4. Activities of daily living (ADL's), consists of working on the tasks a person completes in their normal day. ADL's may require specific training to perform a task, including bathing, dressing, toileting, housekeeping, driving and shopping.

Heritage Senior Behavioral Health

WHC Heritage Senior Behavioral Health is an outpatient program that provides individualized treatment for older adults who are experiencing emotional, behavioral or mental health disorders. The program provides intensive outpatient treatment, offered Monday through Friday. Treatment through this program is offered in the least restrictive environment and allows patients to return home each afternoon. WHC Heritage Behavioral Health program serves Pottawatomie, Riley and Wabaunsee Counties.

As a patient of this program, each participant will have the opportunity to work one on one with a therapist and clinical psychologist. Together as a team, trained clinicians will formulate a treatment plan that is specific to each individual's needs. Components of this program include:

1. Group-family-individual therapy
2. Grief and loss resolution
3. Medication management
4. Health and wellness training
5. Communication skills
6. Conflict resolution skills
7. Stress management
8. Assertiveness training

Signs and symptoms of depression in senior adults include:

1. Anxiety
2. Anger
3. Low self-esteem
4. Agitation, combative behavior
5. Confused thoughts
6. Loss of concentration
7. Crying
8. Suicidal thoughts
9. Depression
10. Disorientation and/or failing memory
11. Irritability and social isolation
12. Unresolved grief
13. Paranoia, hallucinations, delusions
14. Change in eating or sleeping patterns

Home Sleep Studies

Wamego Health Center provides the home sleep apnea test that is used for the diagnosis of obstructive sleep apnea. The device is about the size of a cell phone and it is worn while you are sleeping at home in your own bed. The device measures:

- Nasal and Oral Airflow by a small sensor that is worn under the nose – similar to a nasal cannula.
- Respiratory Effort via an elastic belt band that is placed across the chest.
- Oxygen levels and heart rate via an oximeter finger probe that is worn on the fingertip.

Imaging Services

The WHC Imaging Services Department is staffed 24 hours a day seven days a week. The highly trained staff is prepared to provide X-rays, ultrasound, mammograms, CT scans, MRIs or other diagnostic procedures when needed and ordered by the patients' physician.

Laboratory Services

WHC's highly skilled American Society for Clinical Pathology (ASCP) certified medical technologists/technicians, phlebotomists and staff provide prompt, friendly and accurate results to aid in the diagnosis of medical conditions.

Nutrition Services

WHC's nutrition department is staffed by a registered dietician who provides the patient and their family with individual nutrition counseling and educational support for a variety of health concerns including: diabetes, cardiac rehabilitation, Crohn's disease, food allergies and cholesterol reduction to name a few.

Specialty Clinic Services

WHC works with a variety of physicians to bring specialty care to Wamego. The Specialty Clinic is housed within WHC and includes the following types of specialists: cardiology, gastroenterology, general surgery, nephrology, oncology, ophthalmology, orthopedics, otolaryngology, podiatry and urology.

Surgical Services

Surgical services provided at WHC by the highly skilled physicians include: orthopedics, podiatry, ear, nose and throat, general surgery, colonoscopy and endoscopy procedures.

Swing Bed Program

WHC's swing bed program is a Medicare sponsored program that provides extended care to individuals needing additional time to rebuild their strength following an acute illness or surgery. The goal of this program is to help patients return to their home and live independently or with the help of community resources. Swing bed patients must have had a three day in-patient stay at any hospital and a need for either I.V. therapy or a need for one of the following: physical, occupational or speech therapy. Patients who may need a swing bed include, but not limited to, surgeries (e.g. hip replacement, repair, fracture; knee replacement; spinal surgeries; stroke or certain brain injuries; wound care; cardio/pulmonary conditions or malignant/end-stage disease care.)

Wamego Family Clinic

The Wamego Family Clinic (WFC) is committed to excellence in patient care by delivering comprehensive healthcare that is personalized, compassionate and respectful. The WFC includes highly qualified Family Practice physicians, an Internal Medicine specialist and nurse practitioners. These providers offer wellness services, preventive care and a treatment of a wide variety of medical conditions. The WFC services include:

1. All care and wellness from birth to seniors
2. Acute Care: sudden onset of illness
3. Pediatric immunizations with well-child exams
4. Routine exams
5. Illness, sore throats, cold and flu symptoms
6. High cholesterol
7. Blood sugar problems

8. Treatment for skin rashes or warts
9. Well Woman exams
10. School and sports physicals
11. CDL physicals
12. Referrals
13. Minor surgical procedures

Wamego Family Clinic offers convenient walk-in services for urgent (non-emergent) care needs. The Walk-In Clinic is housed inside the Wamego Family Clinic and is open from 7 a.m. to 7 p.m. Monday-Saturday.

Other community 2020 CHNA participants--listed in alphabetical order

This assessment was conducted by Wichita State University's Center for Applied Research and Evaluation (WSU-CARE) at the Community Engagement Institute under the direction of the Flint Hills Wellness Coalition. However, this community needs assessment was the culmination of a collaborative effort by multiple persons and organizations. In addition to Wamego Health Center in Wamego, these organizations provided coordination, funding and/or, in some cases, design input on the assessment tool.

Ascension Via Christi Hospital

Ascension Via Christi Hospital in Manhattan (AVCH-M) is a healthcare leader in northeastern Kansas, with 150 physicians, 500 employees and 300 volunteers serving the people of Manhattan and the surrounding areas.

Caroline F. Peine Foundation

The Manhattan Fund – Caroline Peine Charitable Foundation exists to improve the quality of life in the City of Manhattan, Kansas, to benefit the KONZA Prairie and to provide for recreational development in the town of Keats, Kansas.¹²

City of Manhattan

The City of Manhattan, Kansas, provides municipal services for more than 50,000 residents. Located in northeastern Kansas at the junction of the Kansas River and Big Blue River, it is the county seat of Riley County, although it extends into Pottawatomie County.¹³

Flint Hills Wellness Coalition

The Flint Hills Wellness Coalition works cooperatively with citizens and groups throughout the City of Manhattan and Riley County to develop community norms that support healthy behaviors and environments. Their mission is to create a healthy, equitable community for our residents through policy, system, environmental, and personal change. The coalition has been successful in improving access to healthy

¹² peinefoundation.org

¹³ cityofmnhk.com

foods, reducing exposure to tobacco in public parks, and advocating for bicycle/pedestrian-friendly environments.¹⁴

Greater Manhattan Community Foundation

Established in 1999, the Greater Manhattan Community Foundations is a tax-exempt public charity created by and for the people in a local area. It enables people with philanthropic interests to easily and effectively support the issues they care about - immediately, or through their will. Donors can establish a charitable fund at the Foundation by contributing a variety of assets and may also recommend grants - in their name, if they choose - to nonprofit groups they want to support.¹⁵

Kansas State University

Kansas State University (KSU), commonly shortened to Kansas State or K-State, is a public research university with its main campus in Manhattan, Kansas. It was opened as the state's land-grant college in 1863 and was the first public institution of higher learning in the state of Kansas. Kansas State's academic offerings are administered through nine colleges, including the College of Veterinary Medicine and the College of Technology and Aviation in Salina. Graduate degrees offered include 65 master's degree programs and 45 doctoral degrees.¹⁶

Konza Prairie Community Health & Dental Center

Konza Prairie Community Health Center is a not-for-profit charitable organization and partially funded by the federal government. Clients can access primary and preventive health care, dental services and mental health and substance abuse treatment provided in a compassionate, respectful, and professional manner.¹⁷

Konza United Way

Konza United Way is working to ensure access to affordable and quality healthcare, improving education outcomes for children and improving the economic opportunities and financial security for families. Konza United Way's goal is to create long-lasting changes by addressing the underlying causes of these problems in Clay, Marshall, Pottawatomie, Riley, Wabaunsee and Washington counties.¹⁸

Manhattan Surgical Hospital

Manhattan Surgical Hospital was established in 2001 as a physician-owned hospital with a commitment to patient satisfaction and care. Serving the needs of the growing patient population in northeast central Kansas, Manhattan Surgical Hospital provides efficient and quality care. The facility has six operating rooms, 13 inpatient rooms, three endoscopy suites, and five pain management treatment rooms.¹⁹

¹⁴ flinthillswellness.org

¹⁵ mcfks.org

¹⁶ k-state.edu/about

¹⁷ konzaprairiechc.com

¹⁸ konzaunitedway.org/

¹⁹ manhattansurgical.com

Riley County Health Department

The Riley County Health Department has been serving Riley County for well over 50 years with the goal of providing services that strengthen the health and quality of life of our communities in Riley County. A workforce of approximately 40 employees includes nurses, social workers, dietitians, support staff, and administration.²⁰

Survey dissemination and collection partners

In addition, the following organizations provided input regarding the draft assessment and/or were instrumental in encouraging the community to complete the survey or in disseminating and collecting surveys in Pottawatomie and Riley Counties. Because many organizations participated in disseminating or collecting surveys, our apologies to any that were inadvertently left off this list:

Ascension Via Christi Hospital - Manhattan, Big Lakes Developmental Center, Inc., Boys & Girls Club of Manhattan, City of Leonardville, City of Manhattan, City of Ogden, City of Randolph, City of Riley, Catholic Charities of Northern Kansas, Common Table, Community Health Ministry – Wamego, Downtown Manhattan Inc., Flint Hills Area Transportation Agency, Flint Hills Breadbasket, Flint Hills Community Clinic, Flint Hills Human Rights Project, Flint Hills Job Corps, Flint Hills Metropolitan Planning Organization, Flint Hills Volunteer Center, Food & Farm Council, Friendship Meals Program, Girls on the Run, Greater Manhattan Community Foundation, Homecare & Hospice, Kansas Guardianship Program, Kansas Legal Services, Kansas State University, Kansas State University Public Health Program, Konza Prairie Community Health Center, Konza United Way, KSNT News, Lafene Student Health Center, League of Women Voters of Manhattan/Riley County, Manhattan Alliance for Peace & Justice, Manhattan Area Chamber of Commerce, Manhattan Area Habitat for Humanity, Manhattan Area Housing Partnership, Manhattan Arts Center, Manhattan Emergency Shelter, Inc., Manhattan Housing Authority, Manhattan Medical Group, Manhattan Public Library, Manhattan Surgical Hospital, Meadowlark, Morningstar CRO, News Radio KMAN, North Central Flint Hills Area Agency on Aging, Northeast Kansas Community Action Program, Pawnee Mental Health Services Inc., Region Reimagined, Riley County, Riley County Council on Aging, Riley County Council of Social Service Agencies, Riley County Department of Community Corrections, Riley County Emergency Medical Services, Riley County Extension, Riley County Health Department, Riley County Police Department, Riley County Seniors' Service Center, Salvation Army, Shepherd's Crossing, Stormont Vail Health, Sunflower CASA Project, The Crisis Center Inc., The FIT Closet, The Manhattan Mercury, Thrive! Flinthills, UFM Community Learning Center, USD 320 Wamego, USD 332 Rock Creek, USD 378 Riley, USD 383 Manhattan/Ogden, USD 384 Blue Valley, Wamego Chamber of Commerce, Wamego Health Center, Wamego Smoke Signal, WIBW News and Wonder Workshop.

²⁰ rileycountyks.gov/286/health-department

Community Health Needs Assessment methodology

Community Health Needs Assessments (CHNA) are a valuable tool in determining community perceptions, strengths, and concerns for the purposes of planning and community improvement. Community assessments are required by the IRS and needed for accreditation by local health departments.

The 2020 Community Needs Assessment is the fifth such survey of Wamego/Pottawatomie residents conducted by WHC either as an individual ministry or in partnership with other community organizations. The first one, conducted in 2010 was based on interviews conducted with individuals representing businesses, healthcare providers, government agencies, school districts, faith communities and other not-for-profits in Manhattan, Wamego, Ogden and Junction City. The 2012 CHNA, conducted by Via Christi Health, focused solely on the healthcare needs of the aging population in all of the Via Christi markets. The 2018 CHNA was also conducted by Via Christi Health, in collaboration with Ascension Via Christi Hospital in Manhattan, Kansas and located in the neighboring Riley County and Wamego Health Center, a joint venture hospital of Ascension Via Christi.

The 2015 and 2020 CHNA, also conducted by Wichita State University's Center for Applied Research and Evaluation (WSU-CARE), was lead and coordinated by Riley County Seniors' Service Center through a grant from the Caroline Peine Charitable Foundation and in which Ascension Via Christi Hospital in Manhattan, City of Manhattan, Greater Manhattan Community Foundation, Kansas State University, Konza Prairie Community Health Center, Konza United Way, Manhattan Surgical Hospital and Riley County Health Department were funding partners. The 2018 and 2020 assessments are available for download on Ascension Via Christi's webpage

<https://www.viachristi.org/about-via-christi/mission/community-benefit>.

For the purpose of gathering responses from a broad cross-section of the community, the partners and supporters of the Pottawatomie County community needs assessment solicited participation from people of all ages, ethnicities, income brackets, professions, and other qualifiers that might impact one's experience and perception of the community. As is noted in the demographics section below, despite all efforts, populations such as younger adults and persons with lower incomes are not proportionately represented; however, this is a common limitation of a convenience sample because the response rate and demographics are dependent upon the willingness of community members to respond.

The following report includes detailed information about the methodology of the community survey, demographics of respondents, and survey data for Pottawatomie County. An overview of relevant secondary data (i.e., data available through public sources such as the most recent Census, Kansas Behavioral Risk Factor Surveillance System (BRFSS), Kansas Department for Children and Families, Kansas Kids Count, Kansas Communities That Care, etc.) have also been included to provide comparison points. Additionally, this report contains qualitative findings from focus groups. Survey data regarding Quality of Life is presented first followed by sections on Physical Health, Mental Health, Social Issues, Children and Youth, Education, Aging, Housing, Transportation, and Economics/Personal Finance. As noted, each topic section except Quality of Life begins with the related secondary data. Survey data are from the Community Needs Assessment survey that was completed (at least partially) by 262 Pottawatomie County residents. The survey was administered via the internet, and hard copies were distributed through community events and organizations. The survey was offered in Spanish

online and in hard copy. A postcard was mailed to a random sample of addresses in Pottawatomie County to encourage recipients to take the survey. The survey was open from September through November 2019.

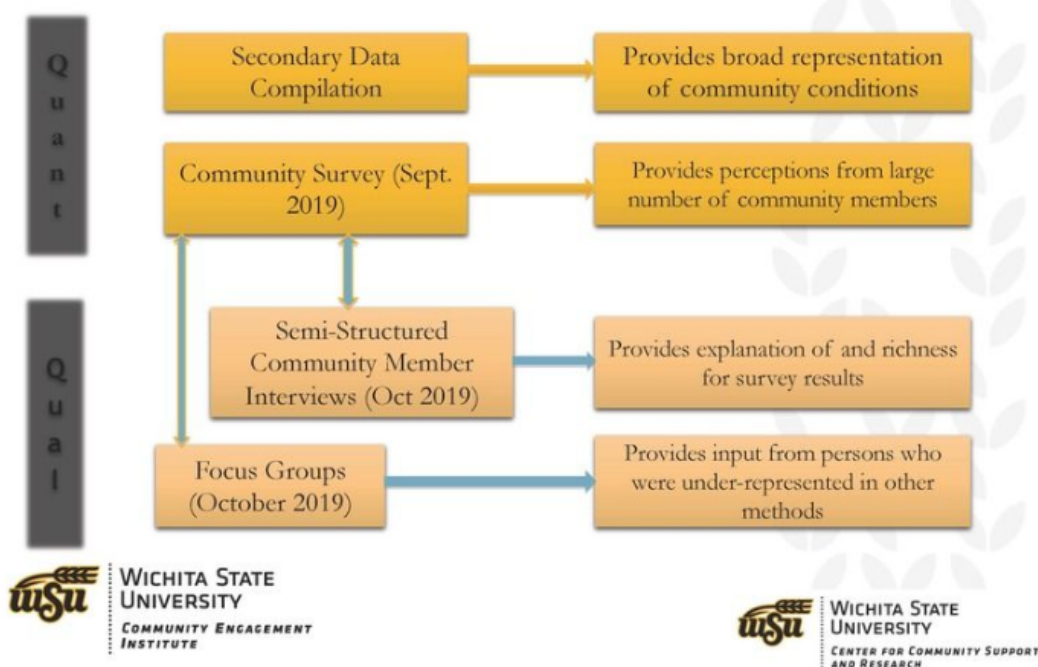
In order to gather further information on community perceptions, focus groups were conducted during October 2019. Two focus groups were conducted with parents and representatives of nonprofit, educational, and governmental organizations. The qualitative data from the focus groups help add richness to the archival data and survey findings as well as providing confirmation as to whether the quantitative data are truly descriptive of the experiences of persons in the community.

Design

As noted, WSU-CARE revised the survey used in 2014-2015 with input from community members. The original survey was based on questions that were common in other community needs assessments, and community members were also involved at that time in reviewing and suggesting changes. The changes made for the 2019 survey were primarily focused on:

- Removing questions that did not provide useful information in 2014-2015 (e.g., questions about where people purchase various items or services)
- Reorganizing the survey, such as combining Physical and Mental Health, and better identifying topics of subsections to make it easier to follow
- Adding questions and/or definitions to better quantify issues such as healthy eating, social isolation, custodial care of grandchildren, percentage of income spent on housing, etc.

Overall Process – Multi-Method Approach



Once WSU-CARE revised the survey based on initial feedback from a small design team, community partners were then invited to a community meeting to provide input. After the design team approved the final survey, WSU-CARE submitted the survey and information regarding methodology to the Wichita State University Institutional Review Board (IRB). Because the survey was not meant to be used for scientific research purposes and no individually identifiable or sensitive information was to be collected from participants, the IRB determined this survey to not require their oversight.

Two focus groups were held with a total of 21 participants. Questions allowed focus group participants to provide information regarding their general perceptions of the community, specific needs/concerns, specific strengths, and any suggestions on addressing issues or enhancing strengths. The questions also allowed participants to provide feedback as to whether findings from the survey results were reflective of their own experiences.

The elements of this community needs assessment were designed to provide triangulation in three areas: triangulation of methods, triangulation of sources, and triangulation of analysis (Patton, 1999). These are recommended methods for increasing the likelihood that the data gathered and findings provided are accurate and truly representative of perceptions of the entire community. Triangulation of methods was achieved through the use of archival data sources, survey data, and qualitative data from focus groups. Triangulation of sources involved gathering input from the general public through the survey as well as key community leaders and parents through the focus groups. Finally, three primary researchers led this project, reviewed each other's work, and provided reliability checks on the qualitative analysis.

Secondary Data

Secondary data are typically collected by large institutions or organizations and made available publicly. The most well-known example of a secondary data source is the U. S. Census. For the purposes of this community assessment, WSU-CARE compiled relevant pieces of secondary data to complement and compare to the survey and focus group data. The most recent secondary data available were used whenever possible; however, these data can often be several years old due to the arduousness of collection across large populations. Additionally, some secondary data are not available on a county level due to limitations in data collection or ethical issues in reporting on issues that affect a small number of persons in a given community. Given that multiple entities publish data on the same issues, it is also possible to find differences in what appears to be similar data. This is often due to slight differences in the reporting period, characteristics of the sample, method of data collection, or other variables. This report includes secondary data that are 1) easily understandable, 2) most relevant to the general community, and 3) from credible, well-respected sources. All data reported include the exact source and year from which the numbers were taken.

Community survey methodology

Sample selection

A convenience sample was used for online and hard copy surveys. This means that the survey was promoted widely across the community but participants were not targeted due to particular traits, location, or other factors. Anyone who wanted to complete the survey was considered part of the sample. The same survey was used for both online and hard copy versions. A postcard was mailed to a random sample of addresses in Pottawatomie County to encourage participation. However, the responses are still considered to be a convenience sample since participation was not limited to those who received a card. A total of 262 usable surveys (i.e., respondents answered more than

demographics questions) for Pottawatomie County were gathered across both methods of administration.

Online Survey

The online survey was created and administered in Qualtrics and posted on a dedicated website, <http://www.pottawatomiecountycommunityneedsassessment.org/>. The survey opened on September 22, 2019, and closed on November 18, 2019. The online survey was offered in English and Spanish, but no surveys were completed in Spanish. Surveys with only demographics completed were removed because they did not offer substantive information about community needs. A total of 259 online surveys were used for analysis.

Paper

The paper survey was made available at multiple locations throughout the community. Surveys were collected by a designated person at the site/location and sent back to WSU-CARE. The paper survey was offered in English and Spanish, but no Spanish surveys were submitted. Three (3) paper surveys submitted to WSU-CARE were included for analysis.

Postcard

Mailing Dr. Josie Shaffer of the University of Omaha created a random sample of addresses for Pottawatomie County using lists provided by the county. Postcards were mailed to 516 Pottawatomie County residents. Twenty-one (21) postcards were returned as undeliverable. The corresponding addresses were removed from the list and reminder postcards were sent to the remaining addresses in early November.

Table 1. Survey type for Pottawatomie County (n=262)

Survey type	Frequency	%
Online	259	98.9%
Paper	3	1.2%

Table 2. Survey language for Pottawatomie County (n=262)

Language	Frequency	%
English	262	100%
Spanish	0	0.0%

Table 3. How did you find out about this survey?

Notification Method	Frequency	%
Postcard with web address	35	13.5%
Through an organization I work with	92	35.1%

Media	54	20.6%
Word of Mouth	13	5%
Other	78	29.8%

Geographic distribution of survey participants

For the data in this section and those that follow, most percentages are figured based on surveys from 262 persons (i.e., N=262) unless otherwise specified. Particularly for demographics, the number and percentage of the total who did not answer the question is included with the data.

Table 4. Is this county your permanent residence?		
Answer	Frequency	%
Yes	247	94.3%
No	4	1.5%
Not answered	11	4.2%

Table 5. What is your zip code?		
2020 CHNA (N = 262)		
Answer	Frequency	Percent
66547	150	57.3%
66502	54	20.6%
66535	23	8.8%
66549	12	4.6%
66521	10	3.8%
66536	4	1.5%
66432	3	1.1%
66422	2	0.8%
66520	2	0.8%
66407	1	0.4%
66427	1	0.4%

Pottawatomie County is divided into twenty-three townships, with Wamego township having the largest population. The bulk of the Pottawatomie County 2020 CHNA respondents are residents of Wamego, as more than 57 percent of the respondents identified their zip code as 66547.

Focus Group Methodology

WSU-CARE provided data to a representative of Wamego Health Center regarding demographics of survey respondents. Based on this information and knowledge of the community, the representative identified which groups to target for participation and set up the two focus groups – one with community and governmental organization representatives and one with parents.

Focus groups were conducted in October 2019. Eighteen people attended the community/governmental organization focus group, and three attended the parents focus group. Each focus group lasted between 50 and 90 minutes.

WSU-CARE researchers designed the focus group questions to allow participants to provide feedback on findings from all sources of data collected to date (i.e., archival data and community survey) as well as add their own input on primary strengths and needs of the community. WSU-CARE researchers wrote down all comments on a flipchart so participants could provide corrections if needed.

WSU-CARE researchers used exploratory thematic analysis (Guest & Namey, 2011) to identify themes in participant comments. Exploratory thematic analysis is a method of categorizing qualitative data for the purpose of discerning a pattern in comments from participants. The exploratory nature (versus confirmatory) allows the content of participants' comments to drive the analysis rather than being directed by the hypothesis of the researcher. Using this method, the two WSU-CARE researchers who conducted the focus groups identified themes, and a third researcher who had not participated reviewed the notes and developed her own themes. The list from the third researcher was reviewed by the other two researchers. Any differences were discussed, and consensus was reached regarding the final themes. This technique was used as a way of verifying the accuracy of the analysis and can be considered a form of inter-rater reliability (Creswell, 2007). Due to the low number of persons in the parents focus group, the comments were not analyzed or reported separately by group to protect confidentiality.

Community Health Needs Assessment findings

Sample characteristics

Respondents were asked a series of questions about age, gender, race, ethnicity, income, and education to help assess the comparability of the survey respondents with the general population in Pottawatomie County, as reflected in the 2019 U. S. Census Estimate. Additionally, marital status, military service, employment status, student status, religious involvement, access to the internet, and access to community information were also asked to help with the interpretation of the survey results. The demographics (with the exception of age) were at the end of the survey, and approximately 30 percent of respondents did not answer most of the questions. This may have been due to survey length instead of unwillingness to provide demographic information.

In the 2019 survey, a fairly high percentage of participants did not respond to most of the demographics questions. In an attempt to avoid an issue with survey fatigue, WSU-CARE placed the most essential demographic questions to help describe the sample at the beginning of the survey. However, around 30 percent, and sometimes higher, did not respond to the questions other than the one about age. Therefore, it is difficult to describe the survey sample accurately. Of those who did provide demographic information, the largest groups were white, female, middle-aged, educated, with slightly higher incomes than average. Again, it is not known whether this is reflective of all respondents due to the number who did not provide demographic information.

In a recent study by the U. S. Census Bureau (McGeeney, Kriz, Mullenax, et al., 2019) regarding intention to respond to the 2020 Census, the authors concluded that interest in responding to the Census has eroded over the years due to lack of trust in public institutions and the government, and the overall trend toward lower response rates across all surveys. So, the low number of responses to demographic questions is consistent with current trends related to surveys. At the same time, the response rates to the more substantive questions regarding conditions in Pottawatomie County were much higher.

Table 6: Gender

Gender	2020 Survey Respondents	Pottawatomie County Population (2019 U.S. Census estimate)	2018 CHNA Respondents
Female	50.0%	50.3	83.5%
Male	19.5%	49.7	16.5%
Prefer not to answer	0.4%	n/a	n/a
Not answered	30.2%	n/a	n/a

Table 7: Age			
Age	2020 CHNA Respondents	Pottawatomie County Population ²¹ (2019 U.S. Census estimate)	2018 CHNA Respondents
Under 18	0.0%	29.9%	0.0%
18 to 24 years	1.9%	7.5%	2.3%
25-34 years	14.5%	13.2%	20.7%
35-49 years	45.4%	19.5%	36.5%
50-64 years	24%	18.2%	26.9%
65-74 years	11.1%	6.4%	7.6%
75 years and older	3.1%	5.3%	5.9%

In comparing the two CHNAs in Table 7, the percentage of respondents representing the various age groups are quite similar. However, respondents between the ages of 18 to 24 years are under represented for both the 2018 and 2020 CHNAs. As research has shown, this age group is growing increasingly challenging in recruiting for survey research.²² In 2018, an effort to reach out using social media was tried with the survey placed on SurveyMonkey and invitation banners on automatic pop-ups. This had a positive impact on all age groups but the 18 to 24 year old population.

Table 8: Race or Ethnicity			
Race or Ethnicity	2020 CHNA Respondents	Pottawatomie County Population ²³ (2019 U.S. Census estimate)	2018 CHNA Respondents
American Indian	1.1%	1.0%	0.3%
Asian	0.4%	1.0%	0.3%
African American/Black	0.0%	1.2%	0.0%
White	69.1%	89.9%	96.7%
Native Hawaiian/Pacific Islander	0.0%	0.1%	0.0%
Two or more races	0.8%	2.5%	1.0%
Hispanic or Latino	1.1%	8.5%	1.7%

²¹ Suburban Stats, Pottawatomie County, Kansas, downloaded on Jan. 22, 2020 from <https://suburbanstats.org/population/kansas/how-many-people-live-in-pottawatomie-county>

²² Dalessandro, Cristen, Recruitment Tools for Reaching Millennials: The Digital Difference, International Journal of Qualitative Methods, Volume 17: 1-7, 2018 downloaded on February 19, 2020 from <https://journals.sagepub.com/doi/pdf/10.1177/1609406918774446>

²³ U.S. Census QuickFacts, Pottawatomie County, Kansas, downloaded on Jan. 22, 2020 from <https://www.census.gov/quickfacts/fact/table/rileycountykansas,pottawatomiecountykansas,KS,US/PST045219>

More than 69 percent of the respondents identified their primary race as white. Table 8 shows the race and ethnic breakout for Pottawatomie County for both the CHNA and the 2019 Census. The rate of response by minority populations for the 2020 CHNA was 2.3 percent and in 2018 it is only 1.6 percent. Only 1.1 percent of the 2020 CHNA respondents identified themselves as Hispanic and are underrepresented when compared to the general population.

Community leaders should also take into account the impact of education, household income, employment, current health status in addition to race when looking for trends of health access and outcomes. As stated earlier, in the 2020 CHNA, this question was left blank by nearly 30.0 percent, making it difficult to draw any conclusions based on race or ethnicity.

Table 9: Annual Household Income			
Amount	2020 CHNA Respondents	Pottawatomie County Households (ACS)²⁴ (2019 U.S. Census estimate)	2018 CHNA Respondents
Less than \$10,000	0.0%	5.4%	2.7%
\$10,000-\$14,999	1.9%	2.7%	1.7%
\$15,000-\$24,999	1.9%	8.3%	3.1%
\$25,000-\$34,999	2.7%	8.8%	5.1%
\$35,000-\$49,999	7.3%	13.1%	14.3%
\$50,000-\$74,999	11.1%	21.0%	23.6%
\$75,000-\$99,999	14.1%	15.3%	24.9%
\$100,000-\$199,999	20.2%	22.3%	21.8%
\$200,000 or more	1.9%	5.8%	2.7%
Not answered	38.9%	n/a	n/a
Note: Median household income for Pottawatomie County is \$64,657 (2014-2018 Census estimate)			

The median household income for those responding to the 2020 CHNA was estimated to be nearly \$80,000 compared to a median household income for Pottawatomie county of \$64,657 estimate. The median household income for respondents to the 2018 CHNA was close to \$75,000. Table 10 shows the annual household income of 2020 and 2018 CHNA survey respondents along with the 2018 income data taken from the American Community Survey. In the 2020 CHNA, the five lowest household incomes comprise only 13.8 percent of all respondents and are underrepresented in comparison to 38.3% of the population that fall into these categories.

According to the Census Bureau FactFinder 2013-17, 95.3 percent of Pottawatomie County residents over the age of 25 years reported graduating from high school or higher with 22.6 percent reporting they had received a bachelor's degree or higher. How the 2020 CHNA respondents level of education compares with the 2018 and 2015 CHNA is shown in Tables 10.1 and 10.2. Note in Table 10.2 the 42.5

²⁴American Community Survey, 2017, Pottawatomie County, Kansas, downloaded on Jan 22, 2020 from <https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF>

percent non-response rate for the 2020 CHNA on this variable making it challenging to compare to previous CHNA respondent groups.

While there has been some variation across the three CHNAs for respondents with associate degrees or less, those reporting BA/BS, MA/MS or professional degrees have been the largest response groups for all recent assessments as 47.3 percent in 2020; 58.0 percent in 2018 and 43.4 percent in 2015 reportedly graduated from college.

Table 10.1: Education comparison of CHNA Respondents with other populations

Education Level	2020 CHNA Survey Sample	Pottawatomie County Census Data	Kansas Census Data
High school graduate	100.0%	95.3%	90.5%
Bachelor's degree (25+ pop)	32.6%	22.6%	20.6%
Graduate or professional degree (25+ pop)	34.8%	11.0%	11.7%
Note: Survey sample does not include the percentage not answered.			

Table 10.2: Highest Level of Education Achieved

Education Level	2020 CHNA Respondents	2018 CHNA Respondents	2015 CHNA Respondents
Less than 9th grade	0.0%	0.3%	0.0%
9th-12th grade	0.0%	0.7%	1.0%
High School graduate	2.7%	7.3%	6.6%
Associate's degree or vocational training	9.2%	19.8%	11.7%
Some college (no degree)	11.1%	13.9%	13.3%
Bachelor's degree	22.9%	31.0%	25.7%
Graduate or professional degree	24.4%	27.0%	17.7%
No response	29.8%	0.0%	24.0%

Table 11: Marital Status

Marital Status	2020 CHNA Respondents	2018 CHNA Respondents	2015 CHNA Respondents
Single, never married	3.1%	6.0%	2.9%
Married	56.1%	77.4%	60.0%
Divorced	6.9%	8.6%	6.8%
Widowed	1.9%	4.0%	5.1%
Not married, but living together	1.5%	3.7%	1.0%
Domestic partnership or civil union	0.8%	0.3%	0.0%
No response	29.8%	0.0%	24.2%

More than 56 percent of the 2020 CHNA respondents are married—a somewhat lower percentage than the 61.1 percent of the general population of Pottawatomie County. This is about 21 percent lower than the previous CHNA. Table 11 compares the respondent breakout for all three CHNA efforts.

When respondents were asked if they are currently or if they had been a member of the Armed Services more than seven percent identified that they are or have served in the military in the 2020 CHNA. When asked what their military status was right now, in the 2020 CHNA less than one percent stated they were currently active compared to 4.6 percent in the 2018 CHNA. Only 1.1 percent indicated that their current military status was disabled or injured—a decline from 2018 when 4.6 percent of the respondents stated they were disabled or injured.

Table 12: Employment Status			
Employment Status	2020 CHNA Respondents	2018 CHNA Respondents	2015 CHNA Respondents
Self-employed	3.8%	3.4%	5.5%
Employed full time (one job)	42.0%	62.7%	39.0%
Homemaker	2.3%	3.7%	4.1%
Disabled	1.5%	1.3%	1.4%
Unemployed for more than one year	0.0%	0.0%	1.0%
Unemployed for 1 year or less	0.0%	0.7%	0.0%
Working more than one job	7.6%	8.4%	6.2%
Employed part time	3.4%	9.1%	5.3%
Retired	9.2%	9.4%	12.5%
Other/not answered	30.2%	1.3%	24.8%

When it came to the question of employment status, 42 percent indicated they were employed full-time compared to 62.7 percent in 2018 and nearly 40 percent in 2015. Those working more than one job remained stable at 6-8 percent over the last three CHNA surveys. Respondents also reported that an average of 1.7 people in their household were working. Unlike Riley County where 87 percent of respondents work close-to-home, only 38.5% of Pottawatomie County workers are employed in Pottawatomie County. How the current respondents compare with the 2015 and 2018 CHNA respondents when it comes to employment status is summarized in Table 12.

Table 13: Other Socio Demographic Variables Tracked			
Variable Description	2020 CHNA Respondents	2018 CHNA Respondents	2015 CHNA Respondents
Yes, I am a student taking courses for credit	3.4%	9.0%	5.5%
Yes, I am attending a 4-yr college or university	1.5%	3.6%	5.5%
Yes, I do participate in a religious faith community	44.7%	65.3%	52.4%

Other socio demographic variables that were asked for previous CHNAs efforts are listed in Table 13. The 2020 CHNA respondent group has a drastically decreased percentage of students attending a four-year college or university, but the response rate for this question was extremely low with 96.6 percent of respondents choosing not to answer the question. The percentage of faith participants in this research effort decreased by more than 20 percent from the 2018 CHNA and fell below 57.7 percent in Riley County who participate in a religious faith community.

More than 49 percent of all respondents in the 2020 CHNA stated they get their news about community events through social media (Facebook, Twitter, etc.), reflecting a continued reliance on social media as an information source. When asking the respondents how they access the internet, most respondents indicated they have multiple ways and the most popular forms are through a home computer and a mobile application of some form.

The percentage of these two forms has increased since the 2015 CHNA. See Table 14 for specific breakout. It is surprising that fewer 2020 CHNA respondents identified accessing the internet from a home or work computer, as well as a mobile application when compared to the 2018 CHNA respondents. It could be that fewer 2020 CHNA respondents are accessing the internet but may be using technology for staying in touch with family and friends through texting. It was a surprising find in the 2018 CHNA that regardless of the respondent's age, more people are embracing technology in multiple ways. Surfing the web, texting, tweeting, using Facebook and/or Instagram was thought to be an "addiction" of the millennials but a growing number of seniors are also catching the "bug" and using technology for business, social connectedness, health access and advice, as well as hobbies.

Table 14: How Internet is Accessed

Education Level	2020 CHNA Respondents	2018 CHNA Respondents	2015 CHNA Respondents
Home computer	55.3%	76.2%	64.1%
Public computer	3.1%	3.7%	2.9%
Work computer	43.1%	38.6%	42.1%
Mobile (tablet, cell phone, etc.)	59.9%	74.8%	47.8%
I don't access the internet	0.0%	2.3%	2.7%
No response	n/a	0.0%	24.0%

Quality of life

When asked about qualities that contribute to Pottawatomie County's quality of life, the items on which participants agreed most were good place to raise children (mean=4.2), safe place to live (mean=4.1), and overall satisfaction with the quality of life (mean=4.0). Additionally, participants largely agree that they intend to stay at least five years (mean=4.2). The lowest levels of agreement are satisfaction with local government, the presence of networks of support for individuals during times of need, recreational opportunities, being strengthened by diversity, and accessibility for persons with disabilities (mean=3.3 for all items). The three most important factors contributing to the quality of life in Pottawatomie County were good schools, good place to raise children, and safe neighborhoods. Although affordable

housing was not in the top three overall, it was ranked number one third most often (behind good place to raise children and good schools).

Table 15. Rate the following statements about the <i>quality of life</i> in the community based on your experiences. (1=Strongly Disagree, 5=Strongly Agree)							
Answer	N	% Strongly Disagree	% Disagree	% Neither Agree nor Disagree	% Agree	% Strongly Agree	Mean (Range 1-5)
I am satisfied with the quality of life in the community.	253	1.2	4.7	8.7	59.7	25.7	4.0
I am satisfied with the health care system in the community.	251	4	19.5	15.1	46.2	15.1	3.5
I am satisfied with the local schools in the community.	250	2.8	6.8	14.4	45.2	30.8	3.9
I am satisfied with the local government in the community.	251	2.4	17.5	31.9	41.8	6.4	3.3
The community is a good place to raise children.	251	0	2	8.4	53.8	35.9	4.2
My community is a good place to retire.	251	2.4	6.4	24.3	43.4	23.5	3.8
This is a safe place to live.	251	0	2.4	8.4	62.9	26.3	4.1
There is economic opportunity in the community.	250	3.2	20.4	22.8	40.4	13.2	3.4
There are networks of support for individuals during times of need in the community.	248	6	16.1	29.8	38.3	9.7	3.3
There are networks of support for families during times of need in the community.	250	3.6	9.6	31.6	45.2	10	3.5
There are plenty of recreational activities in the community.	250	6	24	18	41.2	10.8	3.3
There are volunteer opportunities in the community.	251	0.8	10.4	21.5	46.6	20.7	3.8
I can make the community a better place to live.	248	0.8	4	16.5	61.7	16.9	3.9
The community is strengthened by its diversity.	250	4.4	12.8	38	34	10.8	3.3
I intend to stay in the community over the next five years.	250	2.8	2.8	8	42.8	43.6	4.2
I am satisfied with accessibility in this community for persons with disabilities.	250	2.4	13.2	42	32.4	10	3.3

Table 16. What are the three most important factors contributing to the quality of life in the community?

Answer	Overall Frequency (any ranking)	Overall % (any ranking)	% Ranked 1st	% Ranked 2nd	% Ranked 3rd
Good schools	108	41.2	16.0	19.1	6.1
Good place to raise children	91	34.7	16.8	12.6	5.3
Safe neighborhoods	76	29	8.8	7.6	12.6
Low crime	62	23.7	3.8	9.2	10.7
Affordable housing	54	20.6	9.9	5	5.7
Jobs paying a living wage	53	20.2	6.1	8.8	5.3
Availability of healthcare	48	18.3	7.3	5.3	5.7
Clean environment	44	16.8	5.3	4.6	6.9
Strong family life	41	15.6	5.7	2.7	7.3
Healthy economy	36	13.7	3.4	4.6	5.7
Religious or spiritual values	29	11.1	4.6	2.7	3.8
Parks and recreation	24	9.2	0	4.2	5
Access to affordable health insurance	19	7.3	3.1	1.5	2.7
Healthy behaviors and lifestyles	18	6.9	0.8	1.1	5
Career enhancement	13	5	1.5	1.9	1.5
Arts and cultural events	10	3.8	0	1.5	2.3
Other	5	1.9	0.4	0	1.5
Equality	4	1.5	0.4	0.8	0.4
Low level of child abuse	3	1.1	0.4	0.4	0.4
Low disease rates	3	1.1	0.4	0.4	0.4
Resources for parents	2	0.8	0	0.4	0.4
Physical access to public facilities	1	0.4	0	0.4	0

Personal Health

(including physical activity, nutrition and tobacco use)

According to Kansas BRFSS, Pottawatomie County slightly exceeds the state percentage for those who report they are in fair or poor health (20.5 percent for Pottawatomie County; 17 percent for Kansas). The ratio of residents to primary care physicians is also higher than the state average (1,580:1 for Pottawatomie and 1,310:1 for Kansas).

The same is true to a much greater extent for dentists (3,980:1 for Pottawatomie versus 1,740:1 for Kansas). Otherwise, Pottawatomie County is lower or nearly equal to Kansas on most health risk and health condition data. In the survey, respondents indicated it is “not too difficult” to access healthcare (mean=3.4 on a 1-4 scale). They responded similarly for dental care (mean=3.2).

They were more neutral about whether there were plenty of options for exercise (mean=3.4 on a 1-5 scale) and availability of accessible activity/recreation options for persons with disabilities (mean=2.8). When asked if the community values healthy eating, the average response was neither agree nor disagree (mean=3.1). Respondents were only slightly more positive about having access to healthy food (mean=3.5). Nearly 11 percent indicated they had ever been concerned about having enough to eat, and 3.1 percent reported having skipped meals in the past seven days due to not being able to afford food. The top needs to be addressed are affordable health services, affordable health insurance, and facilities for physical activity.

Table 17. Selected Secondary Physical Health Data Secondary Physical Health, Physical Activity, Nutrition, and Tobacco Use Data			
Personal Health	Pottawatomie County	Kansas	Source
Percent of adults with fair or poor self-perceived health status, 2017	20.5%	17%	BRFSS
Percent of adults without health insurance, 2017	9.4%	12.5%	BRFSS
Ratio of population to primary care physicians, 2016	1,580:1	1,310:1	Robert Wood Johnson Foundation County Health Rankings
Ratio of population to dentists, 2017	3,980:1	1,740:1	Robert Wood Johnson Foundation County Health Rankings
Percent of adults with hypertension, 2017	33.1%	32.8%	BRFSS
Percent of adults who had heart attack (MI), angina, or heart failure after MI, 2017	24.1%	26.4%	Centers for Medicare & Medicaid Services
Percent of adults tested and diagnosed with high cholesterol, 2017	23.1%	34.1%	BRFSS
Rate of age-adjusted cancer (all cancer sites), per 100,000, 2011-2015	427.89	455.84	KS Cancer Registry

Personal Health	Pottawatomie County	Kansas	Source
Female Breast Cancer Rate (per 100,000 female population)	111.0	124.9	Kansas Health Matters via
Percent of adults diagnosed with diabetes, 2017	11.3%	10.5%	BRFSS
Percent of adults who were immunized against influenza in the past 12 months, 2017	36.0%	38.4%	BRFSS
Percentage of adults aged 18 years and older who did not get immunized against influenza during the past 12 months, 2017	64.0%	61.6%	BRFSS
Percent of adults who are obese, 2017	29.8%	32.3%	Kansas Health Matters via Kansas Department of Health and Environment
Percent of adults living with a disability, 2017	26.7%	25.9%	BRFSS
Percent of adults not doing enough physical activity to meet both aerobic and strengthening exercise recommendations, 2017	14.5%	19%	Kansas Health Matters via Kansas Department of Health and Environment
Percent of adults who reported consuming fruit less than one time per day, 2017	38.9%	37.5%	BRFSS
Percent of adults who reported consuming vegetables less than one time per day, 2017	16.7%	17.3%	BRFSS
Percent of food insecure households, 2017	10.6%	12.7%	Kansas Health Matters via Feeding America
Percent of people with low access to grocery store, 2015	0.5%	(State not available)	Kansas Health Matters via US Department of Agriculture-Food Environment Atlas
Percent of adults who currently smoke cigarettes, 2017	17.7%	17.4%	BRFSS
Percent of Medicare Part D Beneficiaries having Daily Opioid Dosage >= 90 MME, 2017	20.0%	16.6%	Kansas Health Matters via Kansas Foundation for Medical Care

Physical health survey data

When asked to identify all the sources for health-related information, 80.2 percent of Pottawatomie County CHNA respondents reported from a doctor or nurse with the internet coming in second at 61.4 percent (2018 data). Table 18 compares the 2020 CHNA with 2018 and 2015 CHNA responses.

Table 18: How do you get most of your health related information?

Community Health Needs Assessment						
Source	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
Traditional media	7.0%	n/a	n/a	5.1%	n/a	n/a
Social media	4.8%	n/a	n/a	3.4%	n/a	n/a
Internet	n/a	68.6%	54.1%	n/a	61.4%	45.4%
Health professional (e.g., doctor, nurse, technician, dentist, hygienist, etc.)	73.6%	76.8%	76.8%	80.2%	81.2%	74.5%
Friends/family	4.6%	34.8%	38.5%	5.1%	31.4%	34.5%
Other	9.9%	4.9%	21.9%	6.3%	6.9%	45.4%
Note: Survey sample does not include the percentage not answered.						

It is interesting to note that in the 2020 CHNA, friends/family no longer play a vital role as a resource to turn to for respondents when it comes to health related questions or information. It is difficult to know whether this decline is due to an increase of on-line health information available on the internet since this specific question was not included in the 2020 CHNA.

Nearly 60 percent of Pottawatomie County 2020 CHNA respondents indicated their health was “very good to excellent.” That is more than 18 percent higher than the rating of Riley County residents and a new high in comparison to both the 2018 and 2015 CHNA response ratings for Pottawatomie County. See Table 19 for a breakout of responses. Backing up the feeling of good health by residents, Pottawatomie County ranks third in the 2018 Robert Wood Johnson’s County Rankings out of 103 counties in Kansas for health outcomes.²⁵

Table 19: How would you describe your overall health?

Community Health Needs Assessment						
Rating	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
Excellent	12.4%	11.6%	20.3%	13.3%	9.5%	18.9%
Very Good	29.0%	41.3%	39.3%	46.6%	35.9%	39.8%
Good	21.1%	36.8%	27.4%	31.7%	37.5%	28.1%
Fair	8.3%	7.9%	6.4%	7.6%	14.5%	7.8%
Poor	1.1%	2.1%	1.5%	0.8%	2.6%	0.6%
Not sure/Not answered	28.1%	0.3%	4.7%	0.0%	0.0%	4.5%

²⁵ Robert Wood Johnson (2019) County Health Rankings. Downloaded on Feb. 10, 2020 from <https://www.countyhealthrankings.org/app/kansas/2019/rankings/outcomes/overall>.

In looking at specific diseases, the majority of respondents identified they had not yet been diagnosed with any major illnesses. But if they were having health related challenges, it was more likely to be from high blood pressure or high cholesterol. See Table 20 for the specific breakout of diseases listed. Some variables show a positive decline (e.g. high cholesterol and heart disease) but keep in mind that the swing may be due more to the population of survey respondents (e.g. respondents with insurance coverage, higher household incomes, medical home, etc.) and some of the decline may be due to the qualifier of “diagnosed”. There was little difference reported between Riley and Pottawatomie Counties.

Table 20: Diagnosed by health professional with following diseases						
	Community Health Needs Assessment					
Responses	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
Alzheimer's/dementia	0.3%	0.0%	0.4%	0.0%	0.7%	0.6%
Cancer	8.6%	7.9%	7.3%	7.6%	8.9%	6.8%
Chronic lung disease	3.6%	2.1%	2.5%	5.7%	2.3%	1.6%
High cholesterol	15.5%	20.4%	22.6%	16.0%	17.2%	18.9%
Heart disease	4.0%	4.0%	5.0%	5.3%	4.0%	4.3%
Diabetes	5.4%	9.8%	7.7%	8.8%	10.0%	8.8%
High blood pressure	19.1%	26.6%	23.4%	25.2%	28.2%	24.0%

When comparing the 2020 CHNA data with the previous CHNA, the percentage of people getting an annual flu shot has remained relatively stable in Riley County but dropped somewhat in Pottawatomie County. More than 94 percent of all survey respondents in Riley County identified they were covered by health insurance and more than 96 percent of survey respondents in Pottawatomie County were covered by health insurance.

When asked whether or not the respondents consult a professional when they are sick, 87 percent of the respondents in Riley County and 84 percent in Pottawatomie County said yes they did. See Table 21 for a breakout comparison of health behaviors between 2020, 2018 and 2015 CHNA respondents for Riley and Pottawatomie County.

Table 21: Health behaviors comparison						
	Community Health Needs Assessment					
"Yes" Responses	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
Have health insurance	94.9%	95.7%	92.6%	96.6%	96.7%	92.8%
Consult a professional when sick	87.3%	85.7%	87.1%	83.6%	83.1%	88.9%
Received a flu shot or nasal spray in the last 12 months	71.4%	74.0%	64.7%	67.6%	73.0%	58.5%

When asked where Riley and Pottawatomie County respondents go most often when they get sick, most indicated they go to their doctor's office. The same response was given for this question in the 2018 and

2015 CHNA as well. Table 22 shows the responses for this question. Note the growing impact that urgent care centers initially had on emergency rooms, although their growth has slowed since 2018.

Table 22: Where people go most often when sick						
	Community Health Needs Assessment					
Responses	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
My doctor's office	79.1%	81.5%	75.8%	72.5%	81.9%	76.6%
Medical clinic	2.8%	1.9%	4.1%	8.4%	2.7%	5.7%
Health department	0.5%	0.3%	0.8%	0.4%	0.0%	0.4%
Urgent care center	10.7%	10.5%	3.1%	8.8%	10.4%	2.7%
Hospital emergency center	1.9%	0.9%	1.5%	0.8%	1.3%	0.8%
Free clinic	1.4%	0.3%	0.5%	0.8%	1.7%	0.4%
Other	3.8%	4.6%	1.2%	2.3%	2.0%	2.5%
Note: Survey sample does not include the percentage not answered.						

The vast majority of respondents agreed to the statement “I can access the healthcare I need in this community for both healthcare and dental care.” More than 90 percent of Pottawatomie County respondents agreed with this statement regarding their healthcare and nearly 82 percent agreed regarding dental care. See Table 23 for a breakout of Riley versus Pottawatomie County in 2020. For Riley County, nearly 87 percent agreed with this statement regarding their healthcare and nearly 86 percent agreed regarding dental care.

Table 23. When you need healthcare or dental care, how easy is it for you to access in the community?				
	Community Health Needs Assessment			
Rating	Riley County 2020		Pottawatomie County 2020	
	Healthcare	Dental care	Healthcare	Dental Care
Very difficult	3.5%	6.3%	1.6%	5.3%
Difficult	9.3%	7.8%	7.7%	12.2%
Not too difficult	45.2%	36.1%	43.1%	40.2%
Very easy	42.0%	49.7%	47.6%	42.3%
Note: Question was new or reworded from prior years; no comparative data.				

Physical Activity

When asked how many hours per week the respondents engage in physical activity or exercise outside of their jobs, the collective majority of respondents selected between one and two hours; the next most frequent answer was three or more hours of exercise per week. In Riley County, the majority of respondents indicated three hours or more which was also true of Pottawatomie County residents by a

smaller margin. The average number of hours spent in physical exercise in 2020 is more than what was reported in 2018 or 2015 for Riley County but not for Pottawatomie County.

Table 24: Hours per week engaged in physical activity or exercise						
	Community Health Needs Assessment					
Responses	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
None	3.2%	3.7%	3.0%	4.6%	6.3%	2.9%
Less than 1 hour	15.7%	15.3%	10.6%	17.6%	20.5%	12.7%
Between 1-2 hours	21.3%	26.0%	25.7%	24%	31.7%	22.8%
Between 2-3 hours	22.4%	25.1%	20.2%	19.8%	17.8%	23.8%
3 hours or more	37.4%	30.0%	35.6%	27.5%	23.8%	32.2%
Note: Survey sample does not include the percentage not answered.						

Most Riley respondents indicated that they exercise at home (37.8%), neighborhood (29.4%) in the park (23.7%) or at a private gym (15.5%). Others identified the public recreation center, school or specific locations. Similar behaviors were reported with Pottawatomie County residents but with a much higher percentage reporting that they exercise at home (59.9%). A recurring theme in the comments section of the survey was the perceived need for a facility for recreational activities.

Table 25: Where do you go to exercise?		
	Community Health Needs Assessment	
Responses	Riley County	Pottawatomie County
	2020	2020
A school	3.1%	3.8%
Private gym/studio	15.5%	17.2%
Park	23.7%	18.7%
Neighborhoods	29.4%	26.3%
Home	37.8%	59.9%
Public recreation center	5.5%	6.5%
Other	10.3%	12.2%
Note: Question was new or reworded from prior years; no comparative data.		

Approximately 22.9 percent of all 2020 CHNA respondents in Riley County disagreed that there are enough options for physical activity in their community and 23.3 percent of Pottawatomie County disagreed with this statement. However, it should also be noted that 56.4 percent of Riley County survey respondents agreed that their community already had enough options. A much smaller number (15.8% and 16.3% respectively) responded that there are enough accessible physical activity/recreation options in the community for persons with physical disabilities in Riley and Pottawatomie Counties.

The response rate was exceptionally low in 2020 as to why respondents do not exercise. In past years, respondents had indicated that they have health issues that inhibit their physical activities. Others expressed a need for an affordable indoor therapy pool for water aerobics. Some suggested there wasn't enough time in the day to exercise and several suggested that between school, work and required work around home, they didn't have energy to do more. Only a few admitted to not making exercise a priority.

Table 26: Perceived importance of select community values

Agree to Strongly Agree	Community Health Needs Assessment					
	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
This community values physical activity	56.7%	59.3%	62.5%	46.8%	49.7%	54.9%
This community values healthy eating	35.0%	39.0%	43.6%	32.0%	32.4%	38.8%
There are plenty of options for exercise in this community	56.4%	n/a	n/a	58.3%	n/a	n/a
There are enough accessible physical activity/recreation options in this community for persons with physical disabilities	15.8%	n/a	n/a	16.3%	n/a	n/a

Nutrition

The CHNA included a series of questions regarding food supply and diet selection to capture possible contributing factors, including environment, housing, civic and faith participation, education and literacy, and social services.

More respondents in Pottawatomie County (46.8%) agree or strongly agree with the statement "this community values exercise," than those who agree or strongly agree that "this community values healthy eating" (32%).

The responses indicate that residents value physical activity but perceive that healthy eating is not equally valued in the community. Availability of healthy, affordable food options and nutritional counseling may be a concern in the community. In 2018, Manhattan was ranked 2nd in the Top 100 Best Places to Live based on its livability scores. In 2019, the City ranked 16th. The City competed with more than 2,300 cities with populations between 20,000 and 350,000 on 40 data points selected by the research partnerships.

Some of the rankings were based on economics, housing, amenities, infrastructure, demographics, social and civic capital, education and health care. While Wamego isn't large enough to be considered in this ranking, its proximity to Manhattan affords Wamego residents the opportunity to access many of the services and amenities the City of Manhattan offers.²⁶

²⁶ Journal Communications, Inc. *Livability 2019 Top 100 Best Places to Live*. Downloaded on Feb. 11, 2020 from <https://livability.com/list/top-100-best-places-to-live/2019/10?page=1>

Table 27: Overall, I eat healthy foods

	Community Health Needs Assessment					
Rating	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
Strongly agree	19.5%	10.3%	15.5%	13.7%	9.2%	10.9%
Agree	52.1%	59.9%	57.9%	60.2%	51.8%	63.2%
Neither disagree/agree	17.1%	20.4%	14.6%	17.0%	27.7%	13.6%
Disagree	9.9%	8.5%	6.0%	8.3%	10.6%	6.2%
Strongly disagree	1.4%	0.9%	0.8%	0.8%	0.7%	0.0%

While the majority of all respondents reported they **eat** healthy foods as shown in Table 27 they also indicate they have **easy access** to healthy food, yet there is a difference between counties. For respondents living in Riley County, 70.3 percent of the respondents either agreed or strongly agreed they had easy access. But in Pottawatomie County, only 62.5 percent of the respondents felt the same way when it came to their ability to access healthy food. However, this is an improvement over the 2018 CHNA when only 56 percent of Wamego residents felt they had access to healthy food.

The Wamego community has partnered with organizations, including the Wamego Health Center, to establish a community garden to grow vegetables and make them free of charge to those willing to harvest them. Excess produce is donated to the food pantry for distribution to the low income residents.

More than 11 percent of the respondents from Riley County and more than 10 percent of Pottawatomie respondents identified they are concerned about having enough food. Additionally, more than 5 percent of Riley residents and 3 percent of Pottawatomie have skipped meals in the last seven days because they couldn't afford food. Given the demographics of the CHNA respondents, this figure is likely to be low.

Table 28: Do you eat at least two cups of fruits and vegetables each day?

	Community Health Needs Assessment			
	Riley County - 2020		Pottawatomie County - 2020	
	Yes	No	Yes	No
Fruit - 2+ cups	31.7%	37.3%	38.9%	50.8%
Vegetables - 2+ cups	44.1%	26.2%	59.5%	32.4%

Thirty-nine percent of all respondents in the 2020 stated they eat at least two cups of fruit and two cups of vegetables each day as shown in Table 29. The top three reasons respondents in both Riley and Pottawatomie Counties gave for not eating more fruits and vegetables are:

- They perceive these products cost too much
- They don't have time to purchase and prepare them
- They, or members of their family, don't like them

Smoking/Tobacco use

When asked about their use of tobacco products, 5.1 percent of Riley County residents and 10.3 percent of Pottawatomie County respondents indicated that they currently smoke, use tobacco products or e-cigarettes.

Respondents from Pottawatomie County were more likely than respondents from Riley to self-identify as users. When the respondents who smoke/use tobacco products were asked where they would go if they wanted to quit, the highest percent indicated their doctor.

Other Health Needs

When asked to identify the top three physical health needs for the community, Riley County respondents most frequently selected affordable health services, affordable health insurance and affordable prescriptions. Residents in Pottawatomie County were very similar, selecting affordable health services, facilities for physical activity and affordable prescriptions. In addition to the four variables already mentioned, an increased number of care providers and increased availability of healthcare specialists were also frequently mentioned. Table 29 shows the list of identified physical health needs with the response ratings.

Table 29: Top 3 needs related to physical health						
Responses	Community Health Needs Assessment					
	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
Access to healthy food options	13.4%	14.5%	17.1%	4.2%	28.8%	21.2%
Affordable health insurance	28.7%	49.4%	29.9%	20.2%	45.1%	24.2%
Affordable health services	33.0%	45.1%	33.7%	40.1%	32.3%	29.2%
Affordable prescriptions	18.8%	26.9%	18.9%	23.3%	23.4%	20.9%
Children's health services	6.3%	7.7%	7.7%	2.7%	11.2%	8.6%
Dental care options	7.8%	18.5%	14.3%	1.1%	10.9%	13.1%
Maternal health services	3.4%	8.0%	5.2%	0.8%	6.4%	4.5%
Prevention of infant mortality	0.2%	1.2%	1.0%	0%	1.4%	0.4%
Healthcare assistance for older adults	7.7%	14.8%	14.5%	10.7%	18.3%	12.3%
Healthcare assistance for veterans	3.7%	6.5%	7.8%	5%	9.2%	5.3%
Increased number of healthcare providers	12.2%	21.6%	16.2%	17.6%	15.3%	13.9%
Availability of transportation to health services	1.3%	11.1%	16.1%	9.9%	11.9%	10.9%
Facilities for physical activity	18.0%	24.4%	28.5%	30.5%	34.6%	33.7%
Increased health education/prevention	2.0%	15.1%	22.1%	15.3%	18.3%	20.3%
Availability of health care specialists	17.6%	n/a	n/a	13.4%	n/a	n/a
Tobacco use cessation services	1.6%	3.7%	3.6%	1.1%	5.4%	5.1%
Other	6.9%	15.4%	11.2%	2.7%	7.8%	14.8

Mental Health

Mental health has become a growing concern at all levels as federal and state resources have been slashed yet demand for services has not decreased. Prisons, nursing homes, and homeless shelters have all seen an increase in population due to limited housing resources for people in need of mental health services. When the CHNA respondents were asked to describe their mental health, more than half of all respondents stated very good to excellent. Table 30 summarizes the status of mental health for the CHNA respondents.

Secondary data sources for Pottawatomie County show slightly higher percentages reporting that their mental health wasn't good on 14 or more of the past 30 days than is typical for Kansas (15.5% versus 11.4%). The Robert Wood Johnson Foundation County Health Rankings indicate a large disparity between the ratio of residents to mental health providers between Pottawatomie County and the state overall (3,420:1 for Pottawatomie County compared to 530:1 for Kansas). Additionally, just over 30% of respondents to the community needs assessment indicated that they do not access services for mental health when they are not feeling mentally healthy.

Survey participants largely disagree that there are adequate mental health services in the community (mean=2.8). Respondents to the survey generally said their mental health was very good (mean=3.8).

Table 30. Selected Secondary Mental Health Data

Mental Health	Pottawatomie County	Kansas	Source
Percent of adults reporting that mental health was not good on 14 or more days in the past 30 Days, 2017	15.5%	11.4%	BRFSS
Percent of adults ever diagnosed with a depressive disorder, 2017	18.5%	20.9%	BRFSS
Percent of Medicare recipients with depression, 2017	16.7%	18.9%	Kansas Health Matters
Percent of Medicare recipients with schizophrenia and other psychotic diagnoses, 2017	2.4%	2.9%	Centers for Medicare and Medicaid Services
Rate of children Under 18 hospitalized for mental health (per 1,000), 2017	1:6	5.9	Kansas Kids Count via Kansas Hospital Discharge Data
Ratio of population to mental health providers, 2018	470:1	530:1	Robert Wood Johnson Foundation County Health Rankings

Table 31 summarizes the status of mental health for the CHNA respondents in Riley and Pottawatomie Counties. Riley County respondents rating their mental health as fair or poor increased from 8.8% in 2018 to 11.2% in the 2020 CHNA while Pottawatomie County respondents remained similar to 2018 numbers. When asked if the Riley County respondents consult a mental health professional when their

mental status is not good, 19.9 percent said no while 30.2 percent of the Pottawatomie County respondents said no.

Table 31: How would you describe your overall mental health?						
Rating	Community Health Needs Assessment					
	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
Excellent	25.1%	21.7%	43.0%	23.0%	21.5%	44.6%
Very Good	37.0%	36.0%	32.0%	45.7%	38.4%	32.0%
Good	26.6%	32.6%	21.0%	23.0%	30.5%	18.8%
Fair	9.4%	7.3%	4.0%	7.4%	7.3%	4.3%
Poor	1.8%	1.5%	0.5%	0.8%	2.3%	0.0%
Not sure	n/a	0.9%	1.0%	n/a	0.0%	0.2%

Survey participants largely disagree that there are adequate mental health services in the community (mean=2.8). The top needs to be addressed regarding mental health were affordable mental health services, affordable health insurance that includes mental health care, and increased number of mental health providers. Addressing the stigmatization of those with mental health issues was not in the top three, but was ranked first the second most often after affordable health insurance that includes mental health care. Table 32 shows the list of mental health needs identified and how they ranked previously for a comparative analysis.

Table 32: What are the top three needs related to mental health in your community?						
Responses	Community Health Needs Assessment					
	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
Affordable mental health services	31.7%	68.0%	39.9%	37.0%	57.8%	34.5%
Affordable health insurance that includes mental health	27.9%	n/a	n/a	17.6%	n/a	n/a
Addressing the stigmatization of those with mental health issues	20.8%	n/a	n/a	23.3%	n/a	n/a
Suicide prevention	12.6%	n/a	n/a	17.6%	n/a	n/a
Affordable prescriptions	12.2%	18.4%	15.1%	15.6%	16.2%	11.1%
Children mental health services	11.2%	19.3%	17.0%	23.3%	31.1%	20.3%
High quality mental health services	18.1%	44.6%	31.6%	24.4%	42.2%	28.7%
Increased mental health education/prevention	13.4%	38.6%	27.7%	22.5%	45.6%	26.1%
Increased number of mental healthcare providers	19.0%	46.2%	27.2%	28.2%	42.9%	24.0%
Substance abuse prevention/treatment	14.2%	21.8%	19.0%	21.8%	28.4%	22.6%
Availability of transportation for mental health services	5.6%	10.8%	12.1%	6.5%	16.2%	10.9%
Other	4.4%	10.8%	5.3%	2.3%	7.4%	3.9%

Social issues

Although Pottawatomie County secondary data show few areas where there are elevated levels of social issues as compared to the state, one area stands out: the teen violent death rate is much higher than the state (118.76 per 100,000 versus 44.94 per 100,000). Although the reason for this is not apparent, and this issue was not raised in the assessment survey or focus groups, it underscores concerns in the community about not having enough activities and services for children and youth. Secondary data also show a slightly higher percentage of adult binge drinking than the state average (19.6% versus 17.2%).

Otherwise, few survey respondents report issues such as substance abuse, domestic violence, or homelessness. When asked about discrimination, participants indicated that race and sexual orientation were the most common targets overall. Very little discrimination in housing was reported for any reason, but 10.3 percent said they had experienced or witnessed discrimination in public spaces based on sexual orientation followed closely by race (9.9 percent). Discrimination in workplaces was reported most related to gender and age. When given a chance to comment on experiences with discrimination, most said they had not experienced any. However, discrimination regarding sexual orientation was mentioned most often followed by discrimination against those with a disability (through lack of accessibility in various areas of the community).

When asked what social issues most concern them, mental illness, inattentive driving, and adult drug use were the top three. For the top three needs that should be addressed related to social issues, respondents chose positive activities for youth, child care, and availability of mental health services. Although child care was second overall, it was actually ranked first more often than any other need. However, because it was ranked in any of the top three positions less often than positive activities for youth, it is not categorized as the number one overall need.

Table 33: Selected secondary social issues data

Community Health Needs Assessment			
Social Issues	Pottawatomie County	Kansas	Source
Percent of persons (all ages) below federal poverty level, 2013-2017	9.7%	12.8%	Kansas Health Matters via American Community Survey
Children living below poverty, 2013-2017	9.4%	16.4%	Kansas Health Matters via American Community Survey
Percent of persons with food insecurity, 2017	10.6%	12.7%	Feeding America
Percent of single-parent households, 2019	15%	29%	County Health Rankings
Average cases of children receiving child care assistance, 2019	34	9,263	Kansas Department for Children and Families
High school graduation, 2018	93.68%	87.23%	Kids Count

Social Issues	Pottawatomie County	Kansas	Source
Rate of infant mortality (deaths per 1,000 live births), 2017	5.63	5.95	Kids Count via Kansas Department of Health and Environment
Teen pregnancy, percent of all birth occurring to teens (15-19), 2015-2017	3.0%	5.9%	Kansas Health Matters via Kansas Department of Health and Environment
Percent of births occurring to unmarried women, 2016-2018	16.4%	36.0%	Kansas Health Matters
Percent of adults who are binge drinkers, 2017	19.6%	17.2%	Kansas Behavioral Risk Factor Surveillance System (BRFSS)
Index of crime offenses (per 1,000), 2018	18.1	31.4	KBI Crime Index 2018
Rate of violent crime (per 1,000), 2018	2.6	4.2	KBI Crime Index 2018
Rate of teen violent deaths (per 100,000 15- to 19-year-olds due to suicide, homicide, or motor vehicle accident), 2017	118.8	44.9	Kids Count
Age-adjusted suicide mortality rate per 100,000 population, 2016-2018	12.2	18.6	Kansas Health Matters via Kansas Department of Health and Environment
Number of domestic violence incidents, 2017	107	22,708	Kansas Bureau of Investigation
Number of domestic violence arrests, 2017	46	12,210	Kansas Bureau of Investigation
Rape incidents, 2017	2	1,239	Kansas Bureau of Investigation
Rape arrests, 2017	0	164	Kansas Bureau of Investigation
Alcohol-impaired driving deaths, 2013-2017	16.7%	23.6%	Kansas Health Matters via County Health Rankings

Table 34: Social issues impacting respondents' households

Social Issue Description	Community Health Needs Assessment					
	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
Yes, I or someone in my household has a substance use issue	3.9%	5.5%	5.2%	4.2%	5.3%	5.8%
Yes, I or someone in my household currently experiences domestic violence	0.9%	0.3%	0.7%	0.8%	0.7%	1.2%
Yes, excluding mental illness, there are other adults living in my household who have a physical or developmental disability	16.18%	14.8%	13.2%	19.1%	13.0%	14.0%
Yes, there is someone in my immediate family that is currently homeless	0.6%	1.8%	0.9%	1.1%	0.3%	0.9%

Children and youth

Other than the high rate of teen violent death (118.76 per 100,000 for Pottawatomie versus 44.94 per 100,000 for Kansas), there are few indicators of health and well-being for children and youth where the county does not fare well as compared with the state. Over 50 percent of respondents to the survey are parents, and 2.3 percent are custodial grandparents. Of those who are parents, 9.5 percent indicate that their child has a mental health diagnosis. Just over 11 percent say their child has been afraid to attend school or other activities due to bullying, and 23.7 percent say they are not satisfied with non-school activities.

Of those who use childcare, over half are not satisfied with the options available, and just under half say their childcare is not affordable. When asked how well the community meets their needs regarding children, respondents rated quality education and volunteer opportunities as “good” to “very good” (mean= 3.9 for both). The lowest rated items (between “poor” and “fair”) were support for single parents (mean=2.7) and needs of parent/guardians whose first language isn’t English (mean=2.8).

Table 35: Selected secondary children and youth data

Children and Youth	Pottawatomie County	Kansas	Source
Percent of births with inadequate prenatal care, 2017	17.85%	16.57%	Kids Count via Kansas Department of Health and Environment
Percent of births with reported smoking by mothers during pregnancy, 2016-2018	7.3%	10.0%	Kansas Health Matters via Kansas Department of Health and Environment
Percent of premature births, 2015-2017	7.6%	8.2%	Kansas Health Matters via Kansas Department of Health and Environment
Rate of infant mortality (deaths under age 1 per 1,000 live births), 2017	5.63	5.95	Kids Count via Kansas Department of Health and Environment
Percent of kindergarteners fully immunized by 35 months, 2017	71%	70%	Kids Count via Kansas Department of Health and Environment
Percent of live births to mothers without a high school diploma, 2011	6.35%	12.53%	Kids Count via Kansas Action for Children
Percent of single parent households (per 1,000), 2019	15%	29%	County Health Rankings
Percent of children under age 18 living below federal poverty line, 2014-2018	9.4%	14.9%	Kansas Health Matters via American Community Survey, 2018
Percent of children under 18 with no health insurance coverage, 2015	3.9%	5.1%	Kids Count via US Census Bureau, Small Area Health Insurance Estimates (SAHIE)
Free and reduced lunch, 2017	32.6%	48.0%	Kids Count via Kansas Action for Children
Food assistance (SNAP), Avg. monthly persons, 2018	941	219,738	Kansas Department for Children and Families

Households receiving SNAP with children, 2013-2017	51.9%	54.0%	Kansas Health Matters via American Community Survey
Average Monthly WIC Participation per 1,000 population, 2017	9.7	17.1	Kansas Health Matters via Kansas Department of Health and Environment
TANF cash assistance average monthly persons, 2018	19	9,605	Kansas Department for Children and Families
Rate of teen violent deaths (per 100,000 15- to 19-year olds due to suicide, homicide, or motor vehicle accident), 2017	118.8	44.9	Kids Count via Kansas Department of Health and Environment & US Census Bureau
Percent of 6 th 8 th , 10 th , and 12 th graders who reported using cigarettes in the last 30 days, 2019	2.35%	3.02%	Kansas Communities that Care Survey
Percent of 6 th 8 th , 10 th , and 12 th graders who reported binge drinking (having 5+ consecutive drinks on at least on occasion in the past two weeks) in the last 30 days, 2019	8.73%	8.82%	Kansas Communities that Care Survey
Percent of 6 th 8 th , 10 th , and 12 th graders who reported using marijuana in the last 30 days, 2019	3.08%	7.24%	Kansas Communities that Care Survey
Rate of children under age 18 hospitalized for mental health (per 1,000 children), 2017	1.6	5.9	Kids Count via Kansas Hospital Discharge Data

**Table 36: How well community meets the needs of children &/or adolescents
"Excellent or Good" responses only**

Need Description	Community Health Needs Assessment					
	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
Prenatal care (pregnancy)	35.0%	72.8%	77.1%	39.9%	61.5%	68.2%
Postnatal care (birth through first year)	35.6%	73.4%	80.1%	39.6%	64.0%	71.0%
Parental support/training	21.0%	46.7%	51.8%	22.8%	35.7%	55.2%
Support for single parents	7.3%	26.5%	31.1%	7.7%	20.5%	36.0%
Needs of children/youth with disabilities	19.6%	28.4%	56.2%	29.5%	37.2%	63.9%
Dental health	41.6%	52.5%	61.6%	47.6%	61.9%	70.8%
Mental health	23.8%	24.7%	41.1%	23.7%	19.5%	41.9%
Physical health	46.2%	58.4%	74.4%	56.8%	59.6%	76.7%
Recreational opportunities	52.6%	58.4%	70.2%	49.6%	56.1%	60.2%
Basic needs of low income children/youth	13.4%	21.7%	32.9%	10.3%	20.0%	44.0%

In Pottawatomie County, the top needs for children birth through age 12 were child care for children 0-5, after school programs, and recreational activities. In contrast, only 8.3 percent of Riley County residents identified Recreational opportunities as a top need. Child care was by far the top choice, with 25.3 percent of respondents selecting it. For Pottawatomie youth ages 13 to 18, the top needs were employment opportunities for teens, workforce training for teens, and mental health care. See Tables 37 and 38 for comparisons.

Table 37: Top Three Needs for Newborns to 12 Year Old Children						
	Community Health Needs Assessment					
Need Description	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
After school programs	14.3%	30.7%	22.4%	23.3%	40.9%	33.5%
Bullying prevention	11.5%	26.5%	12.8%	15.6%	35.0%	12.3%
Childcare for children newborn to age 5	23.2%	44.4%	23.4%	25.3%	32.9%	17.0%
Recreational opportunities	8.3%	n/a	n/a	21.0%	n/a	n/a
Financial assistance to families	13.2%	32.0%	22.9%	13.0%	29.0%	17.0%
Dental care	5.0%	10.8%	6.4%	3.4%	9.1%	7.2%
Early childhood intervention programs	10.3%	16.0%	14.0%	15.6%	23.4%	9.4%
Medical care	7.8%	11.8%	6.6%	5.7%	13.6%	5.7%
Mental health care	10.3%	19.9%	9.1%	13.7%	19.9%	6.2%
Mentoring programs for children	7.5%	19.3%	14.7%	15.6%	25.5%	15.8%
Nutrition programs	10.0%	14.7%	11.6%	7.6%	11.5%	8.4%
Parenting education/skills development	12.8%	31.1%	18.3%	15.6%	27.6%	18.1%
Services for children with physical or developmental disabilities	5.9%	19.6%	10.0%	7.6%	14.7%	0.0%

Table 38: Top three needs for teens						
	Community Health Needs Assessment					
Need Description	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
Employment opportunities for teens	12.4%	n/a	n/a	24.4%	n/a	n/a
Workforce training for teens	14.3%	n/a	n/a	20.2%	n/a	n/a
Financial skills training	13.3%	n/a	n/a	17.9%	n/a	n/a
Appropriate internet/technology use	8.0%	31.6%	13.7%	9.9%	45.3%	11.1%
Bullying/relationship violence prevention	9.4%	36.8%	14.2%	10.7%	40.4%	10.3%
Dental care	2.1%	5.9%	1.9%	0.8%	4.2%	1.8%
Medical care	3.3%	7.6%	1.2%	1.1%	4.9%	0.8%

Mental health care	14.6%	32.6%	6.7%	18.3%	26.7%	4.3%
Parenting education/skills development	6.8%	19.7%	8.6%	9.9%	23.2%	7.6%
Opportunities to contribute to community	8.1%	26.6%	17.8%	11.1%	28.4%	0.0%
Services for children with physical or developmental disabilities	2.2%	13.5%	5.0%	1.1%	8.4%	2.9%
Substance abuse prevention/treatment	10.3%	22.7%	10.6%	16.8%	30.9%	14.4%
Financial assistance to families	13.2%	32.0%	22.9%	13.0%	29.0%	17.0%

Older adults

Survey respondents were relatively neutral about whether there are an adequate number of services in the community for older adults (mean=3.2). When asked if they are a caregiver to an older adult, 6.5 percent said yes. The majority of those who are caregivers said they do not receive the supportive services they need. When asked what they need, the responses were mainly focused on respite/support groups and reliable information about services for the person in their care. Nearly 23 percent were over age 55, and they rated staying healthy, staying mentally sharp, being able to stay in their own home, and having adequate health insurance as most important.

Table 39: Selected secondary aging data			
Aging	Pottawatomie County	Kansas	Source
Percent of population 65 years and over, 2014-2018	13.4%	15.9%	US Census Bureau State & County QuickFacts
Number of assisted living facilities (regulated by KDADS), 2014	3	220	Kansas Department for Aging and Disability Services
Nursing homes (regulated by KDADS), 2014	3	317	Kansas Department for Aging and Disability Services
Home Plus facilities (regulated by KDADS), 2014	0	165	Kansas Department for Aging and Disability Services
Alzheimer's/memory care units (regulated by KDADS), 2014	0	139	Kansas Department for Aging and Disability Services
Number of persons enrolled in Medicare (hospital and/or supplemental medical for aged), 2018	7,161	434,270	Centers for Medicare and Medicaid Services
Age-Adjusted Alzheimer's Disease Mortality Rate per 100,000, 2016-2018	24.0	23.4	Kansas Health Matters via Kansas Department of Health and Environment

The top overall needs for Pottawatomie County for those over 55 were affordable prescriptions, independent living in home, and medical care . Riley County residents responded similarly with top needs identified as affordable housing, affordable prescriptions, and independent living in the home. See Table 40 for ranking of needs for this target population.

Table 40: Top three health needs for older adults

	Community Health Needs Assessment					
Need Description	Riley County			Pottawatomie County		
	2020	2018	2015	2020	2018	2015
Access to daily meals	4.8%	21.0%	8.3%	5.0%	21.8%	4.7%
Affordable prescriptions	15.5%	38.2%	12.5%	23.7%	30.5%	10.9%
Affordable housing	16.7%	38.8%	21.8%	13.7%	36.1%	17.9%
Assisted living options	8.0%	16.2%	8.0%	8.4%	22.1%	9.9%
Caregiver support groups	2.5%	14.6%	11.5%	6.5%	16.5%	9.0%
Day programs	4.1%	9.7%	6.5%	1.1%	14.4%	8.0%
Dental care	3.6%	5.8%	2.8%	4.2%	2.5%	2.5%
Ease of mobility in the community	6.8%	15.2%	13.3%	8.8%	10.5%	11.3%
Elder abuse	1.2%	2.9%	1.2%	1.9%	2.8%	0.6%
Health insurance	6.3%	13.9%	6.1%	8.0%	13.7%	5.3%
Home Health care options	9.0%	13.6%	11.7%	11.5%	12.3%	8.8%
Hospice care	0.7%	1.3%	1.7%	0.0%	2.8%	1.6%
Independent living in retirement community	3.7%	5.2%	5.5%	8.8%	7.4%	8.2%
Independent living in the home	15.4%	21.7%	18.7%	23.3%	15.8%	15.2%
Long term care options	5.1%	12.3%	7.2	4.6%	11.9%	7.6%
Medical care	15.1%	8.4%	8.9%	16.0%	7.0%	6.0%
Memory care options/dementia support	4.2%	11.0%	6.1%	6.1%	11.9%	5.5%
Mental health services	4.2%	8.4%	8.9%	6.9%	7.0%	6.0%
Personal care services	4.1%	9.4%	5.1%	4.6%	8.8%	3.5%
Respite services for caregivers	4.7%	10.7%	6.7%	5.3%	8.8%	6.6%
Safety	2.2%	3.9%	2.8%	1.5%	3.5%	2.1%
Substance abuse	0.7%	1.3%	0.1%	0.8%	0.4%	0.8%
Transportation	4.7%	17.8%	16.1%	6.5%	17.9%	13.6%
Vision care	1.6%	2.9%	2.0%	1.5%	1.8%	1.2%

Focus groups

Focus groups were held in Wamego with Pottawatomie County community/governmental organization representatives and parents. A total of 21 persons participated across both groups. During the focus groups, researchers gave a brief presentation of preliminary findings from the survey. Participants were then asked for their reactions to the findings (i.e., are findings consistent with your experience, what stands out to you). Participants were also given the chance to provide input on community strengths and needs. All comments were written on flipcharts by the researchers. The comments were then themed by the researchers who conducted the focus groups. Themes were developed overall as opposed to by question because participants tended to intermingle comments about strengths and needs.

The themes that emerged following analysis of all comments across both groups are noted below in order of frequency mentioned. Frequency was determined by the number of times a topic/issue came up regardless of the question. As an example, a topic such as cost of housing may have come up multiple times from multiple people in response to multiple questions. The top themes for focus groups are presented below in order of frequency across both groups, followed by descriptions of the content for each theme. Due to the small number of participants in the parent group, the themes are not broken down by group to maintain confidentiality.

Themes in Order of Frequency

1. Good quality of life
2. Need for behavioral health services
3. Lack of child care and activities
4. Transportation
5. Housing and cost of living
6. Lack of accessible/affordable healthcare

Description of Themes

Good quality of Life

Focus group participants feel like Pottawatomie County has a lot going on for rural Kansas. The community looks nice, and residents have a lot of community pride. It is largely a safe and supportive community. A key strength mentioned by participants is the school system. The schools have good facilities and good teachers. The schools are big enough to have plenty of opportunities for students, but also small enough that teachers know all of the kids so fewer of them “fall through the cracks.” Recreation is also a strength of the community, with participants mentioning the sports complex, gyms, parks, and indoor pool.

Need for behavioral health services

Participants indicated that the need for behavioral health services in the community – including services for mental health and substance use – has increased exponentially over the last five years. They also recognized there are more services available now than five years ago; there are services that did not exist five years ago as well as services that have been improved over the past five years. While services are available, they want to also make sure people know about these services. In addition to services, participants mentioned there are community members who have received Mental Health First Aid Training. They would like to see law enforcement and teachers receive Mental Health First Aid

Training so they can recognize mental health issues in those they serve as well as in each other. They would also like to have a place other than jail for people struggling with behavioral health issues to go when they need help and perhaps do not qualify for other services.

Lack of affordable child care and activities

Two issues related to children were mentioned at both of the focus groups; the two issues deal with two different age groups. The first issue was related to child care (ages 0-5). Participants indicated that there are not enough child care options for families who need it, and child care options that are available may not be affordable. The second issue was needing more activities for older kids (teens and preteens). They would like to see more organized activities and more safe spaces for them to spend time when they are not at school. The library is one option for kids, but it closes at 7 p.m. In addition to activities, participants also indicated that there are not enough jobs for teenagers. The employment rate is currently low, and many of the traditional “teen” jobs are filled by adults.

Transportation

Those without reliable transportation have difficulty with employment and job seeking. There are individuals in the community who need regular transportation (e.g., to dialysis), but are unable to drive themselves and do not qualify for transportation assistance. The Flint Hills Area Transportation Agency (also known as aTa bus) serves western Pottawatomie County, but these services are not widely known about or understood; people aren’t sure where the aTa bus goes or how to access it when they need it. Some transportation services require 48 hours’ notice to secure transportation, but there are instances when people do not have 48 hours’ notice before needing transportation (e.g., for a health issue that needs more immediate attention). Participants would like to see expanded transportation options available in the county.

Housing and cost of living

Participants expressed concern about affordable housing. The community needs more low- to mid-cost housing options that are not old, rundown, or in need of repair. No newer neighborhoods have good starter homes. There are not a lot of homes available between \$150,000 and \$300,000. Houses that are \$120,000 and below are largely used as rentals. They did acknowledge that there are some good rental options, particularly with the new apartments in town. Participants suspect that it is more expensive to live here (Wamego/Pottawatomie County) than a lot of other places in Kansas. They also recognize that while poverty did not show up in the Pottawatomie County survey results, it is there – participants see evidence of poverty in their work in the schools and in home health services.

Lack of accessible/affordable healthcare

Health care was mentioned as a concern in both focus groups. Participants talked about both affordability and accessibility. They recognize that rural health care access may always be an issue, so people need to know what health care services are available, the scope of those services, and how to access services, including how to secure transportation if needed.

Significant community health needs

Prioritizing significant needs

Needs are prioritized based on the findings of the CHNA the available resources that WHC has to effectuate change, the number of people impacted, whether or not other organizations are already addressing the need, and whether or not the need area is aligned with the Hospital's mission.

What are the significant needs in 2020?

The top five needs identified by the 2020 CHNA respondents

Physical Health

1. Affordable health services
2. Affordable health insurance
3. Facilities for physical activity
4. Affordable prescriptions
5. Access to healthy food options

Mental Health

1. Affordable mental health services
2. Affordable health insurance that includes mental health care (new)
3. Increased number of mental health providers
4. High quality mental health services
5. Children's mental health services

Children birth to age 12

1. Child care for children 0-5 (new)
2. After school programs
3. Recreational activities (new)
4. Parenting education/skills development (new)
5. Mentoring programs for children (new)

Teens (13 to 18 years old)

1. Employment opportunities for teens
2. Workforce training for teens (new)
3. Mental healthcare (new)
4. Financial skills training (new)
5. Substance abuse prevention/treatment

Older Adults

1. Affordable prescriptions
2. Independent living in the home (new)
3. Medical care (new)
4. Affordable housing
5. Home health care options (new)

How is Wamego Health Center addressing the significant needs?

Physical Health

Wamego Health Center offers their services to all people presenting themselves without regard for their ability to pay. They serve people who are beneficiaries of Medicaid and Medicare and offer traditional financial assistance when appropriate.

WHC staff is often asked and always willing to speak with students, both high school and college, about the benefits of having a healthcare career or on other topics like the health risks associated with drug use. This not only helps Wamego to grow their own healthy community, but makes young people aware of the importance of taking care of their own bodies and giving them the information they need to influence the behaviors of their friends and loved ones.

WHC offered a Wamego Health Center health fair for the community that included healthy eating demonstrations, promoted engagement with the community garden, education on environmental friendly practices for medication disposal, medication counseling, senior behavioral health resources, infection prevention, hand hygiene, sepsis prevention, flu vaccinations, CPR demonstrations, ergonomic demonstrations, free canned goods and dental care items and free car seat installation checks. WHC staff also participated in breast cancer awareness activities including the importance of regular screening mammograms, breast self-exams and free information on breast density in order to encourage early intervention in the case of breast cancer.

The hospital physicians volunteer and treat patients from the Community Health Ministry Clinic. These are patients whose income may not be sufficient to cover doctor fees, or they may be uninsured or underinsured or are in need of specialty care. The hospital also provides these clients with other services such as laboratory or radiology testing, physical therapy and counseling services when their financial capabilities are limited.

Hospital employees participate with the community garden. Over the past 6 years the production of healthy vegetables from the community garden has grown. Over 20,000 pounds of vegetables were collected and accepted in 2018 and 2019.

Hospital staff participate in a community health coalition. Hospital staff had a member of the Senior Behavioral Health department participate with the education to become a Mental Health First Aide instructor. This training allows the instructor to then provide the classes to both hospital employees as well as partner with other area organizations to provide the class outside of our facility. This gives the community a resource for better knowledge and access to mental health education.

Students who are pre-med majors, nursing, social work, and physical therapy are invited in to observe WHC's health care professionals as they go about their daily work. This gives students a first-hand look at their chosen professions and exposes them to how they will relate to other health professionals. Many of the WHC staff regularly participate in the American Red Cross blood drives throughout the year because they are very aware of the need for blood platelets for their patients and others who are in

need in a critical time of their life. WHC also sponsors four area high school seniors going into the healthcare field with a scholarship through the Wamego Community Foundation.

WHC staff is also engaged in the community by serving on other not-for-profit boards and committees (e.g. Three Rivers, which assist people with disabilities; American Heart Association, Kansas Society for Clinical Laboratory Science, Wamego Chamber of Commerce, Wamego Community Foundation, etc. and Connect Pott. County Coalition)

In an effort to promote healthy food choices and make health food more cost effective to those who can't afford it, WHC staff provide gardening services at the Wamego Community Garden by working and watering the garden and serving as secretary/treasurer of the group.

Hospital staff, in an effort to decrease road hazards for people traveling and to keep the environment clean, assists by picking up clutter and trash along Highway 24.

Mental Health

The hospital arranges and pays for secure transportation for low income qualified persons when they are needing to be transported to a different hospital for specialized treatment that may not be available locally (e.g. Osawatomie Psychiatric Hospital)

In collaboration with the Community Health Ministries, WHC staff provides individual therapy to low income residents of the community when requested.

As mentioned above, the Mental Health First Aide has been a community based program involving schools, healthcare, law enforcement and other area agencies that can benefit from training. In all, the community trained over 15 individuals to be instructors. The hospital has participated in 3 classes to date for their employees involving the mental health first aide training.

Young children

WHC participates in the Classroom-to-Career partnership. The program strengthens the relationship between local schools and the business community and gets students thinking about possible careers at an early age by engaging businesses with 4th grade classes in a partnership that runs the full school year. Each 4th grade class is sponsored by a business and regular interactions are facilitated both in and outside of the classroom. This involves classroom presentation, activities promoting health careers and a hospital visit to observe health careers in action.

Teens

A hospital physician interprets concussion screenings, blood pressure checks, heart screenings etc., for middle school through college-age athletes and collaborates with coaches to ensure the safety of students to resume practices and competitive sports.

The Sports Medicine Clinic staff work with area athletes by providing care for sports related injuries and works to educate both students and coaches with regard to how best to ensure full recovery.

In collaboration with the Wamego High School, WHC staff are mentoring youth to expose them to healthcare career options. The program begins with each freshman being matched with a volunteer that lasts over four years by making a monthly commitment in meeting with these youth to encourage

them, give them guidance and improve their chances of successfully completing high school. In addition, staff participates in the Job Fair interview day where high school seniors go through mock interviews in preparation for entering the workforce. Staff give them interviewing tips; assist them with anticipating questions, what to wear, and what kind of questions they should be prepared to ask of potential employers. This program contributes to a graduation rate for Wamego High School of 90-94 percent compared to a 85 percent for the state of Kansas according to Public School Review.²⁷

Older Adults

The hospital regularly participates in the annual Senior Resource Fair by providing glucose and blood pressure checks to those in attendance.

In order to ensure that elderly people who are not physically able to cook for themselves eat healthy, WHC staff assists on a regular basis in delivering Meals on Wheels that are picked up at the Wamego Community Center. There were 615 meals delivered by WHC staff in fiscal year 2019.

What Significant Needs are not being addressed and why?

NOTE: 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 located in Manhattan but a few may be in Junction City or Wamego which are not too far away. Some additional ones are located in Topeka or may be national hotlines that can provide information regarding other programs that better serve the needs 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 healthcare 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) North Central – Flint Hills Area Agency on Aging (800) 432-2703
- 6) KanCare – (800) 792-4884

Facilities for physical activity – There are parks, bike trails and recreational lakes and reservoirs in Pottawatomie County. Wamego offers a city park and outdoor recreation center for sporting events and community celebrations. Additional resources for physical activity with an indoor facility for exercise was identified as a need, though not one that the hospital can address alone.

Resources Available:

²⁷ Public School Review 2020, Pottawatomie County, Kansas, downloaded on March 24, 2020 from publicschoolreview.com/wamego-high-school-profile

- 1) Wamego City Park, (785) 456-9119
- 2) Wamego Recreation Complex, (785) 456-8810
- 3) City of Wamego Recreation, apm.activecommunities.com/wamegorecreation/Activity_Search

Affordable prescriptions – While the hospital doesn't directly address this on a wide scale, WHC 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.

Resources Available:

- 1) Kansas Statewide Farmworker Health Program (KDHE) (785) 296-1200
- 2) Konza Prairie Community Health and Dental Center (785) 238-4711
- 3) Medical Services in Wamego – (785) 456-7872
- 4) National Organization for Rare Disorders (800) 999-6673
- 5) Kansas Drug Card – (913) 638-8415
- 6) Familywise – (800) 222-2818

Mental health services – WHC continues to provide one-on-one counseling in partnership with the Community Health Ministry Clinic when called but the hospital has limited resources and no psychiatrist on duty. With limited support from the State of Kansas for mental health, it is difficult to recruit highly trained mental health specialists. 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.

Resources available near Wamego include:

- 1) Pawnee Mental Health Services (785) 587-4300
- 2) Family Center (785) 532-6984
- 5) Pawnee Mental Health Services (785) 587-4300
- 4) Cornerstone Family Counseling (785) 776-4105
- 5) Veridian Behavioral Health in Salina (785) 452-6113
- 6) Catholic Charities (785) 323-0644

Affordable child care – The hospital does not have adequate space nor is child care a part of our mission when it comes to healthy children. There are several places where parents can go to get referrals but as more people move into the area, there is a need for more providers as openings are not vacant for long.

Resources available:

- 1) Pottawatomie County Economic Development Corporation, Day Care & Preschools, (785) 456-9776
ecodevo.com/2397/Early-Childhood-Development
- 2) K-State Center for Child Development (785) 532-3700
- 3) Flint Hills Child Care Resource & Referral Agency (785) 532-7197, (800) 227-3578
- 4) Pottawatomie County Head Start Child Care Center (785) 456-9165

After school programs – Like affordable child care, the hospital does not have adequate space nor does opening a facility that would offer after school programs fit our mission statement. Here are existing organizations that do offer some programming for those interested.

Resources available:

- 1) Boys & Girls Club of Manhattan Central Elementary Wamego KS Drop In Program (785) 539-1947

Recreational activities for young children - WHC does not have adequate resources nor is child recreation a part of our mission when it comes to healthy children. There are several places in Wamego where parents can go to get referrals but additional options are also identified as a community need.

Resources available:

- 1) Wamego Recreation Department (785) 456-8810
- 2) City of Manhattan Parks & Recreation (785) 587-2757
- 3) Wamego City Pool (785) 456-2755

Parenting education/skills development– WHC is not in a position to assist with this needed area due to limited resources and expertise but most of the counseling agencies identified above and here in this section may be able to assist parents to develop skills and parenting strategies for young children.

Resources available:

- 1) Head Start NEK-CAP (785) 742-2222
- 2) KU Child and Family Services Clinic in Lawrence (785) 864-4416
- 3) Infant-Toddler Services (Tiny-K) Northeast Kansas Infant-Toddler (785) 876-2214
- 4) Wamego Public Schools - Parents as Teachers (785) 456-6291
- 5) Pawnee Mental Health Services (785) 587-4300

Financial skills training for teens – The hospital is not in a position to assist with this needed area due to limited resources and expertise. An internet search for resources in Wamego, Kansas did not result in programs in the community. However, several respected money management companies have money management/financial skills training programs that are free and online. The two examples listed do not represent an exhaustive search or endorsement of their programs.

Resources available:

- 1) Wells Fargo Bank, <https://handsonbanking.org>
- 2) Northwestern Mutual Life Insurance Company, <http://www.themintgrad.org/>

Employment opportunities/workforce training for teens – The hospital works with high schools, vocational training schools and colleges to give their students a bird's eye view of health care careers or hands-on training to assist them in meeting requirements for grades or certifications for graduation. When vacancy arises within the hospital, those positions are advertised to find an appropriate match. However, for people who may need additional assistance in finding gainful employment, the resources listed below are recommended.

Resources available:

- 1) Economic & Employment Services: Work Programs (785) 776-4011
- 2) Pottawatomie County Extension-Westmoreland (785) 457-3319
- 2) Manhattan Workforce Center (785) 539-5691

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 this type of challenge and offer counseling, education/prevention for drug use disorders as well as alcohol, psychological testing and assessment, mental health hotlines, counseling and psychiatric medication services.

Resources Available:

- 1) Pawnee Mental Health Services of Riley County (785) 587-4300
- 2) Mental Health Services in Wamego (785) 456-7872
- 3) Peer to Peer Recovery Education Program (785) 233-0755
- 4) Central Kansas Foundation in Junction City (785) 762-3700

Affordable housing – The hospital is not in a position to assist with this community need due to lack of resources and expertise. Housing in the Pottawatomie area has risen and is expected to continue to rise as more people move in but this need does not complement our mission of providing health care.

Resources available:

- 1) North Central – Flint Hills Area Agency on Aging (800) 432-2703
- 2) KS Department for Aging & Disability Services (800) 432-3535
- 3) Wamego Housing Authority (785) 456-7675
- 4) Homestead Senior Residences Wamego (785) 456-1661

Independent Living in the home – Ascension Via Christi Hospital does not provide Independent Living in the Home but with a growing aging population in Kansas other assisted living options may be needed. Some aging individuals still want to remain in their home but may need help with medication management, bathing/showering, preparing meals and shopping. So, there are a few other resources listed below which may help to accommodate those needs without having to move out of the house and into a specific facility.

Resources available

- 1) North Central – Flint Hills Area Agency on Aging (800) 432-2703
- 2) Medical Services in Wamego (785) 456-7872
- 3) At Home Care with offices in Manhattan and Wamego (785) 473-7007
- 4) Heartland at Home Care (785) 456-2273

Home Health Care - Ascension Via Christi Hospital does not provide Home Health Care as part of its service offerings but there are numerous Home Health and Home Medical providers in the Wamego regional community.

Resources available:

- 1) North Central – Flint Hills Area Agency on Aging (800) 432-2703
- 2) Ascension Via Christi Home Medical (785) 537-3699
- 3) Heartland at Home Care (785) 456-2273
- 4) Meadowlark Wellness Partners (785) 537-9497

Impact evaluation of each significant need being addressed

The action plans that were presented following the 2018 CHNA are addressed below. The individual goals that were addressed as well as actions implemented to attempt to improve these significant needs are below:

Physical Health

Goal 1: increase the proportion of Adults at a Healthy Weight

- Hospital employees worked with community members to expand and grow the community garden, next door to the hospital. Over the previous two years since the last CHNA has resulted in more than 20,000 pounds of healthy vegetables from the community garden distributed to the community (this data is based on the amount of food collected and weighed at the garden by volunteers and community members accepting the food).

Goal 2: Make financial assistance available to uninsured or underinsured patients to the extent possible.

- WHC offers its services to all people presenting themselves without regard for their ability to pay. WHC serves Medicaid and Medicare beneficiaries and offers financial assistance when appropriate. Central to the mission of WHC is its commitment to make financial assistance available to uninsured or underinsured patients to the extent possible. Hospital staff assists patients with application completion through submission of government public benefit forms when they need help in obtaining financial assistance for health care and may not be aware that they qualify for existing programs.
- In fiscal year 2018, WHC reported \$233,766 in Category I Financial Assistance and in fiscal year 2019, \$344,067 was reported.

Mental Health

Goal: Increase access to affordable mental health services

- According to the Behavioral Risk Factor Surveillance System from 2017, Pottawatomie County has a lower percentage of adults diagnosed with a depressive disorder (18.5%) than does the state of Kansas (20.9 %). Similarly, the percent of Medicare recipients with depression was 16.7 percent for Pottawatomie County and 18.9 percent for the State of Kansas. In addition, there was a decrease in Suicide related deaths per 100,000 deaths from 18.4 to 17.0 for the reporting period of 2014-2016. While these numbers are improving, it should be noted that this was not solely the efforts of the hospital and is related to efforts across the county.
- The hospital arranges and pays for secure transportation for low income qualified persons when they are needing to be transported to a different hospital for specialized treatment that may not be available locally (e.g. Osawatomie Psychiatric Hospital). Since July 1, 2018, WHC has provided nine security transportation occurrences at a cost of more than \$5,000.
- In collaboration with the Community Health Ministries, WHC staff provides individual therapy to low income residents of the community when requested.
- WHC collaborated with Mental Health First Aide, a community based program involving schools, healthcare, law enforcement and other area agencies that can benefit from training. In all, the community trained over 15 individuals to be instructors. The hospital has participated in 3 classes to date for their employees involving the mental health first aide training.

Young Children

Goal: Increase awareness and participation in classes offered at neighboring AVCH-M for baby, toddler and child caregivers.

- WHC doesn't directly offer child care or long-term classes on infants, toddlers and preschoolers but encourages residents to take advantage of classes that are offered nearby in the neighboring town of Manhattan. WHC promotes the AVCH-M classes for baby, toddler and child caregivers that strengthen their skills in caring for this most vulnerable population and to increase the number of caregivers available in the community. To assist with parenting education needs, AVCH-M also offers classes from Daddy Basics and Breastfeeding Basics to Safe Sitters and First Aid for Children. However, WHC does offer presentations when requested by USD320 and others in the community on topics centered around children's health and wellness.

Teens

Goal: WHC is going to work with the community and school districts on developing a plan of action to teach children and their parents how to best use the internet without becoming victims of it.

- While this was a priority in 2018, due to the other priorities listed, this activity was not addressed.
- In collaboration with Wamego High School, WHC staff are mentoring youth to expose them to healthcare career options. The program begins with each freshman being matched with a volunteer that lasts over four years by making a monthly commitment in meeting with these youth to encourage them, give them guidance and improve their chances of successfully completing high school. In addition, staff participates in the Job Fair interview day where high school seniors go through mock interviews in preparation for entering the workforce. Staff give them interviewing tips; assist them with anticipating questions, what to wear, and what kind of questions they should be prepared to ask of potential employers. This program contributes to a graduation rate for Wamego High School of 90-94 percent compared to 85 percent for the state of Kansas according to Public School Review.

Older Adults

Goal: WHC is continuing to work with local partners to increase access to healthy food options with a focus on increasing access to healthy foods, raise nutritional awareness starting in its own facility and in working with others throughout the community.

- Hospital employees offered multiple healthy options from the local community garden for healthy food choices.
- The hospital regularly participates in the annual Senior Resource Fair by providing glucose and blood pressure checks to those in attendance.
- In order to ensure that elderly people who are not physically able to cook for themselves eat healthy, WHC staff assists on a regular basis in delivering Meals on Wheels that are picked up at the Wamego Community Center. There were 615 meals delivered by WHC staff in fiscal year 2019.

Appendix A: About the research team

Wichita State University's Community Engagement Institute is dedicated to improving the health of Kansans through leadership development, research and evaluation, organizational capacity building, community collaboration, and public health and behavioral health initiatives. The Community Engagement Institute maintains six Centers with skilled staff that work directly with community coalitions, nonprofits, government entities, health and human services organizations, and support groups. The Centers are:

- Center for Applied Research and Evaluation
- Center for Behavioral Health Initiatives
- Center for Leadership Development
- Center for Organizational Development and Collaboration
- Center for Public Health Initiatives
- IMPact Center

Contact: **Dr. Tara Gregory** at tara.gregory@wichita.edu



Appendix B: Copy of Pottawatomie County CHNA Community Survey

Pottawatomie County Community Needs Assessment

Thank you for your interest in taking the Pottawatomie County Community Needs Assessment Survey. Anyone who lives in Pottawatomie County is invited to take this survey. The purposes of this survey are:

- 1) to get your input on the quality of life in the community and
- 2) to identify the unmet needs in the community.

Some questions ask you about your personal experiences in the community and some ask for your opinions about the community in general.

This survey is completely anonymous and confidential. We do not need your name or any identifying information, so please feel free to be completely honest. We would like you to answer every question as completely and honestly as possible.

This survey will take about 30 minutes to complete and you may stop at any time without penalty. If you are using a public computer or a mobile device (i.e. phones or tablets), you need to complete the survey all at once. If you are using a personal computer, you may stop taking the survey at any point and come back to it later as long as you use the same computer. You just need to complete the survey within 2 weeks. Please take the survey only once.

The survey will close on October 11, 2019. Again, thank you!

The following is a standard consent form. The survey will start on next page.

Purpose: You are invited to take part in a survey about the quality of life in Pottawatomie County that includes questions about your experiences and opinions about your community. The information from this survey will be used to help organizations in Pottawatomie County better understand what residents think and the needs that are present in communities in this area.

Participant Selection: You are being asked to participate in this survey because you are a resident of Pottawatomie County. Anyone over the age of 18 is invited to complete this survey.

Explanation of Procedures: If you decide to proceed with the survey, it asks some questions about you (e.g., your age, your zip code, whether you've had certain experiences such as substance abuse within your household, etc.) but will mainly focus on what you think about the community you live in. A few questions may seem sensitive (i.e., how would you describe your mental health on a scale of poor to excellent) but the information will only be used to gain an idea of how many people in the community deal with common issues. The survey is broken into sections focusing on various issues that may affect your community. The survey will take approximately 30 minutes to complete. You are asked to answer as many questions as possible, but you can skip questions that make you uncomfortable, aren't applicable to you or if you don't know the answer.

Confidentiality: This survey is anonymous and does not require you to provide your name or other identifying information. All of your responses will be combined with those of others so that we can compile a report on general opinions and experiences without reporting any individual answers. The report on the combined responses will be provided to the Flint Hills Wellness Coalition to distribute for use in Pottawatomie County.

Contact: If you have any questions about this survey, you can contact me at: Dr. Tara Gregory, 316-978-3714 or tara.gregory@wichita.edu.

Participation in this survey is completely voluntary. By proceeding past this page, it indicates that you have read the information above and have voluntarily decided to participate.

Pottawatomie County Community Needs Assessment

How did you find out about this survey?

- ☐ I received a postcard with the web address
- ☐ I heard about it through an organization I'm involved with
- ☐ I heard about it through media (radio, newspaper, social media)
- ☐ Word of mouth (someone else told me about it)
- ☐ Other

Demographics

1. What is your age?
 - ☐ Under 18 years
 - ☐ 18 to 24 years
 - ☐ 25 to 34 years
 - ☐ 35 to 49 years
 - ☐ 50 to 64 years
 - ☐ 65 to 74 years
 - ☐ 75 to 84 years
 - ☐ 85 years and over
2. In what county do you currently live?
 - ☐ Riley County
 - ☐ Pottawatomie
3. Is this county your permanent residence?
 - ☐ Yes
 - ☐ No
4. What is your zip code?
 - ☐ 66407
 - ☐ 66422
 - ☐ 66426
 - ☐ 66432
 - ☐ 66520
 - ☐ 66521
 - ☐ 66535
 - ☐ 66536
 - ☐ 66547
 - ☐ 66549
 - ☐ Other (please specify) _____

In the following sections, most of the questions ask about **“the community.”** **“Community”** in this survey means the area where you live. For most people, this will be their city or town. For those who live in rural areas, this may include the town where you access services.

Some questions ask about **“needs”** in the community. When you answer questions about **"needs,"** think about things that are either lacking or should be changed to improve the quality of life in the community. These might include schools, housing, roads and bridges, access to various services, etc.

Quality of Life

5. Please rate the following statements about the *quality of life* in the community based on your experiences.

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I am satisfied with the quality of life in the community.					
I am satisfied with the health care system in the community.					
I am satisfied with the local schools in the community.					
I am satisfied with the local government in the community.					
The community is a good place to raise children.					
My community is a good place to retire.					
This is a safe place to live.					
There is economic opportunity in the community.					
There are networks of support for individuals during times of need in the community.					

Quality of Life (continued)

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
There are networks of support for families during times of need in the community.					
There are plenty of recreational activities in the community.					
There are volunteer opportunities in the community.					
I can make the community a better place to live.					
The community is strengthened by its diversity.					
I intend to stay in the community over the next five years.					
I am satisfied with accessibility in this community for persons with disabilities.					

6. What are the **three most important factors** contributing to the quality of life in the community?

Instructions: Please rank your selections by typing 1, 2, or 3 in the box next to your choice. A 1 shows the most important, a 2 shows the second important, and a 3 shows the third important. You will only be able to rank three choices.

- | | |
|--|--|
| ___ Access to affordable health insurance | ___ Jobs paying a living wage |
| ___ Affordable housing | ___ Low disease rates |
| ___ Arts and cultural events | ___ Low crime |
| ___ Availability of health care | ___ Low level of child abuse |
| ___ Career enhancement | ___ Parks and recreation |
| ___ Clean environment (including water, air, and soil) | ___ Physical access to public facilities |
| ___ Equality | ___ Religious or spiritual values |
| ___ Good schools | ___ Resources for parents |
| ___ Good place to raise children | ___ Safe neighborhoods |
| ___ Healthy behaviors and lifestyles | ___ Strong family life |
| ___ Healthy economy | ___ Other (please specify) _____ |

Physical and Mental Health

Based on your personal experience, please rate the following statements about *health* in the community. "Health" for this purpose is defined as "a person's physical and mental health, being free from disease and pain, and generally being satisfied with life." This section also includes questions about physical activity/exercise, nutrition, and health-related issues.

Health Outcomes

Physical Health

7. My overall health is...
- ☐ Poor
 - ☐ Fair
 - ☐ Good
 - ☐ Very good
 - ☐ Excellent
8. During your lifetime, please check any of the following a health professional has diagnosed you with:
Check all that apply.
- ☐ Dementia
 - ☐ Alzheimer's-type Dementia
 - ☐ High Blood Pressure
 - ☐ High Cholesterol
 - ☐ Type I Diabetes
 - ☐ Type II Diabetes
 - ☐ Chronic Lung Disease (including emphysema, black lung, asthma, etc.)
 - ☐ Heart Disease
 - ☐ Cancer of any kind
9. In the last 12 months, have you received a flu shot or nasal spray?
- ☐ Yes
 - ☐ No
10. Do you consult a health professional when you are sick?
- ☐ Yes
 - ☐ No

11. When you feel sick enough to require medical attention, where do you **most often** go for healthcare... Please check only one.

- ☐ My doctor's office
- ☐ Medical clinic
- ☐ Health department
- ☐ Urgent care center
- ☐ Hospital emergency room
- ☐ Free clinic
- ☐ Other (please specify) _____

12. When you need healthcare, how easy is it for you to access in the community?

- ☐ Very difficult
- ☐ Difficult
- ☐ Not too difficult
- ☐ Very easy

13. When you need dental care, how easy is it for you to access in the community?

- ☐ Very difficult
- ☐ Difficult
- ☐ Not too difficult
- ☐ Very easy

Mental Health

14. How would you describe your overall mental health?

- ☐ Poor
- ☐ Fair
- ☐ Good
- ☐ Very Good
- ☐ Excellent

15. I consider myself to be a lonely person (i.e., having frequent discomfort due to feeling alone).

- ☐ Strongly disagree
- ☐ Disagree
- ☐ Neither disagree nor agree
- ☐ Agree
- ☐ Strongly agree

16. I consider myself to be a socially isolated person (i.e., lacking adequate contact with other people).

- ☐ Strongly disagree
- ☐ Disagree
- ☐ Neither disagree nor agree
- ☐ Agree
- ☐ Strongly agree

17. When you're not feeling mentally healthy, do you consult a mental health professional?

- ☐ Yes
- ☐ No
- ☐ N/A - My mental health is always good.

18. Where do you go most often when your mental health is not good?

- ☐ Private practice
- ☐ Community mental health center
- ☐ Hospital emergency room
- ☐ Fort Riley Mental Health Services
- ☐ Veterans Administration (VA) Hospital
- ☐ Other (please specify) _____

19. The community has adequate mental health services for people who need them.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neither disagree or agree
- ☐ Agree
- ☐ Strongly Agree

Health Behaviors

Physical Activity

20. How many hours a week, on average, do you engage in physical activity or exercise that is not job related?

- ☐ None
- ☐ Less than 1 hour
- ☐ 1-2 hours
- ☐ 2-3 hours
- ☐ 3 hours or more

21. Where do you go to exercise? **Select all that apply.**

- ☐ A school
- ☐ Private gym/studio
- ☐ Park
- ☐ Neighborhoods
- ☐ Home
- ☐ Public Recreation Center
- ☐ Other (please specify) _____

22. If you don't exercise, what are the reasons? **Select all that apply.**

- ☐ My job involves physical labor
- ☐ Exercise is not important to me
- ☐ I don't have enough time
- ☐ I don't have child care
- ☐ I don't have anyone with whom to exercise
- ☐ I don't like to exercise
- ☐ It costs too much to exercise
- ☐ The only place where I can exercise is unsafe
- ☐ I have physical limitations that don't allow me to exercise
- ☐ Other (please specify) _____

23. There are plenty of options for exercise in this community.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neither disagree or agree
- ☐ Agree
- ☐ Strongly Agree

24. There are enough accessible physical activity/recreation options in this community for persons with physical disabilities.
- ☐ Strongly Disagree
 - ☐ Disagree
 - ☐ Neither disagree or agree
 - ☐ Agree
 - ☐ Strongly Agree
25. This community values exercise.
- ☐ Strongly Disagree
 - ☐ Disagree
 - ☐ Neither disagree or agree
 - ☐ Agree
 - ☐ Strongly Agree

Nutrition

26. I eat healthy foods. (Healthy foods are defined as: nutritious foods and beverages, especially vegetables, fruits, low-fat and fat-free dairy products, and whole grains; foods low in saturated and trans fats, sodium, and added sugars).
- ☐ Strongly Disagree
 - ☐ Disagree
 - ☐ Neither Agree nor Disagree
 - ☐ Agree
 - ☐ Strongly Agree
27. Do you eat **at least** two cups of fruit each day?
- ☐ Yes
 - ☐ No
 - ☐ N/A – I don't eat fruit.

IF you answered NO or N/A to question 28:

28. What keeps you from eating at least two cups of **fruit** per day? **Select all that apply OR "Not applicable; I eat at least two cups of fruit every day"**
- ☐ I'm not able to get to a grocery store.
 - ☐ It costs too much.
 - ☐ I don't have enough time to purchase and prepare them.
 - ☐ I don't know how to prepare them.
 - ☐ I don't like them.
 - ☐ I have dietary restrictions
 - ☐ Other (please specify) _____
 - ☐ Not applicable; I eat at least two cups of fruit every day.

29. Do you eat **at least** two cups of vegetables each day?

- ☐ Yes
- ☐ No
- ☐ N/A - I don't eat vegetables

IF you answered NO or N/A to question 30:

30. What keeps you from eating at least two cups of **vegetables** per day? **Select all that apply OR “Not applicable; I eat at least two cups of vegetables every day”**

- ☐ I'm not able to get to a grocery store.
- ☐ It costs too much.
- ☐ I don't have enough time to purchase and prepare them.
- ☐ I don't know how to prepare them.
- ☐ I don't like them.
- ☐ I have dietary restrictions
- ☐ Other (please specify) _____
- ☐ Not applicable; I eat at least two cups of vegetables every day.

31. The community values healthy eating.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neither disagree or agree
- ☐ Agree
- ☐ Strongly Agree

32. It is easy for me to access healthy food.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neither disagree nor agree
- ☐ Agree
- ☐ Strongly Agree

33. Have you ever been concerned about having enough food to eat?

- ☐ Yes
- ☐ No

34. In the past seven days did you skip meals because you couldn't afford food?

- ☐ Yes
- ☐ No

Smoking/Tobacco

35. Do you currently use tobacco products including cigarettes, cigars, chewing tobacco, or e-cigarettes?

- ☐ Yes
- ☐ No

36. Where would you go for help if you wanted to quit using tobacco products (including vaping)? **Select all that apply.**

- ☐ KS Quitline
- ☐ Doctor
- ☐ Church
- ☐ Pharmacy
- ☐ Private counselor/therapist
- ☐ Health Department
- ☐ I don't know
- ☐ Other (please specify) _____
- ☐ Not applicable; I don't want to quit.

Access to Insurance and Health Information

37. Do you have health insurance?

- ☐ Yes
- ☐ No

38. How do you receive **most of your health-related information**? Please check only one response.

- ☐ Health professionals (e.g., doctor, nurse, technician, dentist, hygienist, etc.)
- ☐ Friends and family
- ☐ Social media (e.g., Facebook, Twitter, Instagram, etc.)
- ☐ Traditional media (e.g., local/state newspaper, TV, magazines, etc.)
- ☐ Other (please specify) _____

Overall Health Needs in the Community

Physical Health

39. What are the **top three physical health needs** in the community that should be addressed?

Instructions: Please rank your selections by typing 1, 2, or 3 in the box next to your choice. A 1 shows the most important, a 2 shows the second important, and a 3 shows the third important. You will only be able to rank three choices.

- ___ Affordable health services
- ___ Affordable health insurance
- ___ Increased number of health care providers
- ___ Maternal health services
- ___ Children's health services
- ___ Prevention of infant mortality
- ___ Access to healthy food options
- ___ Increased health education/prevention (e.g., healthy eating, disease prevention, etc.)
- ___ Facilities for physical activity (including parks, trails, rec centers)
- ___ Tobacco use cessation (quitting) services
- ___ Availability of transportation for health services
- ___ Affordable prescriptions
- ___ Dental care options
- ___ Health care assistance for older adults
- ___ Health care assistance for veterans/military
- ___ Availability of health care specialists
- ___ Other (please specify) _____

Mental Health

40. What are the **top three mental health needs** in the community that should be addressed?

Instructions: Please rank your selections by typing 1, 2, or 3 in the box next to your choice. A 1 shows the most important, a 2 shows the second important, and a 3 shows the third important. You will only be able to rank three choices.

- ___ Affordable health insurance that includes mental health care
- ___ Affordable mental health services
- ___ Affordable prescriptions
- ___ Availability of transportation to mental health services
- ___ Children's mental health services
- ___ Adolescents' mental health services
- ___ Young adults' mental health services
- ___ Older adults' mental health services
- ___ High quality mental health services
- ___ Increased mental health education/prevention
- ___ Increased number of mental health care providers
- ___ Substance abuse prevention/treatment
- ___ Addressing the stigmatization of those with mental health issues
- ___ Suicide prevention
- ___ Other (please specify) _____

Social Issues

Social issues are a broad range of concerns that affect individuals but can also have a significant impact on the health and safety of the community. They're often described as public health issues. This section includes questions on issues such as substance abuse, domestic/sexual violence and abuse, homelessness, discrimination, etc. Please remember that your answers are anonymous and will never be reported individually. You may also choose not to answer questions that are uncomfortable. But, your responses to these questions are important in addressing community needs.

41. Do you or anyone in your household have a substance use issue (e.g., frequently drinks too much alcohol, has a problem with legal prescriptions or illegal drugs)?

- ☐ Yes
- ☐ No

IF you answered YES to question 42:

42. If yes, do you or anyone in your household have an abuse issue with opioids (e.g., Oxycontin, Percocet, Vicodin, heroin, etc.)?

- ☐ Yes
- ☐ No

43. Does anyone in your household currently experience domestic violence (e.g., violence between adult partners or between adults and children)?

- ☐ Yes
- ☐ No

44. Excluding mental health issues, do you or anyone in your household have a physical disability?

- ☐ Yes
- ☐ No

45. Excluding mental health issues, do you or anyone in your household have a developmental disability?

- ☐ Yes
- ☐ No

46. Are you or anyone in your immediate family currently homeless (e.g., no permanent place to live on a daily basis)?

- ☐ Yes
- ☐ No

47. Have you **personally** experienced or witnessed discrimination in the community based in any of the ways listed below? Please **check all that apply** and indicate where the discrimination you experienced or witnessed occurred.

	Discrimination based on:	In Housing	In Public Spaces (e.g., retail stores, service establishments, educational institutions, recreation facilities, etc.)	In Employment
Race				
Religion				
Ethnicity				
Sexual Orientation				
Age				
Gender				
Gender Identity				
Disability				

48. Please use the space below to provide information on any additional ways you have personally experienced or witnessed discrimination not included above, and/or provide information about other places the discrimination has occurred.

49. What are the **top three social issues** in the community that most concern you.

Instructions: Please rank your selections by typing 1, 2, or 3 in the box next to your choice. A 1 shows the most important, a 2 shows the second important, and a 3 shows the third important. You will only be able to rank three choices.

- | | |
|---|--|
| <input type="checkbox"/> Adult drug use | <input type="checkbox"/> Persistent hunger |
| <input type="checkbox"/> Adult alcohol use | <input type="checkbox"/> Inattentive driving |
| <input type="checkbox"/> Adult tobacco (all products) use | <input type="checkbox"/> Manufacture or selling of drugs |
| <input type="checkbox"/> Child physical abuse | <input type="checkbox"/> Mental illness |
| <input type="checkbox"/> Child sexual abuse | <input type="checkbox"/> Poverty |
| <input type="checkbox"/> Child abuse | <input type="checkbox"/> Property crime |
| <input type="checkbox"/> Child neglect | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Cybercrime (including identity theft, online scams, phishing, etc.) | <input type="checkbox"/> Teen pregnancy |
| <input type="checkbox"/> Discrimination (including gender, race, ethnicity, sexual orientation, etc.) | <input type="checkbox"/> Violent crime (including assault, rape, murder) |
| <input type="checkbox"/> Domestic violence | <input type="checkbox"/> Youth drug use |
| <input type="checkbox"/> Drinking and driving | <input type="checkbox"/> Youth alcohol use |
| <input type="checkbox"/> Drug use and driving | <input type="checkbox"/> Youth tobacco (all products including vaping) use |
| <input type="checkbox"/> Elder abuse | <input type="checkbox"/> Youth/gang violence |
| <input type="checkbox"/> Homelessness | <input type="checkbox"/> Other (please specify) _____ |
| <input type="checkbox"/> Food insecurity | |

50. What are the **top three needs related to social issues** in the community that should be addressed?

Instructions: Please rank your selections by typing 1, 2, or 3 in the box next to your choice. A 1 shows the most important, a 2 shows the second important, and a 3 shows the third important. You will only be able to rank three choices.

- ☐ Child care
- ☐ Services for older adults
- ☐ Services for persons with disabilities
- ☐ Availability of mental health services
- ☐ Better enforcement of laws
- ☐ Changing local laws
- ☐ Options for arts and entertainment activities
- ☐ Positive activities for youth
- ☐ Availability of employment
- ☐ Availability of support groups/peer support
- ☐ Substance abuse prevention or treatment
- ☐ Housing options for homeless persons
- ☐ Availability of services for people with low incomes
- ☐ Services for domestic/sexual violence survivors
- ☐ Services to veterans/military
- ☐ Other (please specify) _____

Children

This section focuses on issues that affect children (0-12 years old) and youth (13-18 years old) and their families. You DO NOT have to have children/youth to be affected by conditions in the community that

impact children and families. A few questions in this section are just for those who have children or grandchildren. Otherwise, please answer the questions whether you have children/grandchildren or not.

This section includes questions on child care, education, medical/dental care, support for parents/families, etc.

51. Are you a parent or custodial guardian of someone under 18 years of age?

- ☐ Yes
- ☐ No

52. If you have grandchildren, are you a custodial or primary caregiver for any of your grandchildren that are under the age of 18?

- ☐ Yes
- ☐ No

If you are not the parent or custodial grandparent/guardian of someone under 18 years of age please skip to question 58.

If you are the parent or custodial grandparent/guardian of someone under 18 years of age, please answer the following:

53. Please answer the following questions about your child/children. Please select only one answer per question.

	Yes	No
Are you a single parent?		
Do any of your children have a developmental disability?		
Do any of your children have a physical disability?		
Do any of your children have a chronic disease?		
Have any of your children been diagnosed with a mental illness or emotional disturbance?		
Are you satisfied with the education your children are receiving?		
Are your children home-schooled?		
Have any of your children been afraid to attend school/other activities due to bullying?		
Are you satisfied with non-school activities for children in your community?		
Have you ever quit or lost a job because you did not have the child care you needed?		

54. Do you use child care for your child/children?

- ☐ Yes
- ☐ No

If you do not use any type of child care for your child/children please skip to question 58.

55. What type of child care do you use? **Check all that apply.**

- ☐ Licensed Day Care Home
- ☐ Group Day Care Home
- ☐ Child Care Center
- ☐ Preschool
- ☐ Afterschool/Latchkey Program
- ☐ Relative or Friend
- ☐ Other (please specify) _____

56. Please answer the following questions about child care.

	Yes	No
Are you satisfied with the overall quality of the child care you currently receive?		
Are you satisfied with the child care options that are available to you?		
Do you receive any type of child care assistance?		
Is your child care affordable?		

57. How well does your community currently meet the needs of children, including adolescents in the following areas?

	Very Poor: No needs are met	Poor: Some needs are met	Fair: Many needs are met	Good : Most needs are met	Very Good: All needs are met	I Don't Know
Prenatal care (pregnancy)						
Postnatal care (birth through first year)						
Access to child care for children 0-5						
Quality of child care for children 0-5						
Parental support/training						
Support for single parents						
Quality education						
College or career preparation						
Needs of children/youth with disabilities						

How well does your community currently meet the needs of children, including adolescents in the following areas? (Continued)

	Very Poor: No needs are met	Poor: Some needs are met	Fair: Many needs are met	Good : Most needs are met	Very Good: All needs are met	I Don't Know
Dental health						
Mental health						
Physical health						
Violence/bullying prevention						
Recreational opportunities						
Volunteer opportunities						
Needs of parents/guardians whose first language isn't English						
Needs of children whose first language isn't English						
Basic needs of low-income children/youth						
Employment for youth						

58. What are the **top three needs for children (ages birth to 12)** in the community that should be addressed?

Instructions: Please rank your selections by typing 1, 2, or 3 in the box next to your choice. A 1 shows the most important, a 2 shows the second important, and a 3 shows the third important. You will only be able to rank three choices.

- ___ Parenting education
- ___ Parenting skills development
- ___ Afterschool Programs
- ___ Mentoring programs for children
- ___ Child care for children 0-5
- ___ Mental health care
- ___ Nutrition programs (e.g. WIC, free and reduced lunch, etc.)
- ___ Recreational activities
- ___ Transportation
- ___ Public education
- ___ Financial assistance to families (for nutrition, child care, housing, etc.)
- ___ Medical care
- ___ Dental care
- ___ Early childhood intervention programs (e.g., Head Start, etc.)
- ___ Services for children with physical or developmental disabilities
- ___ Bullying prevention
- ___ Other (please specify) _____

59. What are the **top three needs for youth/adolescents (ages 13-18)** in the community that should be addressed?

Instructions: Please rank your selections by typing 1, 2, or 3 in the box next to your choice. A 1 shows the most important, a 2 shows the second important, and a 3 shows the third important. You will only be able to rank three choices.

- ☐ Access to higher education
- ☐ Public education
- ☐ Employment opportunities for teens
- ☐ Workforce training for teens
- ☐ Substance abuse prevention/treatment
- ☐ Parenting education/skills development (for parents of adolescents)
- ☐ Mental health care
- ☐ Mentoring programs for adolescents
- ☐ Comprehensive sex education (including teen pregnancy prevention, STDs, etc.)
- ☐ Healthy eating
- ☐ Being able to take part in physical activities
- ☐ Cultural enrichment opportunities
- ☐ Transportation
- ☐ Appropriate internet/technology use (e.g., sexting, cyber-bullying, etc.)
- ☐ Services for adolescents with physical or developmental disabilities
- ☐ Tutoring
- ☐ Recreational activities
- ☐ Access to technology/computers
- ☐ Access to the Internet
- ☐ Financial skills training
- ☐ Opportunities to contribute to the community (e.g., volunteering, leadership development, participation in community decision-making)
- ☐ Medical care
- ☐ Dental care
- ☐ Bullying/relationship violence prevention
- ☐ Other (please specify) _____

Public Education

Public education refers to the system that is maintained at **public** expense for the **education** of the children of a community or district and commonly including primary (K-5) and secondary schools (6-12). This refers specifically to public schools, not private or religiously affiliated. Again, a person does not have to have children to be impacted by the public education system. Please answer the following questions to your best ability whether you have children/grandchildren or not.

How would you rate public K-12 education in the community in the following areas?

60. Rate the extent to which you are satisfied with your community's public k-12 education in the following areas:

	Very Poor: Very dissatisfied	Poor: Dissatisfied	Fair: Somewhat satisfied	Good: Satisfied	Excellent: Very satisfied	N/A or Don't Know
The quality of the school your child attends.						
The overall quality of schools.						
The quality of teachers.						
The amount of parental involvement in the child's education.						
The availability of support resources at the school (counselors, tutors, etc.).						
The availability of up-to-date technology for students to use.						
The availability of extracurricular programs, clubs, or sports.						
The amount of money a school spends per student.						
The quality of school buildings.						
The quality of curriculum.						
Availability of afterschool programs.						

61. What are the **top three needs related to public education** in the community that should be addressed?

Instructions: Please rank your selections by typing 1, 2, or 3 in the box next to your choice. A 1 shows the most important, a 2 shows the second important, and a 3 shows the third important. You will only be able to rank three choices.

- ___ Increased expectations for student achievement
- ___ Equality in funding among school districts
- ___ Getting and keeping good teachers
- ___ Increased parental involvement
- ___ Increased student discipline
- ___ Increased quality of instruction
- ___ Addressing bullying
- ___ Raising standardized test scores
- ___ Increased quality of curriculum
- ___ More artistic and musical activities
- ___ Addressing overcrowding in schools
- ___ Addressing fighting, violence, and/or gangs
- ___ Increased amount of time students spend in school
- ___ Availability of physical activities and sports
- ___ Availability of quality computers and technology
- ___ Updated textbooks
- ___ Addressing the condition of school buildings
- ___ More extracurricular activities
- ___ More involvement of students in decision-making
- ___ Other (please specify) _____

Aging

In this section, older adults are defined as 55 or older. As with other sections, a person does not have to belong to this age group in order to have an understanding of conditions related to aging in Pottawatomie County. A few questions are specifically for those who are 55 or older. Otherwise, please answer all other questions to the best of your knowledge whether you're 55 or older or not. The questions in this section focus on quality of life for people 55 or older as well as services in the community.

Please keep in mind this definition of healthy aging while filling out these questions: Healthy aging involves developing and maintaining the **functional ability** that enables **well-being** in older age, including meeting basic needs; ability to make decisions; mobility; building and maintaining relationships; and contributing to the community.

62. The community supports healthy aging.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neither disagree or agree
- ☐ Agree
- ☐ Strongly Agree

63. There are an adequate number of services in the community to meet the needs of older adults

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neither disagree or agree
- ☐ Agree
- ☐ Strongly Agree

64. What are the **top three needs for older adults in the community** that should be addressed?

Instructions: Please rank your selections by typing 1, 2, or 3 in the box next to your choice. A 1 shows the most important, a 2 shows the second important, and a 3 shows the third important. You will only be able to rank three choices.

- | | |
|---|--|
| <input type="checkbox"/> Medical care | <input type="checkbox"/> Mental health services |
| <input type="checkbox"/> Dental care | <input type="checkbox"/> Legal services |
| <input type="checkbox"/> Vision care | <input type="checkbox"/> Personal care services |
| <input type="checkbox"/> Affordable prescriptions | <input type="checkbox"/> Respite services for caregivers |
| <input type="checkbox"/> Independent living in the home | <input type="checkbox"/> Access to daily meals |
| <input type="checkbox"/> Independent living in a retirement community | <input type="checkbox"/> Utility assistance |
| <input type="checkbox"/> Assisted living options | <input type="checkbox"/> Safety |
| <input type="checkbox"/> Long term care facility options | <input type="checkbox"/> Employment |
| <input type="checkbox"/> Memory care options/dementia support | <input type="checkbox"/> Finances/Income |
| <input type="checkbox"/> Home health care options | <input type="checkbox"/> Ease of mobility in the community |
| <input type="checkbox"/> Affordable housing | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Day programs | <input type="checkbox"/> Hospice care |
| <input type="checkbox"/> Caregiver support groups | <input type="checkbox"/> Elder abuse |
| <input type="checkbox"/> Health insurance | <input type="checkbox"/> Substance abuse |
| | <input type="checkbox"/> Other (please specify) _____ |

65. Are you a caregiver of an older adult (spouse, parent, grandparent, etc.)? **If NO, skip to question 69.**

- ☐ Yes
- ☐ No

66. If you are the caregiver of an older adult, are you receiving the supportive services you need?

- ☐ Yes
- ☐ No

67. If you are not receiving the services that could support you in your caregiver role what services do you need? Please write in your response.

68. Are you 55 years or older?

- ☐ Yes
- ☐ No

If you are not 55 years or older, please skip to question 71.

69. How important are the following in your life right now?

	Not Important	Somewhat Important	Moderately Important	Important	Very Important
Staying mentally sharp					
Spending time with family and friends					
Learning new things					
Receiving or continuing to receive Social Security benefits					
Receiving or continuing to receive Medicare benefits					
Having enough money to meet daily living expenses like groceries, gasoline, utilities, clothing, mortgage or rent, etc.					
Having adequate health insurance coverage					
Affording the cost of out-of-pocket health care expenses and prescription drugs					
Having quality long-term care for yourself or a family member					

How important are the following in your life right now? (Continued)

	Not Important	Somewhat Important	Moderately Important	Impor tant	Very Important
Staying healthy					
Being able to stay in your own home					
Protecting yourself from consumer fraud					
Having enough money to live comfortably and do the things you want to do					
Having access to public transportation					
Enforcement of quality standards for nursing homes					
Being able to volunteer in your community					
Being able to use your cell phone with confidence					
Being able to go online to manage your finances with confidence					

Housing

This section focuses on conditions related to housing for persons in Pottawatomie County. It does not matter whether you own or rent. Please answer these questions as thoroughly as possible. The questions focus on the suitability of housing (e.g., affordability, safety) and needs related to housing.

70. Do you own your home or rent?

- ☐ Own
- ☐ Rent
- ☐ Not applicable (e.g., I live with friend or family member)

71. Which of the following best describes your current living arrangements?

- ☐ I am the only person in the household.
- ☐ I live with my spouse/partner/significant other.
- ☐ I live with other family, friends, or roommates.
- ☐ I have no place to live.

Suitability of Housing

Suitable housing refers to the condition of a) spending no more than 30% of your income on housing and b) living in a home that meets local safety (code) standards.

72. Do you spend more than 30% of your gross annual income on housing (including utilities)?

- ☐ Yes
- ☐ No

73. Do you think your current housing is safe?

- ☐ Yes
- ☐ No

74. Are you happy with your current housing?

- ☐ Yes
- ☐ No

75. If you're not happy with your current housing, please tell us why? **Check all that apply.**

- ☐ Too expensive
- ☐ Location
- ☐ Unsafe because of condition of the housing
- ☐ Too small
- ☐ Other (please specify) _____

76. If you would prefer to own your residence, but don't, what are the reasons? **Check all that apply.**

- ☐ Too expensive to buy
- ☐ Too hard to get financing
- ☐ Too much responsibility
- ☐ I'd be the only occupant
- ☐ Too costly to maintain
- ☐ Too costly to insure
- ☐ N/A – I own my own residence
- ☐ Other (please specify) _____

77. There is enough affordable housing in the community.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neither disagree or agree
- ☐ Agree
- ☐ Strongly Agree

78. There is enough accessible housing (for persons with disabilities) in the community.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neither disagree or agree
- ☐ Agree
- ☐ Strongly Agree

79. What are the **top three needs related to housing** in the community that should be addressed?

Instructions: Please rank your selections by typing 1, 2, or 3 in the box next to your choice. A 1 shows the most important, a 2 shows the second important, and a 3 shows the third important. You will only be able to rank three choices.

- ___ Education about responsible homeownership
- ___ Education about financing options for homeownership
- ___ Higher quality rentals
- ___ Senior housing
- ___ Low-income housing assistance (Section 8)
- ___ Neighborhood improvement programs
- ___ Code enforcement (e.g. overgrown lawns, broken windows, trash, etc.)
- ___ Assistance with property repair and maintenance
- ___ Variety of affordable housing options
- ___ Historic preservation
- ___ Quality housing
- ___ Safe housing
- ___ Affordable housing
- ___ Accessible housing (for persons with disabilities)
- ___ Other (please specify) _____

Transportation

This section focuses on the availability and use of transportation in Pottawatomie County. It includes questions that ask about your own transportation options and those in the community as well as overall needs.

80. Which of the following types of transportation do you use to get around your community: **Check all that apply.**

- ☐ A car, truck, or motorcycle you own or have use of
- ☐ Ride sharing (i.e., vanpool or carpool)
- ☐ Public transportation (e.g., bus, van, etc.)
- ☐ One of the ride services, Uber or Lyft
- ☐ Taxi
- ☐ Horse
- ☐ A friend or relative
- ☐ Bicycle
- ☐ Walk
- ☐ Other (please specify) _____
- ☐ N/A – I don't need transportation

81. Of the transportation types above, which one do you use most frequently? **Check ONLY one.**

- ☐ A car, truck, or motorcycle you own or have use of
- ☐ Ride sharing (i.e., vanpool or carpool)
- ☐ Public transportation (e.g., bus, van, etc.)
- ☐ One of the ride services, Uber or Lyft
- ☐ Taxi
- ☐ Horse
- ☐ A friend or relative
- ☐ Bicycle
- ☐ Walk
- ☐ Other (please specify) _____
- ☐ N/A – I don't need transportation

82. Estimate how often you have reliable transportation to get you to the places you want to go

- ☐ None of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All of the time
- ☐ I don't need transportation

83. There are multiple transportation options in the community

- ☐ Yes
- ☐ No
- ☐ N/A – I don't need transportation

84. I have access to the transportation I need to get around the community

- ☐ Yes
- ☐ No
- ☐ N/A – I don't need transportation

85. Do transportation issues regularly prevent you from doing what you need or want to do?

- ☐ Yes
- ☐ No

86. What are the **top three needs related to transportation** in your community that should be addressed?

Instructions: Please rank your selections by typing 1, 2, or 3 in the box next to your choice. A 1 shows the most important, a 2 shows the second important, and a 3 shows the third important. You will only be able to rank three choices.

___ Widen existing roads

___ Build new roads

___ Provide maintenance and improvements to existing roadways (including intersections or interchanges, pavement of gravel roads, potholes, bridge repairs, etc.)

___ Improve traffic signals

___ Improve public transit service (including increased service hours, shorter wait times, more routes, bus shelters, benches, etc.)

___ Improve driver education

___ Develop a pedestrian friendly transportation system to make areas more walkable (improve sidewalks, crosswalks, signals, etc.)

___ Expand and improve the bike route system (bike paths, bike lanes) to increase the number of people who bike as a form of transportation

___ Increase specialized transportation services for people with disabilities and/or special needs

___ Address texting and driving

___ Increase options for overnight public parking

___ Expand local taxi services

___ Other _____

Economics and Personal Finances

This section focuses on your perceptions of your own economic and financial situation as well as within the community in general. It also includes questions about employment and taxes as well as needs related to economics and personal finance.

87. The overall local economy is doing well.

- ☐ Yes
- ☐ No

88. How satisfied are you with your current financial situation?

- ☐ Not at all satisfied
- ☐ Barely satisfied
- ☐ Somewhat satisfied
- ☐ Mostly satisfied
- ☐ Very satisfied

89. How optimistic are you about your personal financial future?

- ☐ Not at all optimistic
- ☐ Barely optimistic
- ☐ Somewhat optimistic
- ☐ Mostly optimistic
- ☐ Very optimistic

90. In a typical month, how difficult is it for you to cover your expenses?

- ☐ Very Difficult
- ☐ Difficult
- ☐ Neither difficult or easy
- ☐ Easy
- ☐ Very Easy
- ☐ N/A

91. Do you make enough money to save for the future?

- ☐ Yes
- ☐ No
- ☐ N/A – I don't work

92. In the past 12 months, have you personally experienced a large unexpected drop in income?

- ☐ Yes
- ☐ No
- ☐ N/A

93. In the past 12 months has your household experienced a large unexpected drop in income?

- ☐ Yes
- ☐ No
- ☐ N/A

94. Do you make enough money to support your own basic needs?

- ☐ Yes
- ☐ No

95. Do you make enough money to support your family's needs?

- ☐ Yes
- ☐ No
- ☐ N/A – I only support myself

96. Do you need to work more than one job in order to earn enough to meet your basic needs?

- ☐ Yes
- ☐ No

97. Has your employer put limits on the number of hours you can work due to insurance costs?

- ☐ Yes
- ☐ No
- ☐ I don't know

98. Do you feel your education is being fully used in your current job?

- ☐ Yes
- ☐ No
- ☐ N/A - I don't have a job

99. Do you feel your skills are being fully used in your current job?

- ☐ Yes
- ☐ No
- ☐ N/A - I don't have a job

100. If you are retired, to what extent do you feel your education is being utilized?

- ☐ It is not being utilized
- ☐ It is barely being utilized
- ☐ It is somewhat being utilized
- ☐ It is being utilized a lot
- ☐ It is being utilized to a great extent
- ☐ N/A – I am not retired

101. If you are retired, to what extent do you feel your skills are being utilized?

- ☐ They are not being utilized
- ☐ They are barely being utilized
- ☐ They are somewhat being utilized
- ☐ They are being utilized a lot
- ☐ They are being utilized to a great extent
- ☐ N/A – I am not retired

102. There are a variety of jobs available in my community.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neither disagree or agree
- ☐ Agree
- ☐ Strongly Agree

103. There are enough well-paying jobs in my community.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neither disagree or agree
- ☐ Agree
- ☐ Strongly Agree

104. There are opportunities in my community for increasing my job skills.

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neither disagree or agree
- ☐ Agree
- ☐ Strongly Agree

105. Property taxes are reasonable.
- ☐ Strongly Disagree
 - ☐ Disagree
 - ☐ Neither disagree or agree
 - ☐ Agree
 - ☐ Strongly Agree
 - ☐ N/A - I don't pay property taxes

106. Sales taxes in are reasonable.
- ☐ Strongly Disagree
 - ☐ Disagree
 - ☐ Neither disagree or agree
 - ☐ Agree
 - ☐ Strongly Agree

107. What are the **top three needs related to economic/personal finance** in the community that should be addressed?

Instructions: Please rank your selections by typing 1, 2, or 3 in the box next to your choice. A 1 shows the most important, a 2 shows the second important, and a 3 shows the third important. You will only be able to rank three choices.

- ___ Workforce development training
- ___ Low-cost resources to help with personal finance management
- ___ Assistance with searching for and gaining employment
- ___ Small business development
- ___ Emergency assistance to individuals or families (e.g., for utilities, food, rent, etc.)
- ___ Availability of jobs
- ___ Access to education
- ___ Availability of low-interest loans
- ___ Availability of college or career preparation in schools
- ___ Employment opportunities for youth
- ___ Employment opportunities for older adults
- ___ Jobs that at least pay a living wage (the minimum income necessary for a worker to meet basic needs like food, housing, clothing, etc.)
- ___ Other (please specify) _____

Demographic Information

The following questions will help us understand a little more about the people who respond to this survey. This information will not be linked to your individual answers in any way. Analysis may be done to see how people with similar demographics (e.g., age, income, etc.) answer certain questions. But, all data from the group of interest will be combined for these purposes. Please answer as completely as possible.

108. Gender:

- ☐ Male
- ☐ Female
- ☐ Transgender male
- ☐ Transgender female
- ☐ Gender variant/non-conforming
- ☐ Not listed other (please specify) _____
- ☐ Prefer not to answer

109. Racial Categories (**Select all that apply**)

- ☐ White
- ☐ Asian
- ☐ African American/Black
- ☐ American Indian or Alaska Native
- ☐ Native Hawaiian or Pacific Islander
- ☐ Multiracial
- ☐ Other (please specify) _____

110. Ethnic Category

- ☐ Hispanic or Latino
- ☐ Not Hispanic or Latino

111. What is the highest level of school, college or vocational training that you have finished?

- ☐ Less than 9th grade
- ☐ 9-12th grade, no diploma
- ☐ High school graduate (or GED/equivalent)
- ☐ Associate's degree or vocational training
- ☐ Some college (no degree)
- ☐ Bachelor's degree
- ☐ Graduate or professional degree

112. What best describes your current marital status?

- ☐ Single, never married
- ☐ Married
- ☐ Divorced
- ☐ Widowed
- ☐ Not married, but living together
- ☐ Domestic partnership or civil union

113. What was your total household income last year, before taxes?

- ☐ Less than \$10,000
- ☐ \$10,000 to \$14,999
- ☐ 15,000 to \$24,999
- ☐ \$25,000 to \$34,999
- ☐ \$35,000 to \$49,999
- ☐ \$50,000 to \$74,999
- ☐ \$75,000 to \$99,999
- ☐ \$100,000 to \$199,999
- ☐ \$200,000 or more
- ☐ Prefer not to answer

114. How many people does this income support?

115. Have you been a member of the Armed Services/Military?

- ☐ Yes
- ☐ No

116. What is your current status?

- ☐ Active
- ☐ Retired
- ☐ Disabled or Injured
- ☐ Inactive

117. What is your employment status?

- ☐ Self-employed
- ☐ Working more than one job
- ☐ Employed full-time (one job)
- ☐ Employed part-time
- ☐ Homemaker
- ☐ Retired
- ☐ Disabled
- ☐ Unemployed for 1 year or less
- ☐ Unemployed for more than 1 year

118. How many people in your household are working?

119. What county do you currently work in?

- ☐ Riley
- ☐ Pottawatomie
- ☐ Geary
- ☐ Other (please specify) _____

120. Are you a student taking courses for credit?

- ☐ Yes
- ☐ No

121. What is your student status?

- ☐ Part-time
- ☐ Full-time

122. Which of the following best describes the school you are attending?

- ☐ Graduate school (on campus)
- ☐ Graduate school (on-line)
- ☐ Four year undergraduate college/university (on campus)
- ☐ Four year undergraduate college/university (on-line)
- ☐ Two-year community/junior college (on campus)
- ☐ Two year community/junior college (distance learning)
- ☐ Vocational, technical, or trade school (on campus)
- ☐ GED/high school equivalency program
- ☐ Other (please specify) _____

123. Do you participate in a religious/faith community?

- ☐ Yes
- ☐ No

124. Which of the best describes how you access the Internet? **Check all that apply.**

- ☐ Home Computer
- ☐ Work Computer
- ☐ Public Computer
- ☐ Mobile (cell phone, tablet, etc.)
- ☐ I don't access the Internet

125. How do you normally get your news about community events? **Check all that apply.**

- ☐ Newspaper
- ☐ Community flyers
- ☐ Social media (Facebook, Twitter, etc.)
- ☐ Newsletters
- ☐ Email/RSS
- ☐ Friends/Family
- ☐ Internet
- ☐ Radio
- ☐ TV/local cable

Other Comments

Please share any additional comments about the community here:

Thank you for your participation.