



# Reno County

## Community Data Book

Healthy Living in a Healthy Community

Reno County Health Department  
Hutchinson Regional HealthCare System

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*CHA Steering Committee*

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*Summary*

## Director's Summary

The vision of Reno County Health Department (RCHD) is *Healthy living in a Healthy Community*.

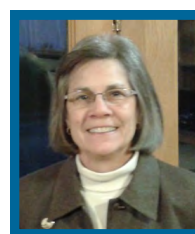
Development of a community health assessment is a complex process and involves multiple stakeholders. In 2012, Reno County Health Department (RCHD) in cooperation with Hutchinson Regional HealthCare System (HRHCS) conducted a community health needs assessment. The community health needs assessment is a regular and systematic collection, analysis, and dissemination of information on the health of the community, including statistics on health status, understanding of community health needs and strengths, and involvement of community members. This report represents a profile of data for health issues, and seeks to address questions about the community health status.

The data book represents information and statistical evidence gathered from national, state, and county databases. This information guides Reno County Health Department and Hutchinson Regional HealthCare System and serves as a resource for the community. Public health needs and community strengths are revealed which assist with the development of community health improvement plans.

The assessment process considers factors known as social determinants of health. Some of the social determinants include income distribution, educational opportunity, employment, living conditions, and transportation systems. Social determinants of health are closely related to health disparities. Disparities in health status occur through the interaction of social determinants with individual characteristics such as age, gender, race, ethnicity, disability, and special health needs.

In cooperation with RCHD and HRHCS we look forward to using this data to work with our community partners to lead changes that help create healthy lifestyles for Reno County residents.

(Information and statistics provided in the data book were the most current available at the time of publication)



Julia Hulsey RN, MSN  
Director/Health Officer

### Identified Risk Factors

	Kansas Health Matters	Reno County BRFSS	KS BRFSS	County Health Rankings	Community Opinion Survey
Obesity	X	X	X	X	X
Teen Births	X			X	
Flu Shot	X	X			
HC Coverage		X	X		X
Single parent	X			X	
Poor/fair health			X	X	
Smoking		X	X	X	

## Community Health Assessment Steering Committee

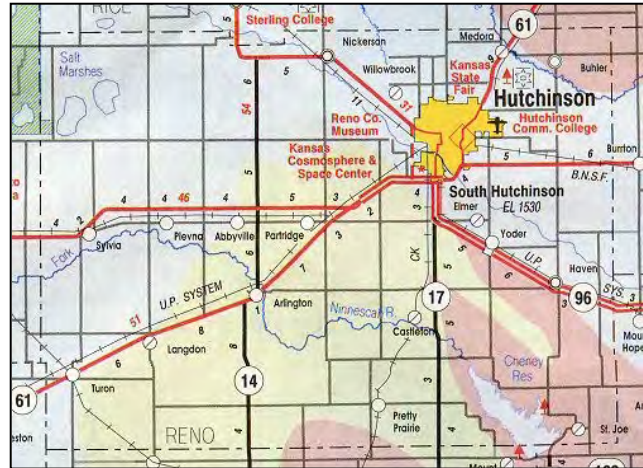
Name	Agency	Representing
Dr. Richard Archer	Horizons Mental Health	Mental Health
Darcy Basye	Reno County Health Department	Environmental Health
Sondra Borth	Communities That Care Coalition	Substance Abuse Prevention
Mona Broomfield	Prairie Star Health Care Center	Federally Qualified Health Care Center
Neita Christopherson	Assistant Director Reno County Health Department	Reno County Health Department
Nancy Ciskey	Hutchinson Community College Clinical Nursing Instructor	Community College
Dr. Tim Crater	Medical Consultants Coordinator	Physician/Hutchinson Clinic
Lisa French	Cheney Lake Watershed	Environment
Janet Hamilton	Hutchinson Community Foundation	Community Foundation
Jessica Hoskinson	Community Consultant	CHA-CHIP Co-Facilitator-Public Health
Julia Hulsey	Reno County Health Department	Reno County Health Department
Jan Lance	Hutchinson Regional Health Care System	CHA-CHIP Co-Facilitator-Non Profit Hospital
Jeanette Marks	Reno County Health Dept Advisory Board	Rural Reno County
Dr. Deanna Marshall	Prairie Star Health Center	Federally Qualified Health Center
Gary Meagher	Reno County Administrator	Reno County Administration
Kim Moore	United Methodist Health Ministries Fund	Faith Community
Ted Nelson	Hutchinson Recreation Commission	Recreation
Alice Oldham	Hutchinson Clinic	Physicians/Nurses, Workplace Wellness
Pam Paulsen	K-State Research & Extension	Agriculture
Lowell Peachy	Mennonite Friendship Communities	Aging Services
Dr. Tom Smith	Practicing Physician	NAACP/Physician
Bailey Stiggins	Chamber of Commerce	Chamber/Young Professionals
Tona Turner	United Way of Reno County	United Way
Dr. Jack Wortman	Retired Physician	Delos Smith Senior Center

# Population

## 1.1 Demographics

Reno County is one of the geographically largest counties in Kansas (1,255 square miles) with a total population of: 64,511. It is home to Hutchinson, the county seat, with a population of 42,000 and several small communities. The median household income for both the county (\$41,431) and city of Hutchinson (\$38,880) considerably lag the state's rate (\$49,424).

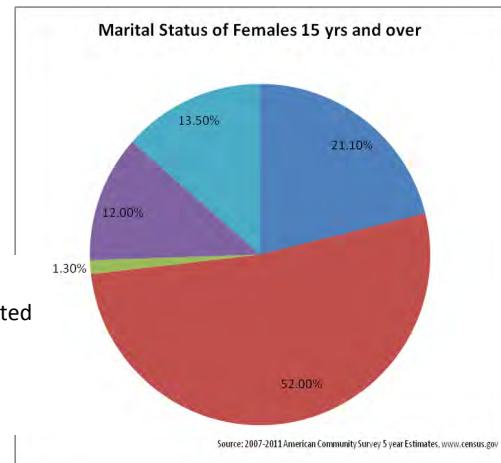
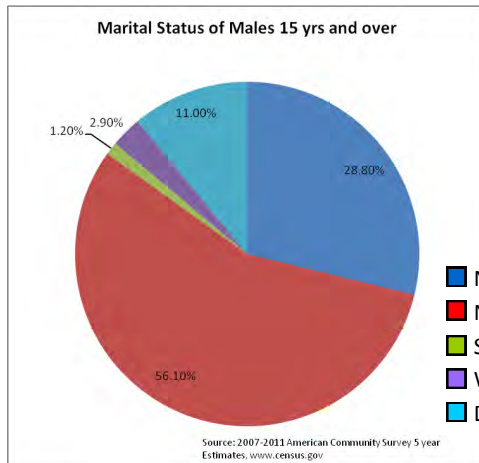
Rural Reno County is home to a significant number of Amish families who are quite dependent upon agriculture and value a simpler lifestyle. Hutchinson has three state prison facilities (minimum, medium, and maximum security) that provide steady employment for many, but draws a number of transient families to the area who are in need of a variety of social services.



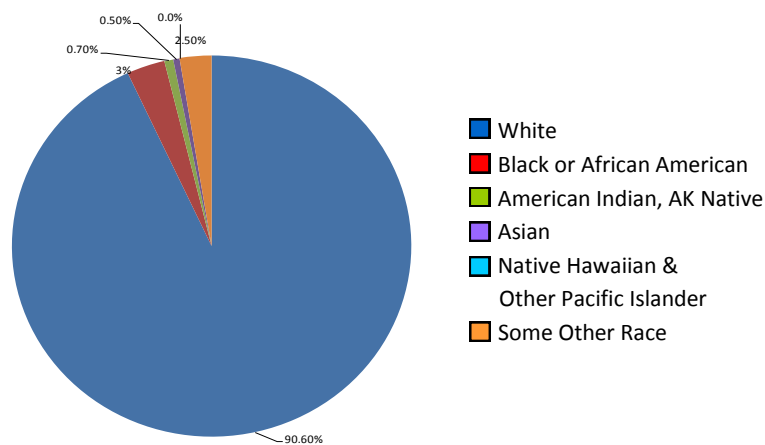
Demographics (2010)	Reno County	Kansas
Population 2010	64,511	2,853,11
Persons under 18 years, percent , 2011	23.4%	25.2%
Persons 65 years and over, percent, 2011	17.2%	13.3%
<b>Race and Ethnicity</b>		
White persons, percent, 2011	93.2%	87.4%
Black persons, percent, 2011	3.2%	6.1%
American Indian and Alaska Native persons, percent, 2011	0.8%	1.2%
Asian persons, percent, 2011	0.5%	2.5%
Persons reporting two or more races, percent, 2011	2.2%	2.7%
Persons of Hispanic or Latino Origin, percent, 2011	8.2%	10.8%

Source: US Census

## 1.2 Married Population



## 1.3 Population by Race and Ethnicity



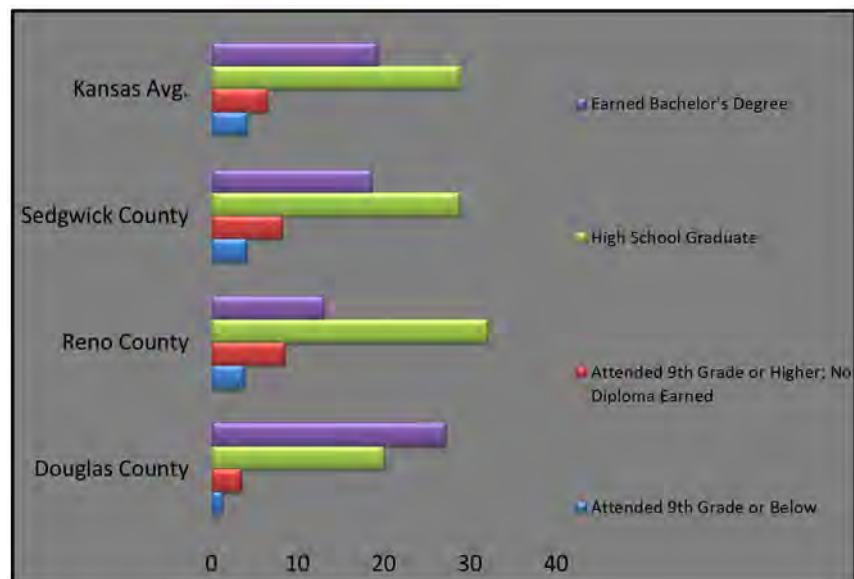
Source: Profile of General Population and Housing Characteristics: 2010 U.S. Census

## 1.4 Population by Educational Attainment

High school graduations have increased in Reno County. In 2000—85.9% and 2008—90.2%.

Source: Kansas State Department of Education

Compared to our neighboring counties, Reno County population has the largest number of residents that have a high school education. Sedgwick and Douglas counties have a greater percentage of higher educated population as does Kansas as a whole.



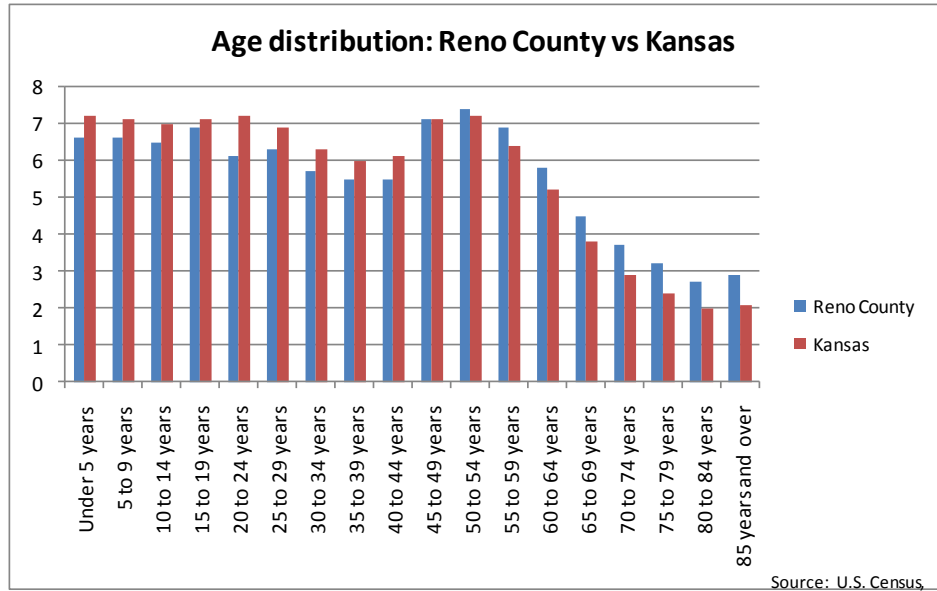
Source: 2010 US Census Bureau

# Population

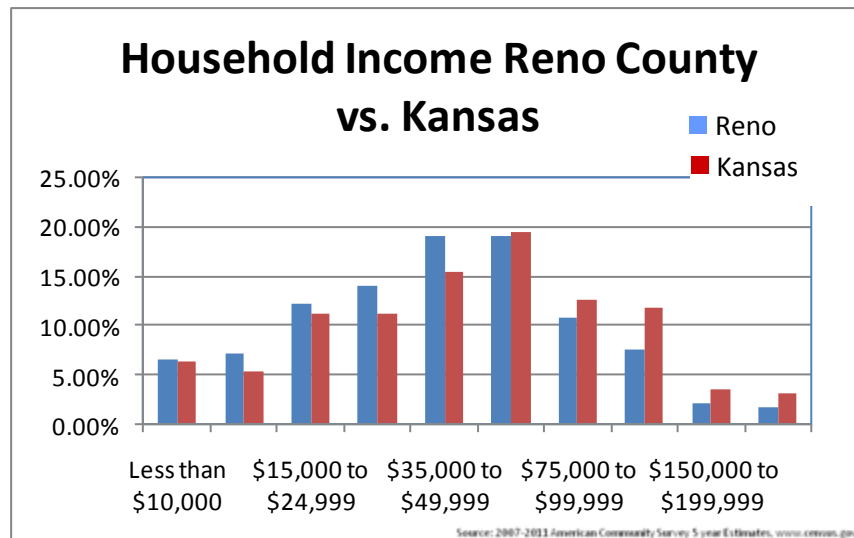
## 1.5 Population by Age

The greatest population increases were in the 45-59 years age groups. This increase also reflects the increased need for health care services as the population ages.

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## 1.6 Household Income



Median Household income in Reno County: \$41,431

Median Household income in Kansas: \$49,424

Median earnings for male full time workers \$39,350

Median earnings for female full time workers \$27,417

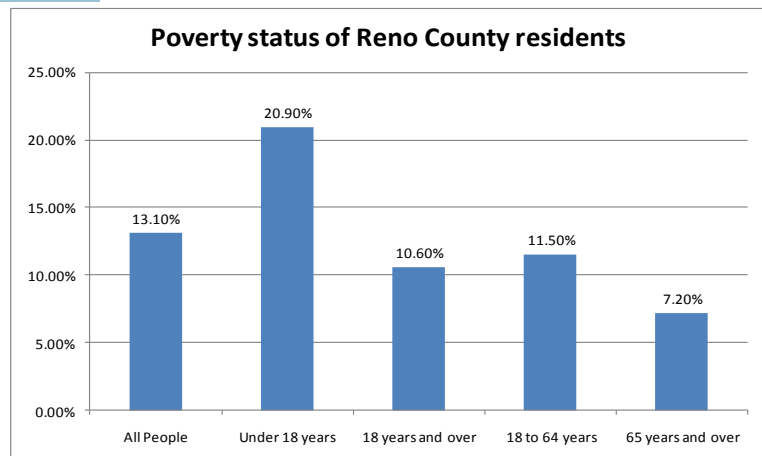


## 1.7 Poverty

In 2010, the U.S. poverty threshold for a single person age 65 or younger was \$11,344; for a family of four, including two children, it was \$22,113.

In 2012 more than one in four children (25.1 percent) under age 5 lived in poverty.

Source: US Census Bureau



People in families	11.60%
Married couple families	3.90%
Families with female householder, no husband present	29.50%

## 1.8 School Free and Reduced Lunch Populations

School District	Total Enrollment in 2007	Free & Reduced Lunch 2007	%	Total Enrollment in 2011	Free & Reduced Lunch 2011	%	% change
USD 313 Buhler	2312	726	31%	2272	895	39%	8%
USD 310 Fairfield	338	207	61%	282	188	67%	6%
USD 312 Haven	1036	386	37%	1004	443	44%	7%
USD 308 Hutchinson	4747	2742	58%	5144	3432	67%	9%
USD 309 Nickerson	1221	690	57%	1149	684	60%	3%
USD 311 Pretty Prairie	279	76	27%	278	107	38%	11%

Source: Kansas Department of Education

Research shows that poverty among young children carries consequences far beyond their childhood in everything from educational outcomes and worker productivity to long-term health costs.

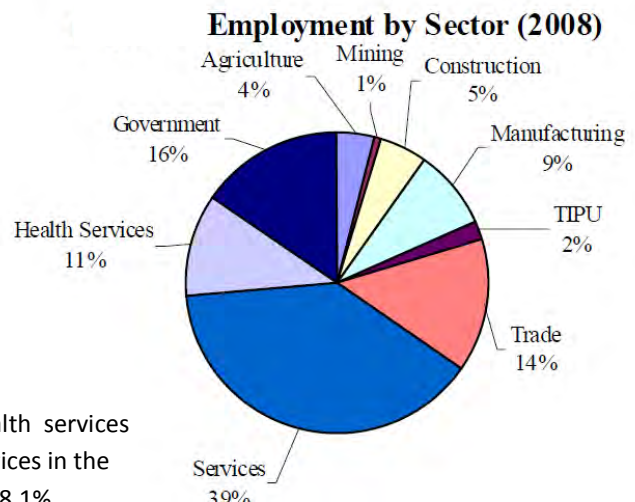
## 1.9 Employment

	Reno	KS
Civilian labor force	62.9%	68.0%
Employed	59.9%	63.9%
Unemployed	3.0%	4.1%
Armed Forces	0.1%	0.7%
Not in labor force	37.0%	31.3%
Percent Unemployed	4.8%	6.0%

Source: U.S. Census Bureau, 2007-2011 American Community Survey

Health sector includes professionals and support staff. Health services employs 11.0% of all job holders in the county. Health services in the state of Kansas employs 8.7% of all job holders, while U.S.=8.1%.

services in Reno County ranks #4 in terms of employment, #3 among payers of wages and #4 in total income. As with most rural areas, the health sector plays an important role in the economy.



## 2.1 Percent Uninsured Residents

	Reno	Saline	Kansas
Estimated percent of persons ages 18-64 who are uninsured	18.6%	17.3%	17.3%
Ratio of population to one primary care physician	1572.9 population per physician	1307.5 population per physician	1750.5 population per physician
Staffed Hospital Bed Ratio	2.2 beds per 1,000 population	4.0 beds per 1,000 population	3.5 beds per 1,000 population

Reno County and Saline County are comparable in population and are served by one non-profit hospital.

Access to health services encompasses four components: coverage, services, timeliness, and workforce.

Health insurance coverage helps patients get into the health care system. Uninsured people are:

- Less likely to receive medical care
- More likely to die early
- More likely to have poor health status

**Primary care** is the backbone of preventive health care, and a strong primary care workforce is essential to the health of our country. Primary care physicians play a key role in providing and coordinating high-quality health care. Adequate access to primary care can improve care coordination and reduce the frequency of avoidable hospitalizations. The Association of American Medical Colleges estimated that the nation would have a shortage of approximately 21,000 primary care physicians in 2015. Without action, experts project a continued primary care shortfall due to the needs of an aging population, and a decline in the number of medical students choosing primary care.

**Staffed Hospital Bed Ratio** is the average complement of beds fully staffed during the year, or those beds that are set-up, staffed, and equipped, and in all respects, ready for use by patients remaining in the hospital overnight.

The exploding demand for healthcare in the U.S. is nothing new. But the growing critical shortage of staffed hospital beds, fueled primarily by the historic growth of an aging population that requires increasing hospitalization, that looms as a possible crisis. In Kansas, 13.2 percent of the population in 2010 was 65 years or older.

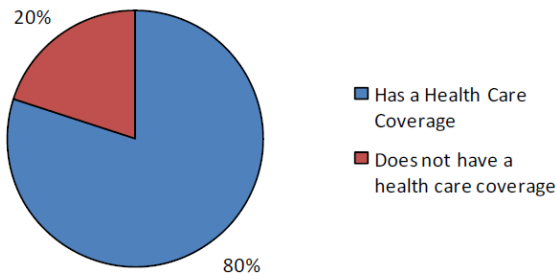
Source: Kansas Health Matters

## 2.2 Health Coverage by Selected Characteristics

### ACCESS TO HEALTH CARE:

Access to health care can be defined as “the timely use of personal health services to achieve the best possible health outcomes”, which includes both use and effectiveness of services such as health information and preventive treatment. Access to quality care is necessary to eliminate health disparities, increase the number of years of life and increase the quality of life.

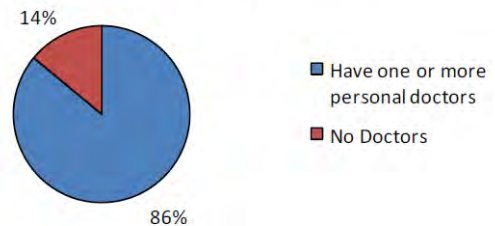
Percentage of Adults 18 Years and Older Who Lack Health Care Coverage



In 2009, 80% of Reno County adults ages 18 years and older had some type of health care coverage including health insurance, prepaid plans such as HMOs, or a governmental plan such as Medicare.

In 2009, 86% of Reno County adults ages 18 years and older had at least one person they thought of as their personal doctor or health care provider.

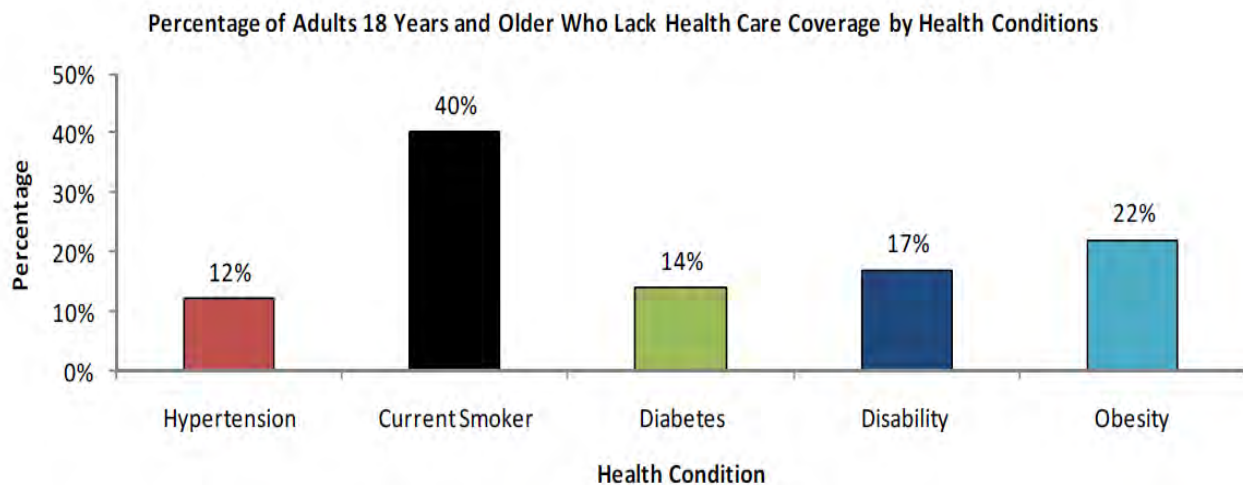
Health Care Provider Status Among Adults 18 Years and Older



### Health Care Access and Health Conditions

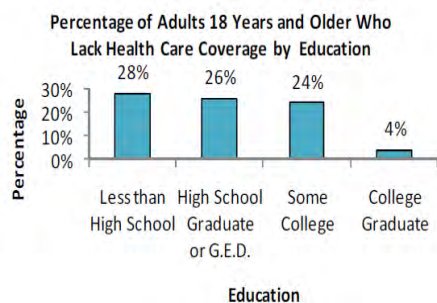
Two in five (40%) adults who currently smoke lack health care coverage.

22% of obese adults lack health care coverage.



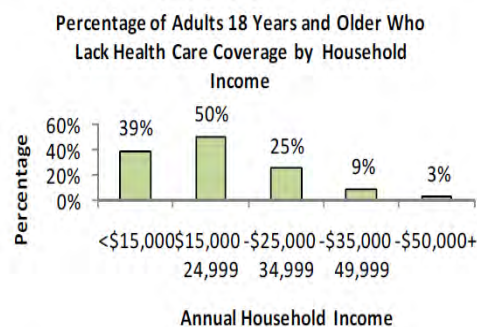
Source: BRFSS

## 2.3 Lack of Health Care Coverage by Education



Among adults ages 18 years and older who completed less than a high school education, 28% lack health care coverage.

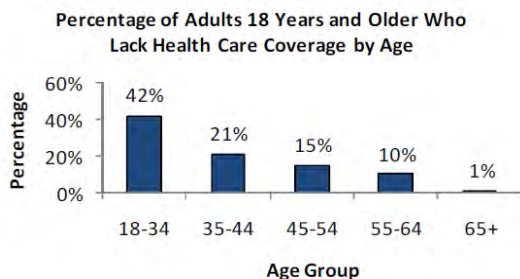
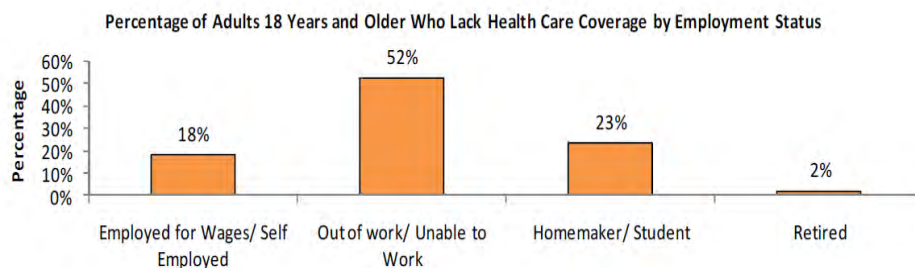
50% of adults with an annual household income between \$15,000 and \$24,999 lack health care coverage.



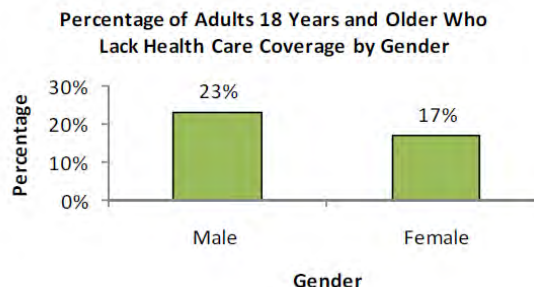
Source: BRFSS

## 2.4 Employment Status

About half (52%) of those who reported being out of work or unable to work lack health care coverage. Almost no (2%) adults who reported being retired lacked health care coverage.



42% of Kansans ages 18-34 years lack health care coverage compared to 1% of Kansans ages 65 years and older who lack health care coverage.



About one in four men (23%) and one in six women (17%) ages 18 years and older lack health care coverage.

Source: BRFSS

# Births

Throughout this section, references are made to Healthy People 2020. Developed with the best scientific knowledge available, Healthy People 2020 is a comprehensive set of disease prevention and health promotion objectives for America. National health objectives were designed to identify the most significant preventable threats to our health and to establish goals to reduce those threats. Healthy People 2020 established these targets to be achieved by the year 2020.

## 3.1 Birth Statistics

Birth Statistics such as premature births, low birth weight, teenage pregnancy, and insufficient prenatal care are all indicators of a newborn's health and subsequent quality of life. However, assuring healthy babies is not just about prenatal care. The health of babies is an important indicator of the health of the community.

None of these indicators exists in a vacuum. Interactive relationships with co-existing factors may compound the likelihood of poor birth outcomes, especially for teens. Examples include family income, access to care through health insurance, adequate prenatal care, high school graduation, oral health, drug and tobacco use, mental health, and obesity.

As described in the section in Access to Care, lack of health insurance influences care-seeking behaviors, which in turn may result in late initiation of prenatal care and less healthy prenatal behavior, all potential negative impacts on birth outcomes. Poor birth outcomes are not only emotionally and financially devastating for families; they are costly for state and federal financing systems. For example, Medicaid finances 40 percent of the four million annual births in the United States, and pays for 50 percent of hospital stays for premature and low-birth-weight infants.

## 3.2 Births by Age

**In the past 10 years, the number of births each year in Reno County has remained relatively stable. In 2011:**

- 82% of births were to mothers age 20-34 and just 10% of all births were to mothers age 19 and under.
- Of the 39,628 births to Kansas residents, just 2 % were to residents of Reno County.

### 10 year facts

- Total births have decreased in the years 2008 -2011.
- The majority of the births (34%) are to women age 25-29, followed by 20-24 (30%) and 30-34 (16%).

### Infant Mortality Rate-Reno County

#### Birth Statistics for Reno County

Mother's Age	10 to 14	15 to 17	18 to 19	20 to 24	25 to 29	30 to 34	35 plus	All Ages
Year	Number	Number	Number	Number	Number	Number	Number	Number
2002	#	26	71	305	220	135	84	842
2003	#	27	70	308	221	121	62	809
2004	#	20	72	302	242	131	67	835
2005	#	17	79	294	239	132	50	814
2006	#	16	66	298	271	160	63	876
2007	#	20	75	295	255	132	65	843
2008	#	23	82	289	256	135	66	851
2009	#	29	77	269	260	148	64	847
2010	#	26	61	234	241	136	63	762
2011	#	16	58	243	258	126	56	759
10 yr total	8	220	711	2837	2463	1356	640	8238

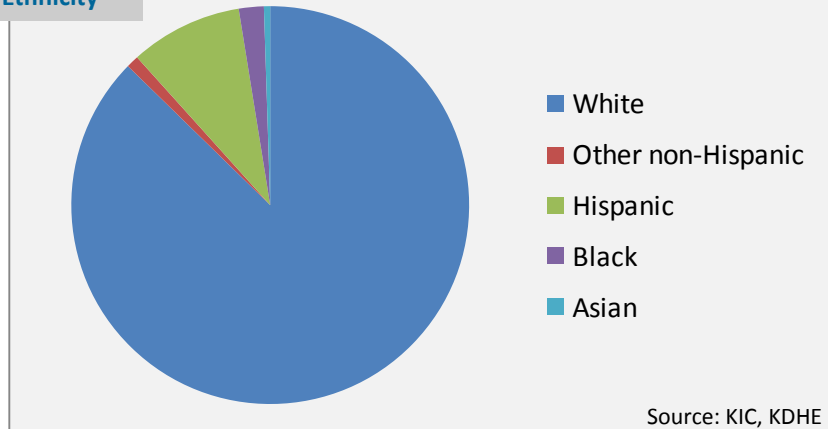
Source: KIC, KDHE

### 3.3 Births by Race/Ethnicity

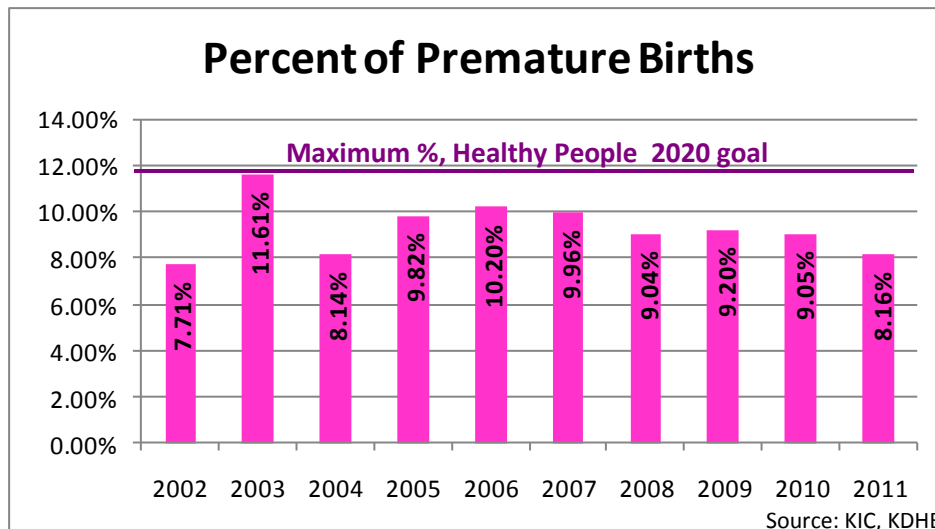
86 percent of all babies born in Reno County were white. Other (non-Hispanic) births made up 17 percent, 9 percent were Hispanic, and Black and Asian made up the remainder of births.

**2011 Births in Reno County by Race/Ethnicity**

White	86%
Other non-Hispanic	1%
Hispanic	9%
Black	2%
Asian	0.5%



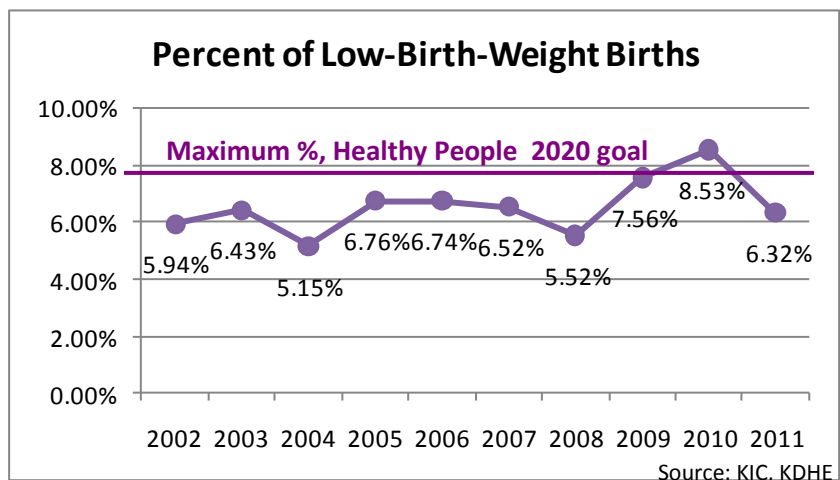
### 3.4 Preterm Births



A preterm birth is a birth before 37 weeks gestation. According to Healthy people 2020, preterm births are the leading cause of neonatal deaths that are not associated with birth defects. The Nation's goal, set by Healthy People 2020, is to reduce the pre-term births to 11.7 percent of all births.

### 3.5 Low Birth Weight Births

Low birth weight (LBW) defined as birth weight less than 2,500 grams (5.5 pounds), remains a major problem across the United States. LBW is the most prevalent and dominant risk factor for infant mortality (infant death prior to the first birthday) and childhood developmental disorders. The Healthy People 2020 goal is to reduce low-birth-weight births to 7.8 percent. Reno County has been under the national goal in 9 of the past 10 years.

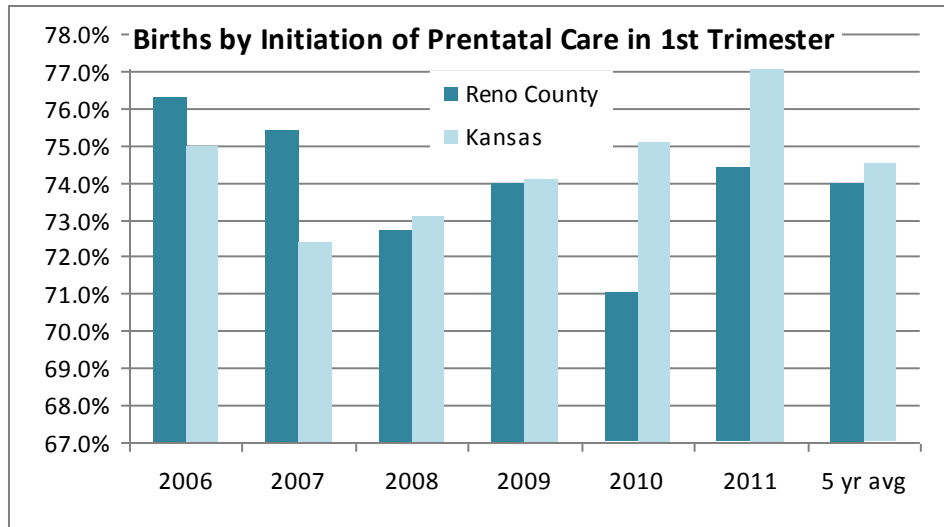


# Births

## 3.6 First Trimester Care

Adequate prenatal care is a critical factor in achieving a healthy pregnancy outcome. Early prenatal care can identify maternal disease and risks for complications of pregnancy, thus improving birth outcomes. The national Healthy People 2020 goal is for the percent of pregnant women who receive late and inadequate prenatal care beginning in the first trimester of pregnancy to be no greater than 22.4 percent. (Therefore, 77.6 percent received adequate and early first trimester care.)

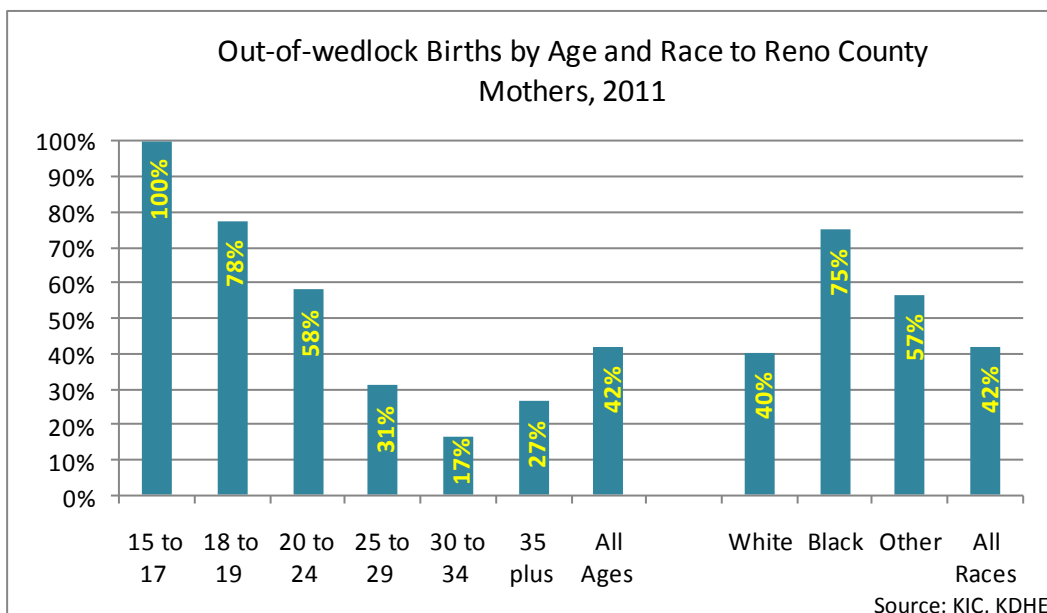
In Kansas, in 2011, 77.3 percent of mothers received prenatal care in their first trimester, while 74.4 percent of moms in Reno County received early and adequate prenatal care. This number has remained stable in the past 5 years, and comparable to Kansas percentages.



Source: KIC, KDHE

## 3.7 Out of Wedlock Births

According to the National Center for Health Statistics, the proportion of births to unmarried women is a key social indicator. Tracking this data reveals that children of unmarried mothers are at higher risk of having adverse birth outcomes such as low birth weight and infant mortality. Children of unmarried mothers are also more likely to live in poverty than children of married mothers. In 2009, 41 percent of all births in the United States were to unmarried women. In 2011, 42% of all births in Reno County were to unmarried women.



Source: KIC, KDHE



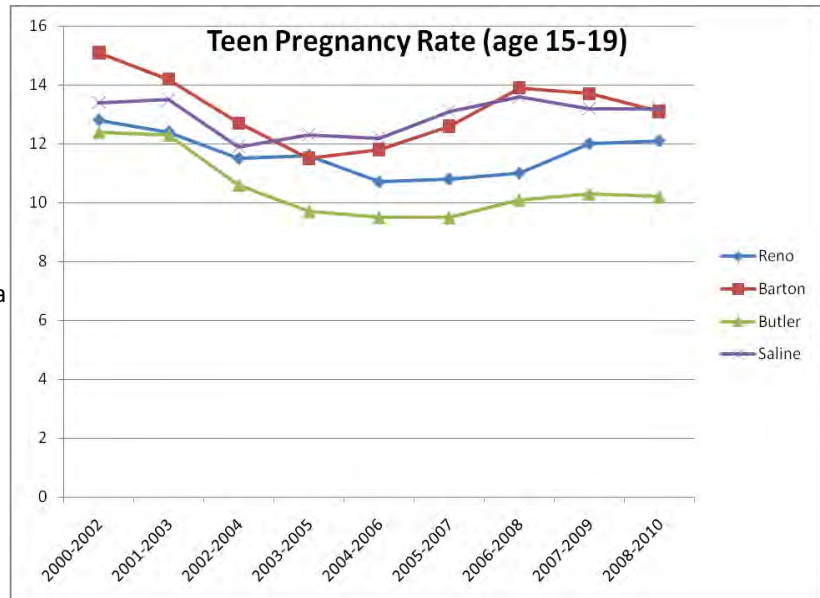
### 3.8 Teenage Pregnancy

#### Kansas:

The rate of teenage pregnancy in the state of Kansas has decreased in the past three years, from 10.3 percent in 2009 to 8.0 percent in 2011.

#### Reno County:

The rate in Reno County has also seen a reduction in the teenage pregnancy rate, falling from 106 births to teens (12.5) in 2009 to 74 reported births to teens (9.7) in 2011. Reno County remains at a higher percentage for teenage pregnancies compared to the State of Kansas.



Source: KIC, KDHE



*A nurse with Teen Moms Healthy Babies Program counsels a client.*



# Injury

Regardless of gender, race or economic status, injuries remain a leading cause of death for Americans of all ages. Additionally, millions of Americans are injured each year and survive. Unintentional accidents, such as falls, broken bones, and motor vehicle accidents vary widely in their impact on people, from temporary discomfort and inconvenience to more serious suffering and disability, chronic pain, lifestyle modifications, and even death.

This section describes various types of injuries, such as fractures, burns, and poisoning obtained through hospital discharge data from Kansas Information of Communities (KIC) and motor vehicle accident data obtained from the Kansas Department of Transportation (KDOT).

Although this data does not separate intentional and unintentional injury, unintentional injuries commonly include burns, falls, poisonings, and road traffic injuries; intentional injury commonly includes domestic violence and poisonings from drug or alcohol overdose.

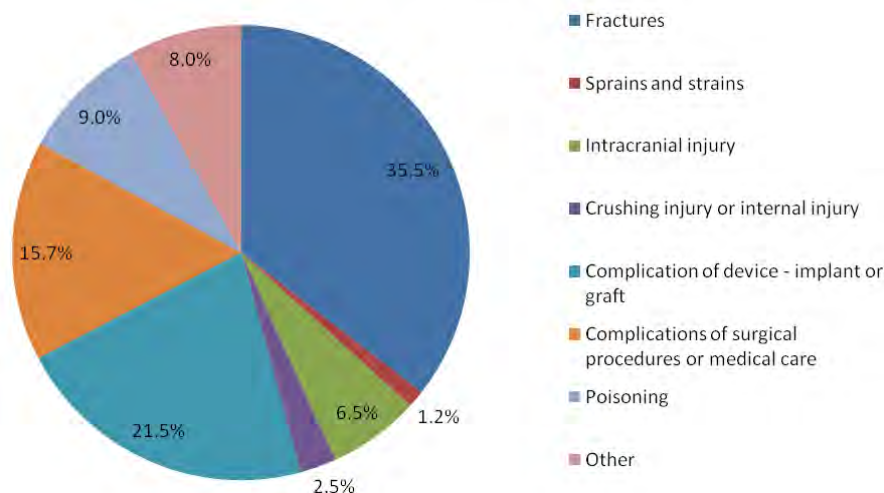
## Leading Causes of Unintentional Injury Death – 2010

Motor Vehicle	33,687
Poisoning	33,041
Fall	26,009
Firearm	11,078
Suffocation	6,165

(National Center for Health Statistics (NCHS), National Vital Statistics System) CDC.

## 4.1 Injury Statistics from Hospital Discharge Data by Diagnosis

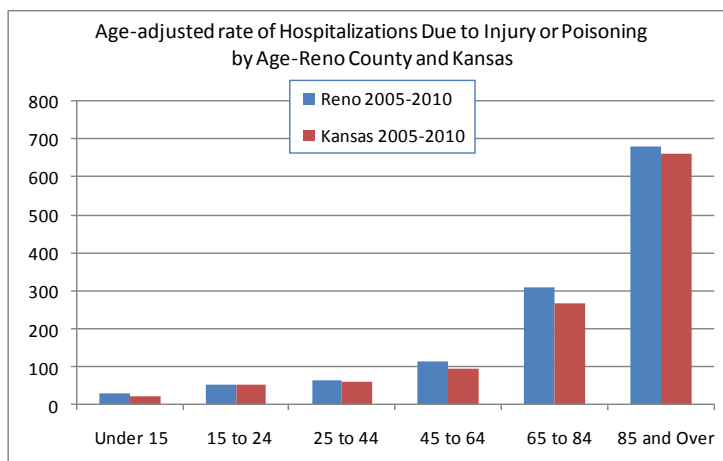
### Hospital inpatient discharge data



## 4.2 Injury Statistics

One way to look at injury is by hospitalization diagnosis. It is important to note that these are in-patient, not emergency department visits. Typically, no notable change is seen when examining these statistics year-to-year: however, when unusually high or low numbers are reported officials must ask why.

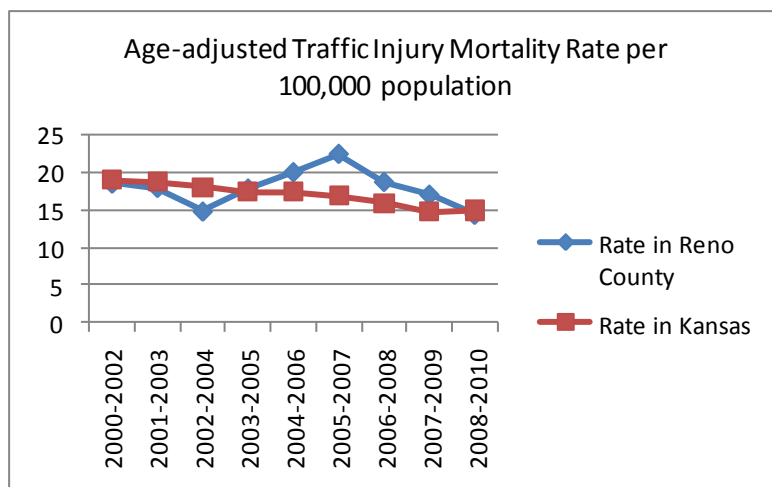
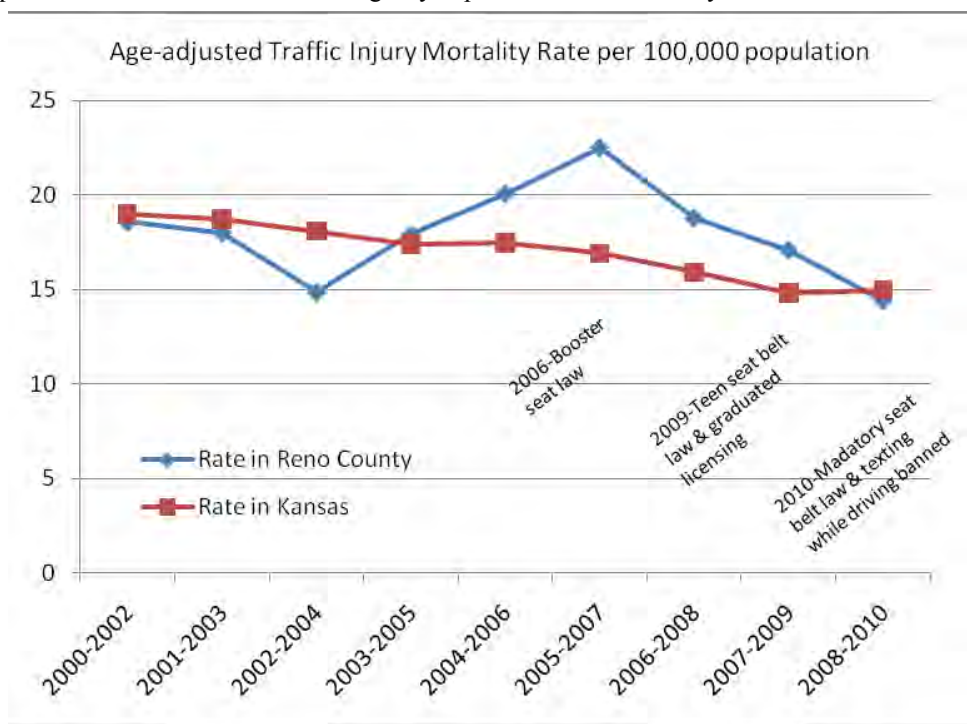
In 2010 there were 706 hospitalizations due to injury or poisoning: this is less than the five year average of 778.



Source: KIC, KDHE

### 4.3 Motor Vehicle Accidents, Injuries, and Deaths

Motor vehicle-related injuries kill more children and young adults than any other single cause in the United States. More than 41,000 people in the United States die in motor vehicle crashes each year, and crash injuries result in about 500,000 hospitalizations and four million emergency department visits annually. Increased use of safety belts and reductions in driving while impaired are two of the most effective means to reduce the risk of death and serious injury of occupants in motor vehicle crashes.



Total number of accidents in Reno County in 2008 was 1,546. 468 of the accidents in Reno County were identified to be caused from Deer (285 or 18.4%), Speed-related (111 or 7.2%), and 72 or 4.7% were alcohol-related. (KDOT – Kansas Traffic Accidents Facts).

The number of accidents attributed to cell phone use has nearly doubled over the last six years. According to statistics provided by the Kansas Department of Transportation, in 2010, 176 people were injured and six deaths were attributed to

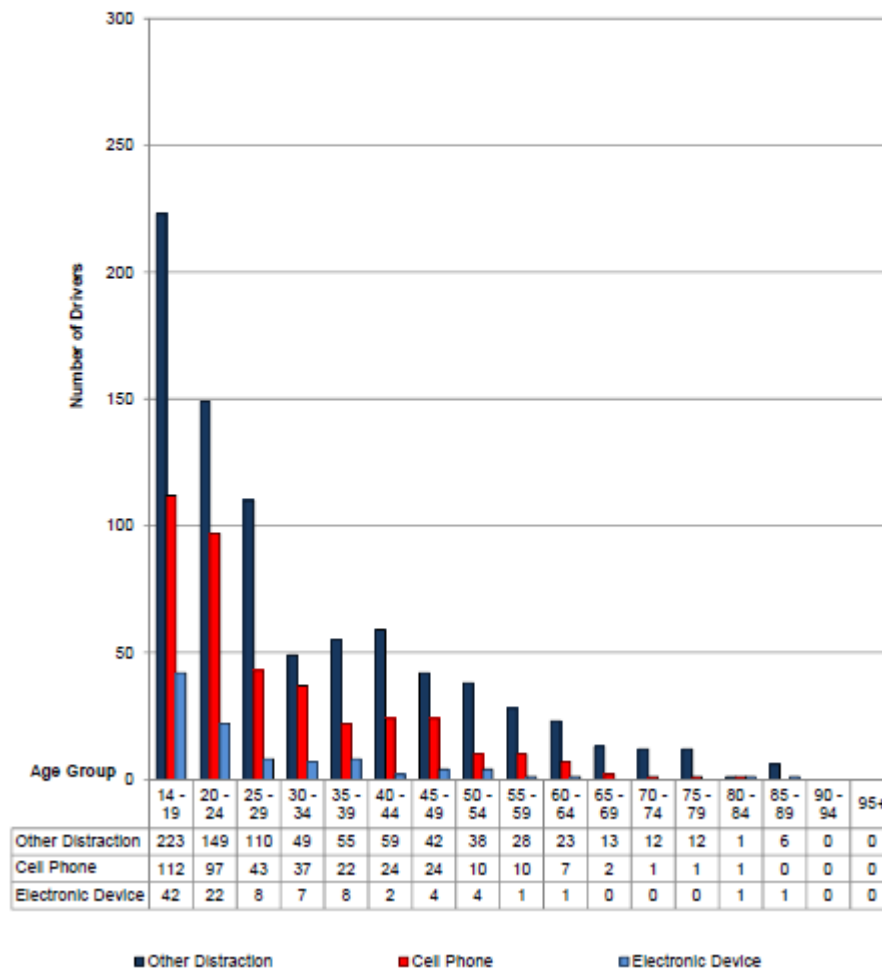
cell phone use while driving in Kansas. In 2010, other electronic devices, including DVD players, stereos, GPS units, etc contributed to 46 injuries and zero deaths. Other distractions in or around the vehicle, including applying makeup, reading, children, food etc contributed to 347 injuries and six deaths. There is a strong correlation between age of driver and distracted driving accidents: 53 percent of all cell phone related accidents were from drivers age 24 and younger. Without specific data for Reno County, driver distraction is a contributing cause for a large number of vehicular accidents.

Source: Kansas Health Matters

## Automobile Accidents Attributed To Distracted Drivers

2008 Kansas Traffic Accident Facts

### Distracted Drivers by Age Group



Source: KDOT

# Mortality

## 5.1 Mortality Rates

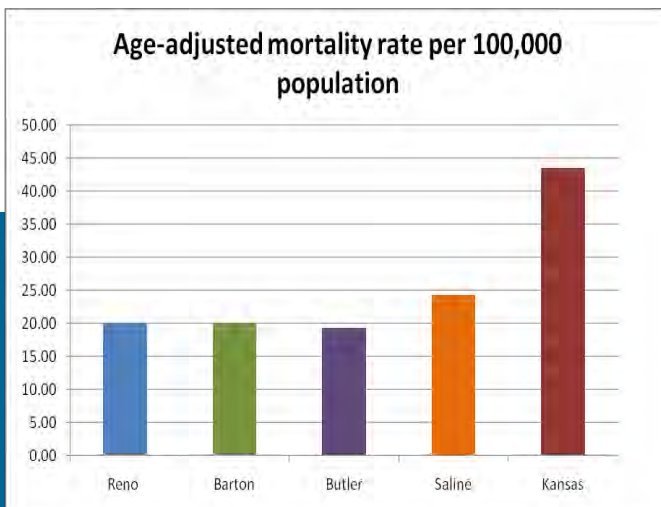
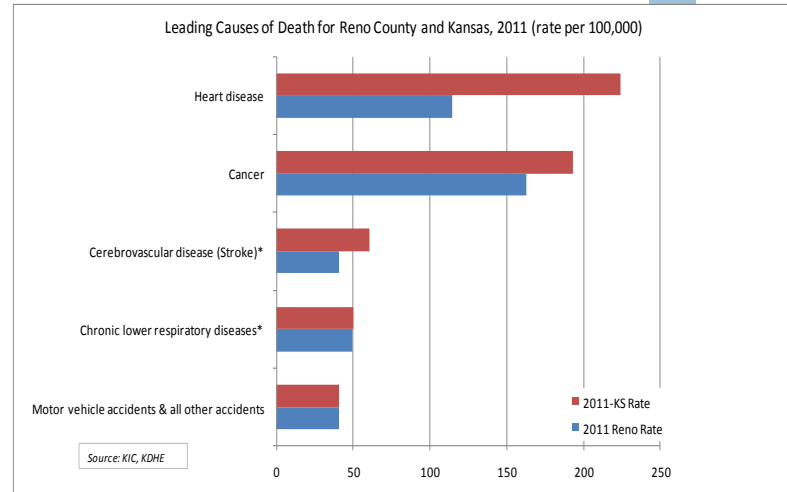
### Age-adjusted mortality Rate per 100,000 population

#### What is this Indicator?

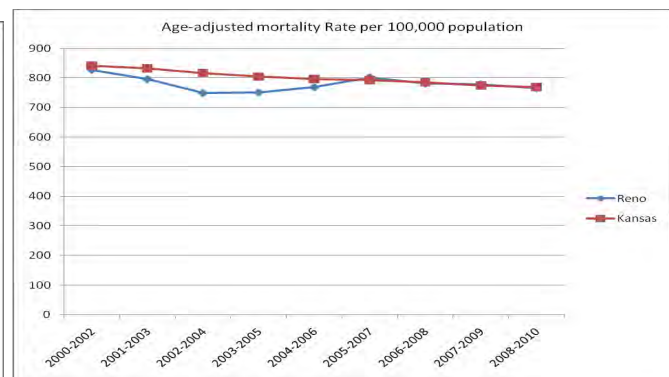
This indicator shows the total age-adjusted death rate per 100,000 population due to all causes.

#### Why this is important:

Mortality or death rates are often used as measures of health status for a population. Many factors affect the risk of death, including age, race, gender, occupation, education, and income. By far the strongest of these factors affecting the risk of death is age. Populations often differ in age composition. A "young" population has a higher proportion of persons in the younger age groups, while an "old" population has a higher proportion in the older age groups. Therefore, it is often important to control for differences among the age distributions of populations when making comparisons among death rates to assess the relative risk of death. Age-adjusted mortality rates are valuable when comparing two different geographic areas, causes, or time periods.

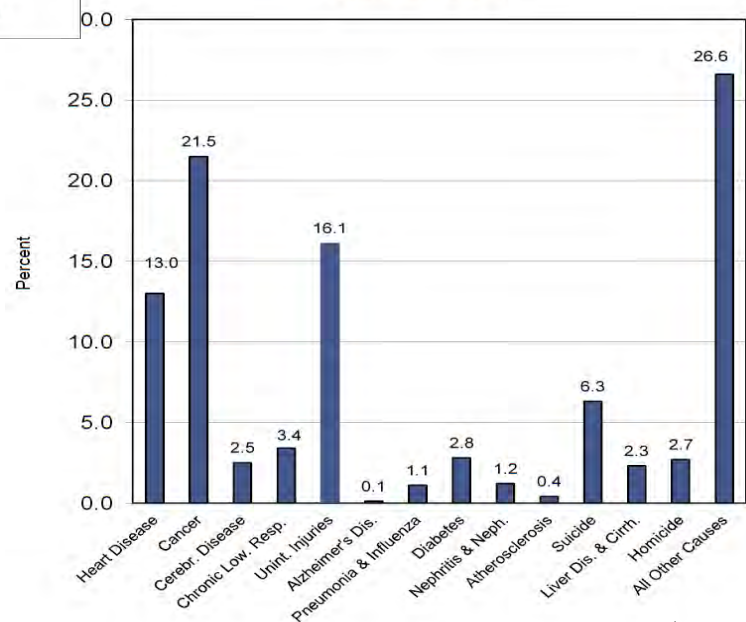


Priority Health Indicators (Kansas Health Matters)



Source: Kansas Health Matters

### By Selected Causes of Death Kansas, 2011



Source: KDHE, Vital Statistics

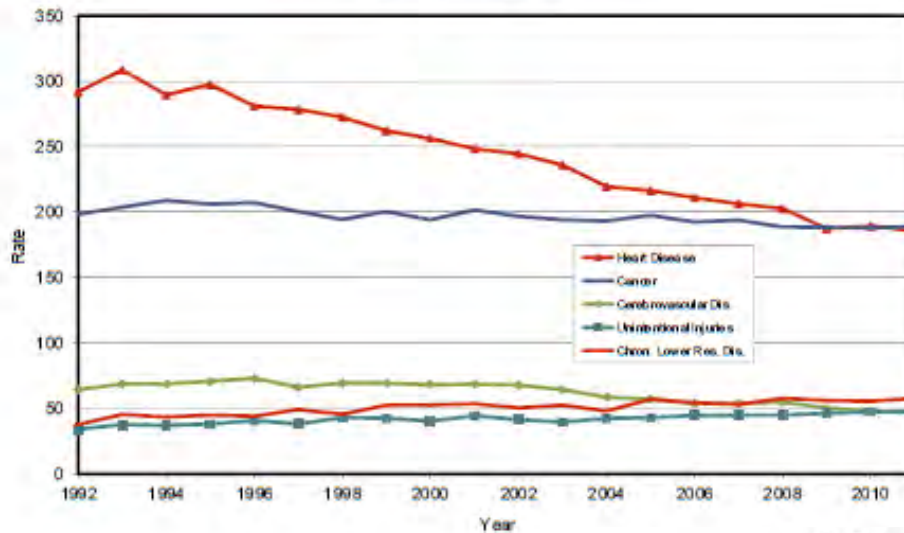
## 5.2 Top 5 Causes of Death Kansas, 2011

### Top 5 causes of death Kansas, 2011

- Cancers
- Heart disease
- Chronic lower respiratory diseases
- Unintentional injuries
- Cerebral vascular disease

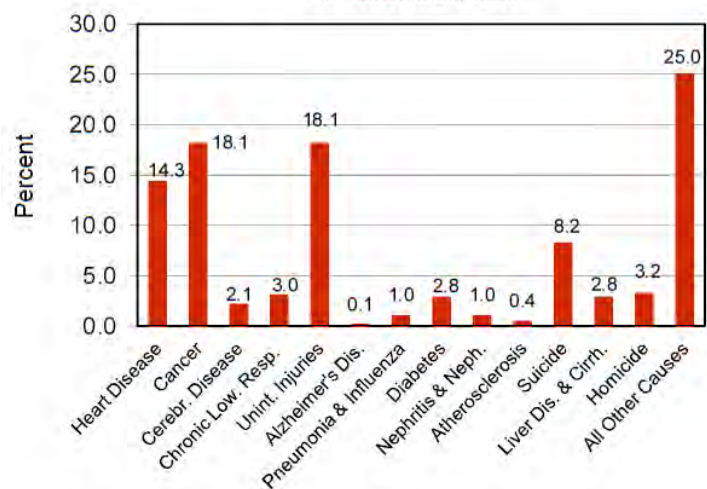
### 5.3 Death Rates By Selected Leading Causes Of Death

**Death Rates for Selected  
Leading Causes of Death**  
Kansas, 1992-2011

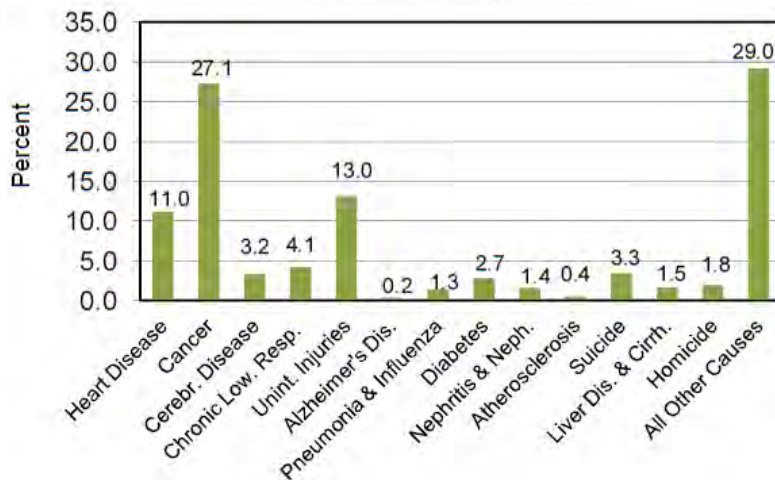


Rate per 100,000 Population

**By Selected Causes of Death**  
Kansas Males, 2011



**By Selected Causes of Death**  
Kansas Females, 2011



Approximately half of cardiac and stroke deaths occur within one hour of onset of symptoms and before the patient even reaches the hospital. Therefore, timely access to the hospital and recognition of the symptoms of heart attack and stroke are imperative in reducing death due to these diseases. In 2010, cardiovascular disease, including heart disease and stroke, was the leading cause of death in the United States and in Kansas. *Source: Kansas Health Statistic Report, November, 2012.*



# Mortality

## 5.4 Suicide

### What is this Indicator?

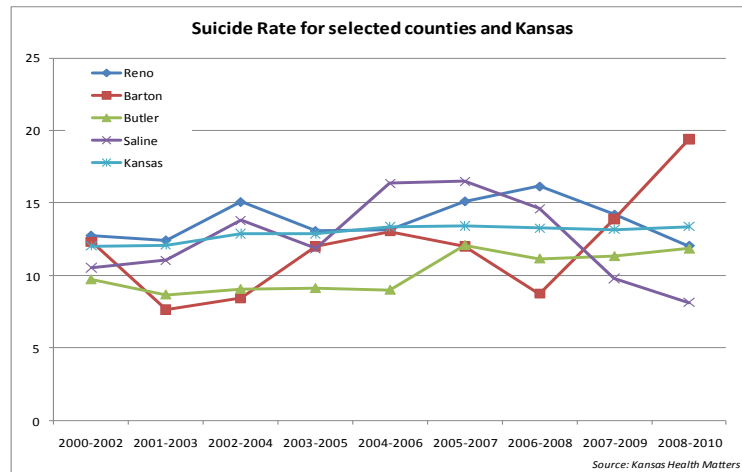
This indicator shows the total age-adjusted death rate per 100,000 populations due to suicide.

### Why this is important:

Suicide results in the tragic loss of human life as well as agonizing grief, fear, and confusion in families and communities. Its impact is not limited to an individual person or family, but extends across generations and throughout communities. The breadth of the problem and the complexity of its risk factors make suicide prevention well suited to a community-based public health approach that engages multiple systems and reaches all citizens. Depression and suicide are significant public health issues. Depression is one of the most common mental disorders experienced by elders, but fortunately is treatable.

Men of all ages and race/ethnicities are approximately four times more likely to die by suicide than females.

Suicide – MMWR

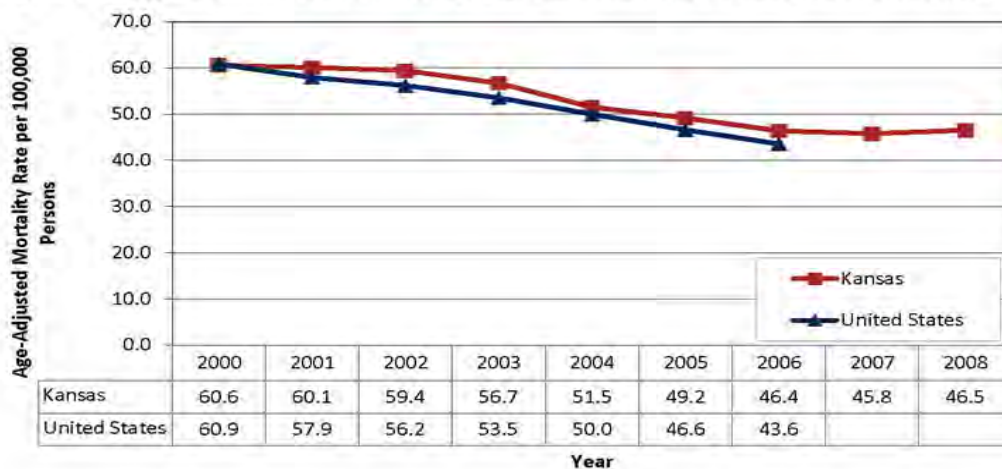


## 5.5 Stroke Mortality

### Stroke Mortality 2000—2008

Consistent with trends in cardiovascular disease, stroke mortality rates have decreased through the period from 2000-2008 (Figure 2-1). The trend in stroke mortality for Kansas is parallel to that in the United States. However, during the period from 2006-2008, the mortality rate in Kansas appears to have stabilized. Data from the United States for 2007-2008 were not yet available at the time this document was created to assess whether or not rates have stabilized nationally.

**Figure 2-1. Age-adjusted stroke mortality rate, Kansas and the United States 2000-2008.**



Source: 2000-2008 Kansas Vital Statistics, Center for Health and Environmental Statistics, KDHE. United States Compressed Mortality Data, CDC Wonder, Centers for Disease Control and Prevention. <http://wonder.cdc.gov/>  
 Rates were age-adjusted to the U.S. 2000 standard population using the direct method. See Technical Appendix for details on how rates were calculated. Stroke was defined as ICD-10 codes I60-I69.

## 5.6 Infant Deaths

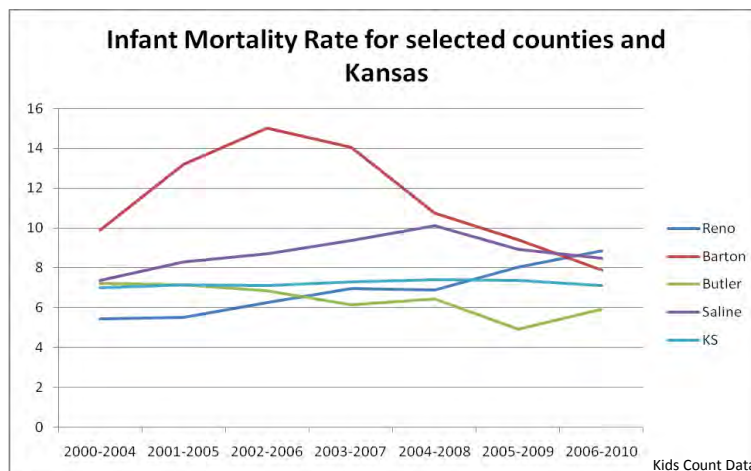
### Infant Mortality Rate for selected counties and Kansas

#### What is this Indicator?

This indicator shows the rate of infant deaths (prior to one year of age) per 1,000 live births.

#### Why this is important:

One of the basic indicators of the health of a community or state is infant mortality, the death of an infant before one year of age. The calculated infant mortality rate (IMR), while not a true measure of population health, serves as one proxy indicator of population health since it reflects the apparent association between the causes of infant mortality and other factors that are likely to influence the health status of the whole population such as economic development, general living conditions, social wellbeing where basic needs are met, rates of illness such as diabetes, and hypertension, and quality of the environment.



The number of infant deaths to Kansas residents dropped from 290 in 2009 to 253 in 2010. The number of Kansas resident births in 2010 was 40,439. This resulted in an infant mortality rate of 6.28 per 1,000 live births compared to 7.01 in 2009. Although the one year decline was not statistically significant at the 95% confidence level, the number of infant deaths is the lowest in Kansas since recordkeeping began in 1912. The infant mortality rate is the lowest recorded. Over the last 22 years Kansas has experienced a statistically significant declining trend in the annual infant mortality rate (with a lot of ups and downs in between).

The 2010 infant mortality rate represents a 28.4 percent decrease from the 1989 IMR of 8.77. That change is statistically significant at the 95% confidence level.

The Healthy People 2020 target is 6.0 infant deaths per 1,000 live births. The leading causes of death among infants are birth defects, pre-term delivery, low birth weight, Sudden Infant Death Syndrome (SIDS), and maternal complications during pregnancy.

Source: Kansas Health Matters

## 5.7 Adults Diagnosed With Diabetes

### What is this Indicator?

This indicator shows the percentage of adults that have ever been diagnosed with diabetes. Women who were diagnosed with diabetes only during the course of their pregnancy were not included in this count.

### Why this is important:

In 2007, diabetes was the seventh leading cause of death in the United States. In 2010, an estimated 25.8 million people or 8.3% of the population had diabetes. Diabetes disproportionately affects minority populations and the elderly and its incidence is likely to increase as minority populations grow and the U.S. population becomes older. Diabetes can have a harmful effect on most of the organ systems in the human body; it is a frequent cause of end-stage renal disease, non-traumatic lower-extremity amputation, and a leading cause of blindness among working age adults. Persons with diabetes are also at increased risk for ischemic heart disease, neuropathy, and stroke. In economic terms, the direct medical expenditure attributable to diabetes in 2007 was estimated to be \$116 billion dollars.

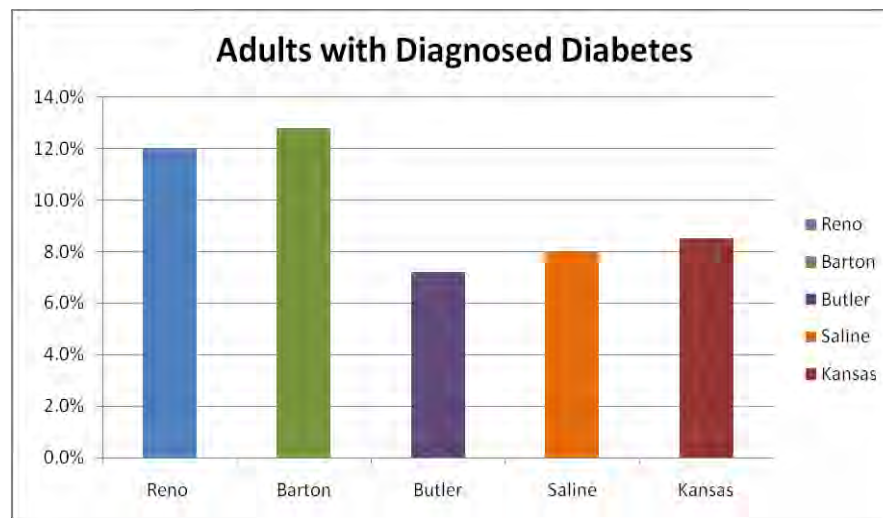
### Age- adjusted death rate per 100,000 population due to Diabetes.

### What is this Indicator?

This indicator shows the total age-adjusted death rate per 100,000 population due to Diabetes.

### Why this is important:

In 2007, diabetes was the seventh leading cause of death in the United States.



**Source:** Kansas Department of Health and Environment

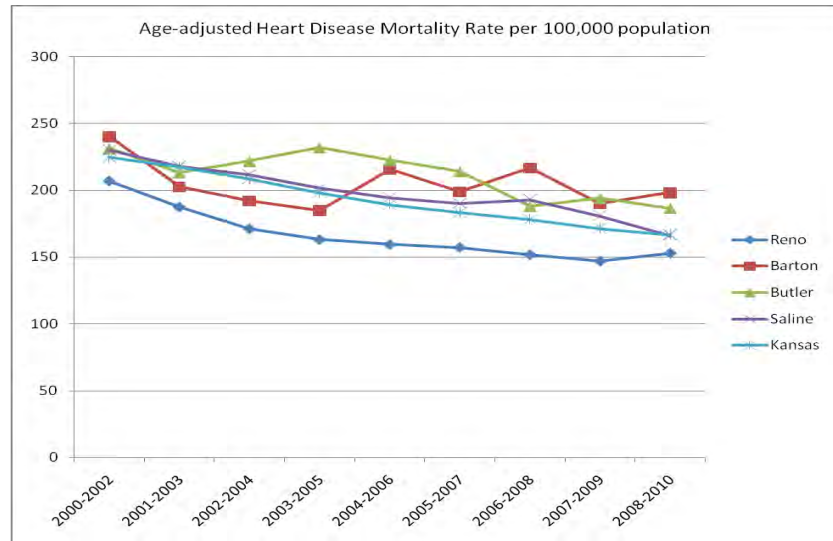
**URL of Source:** <http://www.kdheks.gov/>

**URL of Data:** <http://kic.kdhe.state.ks.us/kic/index.html>

**Maintained By:** Kansas Department of Health and Environment

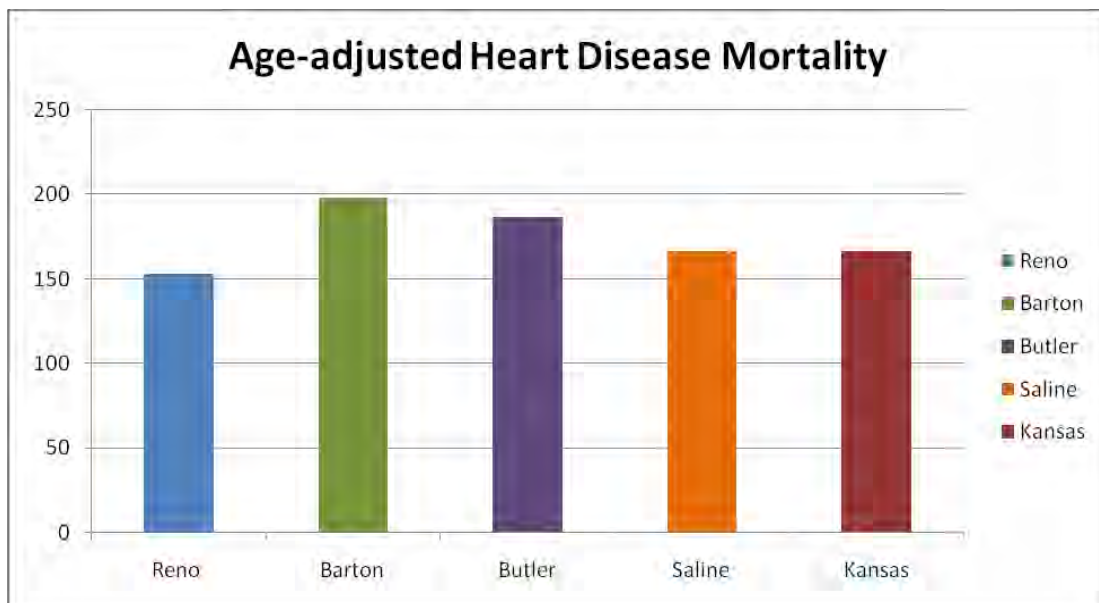


## 5.8 Heart Disease Mortality



Coronary heart disease – Men are more likely to die from coronary heart disease. Black men and women are much more likely to die of heart disease and stroke than their white counterparts.

MMWR



Age-adjusted heart disease mortality rate

### What is this Indicator?

This indicator shows the total age-adjusted death rate per 100,000 population due to heart disease.

### Why this is important:

Heart disease is the number one cause of death in the U.S. and Hawaii. Physical inactivity, overweight, and obesity are considered cardiovascular risk determinants. Regular physical activity and a diet low in unhealthy fats and high in fruits and vegetables may help reduce the risk for cardiovascular disease. In 2009, the U.S. spent an estimated \$68.9 billion on costs associated with stroke, including health care, medicine, and lost productivity.

Source: Kansas Department of Health and Environment

URL of Source: <http://www.kdheks.gov/>

URL of Data: <http://kic.kdhe.state.ks.us/kic/index.html>

Maintained By: Kansas Department of Health and Environment

# Morbidity

**Morbidity** is a measure of disease incidence or prevalence in a given population, location or other grouping of interest.

**Prevalence**—the number or rate of cases at a specific point in time and the incidence number or rate of new cases occurring during a specific period.

**Epidemiology** is the study of the distribution of causes and antecedents of health and disease in humans, with the goal of determining the cause of disease.

Reno County ranks 38<sup>th</sup> for health outcomes and 58<sup>th</sup> for health factors.

## 6.1 County Health Rankings

County Health Rankings & Roadmaps	Reno County	Error Margin	National Benchmark*	Kansas	Rank (of 100)
<b>Health Outcomes</b>					<b>38</b>
Mortality					38
Premature death	7,656	6,871-8,441	5,466	7,012	
Morbidity					25
Poor or fair health	13%	11-16%	10%	13%	
Poor physical health days	3.1	2.7-3.5	2.6	3	
Poor mental health days	2.5	2.1-2.9	2.3	2.8	
Low birth weight	6.10%	5.5-6.7%	6.00%	7.20%	
<b>Health Factors</b>					<b>58</b>
<b>Health Behaviors</b>					<b>59</b>
Adult smoking	21%	18-23%	14%	18%	
Adult obesity	33%	30-36%	25%	30%	
Physical inactivity	23%	21-26%	21%	24%	
Excessive drinking	12%	10-15%	8%	15%	
Motor vehicle crash death rate	20	15-24	12	18	
Sexually transmitted infections	322		84	375	
Teen birth rate	47	43-50	22	43	
<b>Clinical Care</b>					<b>18</b>
Uninsured	16%	14-17%	11%	15%	
Primary care physicians	1,345:1		631:01:00	1,244:1	
Preventable hospital stays	67	62-72	49	70	
Diabetic screening	90%	84-96%	89%	85%	
Mammography screening	72%	65-78%	74%	67%	
<b>Social &amp; Economic Factors</b>					<b>72</b>
High school graduation	91%			80%	
Some college	57%	53-61%	68%	66%	
Unemployment	6.10%		5.40%	7.00%	
Children in poverty	21%	16-26%	13%	18%	
Inadequate social support	14%	12-17%	14%	16%	
Children in single-parent households	35%	30-39%	20%	28%	
Violent crime rate	471		73	421	
<b>Physical Environment</b>					<b>47</b>
Air pollution-particulate matter days	0		0	0	
Air pollution-ozone days	0		0	2	
Access to recreational facilities	6		16	10	
Limited access to healthy foods	3%		0%	7%	
Fast food restaurants	57%		25%	48%	

\* 90th percentile, i.e., only 10% are better

Note: Blank values reflect unreliable or missing data

## 6.2 Measures of Morbidity

Measures of morbidity include factors such as health behaviors, clinical care, social-economic factors and the physical environment.

Reno ranks 25<sup>th</sup> in the state of Kansas. Health behaviors like smoking, drinking, STI, obesity, physical inactivity are higher than national benchmarks and higher than Kansas rates except for two, STI and teen birth rate.

Clinical care factors places Reno County at 18<sup>th</sup> with diabetic and mammography screening, primary care physicians, and preventable hospital stays.

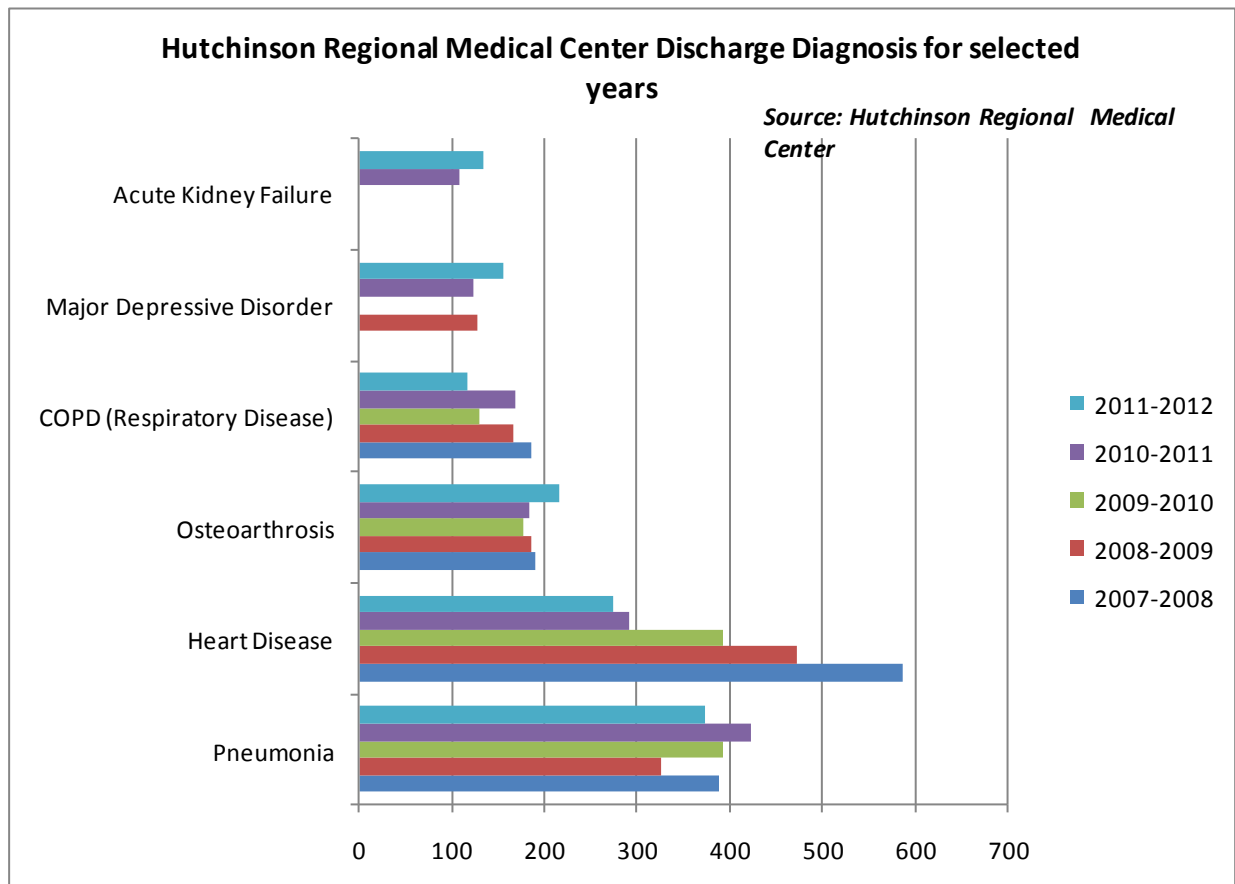
### Percentage of Adults with Fair or Poor Self-Perceived Health Status

- Reno County 14%
- Kansas 13%
- National 10%

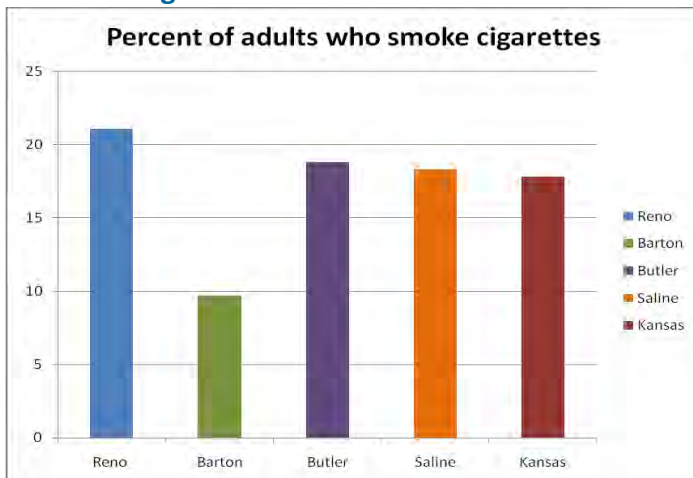
What is this indicator?

This indicator shows the percentage of adults 18 years and older answering poor or fair to the question: “how is your general health?”

## 6.3 Top Discharge Diagnoses of Hutchinson Regional Medical Center



## 6.4 Smoking



Tobacco use is the leading cause of preventable illness and death in the United States. Smoking rates decline significantly with increasing income and educational attainment.

MMWR

### Smoking rate

#### What is this Indicator?

This indicator shows the percentage of adults 18 years and older who currently smoke cigarettes.

#### Why this is important:

Tobacco use is one of the most preventable causes of illness and death in America today. Tobacco use causes premature death to almost half a million Americans each

year, and it contributes to profound disability and pain in many others. Approximately one-third of all tobacco users in this country will die prematurely because of their dependence on tobacco. Areas with a high smoking prevalence will also have greater exposure to secondhand smoke for non-smokers, which can cause or exacerbate a wide range of adverse health effects, including cancer, heart disease, respiratory infections, and asthma. The Healthy People 2020 national health target is to reduce the proportion of adults aged 18 years and older who smoke cigarettes to 12%.

Source: Kansas Department of Health and Environment

URL of Source: <http://www.kdheks.gov/>

URL of Data: <http://www.kdheks.gov/brfss/Expansion/index.html>

## 6.5 Cholesterol

### What is this Indicator?

This indicator shows the percentage of adults who have had their blood cholesterol checked and have been told that it was high.

### Why this is important:

High blood cholesterol is one of the major risk factors for heart disease. Studies show that the higher your blood cholesterol level, the greater your risk for developing heart disease or having a heart attack. Heart disease is the number one killer of men and women in the United States.

Every year about 785,000 Americans

have a first heart attack. Another 470,000 who have already had one or more heart attacks have another attack.

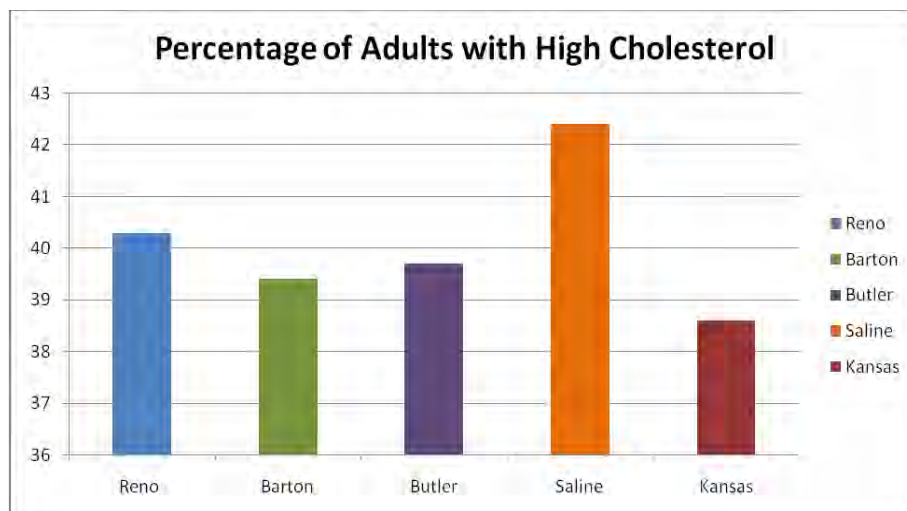
In 2006, over 630,000 Americans died from heart disease. High blood cholesterol does not cause symptoms, so it is important to find out what your cholesterol numbers are. Lowering cholesterol levels lessens the risk for developing heart disease and reduces the chance of having a heart attack. Lowering high cholesterol levels is important for people of all ages, both men and women. The Healthy People 2020 national health target is to reduce the proportion of adults aged 20 years and older with high total blood cholesterol levels to 13.5%.

Source: Kansas Department of Health and Environment

URL of Source: <http://www.kdheks.gov/>

URL of Data: <http://www.kdheks.gov/brfss/Expansion/index.html>

Maintained By: Kansas Department of Health and Environment



Source: KIC, KDHE

## 6.6 Hypertension

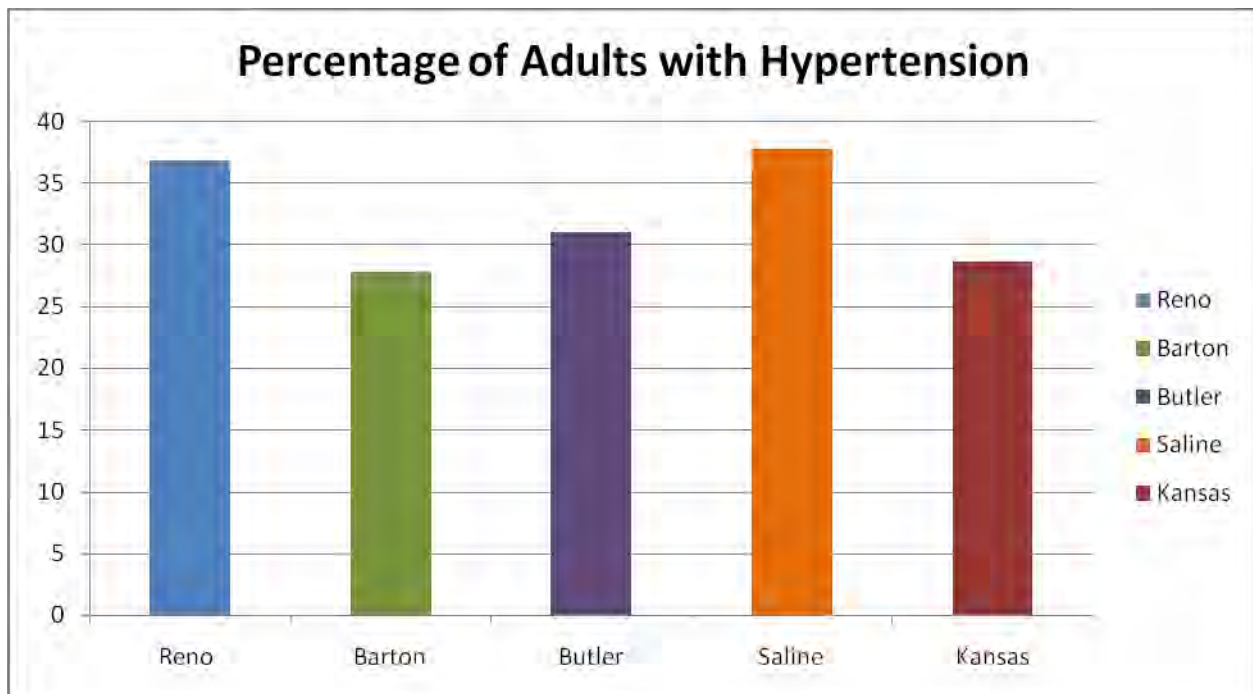
### What is this Indicator?

This indicator shows the percentage of adults who have been told they have high blood pressure. Normal blood pressure should be less than 120/80 mm Hg for an adult. Blood pressure above this level (140/90 mm Hg or higher) is considered high (hypertension).

### Why this is important:

High blood pressure is the number one modifiable risk factor for stroke. In addition to stroke, high blood pressure also contributes to heart attacks, heart failure, kidney failure, and atherosclerosis. The higher your blood pressure, the greater your risk of heart attack, heart failure, stroke, and kidney disease. In the United States, one in three adults has high blood pressure, and nearly one-third of these people are not aware that they have it. Because there are no symptoms associated with high blood pressure, it is often called the "silent killer." The only way to tell if you have high blood pressure is to have your blood pressure checked. High blood pressure can occur in people of any age or sex; however, it is more common among those over age 35. It is particularly prevalent in African Americans, older adults, obese people, heavy drinkers, and women taking birth control pills. Blood pressure can be controlled through lifestyle changes including eating a heart-healthy diet, limiting alcohol, avoiding tobacco, controlling your weight, and staying physically active.

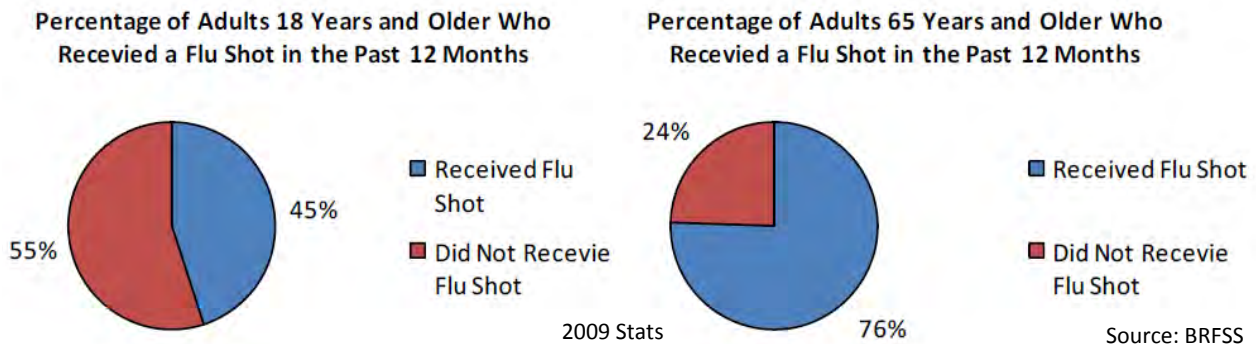
The Healthy People 2020 national health target is to reduce the proportion of adults aged 18 years and older with high blood pressure to 26.9%.



Source: Kansas Health Matters

## 7.1 Vaccinations

Vaccines are not just for children and though most people received vaccines as infants and children, there are other vaccines that are important to get as adults to continue to protect from illness. Some vaccines decrease in effectiveness over time and adults may need boosters to be fully protected. As we age our immune systems weaken and we can become more susceptible to deadly infections, such as pneumonia or the flu. Vaccines can help keep adults healthy long into old age.



Influenza is a contagious disease caused by the influenza virus. It can lead to pneumonia and can be dangerous for people with heart or breathing conditions. Infection with influenza can cause high fever, diarrhea, and seizures in children. It is estimated that 226,000 people are hospitalized each year due to influenza and 36,000 die - mostly the elderly. The seasonal influenza vaccine can prevent serious illness and death. The Centers for Disease Control and Prevention (CDC) recommends annual vaccinations to prevent the spread of influenza.

### Preventable hospitalizations in Kansas 2005-2010

Certain diseases and conditions could be addressed through effective ambulatory care delivery thereby reducing the need for expensive hospital-based care. AHRQ data was used to identify these key priorities—low birth weight infant care, infectious conditions including bacterial pneumonia, urinary tract infections, and perforated appendix. Although the rates decreased in Kansas, bacterial pneumonia has continued to be above the national rate. Preventable hospitalizations are important factors in public health because hospitalizations are the most serious and expensive aspects of health care treatment.

#### ER Visits - Total

FY2007	FY2008	FY2009	FY2010	FY2011	Total FY2007 through FY2011
21,180	23,370	23,214	23,179	23,950	114,893

#### ER Visits - Admitted as Inpatient

FY2007	FY2008	FY2009	FY2010	FY2011	Total FY2007 through FY2011
3,829	4,101	3,337	2,939	2,933	17,139

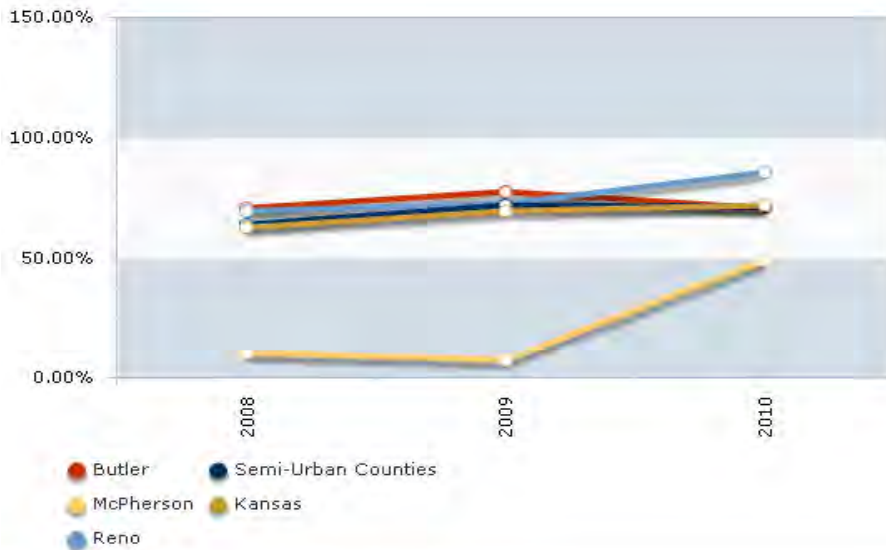
#### Charity Care

<u>FY2007</u>	<u>FY2008</u>	<u>FY2009</u>	<u>FY2010</u>	<u>FY2011</u>
\$2,835,065	\$2,570,329	\$2,151,598	\$1,310,511	\$2,053,272

These amounts are from the Hutchinson Regional Medical Center's internal financial statements and are deductions from revenue for charity Care.



## 7.2 Childhood Immunizations



### Immunizations (Percent) – 2008 to 2010

Kansas Action for Children

KIDS COUNT Data Center, [www.kidscount.org/datacenter](http://www.kidscount.org/datacenter)

A Project of the Annie E. Casey Foundation

The percentage of kindergartners who received all recommended immunizations by age two years. These included the 4:3:1:3 (DTP, Poliovirus, MMR, Hepatitis B, and Haemophilus Influenza B). Data are from the Kansas Department of Health and Environment and are based on a retrospective survey of immunization certificates conducted each fall at the time of enrollment in kindergarten. The current rate is for 2010.

### Percentage of infants fully immunized at 24 months

#### What is this Indicator?

This indicator shows the percent of infants who were immunized with the 4 DTaP, 3 Polio, 1 MMR, 3 Haemophilus influenza type b,, and 3 Hepatitis B vaccines (the 4:3:1:3:3 series) by 24 months of age.

#### Why this is important:

Vaccine coverage is of great public health importance. By having greater vaccine coverage, there is an increase in herd immunity, which leads to lower disease incidence and an ability to limit the size of disease outbreaks.

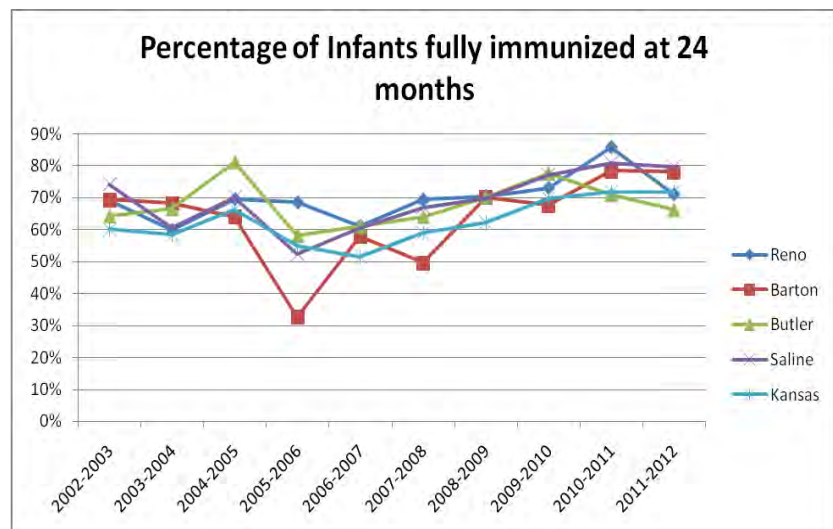
In 2006, a widespread outbreak of mumps occurred in Kansas and across the United States. Prior to the outbreak, the incidence of mumps was at a historical low, and even with the outbreak, the mumps disease rates were still lower than pre-vaccination era. Due to high vaccination coverage, tens or hundreds of thousands of cases were possibly prevented. However, due to unvaccinated and under-vaccinated individuals, the United States has seen a rise in diseases that were previously present at low levels, specifically measles and pertussis.

Source: Kansas Department of Health and Environment

URL of Source: <http://www.kdheks.gov/>

URL of Data: [http://www.kdheks.gov/immunize/retro\\_survey.html](http://www.kdheks.gov/immunize/retro_survey.html)

Maintained By: Kansas Department of Health and Environment

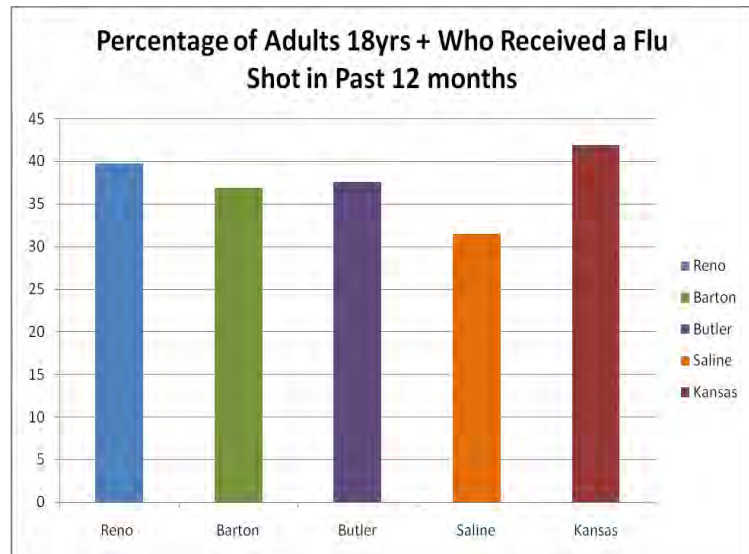


In 2005, influenza and pneumonia were the 8<sup>th</sup> leading cause of death in the United States and in 2011 remain 8<sup>th</sup> in Kansas. Most of these deaths could have been prevented with proper vaccination. Influenza vaccination is 70-90% effective in preventing illness among healthy adults less than 65 years old. Among healthy adults 65 years and older, the influenza vaccination is 30-40% effective in preventing illness and 85% effective in preventing influenza related death.

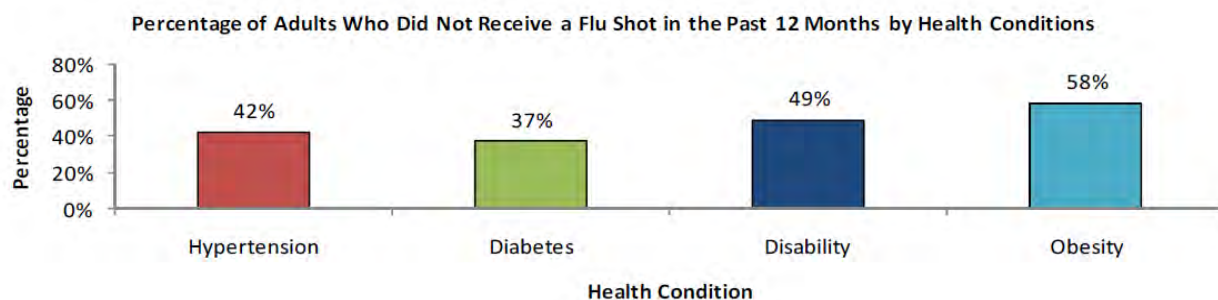
## 7.3 Influenza Vaccination

It is recommended that the following adult groups receive an influenza vaccination every year:

- Adults ages 50 years and older
- Persons ages 2-64 years with underlying chronic medical conditions such as asthma, diabetes, and heart problems
- Pregnant females
- Adults with children <6 months in their home
- Residents of nursing homes and other chronic care facilities
- Health care workers who have direct patient contact
- Out of home caregivers
- Influenza recommendations of children can be found at: [www.cdc.gov/mmwr/preview/mmwrhtml/rr54e713a1.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr54e713a1.htm)
- In 2009, 45% adults in Reno County received a flu shot within the past 12 months.
- In 2009, among adults 65 years and older, 76% received a flu shot within the past 12 months.
- Nearly half (49%) of adults living with a disability did not receive an influenza vaccination in the past 12 months.
- More than half (58%) of adults with obesity did not receive an influenza vaccination in the past 12 months.



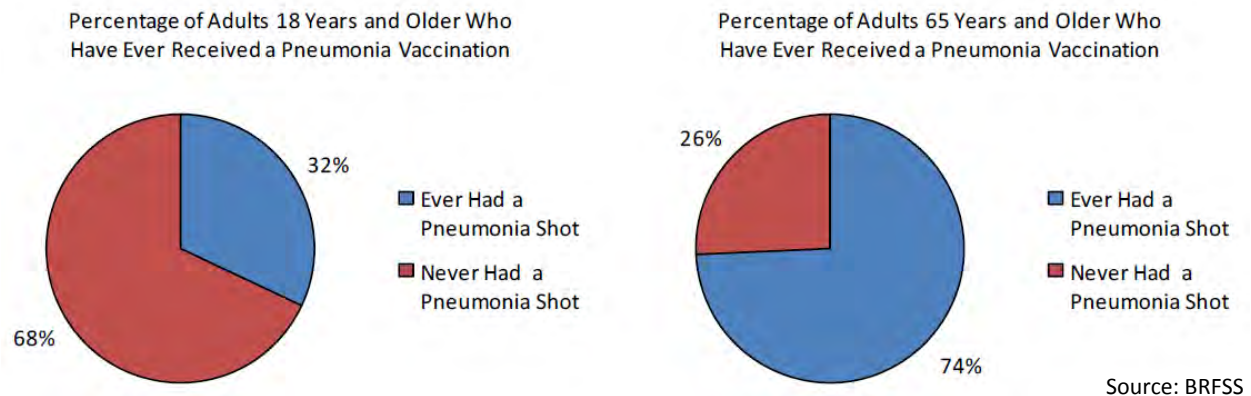
Source: Kansas Health Matters



Source: BRFSS



## 7.4 Pneumococcal Vaccination (also known as Pneumonia Shot)



It is recommended that the following adult groups receive a pneumococcal vaccination (2):

- Adults ages 65 years and older
- Persons ages 2-64 years with underlying chronic medical conditions such as asthma, diabetes, and heart problems
- Persons ages 2-64 years living in environments or social conditions in which the risk for invasive pneumococcal disease or its complications is increased

About one-third (32%) of adults in Reno County have ever received a pneumococcal vaccination

Almost two-thirds (74%) of adults 65 years and older in Reno County have ever received a pneumococcal vaccination.

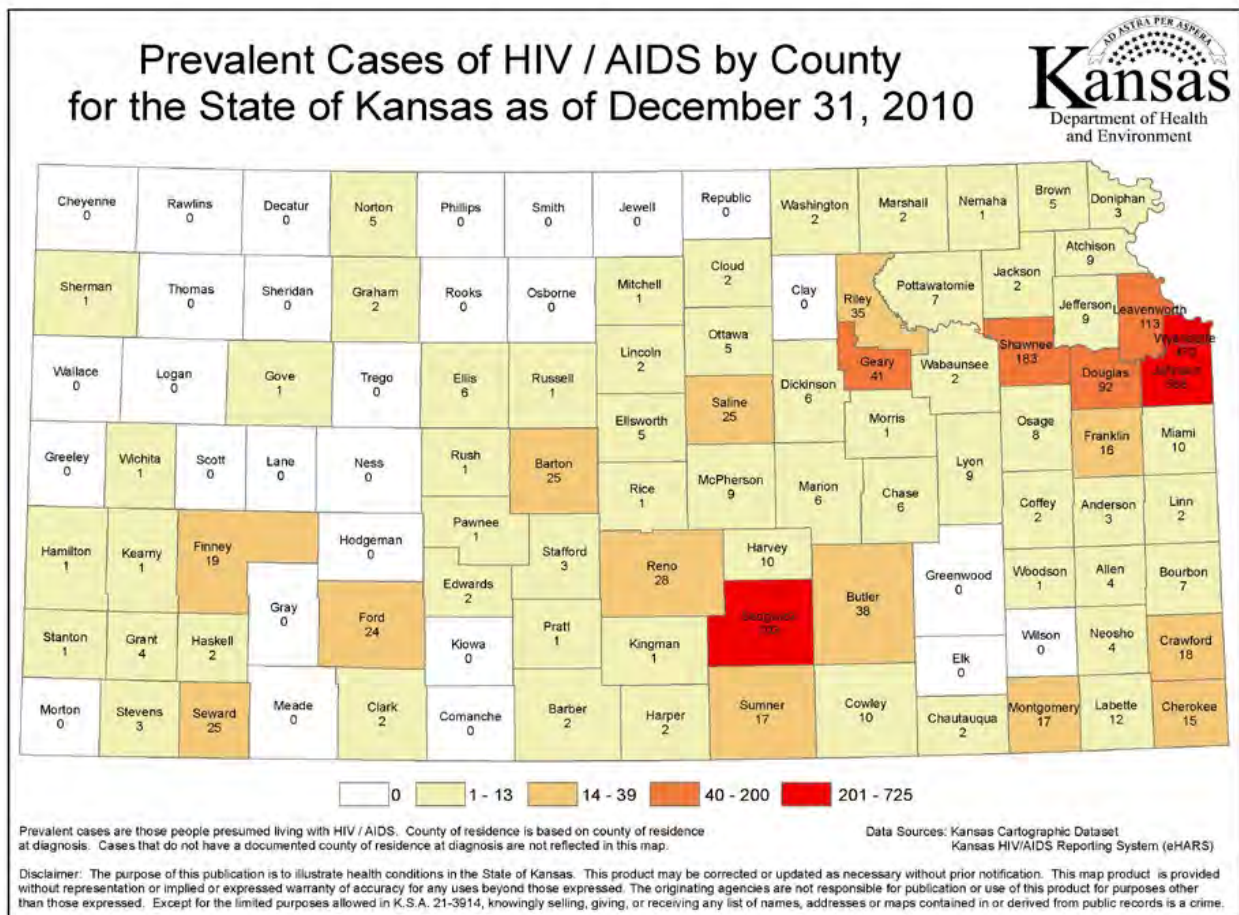
### Summary

“One can think of the middle of the 20<sup>th</sup> century as the end of one of the most important social revolutions in history, the virtual elimination of the infectious diseases as a significant factor in social life.”

~Nobel Laureate, Sir Frank MacFarlain Burnet

# Health Behaviors

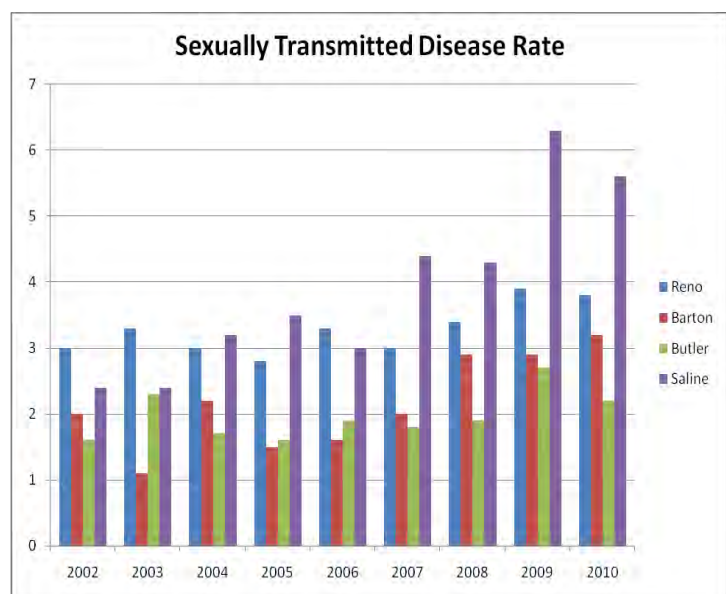
## 7.5 HIV/AIDS Incidence and Prevalence for Reno County and Kansas



## 7.6 STD Rate:

Why is this important:

The Centers for Disease Control and Prevention (CDC) estimates that there are approximately 19 million new STD infections each year—almost half of them among young people ages 15-24. The cost of STDs to the U.S. health care system is estimated to be as much as \$15.9 billion annually. Because many cases of STDs go undiagnosed—and some common viral infections, such as human papillomavirus (HPV) and genital herpes, are not reported to CDC at all—the reported cases of chlamydia, gonorrhea, and syphilis represent only a fraction of the true burden of STDs in the United States.



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- Source: D. Charles Hunt, KDHE

## 7.7 Oral Health

### What is this Indicator?

This indicator shows the percentage of obvious dental decay found in children grades K-12, who participated in dental screenings by licensed dentists and hygienists at their schools.

### Why this is important:

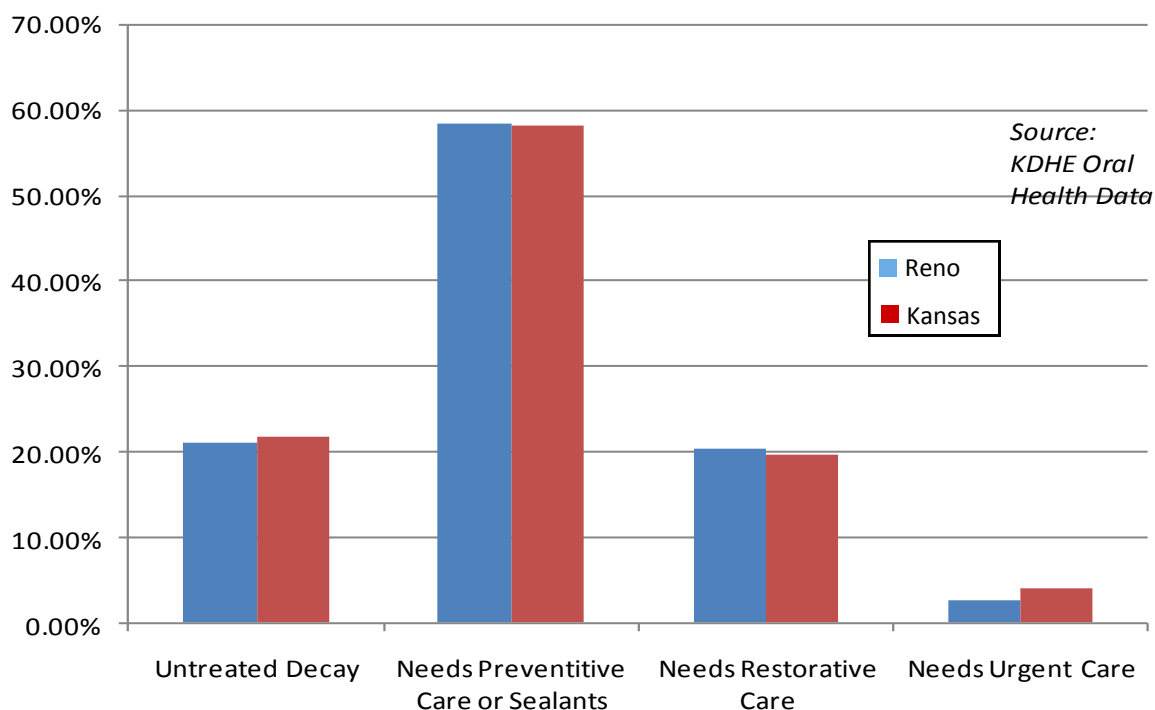
Children with untreated oral disease often experience persistent pain, the inability to eat comfortably or chew well, embarrassment at discolored and damaged teeth, and distraction from play and learning. Nationally more than 51 million school hours are lost each year because of dental-related illness. Oral health screenings provide schools with an opportunity to focus on the importance of good oral health. Screenings also identify children with untreated dental disease and assist schools with appropriate referrals to dental professionals.

**Technical Note:** The data are from a convenience sample. Only those schools that participated in the statewide oral health screening program implemented by the Bureau of Oral Health to satisfy the Kansas State Statute for Annual Dental Inspection (K.S.A. 72-5201) are entered into the database.

Regarding a US Value comparison and a HP2020 target, there is no direct comparison that can be made to Kansas 'Obvious Dental Decay' data. The national and HP2020 values are from a survey of age groups 6 to 9 and 13 to 15 years of age based on the National Health & Nutrition Examination Survey (NHANES), CDC, and NCHS criteria. The Kansas criteria for its data are school grade levels K -12.

The national value and HP2020 target for 'Obvious Dental Decay' of age group 6 to 9 is 28.8 percent and 25.9 percent respectively and 17.0 percent and 15.3 percent respectively for age group 13 to 15.

Reno County School Screenings Data 2009-2010





## 7.8 Mental Health

Mental health plays a vital role in a person's well being, family and interpersonal relationships, and a person's involvement in society. Anxiety and depression are considered leading causes of mental health disorders. Anxiety disorders are the most prevalent mental disorders among adults in the United States.

On average, an estimated 40 million (18.1%) adults are affected with an anxiety disorder. Depression is one of the leading mental health disorders. It affects on average about 20.9 million (9.6%) of the adults, ages 18 years and older in the United States.

### Types of Anxiety and Depression

The types of Anxiety include acute stress disorder, generalized anxiety disorders, obsessive compulsive disorders, panic disorders, post-traumatic stress disorder, social anxiety disorder, and specific phobias.

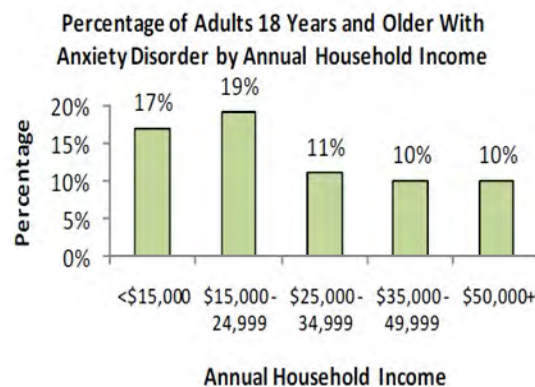
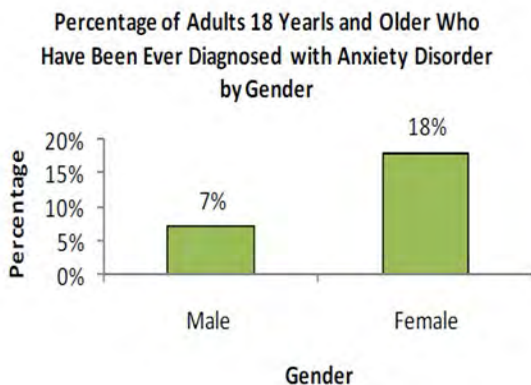
The types of Depression include major depression disorder, minor depression, dysthymia, and bipolar disorder.

### Anxiety Status in Kansas

☑ 12% Reno County adults ages 18 years and older have ever been diagnosed with anxiety disorder (life time) by a doctor or other health care provider.

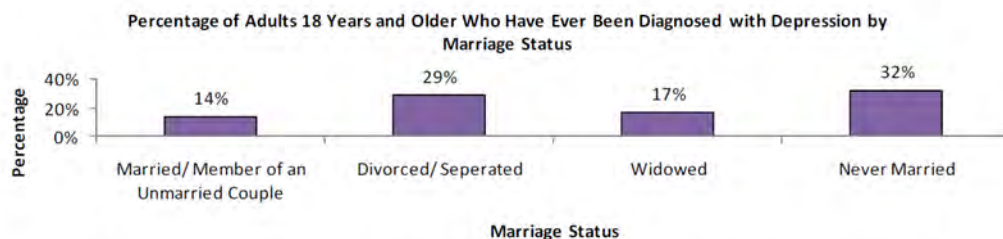
☑ 7% of males and 18% of females have ever been diagnosed with an anxiety disorder.

☑ About one in five (19%) of adults with annual household income between \$15,000 and \$24,999 has ever been diagnosed with an anxiety disorder.



### Depression in Kansas

- 18% of Reno County adults ages 18 years and older have ever been diagnosed with depression disorder (life time) by a doctor or other health care provider.
- About 11% of males and 24% of females have ever been diagnosed with depression.
- About 2 in 5 (37%) adults with annual household income of less than \$15,000 has ever been diagnosed with depression.
- About 1 in 3 (32%) adults that have never been married has ever been diagnosed with depression.



- About 1 in 3 (32%) adults that have never been married has ever been diagnosed with depression.

## Environmental Health Indicators

### 7.9 Lead

This indicator shows the percentage of housing units, built before 1950, and at an elevated risk for lead exposure. Lead poisoning is a preventable pediatric health problem affecting Kansas children. Lead is a toxic metal that produces many adverse health effects. It is persistent and cumulative.

Lead-based paint can be found in most homes built before 1950-and many homes built before 1978. Lead can also be found on walls, woodwork, floors, windowsills, eating and playing surfaces, or in the dirt outside the home. Parents whose hobby or occupation involves working with, or around lead, can unknowingly bring lead dust home. Individuals should avoid "take-home" exposures by utilizing personal protection and hygiene after leaving the workplace.

Source: Kansas Health Matters

### 7.10 Physical Activity

Regular physical activity throughout the lifespan is important in preventing premature death.

Regular physical activity can decrease the risk of numerous chronic diseases and conditions such as hypertension, diabetes, and certain types of arthritis. Regular physical activity also improves flexibility and joint mobility, decreases body fat, and aids in weight loss and weight maintenance.

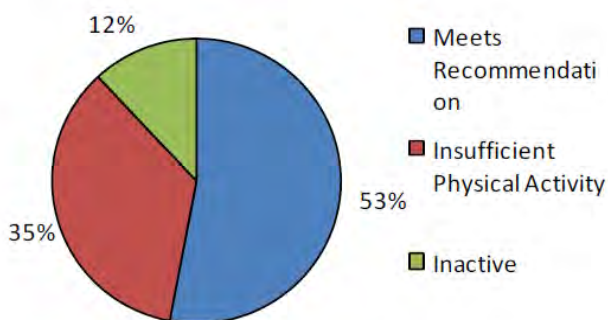
#### Physical Activity Levels

**Meets Recommendation:** Moderate physical activity 30 minutes or more per day, 5 or more days per week OR vigorous physical activity 20 minutes or more per day, 3 or more days per week.

**Insufficient:** Some activity but not enough to meet the recommendation.

**Inactive:** No physical activity.

**Physical Activity Status among Adults 18 Years and Older**



Source: BRFSS

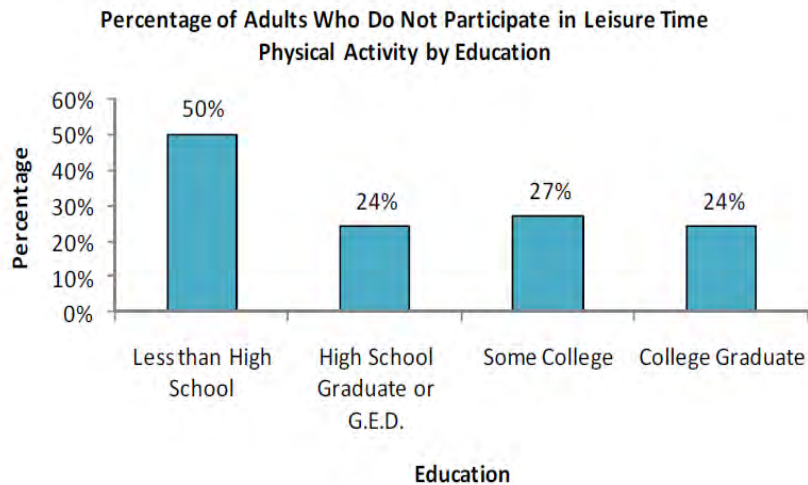


Elmdale Wellness Center

## Physical Activity (continued)

Active adults reduce their risk of many serious health conditions including obesity, heart disease, diabetes, colon cancer, and high blood pressure. In addition, physical activity reduces the symptoms of anxiety and depression, improves mood and feelings of well-being, and promotes healthy sleep patterns. More than 60 percent of adults in the United States do not engage in the recommended amount of activity, and about 25 percent of adults are not active at all. The American College of Sports Medicine (ACSM) recommends that active adults perform physical activity three to five times each week for 20 to 60 minutes at a time to improve cardiovascular fitness and body composition. In addition to reducing the risk of multiple chronic diseases, physical activity helps maintain healthy bones, muscles, joints, and helps to control weight, develop lean muscle, and reduce body fat. The Healthy People 2020 national health target is to increase the proportion of adults who engage in aerobic physical activity of at least moderate intensity for at least 150 minutes/week, or 75 minutes/week of vigorous intensity, or an equivalent combination to 47.9%.

Among adults who completed less than high school education, half (50%) do not participate in leisure time physical activity.

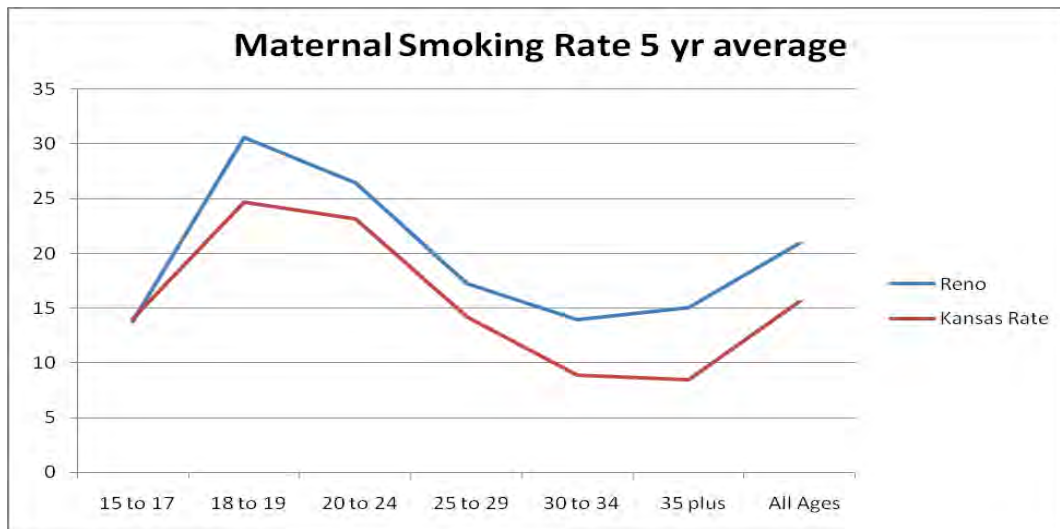


Source: BRFSS

Salt City Splash



## 7.11 Tobacco Use



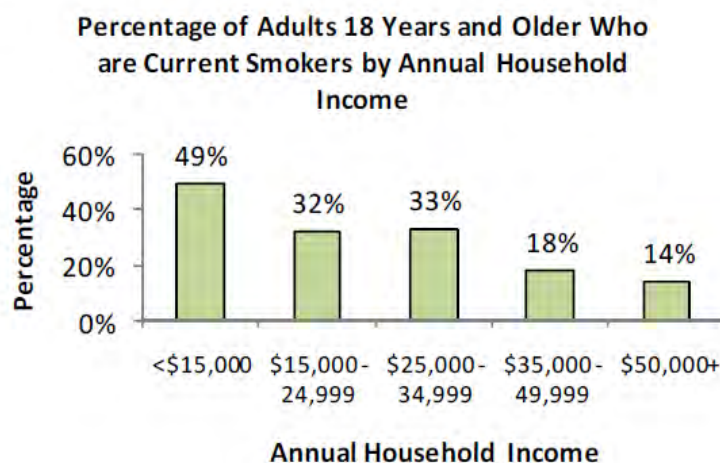
### Maternal Smoking

Smoking is a major public health problem. Smokers face an increased risk of lung cancer, stroke, cardiovascular diseases, and multiple other disorders. Smoking during pregnancy adversely affects the health of both the mother and her baby. Maternal smoking can result in miscarriages, premature delivery, and sudden infant death syndrome. Smoking during pregnancy nearly doubles a woman's risk of having a low birth weight baby, and low birth weight is a key predictor for infant mortality. In addition, smoking also increases the risk of preterm delivery. Low birth weight and premature babies face an increased risk of serious health problems during the infant period, as well as chronic lifelong disabilities such as cerebral palsy, mental retardation, and learning problems.

Source: Kansas Health Matters

### Adult Smoking Rate

Tobacco use is one of the most preventable causes of illness and death in America today. Tobacco use causes premature death to almost half a million Americans each year, and it contributes to profound disability and pain in many others. Approximately one-third of all tobacco users in this country will die prematurely because of their dependence on tobacco. Areas with a high smoking prevalence will also have greater exposure to secondhand smoke for non-smokers, which can cause or exacerbate a wide range of adverse health effects, including cancer, heart disease, respiratory infections, and asthma. The Healthy People 2020 national health target is to reduce the proportion of adults aged 18 years and older who smoke cigarettes to 12%.



Source: BRFSS



## 7.12 Adult Obesity

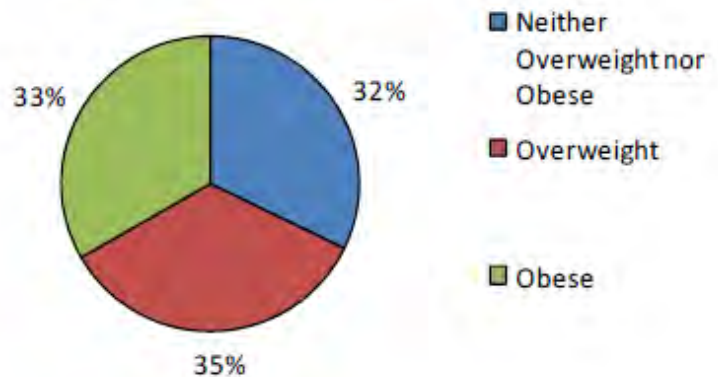
### Obesity-Physical Activity & Healthy Eating

In addition to genetic factors, an unhealthy diet and a lack of exercise are both key contributors to rising obesity rates. Being overweight or obese increases the risk for a number of health conditions: coronary heart disease, type 2 diabetes, cancer, hypertension, stroke, liver disease, sleep apnea, respiratory problems, osteoarthritis, gynecological problems, and poor health status.

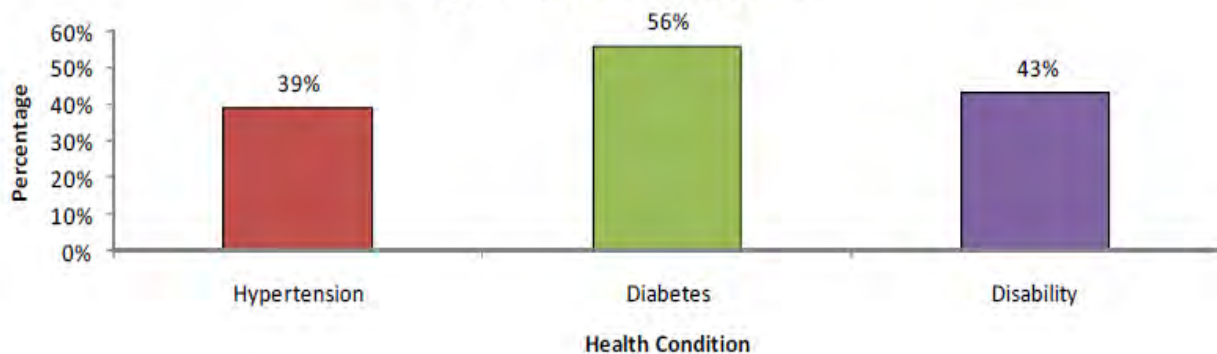
Often, overweight and obesity are the result of an overall energy imbalance due to both eating too many calories and getting too little physical activity. Consuming a healthy amount of calories and healthier foods are important in maintaining health. CDC recently released the new “My Plate” guidelines to encourage healthy eating. Consuming a healthy diet leads to a decreased risk of chronic diseases, such as type 2 diabetes, hypertension, and certain cancers, decreased risk of overweight and obesity, and a decreased risk of micronutrient deficiencies. (<http://www.cdc.gov/nutrition/professionals/index.html>)

Decreased physical activity has been related to several disease conditions such as type 2 diabetes, cancer, stroke, hypertension, cardiovascular disease, and premature mortality, independent of obesity. In addition, physical inactivity at the county level is related to health care expenditures. The CDC also sets activity recommendations indicating that physical activity is important for overall health.

Weight Status of Adults 18 Years and Older

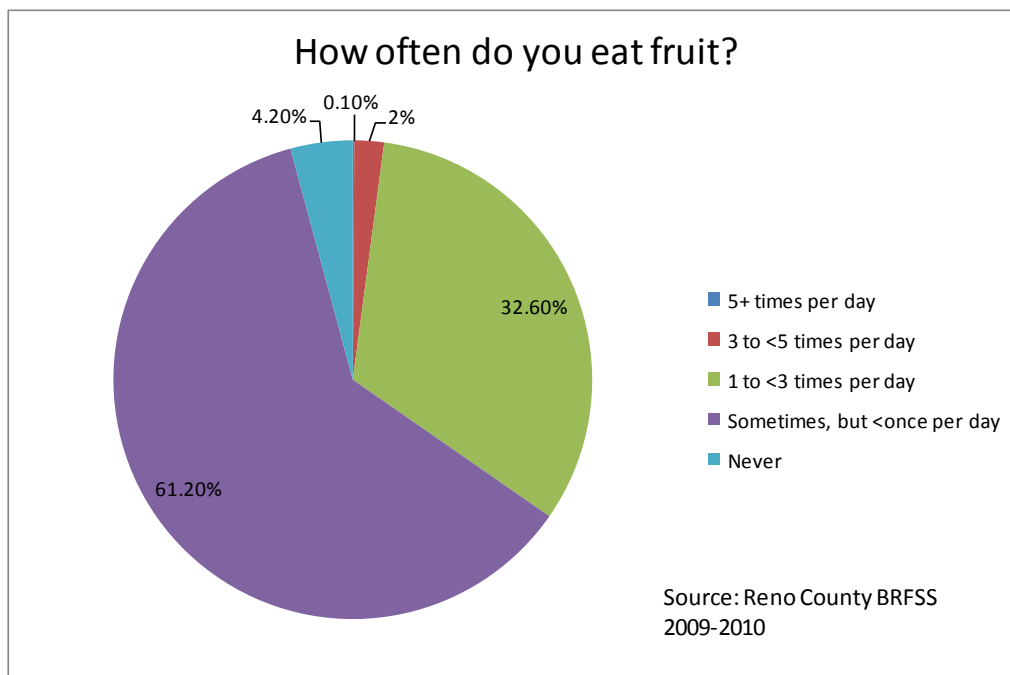


Percentage of Adults 18 Years and Older Who are Obese by Health Conditions



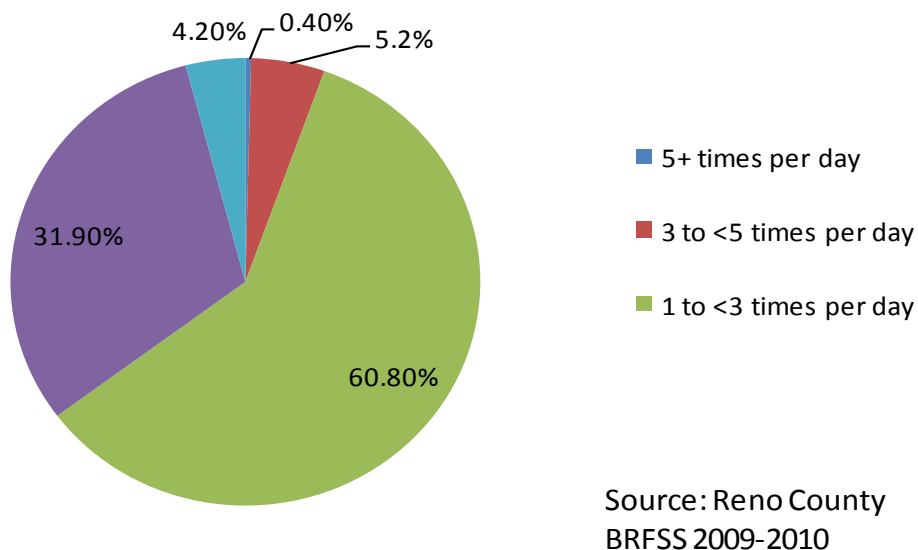
Source: BRFSS

## 7.13 Nutrition



It is essential to eat a fresh, healthy, and balanced diet in order to maintain a healthy weight and prevent chronic disease. Numerous studies have shown a clear link between the amount and variety of fruits and vegetables consumed and rates of chronic diseases, especially cancer. According to the World Cancer Research Fund International, about 35 percent of all cancers can be prevented through increased fruit and vegetable consumption. The USDA currently recommends four and one-half cups (nine servings) of fruits and vegetables daily for a 2,000-calorie diet, with higher or lower amounts depending on the caloric level. Despite the benefits, many people still do not eat recommended levels of fruits and vegetables. This is particularly true of consumers with lower incomes and education levels.

## How often do you eat vegetables?



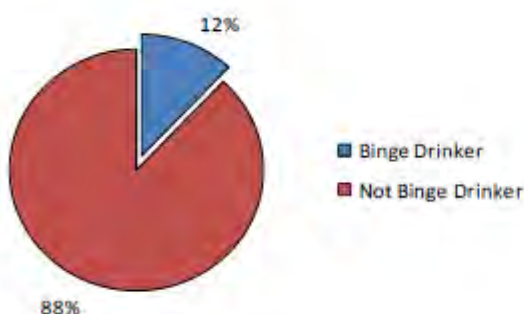
## 7.14 Substance Abuse

### Binge Drinking

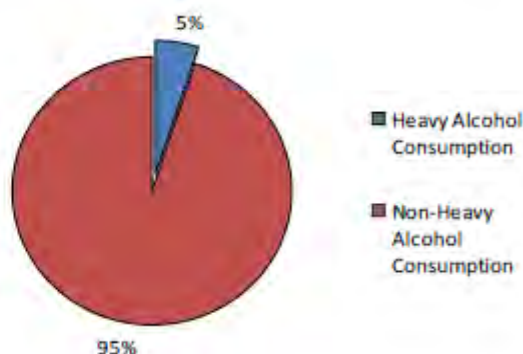
Binge drinking is defined as consumption of five or more drinks for males and four or more drinks for females on one occasion.

Binge drinking is associated with a number of adverse health effects including: motor vehicle crashes, falls, burns, drowning, hypothermia, homicide, suicide, child abuse, domestic violence, sudden infant death syndrome, alcohol poisoning, hypertension; myocardial infarction, gastritis, pancreatitis, sexually transmitted diseases, meningitis, and poor control of diabetes.

Percentage of Adults 18 Years and Older who are Binge Drinkers



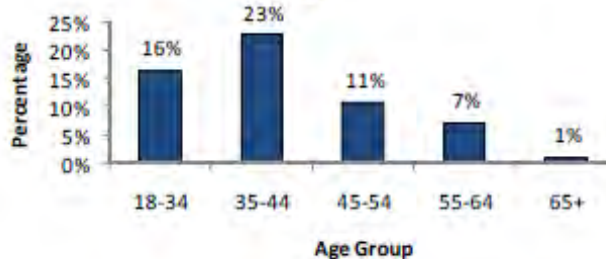
Percentage of Adults 18 Years and Older who are Heavy Alcohol Consumers



- 12% of adults in Reno County are binge drinkers.
- 5% of Reno County adults are heavy alcohol consumers.

- 23% of 35-44 year old Reno County adults reported binge drinking on occasion during the past 30 days.

Binge Drinking Among Adults 18 Years and Older by Age



Source: BRFSS

### Alcohol:

The *County Health Rankings* attempt to capture the prevalence of excessive alcohol use in the population by looking at people's reports of alcohol intake and motor vehicle crashes which are frequently the result of alcohol impairment. Excessive drinking is a frequently used indicator. Motor vehicle crashes are often used as a proxy for excessive alcohol use due to the burden of injury possible through impaired driving.

Consumption of too much alcohol is a risk factor for a number of adverse health outcomes. These include, but are not limited to, alcohol poisoning, hypertension, acute myocardial infarction, sexually transmitted infections, fetal alcohol syndrome, and interpersonal violence. Approximately 80,000 deaths annually are attributed to excessive drinking. It is the third leading lifestyle-related cause of death for people in the United States each year.

### ***An assessment of Reno County, conducted jointly by the Reno County Health Department and Hutchinson Regional HealthCare System***

The Reno County Health Department and Hutchinson Regional HealthCare System conducted a community health assessment (CHA) for the 64,511 residents of Reno County, Kansas. ([US Census Bureau 2010 Census Data](#)) The Reno County Health Department serves Reno County, and Hutchinson Regional HealthCare System serves the county and the surrounding regional areas.

Reno County measures 1,256 square miles and is the third largest county in size in the state behind Butler and Finney Counties. There were 64,511 residents ([US Census Bureau 2010 Census Data](#)) and the population has remained stable for the past 5 years in Reno County.

Reno County includes both urban and rural areas. The local area economy is heavily dependent on agriculture. Traditionally this meant the sale of commodities such as wheat and beef. However, Reno County has resources of salt production, including Carey and Morton Salt, Siemens Wind Energy, and Alcoa Aerospace Center. The median annual family income in the county currently is \$41,431 compared to the median annual family income in the state of Kansas is \$49,424. The median earnings for males working fulltime is \$39,350 and females working fulltime is \$27,417. ([US Census Bureau 2010 Census Data](#))

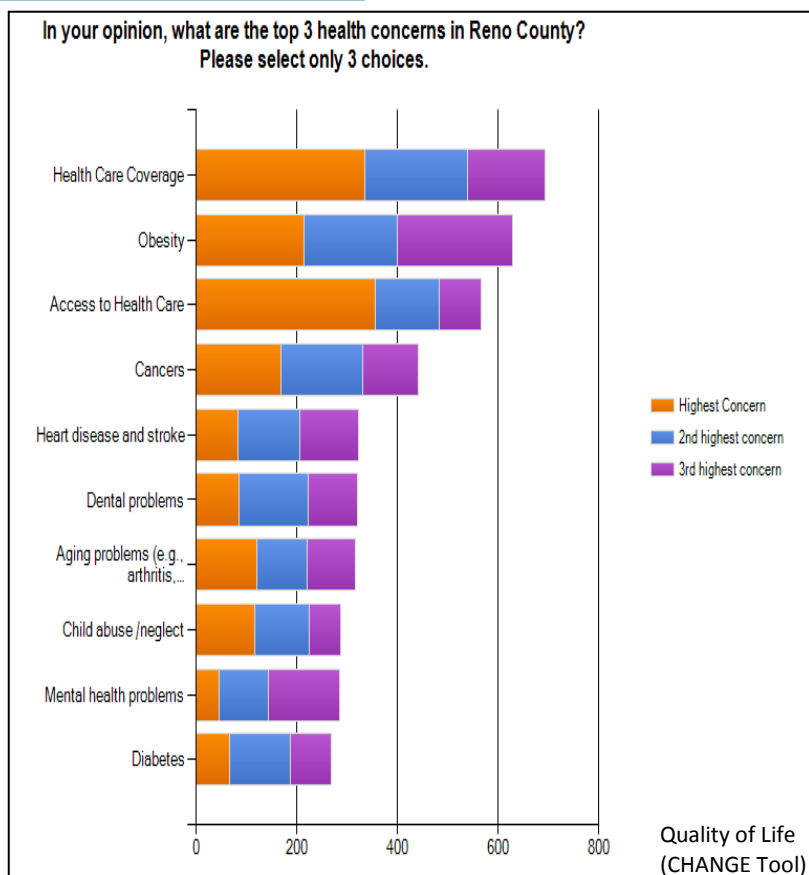
#### ***How the Assessment was conducted***

The Reno County CHA began in February 2012 with a review of the Patient Protection and Affordable Care Act (PPACA). This Act creates a new IRS Code Section 501c3. The PPACA requires non-profit hospitals to conduct a community health assessment during the coming year beginning with the end of the tax year March 2012 and every three years after. The first step of the CHA was to set goals for developing a steering committee and recognize two co-facilitators to organize and guide the steering committee through this journey.

The co-facilitators were chosen one each from the Reno County Health Department and Hutchinson Regional Health Care System. The steering committee was built from a broad representation of county residents and representatives from strategic agencies and organizations that had a good understanding of the county and were willing to commit the time and effort necessary to make the process a success. Once key members were identified the meetings started. Monthly meeting times were established.

During the first meeting in February 2012 the primary discussion was to decide: What group/representative or sector of the Community/County did we miss? How do we engage the public? What are the health priorities in Reno County? A background of the “Community Assessment-Community Health Improvement Planning” was shared. This outlined the process and asked the group to think about prevalence, costs, and the level of community action or interest. The group was asked to think about why a community health assessment is needed and to keep in mind a balance sheet to weigh the benefits and costs. During the meeting the group looked at Kansas Health matters website ([www.kansashealthmatters.org](http://www.kansashealthmatters.org)), sponsored by Healthy Communities and the Kansas Hospital Association. The site provides a wealth of data for Reno County, plus State information that can be compared to other counties. After looking at the Kansas Health Matters website, the committee was interested in finding out what the health issue concerns were of Reno County residents, and wanted to compare them to Healthy People 2010. The committee consensus was to do a survey.

In April 2012 a Reno County Health Concerns survey was launched electronically, paper format and QR Apps code for smart phones. The surveys were distributed to all thirteen zip code areas throughout Reno County, churches, US Postal offices, physician offices, public library, schools, Hutchinson Community Foundation, long-term care facilities, Mental Health Center, other public arena's and postings on both Hutchinson Regional HealthCare System and the Reno County Health Departments websites. A newspaper article introduced the public to the CHA being started. Members of the committee actively offered these surveys to the community for 6 weeks. Approximately 3% of



### Health Care Facilities Available in Reno County

**Hutchinson Regional Medical Center** is the only 501c3 hospital in Reno County and is a non profit 200 licensed acute care bed facility located 40 miles north west of Wichita, Kansas serving the health needs of more than 65,000 residents of Hutchinson and Reno County, as well as the surrounding Central Kansas region. Hutchinson Regional Medical Center is part of an affiliate, which makes up Hutchinson Regional HealthCare System with a combined total of 1400 employees. Affiliates include **Dillon Living Center**—An adult-care facility; **Health-E-Quip**, a home medical equipment supply company; **Hospice of Reno County/Home Care of Hutchinson**, provides medical and support services for individuals diagnosed with a life-limiting illness and their families; **Horizon's Mental Health Center** providing mental health services for residents of Barber, Harper, Kingman, Pratt and Reno counties; **Hutchinson Regional Medical Foundation** – Through private donations, the foundation enhances patient care within the hospital and its entities.

**Summit Surgical** is a surgical specialty hospital for overnight care as well as same day procedures.

**Prairie Star Health Center** is a non-profit Federally Qualified Health Center (FQHC) offering comprehensive medical and dental services, selected eye services, and laboratory services to people of all ages. Prairie Star has been providing primary care services in Reno County since 1995. Prairie Star is one of only fifteen FQHCs in Kansas. Prairie Star participates in statewide diabetic and hypertension patient management networks.

**Reno County Health Department** is non profit and provides public health services that assist Reno County citizens to prevent disease, maintain health, protect the environment, and promote wellness. Senior Health Services, Preparedness, Environmental Health, Basic Health Services, Epidemiology, Child Care Licensing, Health Education Services, Maternal Child Health Service, Women, Infants, and Children programs, Dental Services, Prenatal, Family Planning, Immunizations Services provided include adult and childhood immunizations, and international travel vaccines.

**Hutchinson Clinic** is a for profit team of 70+ physicians and over 600+ healthcare professionals located in central Kansas.

**Behavioral Risk Factor Surveillance System (BRFSS):** BRFSS is the world's largest, on-going telephone health survey system, tracking health conditions and risk behaviors in the United States yearly since 1984. Currently, data are collected monthly in all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and Guam. Reno County BRFSS results from 2009-2010. <http://www.cdc.gov/brfss/>

Burnet, M. (1962). *History of Infectious Disease*. Cambridge, UK: Cambridge University Press.

**Census Bureau (US), American Community Survey (ACS) One-year Estimates:** ACS is an ongoing survey that provides data every year, giving communities the current information they need to plan investments and services. Information from the survey generates data that help determine how more than \$400 billion in federal and state funds are distributed each year. <http://www.census.gov/acs/www/>

**Census Bureau (2010, US Population and Housing Census):** The U.S. Census counts every resident in the United States. Census information affects the numbers of seats your state occupies in the U.S. House of Representatives. People from many walks of life use census data to advocate for causes, rescue disaster victims, prevent disease, research markets, locate pools of skilled workers and more. <http://2010.census.gov/2010census/>

**Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS):** NCHS is the nation's principal health statistics agency, compiling statistical information to guide actions and policies to improve the health of Americans. <http://www.cdc.gov/nchs/>

**Centers for Disease Control and Prevention (CDC), Morbidity & Mortality Weekly Report (MMWR):** MMWR series is the CDC's primary vehicle for scientific publication of timely, reliable, authoritative, accurate, objective, and useful public health information and recommendations. <http://www.cdc.gov/mmwr/>

**County Health Rankings:** This website provides access to the 50 state reports, ranking each county within the 50 states according to its health outcomes and the multiple health factors that determine a county's health. Each county receives a summary rank for its health outcomes and health factors and also for the four different types of health factors: health behaviors, clinical care, social and economic factors, and the physical environment. <http://www.countyhealthrankings.org/>

**Data Book, Data Center KIDS COUNT.** KIDS COUNT®, a project of the Annie E. Casey Foundation, is a national and state-by-state effort to track the well-being of children in the United States. By providing high-quality data and trend analysis, KIDS COUNT seeks to enrich local, state and national discussions concerning ways to secure better futures for all children — and to raise the visibility of children's issues through a nonpartisan, evidence-based lens. State Grantee: Kansas Action for Children, Topeka, KS. <http://www.kidscount.org/datacenter>

**Healthy People (2010 and 2020):** Healthy People provides science-based, national goals and objectives with 10-year targets designed to guide national health promotion and disease prevention efforts to improve the health of all people in the United States. [http://www.cdc.gov/nchs/healthy\\_people.htm](http://www.cdc.gov/nchs/healthy_people.htm)

**Kansas Department of Education.** Child Nutrition & Wellness at the Kansas State Department of Education (KSDE) provides information, resources, training and technical assistance to local agencies operating child nutrition and wellness programs. <http://www.ksde.org>



## *Resources*

**Kansas Department of Health and Environment (KDHE), Annual Summary of Vital Statistics:** This report provides a summary of births, deaths, marriages, marriage dissolutions, and abortions in Kansas. In many instances, counts of events are accompanied by population-based rates and trends for key indicators are tracked. <http://www.kdheks.gov/hci/annsumm.html>

**Kansas Department of Health and Environment (KDHE), Kansas Information for Communities (KIC):** The KIC system gives users the chance to prepare their own queries for vital event and other health care data. The queries designed into this system will answer many health data requests. KIC programs allow you to generate your own table for specific characteristics, year of occurrence, age, race, Hispanic origin, sex, and county. Other information sources are also listed. <http://kic.kdhe.state.ks.us/kic/index.html>

**Kansas Department of Health and Environment (KDHE), Kansas Rural Health Options Project (KRHOP):** KRHOP is a public/private partnership of not-for-profit and governmental organizations including the Kansas Department of Health and Environment Bureau of Community Health Systems, the Kansas Hospital Association, the Kansas Board of Emergency Medical Services, and the Kansas Medical Society. KRHOP offers technical support, information, networking opportunities, funding and other resources to Critical Access Hospitals and other rural providers. <http://www.krhop.net>

**Kansas Department of Transportation (KDOT).** 2008 Kansas Traffic Accident Facts, County Summaries. Accessed from <http://www.ksdot.org/burtransplan/prodinfo/2008factsbook/County.pdf>

**Kansas Health Matters.** Kansas Health Matters is a source of non-biased data and information about community health in Kansas. <http://www.kansashealthmatters.org>



**Public Health**  
Prevent. Promote. Protect.



**HUTCHINSON**  
REGIONAL HEALTHCARE SYSTEM