Community Health Needs Assessment

2019 Analysis | Reno County, Kansas

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Director's Summary

One of the 10 essential services of public health is that of assessment of the community's health and wellbeing.

This data book hopes to illuminate current trends in the health status of our community, and also bring to light current conditions that exist where we live, learn, eat, work and play. This report offers context for comparing multiple years of local and/or peer community data as it relates to our community.

This report was made possible by the efforts of a wide array of community members who spent their time and energy coordinating and directing the work of the Community Health Assessment to help prioritize the health issues of greatest importance to all of us in Reno County.

These resources contain the most current information available for most indicators. However, different sources update at different times. If a specific indicator included here catalyzes additional inquiry about community health data, please contact the Health Department at 620-694-2900.

It is the hope that this report is leveraged routinely in assisting the work of advancing the health and quality of life for all of us here in Reno County.

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Director/Health Officer
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Community Profile and Trends

Reno County is located in southcentral Kansas and was established in 1868. Hutchinson is the county seat and by far the largest city within the county. The expansion of the Santa Fe, Rock Island, and Frisco Railroads guided the development of Hutchinson and the smaller cities throughout the county. Hutchinson is known as the "Salt City" and is still home to several active salt mines, as well as different types of manufacturing and grocery storage and distribution. Outside of the cities, Reno County industry is driven by agriculture.

Reno County's 2016 population is 63,803 and Hutchinson's population is 41,661, meaning that 65% of the county's population lives within the city of Hutchinson. Other small cities in the county are Abbyville, Arlington, Buhler, Haven, Langdon, Nickerson, Partridge, Plevna, Pretty Prairie, South Hutchinson, Sylvia, Turon, and Willowbrook. The city of South Hutchinson borders Hutchinson immediately to the south and is the only other city in the county with more than 2,500 residents. Buhler, Haven and Nickerson are the only other cities with more than 1,000 residents. This large size differential in cities throughout the county means that many residents outside of the city of Hutchinson utilize Hutchinson's parks, trails and recreation opportunities.

Hutchinson and Reno County Populations by Age						
Source: US Census ACS 5-year estimates	Hutchinson			Reno County		
	2016	2010	% Change 2010-2016	2016	2010	% Change 2010-2016
Population	41,661	41,725	-.2%	63,803	64,054	-.4%
Male	21,152	21,126		32,151	31,982	
Female	20,509	20,599		31,652	32,072	
Under 5 years	2,703	2,591	+4.3%	3,754	4,182	-10.2%
5 to 9 years	2,806	2,638	+6.4%	4,235	4,356	-2.8%
10 to 14 years	2,508	2,501	+.03%	4,182	4,016	+4.1%
15 to 19 years	2,589	3,086	-16.1%	4,260	4,449	-4.2%
20 to 24 years	2,676	3,048	-12.2%	3,992	4,053	-1.5%
25 to 34 years	5,772	5,349	+7.9%	7,905	7,500	+5.4%
35 to 44 years	4,725	5,121	-7.7%	7,004	7,593	-7.8%
45 to 54 years	5,343	6,128	-12.8%	8,110	9,395	-13.7%
55 to 59 years	2,956	2,358	+25.4%	4,877	4,014	+21.5%
60 to 64 years	2,407	2,196	+9.6%	4,006	3,799	+5.4%
65 to 74 years	3,660	2,797	+30.9%	5,867	4,967	+18.1%
75 to 84 years	2,543	2,519	+1%	3,967	3,817	+3.9%
85 years and over	973	1,396	-30%	1,644	1,913	-17%

Hutchinson and Reno County Populations by Race *(Race alone or combined)*						
Source: US Census ACS 2016 5-year estimates	Hutchinson			Reno County		
	2016	2010	% Change 2010-2016	2016	2010	% Change 2010-2016
White	38,482	38,318	+.4%	60,272	60,045	+.4%
Black or African American	2,462	2,369	+3.9%	2,761	2,572	+7.3%
American Indian or Alaskan	945	713	+32.5%	1,247	946	+31.8%
Asian	448	234	+91%	556	442	+25.8%
Native HI or Pacific Islander	36	14	+157%	42	33	+27%
Some Other Race	704	1,273	+44.7%	832	1,558	+46.6%

Hutchinson and Reno County Populations by Ethnicity						
Source: US Census ACS 2016 5-year estimates	Hutchinson			Reno County		
	2016	2010	% Change 2010-2016	2016	2010	% Change 2010-2016
Hispanic or Latino	4,866	3,887	+25.2%	5,663	4,865	+16.4%
Not-Hispanic or Latino	36,795	37,838	-2.8%	58,140	59,189	-1.8%

Trends in population based upon Age, Race, and Ethnicity

Overall, both Reno County and Hutchinson have seen a small decrease in the total population over the last six years. This mirrors trends across Kansas. Many counties of similar size and composition saw peak populations around 1930 with fluctuations over the years since then, but an overall downward trend. Hutchinson saw increases in populations from birth to 19 years and from 55 to 84 years. Reductions in overall mortality rates mean that more people are surviving into old age. At the same time, birth rates are decreasing. When that is combined with migration by young adults for work and educational opportunities, the result is population decline and an overall aging of the population.

Hutchinson has seen an increase in all groups of racial minorities in the past six years. The most significant growth occurred in American Indian/Alaskan, Asian, and Native Hawaiian or Pacific Islanders. It is important to note that these groups represent a very small portion of the Hutchinson population, so the percent of change needs to be compared to the total population to gauge the impact of this change. The largest racial minority in Hutchinson is Black/African American and this population saw growth of nearly 4% over the last six years. Overall, this is indicative of increased racial diversity within Hutchinson, but the population is still 92% white. Racial diversity is expected to continue to increase in the future for Hutchinson and Reno County.

The Hispanic/Latino populations in Hutchinson have increased by 25.2% and have increased by 16.4% for all of Reno County since 2010. This does not mirror national trends, as Hispanic/Latinos are no longer the fastest growing ethnic minority across the United States. According to US Census data, the Hispanic/Latino growth rate for the country is 2.2% and for Asians it is 3.4%. It is important to note that Asian can be used to identify both a race and an ethnicity, and in either case, the growth rate in Reno County is less than 1%. Despite this change, Hispanic/Latinos are still the largest ethnic or racial minority in the United States.

Population by Enrollment and High School Graduation						
	Hutchinson			Reno County		
Source: US Census ACS 2016 5-year estimates	2016	2010	% Change 2010-2016	2016	2010	% Change 2010-2016
Of Students, Enrollment:						
Nursery/Preschool	10.30%	6.50%	3.80%	9.10%	6.80%	2.30%
Kindergarten	4%	5%	-1%	4.30%	4.80%	-0.50%
Elementary (grades 1-8)	43.60%	40%	-3.60%	44.60%	42.90%	1.70%
High School (grades 9-12)	23%	21%	2%	23.60%	22.10%	1.50%
High School Graduate or higher	86.20%	87.10%	-0.90%	87.50%	87.70%	-0.20%

Economic Trends						
	Hutchinson			Reno County		
Source: US Census ACS 2016 5-year estimates	2016	2010	% Change 2010-2016	2016	2010	% Change 2010-2016
Percent Unemployed	5.40%	5.30%	0.10%	5.20%	4.80%	0.40%
All parents in family in labor force (children <6)	65.40%	74%	-8.60%	64.20%	69.30%	-5.10%
All parents in family in labor force (children 6-17)	78.80%	84.50%	-5.70%	75.90%	81.90%	-6%
Median household income ($)	42,646	38,880	3,766	46,000	41,431	4,569
Per Capita Income ($)	23,269	21,050	2,219	24,313	22,149	2,164

Hutchinson and Reno County unemployment rates are on par with national unemployment rates. According to the US Census Bureau, the national median household income in the United States was $56,516 compared to $42,626 in Reno. The growth shown in median income from 2010 to 2016 for Hutchinson and Reno County is just shy of what is necessary to keep up with the inflation rates for those years and therefore does not demonstrate real growth.

Social Trends						
	Hutchinson			Reno County		
Source: US Census ACS 2016 5-year estimates	2016	2010	% Change 2010-2016	2016	2010	% Change 2010-2016
Vacant Housing Units	11.90%	7.60%	4.30%	11.50%	8.30%	3.20%
Owner-Occupied	59.60%	65.70%	-6.10%	66.60%	71.60%	-5%
Renter-Occupied	40.40%	34.30%	6.10%	33.40%	28.40%	5%
No Vehicles Available	7.80%	6.10%	1.70%	6.70%	5.60%	1.10%
Households with member(s) under 18	30.10%	29.80%	0.30%	29.70%	30.30%	-0.60%
Households with member(s) 65 and over	29.90%	26.70%	3.20%	30.80%	28.30%	2.50%
Language other than English spoken at home	8.10%	6.30%	1.80%	7.30%	6.40%	0.90%

The number of vacant housing units within the city of Hutchinson has increased by 4.3% while the number of owner-occupied dwellings in the city has decreased by 6.1% since 2010. Across the county, the vacant dwellings have increased by 3.2% and owner-occupied dwellings have decreased by 5% over the same time. 7.8% of households in the city of Hutchinson have no access to a vehicle and nearly a third of households include a child and another third have someone 65 or older in them. These housing, vehicle access and household composition characteristics are important things to consider in planning infrastructure and amenities within the city and special consideration may need to be given to vulnerable populations when allocating resources. Also of consideration when assessing neighborhoods and areas of the city is that almost 12% of the homes are vacant.

Future Projections

Reno County is undergoing an updated comprehensive planning process and has collected population projections for communities within the county. According to US Census data, it is projected that by 2040 the Reno County population will decrease by 7.5% bringing it to 58,400. This is a county population not seen since 1960. Reno County also worked with Wichita State University's Center for Economic Development and Business research to gather these population projections for neighboring counties. The only counties who are projected to grow in that time are Harvey (2% increase) and Sedgwick (11% increase). Kingman County is projected to decrease by 21.7%, McPherson County by 3.6%, Pratt County by 5.7%, Rice County by 19.7% and Stafford County by 24.1% by the year 2039.

Source: WSU, Center for Economic Development and Business Research
Via the Reno County Comprehensive Plan Update (2018-2040)

It is also projected that by 2040, every city in Reno County will have a decrease in population by at least 9% with the exception of South Hutchinson. It is projected that South Hutchinson's population will increase by 12.8% in that time. Hutchinson's population is projected to decrease by 10.7% to 37,452 by 2040.

Source: Kansas Certified Population, Kansas Secretary of State, Division of the Budget, 2017 Via the Reno County Comprehensive Plan Update (2018-2040)

Health Factors

The health of Reno County is assessed against the health of other counties across Kansas through the County Health Rankings and Roadmaps project from the Robert Wood Johnson Foundation. For this project, 103 counties in Kansas are ranked. Health outcomes are made up of length of life and quality of life indicators. In 2018, Reno County ranked 77th in these areas. Health factors are made up of health behaviors, clinical care, social and economic and physical environment factors. In 2018, Reno County ranked 73rd in these areas.

Counties	Reno	Saline	McPherson	Harvey	Sedgwick
Health Outcomes Rank	77	31	8	27	72
Health Factors Rank	73	57	3	14	87

Source: RWJF County Health Rakings 2018

Contributors to These Rankings in Reno County

The following factors have a negative impact on the health of Reno County and consequently on the County's health rankings:

Adult smoking rate of 17%

Unemployment rate of 4.6% in 2017

Adult obesity rate of 36%

Violent crime rate of 438 per 100,000 people

Premature death rate of 8,204 years of potential life lost per 100,000 people

Average number of poor mental health days per month of 3.5

Percentage of low birth weight births of 7.1%

Average number of adults who report poor or fair health of 16%

Average number of poor physical health days per month of 3.3

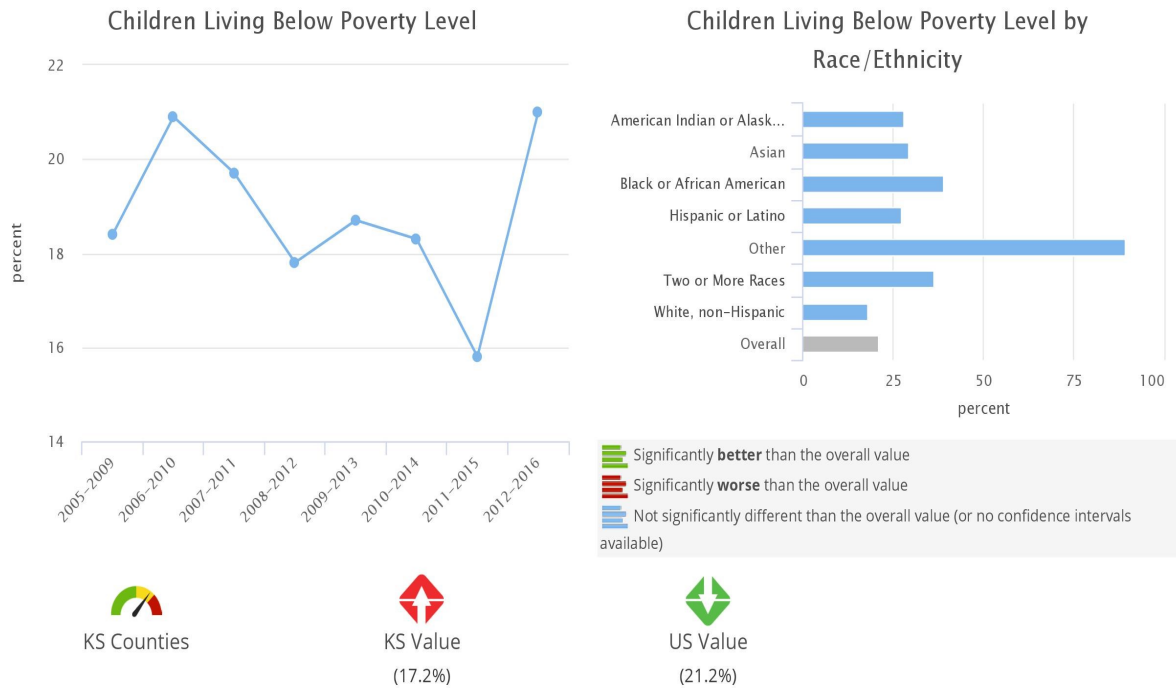The following factor has a positive impact on the health of Reno County and its ranking:

45 preventable hospital stays for ambulatory care conditioners per 1,000 Medicare enrollees

Source: RWJF County Health Rankings 2018
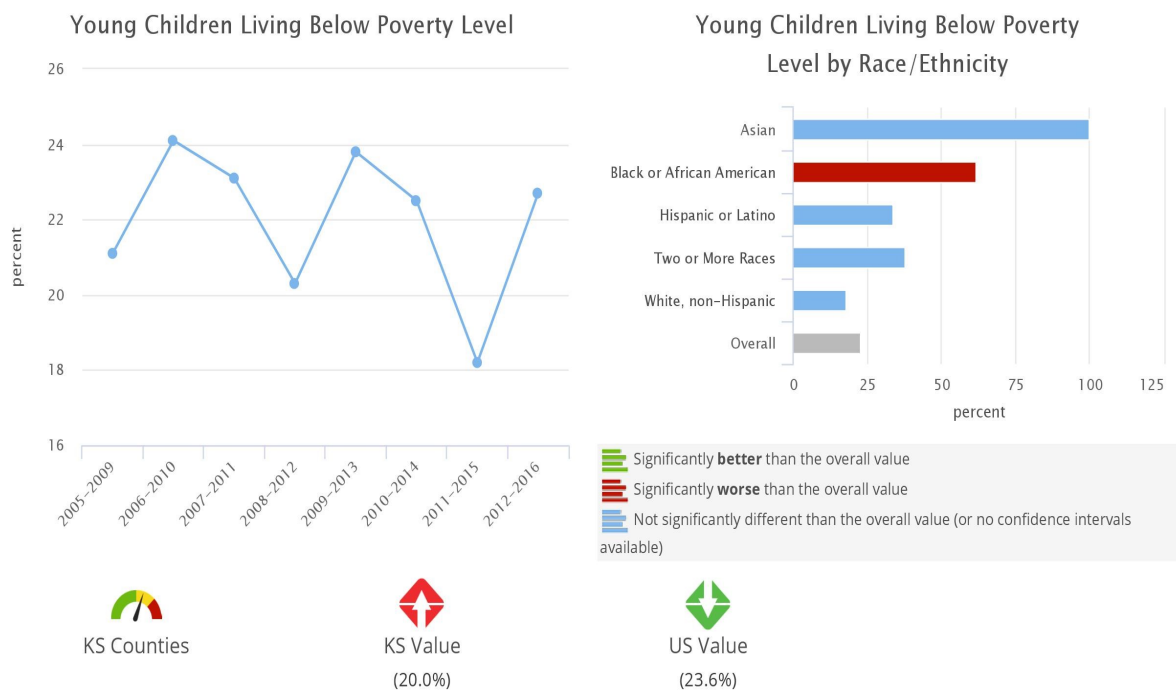
Children Living Below Poverty Level

Source: American Community Survey

Family income has been shown to affect a child's well-being in numerous studies. Compared to their peers, children in poverty are more likely to have physical health problems like low birth weight or lead poisoning, and are also more likely to have behavioral and emotional problems. Children in poverty also tend to exhibit cognitive difficulties, as shown in achievement test scores, and are less likely to complete basic education.

Children Living Below Poverty Level

Children Living Below Poverty Level by Race/Ethnicity

Significantly **better** than the overall value

Significantly **worse** than the overall value

Not significantly different than the overall value (or no confidence intervals available)

KS Counties

KS Value
(17.2%)

US Value
(21.2%)

Young Children Living Below Poverty Level

Source: American Community Survey

Young Children Living Below Poverty Level

Young Children Living Below Poverty Level by Race/Ethnicity

Significantly **better** than the overall value

Significantly **worse** than the overall value

Not significantly different than the overall value (or no confidence intervals available)

KS Counties

KS Value
(20.0%)

US Value
(23.6%)

Following are three maps that show census tracts within Reno County. The first two maps show estimated life expectancy for the Hutchinson Area and the remainder of the county.

Here in Reno County, the data shows that average life expectancy ranges from 70 to 83.4.

> **Within the city of Hutchinson, the census tracts with the highest average life expectancy are in the northwest portion of the city.**

> **Inside Hutchinson, the census tract with the lowest life expectancy of 70 years is from Monroe to Plum in between Avenue B and 7th Avenue. In contrast, the neighborhood directly to the north of this one, between 7th Avenue and 23rd Avenue, sees a much higher average life expectancy of 79.3 years.**

> **The census tract that contains South Hutchinson has an average life expectancy of 70 years.**

> **The census tracts in all the areas of the county outside of Hutchinson and South Hutchinson share average life expectancies that range from 76.4 to 82.7 years.**

The third map shows income levels for parents by census tract. You can see a correlation between the average income in an area and the estimated life expectancy. Areas with higher annual household incomes have longer life expectancies.
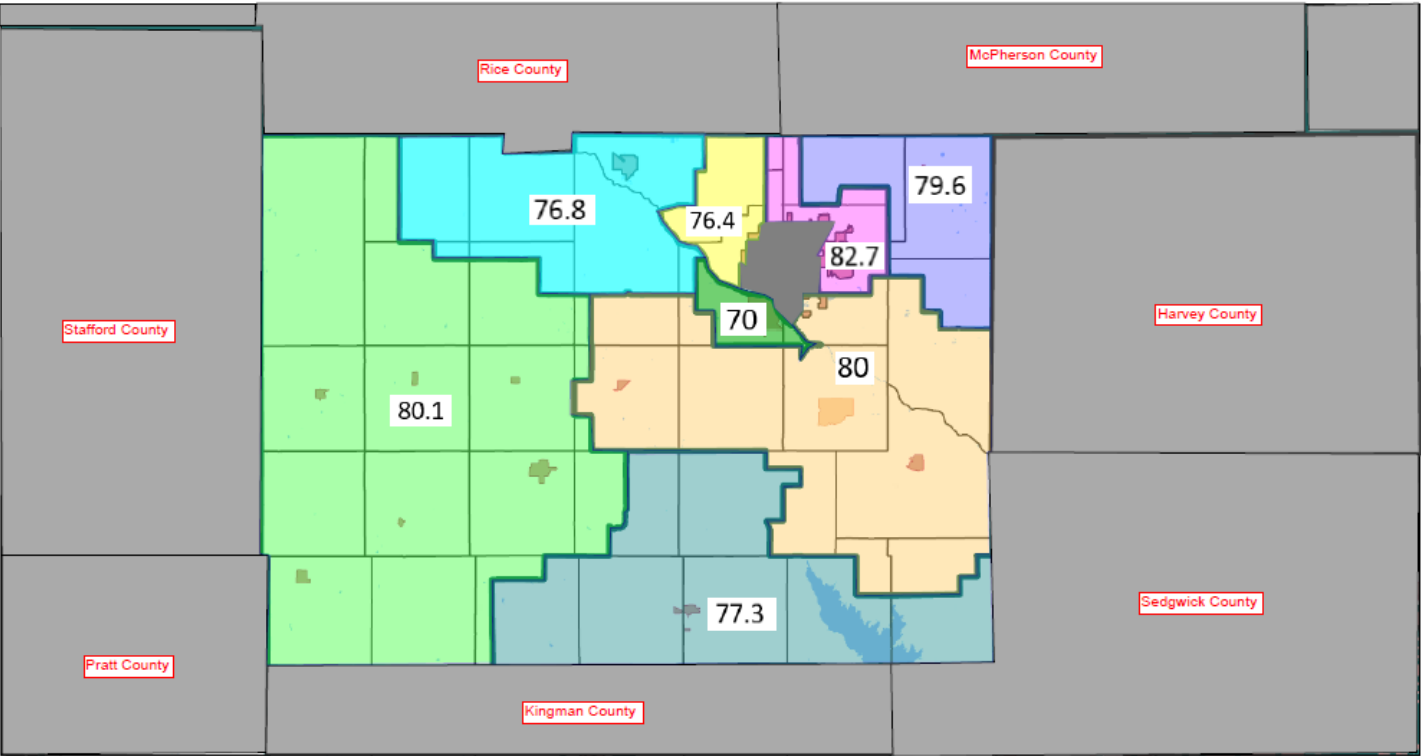
Hutchinson, Kanas
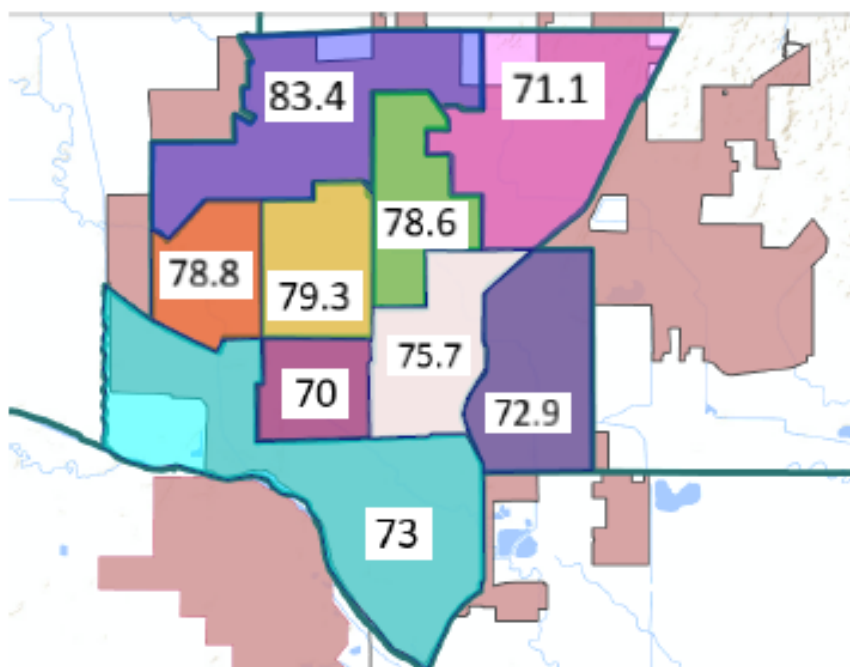
Source:

National Center for Health Statistics. U.S. Small-Area Life Expectancy Estimates Project (USALEEP): Life Expectancy Estimates for Reno County, 2010-2015]. National Center for Health Statistics. 2018.
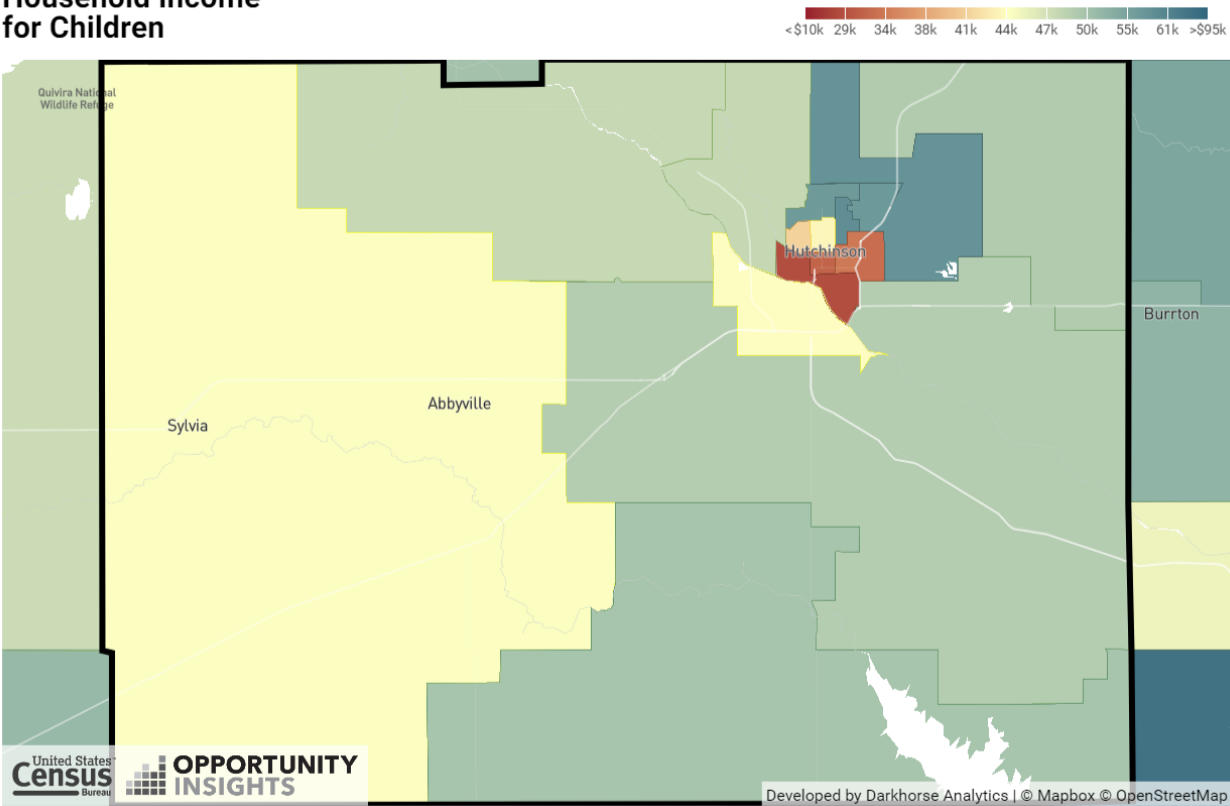
Reno County

Source:

National Center for Health Statistics. U.S. Small-Area Life Expectancy Estimates Project (USALEEP): Life Expectancy Estimates for Reno County, 2010-2015]. National Center for Health Statistics. 2018.
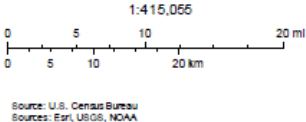
Household Income for Children

Update of Previous Health Improvement Priorities

The Community Health Improvement Plan that was created in 2016 included two main goals: to reduce the proportion of people who are obese in Reno County and to create a seamless, coordinated Mental Health System that provides treatment and education about mental health for all in Reno County. Four strategies were developed to meet each goal.

Obesity

Make the healthy choice, the easy choice for physical activity and nutrition.

Encourage Reno County Businesses to implement workplace strategies that create cultures of health.

Educate and work with health professionals to provide stronger continuity of care throughout the community.

Develop plans for sustainability of efforts regarding health in our community.

Mental Health

Reduce barriers that prohibit access for adults and children with mental illness to receive treatment.

Develop plans to decrease the number of adults and juveniles who enter the justice system due to mental illness.

Increase collaboration between all mental health resources in Reno County.

Provide a place for mental health consumers to go for resources and peer to peer interactions.

Reno County Health Improvement Plan

Update: October 2017

Priority Area 1: Obesity

Priority Area 2: Mental Health

heal reno county
Live Happy. Live Healthy.

OUR JOURNEY

In 2016, a Community Health Assessment was conducted to identify the areas of greatest importance that impact the health of the county. As a result, a Community Health Improvement Plan was designed to guide the work that will address these issues over the next three years.

Here is what has been done so far:

CHA 2015	CHIP 2016	CHIP Update 2017

Obesity Strategy 1:

Make the healthy choice, the easy choice for physical activity and nutrition.

Schools implement wellness policies in the areas of physical activity and nutrition	Go Noodle Users: 466 Physical Activity breaks played: 20,879 Student Minutes of Physical Activity: 1,106,192
Build community support around legislative policies for the built environment that enhance access to and availability of physical activity opportunities	Buhler is working towards development of a trails plan and South Hutch is working towards the development of a parks plan

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Obesity Strategy 2:

Encourage Reno County businesses to implement workplace wellness strategies that shift behaviors into becoming the cultural norm.

Host Workwell KS workshops in the areas of foundation, physical activity, tobacco and nutrition	13 employers have completed the Foundations Workshop. We are hosting the Healthy Foods and Beverage workshop in October 2017
Support employers in implementing worksite wellness to progress toward a comprehensive worksite wellness plan	13 employers are developing comprehensive wellness plans

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Obesity Strategy 3:

Educate and work with Health Professionals to provide stronger continuity of care.

Expand access to integrated behavioral health into our community systems	Healthcare providers are developing ways to embed mental health professionals

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Obesity Strategy 4:

Develop plans for sustainability of efforts regarding health in our community.

Develop Relationships — Visited Lawrence and learned from their coalition

Bring in Experts — Mayor Mark Holland in 2016; Dr. Justin Moore in 2017

Engage all Sectors — Heal membership has increased to 75

Mental Health Strategy 1:

Reduce barriers that prohibit access for adults and children with mental illness to receive treatment.

Reduce Stigma — Mental Health First Aid Classes

Education — Educational Materials and Outreach Events

Increase Access — Integrating mental health into other areas of healthcare

Mental Health Strategy 2:

Increase the collaboration between all mental health resources in Reno County.

Improve communication in all areas regarding mental health in our community — Creating a resource list to be shared by all providers

Mental Health Strategy 3:

Provide a place for mental health consumers to go for resources and peer to peer interaction.

Explore the option of a Breakthrough Club model for our community — Breakthrough Club subcommittee is working towards the development of the Drop In Center and Club

Research what other communities are doing to make progress on mental health in this area — Visited Breakthrough Club in Wichita; Lawrence Stepping Up came to Hutch to present

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Introduction

The foundation of the PACE-EH model is that communities explore the connection between the environment and human health and well-being. Here we will define the environment as where people live, work, learn and play (PACE-EH, p.1). Throughout this process we will include the physical environment, but we will also consider the ecological, social, economic and aesthetic environments and how they impact human health. By undergoing this process, we seek to better understand if there are certain groups in the community who are experiencing disproportionate risk or disparate health outcomes because of these environmental factors. We will also examine what can be done to protect and improve human health within these contexts.

The PACE-EH Methodology is comprised of 13 tasks. In Reno County, we have chosen to include the first 10 tasks in the Community Health Assessment (what is contained within this data book) and tasks 11-13 will be used to develop the Community Health Improvement Plan in 2019.

The PACE-EH Method:

Task 1   Determine community capacity

Task 2   Define and characterize the community

Task 3   Assemble a community-based environmental-health assessment team

Task 4   Define the goals, objectives, and scope of the assessment

Task 5   Generate a list of community-specific health issues

Task 6   Analyze the issues with a systems framework

Task 7   Develop locally appropriate indicators

Task 8   Select standards against which local status can be compared

Task 9   Create issue profiles

Task 10   Rank the issues

We will then use the PROCEED model to implement the plan. PROCEED includes these phases: Implementation, Process Evaluation, Impact Evaluation, and Outcome Evaluation.

The Community Health Assessment (also known as the Community Health Needs Assessment) process is foundational both for the Reno County Health Department and for Hutchinson Regional Medical Center. To ensure a robust and rigorous assessment and planning process, it is important to include participation of partners outside of the health department and hospital that represent community populations and health challenges. To accomplish this, a Community Health Assessment Committee was formed to lead the process. Members of this committee include:

Members:

Peggy Tuxhorn: VP of Quality, Hutchinson Regional Medical Center, Sector: Health Care Provider, Largest Employer in Reno County

Rogena Johnson, MD: Chief Medical Officer, Prairie Star, our Federally Qualified Health Center, Sector: Community Health Centers, Nonprofits, Health Care Consumer Advocates

Justin Jensen: Ancillary Services Director, Hutchinson Clinic Sector: Health Care Provider, Private Employer, Heal Advisory Council Member

John Muther: Robert J. Dole Medical Center (Wichita, KS) operates the Outpatient Clinic for the Veteran's Administration in Hutchinson, KS, Sector: Community Health Center, Health Care Consumer Advocates,

Veterans

Brenda Brown: Clinical Director/COO, Horizons Mental Health Center, Sector: Mental Health Care Providers

Darla Wilson: VP Chief Administrative Officer, Hospice and HomeCare of Reno County, Sector: Health Care Providers, Senior Care

Rick Kraus: Assistant Superintendent of Human Resources, USD 308 Sector: Local school districts, Reno County's second largest employer

Nick Baldetti: Director/Health Officer, Reno County Health Department, Sector: Local government officials, public health, Reno County's 4th largest employer

Lisa Gleason: Executive Director, United Way of Reno County, Sector: Nonprofit and Community Based Organizations, Heal Advisory Council Member

Anna Brown: Data and Quality Supervisor, Reno County Health Department, Sector: Local government

Megan Gottschalk-Hammersmith: Assistant Director of Population Services, Reno County Health Department, Sector: Local government

Elliot Koester: Epidemiologist, Reno County Health Department, Sector: Local government

On March 5, 2018 the Community Health Assessment Committee (CHAC) met and reviewed three potential models for use in the community health assessment process: Mobilizing for Action through Planning and Partnership (MAPP), Protocol for Assessing Community Excellence in Environmental Health (PACE-EH) and the Precede/Proceed Model.

The committee reviewed the data sources that are currently available for the county and discussed which model would give the community the most useful and actionable information. The CHAC decided to use the PACE-EH model for the Community Health Assessment and incorporate the Proceed portion of that model to guide the implementation and evaluation of the Community Health Improvement Plan that will follow the assessment.

Methodology of Primary Data Collection

The Community Health Assessment Committee (CHAC) met regularly throughout the entire year of 2018 to plan the data collection methodology to be used for the survey portion of the Community Health Assessment and to select and utilize the model for the Community Health Assessment: PACE-EH.

Members of the CHAC attended a training on the Community Assessment for Public Health Emergency Response (CASPER) method that was hosted by the Kansas Department of Health and Environment and was conducted by epidemiologists from the Centers from Disease Control and Prevention. The purpose of this model to provide quick and reliable information about the needs of a community at a household level.

Reno County is a geographically very large county that is divided into 17 census tracts. The CASPER method utilizes a two-stage cluster sampling design based upon these census tracts and their respective blocks. Then 30 blocks (referred to as clusters) are randomly selected from all the census blocks in the county. Seven interviews are then completed in each of the selected clusters. The method of selection used to identify the clusters utilizes probability proportionate to population. That means that every census block within the county was eligible to be picked as long as it contained housing units, but it had a greater chance of being selected if it contains a greater number of housing units. To limit the number of census blocks that were selected with too few households to complete 7 interviews, CHAC randomly selected census blocks and added adjacent blocks to them to create "block groups" with a minimum of 20 household units. Once the clusters were selected, we utilized the County's GIS to generate a list of households contained within each cluster. Using a random number generator, a list of households at which to conduct interviews was generated.

In Reno County, 29 census blocks were selected because one census block was randomly selected twice. On September 30 and October 1, 2018 pairs of volunteers went to these randomly selected households and completed 183 interviews out of the maximum of 210 interviews. Over these two days, 159 hours were spent in the field by volunteers conducting the interviews. Including every house within the county would be time and cost prohibitive. ***Instead, we are able to use probability sampling methods that can be statistically weighted to extrapolate results that are reflective of the entire sampling frame.***

The CASPER interview was designed to be short and simple: 22 questions that should take 10 minutes or less to complete. The interviews were conducted orally, with volunteers going to the selected households, making their introductions, and then asking the respondents the questions verbally and recording their responses on paper. Volunteers recorded which households were visited and the outcome: no answer once, no answer twice, no answer three times, declined to participate, home is abandoned or unsafe, or interview was completed. These tracking sheets will be used to calculate completion and cooperation rates for the CASPER.

We did choose to include some open-ended responses to give the community the opportunity for more robust and unguided feedback. This means that there is much more time required for analysis of these responses, but the themes that come from these questions will aid in developing the follow-up questions that will be used in focus group facilitation.

Introduction and Consent Script

Volunteers were trained and paired together. Pairs consisted of a female and a male, or two females, and tried to include other diverse demographic combinations when available. For the safety of all volunteers, they were only allowed to go out in pairs. The text of the script that was read when the pairs introduced themselves to residents follows:

Hello, we are _____and_____ with the Reno County Health Assessment Group. We have some information we would like to leave with you related to Pathways to a Healthy Kansas and the health care providers and partners in Reno County who are conducting this current Community Health Assessment.

Also, we are talking to residents in Reno county about their health and other needs so that we can get a better idea of what kind of help people need. Your house is one of many that has been randomly chosen to be in this survey. If you agree to participate, we will ask you some general questions about your household and the people who live there and questions about certain kinds of environmental factors. The survey should take no more than 10 minutes to complete. We will keep your answers private. You can refuse to be part of the survey or refuse to answer any of the questions. Nothing will happen to you or your household if you choose not to be part of the survey. Your responses will be added to other responses from around the county and will not be linked to you or your household.

You may have questions about this survey. If so, you can ask anyone here right now. If you would like to confirm that we were sent by the Reno County Health Department, you can call Anna or Elliot, in the Epidemiology and Informatics Department, at 620-259-8464 or 8450.

Volunteers then explicitly asked the residents for their consent. If they received a "yes", they proceeded with the interview questions. If they received a "no", they thanked the resident for their time and left. This was recorded on the CASPER tracking sheets so that other volunteers did not go back to households that had previously declined participation.

Left: Peggy Tuxhorn and Elliot Koester, members of the Community Health Assessment Committee, prepare to go into the field.

Below: Volunteers from the local community prepare to go into the field to conduct the door-to-door interviews.

Questions that were asked during the CASPER interviews

In general, how would you rate the overall health of the Reno County?

In general, my community has sufficient opportunities for physical activity?

In general, my community has sufficient options for healthy eating?

Are you aware of efforts in your community to promote tobacco cessation?

What are the biggest concerns facing this household, neighborhood and County? (open ended)

Is this Household thriving?

What is the primary mode of transportation for the household?

Does this form of transportation meet the needs of the household?

Is your household able to receive/get care when needed?

      If no: What is the primary barrier preventing your household from getting care when needed.

Is this household able to get medication when needed?

    If no: why?

Where do members of your household receive care?

Does anyone in your household have a chronic disease?

If yes: Does your house hold know how to manage the chronic disease?

Does anyone in this household struggle with their mental health?

Do all members of the household feel safe in their household, neighborhood, community, school?

Is anyone in the household planning on moving in the next year?

      If yes: Buying or renting   Reno County or out

Where does your household receive information regarding emergencies? Select all that apply.

Is anyone in the household interested in vocational training? (provide examples)

Is the health of the household affected by Environmental issues? (Ex. Controlled burns, harvest, dust, pollen)

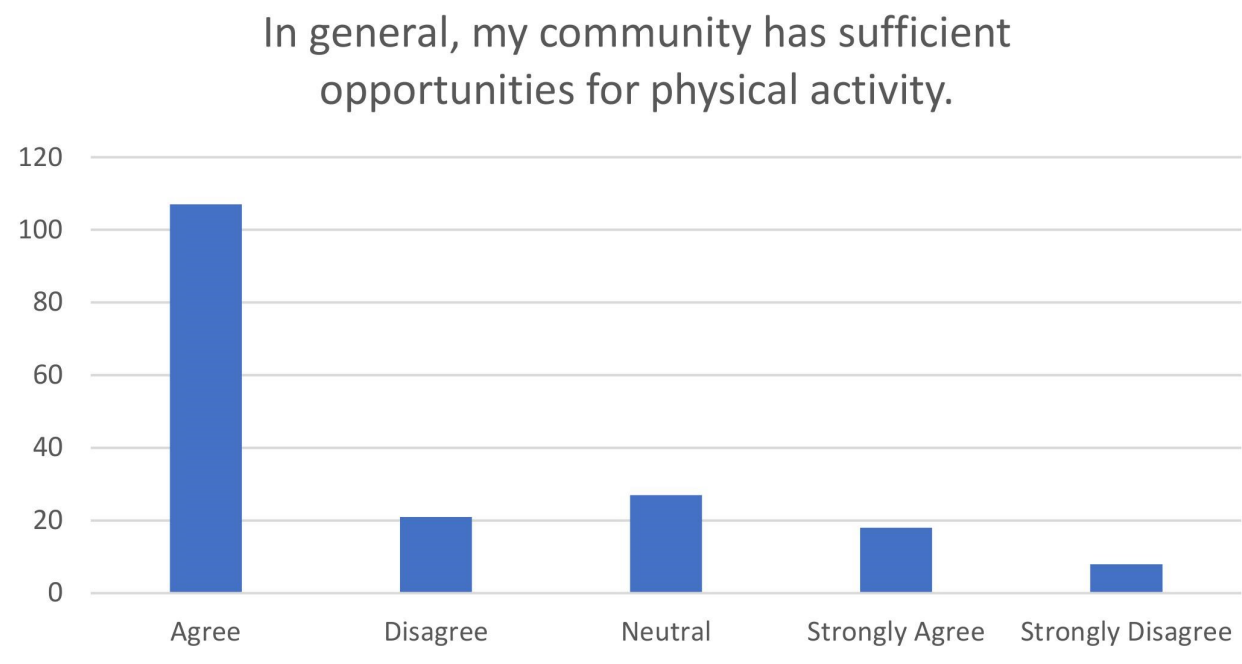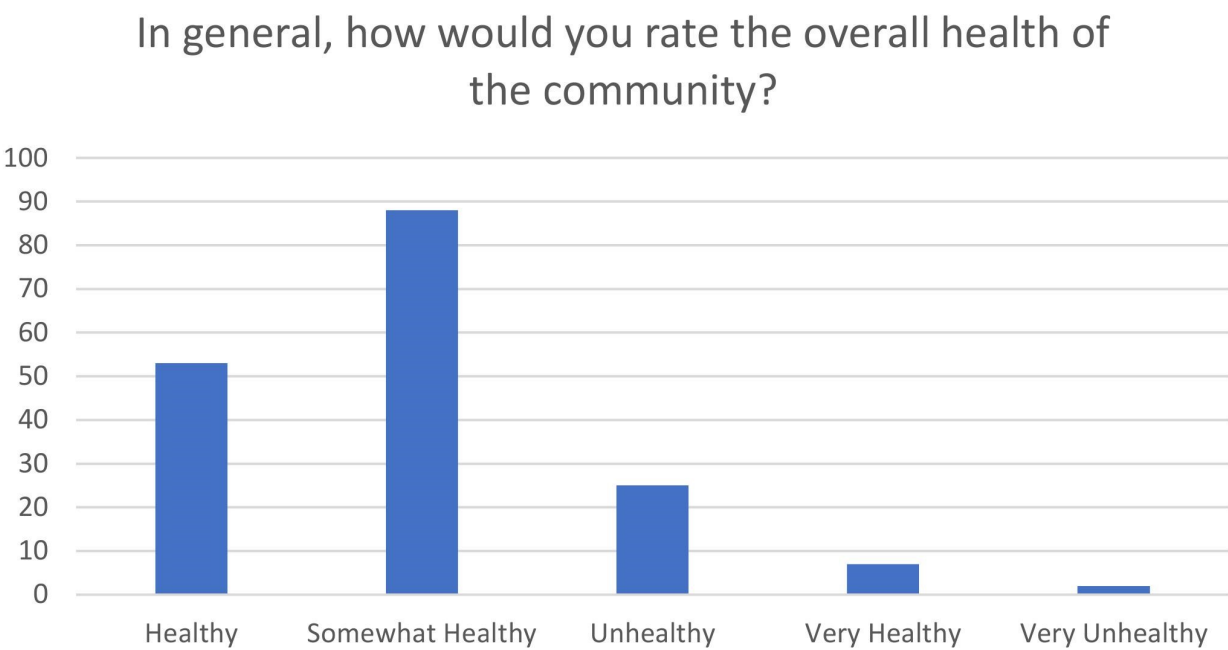Do you have 3 days of food and water for all members of the household?

Please rate your level of support for policies that prohibit tobacco use in the following settings: local parks, school grounds, hospital grounds, worksites.

Are you aware if the Pathways to a Healthy Kansas Initiative that is being implemented by Heal Reno County in your community?
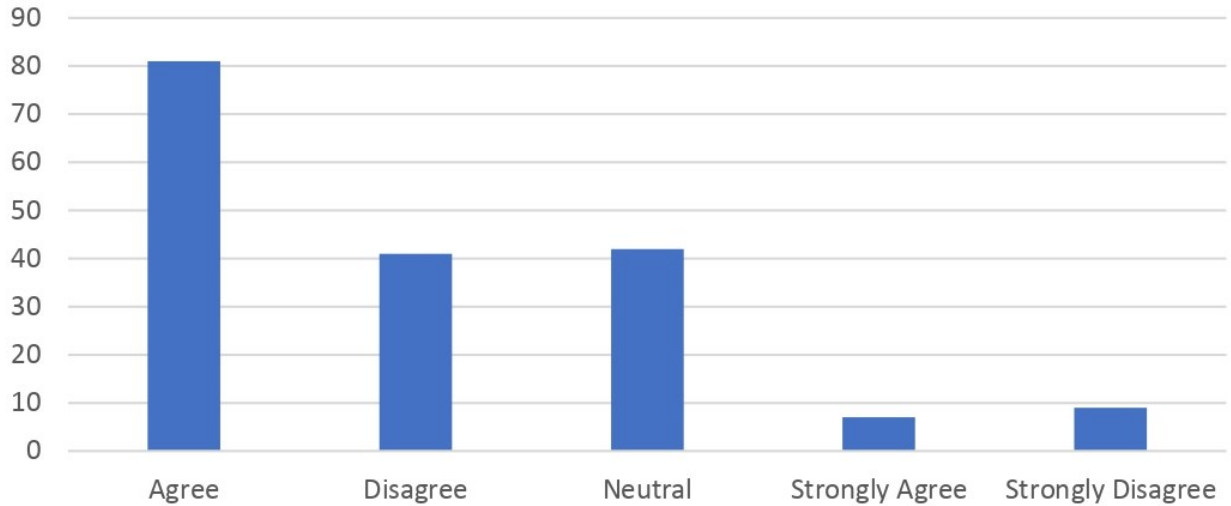

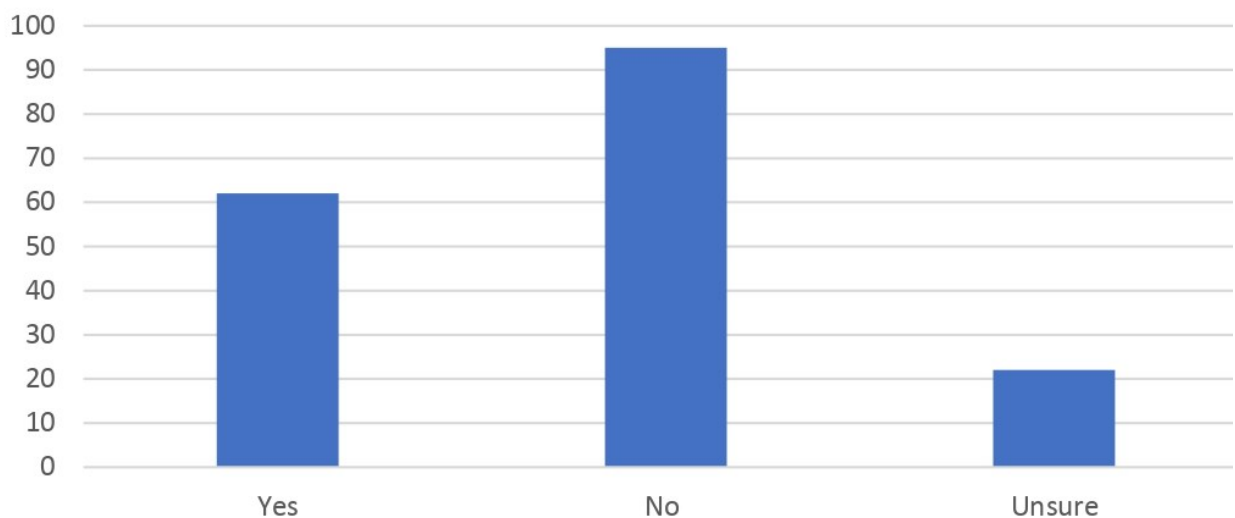Right: Volunteers conduct an interview on a resident's front steps.

Responses of the Survey Questions

In general, how would you rate the overall health of the community?

In general, my community has sufficient opportunities for physical activity.

In general, my community has sufficient opportunities for healthy eating.

Bar chart showing responses: Agree 81, Disagree 41, Neutral 42, Strongly Agree 7, Strongly Disagree 9.

Are you aware of efforts in your community to promote tobacco cessation?

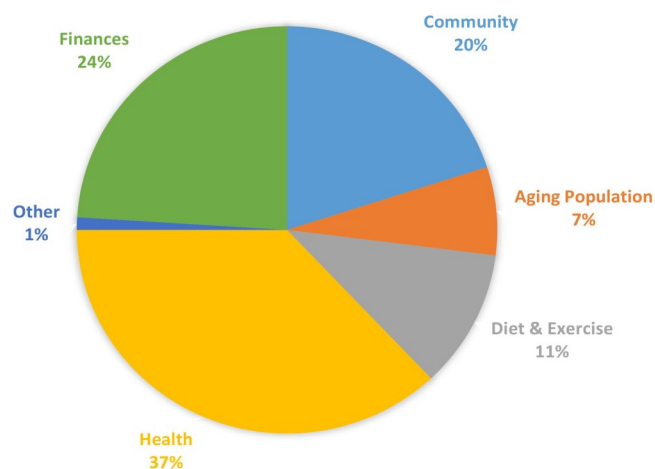Bar chart showing responses: Yes 62, No 95, Unsure 22.

How the next questions work:

At each household, the respondents were asked what the largest concerns are facing the household, the neighborhood and the community. For the purposes of this survey, community is defined as Reno County as a whole.

The first pie chart that you will see for each question is the overall breakdown of responses. These were open-ended questions, meaning that respondents were not given a list to choose from, they were free to say whatever they liked. All of these responses were recorded in writing and entered into and Excel spreadsheet.
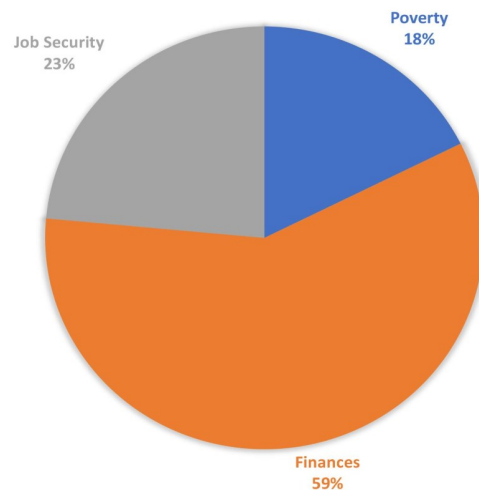
These responses were then grouped together into theme groups. For example, responses like "I don't have a car", "The bus doesn't stop where I need it to", and "It's too cold to ride my bike" would all be grouped into the theme "Transportation".

The pie charts that follow the overall breakdown of each question are a more detailed illustration of the responses that are contained within the largest theme groups.
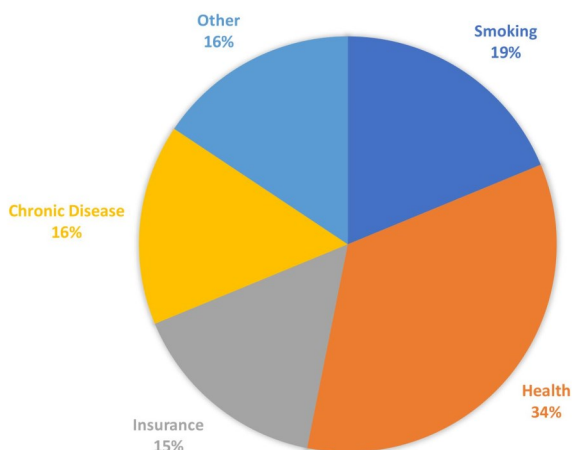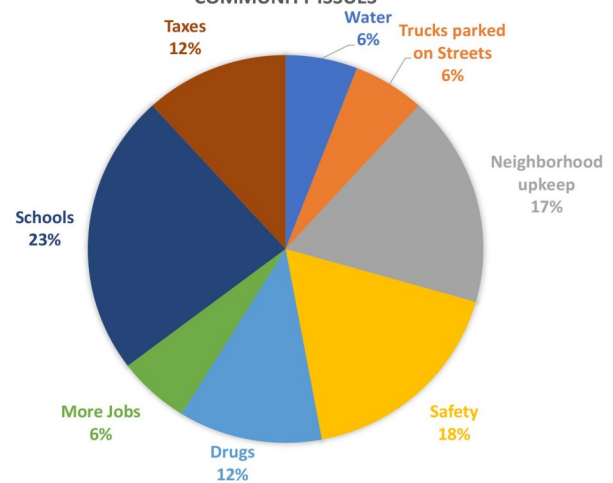
WHAT ARE THE BIGGEST CONCERNS FACING THIS HOUSEHOLD?

- Finances 24%
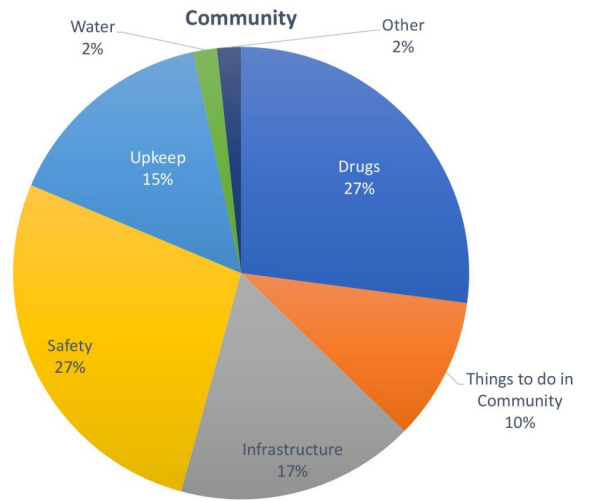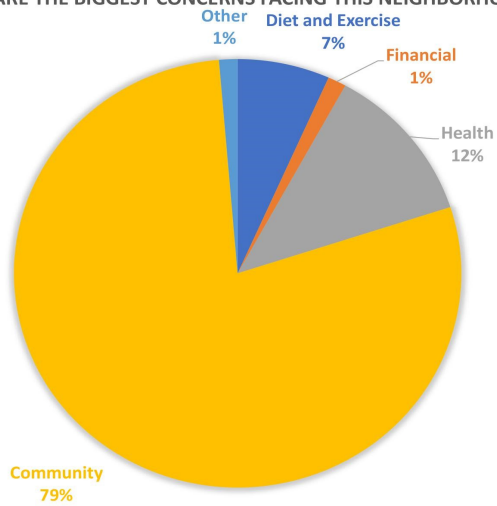- Community 20%
- Aging Population 7%
- Diet & Exercise 11%
- Health 37%
- Other 1%

OF THOSE THAT SAID FINANCES:

- Poverty 18%
- Job Security 23%
- Finances 59%

OF THOSE THAT SAID HEALTH:

- Other 16%
- Smoking 19%
- Health 34%
- Insurance 15%
- Chronic Disease 16%

COMMUNITY ISSUES

- Taxes 12%
- Water 6%
- Trucks parked on Streets 6%
- Neighborhood upkeep 17%
- Schools 23%
- Safety 18%
- Drugs 12%
- More Jobs 6%

WHAT ARE THE BIGGEST CONCERNS FACING THIS NEIGHBORHOOD?

Other 1%
Diet and Exercise 7%
Financial 1%
Health 12%
Community 79%

Community

Water 2%
Other 2%
Upkeep 15%
Drugs 27%
Things to do in Community 10%
Infrastructure 17%
Safety 27%

Health

34%
33%
11%
11%
11%

■ Access to Care ■ Health insurance ■ Health ■ Smoking ■ Chronic

WHAT ARE THE BIGGEST CONCERNS FACING THIS COUNTY?

Other 1%
Diet and Exercise 6%
Aging Population 3%
Financial 10%
Health 16%
Community 64%

COMMUNITY

More policing 5%
schools 5%
Things to do in community 23%
Safety 8%
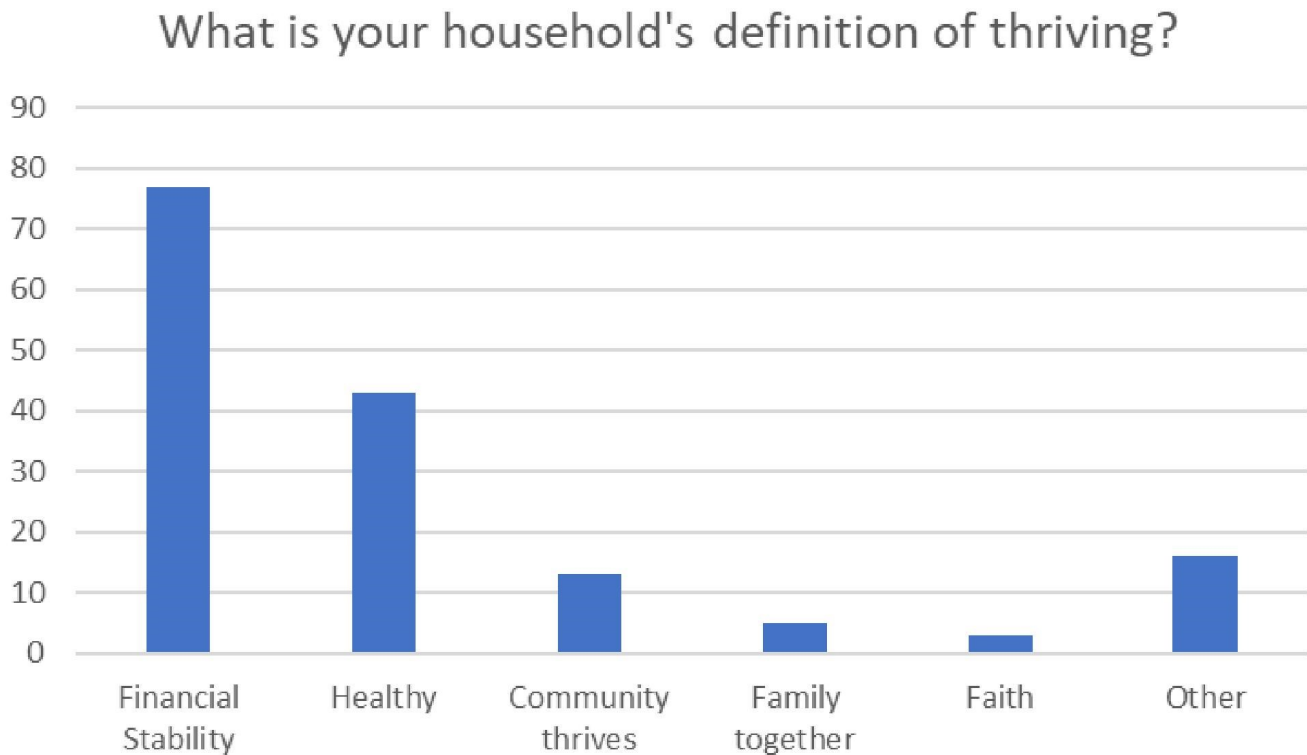Jobs 5%
Roads 15%
Taxes 3%
Drugs 36%
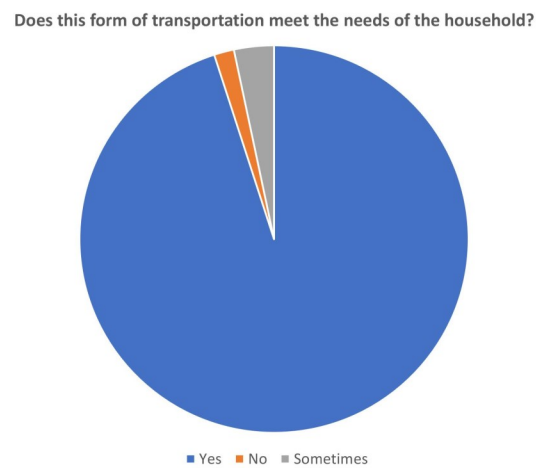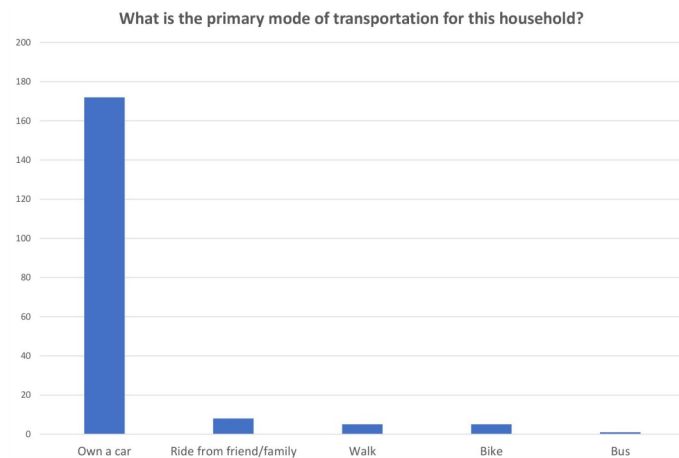
23
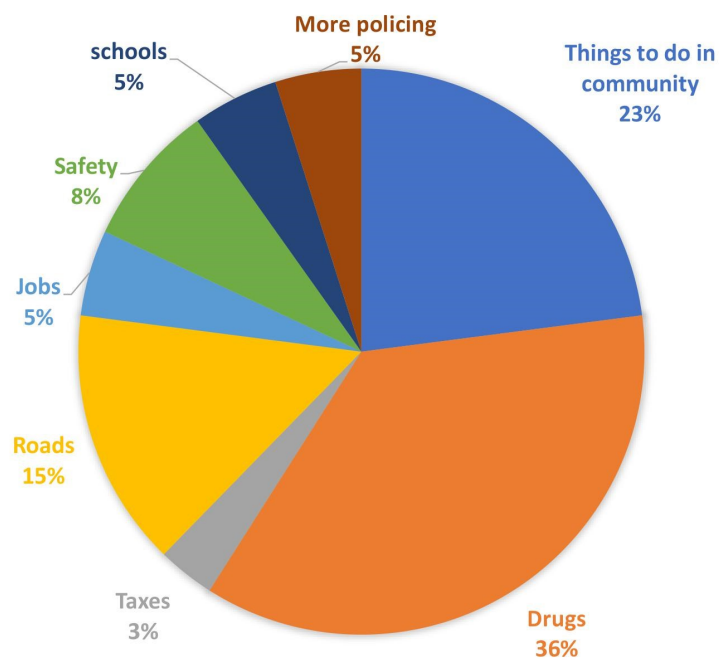
How do we define thriving?

The next question was asked at each house and was also open-ended.

Like the previous questions about concerns at various level, respondents were able to give any response that they wanted to and then all these responses were entered in an Excel spreadsheet for theme analysis.

These open-ended responses are categorized into the following themes:

What is your household's definition of thriving?

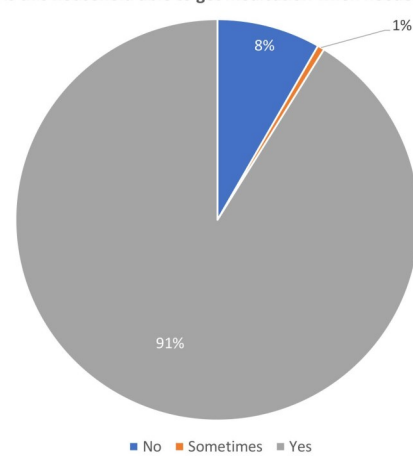| Category	Value
Financial Stability	77
Healthy	43
Community thrives	13
Family together	5
Faith	3
Other	16

All of the remaining questions asked in the survey were not open-ended. The respondents were either given responses to choose from or their response was matched to a pre-selected list of options by the volunteer asking the questions.
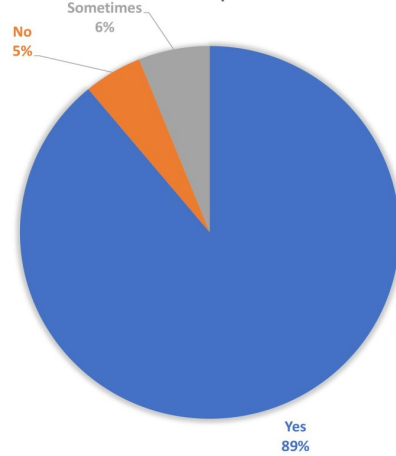
What is the primary mode of transportation for this household?

Own a car ~172; Ride from friend/family ~8; Walk ~5; Bike ~5; Bus ~1

Does this form of transportation meet the needs of the household?

Yes ■ No ■ Sometimes ■

IS YOUR HOUSEHOLD ABLE TO RECEIVE/GET HEALTH CARE WHEN NEEDED?

Sometimes 6%
No 5%
Yes 89%

is this household able to get medication when needed?

8%
1%
91%

No ■ Sometimes ■ Yes ■

DOES ANYONE IN YOUR HOUSEHOLD HAVE A CHRONIC DISEASE?

Yes 44%
No 55%
Unknown 1%

Does your household know how to manage the chronic disease?

No ■ Yes ■
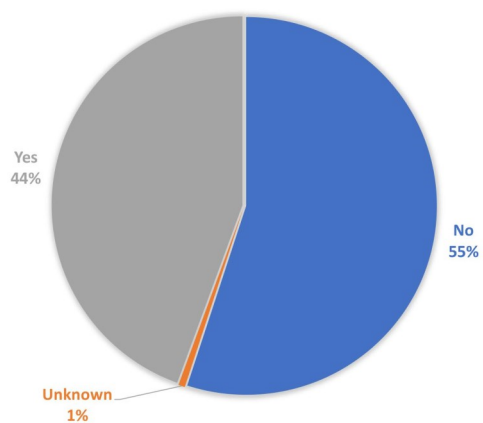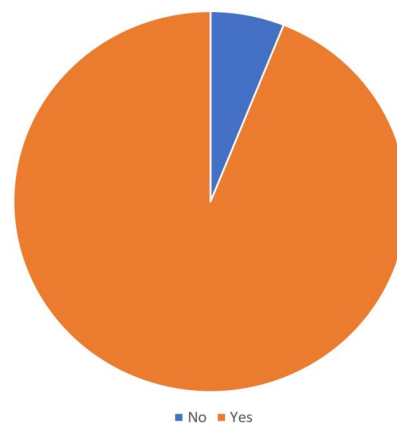
Does anyone in the household struggle with mental health?

Yes 26%
No 72%
Unsure 2%

- Yes
- No
- Unsure
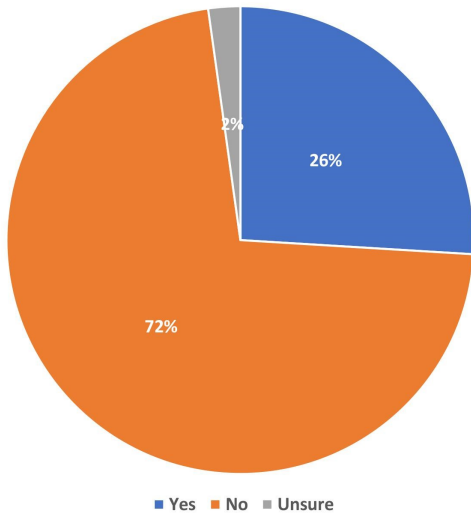
Do all members of this household feel safe in:

	Home	Neighborhood	Community	School
Yes	~177	~158	~148	~119
No	~4	~18	~21	~20
Sometimes		~4	~8	

- Yes
- No
- Sometimes

Is Anyone In The Household Planning on Moving In The Next Year?

- Yes
- No
- Maybe
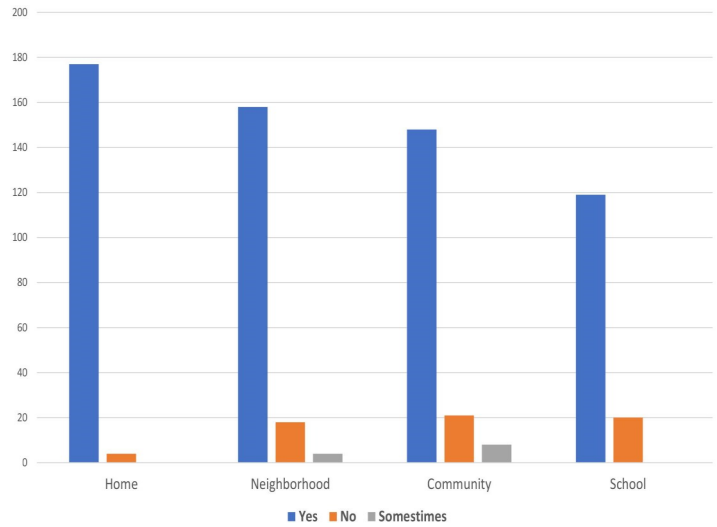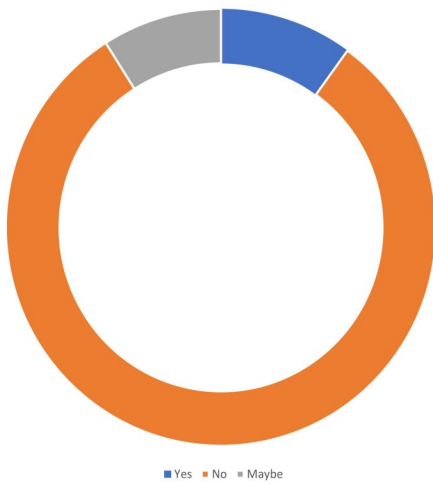
Is the health of anyone in the household affected by environmental issues?

- Yes
- No
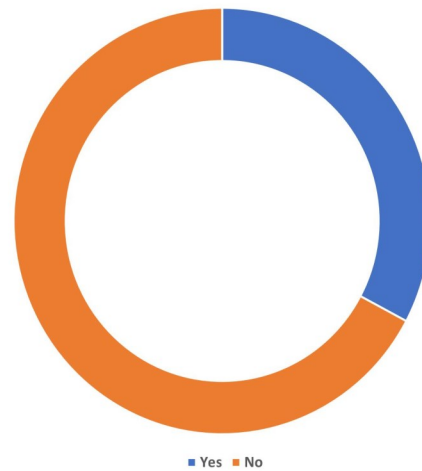
Is your health is affected by the environment:

If yes, what?

	Value
Allergies	12
Dust/Pollen	20
Harvest	4
Water Quality	3
Burning Fields	1
Other	10

Do you have 3 days of food and water for everyone in the house?

- Yes
- No
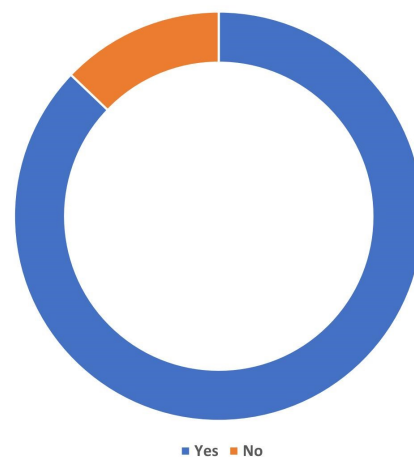
Thanks to relationship between the Reno County Health Department and the University of Kansas School of Medicine-Wichita, we were able to have Riley Hazard, an MPH student, intern with us for the Fall of 2018. Riley conducted analysis of the survey results, especially the open-ended responses and the relationships between survey responses and other characteristics like income and census tract.

We would like to thank Riley and the KU School of Medicine's MPH Program for their assistance with this project.
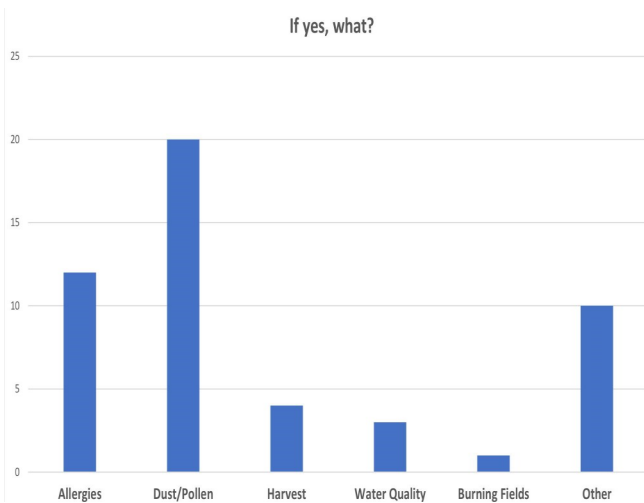
Pictured below are Melissa Armstrong, Site Director for the MPH Program in Wichita, Nick Baldetti, Reno County Health Department Director and Health Officer, and Riley Hazard, Masters of Public Health student, at Riley's presentation of her findings to the Community Health Assessment Committee on January 14, 2019.

The analysis of the survey results when compared to secondary data available at the same geographic level follows. The pages immediately following are graphs and charts that are visual representations of these relationships. The full analysis and data tables are included as an appendix.

Analysis of Survey Results and Relationships

Methods Used

- Categorical Data

- Chi Square analysis

- R Studio

- 95% Confidence interval

- Alpha =.05

- Compared to Census Tract

Data Grouping

Health	Community	Diet & Exercise	Aging	Finances	Other
Access	Things to do	Eating Right	Aging	Meeting Needs	Mold
Home Health	Youth Activity	Exercising	Caring for Parents	Financial Security	Environment
Insurance	Coming Together	Too much fast food	Help at Home	Having Enough	Ghosts
Diabetes	Community Support	Not Enough Healthy Options		Bills Paid	
Hep C	More Safety				
Tobacco Cessation	Improvement in schools				

Relationships Found

- Mental Health Status X Thriving

- Support of TF Parks X Impact by Environmental Factors

- Household Concern X City Lived In

- County Concern X City Lived In

- Ability to Afford Medication X City Lived In
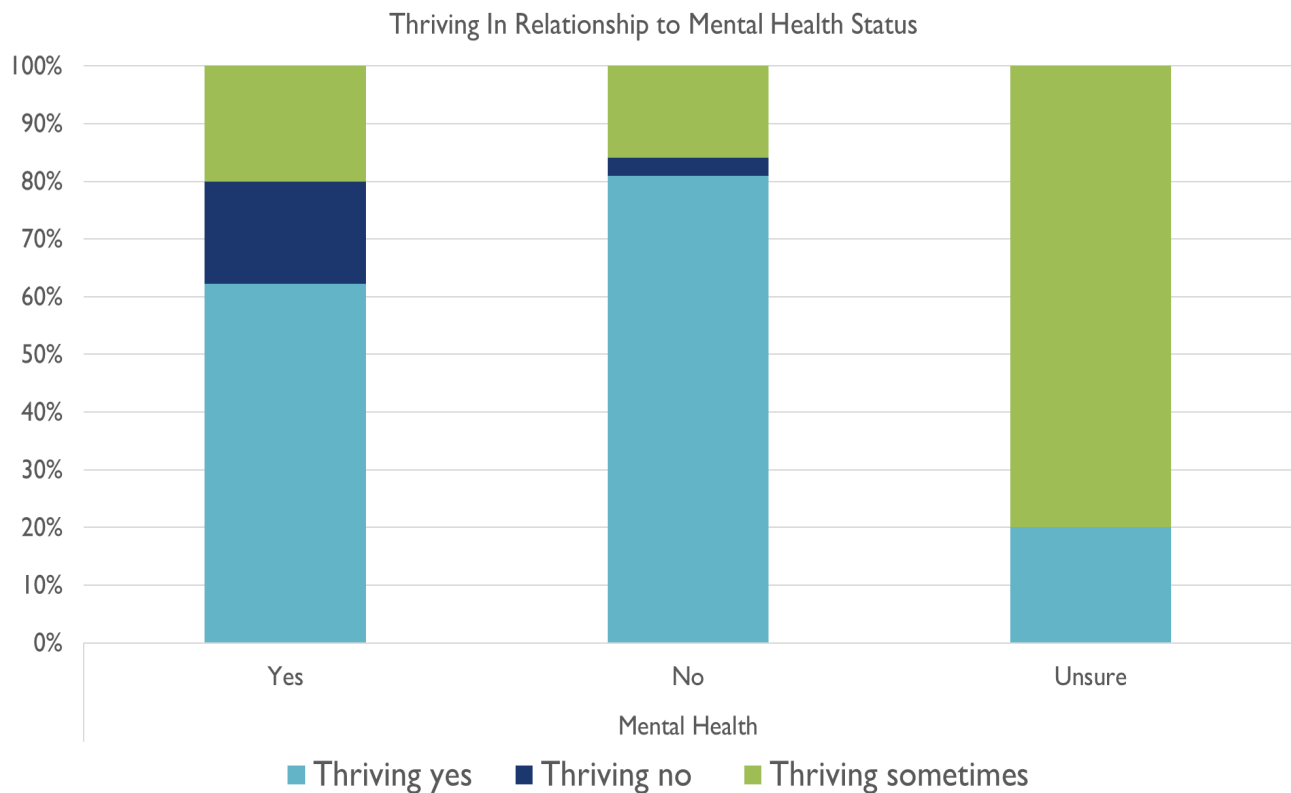
For those who reported having a member of their household struggling with mental health, there is higher percentage who also responded to not be thriving or thriving sometimes. Percentage of populations used due to different population sizes. Yes= 45 No= 125 Unsure= 5
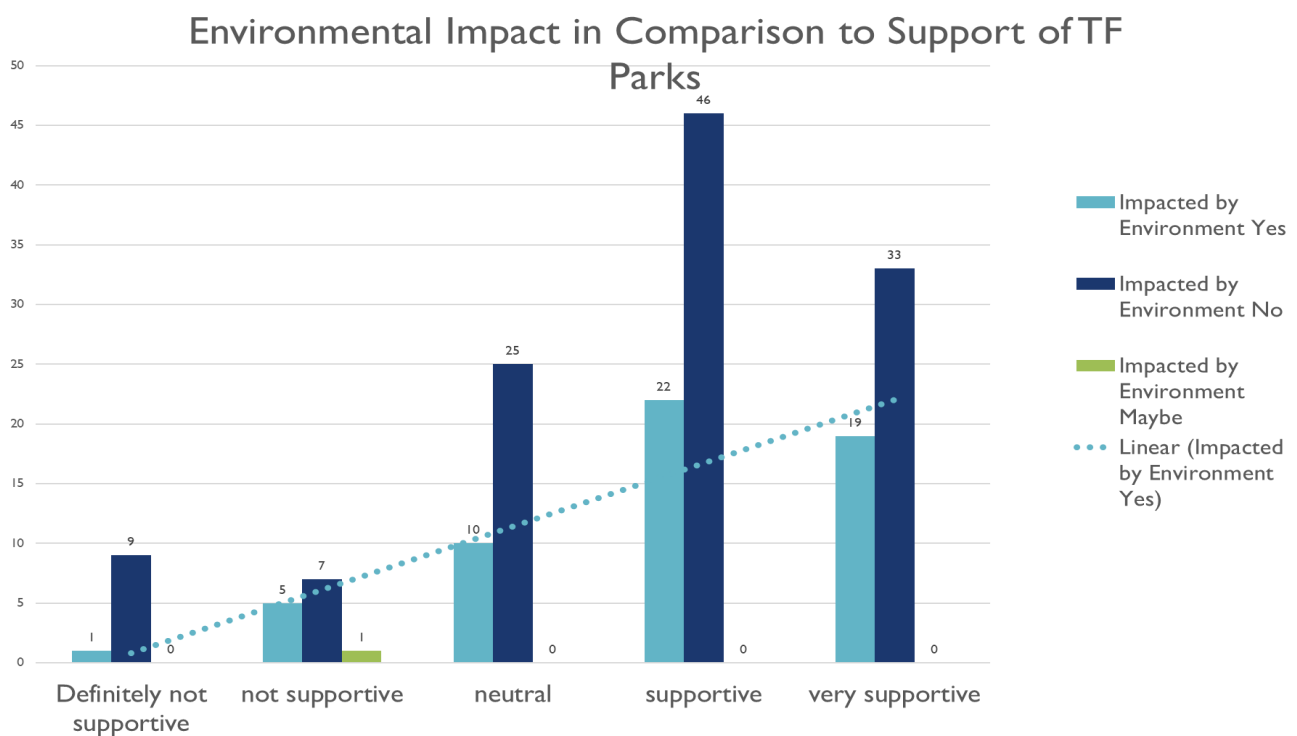
People who reported being impacted by environmental factors were more supportive of Tobacco Free Parks.

Comparing Relationships to Census Tract

- 2010 Census tract used

- New variable City created

- Hutch: Central was grouped together

- All cities are weighted

To be able to compare the data with the census tract, census tracts needed to be matched to a city. This was done using the census tract cluster number. Since Hutch Central had four different tracts, they were grouped together. The tract information such as life expectancy and income were then averaged between the four. Data was ran both ways and found no significant difference in results. Cities were also weighted to better compare for those that had larger populations surveyed.

Description	Census Tract #
Hutch: Northeast	20155000100
Hutch: Central	20155000200
Hutch: Northwest	20155000300
Hutch: West	20155000400
Hutch: Central	20155000500
Hutch: Central	20155000600
Hutch: Central	20155000700
Hutch: South	20155000800
Hutch: East of 61	20155001000
East and North of Hutch	20155001100
Willowbrook	20155001200
South Hutch	20155001300
Haven	20155001400
Buhler	20155001500
Nickerson	20155001600
Fairfield	20155001700
Pretty Prairie	20155001800

Reno County Census Tracts (outside of Hutchinson)
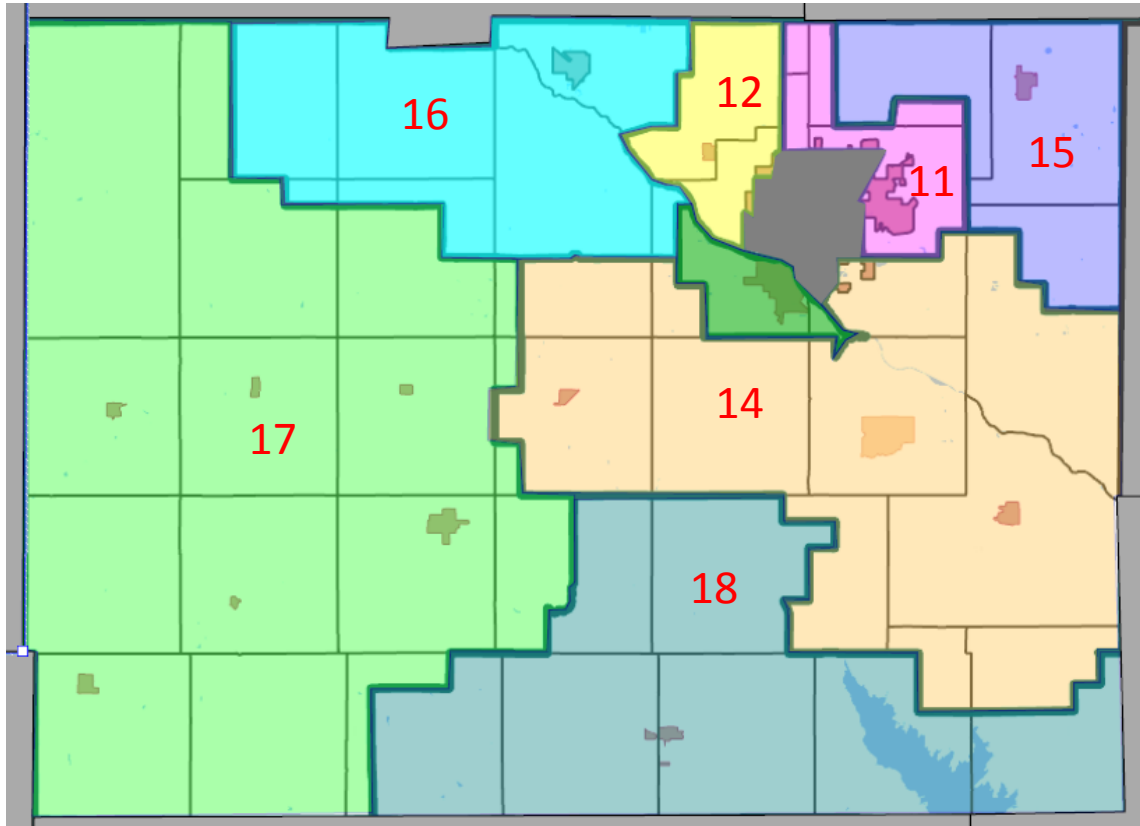
Census Tracts in Hutchinson

Life Expectancy by Neighborhood

Chart showing Life Expectancy by Neighborhood (vertical axis 0 to 0.8):

Neighborhood	Value
Hutch: Northeast	0.31
Hutch: Central	0.49
Hutch: Northwest	0.41
Hutch: West	0.26
Hutch: Central	0.53
Hutch: Central	0.62
Hutch: Central	0.53
Hutch: South	0.52
Hutch: East of 61	0.58
East and North of Hutch	0.14
Willowbrook	0.14
South Hutch	0.68
Haven	0.12
Buhler	0.13
Nickerson	0.28
Fairfield	0.24
Pretty Prairie	0.23

Household Income by Neighborhood

Chart showing Household Income by Neighborhood (vertical axis 0 to 60,000):

Neighborhood	Value
Hutch: Northeast	55,000
Hutch: Central	56,000
Hutch: Northwest	54,000
Hutch: West	41,000
Hutch: Central	43,000
Hutch: Central	33,000
Hutch: Central	35,000
Hutch: South	30,000
Hutch: East of 61	34,000
East and North of Hutch	55,000
Willowbrook	47,000
South Hutch	44,000
Haven	49,000
Buhler	49,000
Nickerson	47,000
Fairfield	44,000
Pretty Prairie	49,000

Source: US Census Bureau

Single Parent Families and Teen Births by Neighborhood
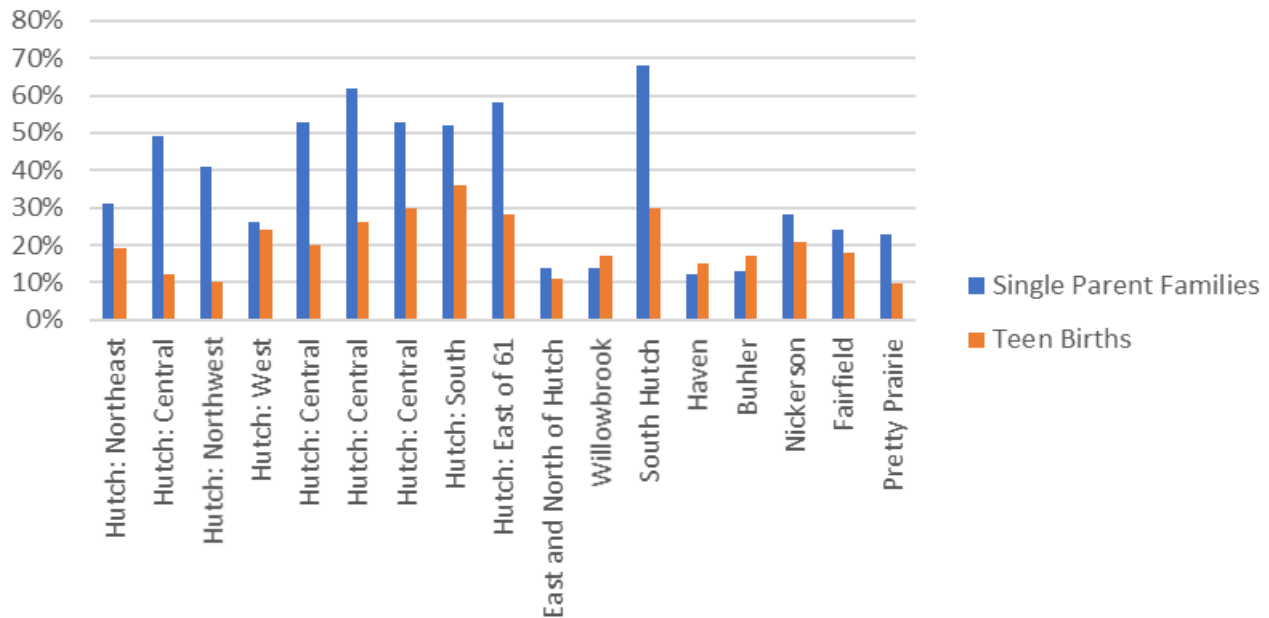
The orange bars represent the percentage of women within each neighborhood who have given birth as a teenager. That means that women of any age, if they ever gave birth before the age of 20, are in included in this number.

The blue bars represent the percentage of single parent families within each neighborhood at the current time only.

Source: US Census

City Concern

Source: USA LEEP

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Life Expectancy

Life Expectancy chart showing values for: South Hutch (70), Hutch: NE (71), Hutch: South (73), Hutch: Central (76), Willowbrook (76.3), Nickerson (76.8), Pretty Prairie (77.3), Hutch: West (78.8), Buhler (79.6), Haven (80), Hutch: NW (83.4)
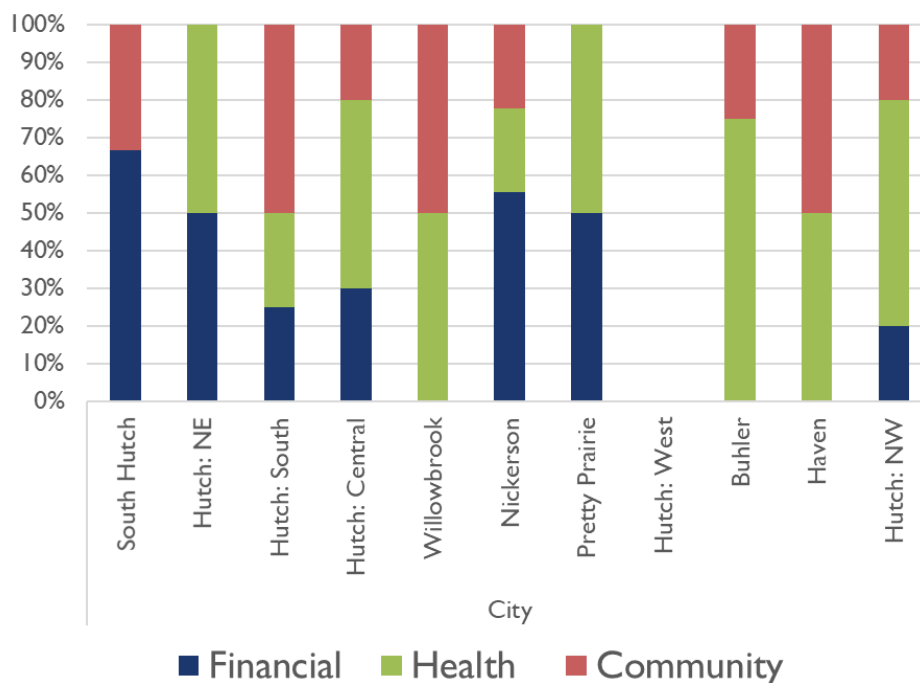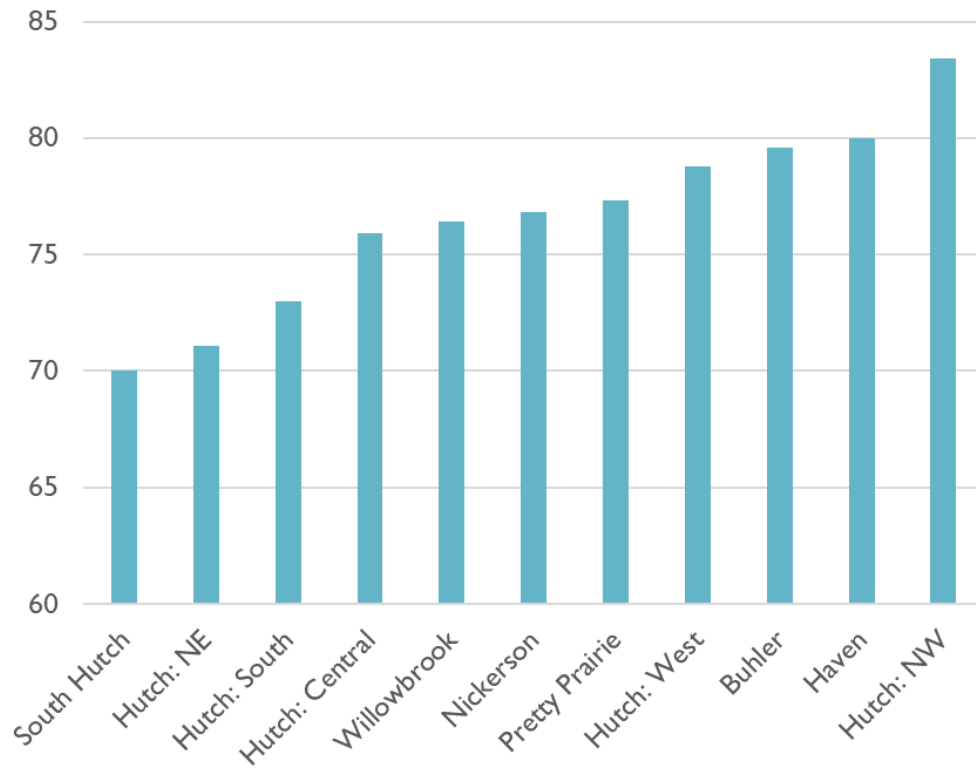
Source: USA LEEP

County Concern

County Concern stacked bar chart with categories: Diet and Exercise, Financial, Community, Aging, Health. Cities: Hutch: South, Hutch: West, Hutch: Central, South Hutch, Nickerson, Willowbrook, Buhler, Haven, Pretty Prairie, Hutch: Northwest, Hutch: Northeast

City
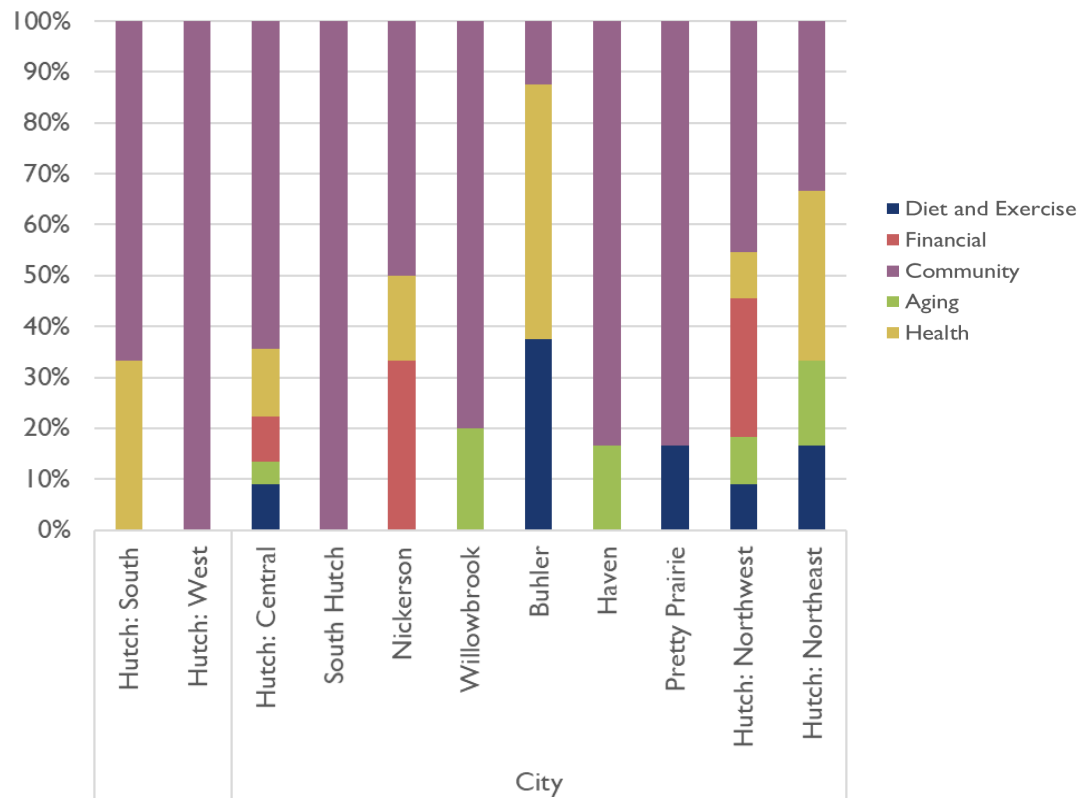
Household Income
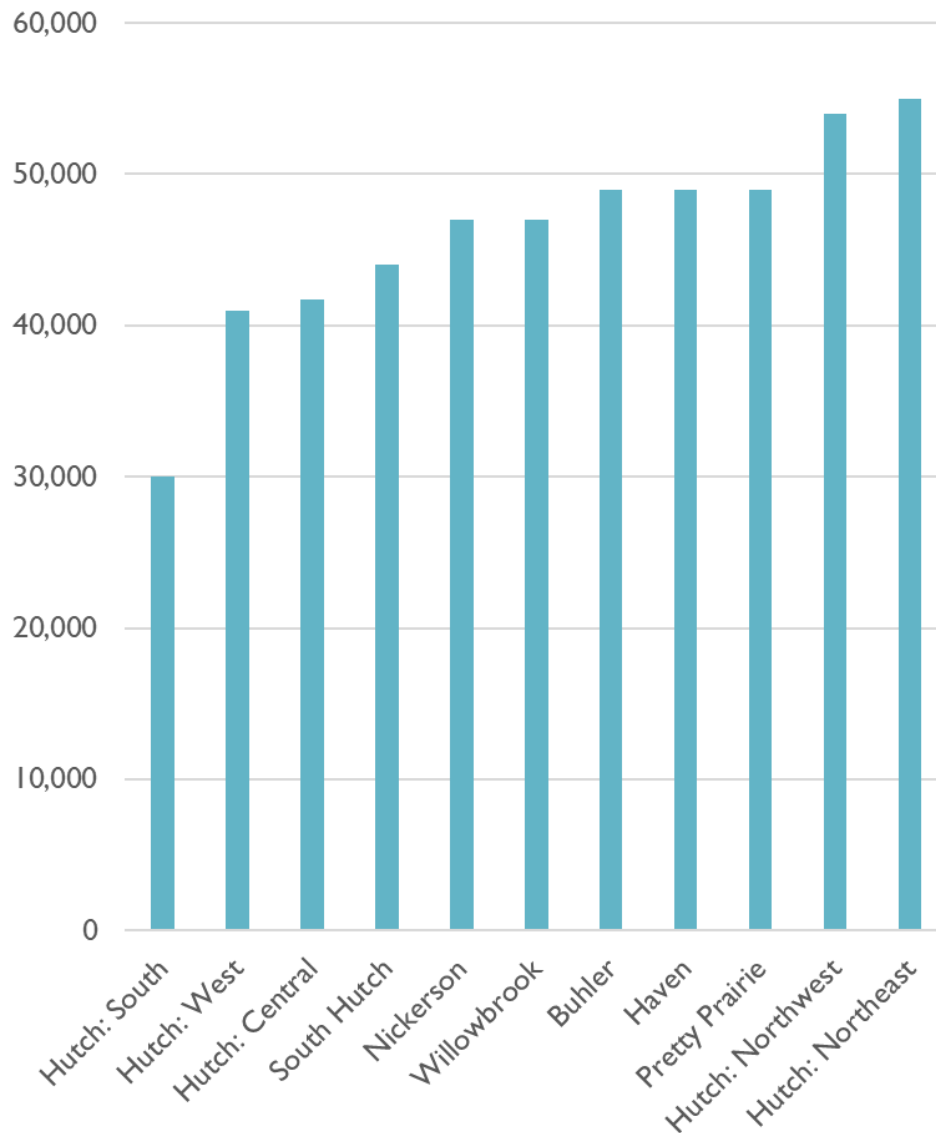
For cities with lower incomes, their biggest concern is with the community. As income goes up concerns begin to shift towards diet and exercise or health or aging. Here is where the biggest difference in the Hutch: Central blocks really showed. Broken down further, they more closely follow the trend.

Ability to Afford Medications by City
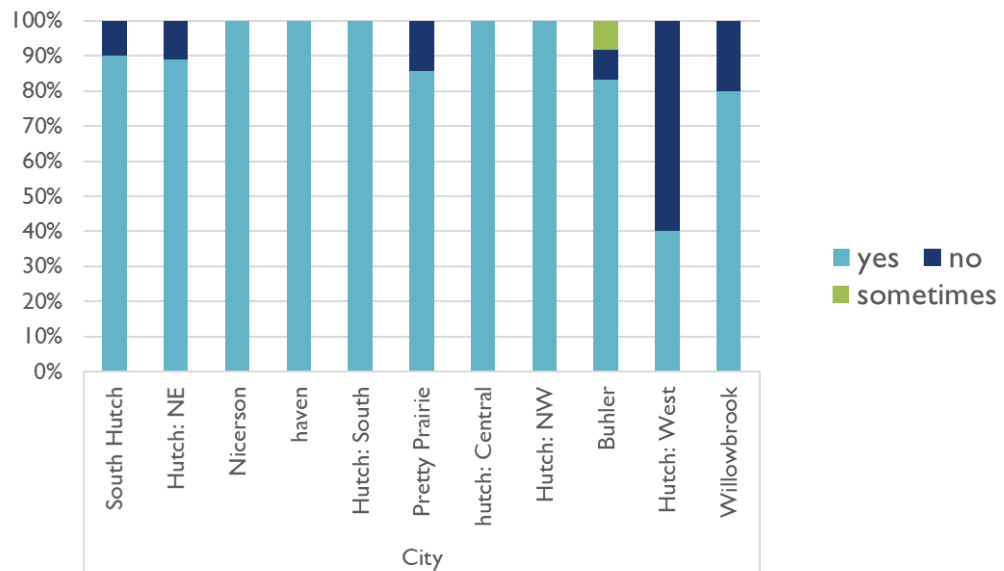
Legend: yes (teal), no (navy), sometimes (green)

X-axis (City): South Hutch, Hutch: NE, Nicerson, haven, Hutch: South, Pretty Prairie, hutch: Central, Hutch: NW, Buhler, Hutch: West, Willowbrook

Median Rent By City

X-axis: South Hutch, Hutch: NE, Nicerson, haven, Hutch: South, Pretty Prairie, hutch: Central, Hutch: NW, Buhler, Hutch: West, Willowbrook

Source: US Census Bureau

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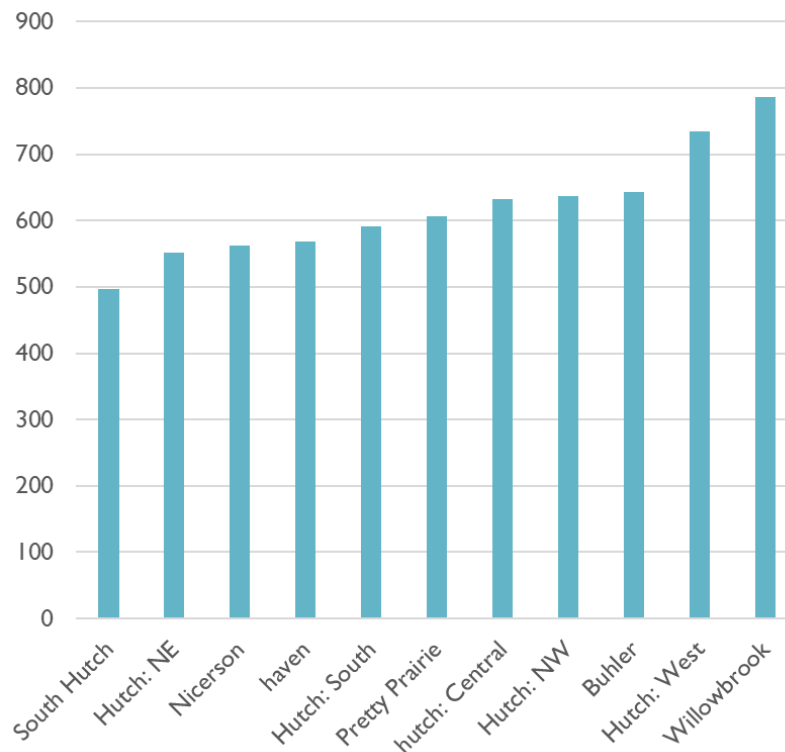
Ability to Afford Medication and City Lived in

•Hutch: Northwest, Hutch: Northeast, Buhler, and Haven have some of the highest Household income ($54,000, $55,000, $49,000, and $49,000 respectively), and no participant surveyed reported any issue affording prescriptions when needed (0.00%).

•Hutch: Northwest has the highest life expectancies (83.4 years) and 100% of respondents reported ability to afford medications when needed.

•Hutch: South has one of the lowest life expectancies (73 years) and 60% of respondents reported an inability to afford medications when needed.

Conclusions

• People in Reno County who reported struggling with mental health were less likely to define themselves as thriving.

• People in Reno County who view their health is impacted by environmental factors were slightly more supportive of tobacco free facility initiatives.

• Household and County concerns vary greatly by city. Cities with lower median incomes were more often concerned about community issues and finances whereas those on the other side of the spectrum were more concerned with health.

• Ability to afford medications varies by city lived in within Reno County.

Key Definitions

The following definitions will be useful in examining the data that follows:

Incidence: the occurrence of a disease or condition within a specified period of time
(think: the risk of contracting the disease or having the condition)

Prevalence: the proportion of a population who have a disease or condition within a specified period of time
(think: how widespread a disease or condition is)

Morbidity: having a disease or condition
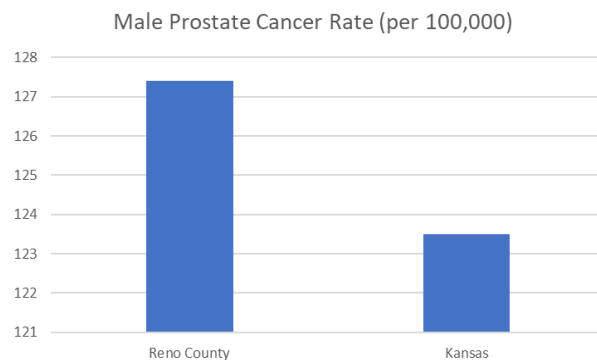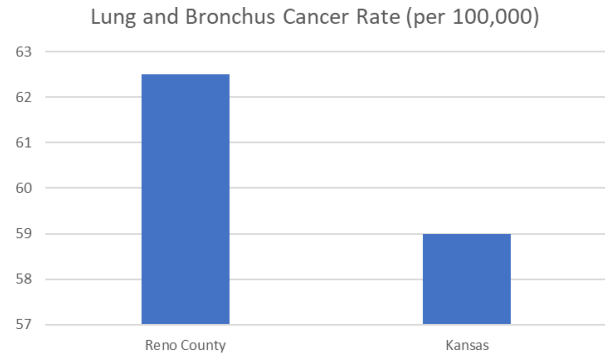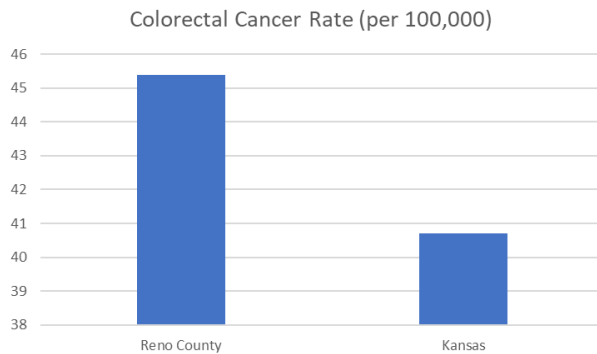*(think: the number of people who are sick)*

Mortality: death

Disparity: difference in health outcomes across subgroups of the population

Cancer

Cancer is most simply defined as the cells within the body dividing without stopping and spreading into surrounding tissues. There are more than 100 different types of cancer. Cancer is one of the leading cause of death worldwide. In the United States, cancer death rates have fallen since the 1990's. There are still certain types of cancer whose rates remain the same or are on the rise. There are also certain sociodemographic groups who have higher rates of certain cancers.

Source: National Cancer Institute: Cancer Statistics, 2019.

Colorectal Cancer Rate (per 100,000)

Lung and Bronchus Cancer Rate (per 100,000)

Male Prostate Cancer Rate (per 100,000)

Using Kansas Health Matters, the rates of different types of cancer for Reno County and the state of Kansas were compared. Reno County has higher rates of colorectal, lung and bronchus, and male prostate cancer than the state (shown in these graphs).

Source: Generated by www.kansashealthmatters.org on February 15, 2019.

Reno County's rate for cancer among the Medicare Population is comparable to the state's rate.
Reno County's female breast cancer rate (111.5 per 100,000 people) is lower than the Kansas rate (123 per 100,000 people) and is continuing to trend downwards.

Source: Kansas Health Matters [Internet]. Topeka (KS): Kansas Partnership for Improving Community Health [cited 22 February 2019]. Available from http://www.kansashealthmatters.org.

Populations Affected by Cancer

Cancer affects every group of people. There are disparities in cancer screenings, incidence and mortality among some groups. The Kansas Department of Health and Environment authored the Kansas Cancer Control Plan which highlights these disparities.

Screenings: People who earn less than $15,000 a year <u>or</u> who have less than a high school diploma or who are uninsured are more likely to not receive the recommended screenings for colorectal, breast and cervical cancers. Within Kansas, people living in Frontier and Rural Counties are also less likely to receive colorectal and breast cancer screenings. Across the state, Hispanics are less likely to get the recommended colorectal cancer screenings. *Source: Kansas BRFSS via Kansas State Cancer Control Plan.*

Incidence: Reno County is designated as a Semi-Urban county in Kansas. Semi-Urban counties see a higher incidence of melanoma and breast, prostate, and lung cancers. These counties also see a higher incidence of late-stage prostate and lung cancers. African Americans see a higher incidence of overall and late stage colorectal, breast, prostate, and lung cancers. Hispanic populations experience only a higher incidence of cervical cancer. Males have a higher incidence of melanoma, colorectal and lung cancers than females in Kansas. *Source: Kansas Cancer Registry via Kansas State Cancer Control Plan.*

Mortality: Semi-urban counties do not experience higher rates of cancer mortality than the state as a whole. African Americans have a higher mortality for colorectal, breast, cervical, prostate and lung cancers. Hispanic populations do not have a higher mortality rate for cancers in Kansas. Males have a higher mortality rate of colorectal cancer and melanoma. *Source: Kansas Vital Statistics via Kansas State Cancer Control Plan.*

Exposure: Different environmental exposures have been associated with various cancer risks. Smoking is the single largest behavior and exposure that can increase risk for cancer almost anywhere in the body. Adequate consumption of fruits and vegetables, as well as getting enough physical activity can reduce cancer risks. Exposure to Human Papilloma Virus can lead to several types of cancer. Radon exposure is the second-leading cause of lung cancer and ultraviolet radiation exposure causes most skin cancers.

Levels of Control: Incidence and mortality of cancers can be reduced by limiting exposure to risk factors, increasing early and regular screenings, and increasing access to treatment.

Cardiovascular Disease

Cardiovascular disease refers to various heart diseases, cerebrovascular and circulatory disorders and stroke. Cardiovascular disease is the leading cause of death in Kansas. Mortality from heart attack and stroke have decreased since 2000.

Prevalence: One out of three adults have some type of cardiovascular disease

Mortality: Age-adjusted cardiovascular disease death rate for Kansas is 299.3 per 100,000 people.

Risk Factors for Cardiovascular Disease:

- High Blood Pressure

- High Cholesterol

- Tabacco Use

- Diabetes

- Being overweight or obese

Who is working on this issue in Kansas:

The Kansas Heart Disease and Stroke Prevention Program, Heart and Stroke Alliance of Kansas, KDHE Diabetes Prevention and Control Program, Kansas Arthritis Program, KDHE Tobacco Use Prevention Program, Tobacco Free Kansas Coalition and the Kansas Cancer Prevention and Control Programs are all doing work to reduce the burden of cardiovascular disease in Kansas.

Strategies currently being implemented in Kansas:

- Clinical Interventions

- Community Action

- Health Communications

- Advocacy

Source: Kansas Heart Disease and Stroke Prevention Program. Kansas Action Plan for Heart Disease and Stroke Prevention: 2012-2017. Topeka, KS: Kansas Department of Health and Environment; 2012.

Years of Potential Life Lost
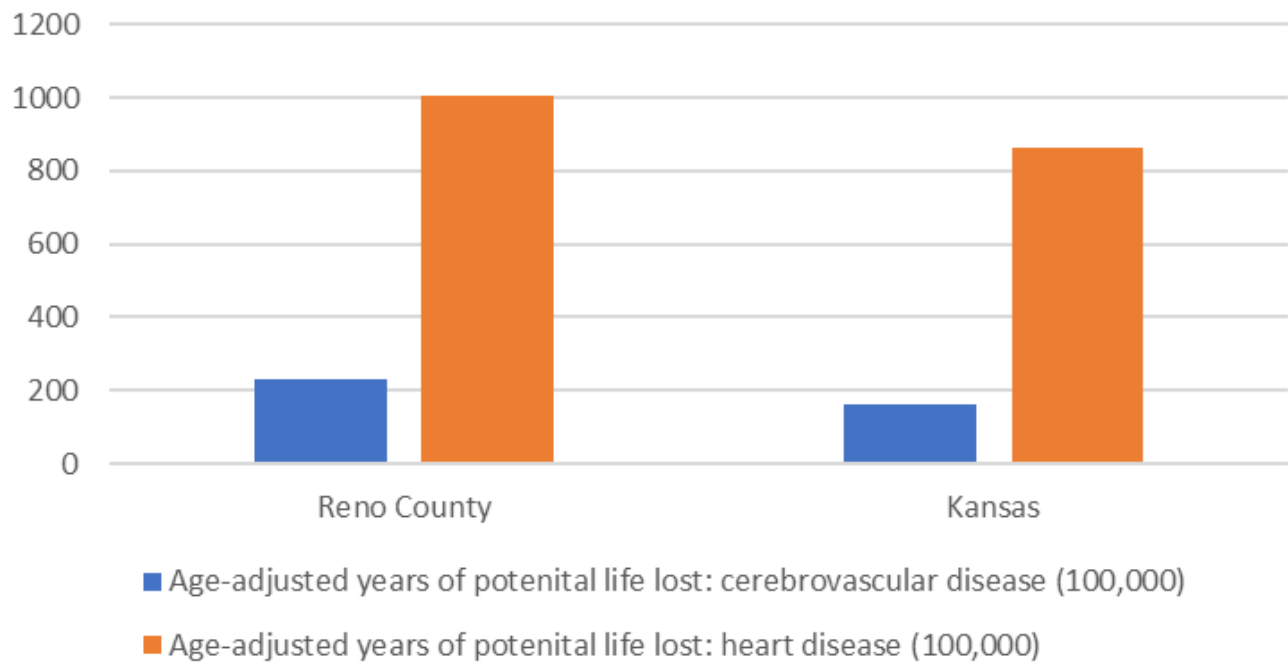
- Age-adjusted years of potenital life lost: cerebrovascular disease (100,000)
- Age-adjusted years of potenital life lost: heart disease (100,000)

Percentage of Adults Diagnosed with Hypertension

■ 2011 ■ 2013 ■ 2015
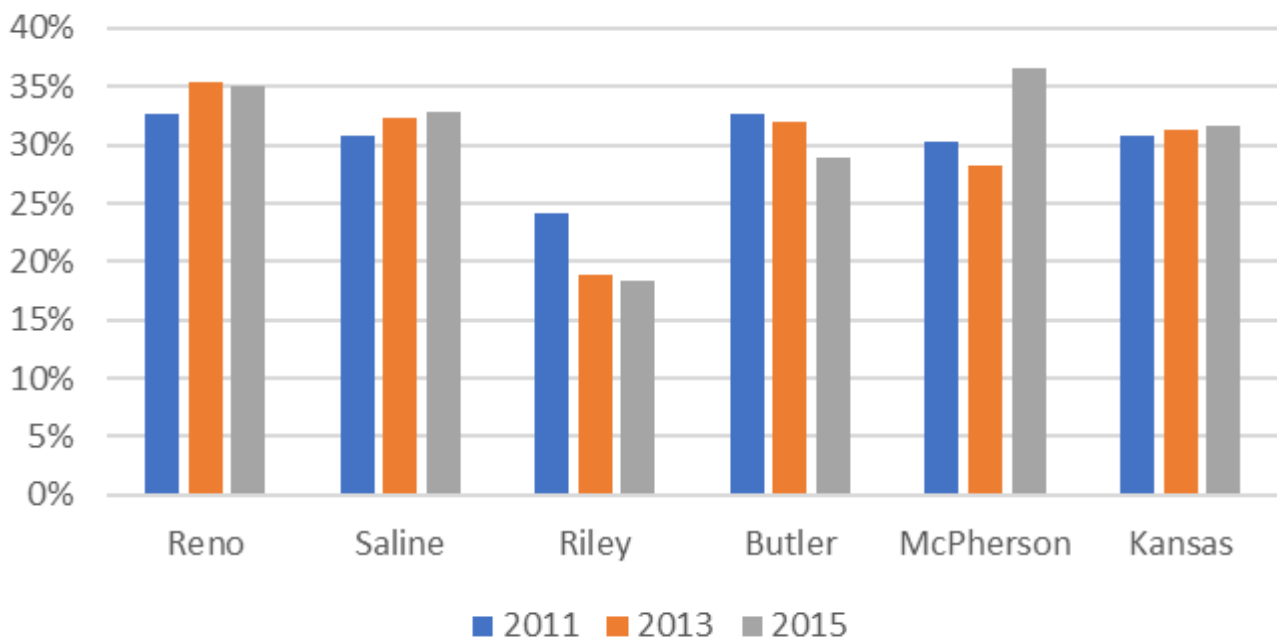
Oral Health

Strategies to Improve Oral Health:

- **Fluoride**: Fluoride varnish applied to the teeth of children and fluoridation of public drinking water systems

- Dental sealants applied to permanent teeth in children. *In Reno County, Prairie Star Health Center provides a school based sealant program at all public schools.*

- Strengthening the oral health workforce to lower the ratio of population to providers and increase access to dental care. *In Reno County, there are 22 oral health providers which means there is 1 provider for every 2,881 people.*

Populations at Greatest Risk:

- Seniors

- Low Income

- Children

- Tobacco users

- People with complicated medical history

- Alcohol users

Source: Bureau of Oral Health. 2013 Burden of Oral Disease in Kansas. Topeka, KS: Kansas Department of Health and Environment; 2013.

Percentage of Screened 3-12 Grade Students With No dental Sealants

Reno County	Kansas
70.20%	57.60%

Percentage of Screened K-12 Students with obvious dental decay

Reno County	Kansas
18.50%	16.50%
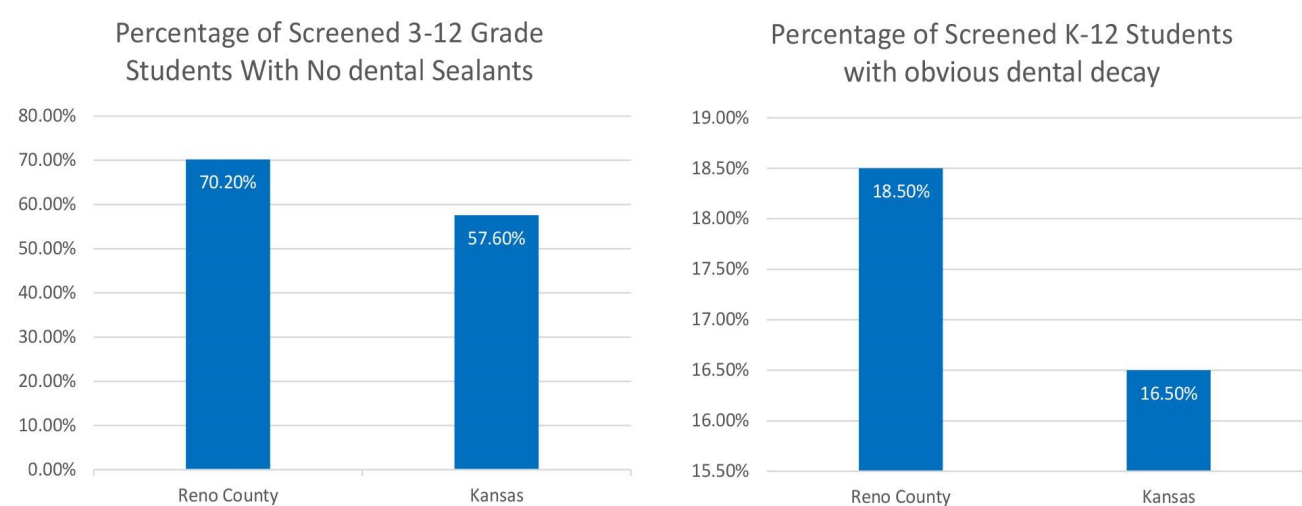
Source for both graphs: Data from Kansas Department of Health and Environment via www.kansashealthmatters.org on February 15, 2019.

Diabetes

Diabetes exists when the body either does not produce enough insulin or is unable to use the insulin it produces resulting in elevated blood sugar levels. The types of diabetes are: Pre-Diabetes, Type 1, Type 2 and Gestational.

Risk Factors:

- Overweight/obese

- Physical inactivity

- High blood pressure

- High cholesterol

- Smoking

Risk factors beyond a person's control: age, family history, race, ethnicity

Prevalence: Non-Hispanic African Americans and Hispanics have higher prevalence than non-Hispanic Whites. There is no difference in prevalence between genders, however prevalence increases with age for all groups.

Kansas Diabetes and Prediabetes Facts, KDHE, 2016

Percent of Adults Diagnosed with Diabetes

Chronic Kidney Disease: Medicare population
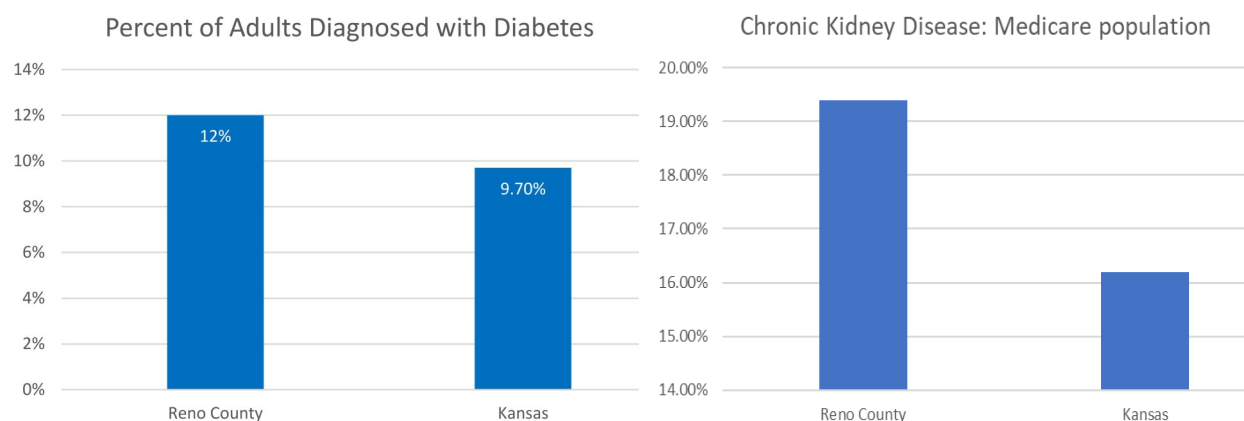
In addition to 1 out of every 10 Kansas having diabetes, an addition 1 out of every 15 Kansas has pre-diabetes.

Impacts of Diabetes: (increased prevalence of the following)

- Stroke

- Kidney Disease

- Heart Disease

- Heart Attack

- Retinopathy

Source for both graphs: Data from Kansas Department of Health and Environment via www.kansashealthmatters.org on February 15, 2019.

Prediabetes Management:

- Diet: more fruits, vegetables and fiber

- More physical activity

- Reducing weight

- Screenings recommended by primary care providers

Diabetes Management:

- Following diabetes care provider's recommendations

- Monitor blood sugar and blood pressure at home

- Have HbA1c tested every 3 months

- Diabetes management classes

- Other screenings as recommended (foot and eye exams, etc.)

Source: Bureau of Health Promotion. Kansas Diabetes and Prediabetes Facts.
Topeka, KS: Kansas Department of Health and Environment; 2016.

Life Lost to Diabetes and Nephrosis

■ Age-adjusted years of potenital life lost: diabetes (100,000)
■ Age-adjusted years of potenital life lost: nephrotic (100,000)

Age-adjusted diabetes mortality rate (per 100,000 population)
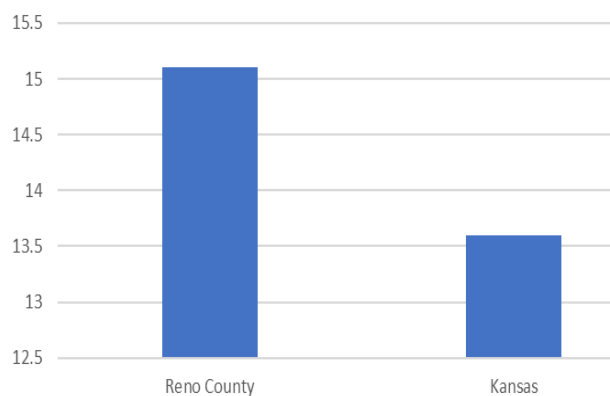
Source for both graphs:
Data from Kansas Department of Health and Environment
via www.kansashealthmatters.org on February 15, 2019.

Respiratory Disease

Respiratory diseases can range from asthma to COPD to respiratory infections and pneumonia. They can also include cancers of the airways, which we included in our Cancer section. According to the World Health Organization, the major risk factors of respiratory diseases are:

- Tobacco Smoke
- Second hand smoke
- Indoor air pollutants
- Outdoor air pollutants
- Allergens
- Occupational agents

Nutrition and past infectious diseases may also impact respiratory health.

Source: Risk Factors for Chronic Respiratory Disease, WHO, 2018.

33% in Reno County report that the environment affects their health. Of those, the causes were allergies, dust/pollen, harvest, water quality and burning fields.
32% in Reno County are aware of efforts in the community to promote tobacco cessation.

Percent of Adults who Currently Smoke Cigarettes

Legend: ■ 2011 ■ 2013 ■ 2015
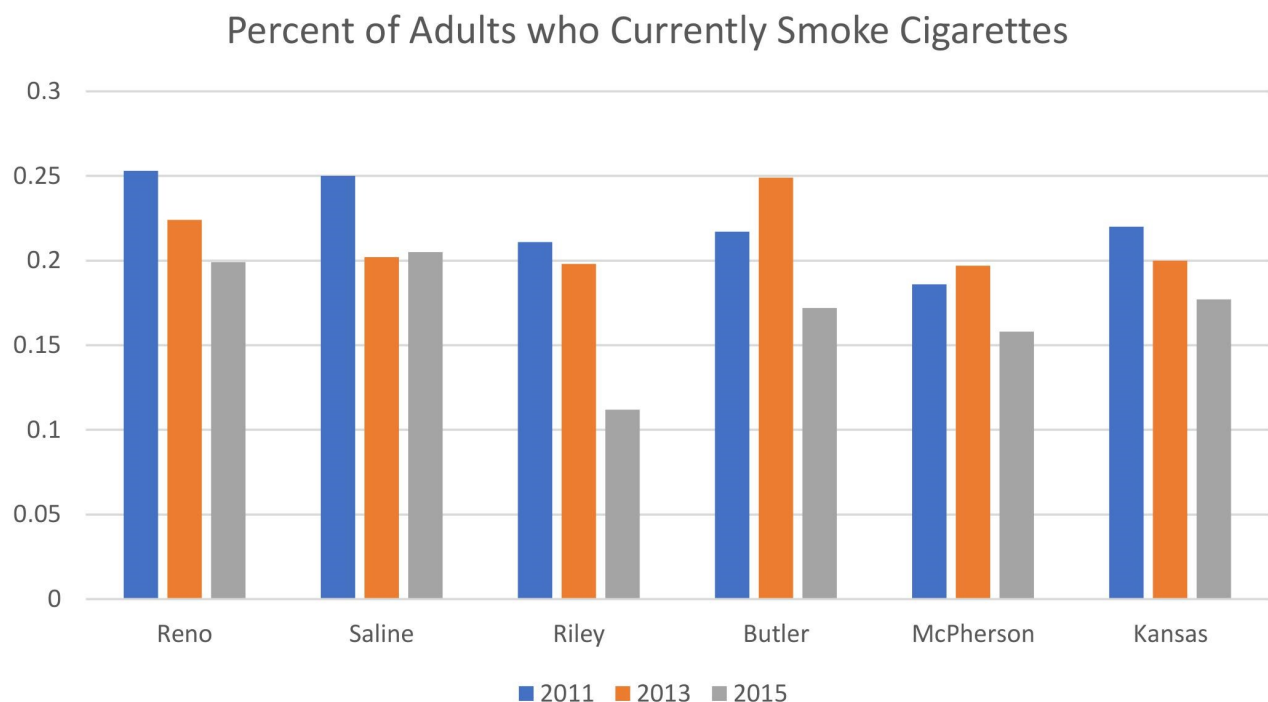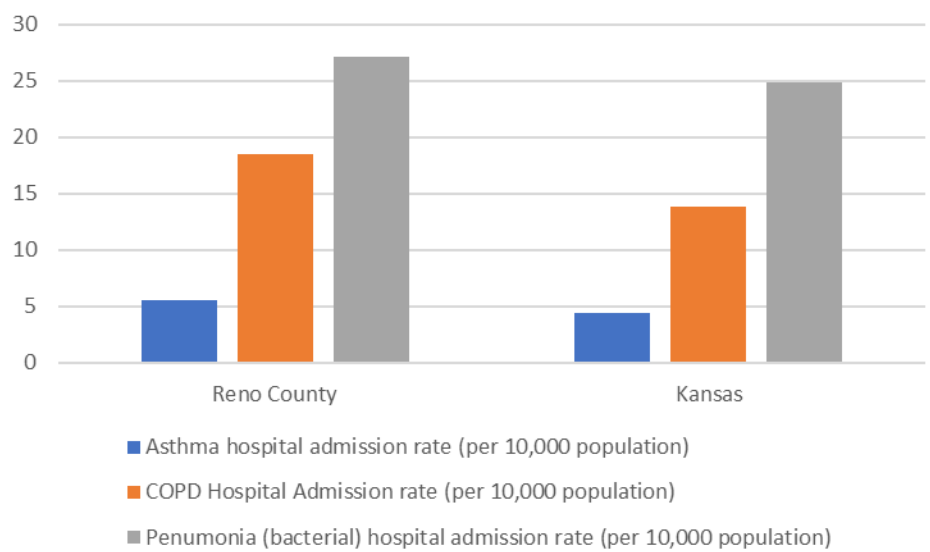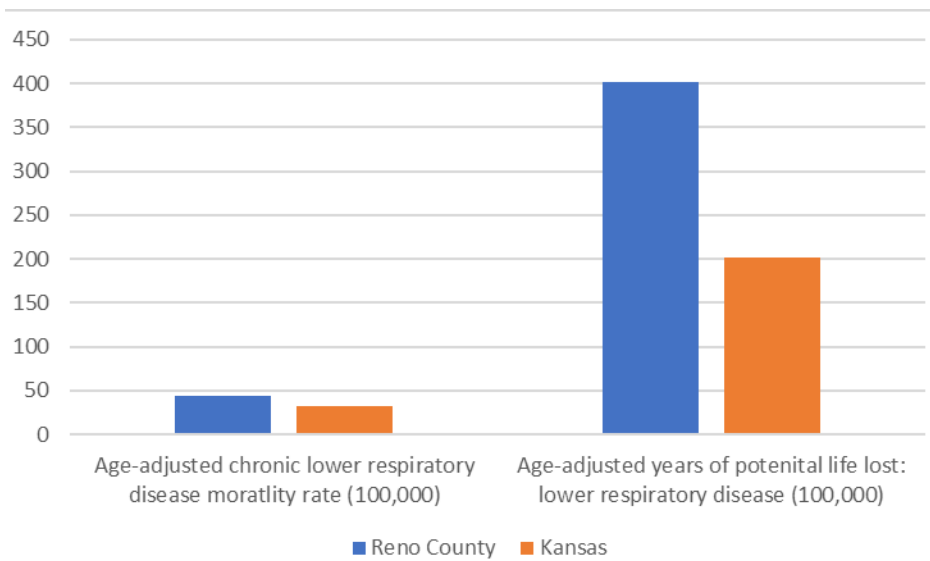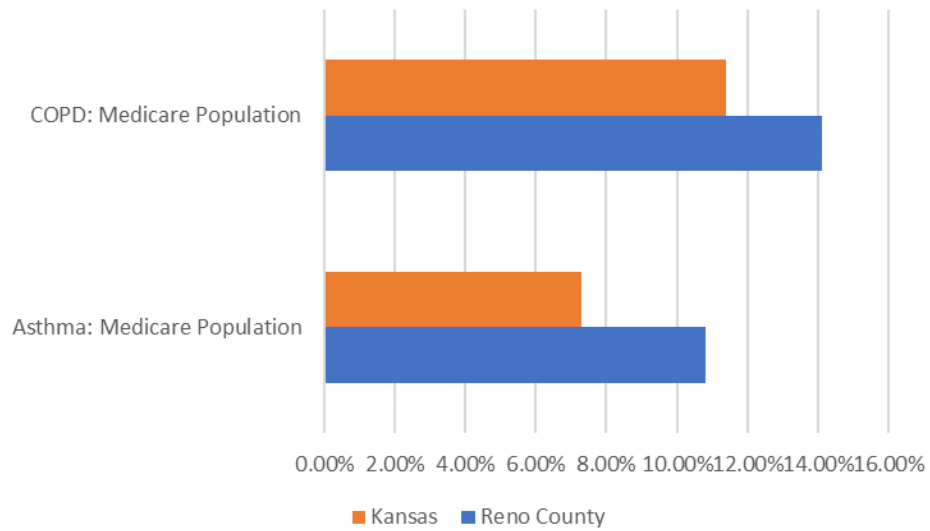
Source for all graphs: Data from Kansas Department of Health and Environment
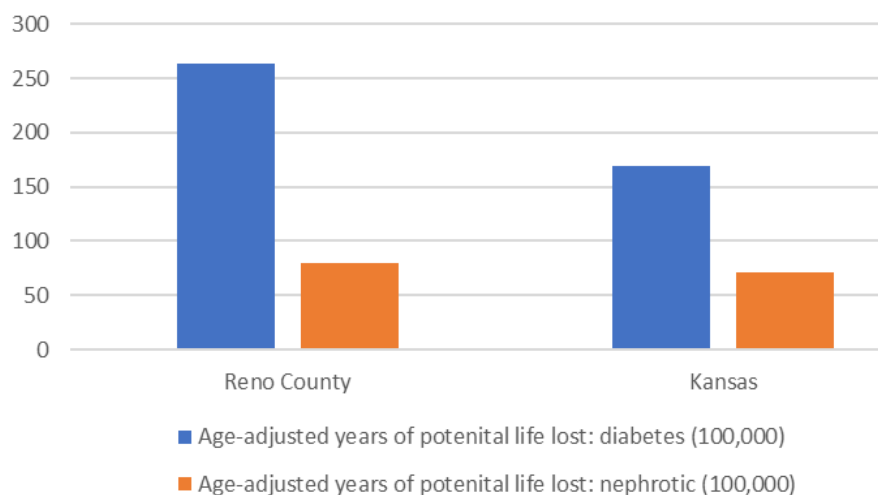via www.kansashealthmatters.org on February 15, 2019.

Maternal and Child Health

Infant mortality is defined as the death of an infant before one year of age for every 1,000 live births. The infant mortality rate for Reno County is higher than the rate for the state of Kansas and higher than our peer counties.

Infant Mortality Rate per 1,000 live births

Legend: Reno, Saline, Riley, Butler, McPherson, Kansas
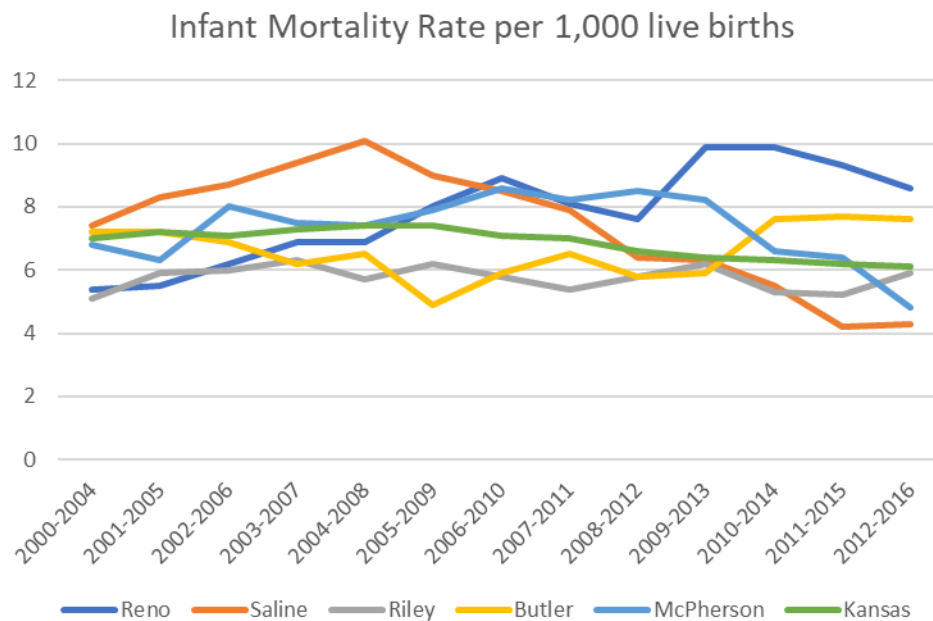
Groups at Risk:

Infant mortality among Back non-Hispanic babies is disproportionately high in Kansas.

"Other Causes" is the largest cause of infant mortality, followed by congenital abnormalities and SUID's, which are tied for the second leading cause of infant death in Kansas.

Other Risk Factors:

- Maternal smoking
- Maternal high school education or less
- Maternal obesity
- Uninsured or on Medicaid
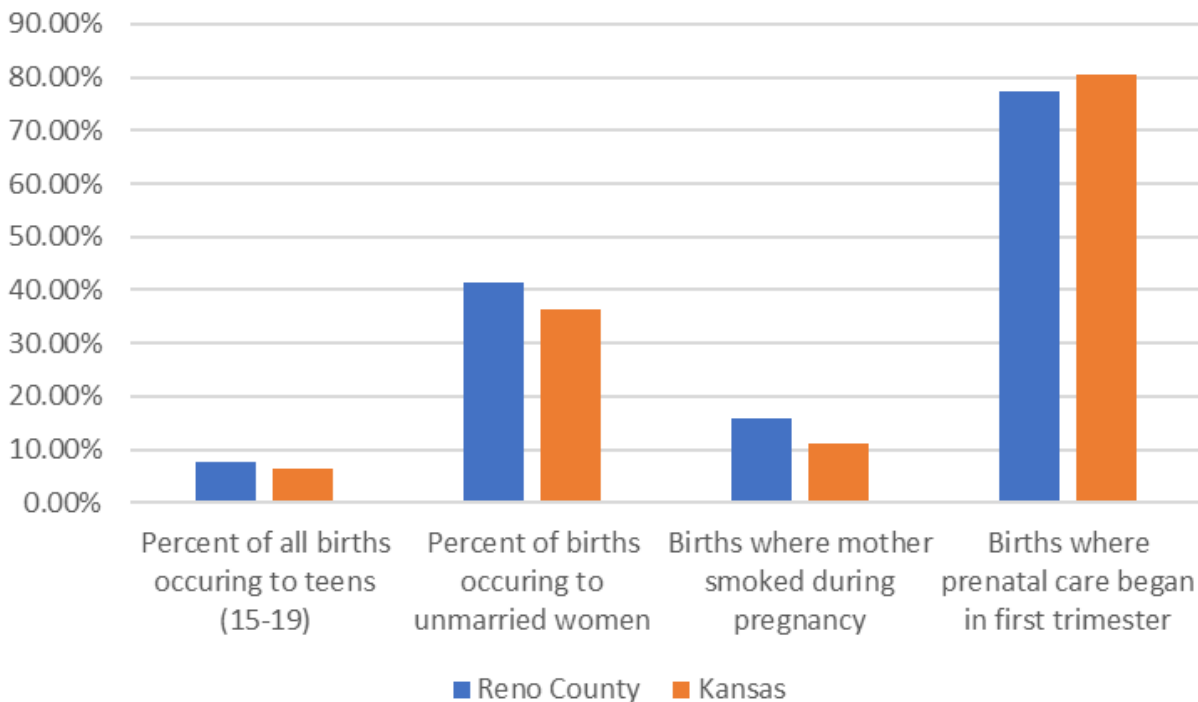
Who is working to improve maternal and infant outcomes in Kansas:

•**Bump to Baby** is a collaborative between the March of Dimes, Hutchinson Clinic, Hutchinson Regional Medical Center and Reno County Health Department. The program offers education to expecting parents about prenatal care, pregnancy health, signs of preterm labor, infant feeding/breastfeeding, infant care and postpartum recovery.

• **March of Dimes** works at the state and national level to address health inequities that impact infant health and seeks to reduce prematurity through its "Healthy Babies are Worth the Wait" campaign.

• **Kansas Department of Health and Environment** administers federal Title V funding through local health departments to provide access to care for those with low-income or with limited availability. This includes prenatal and postnatal care for women and health screenings and support for infants and children.

Overall Health

We have included in the overall health some indicators of health that are not directly related to the preceding clinical conditions. These include the age-adjusted mortality rate, leading causes of death, school-age and senior vaccinations and sexually transmitted infections. These provide a point of comparison between overall measures of health in Reno County with peer counties and the state of Kansas.

Age-Adjusted Mortality Rate per 100,000 Population

Kansas Health Matters

Ten Leading Causes of Death in the State of Kansas by Gender

KDHE Vital Statistics
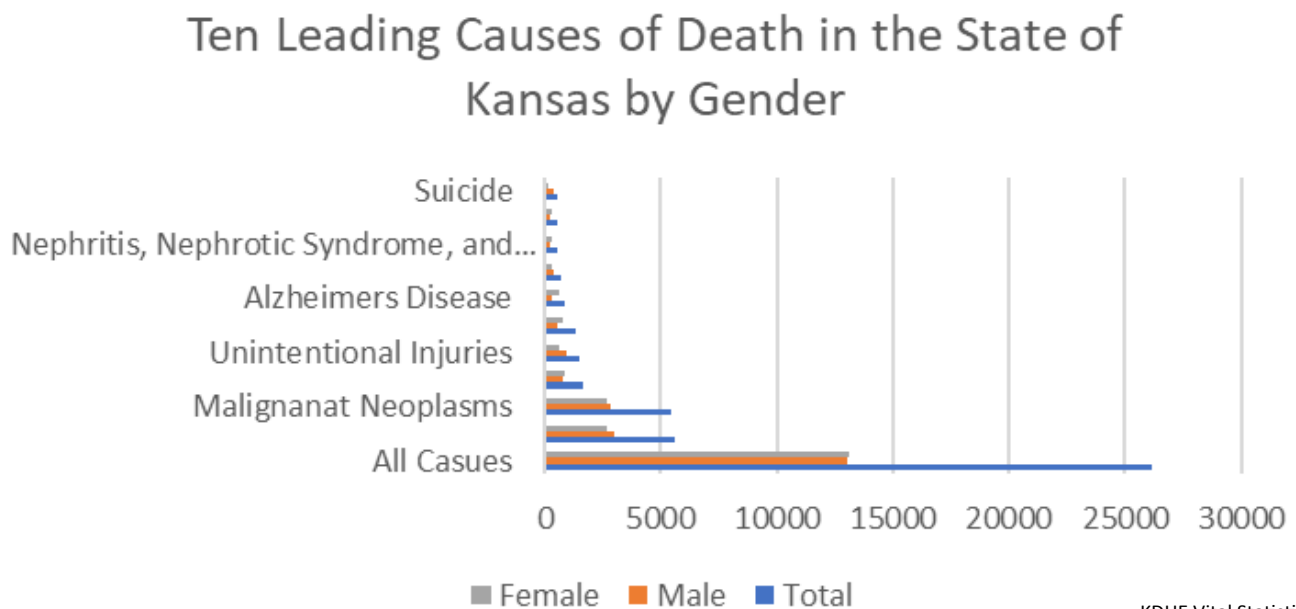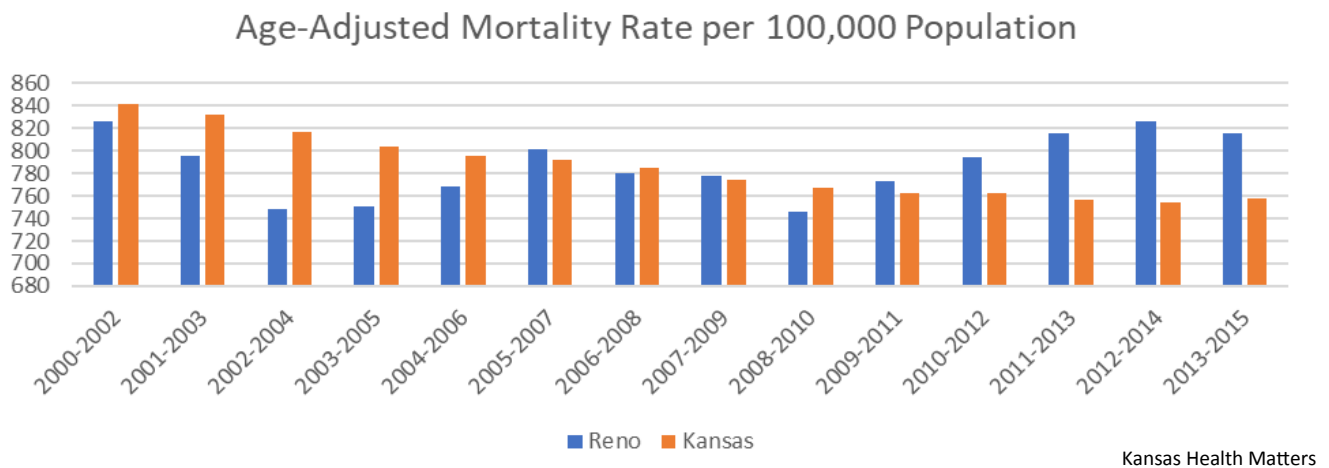
Sexually Transmitted Diseases per 1,000 population

Legend: Reno, Saline, Riley, Butler, McPherson, Kansas
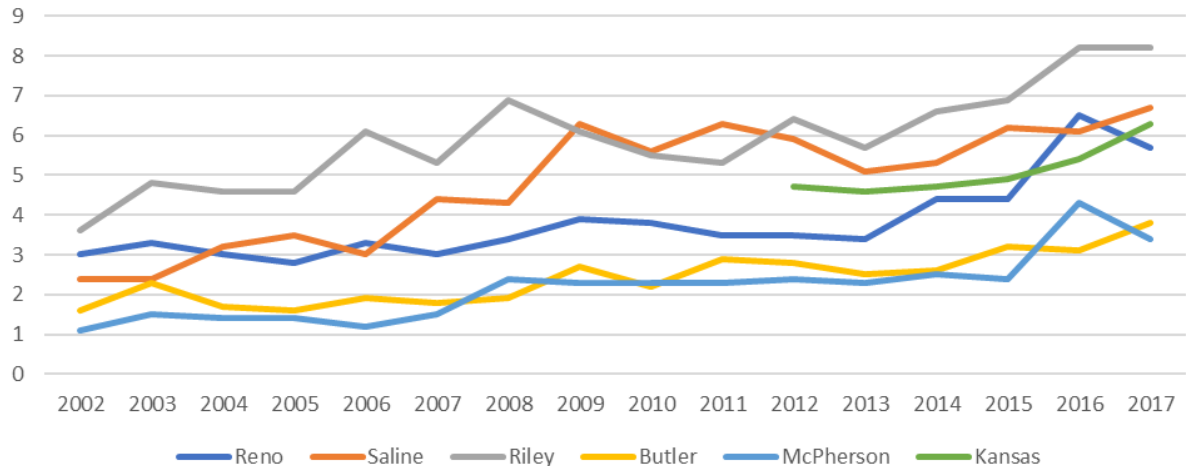
Kansas Health

Average School Vaccination Coverage Levels for Children at School Entry (2016-2017)

Categories: Dtap(5), Polio(4), MMR(2), VAR(2), HepB(3), 5-4-2-2-3, HIB(3), PCV(4), HepA(2)

Legend: Kansas, Reno, Saline, Riley, Butler, McPherson
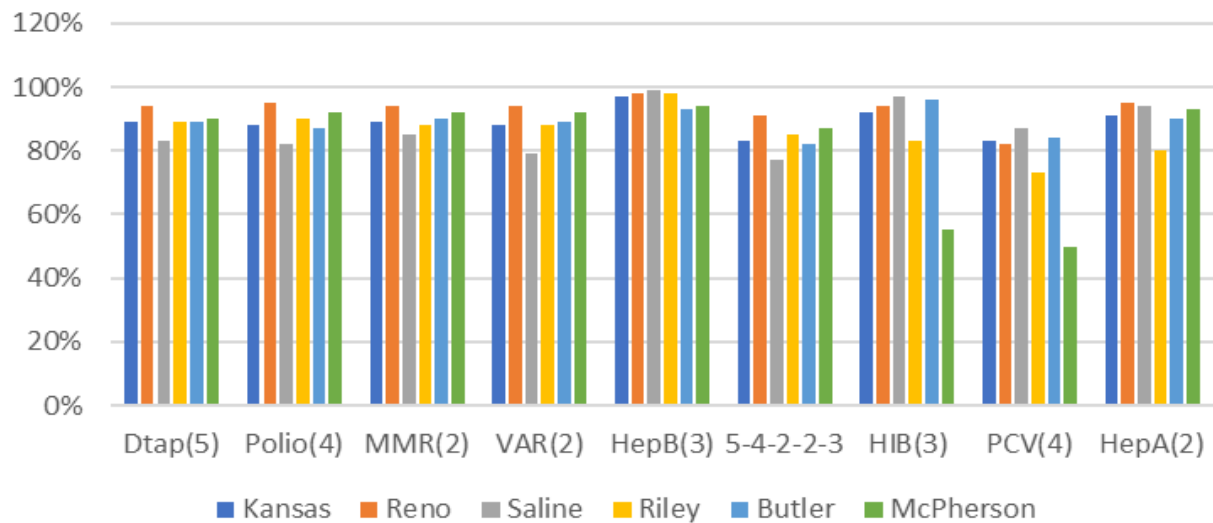
KDHE

Adults aged 65+ who had Flu Shot the Past Year: Kansas
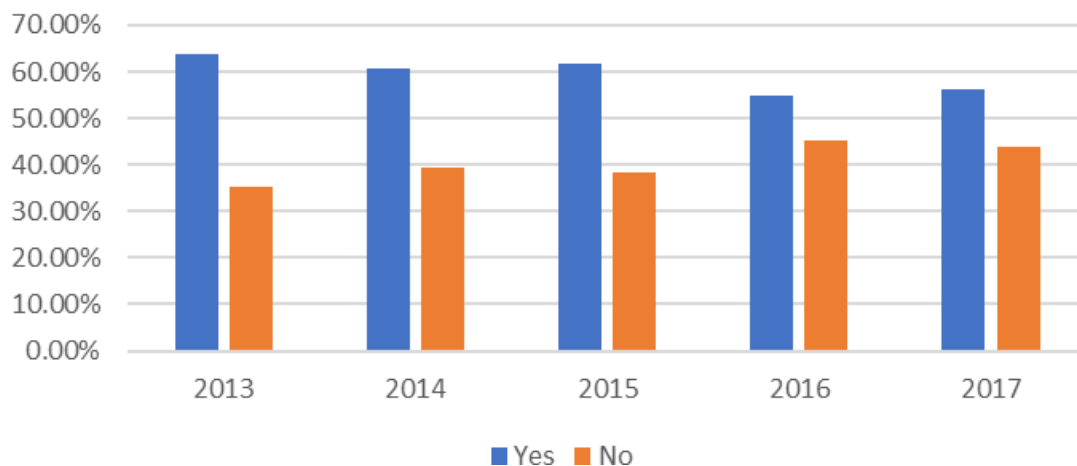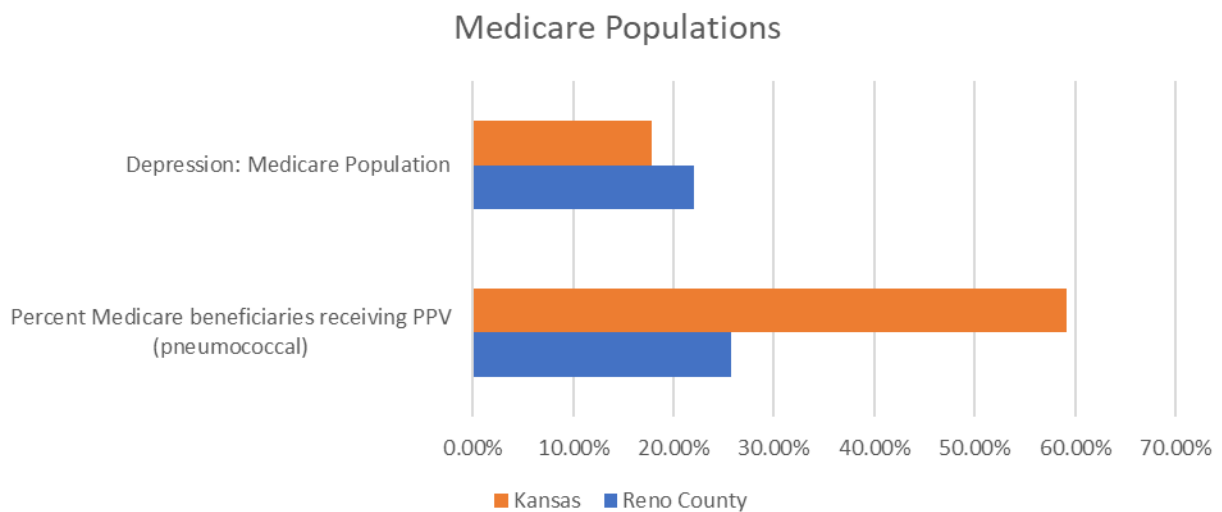
Years: 2013, 2014, 2015, 2016, 2017

Legend: Yes, No

BRFSS

Medicare Populations

Survey Results

There are results from our survey that also give a picture of the overall health of the county:

81% rate this community as healthy

Health is the largest concern within households

Health is the second largest concern for the county as a whole

44% struggle with a chronic disease

Social and Behavioral Health

The following pages contain measures of social and behavioral health: mental health, community and physical environment, access to care, drugs, economy, physical activity and nutrition.

The Centers for Disease Control and Prevention define social determinants of health as:

"Conditions in the places where people live, learn, work, and play affect a wide range of health risks and outcomes."

For this reason, it is important to consider all of the aspects of a community that may impact the health of people who live there. It is even more important to examine things in the community that result in poorer health outcomes for some groups and populations. These are known as **health disparities.**

Economic Indicators

The strength and depth of the local economy can have many impacts on health. From determining access to foods and physical activity to the quality of housing and the ability to get care when needed, money matters when it comes to health;
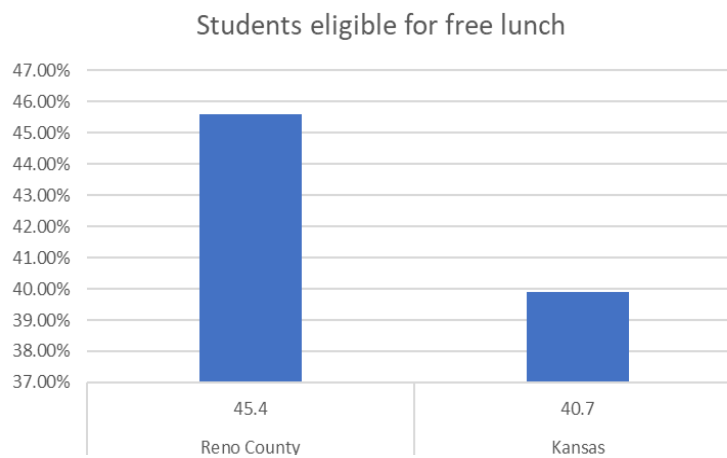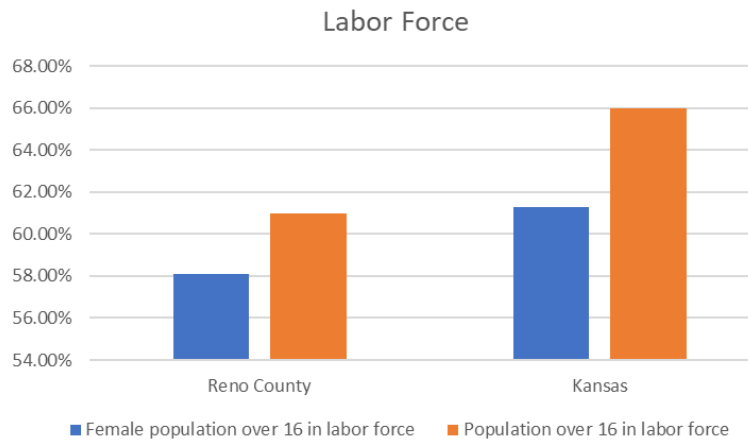
Labor Force

- Female population over 16 in labor force
- Population over 16 in labor force

Students eligible for free lunch

45.4	40.7
Reno County	Kansas

Source for both graphs: Data from Kansas Department of Health and Environment via www.kansashealthmatters.org on February 15, 2019.

- Reno County
- Kansas

MEDIAN HOUSING UNIT VALUE	MEDIAN HOUSEHOLD INCOME	PER CAPITA INCOME
$96,100 / $135,300	$46,000 / $53,571	$24,313 / $28,478

Source for both graphs: Data from Kansas Department of Health and Environment via www.kansashealthmatters.org on February 15, 2019.

■ Reno County ■ Kansas
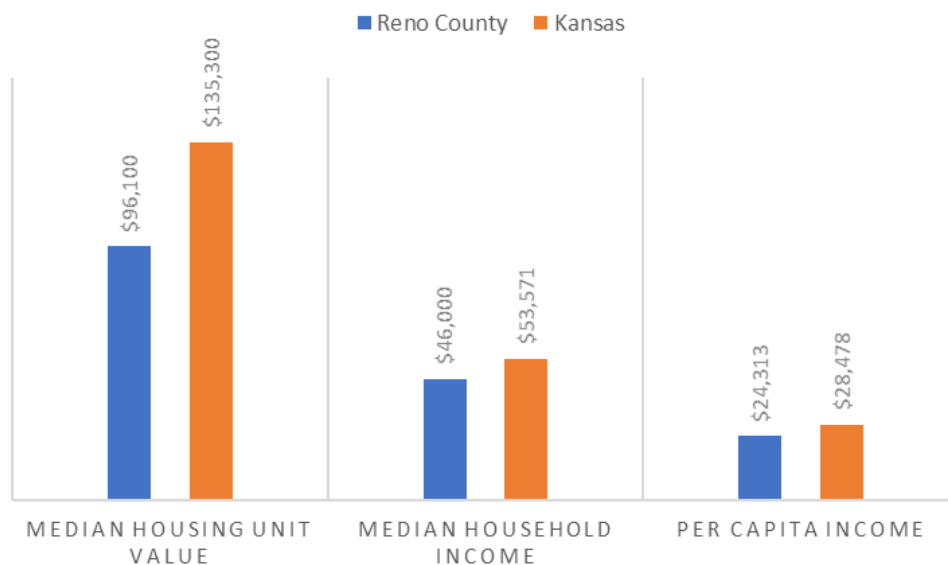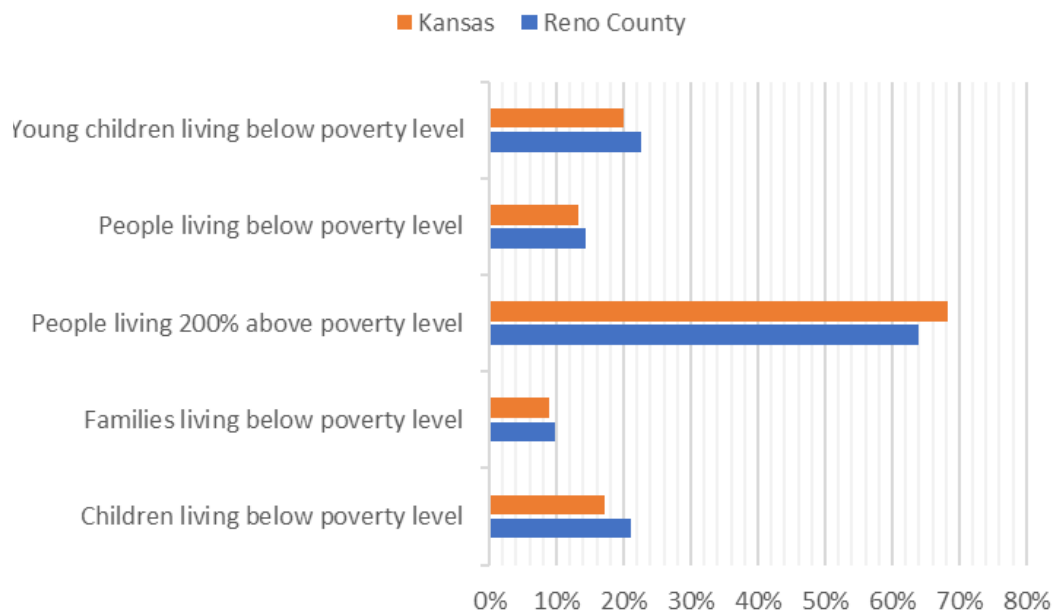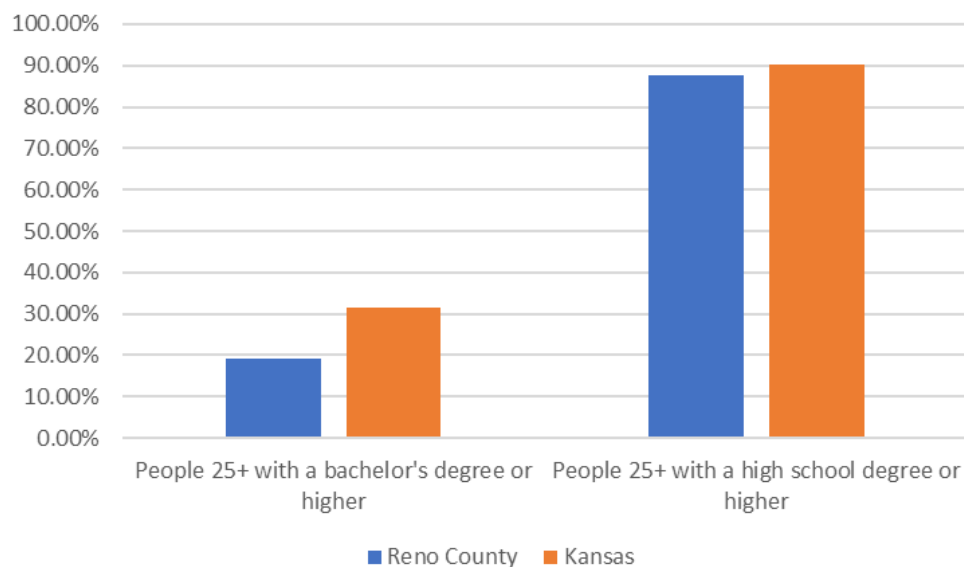
Poverty is linked with increased morbidity and mortality. This is a complex relationship between many factors, some of which can be cyclical: poverty leads to poor health with leads to continued poverty. We do know that as income inequities grow, so do health disparities. Most simply put, those with the greatest wealth live the longest.

Survey Results that indicated economic needs for the community:

Finances are the second largest household concern

Finances are the third largest concern for the county

When asked to define "thriving":

Financial stability was the top answer

12% are interested in pursuing vocational training

Nutrition

Many different factors affect the food that we eat. In Reno County, access to a grocery store is one of the things that can greatly impact nutrition. Reno County is geographically large and has an aging population, meaning that having low income and low access to a vehicle can also mean that people do not have access to food. When trips to the grocery store are limited, the result is the purchasing of shelf-stable foods that are less healthy than the fresh fruit and produce that is purchased when the store is easily accessible. Portions of western Reno County and South Hutchinson are designated as Food Deserts by the USDA. This means that an area has low income and no groceries stores within 1 mile, or an area has low vehicle access and no grocery stores within 10 miles.

Low-Income and Low Access to a Grocery Store

County: Reno Value: 7.5%

KS Counties   U.S. Counties

Low-Income and Low Access to a Grocery Store
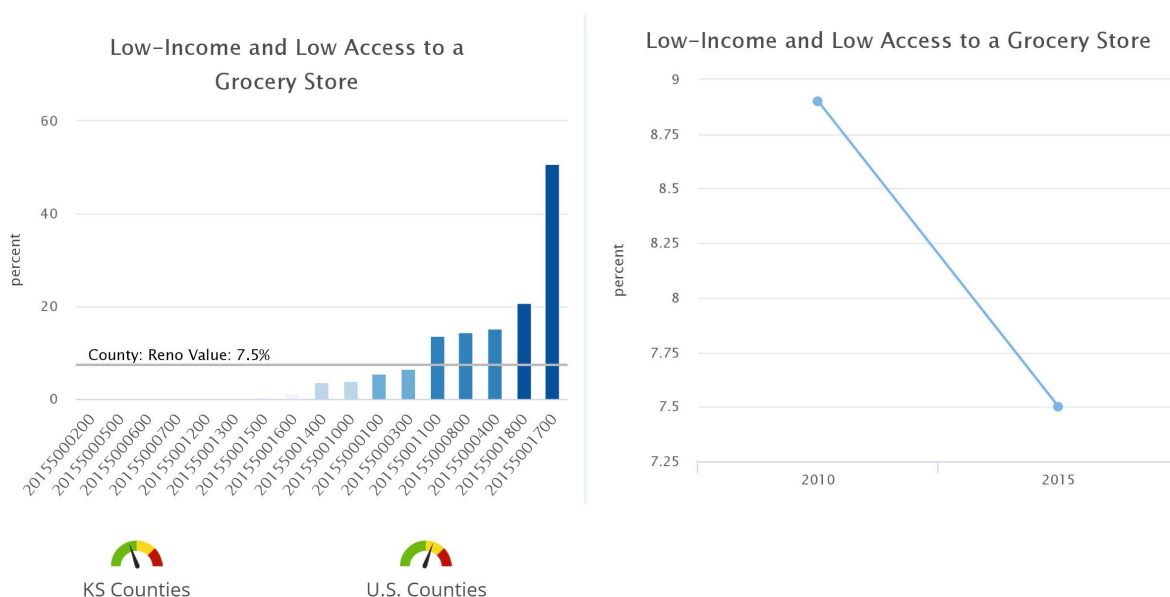
The bar chart shows that 7.5% of people in Reno County have low access to a grocery store and 5 of the counties 17 census tracts have accessibility much lower than the county. The line graphs show overall improvement in access between 2010 and 2015.

People 65+ with Low Access to a Grocery Store

SNAP Certified Stores
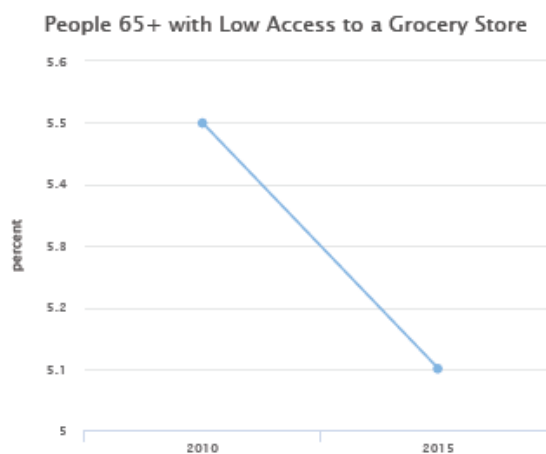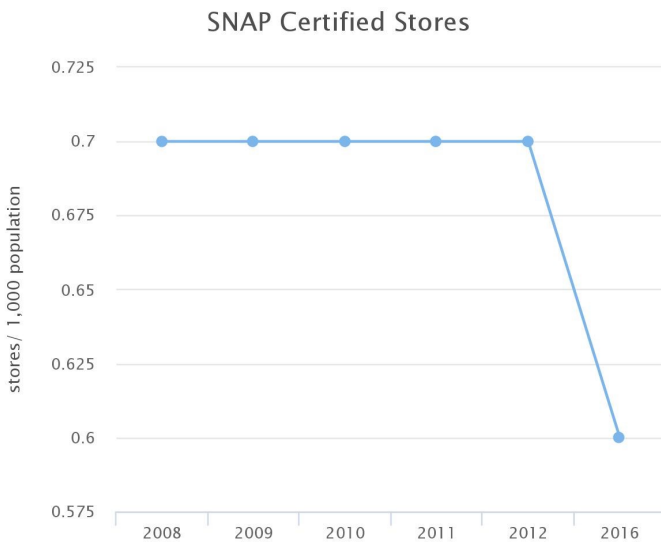
KS Counties

Prior Value
(0.7)

U.S. Counties

SNAP, the Supplemental Nutrition Assistance Program, provides financial assistance for food to people who meet income and resource eligibility guidelines.

WIC, Women, Infants and Children, provides financial assistance for food to mothers who are pregnant or breastfeeding and children up to age 5.

Average Monthly WIC Participation per 1,000 population
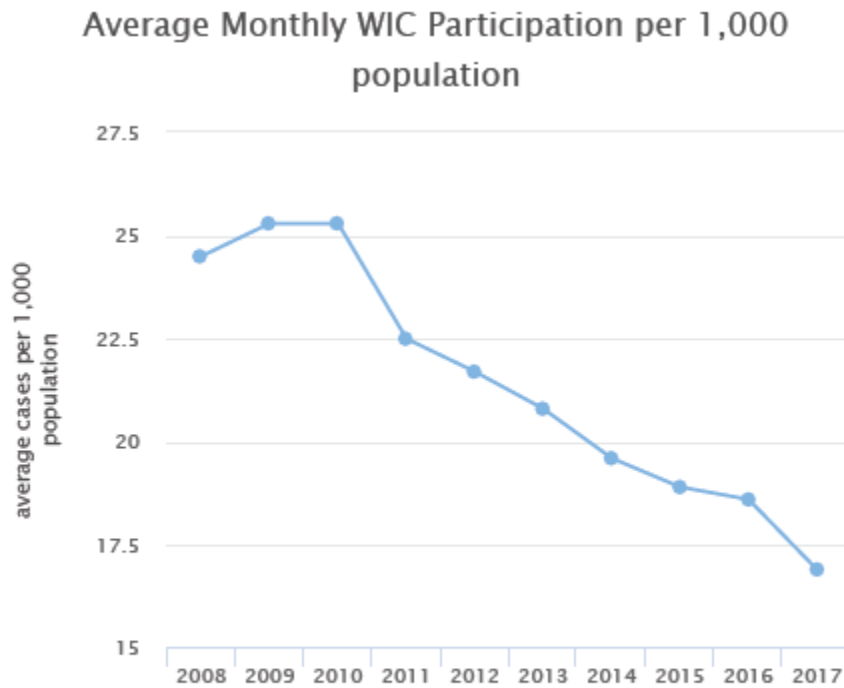
There are six retailers in Reno County who accept WIC benefits.

Percentage of Adults Tested and Diagnosed with High Cholesterol

Legend: ■ 2011 ■ 2013 ■ 2015

Categories: Reno, Saline, Riley, Butler, McPherson, Kansas
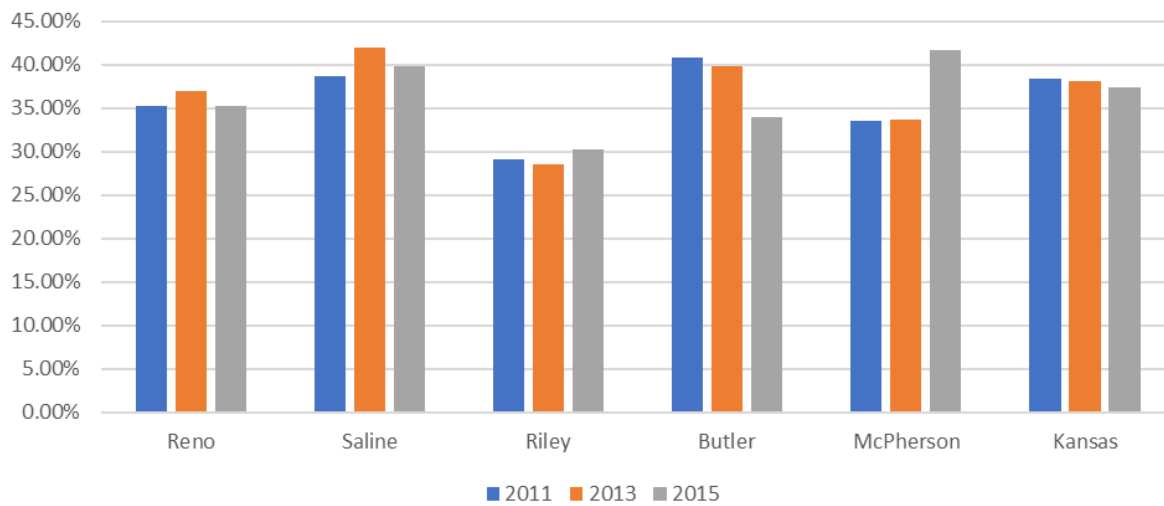
Percentage of Adults Consuming Less than 1 Fruit a Day: Reno 2015

Categories: Obese, Overweight, Normal or Underweight, 65+, 45 to 64, 18 to 44, Women, Men, Reno, Kansas
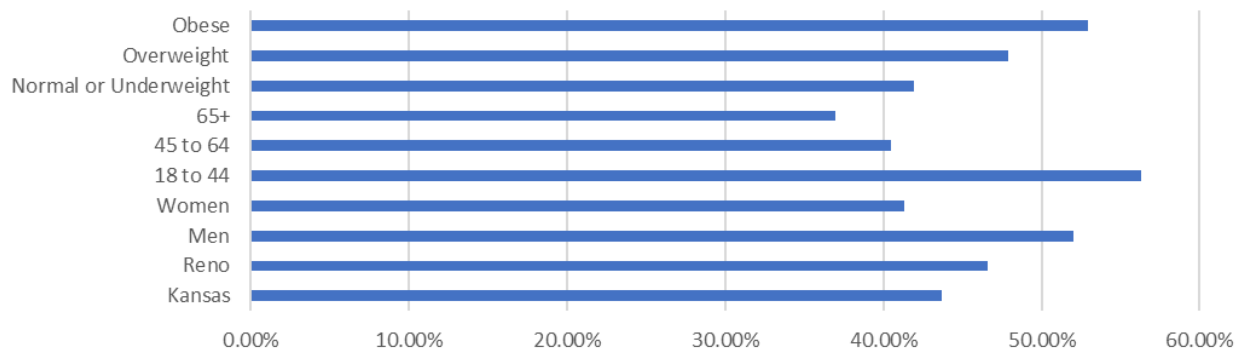
BRFSS

Percentage of Adults Consuming Less than 1 Vegatable a Day: Reno 2015

Categories: Overweight, 65+, 18 to 44, Men, Kansas
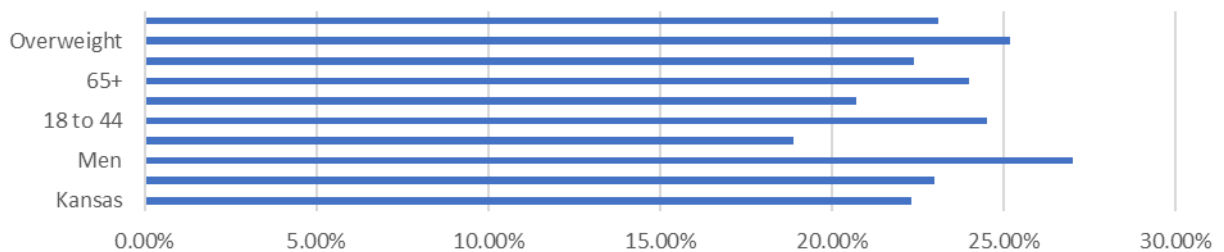
BRFSS

Access to Care

Access to care measures if a community has enough providers of various types to provide the services the community needs AND whether or not people are able to utilize the services that are available.

Financial resources and availability of affordable health insurance coverage impact access to care, as do things like the physical locations of providers, hours of operation and transportation.

Staffed Hospital Bed Ratio

Kansas Medical Assistance Programs – Adults
per 1000 Population, 20–64 Age-Group

Kansas Medical Assistance Programs – Children
per 1000 Population, 0–19 Age-Group

Persons with Health Insurance
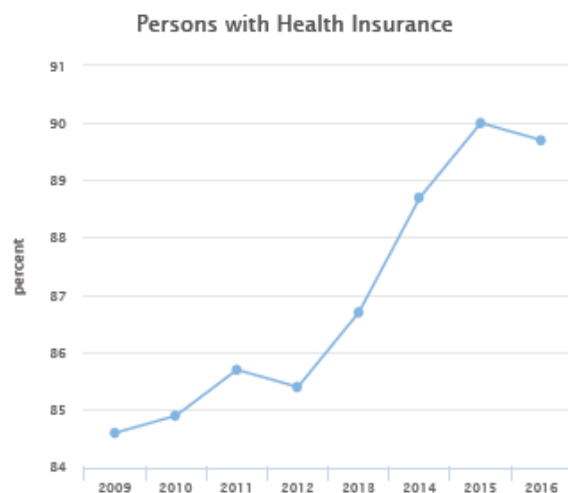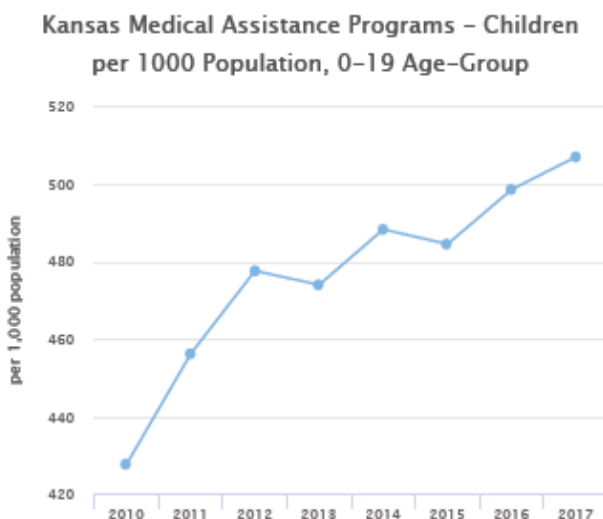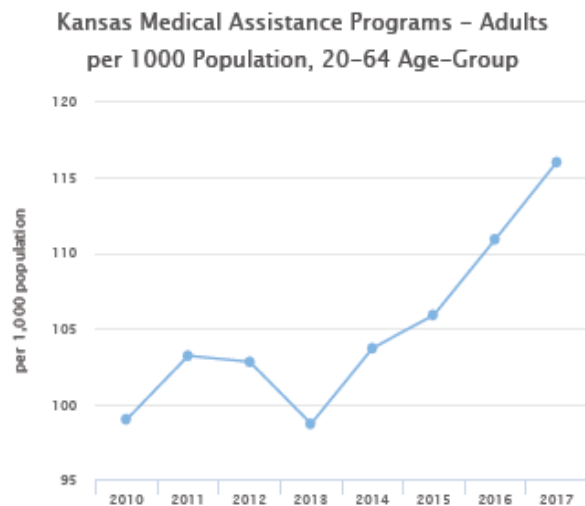
Kansas Health Matters
As of November 29, 2018

59

Age Adjusted Hospital Discharge by Diagnosis: Reno County

- ■ Injury and Poisoning
- ■ Mental Disorders
- ■ Normal Newborn/Certain Conditions originating in perinatal period
- ■ Complication of Pregnancy & Childbirth
- ■ Disease of Repiratory System
- ■ Disease of Circulatory system
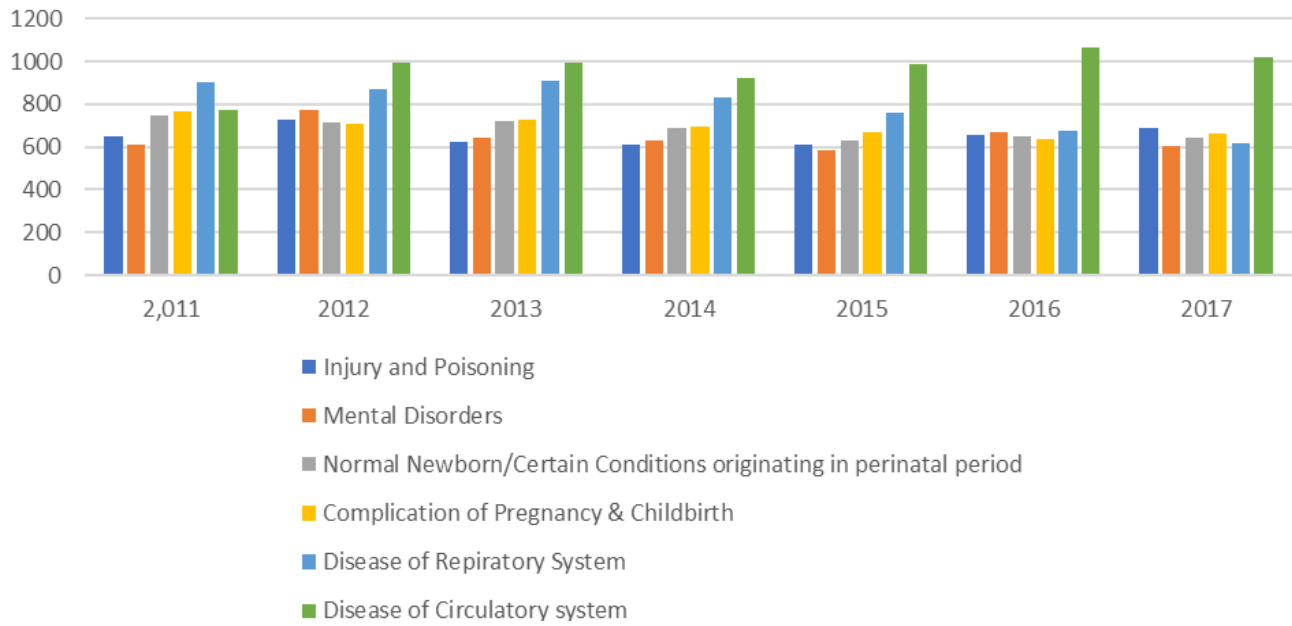
KIC

Care Providers per 100,000: 2016

- ■ Primary care physicians ■ Dentists ■ Mental Health Professionals ■ Other Providers

Source: US Census Bureau

60
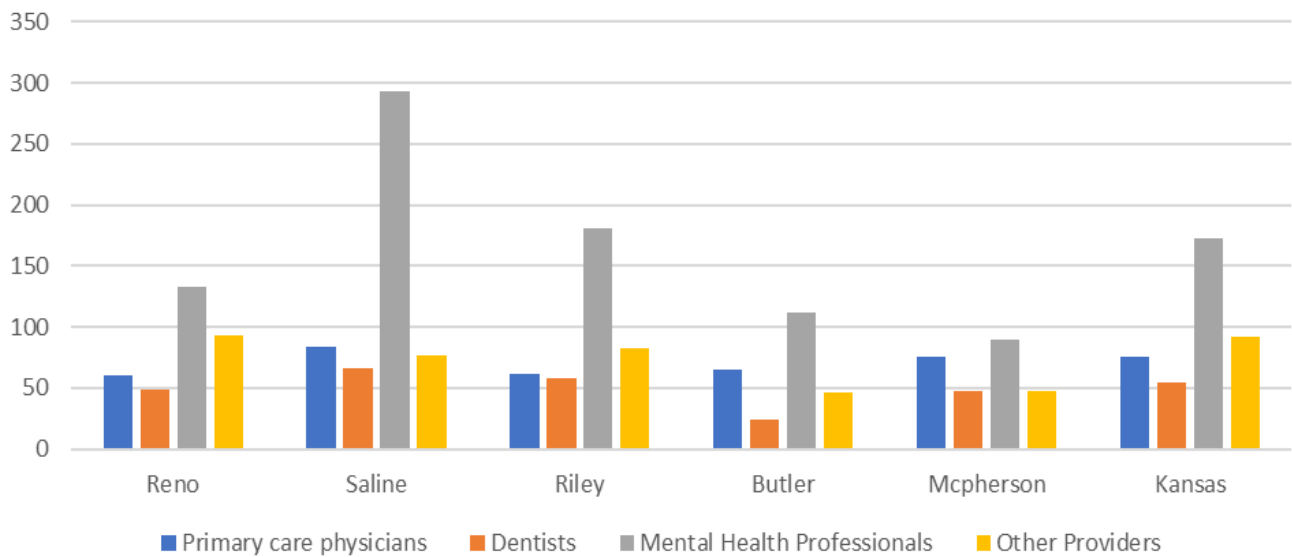
Physical Activity

The Centers for Disease Control and Prevent recommend that children ages 6 to 17 get 60 minutes of moderate-to-vigorous activity every day. The recommendation for adults is to get 150 to 300 minutes of moderate-to-vigorous activity every week AND two days of muscle-strengthening activities each week.

Fewer than one in five adults in Reno County meets these physical activity recommendations.

Percent of adults who Currently Smoke Cigarettes: Reno 2015

Category	Percent
Normal weight	27.40%
Overweight	19.60%
Obese	17.40%
Physical Activity	15.90%
No Physical Activity	31.00%
<35,000 Yearly Income	28.20%
>35,000 Yearly Income	14.40%
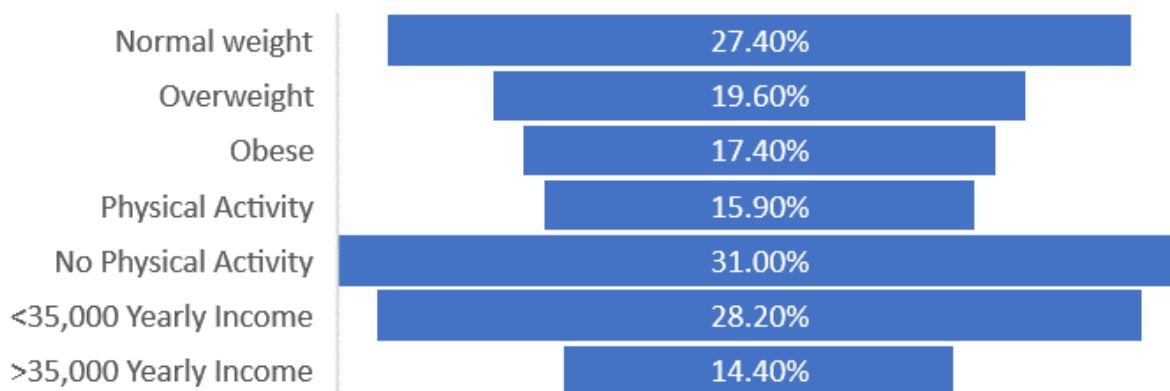
Percent of Adults DOING ENOUGH Physical Activity to meet both the Aerobic and Strengthening Exercise Recommendations: Reno 2015

2011   2013   2015

Reno   Saline   Riley   Butler   McPherson   Kansas

Kansas Health Matters
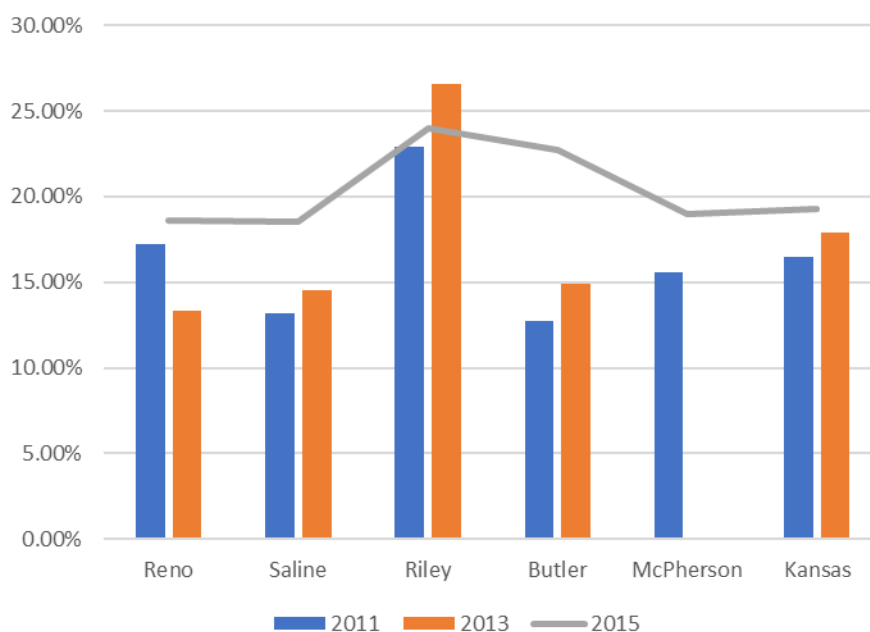
Not Participating in Physical Activity: Reno 2015

Bar chart showing percentages by category:
- Reno: ~81.5%
- Kansas: ~80.5%
- some college or more: ~77.5%
- High school or less: ~86.7%
- 65+: ~83%
- 45 to 64: ~83%
- 18 to 44: ~79%
- Women: ~81.5%
- Men: ~80.8%

(x-axis: 72.00% to 88.00%)
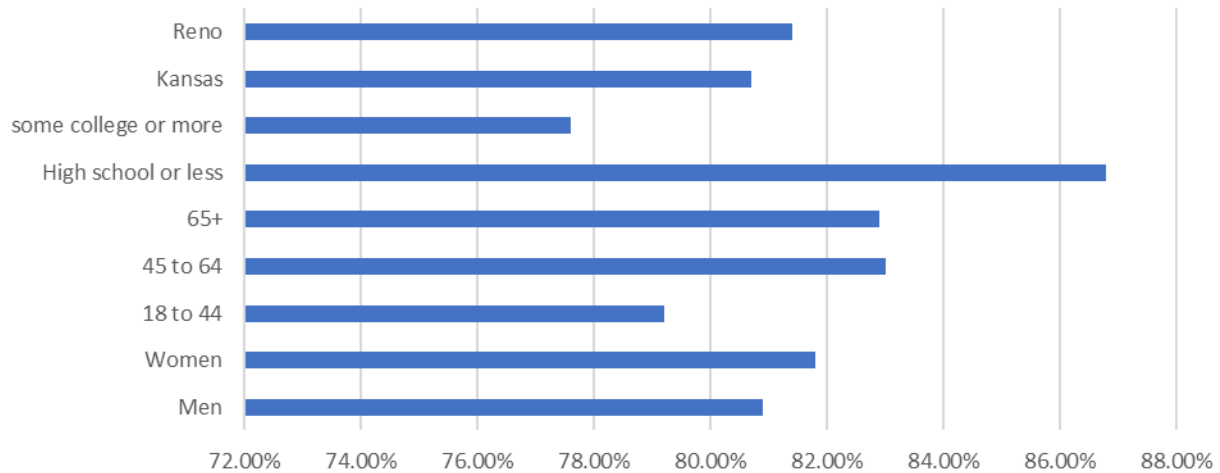
Failing to meet the recommended levels of physical activity contributes to higher obesity rates.

Percent of Adults who are Obese

Grouped bar chart (2011, 2013, 2015):
- Reno: 2011 ~28%, 2013 ~30%, 2015 ~40%
- Saline: 2011 ~29%, 2013 ~32%, 2015 ~37%
- Riley: 2011 ~25%, 2013 ~20%, 2015 ~22%
- Butler: 2011 ~29%, 2013 ~34%, 2015 ~35%
- McPherson: 2011 ~30%, 2013 ~31%, 2015 ~33%
- Kansas: 2011 ~30%, 2013 ~30%, 2015 ~34%

Legend: ■ 2011 ■ 2013 ■ 2015
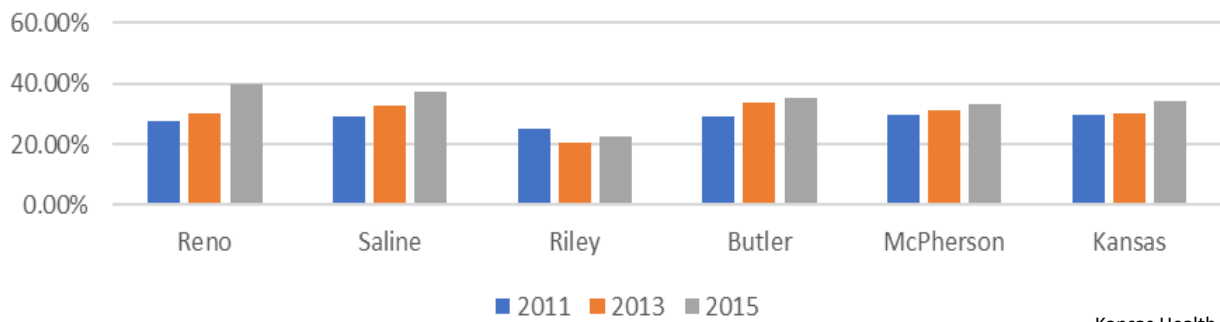
Percentage Overweight or Obese: Reno 2015

Bar chart:
- Kansas: ~68%
- Reno: ~70%
- Men: ~74%
- Women: ~70%
- 18 to 44: ~63%
- 45 to 64: ~75%
- 65+: ~76%
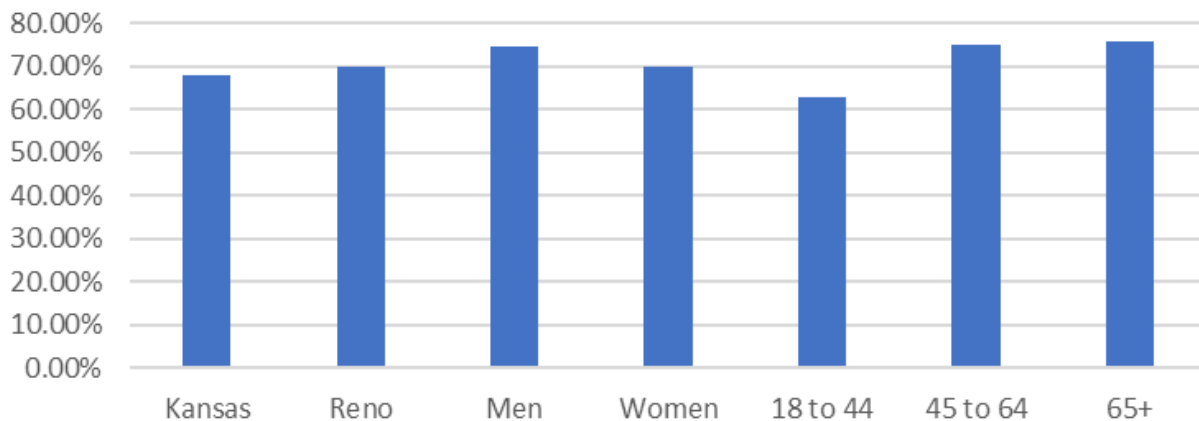
Community and Physical Environment

The physical elements, layout of the county, and its infrastructure impacts the health of Reno County residents. This is also true of the strength and vitality of the community.

Liquor Store Density

KS Counties

US Value (10.5)

KS Value (21.9)

Kansas Health Matters

People 65+ Living Alone

People 65+ Living Alone

County: Reno Value: 26.5%
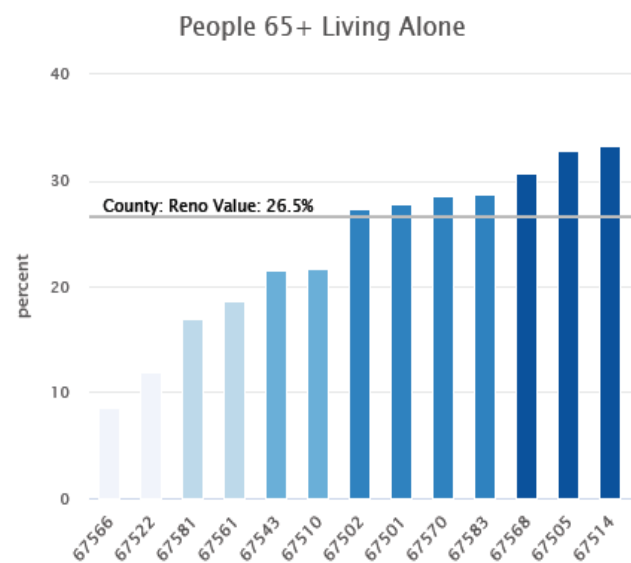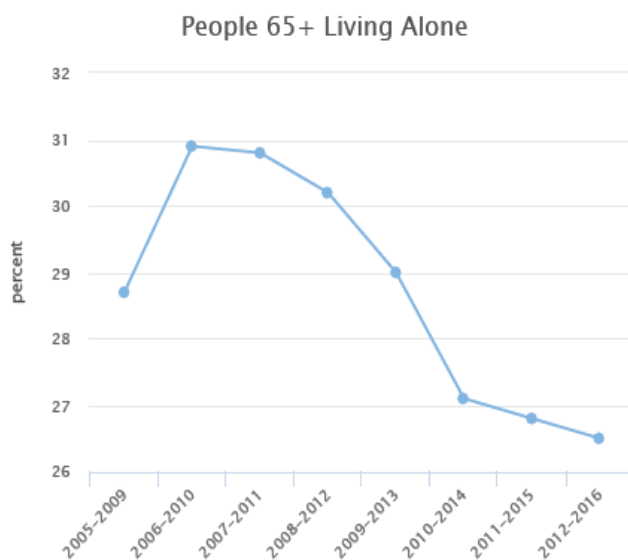
Kansas Health Matters

ELEVATED BLOOD LEAD IN CHILDREN

■ 2014 ■ 2013 ■ 2012

PERCENT OF CHILDREN TESTED WITH CONFIRMED BLOOD LEAD	1.1 · 0.21.7C
NUMBER OF CHILDREN WITH CONFIRMED BLOOD LEAD	8 · 1 · 15
NUMBER OF CHILDREN WITH CONFIRMED BLOOD LEAD ABOVE 10	4 · 0 · 6
NUMBER OF CHILDREN WITH CONFIRMED BLOOD LEAD BETWEEN 5 AND 10	4 · 1 · 9
PERCENT OF CHILDREN TESTED	14.90% · 8.70% · 11.40%
NUMBER OF CHILDREN TESTED	699 · 413 · 892
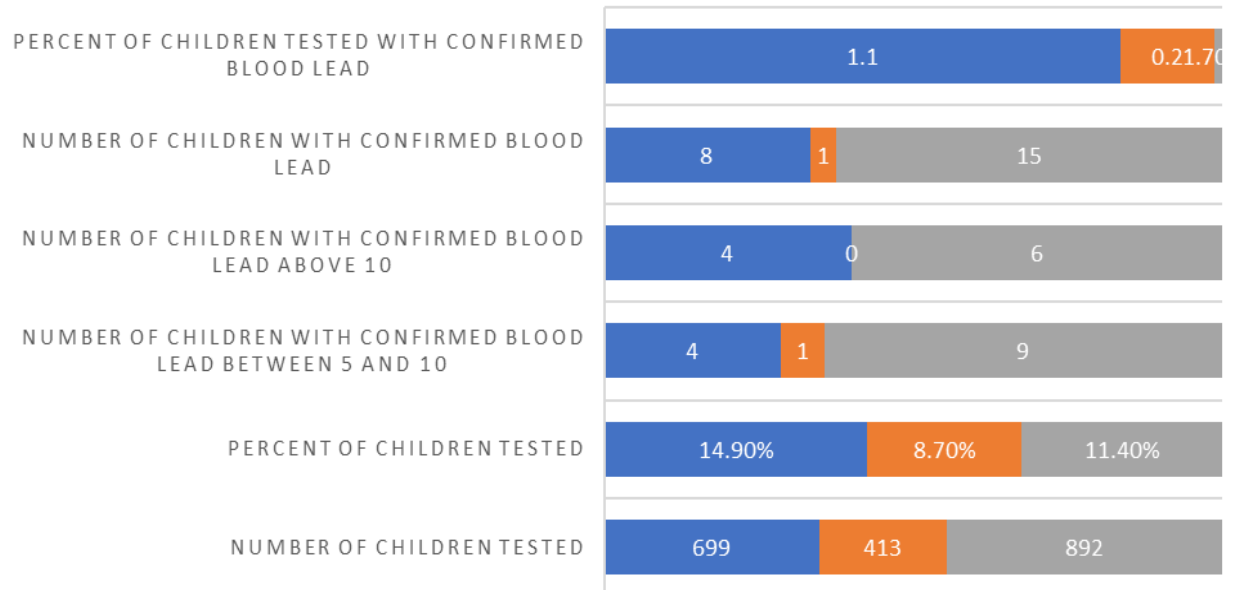
Table 6. West Nile virus neuroinvasive disease count and incidence rate* by year, 2012-2017.

Region	2013		2014		2015		2016		2017	
	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate
Sedgwick County	4	0.79	0	-	2	0.39	4	0.78	1	0.20
Shawnee County	0	-	0	-	0	-	1	0.56	2	1.12
Reno County	4	6.28	0	-	0	-	2	3.14	0	-
Kansas	34	1.17	18	0.62	12	0.41	17	0.58	12	0.41
West North Central†	288	1.38	104	0.50	82	0.39	175	0.82	118‡	0.56
United States	1,267	0.40	1,347	0.42	1,455	0.47	1,310	0.40	1,425‡	0.44

*Number of cases per 100,000 population, based on U.S. Census population estimates for July 1, 2017.
† West North Central region; Iowa, Kansas, Minnesota, Missouri, Nebraska, North Dakota, and South Dakota.
‡ Data from https://www.cdc.gov/westnile/statsmaps/preliminarymapsdata/histatedate.html. Accessed Oct. 4, 2018.

Households without a Vehicle

County: Reno Value: 6.7%

x-axis labels: 20155001500, 20155000400, 20155001700, 20155001000, 20155001600, 20155001800, 20155001100, 20155000200, 20155000500, 20155001200, 20155000300, 20155000800, 20155001400, 20155001300, 20155000600, 20155000700, 20155000100

Households without a Vehicle

x-axis labels: 2005-2009, 2006-2010, 2007-2011, 2008-2012, 2009-2013, 2010-2014, 2011-2015, 2012-2016

KS Counties

KS Value
(5.5%)

US Value
(9.0%)

Extent Desired Capacity Meets Potential Demand

Reno   Saline   Riley   Butler   McPherson

- Licemsed Familt and Group Day Care Homes
- Child Care Centers
- Programs That Provide Care During Nontraditional Hours

Survey results that indicate that the community and the physical environment impact health:

Community is the third largest household concern

Community is the largest neighborhood and county concern

73% of households are thriving

94% own a car

95% meet their transportation needs

18% are or may be moving in the next year

32% health is affected by the environment

Mental Health

In Reno County, 12.1% of people report that their mental health was not good on 14 or more days in the past 30 days compared to 9.7% of people in Kansas (KDHE BRFSS, 2015).

People with severe mental disorders die 10 to 20 years earlier than the general population (World Health Organization, Excess Mortality in Persons with Severe Mental Disorders, 2016).

Nationally, the prevalence of mental illness is one in five adults. This means that in 2016, 44.7 million adults in America have a mental illness (National Institute of Mental Health, 2018).

Survey results related to mental illness:

25% struggle with mental health

Households who report that someone is struggling with mental illness are far less likely to report that their household is thriving

Percentage of adults who were EVER Diagnosed with a Depressive Disorder

BRFSS

66
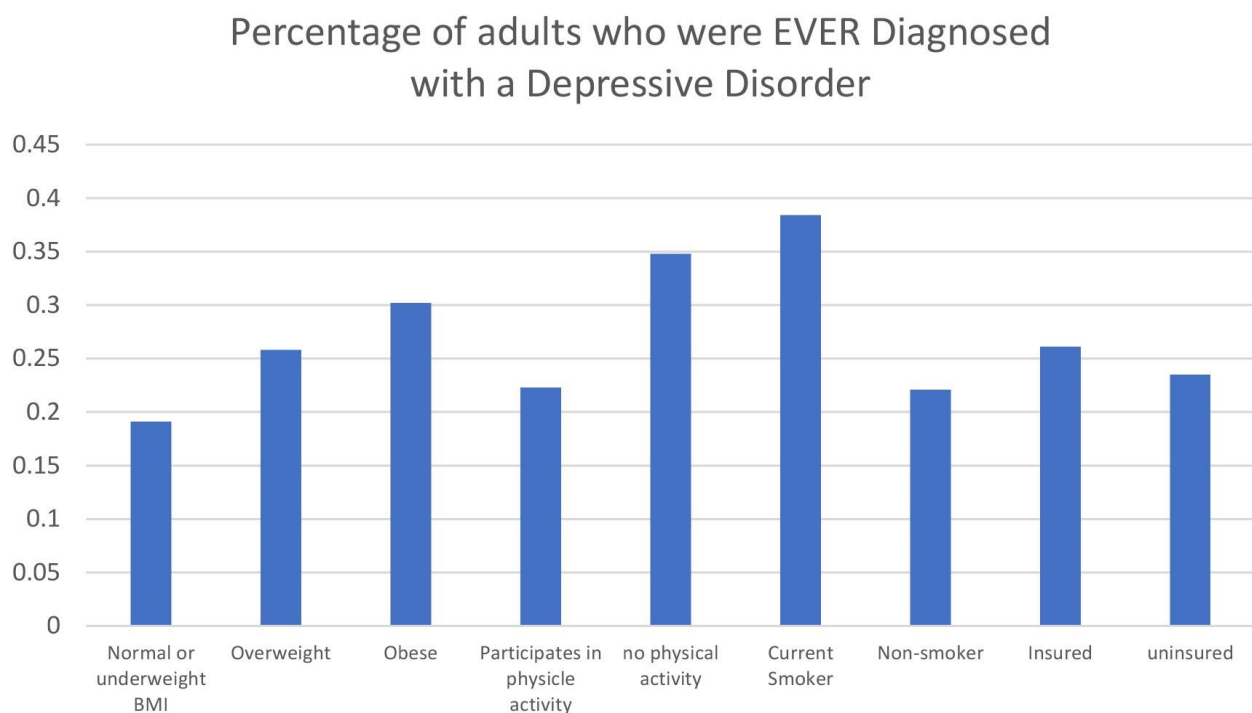
Percentage of Adults who were EVER Diagnosed with a Depressive Disorder: Reno 2015

BRFSS

■ Series2 ■ Reno County Kansas
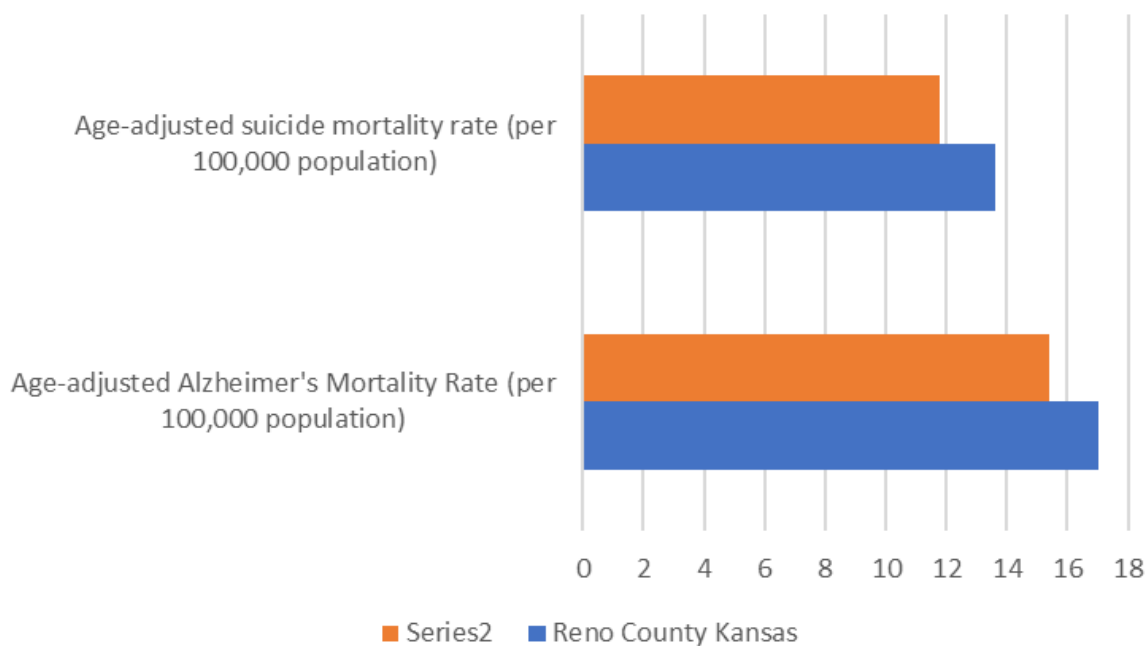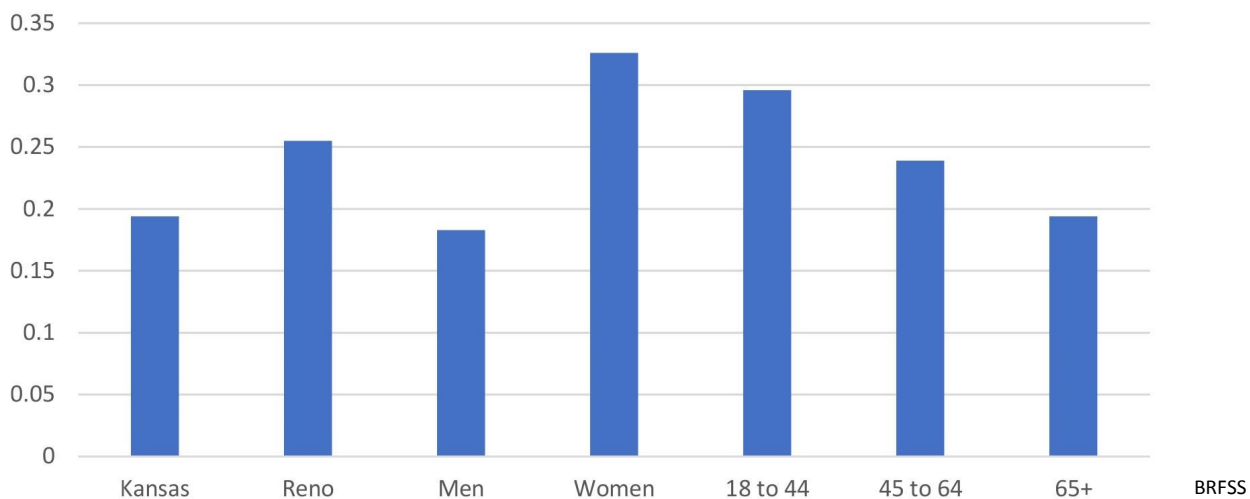
Mental Health Hospital Admission Rate (per 10,000 population)

67
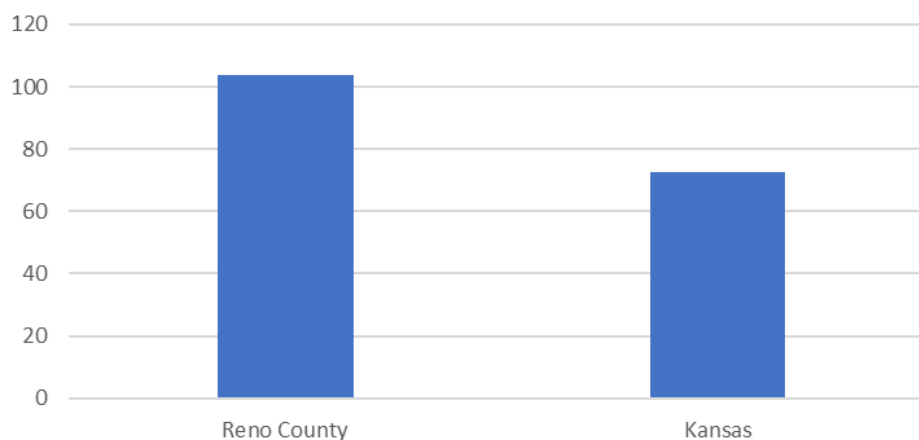
Substance Use

Measurement of Substance Use Disorders are comprised of alcohol indicators, tobacco indicators, illicit drug indicators and prescription drug indicators. Each one of these can be measured at the state level through morbidity, mortality and crimes associated with the behavior. All of these can be found in the Kansas Substance Abuse Epidemiological Indicators Profile from the Kansas Department of Children and Families.

Within the state of Kansas, Opioid Crisis Response is a current area of priority. Because of this, some Reno County opioid specific measures follow, as well as overall drug poisoning and binge drinking data.

Percent Medicare Part D Recpients
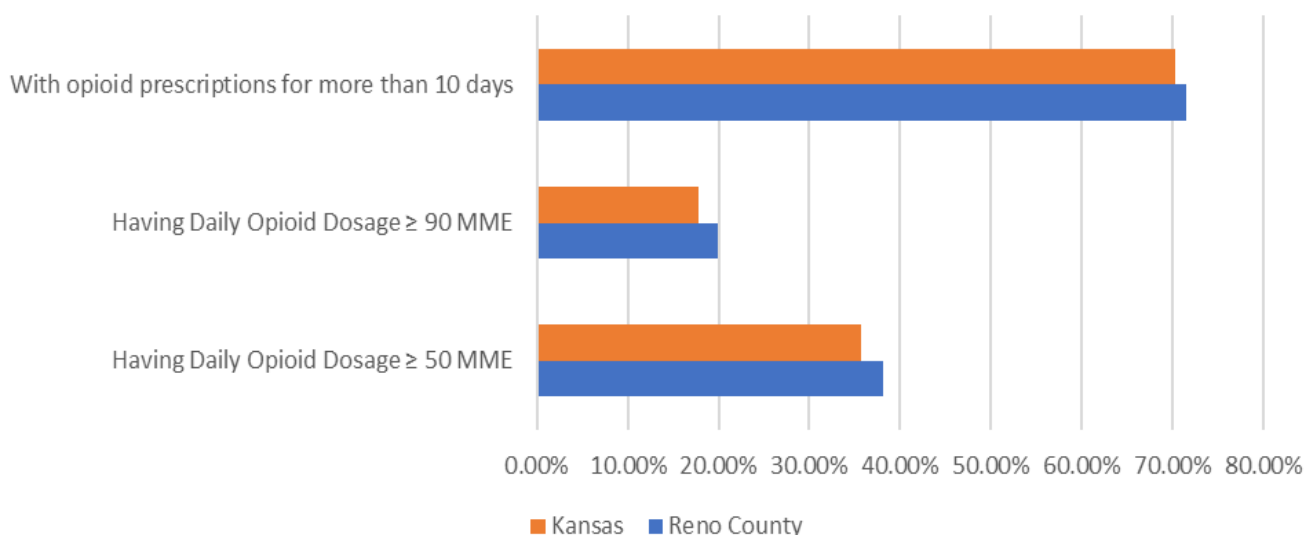
Opioid Overdose Death Rate (Age-Adjusted) (State Level)
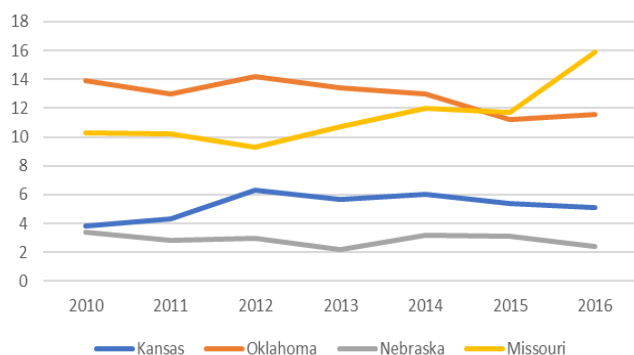
Poisoning (drugs) hospital admission rate (per 10,000 population)
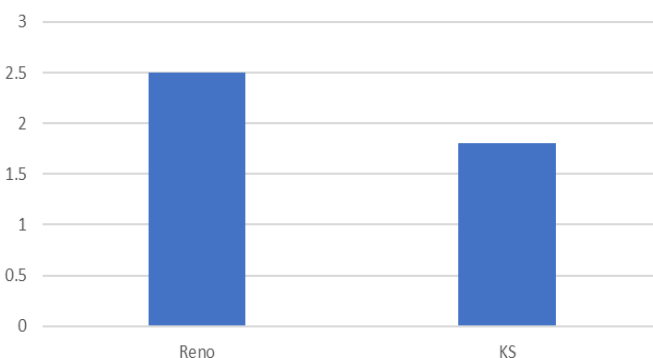
Death rate due to Drug Poisoning (per 100,000 population)
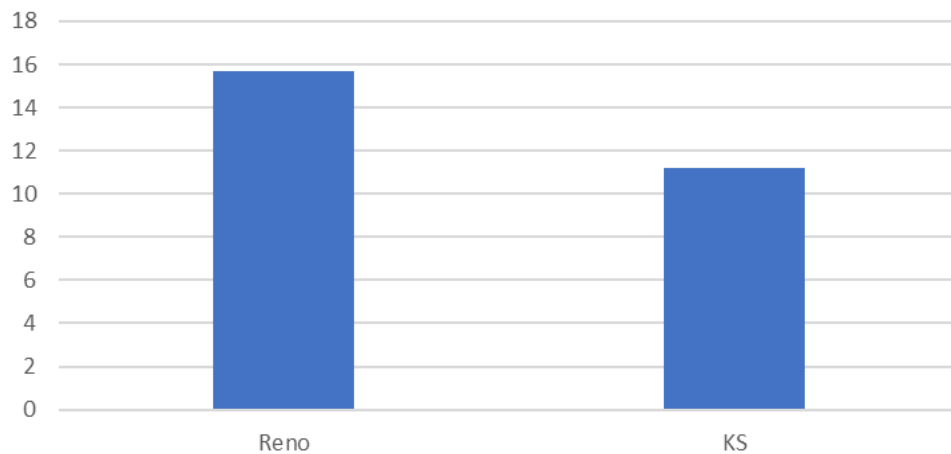
Source: Kansas Health Matters

Percentage of Adults who are Binge Drinkers: Reno 2015
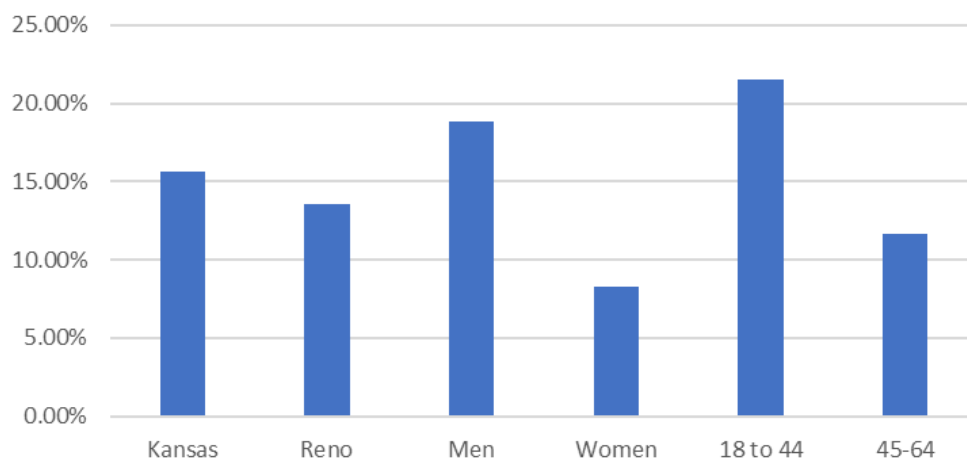
BRFSS

Survey Results that indicate substance use is an issue in Reno County:

Drugs are the largest neighborhood concern
Community concerns were reported at high levels throughout the survey and drugs
represented a significant portion of those concerns

We learned through community discussions that most safety concerns are
related to drug activity:

98% feel safe in their household
87% feel safe in their neighborhood
84% feel safe in their community
66% feel safe in their school

Results from Community Discussions

Community Discussions were held in the neighborhoods of SW Bricktown, Lincoln, South Hutchinson and Willowbrook to follow-up on the initial data that was collected through the survey. These neighborhoods were selected after reviewing the neighborhood level life expectancies and survey responses because they contain populations that have poorer health outcomes and/or different concerns. A theoretical thematic analysis revealed the following largest themes within these discussions:

- There are lots of outdoor activities available but the trails need upkeep and people need transportation to get to these places.

- There are plenty of places to work out, but most have a cost and that can be a barrier.

- Grocery stores have healthy options and support good decisions, restaurants do not.

- When restaurants do have healthy options, they are expensive and those restaurants are in the north part of town.

- We have good mental health resources in this community, but the demand for these services is growing at a faster rate.

- We need more mental health resources for families, especially those with low financial resources and/or those who speak English as a second language.

- The largest health concerns are: healthy eating, physical activities for adults, and not having the time and energy for self-care.

- Our financial concerns are caused by a lack of good paying jobs.

- Very few are able to save any money.

- We definitely hear about drugs a lot in Reno County.

- People know where the hot spots for drugs are.

- People feel safe in most situations and places in Reno County.

- If people don't feel safe here, it is attributed to drug activity.

- We must work on walkability and safety for pedestrians and cyclists.

- We need more options for providers (specifically mentioned are: family practice, pediatricians, free/reduced clinics and more providers on the south side of town).

- Community engagement and education about resources are "what is missing" in Reno County.

Reno County Healthcare Provider Survey
Administered by the Healthcare Access Taskforce
February 5, 2019

ORGANIZATIONS

- ■ Hutchison Regional Medical Center
- ■ Hospice and Homecare
- ■ Hutch Clinic
- ■ Horizons
- ■ Prairie Star
- ■ Others

97 | 46 | 20 | 15 | 9 | 3

POSITION TYPE

Physician
Advanced Practice Provider
Admin/Leadership
Care Management
Nursing
Non-nursing, Licensed
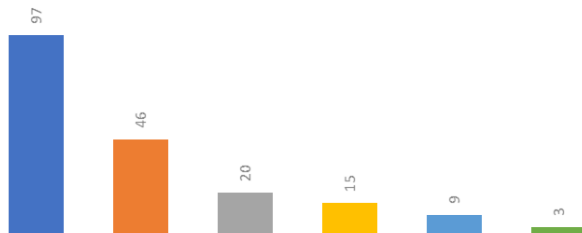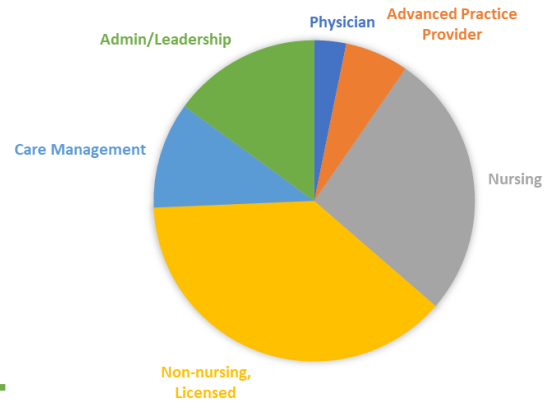
WHEN A PATIENT SMOKES, HOW OFTEN DO YOU PROVIDE CESSATION RESOURCES?

- ■ Often
- ■ Sometimes
- ■ Neutral
- ■ Rarely
- ■ None

36 | 47 | 22 | 34 | 51
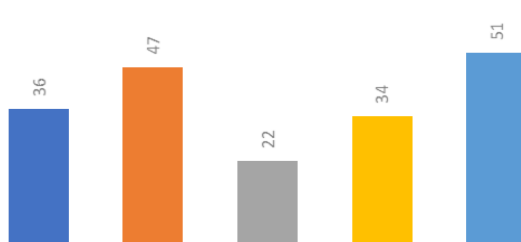
FREQUENCY OF INTERACTION WITH PATIENTS WITH ADDICTION RELATED ISSUES

None 7%
Often 23%
Rarely 23%
Neutral 3%
Sometimes 44%
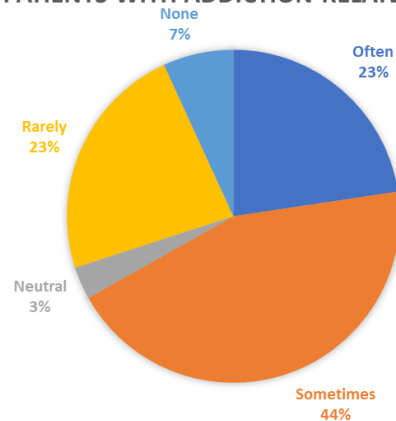
Select the 3 chronic diseases this community needs to address:

- ■ Mental Illness
- ■ Obesity
- ■ Diabetes
- ■ Pulmonary
- ■ Cardiac
- ■ Cancer
- ■ Rheumatic
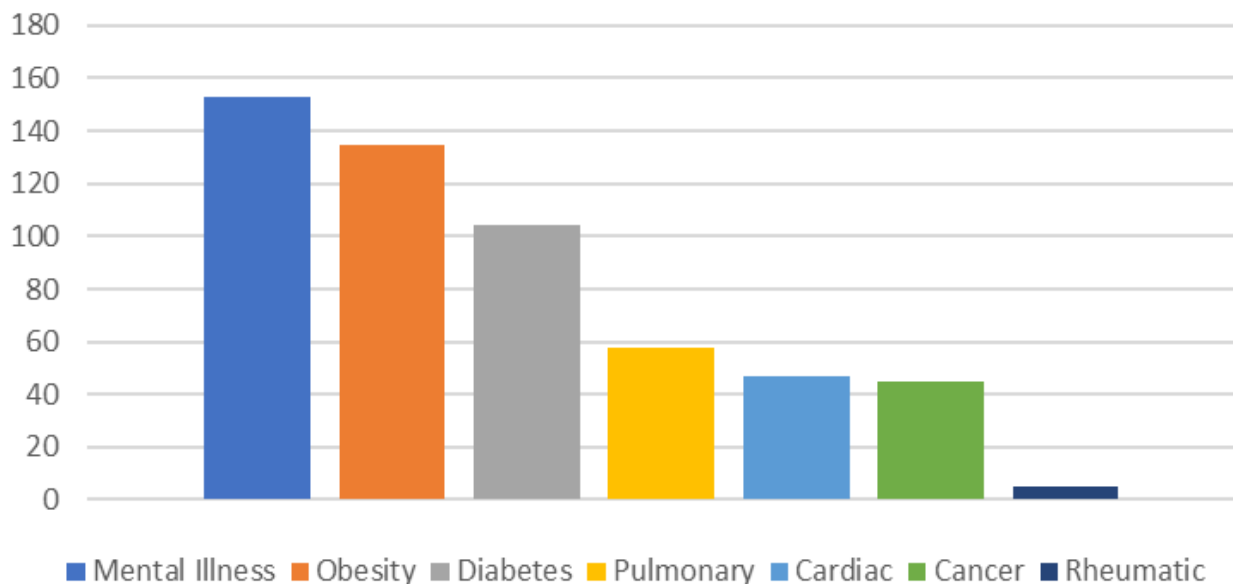
ACCESS TO CARE IS AN ISSUE IN OUR COUNTY.

Strongly Disagree 7%

Disagree 15%

Neutral 22%

Agree 35%

Strongly Agree 21%
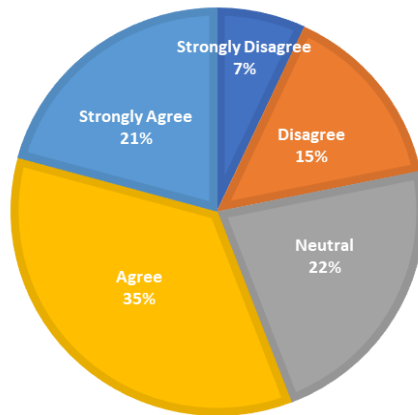
ARE THERE ADEQUATE COMMUNITY RESOURCES TO MEET YOUR PATIENTS' CHRONIC HEALTHCARE NEEDS?

■ Yes ■ No

39%

61%
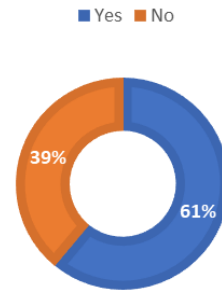
Barriers to healthcare in Reno County:

Barrier	Value
Caregiver support and education	~2
Need more diversity/specialty care	~5
Personal responsibility/motivation	~4
All of the above (finances, insurance, transportation)	~18
Lack of transportation	~5
Lack of insurance	~42
Lack of finaces to pay out of pocket costs	~110

(scale: 0, 20, 40, 60, 80, 100, 120)
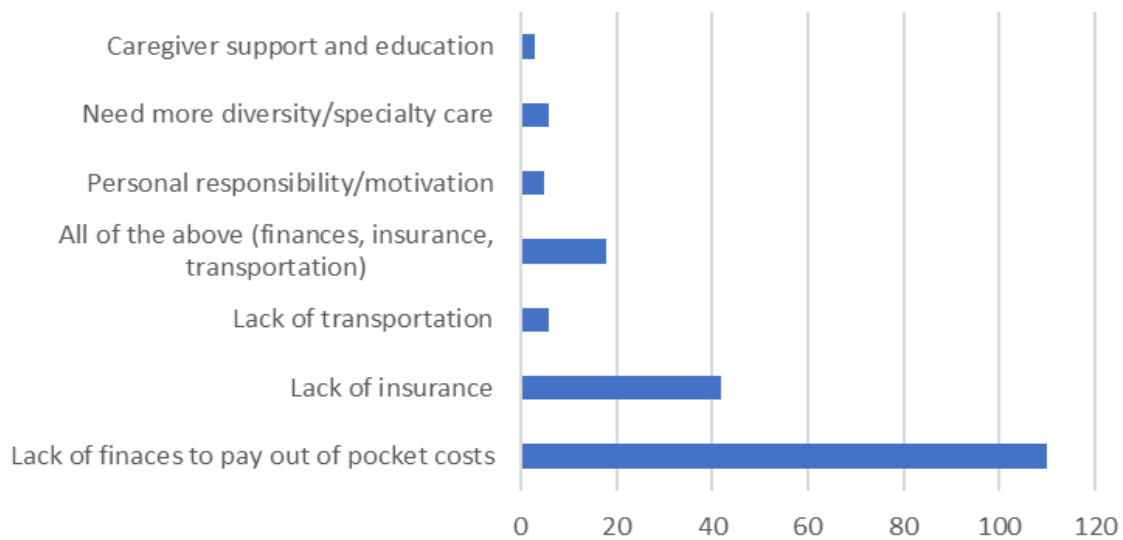
Resources that are missing:

Resource	Value
Free or reduced care	20
Education	20
Financial Assistance/Better...	16
Exercise opportunities	15
Better nutrition options	14
Rehab/treatment/MAT	7
Mental Health/Disability...	6
Transportation	5
Better coverage	5
Motivation/incentives/wellne...	5
Collaboration among providers	4
Child care	1

72
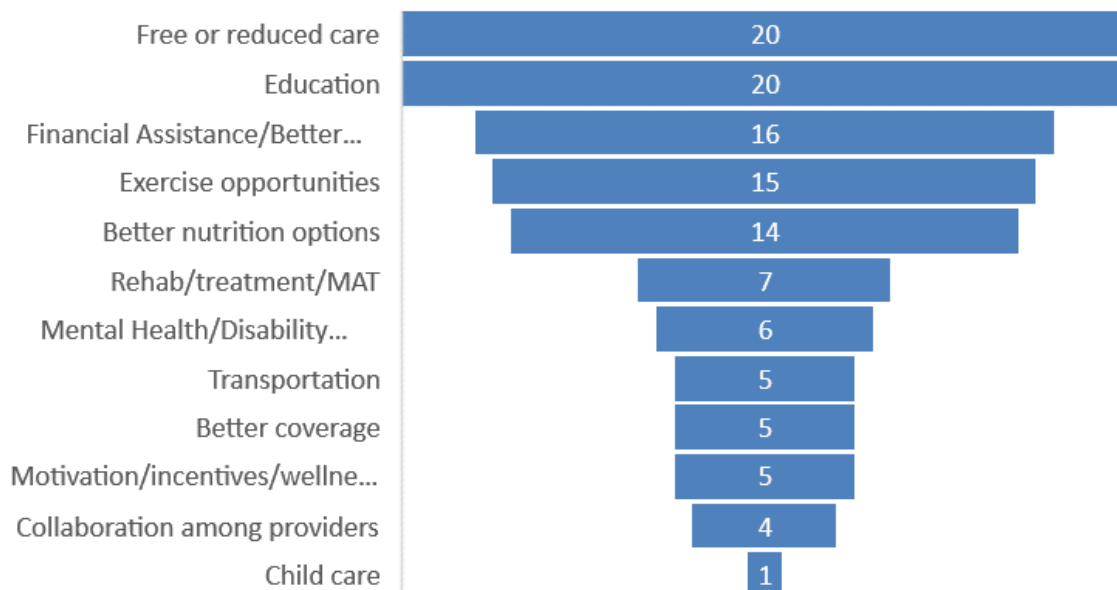
Inventory of Health Resources

Hutchinson Clinic is a team of over 100 physicians and providers located in central Kansas. The clinic's 600+ healthcare professionals provide Primary, Specialty, Surgical, and Walk-In Care Services with full-service radiology, lab, and pharmacy onsite.

The **Hutchinson Regional Healthcare System** provides medical care to Reno county residents and the surrounding area. **Hutchinson Regional Medical Center** a not-for-profit, 199-licensed bed, acute-care hospital serves the heath needs of the more than 65,000 residents of Reno county and the surrounding communities. **Horizons Mental Health Center** provides residents of Reno, Barber, Harper, Kingman and Pratt counties with a full range of out-patient mental health services including individual & family therapy. **Hospice and Home Care of Reno County** provides medical support services for patients diagnosed with life-threatening illness. Care is provided in the home or at Hospice House. HomeCare provides in-home health care services for acute and chronic needs. **Health-E-Quip** is a home medical equipment supply company that makes the transition from hospital to home easier. **Hutchinson Regional Medical Foundation** solicits and manages private donations that support patient care throughout Hutch Regional.

Hutchinson VA Outpatient Clinic – The Robert J. Dole VA Medical Center provides a full range of primary and specialty acute and extended care services to veterans in 59 counties of Kansas. Special emphasis programs include substance abuse, post traumatic stress disorder (PTSD), women's health, spinal cord injury, visual impairment, prosthetic and sensory aids, and homeless services. The clinic in Hutchinson provides primary care services for Veterans in the Hutchinson Kansas area. The Clinic also offers behavioral health services and individual counseling, laboratory blood drawing services, and specialty care referrals.

PrairieStar Health Center is a non-profit Federally Qualified Health Center (FQHC) offering comprehensive medical and dental services to persons of all ages with or without insurance. A sliding fee discount based on national poverty guidelines is offered with proof of income. Medical services offered include Same Day/Walk-In Urgent Care, routine medical care for adults and children, newborn care, and women's health. Behavioral health (therapy, alcohol & drug screening and referral) and case management services are also offered to primary care patients. On site lab, x-ray and ultrasound services are provided. A full service vision center will open September of 2019. Occupational Medicine services are also provided to community employers. PrairieStar has been providing primary care services in Reno County since 1995

Reno County Health Department 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, Prenatal, Family Planning, Immunizations Services provided include adult and childhood immunizations, and international travel vaccines.

Evaluation of the Issues

Based upon the secondary data that was reviewed and the results of the survey responses, the largest issues facing Reno County are:

Cancer

Cardiovascular Disease

Respiratory Disease

Diabetes

Dental Health

Maternal and Infant Health

Overall Health

Mental Health

Community Vitality and Physical Environment

Access to Care

Substance Use

Economy

Physical Activity

Nutrition

The Community Health Assessment Committee followed the PACE-EH Model and identified local priority-setting criteria to rank the above health issues both on importance as well as local feasibility.

The local priority-setting criteria are on the page that follows. Each member of the committee scored the issues using these criteria. To make the distinction of high, medium and low impact the score for the issue, responses marked "high" are weighted by a factor of 3; responses marked "medium" are weighted by a factor of 2; and responses marked "low" are unweighted.

Issue: Cancer

	High	Medium	Low
Political support to address issue	3	4	
Public demand	2	3	2
Preventability		6	1
Effectiveness of currently available strategies		5	2
Affordability: Prevention	1	5	1
Affordability: Screening		7	
Affordability: Treatment	1	4	2
Affordability Mean	1	5.3	1.5
Economic impact of no action	2	5	
Legal local Authority		3	4
Sub-Scores	8	31.3	10.5
Weighted Score	24	62.6	10.5
Total Score			97.1

Existing resources available to address issue:

Preventability - preventative screening paid by most insurers

Effectiveness defendant upon pay source

Economic impact to healthcare system caring for patients without insurance and families of those affected who cannot work

Legal authority would be limited other than advocating for Medicaid expansion

There are many organizations using marketing campaigns to prevent and help people stop smoking.

Health insurance is one resource to help people with a cancer diagnosis

Many drug companies have free/reduced medications available to those who are underinsurred

There are many pharma companies working to develop medications with better outcomes for all types of CA

Hospital System

Private Healthcare System

Tobacco cessation resources

Health Department

Existing work being done to address issue:

Reno County Cancer Council assists with costs

Palliative Care program for symptom relief by Hospice and HomeCare funded in part by Hutch Hospital for those with financial need

Education

Coalition work

Advocacy toward screening

Advocacy preventative measures (pre-cancer)

Issue: Respiratory

	High	Medium	Low
Political support to address issue		3	4
Public demand		4	3
Preventability	3	4	
Effectiveness of currently available strategies		4	3
Affordability: Prevention	3	3	1
Affordability: Screening		6	1
Affordability: Treatment	3	4	
Affordability Mean	3	4.3	1
Economic impact of no action	4	2	1
Legal local Authority		5	2
Sub-Scores	**10**	**26.3**	**14**
Weighted Score	**30**	**52.6**	**14**
Total Score			**96.6**

Existing resources available to address issue:

Affordability - prevention - high costs associated with limiting agriculture spraying, dust, harvest residual etc.

Effectiveness dependent upon pay source

Economic impact to healthcare system caring for patients without insurance and families of those affected who cannot work - chronic in nature so impacts longer and higher number of our population

Medical providers and medical centers

Medications

Health Department (Tobacco, CDRR)

Advocacy

CTC

RESIST

City of Hutchinson

Work Well

Existing work being done to address issue:

Improved education and offering of smoking cessation programs

Pulmonary program offered for chronic lung patients by Hospice and HomeCare and funded by Hutchinson Hospital when financial assistance needed to decrease hospitalization

HRMC is analyzing the effects of recurrent admissions and E.R. visits by people with pulmonary issues

HD (Tobacco, CDRR)

CTC

RESIST

Indoor Air

Issue: Cardiovascular

	High	Medium	Low
Political support to address issue	2	3	2
Public demand	4	3	
Preventability	2	5	
Effectiveness of currently available strategies	1	4	2
Affordability: Prevention	2	2	3
Affordability: Screening		6	1
Affordability: Treatment	3	2	2
Affordability Mean	2.5	3.3	2
Economic impact of no action	4	3	
Legal local Authority		5	2
Sub-Scores	15.5	26.3	8
Weighted Score	46.5	52.6	8
Total Score			107.1

Existing resources available to address issue:

Effectiveness - high smoking rate and obese population

Effectiveness and affordability of screening and treatment dependent upon pay source

Economic impact to healthcare system caring for patients without insurance and families of those affected who cannot work - chronic in nature so impacts longer and higher number of our population

Legal authority - would need to provide resources for losing weight, smoking cessation, cholesterol levels etc.

Medical providers and medical centers

Medications and procedures

Pharmaceutical companies (research)

American Heart Assn.

Hutchinson Regional Medial Center

Reno County Health Department

Hutchinson Clinic

Prairie Star Health Center

Built Environment

City of Hutchinson

Hutch Rec

Existing work being done to address issue:

Health fairs and free screenings

free activity for community - walking

Work being done by HEAL

Medical providers are now being held more accountable for hypertension management through CMS and commercial carriers

Kansas Stroke Collaborative/ Heart & Stroke Alliance

Tobacco Use (Resist/Cessation)

Hutchinson Rec

Schools

Medical Community (HRMC/HCLINIC)

Issue: Diabetes

	High	Medium	Low
Political support to address issue	3	3	1
Public demand	2	4	1
Preventability	5	2	
Effectiveness of currently available strategies	1	4	2
Affordability: Prevention	2	5	
Affordability: Screening	1	6	
Affordability: Treatment	1	4	2
Affordability Mean	1.3	5	2
Economic impact of no action	4	3	
Legal local Authority		3	2
Sub-Scores	16.3	24	8
Weighted Score	48.9	48	8
Total Score			**104.9**

Existing resources available to address issue:

Strategies are available but noncompliance is high

Affordability prevention - eating well can be costly

Effectiveness and affordability of screening and treatment dependent upon pay source

Economic impact - medium in that able to continue to work until later in years of diagnosis then if out of control multiple co-morbidities that impact health and ability to work and are costly in nature

Medical providers and medical centers

Medications and devices to monitor glucose levels

Dietitians

Patient assistance from pharma companies

Hutch Clinic (Dietitians)

Health Department (CDRR/WIC)

Food Policy

Physcial Activity Advocacy/activism

Existing work being done to address issue:

Diabetes education available in multiple areas and by multiple agencies

Diabetes Prevention Programs Initiated

A1c Classes initiated

Introduction to continuous glucose monitoring

Public awareness of the issue on a county, state, and national level

Pharma research

Physcial Activity activism

Hutch Clinic (Dietitians)

HRMC (Dietitians[acute])

Issue: Oral Health			
	High	**Medium**	**Low**
Political support to address issue		4	3
Public demand	1	3	3
Preventability	4	3	
Effectiveness of currently available strategies	1	5	1
Affordability: Prevention	2	3	2
Affordability: Screening	1	5	1
Affordability: Treatment	2	1	4
Affordability Mean	1.6	3	2.3
Economic impact of no action	1	4	2
Legal local Authority		4	3
Sub-Scores	8.6	26	14.3
Weighted Score	25.8	52	14.3
Total Score			92.1
Existing resources available to address issue:			
Dental coverage can be limited even with pay source. Limits in $ per year			
Economic impact low but quality of life impacted greatly			
Free dental clinic (annually)			
Prarie Star for underinsured			
Existing work being done to address issue:			
Prairie Star has dental and is adding on			
Free clinics annually			
School nurse education and free toothbrushes and paste provided			

Issue: Maternal Child Health

	High	Medium	Low
Political support to address issue	2	4	1
Public demand	5	1	1
Preventability	3	1	3
Effectiveness of currently available strategies	2	5	
Affordability: Prevention	2	4	1
Affordability: Screening	3	3	1
Affordability: Treatment	2	5	
Affordability Mean	2.3	4	1
Economic impact of no action	6	1	
Legal local Authority		5	2
Sub-Scores	20.3	21	8
Weighted Score	60.9	42	8
Total Score			110.9

Existing resources available to address issue:

RCHD Woman's Care Clinic

W.I.C.

Education Classes for expecting mothers

Prarie Star

Hutch Clinic

Existing work being done to address issue:

Bump to Baby

March of Dimes

MCH Clinic at Health Department

OB GYN Care at Hutch Clinic and HRMC

Agreement of medical community to diffuse costs of education, services to lower fetal infant mortatlity rates and prenatal health

Issue: Overall Health			
	High	**Medium**	**Low**
Political support to address issue	1	6	
Public demand	2	5	
Preventability	4	3	
Effectiveness of currently available strategies	1	2	4
Affordability: Prevention	2	5	
Affordability: Screening	1	5	1
Affordability: Treatment	1	6	
Affordability Mean	1.3	5.3	1
Economic impact of no action	6		
Legal local Authority		4	3
Sub-Scores	15.3	25.3	8
Weighted Score	45.9	50.6	8
Total Score			**104.5**
Existing resources available to address issue:			
Medical providers and Medical Centers Multiple community organizations offering information and activities to remain healthy			
Existing work being done to address issue:			
Medical providers offer talks in partnership with HRMC			
Medicare and commercial insurance providers have made "wellness exams" a quality metric for all providers Heal			

Issue: Mental Health			
	High	**Medium**	**Low**
Political support to address issue	3	3	1
Public demand	4	3	
Preventability	2	2	3
Effectiveness of currently available strategies	1	3	3
Affordability: Prevention	1	5	1
Affordability: Screening	2	3	2
Affordability: Treatment	1	3	3
Affordability Mean	1.3	3.6	2
Economic impact of no action	4		
Legal local Authority	2	3	2
Sub-Scores	17.3	17.6	11
Weighted Score	51.9	35.2	11
Total Score			**98.1**
Existing resources available to address issue:			
Horizons			
Medical providers and medical centers			
Local therapists in private practice			
ACE's Education			
Mental Health Work Group			
Existing work being done to address issue:			
Resilient community			
Trauma informed education			
Horizon's investment in crisis housing and childcare			

Issue: Community and Physical Environment			
	High	**Medium**	**Low**
Political support to address issue	1	6	
Public demand	1	5	1
Preventability	2	4	1
Effectiveness of available strategies	1	5	1
Affordability	1	5	1
Economic impact of no action	3	4	
Legal Authority	1	5	
Sub-Scores	10	34	4
Weighted Score	30	68	4
Total Score			**102**
Existing resources available to address issue:			
Work has been done for walking and bike trails and more parks			
HEAL			
Hutchinson Community Foundation			
Placemaking			
Hutch Rec			
Housing Commission			
Planning and Zoning			
Existing work being done to address issue:			
Placemaking			
Neighborhood initiative			
Opportunity Zoning			
City Zoning			
Environmental Health RCHD			

Issue: Access to Care

	High	Medium	Low
Political support to address issue		5	2
Public demand	2	4	1
Preventability	1	6	
Effectiveness of available strategies	1	5	1
Affordability	1	4	2
Economic impact of no action	4	3	
Legal Authority		6	1
Sub-Scores	9	33	7
Weighted Score	27	66	7
Total Score			100

Existing resources available to address issue:

Medical providers and medical centers

Administration of healthcare organizations

HCA committee

RCAT medical vouchers

HRMC PSTAR non emergent agreement

HEAL - Health Access Taskforce (HAT)

Economic Development (Chamber, City, County)

Existing work being done to address issue:

Medical Providers (Hospitalists)

Medical System relationship building

Chamber of Commerce (Eco Devo)

RCAT

Issue: Economy			
	High	**Medium**	**Low**
Political support to address issue	5	1	1
Public demand	5	2	
Preventability		6	1
Effectiveness of available strategies		2	5
Affordability	1	3	3
Economic impact of no action	7		
Legal Authority	1	6	
Sub-Scores	19	20	10
Weighted Score	57	40	10
Total Score			107
Existing resources available to address issue:			
Economic issues are noted as being present. Chamber is working on attracting more jobs and businesses			
Hutchinson Chamber of Commerce			
County Zoning Commission			
County Commissioners			
City of Hutchinson			
Young Professionals			
Existing work being done to address issue:			
Entrepreneurship Taskforce (HCF)			
CPIN (HCF)			
Chamber of Commerce (Eco Devo)			
City of Hutchinson (Branding, Zoning, Incentive)			

Issue: Physical Activity			
	High	**Medium**	**Low**
Political support to address issue		6	1
Public demand	1	5	1
Preventability	3	3	1
Effectiveness of available strategies		6	1
Affordability	1	6	
Economic impact of no action	2	5	
Legal Authority	1	4	2
Sub-Scores	8	35	6
Weighted Score	24	70	6
Total Score			100

Existing resources available to address issue:

Hutch Park and Rec.

YMCA and other Fitness Centers

School Systems

heal

RCHD

Existing work being done to address issue:

bike path project

local 5k runs sponsored by different organizations

sidewalk project (may not be working ont this currently)

Hutch Rec

RCHD

Schools

Issue: Nutrition			
	High	**Medium**	**Low**
Political support to address issue		6	1
Public demand	1	4	2
Preventability	2	4	1
Effectiveness of available strategies		3	4
Affordability		7	
Economic impact of no action	2	5	
Legal Authority		5	2
Sub-Scores	5	34	10
Weighted Score	15	68	10
Total Score			**93**
Existing resources available to address issue:			
Cost of healthy food is high			
Dietitians, medical providers and medical centers			
RCHC diabetes support group			
WIC and Food stamp program			
Existing work being done to address issue:			
HEAL			
Food bank			
Commodities			

Ranking of the Issues

Based upon the local priority-setting scores, that took into consideration both secondary public health data and the results of the survey, these are the top issues facing Reno County:

Clinical		
1	Maternal/Child Health	110.9
2	Cardiovascular	107.1
3	Diabetes	104.9
4	Overall Health	104.5
5	Respiratory	96.6
6	Oral Health	92.1
7	Cancer	82

Social/Behavioral		
1	Substance Use	110.9
2	Economy	107
3	Community/Physical Environment	102
4	Access to Care	100
5	Physical Activity	100
6	Mental Health	98.1
7	Nutrition	93

Further prioritization will be done with community input as part of the Community Health Improvement Planning process.

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Survey Response Frequency Tables

	Unweighted Freqency	Unweighted Percent	Weighted Frequency	Weighted Percent
1) In general, how would you rate the overall health of the Reno County?				
Healthy	53	0.3	8488.931905	0.307011849
Somewhat Healthy	88	0.5	13659.03476	0.493994481
Unhealthy	25	0.14	4290.467302	0.155169615
Very Healthy	7	0.04	942.4666667	0.034085376
Very Unhealthy	2	0.01	269.2761905	0.009738679
2) In general, my community has sufficient opportunities for physical activity?				
Agree	107	0.59	16475.21492	0.575843137
Disagree	21	0.12	3572.39746	0.124862745
Neutral	27	0.15	4582.183175	0.160156863
Strongly Agree	18	0.1	2881.255238	0.100705882
Strongly Disagree	8	0.04	1099.544444	0.038431373
3) In general, my community has sufficient options for healthy eating?				
Agree	81	0.45	12905.06143	0.455344418
Disagree	41	0.23	6864.298889	0.242201108
Neutral	42	0.23	6375.11381	0.224940618
Strongly Agree	7	0.04	1043.445238	0.036817102
Strongly Disagree	9	0.05	1153.399683	0.040696754
4) Are you aware of efforts in your community to promote tobacco cessation?				
Yes	62	0.35	9144.170635	0.322644497
No	95	0.53	16060.08079	0.566666667
Unsure	22	0.12	3137.067619	0.110688836
5) Is this Household doing well?				
Yes	132	0.75	21223.45175	0.760228277
No	12	0.07	1691.952063	0.060606061
Sometimes	33	0.19	5001.805238	0.179165662
6) What is the primary mode of transportation for the household?				
Own a car	172	0.9	26523.70476	0.918414918
Ride from friend/family	8	0.04	1413.7	0.048951049
Walk	5	0.03	269.2761905	0.009324009
Bike	5	0.03	538.552381	0.018648019
Bus	1	0	134.6380952	0.004662005
7) Does this form of transportation meet the needs of the household?				
Yes	172	0.95	26954.54667	0.942117647
No	3	0.02	403.9142857	0.014117647
Sometimes	6	0.03	1252.134286	0.043764706
8) Is your household able to receive/get health care when needed?				
Yes	161	0.89	25013.51413	0.87427451
No	9	0.05	1265.598095	0.044235294
Sometimes	11	0.06	2331.483016	0.081490196

	Unweighted Freqency	Unweighted Percent	Weighted Frequency	Weighted Percent
9) Is this household able to get medication when needed?				
No	15	0.08	2594.027302	0.091239148
Sometimes	1	0.01	157.0777778	0.005524862
Yes	165	0.91	25679.9727	0.903235991
10) Does anyone in your household have a chronic disease?				
No	99	0.55	15429.52571	0.541843972
Unknown	1	0.01	157.0777778	0.005516154
Yes	80	0.44	12889.35365	0.452639874
a) If yes: Does your house hold know how to manage the chronic disease?				
No	4	0.06	592.407619	0.060273973
Yes	62	0.94	9236.173333	0.939726027
11) Does anyone in this household struggle with their mental health?				
Yes	47	0.26	7443.242698	0.265020773
No	130	0.72	20058.83222	0.714205817
Unsure	4	0.02	583.431746	0.02077341
12 a) Do all members of the household feel safe in their: household?				
Yes	177	0.98	27681.59238	0.979047619
No	4	0.02	592.407619	0.020952381
12 b) Do all members of the household feel safe in their: neighborhood?				
Yes	158	0.88	25047.17365	0.890111643
No	18	0.1	2553.635873	0.090749601
Sometimes	4	0.02	538.552381	0.019138756
12 c) Do all members of the household feel safe in their: community?				
Yes	148	0.84	23507.81143	0.869521912
No	21	0.12	2585.051429	0.09561753
Sometimes	8	0.05	942.4666667	0.034860558
12 d) Do all members of the household feel safe in their: school?				
Yes	119	0.86	18564.34937	0.853326457
No	20	0.14	3190.922857	0.146673543
13) Is anyone in the household planning on moving in the next year?				
Yes	18	0.1	2917.15873	0.103668262
No	146	0.81	22913.15984	0.814274322
Maybe	16	0.09	2309.043333	0.082057416
14) Is anyone in the household interested in vocational training?				
Yes	21	0.12	3417.563651	0.120873016
No	152	0.84	23725.47635	0.839126984
Maybe	8	0.04	1130.96	0.04
15) Is the health of the household affected by Environmental issues?				
Yes	59	0.33	9283.296667	0.333736689
No	121	0.67	18532.93381	0.666263311

	Unweighted Freqency	Unweighted Percent	Weighted Frequency	Weighted Percent
16) Do you have 3 days of food and water for all members of the household?				
Yes	156	0.87	24333.59175	0.874516129
No	23	0.13	3491.614603	0.125483871
17 a) Please rate your level of support for policies that prohibit tobacco use in Local Parks:				
Definitely not supportive	10	0.06	1521.410476	0.054589372
Not supportive	13	0.07	2591.783333	0.092995169
Neutral	35	0.2	5666.019841	0.203301127
Supportive	68	0.38	10358.15746	0.371658615
Very Supportive	52	0.29	7732.714603	0.277455717
17 b) Please rate your level of support for policies that prohibit tobacco use in School Grounds:				
Definitely not supportive	3	0.02	695.6301587	0.024839744
Not supportive	4	0.02	819.0484127	0.029246795
Neutral	12	0.07	2257.432063	0.080608974
Supportive	95	0.53	14224.51476	0.507932692
Very Supportive	66	0.37	10008.09841	0.357371795
17 c) Please rate your level of support for policies that prohibit tobacco use in Hospital Grounds:				
Definitely not supportive	3	0.02	426.3539683	0.015151515
Not supportive	9	0.05	1725.611587	0.061323764
Neutral	19	0.1	3089.944286	0.109808612
Supportive	92	0.51	14303.05365	0.508293461
Very Supportive	58	0.32	8594.398413	0.305422648
17 d) Please rate your level of support for policies that prohibit tobacco use in Worksites:				
Definitely not supportive	7	0.04	1065.884921	0.038318813
Not supportive	12	0.07	2434.705556	0.087528235
Neutral	44	0.25	6725.172857	0.241771539
Supportive	68	0.38	10692.50873	0.384398193
Very Supportive	47	0.26	6897.958413	0.24798322
18) Are you aware if the Pathways to a Healthy Kansas Initiative that is being implemented by Heal Reno County in your community?				
Yes	19	0.11	3152.775397	0.113123994
No	141	0.8	22486.80587	0.8068438
Unsure	16	0.09	2230.504444	0.080032206

Mental Health And Thriving Status

		Mental Health			Total
		Yes (n=45)	No (n=126)	Unsure (n=5)	**Total**
Thriving	Yes (n=131)				
	Row %	21.37%	77.86%	0.76%	**100%**
	Column %	62.22%	80.95%	20.00%	
	No (n=12)				
	Row %	66.67%	28.57%	0%	**100%**
	Column %	17.78%	3.17%	0%	
	Sometimes (n= 33)				
	Row %	27.27%	60.61%	12.12%	**100%**
	Column %	20.00%	15.87%	80.00%	
	Total	**100%**	**100%**	**100%**	

Because the P-Value is less than the alpha, there is statistical significance for this relationship.

Support of TF Parks and Impact By Environmental Factors

	Environmental Impact			
	Yes (n=57)	No (n=120)	Maybe (n=1)	Total
Definitely not supportive (n=10)				
Row %	10.00%	90.00%	0.00%	**100%**
Column %	1.75%	7.50%	0.00%	
Not supportive (n=13)				
Row %	38.46%	53.85%	8%	**100%**
Column %	8.77%	5.83%	100%	
Neutral (n= 35)				
Row %	28.57%	71.43%	0.00%	**100%**
Column %	17.54%	20.83%	0.00%	
Supportive (n=68)				
Row %	0.322329	0.676471	0	**100%**
Column %	28.60%	38.33%	0.00%	
Very Supportive (n=52)				
Row %	0.365385	0.634615	0	**100%**
Column %	33.33%	27.50%	0%	
Total	**100%**	**100%**	**100%**	

Since the p-value is less than the alpha, there is significance.

$$X^2 = 15.155 \quad DF = 8$$

P-value =.04021

Household Concern and City Lived in

		Household Concern					
		No Concern	Diet and Exercise	Aging	Financial	Health	Community
City	Buhler	0	3	0	0	3	1
	Haven	8	0	1	0	2	2
	Hutch: Central	36	4	2	9	15	6
	Hutch: North East	3	1	1	1	1	0
	Hutch: North West	16	1	1	2	6	2
	Hutch: South	1	0	0	1	1	2
	Hutch: West	14	0	0	0	0	0
	Nickerson	3	0	0	5	2	2
	Pretty Prairie	4	1	0	1	1	0
	South Hutch	7	0	0	2	0	1
	Willowbrook	2	0	1	0	1	1

Since the p-value is less than the alpha, there is significance.

$$X^2 = 80.535 \quad DF = 60$$

P-value =.03966

Country Concern and City Lived in

City	No Concern	Diet and Exercise	Aging	Financial	Health	Community
Buhler	0	3	0	0	3	1
Haven	8	0	1	0	2	2
Hutch: Central	36	4	2	9	15	6
Hutch: North East	3	1	1	1	1	0
Hutch: North West	16	1	1	2	6	2
Hutch: South	1	0	0	1	1	2
Hutch: West	14	0	0	0	0	0
Nickerson	3	0	0	5	2	2
Pretty Prairie	4	1	0	1	1	0
South Hutch	7	0	0	2	0	1
Willowbrook	2	0	1	0	1	1

Since the p-value is less than the alpha, there is significance.

$$X^2 = 101.31 \quad DF = 60$$

P-value =.0006842

Ability to Afford Medication and city lived in

	Household Concern		
City		Yes	No	Sometimes
	Buhler	7	0	0
	Haven	13	0	0
	Hutch: Central	65	8	0
	Hutch: North East	7	0	0
	Hutch: North West	28	0	0
	Hutch: South	2	3	0
	Hutch: West	14	0	0
	Nickerson	10	1	1
	Pretty Prairie	6	1	0
	South Hutch	9	1	0
	Willowbrook	4	1	0

Since the p-value is less than the alpha, there is significance.

$$X^2 = 54.324 \quad DF = 30$$

P-value = .00423