



Community Health Needs Assessment Pawnee County, KS

On Behalf of Pawnee Valley Community Hospital



May 2024

**VVV Consultants LLC
Olathe, KS**

Community Health Needs Assessment

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I. Executive Summary

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I. Executive Summary

Pawnee Valley Community Hospital (Primary Service Area) – Pawnee County, KS - 2024 Community Health Needs Assessment (CHNA)

The previous Community Health Needs Assessment for **Pawnee County Community Hospital** (PSA) was completed in 2021. (Note: The Patient Protection and Affordable Care Act (ACA) requires non-profit hospitals to conduct a CHNA every three years and adopt an implementation strategy to meet the needs identified by the CHNA). The Round 5 Pawnee County, KS CHNA began in December of 2023 and was facilitated/created by VVV Consultants, LLC (Olathe, KS) staff under the direction of Vince Vandehaar, MBA.

Creating healthy communities requires an elevated level of mutual understanding and collaboration among community leaders. The development of this assessment brings together community health leaders, providers, and other residents to research and prioritize county health needs while documenting community health delivery success. This health assessment will serve as the foundation for community health improvement efforts for the next three years.

Important community CHNA Benefits for both the local hospital and the health department, are as follows: 1.) Increases knowledge of community health needs and resources 2.) Creates a collective understanding of the priorities of the community’s health needs 3.) Enhances relationships and mutual understanding between and among stakeholders 4.) Provides a basis upon which community stakeholders can make decisions about how they can contribute to improving the health of the community 5.) Provides rationale for current and potential funders to support efforts to improve the health of the community 6.) Creates opportunities for collaboration in the delivery of services to the community and 7.) Guides the hospital and local health department on how they can align their services and community benefit programs to best meet needs, and 8.) fulfills the Hospital's “Mission” to deliver.

County Health Area of Future Focus on Unmet Needs

Area Stakeholders held a community conversation to review, discuss, and prioritize health delivery. Below are two tables reflecting community views and findings:

2024 CHNA Priorities				
Unmet Health Needs - Pawnee Co, KS				
On Behalf Pawnee Valley Community Hospital				
Town Hall - 2/22/24 (Attendees 35 / 129 Total Votes)				
#	Community Health Needs to Change and/or Improve	Votes	%	Accum
1	Substance Abuse (Drugs & Alcohol)	21	16.3%	16%
2	Mental Health (Diagnosis, Placement, Aftercare, Access to Providers)	18	14.0%	30%
3	Childcare (Accessible & Affordable)	15	11.6%	42%
4	Provide Youth Activities	11	8.5%	50%
5	Physician Recruitment (Primary Care-MDs, DOs)	10	7.8%	58%
6	Health Education (Chronic/Prevention)	8	6.2%	64%
7	Obesity (Exercise & Nutrition)	7	5.4%	70%
8	Physical activities for Adults	7	5.4%	75%
9	Visiting Specialists (ONC, ORTHO, CV, OBGYN, EMT, NEP, DERM)	7	5.4%	81%
Total Votes		129	100%	
Other needs receiving votes: Access to Health Insurance, Dental Care, Teen Pregnancy, Sidewalk Improvements, School Attendance, Transportation, Air Quality, Access to Grocery Stores / Healthy Foods.				

Town Hall CHNA Findings: Areas of Strengths

Pawnee Co, KS PSA - Community Health Strengths			
#	Topic	#	Topic
1	Three Family Medicine Clinics	8	Quality and Affordable Long Term Care
2	EMT, Fire Dept, and Hospital have strong collaboratio	9	Childcare Committee - improving childcare
3	Thriving Hospital	10	Several Internet Providers/Strong Connection
4	Access to Recreation and Exercise	11	Available Mental Health /Crisis Services
5	Opioids dispense is minimal	12	School programs for parent involvement & education
6	Quality Health Dept	13	Community Involvement
7	Bi-Annual Health Fair	14	State Hospital offers continuing education

Key CHNA Wave #5 Secondary Research Conclusions found:

KANSAS HEALTH RANKINGS: According to the 2023 Robert Woods Johnson County Health Rankings, Pawnee Co, KS, on average was ranked 87th in Health Outcomes, 55th in Health Factors, and 28th in Physical Environmental Quality out of the 105 Counties.

TAB 1. Pawnee County's population is 6,179 (based on 2023 findings). About four percent (4.1%) of the population is under the age of 5, while the population that is over 65 years old is 23.9%. Children in single parent households make up a total of 16.4% compared to the rural norm of 15%, and 82.2% are living in the same house as one year ago.

TAB 2. In Pawnee County, the average per capita income is \$28,956 while 14.9% of the population is in poverty. The severe housing problem was recorded at 4.9% compared to the rural norm of 8%. Those with food insecurity in Pawnee County is 11.3%, and those having limited access to healthy foods (store) is 8.7%. Individuals recorded as having a long commute while driving alone is 7.8% compared to the norm of 17%.

TAB 3. Children eligible for a free or reduced-price lunch in Pawnee County is 51.1%. Findings found that 90.7% of Pawnee County ages 25 and above graduated from high school while 19.5% have a bachelor's degree or higher (2022).

TAB 4. The percentage of births where prenatal care began in the first trimester was recorded at 80.6% compared to the rural norm of 82.8%. Additionally, the percentage of births with low birth weight was 6.3%. Pawnee Counts recorded 5.8% of births occurring to teens between ages 15-19. The percentage of births where mother smoked during pregnancy was 15.7% compared to the rural norm of 12.2%.

TAB 5. The Pawnee County primary care service coverage ratio is 1 provider (county based officed physician who is a MD and/or DO) to 1,061 residents. There were 983 preventable hospital stays compared to the rural norm of 3,289. Patients who gave their hospital a rating of 9 or 10 (scale 0-10) was 78% while patients who reported they would definitely recommend the hospital was recorded at 80%.

Secondary Research Continued

TAB 6. In Pawnee County, adults ever diagnosed with depression as of 2021 was 19%. The Mental Behavioral hospital admissions rate per 100k was 28.9 compared to the rural norm of 29.3.

TAB 7a – 7b. Pawnee County has an obesity percentage of 39.6% and a physical inactivity percentage is 25.7%. The percentage of adults who smoke is 20.8%, while the excessive drinking percentage is 19.7%. The percentage of adults who have taken medication for high blood pressure is 81.3%, while their heart failure admissions rate was recorded at 19.4. Those with kidney disease are 3.4% compared to the rural norm of 3.6%. The percentage of adult individuals who were recorded with cancer was 8.2% while adults recorded with diabetes (20+) is 9.3% compared to the rural norm of 8%.

TAB 8. The adult uninsured rate for Pawnee County is 9.1% compared to the rural norm of only 10.9%.

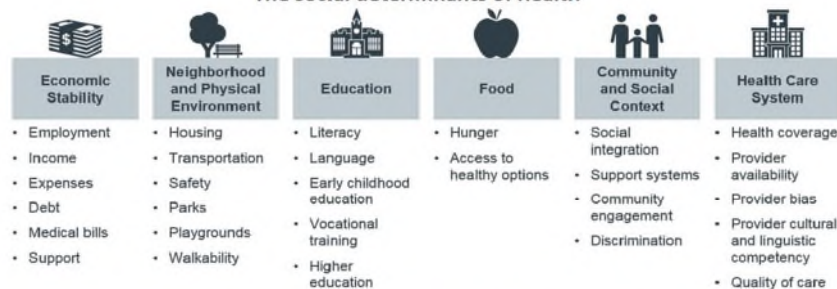
TAB 9. The life expectancy rate in Pawnee County for males and females is 77 years of age (76.7). Alcohol-impaired driving deaths for Pawnee County is 16.7% while age-adjusted Cancer Mortality rate per 100,000 is 129.4. The age-adjusted heart disease mortality rate per 100,000 is at 175.4.

TAB 10. A recorded 66.7% of Pawnee County has access to exercise opportunities. Continually, 29% of women have done a mammography screening compared to the rural norm of 43.8%. Adults recorded in Pawnee County who have had a regular routine check-up equals 74.9%.

Social Determinants Driving Community Health: From Town Hall conversations the Economy followed by Provider Access, Community/Social Support, and Neighborhood / Physical Environment are impacting community health, see Sec V for detailed analysis.

Social Determinants - Online Community Feedback Pawnee County (N=118)

The social determinants of health



KEY "Social Determinant Takeaways" to Improve Our Community Health	
Having urgent care and/or telehealth options would help address needs that would help patient not have to travel.	Having more options for transportation to medical appointments.
Having more affordable Childcare options so parents can work.	Community offer more services for the Seniors.
Offering more nutrition education and options for exercise programs in the Community.	Having more Primary Care Physicians that reside in Community.

Key CHNA Wave #4 Primary Research Conclusions found:

Community Feedback from residents, community leaders, and providers (N=118) provided the following community insights via an online perception survey:

- Using a Likert scale, the average between Pawnee County stakeholders and residents that would rate the overall quality of healthcare delivery in their community as either Very Good or Good; is 63.6%.
- Pawnee County stakeholders are very satisfied with some of the following services: Ambulance Services, Inpatient Hospital Services, and Pharmacy.
- When considering past CHNA needs, the following topics came up as the most pressing: Mental Health Services, Drug / Alcohol Abuse, Oncology / Cancer Treatment, Poverty / Employment, Air Quality, Nursing Home / Senior Care, Water Quality, Opioids, Pediatric Care, and Women's Health.

Pawnee County, KS - CHNA YR 2024 N=118					
Past CHNA Unmet Needs Identified		Ongoing Problem			Pressing
Rank	Ongoing Problem	Votes	%	Trend	Rank
1	Mental Health Services (Provider, Treatment, Aftercare)	56	16.1%		1
2	Drug / Alcohol Abuse	49	14.1%		2
3	Poverty / Employment	27	7.8%		4
4	Opioids	25	7.2%		8
5	Pediatric Care	23	6.6%		9
6	Womens Health	23	6.6%		10
7	Oncology / Cancer Treatment	22	6.3%		3
8	Water Quality	22	6.3%		7
9	Air Quality	21	6.1%		5
10	Nursing Home / Senior Care	18	5.2%		6
11	Awareness / Education of Healthcare Services	16	4.6%		11
12	Exercise / Fitness Services	15	4.3%		14
13	Home Health / Hospice	15	4.3%		13
14	Nutrition - Healthy Food Options	15	4.3%		12
	Totals	347	100.0%		

II. Methodology

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II. Methodology

a) CHNA Scope and Purpose

The federal Patient Protection and Affordable Care Act (ACA) requires that each registered 501(c)3 hospital conduct a Community Health Needs Assessment (CHNA) at least once every three years and adopt a strategy to meet community health needs. Any hospital that has filed a 990 is required to conduct a CHNA. IRS Notice 2011-52 was released in late fall of 2011 to give notice and request comments.

JOB #1: Meet/Report IRS 990 Required Documentation

1. A description of the community served by the facility and how the community was determined;
2. A description of the process and methods used to conduct the CHNA;
3. The identity of any and all organizations with which the organization collaborated and third parties that it engaged to assist with the CHNA;
4. A description of how the organization considered the input of persons representing the community (*e.g., through meetings, focus groups, interviews, etc.*), who those persons are, and their qualifications;
5. A prioritized description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and
6. A description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

Section 501(r) provides that a CHNA must take into account input from persons who represent the broad interests of the community served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: Government agencies with current information relevant to the health needs of the community and representatives or members in the community who are medically underserved, low-income, minority populations, and populations with chronic disease needs. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility's defined community (*e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc.*).

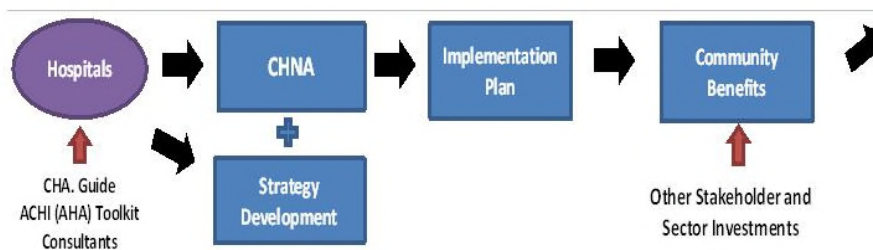
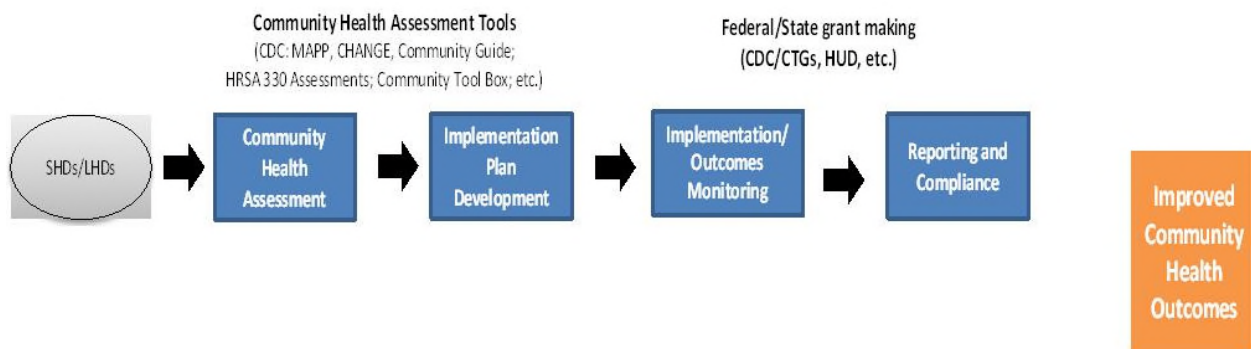
JOB #2: Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be "conducted" in the taxable year that the written report of the CHNA findings is made widely available to the public. The Notice also indicates that the IRS intends to pattern its rules for **making a CHNA "widely available to the public"** after the rules currently in effect for Form 990. Accordingly, an organization would make a **facility's written report** widely available by posting the final report on its website either in the form of (1) the report itself, in a readily accessible format or (2) a link to another organization's website, along with instructions for accessing the report on that website. *The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.*

JOB #3: Adopt an Implementation Strategy by Hospital

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. The Notice defines an “implementation strategy” as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it. A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

Great emphasis has been given to work hand-in-hand with leaders from hospitals, the state health department and the local health department. A common approach has been adopted to create the CHNA, leading to aligned implementation plans and community reporting.



IRS Requirements Overview (Notice 2011-52)

Notice and Request for Comments Regarding the Community Health Needs Assessment Requirements for Tax-exempt Hospitals

Applicability of CHNA Requirements to “Hospital Organizations”

The CHNA requirements apply to “hospital organizations,” which are defined in Section 501(r) to include (1) organizations that operate one or more state-licensed hospital facilities, and (2) any other organization that the Treasury Secretary determines is providing hospital care as its principal function or basis for exemption.

How and When to Conduct a CHNA

Under Section 501(r), a hospital organization is required to conduct a CHNA for each of its hospital facilities once every three taxable years. ***The CHNA must take into account input from persons representing the community served by the hospital facility and must be made widely available to the public. The CHNA requirements are effective for taxable years beginning after March 23, 2012.*** As a result, a hospital organization with a June 30 fiscal year end must complete a CHNA full report every 3 years for each of its hospital facilities by fiscal June 30th.

Determining the Community Served

A CHNA must identify and assess the health needs of the **community served** by the hospital facility. Although the Notice suggests that geographic location should be the primary basis for defining the community served, it provides that the organization may also take into account the target populations served by the facility (e.g., children, women, or the aged) and/or the facility’s principal functions (e.g., specialty area or targeted disease). *A hospital organization, however, will not be permitted to define the community served in a way that would effectively circumvent the CHNA requirements (e.g., by excluding medically underserved populations, low-income persons, minority groups, or those with chronic disease needs).*

Persons Representing the Community Served

Section 501(r) provides that a CHNA must take into account input from **persons who represent the broad interests of the community** served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: (1) government agencies with current information relevant to the health needs of the community and (2) representatives or members of medically underserved, low-income, and minority populations, and populations with chronic disease needs, in the community. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility’s defined community (e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc.).

Required Documentation

The Notice provides that a hospital organization will be required to separately document the CHNA for each of its hospital facilities in a **written report** that includes the following information: 1) a description of the community served by the facility and how the community was determined; 2) a description of the process and methods used to conduct the CHNA; 3) the identity of any and all organizations with which the organization collaborated and third parties that it engaged to assist with the CHNA; 4) a description of how the organization considered the input of persons representing the community (e.g., through meetings, focus groups, interviews, etc.), who those persons are, and their qualifications; 5) a prioritized

description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and 6) a description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be **“conducted”** in the taxable year that the written report of the CHNA findings is made widely available to the public. The Notice also indicates that the IRS intends to pattern its rules for making a CHNA “widely available to the public” after the rules currently in effect for Forms 990. *Accordingly, an organization would make a facility’s written report widely available by posting on its website either (1) the report itself, in a readily accessible format, or (2) a link to another organization’s website, along with instructions for accessing the report on that website. The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.*

How and When to Adopt an Implementation Strategy

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. **The Notice defines an “implementation strategy” as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need, or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it.** A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

Under the Notice, an implementation strategy is considered to be “adopted” on the date the strategy is approved by the organization’s board of directors or by a committee of the board or other parties legally authorized by the board to act on its behalf. Further, the formal adoption of the implementation strategy must occur by the end of the same taxable year in which the written report of the CHNA findings was made available to the public. For hospital organizations with a June 30 fiscal year end, that effectively means that the organization must complete and appropriately post its first CHNA no later than its fiscal year ending June 30, 2013, and formally adopt a related implementation strategy by the end of the same tax year. *This final requirement may come as a surprise to many charitable hospitals, considering Section 501(r) contains no deadline for the adoption of the implementation strategy.*

IRS Community Health Needs Assessment for Charitable Hospital Organizations - Section 501(0)(3) Last Reviewed or Updated: 21-Aug-2020

In addition to the general requirements for tax exemption under Section 501(c)(3) and Revenue Ruling 69-545 hospital organizations must meet the requirements imposed by Section 501(r) on a facility-by-facility basis in order to be treated as an organization described in Section 501(c)(3). These additional requirements are:

1. Community Health Needs Assessment (CHNA) - Section 501(r)(3),
2. Financial Assistance Policy and Emergency Medical Care Policy - Section 501(r)(4),
3. Limitation on Charges - Section 501(r)(5), and
4. Billing and Collections - Section 501(r)(6).

Medically underserved populations include populations experiencing health disparities or that are at risk of not receiving adequate medical care because of being uninsured or underinsured, or due to geographic, language, financial, or other barriers. Populations with language barriers include those with limited English proficiency. Medically underserved populations also include those living within a hospital facility’s service area but not receiving adequate medical care from the facility because of cost, transportation difficulties, stigma, or other barriers.

Additionally, in determining its patient populations for purposes of defining its community, a hospital facility must take into account all patients without regard to whether (or how much) they or their insurers pay for the care received or whether they are eligible for assistance under the hospital facility's financial assistance policy. If a hospital facility consists of multiple buildings that operate under a single state license and serve different geographic areas or populations, the community served by the hospital facility is the aggregate of these areas or populations.

Additional Sources of Input

In addition to soliciting input from the three required sources, a hospital facility may solicit and take into account input received from a broad range of persons located in or serving its community. This includes, but is not limited to:

- Health care consumers and consumer advocates
- Nonprofit and community-based organizations
- Academic experts
- Local government officials
- Local school districts
- Health care providers and community health centers
- Health insurance and managed care organizations,
- Private businesses, and
- Labor and workforce representatives.

Although a hospital facility is not required to solicit input from additional persons, it must take into account input received from any person in the form of written comments on the most recently conducted CHNA or most recently adopted implementation strategy.

Collaboration on CHNA Reports

A hospital facility is permitted to conduct its CHNA in collaboration with other organizations and facilities. This includes related and unrelated hospital organizations and facilities, for-profit and government hospitals, governmental departments, and nonprofit organizations.

In general, every hospital facility must document its CHNA in a separate CHNA report unless it adopts a joint CHNA report. However, if a hospital facility is collaborating with other facilities and organizations in conducting its CHNA, or if another organization has conducted a CHNA for all or part of the hospital facility's community, portions of a hospital facility's CHNA report may be substantively identical to portions of the CHNA reports of a collaborating hospital facility or other organization conducting a CHNA, if appropriate under the facts and circumstances.

If two hospital facilities with overlapping, but not identical, communities collaborate in conducting a CHNA, the portions of each hospital facility's CHNA report relevant to the shared areas of their communities might be identical. So, hospital facilities with different communities, including general and specialized hospitals, may collaborate and adopt substantively identical CHNA reports to the extent appropriate. However, the CHNA reports of collaborating hospital facilities should differ to reflect any material differences in the communities served by those hospital facilities. Additionally, if a governmental public health department has conducted a CHNA for all or part of a hospital facility's community, portions of the hospital facility's CHNA report may be substantively identical to those portions of the health department's CHNA report that address the hospital facility's community.

Collaborating hospital facilities may produce a joint CHNA report as long as all of the collaborating hospital facilities define their community to be the same and the joint CHNA report contains all of the same basic information that separate CHNA reports must contain. Additionally, the joint CHNA report must be clearly identified as applying to the hospital facility.

Joint Implementation Strategies

As with the CHNA report, a hospital facility may develop an implementation strategy in collaboration with other hospital facilities or other organizations. This includes but is not limited to related and unrelated hospital organizations and facilities, for-profit and government hospitals, governmental departments, and nonprofit organizations. In general, a hospital facility that collaborates with other facilities or organizations

in developing its implementation strategy must still document its implementation strategy in a separate written plan that is tailored to the particular hospital facility, taking into account its specific resources. However, a hospital facility that adopts a joint CHNA report may also adopt a joint implementation strategy. With respect to each significant health need identified through the joint CHNA, the joint implementation strategy must either describes how one or more of the collaborating facilities or organizations plan to address the health need or identify the health need as one the collaborating facilities or organizations do not intend to address. It must also explain why they do not intend to address the health need.

A joint implementation strategy adopted for the hospital facility must also: Be clearly identified as applying to the hospital facility, Clearly identify the hospital facility's role and responsibilities in taking the actions described in the implementation strategy as well as the resources the hospital facility plans to commit to such actions, and Include a summary or other tool that helps the reader easily locate those portions of the joint implementation strategy that relate to the hospital facility.

Adoption of Implementation Strategy

An authorized body of the hospital facility must adopt the implementation strategy. See the discussion of the Financial Assistance Policy below for the definition of an authorized body.· This must be done on or before the 15th day of the fifth month after the end of the taxable year in which the hospital facility finishes conducting the CHNA. This is the same due date (without extensions) of the Form 990.

Acquired Facilities A hospital organization that acquires a hospital facility (through merger or acquisition) must meet the requirements of Section 501(r)(3) with respect to the acquired hospital facility by the last day of the organization's second taxable year beginning after the date on which the hospital facility was acquired. In the case of a merger that results in the liquidation of one organization and survival of another, the hospital facilities formerly operated by the liquidated organization will be considered "acquired," meaning they will have until the last day of the second taxable year beginning after the date of the merger to meet the CHNA requirements. Thus, the final regulations treat mergers equivalently to acquisitions.

New Hospital Organizations

An organization that becomes newly subject to the requirements of Section 501(r) because it is recognized as described in Section 501(c)(3) and is operating a hospital facility must meet the requirements of Section 501(r)(3) with respect to any hospital facility by the last day of the second taxable year beginning after the latter of: The effective date of the determination letter recognizing the organization as described in Section 501(c)(3), or · The first date that a facility operated by the organization was licensed, registered, or similarly recognized by a state as a hospital.

New Hospital Facilities

A hospital organization must meet the requirements of Section 501(r)(3), with respect to a new hospital facility it operates by the last day of the second taxable year beginning after the date the facility was licensed, registered, or similarly recognized by its state as a hospital.

Transferred/Terminated Facilities

A hospital organization is not required to meet the requirements of Section 501(r)(3) with respect to a hospital facility in a taxable year if the hospital organization transfers all ownership of the hospital facility to another organization or otherwise ceases its operation of the hospital facility before the end of the taxable year. The same rule applies if the hospital facility ceases to be licensed, registered, or similarly recognized as a hospital by a state during the taxable year. By extension, a government hospital organization that voluntarily terminates its Section 501(c)(3) recognition as described in Rev. Proc. 2018-5 (updated annually) is no longer considered a hospital organization for purposes of Section 501(r) and therefore is not required to meet the CHNA requirements during the taxable year of its termination.

Public Health Criteria:

Domain 1: Conduct and disseminate assessments focused on population health status and public health issues facing the community.

Domain 1 focuses on the assessment of the health of the population in the jurisdiction served by the health department. The domain includes systematic monitoring of health status; collection, analysis, and dissemination of data; use of data to inform public health policies, processes, and interventions; and participation in a process for the development of a shared, comprehensive health assessment of the community.

DOMAIN 1 includes 4 STANDARDS:

- **Standard 1.1** - Participate in or Conduct a Collaborative Process Resulting in a Comprehensive Community Health Assessment
- **Standard 1.2** - Collect and Maintain Reliable, Comparable, and Valid Data That Provide Information on Conditions of Public Health Importance and on the Health Status of the Population
- **Standard 1.3** - Analyze Public Health Data to Identify Trends in Health Problems, Environmental Public Health Hazards, and Social and Economic Factors That Affect the Public's Health
- **Standard 1.4** - Provide and Use the Results of Health Data Analysis to Develop Recommendations Regarding Public Health Policy, Processes, Programs, or Interventions

Required CHNA Planning Process Requirements:

- a. Participation by a wide range of community partners.
- b. Data / information provided to participants in CHNA planning process.
- c. Evidence of community / stakeholder discussions to identify issues & themes. Community definition of a "healthy community" included along with list of issues.
- d. Community assets & resources identified.
- e. A description of CHNA process used to set priority health issues.

Seven Steps of Public Health Department Accreditation (PHAB):

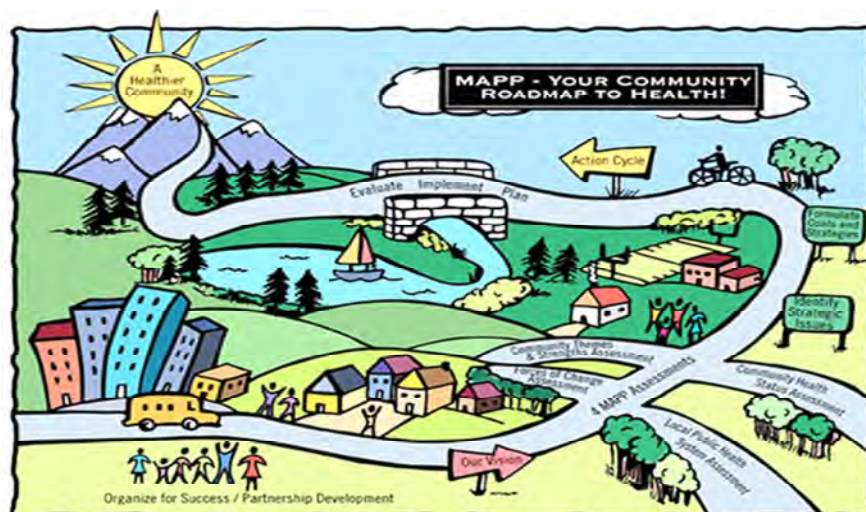
1. Pre-Application
2. Application
3. Document Selection and Submission
4. Site Visit
5. Accreditation Decision
6. Reports
7. Reaccreditation

MAPP Process Overview

Mobilizing for Action through Planning and Partnerships (MAPP) is a flexible strategic planning tool for improving the health and quality of life for the community. Like most strategic planning, MAPP involves organizing partners, creating a vision and shared values, collecting data, identifying areas for improvement, and developing goals and strategies to address them. Through collaboration with partners and the community, MAPP allows us to focus our efforts and work on issues to strengthen the local public health system.

The MAPP process includes the following six phases. It's important to note that MAPP has no set end point and will continue throughout the life cycle of the Community Health Improvement Plan (CHIP).

1. In this first phase, **Organize for Success/Partnership Development**, various sectors of the community with established relationships are reviewed, leading to the identification of areas for partnership development and creation of new relationships to enhance the MAPP process.
2. In the second phase, **Visioning**, a shared community vision and common values for the MAPP process are created.
3. In the third phase, **Four MAPP Assessments**, data is collected from existing and new sources about the health of our community, which results in a Community Health Assessment (CHA).
4. In the fourth phase, **Identify Strategic Issues**, community partners and health professionals select issues based on data collected from the third phase that are critical to the local public health system and align with the vision from the second phase.
5. In the fifth phase, **Formulate Goals and Strategies**, potential ways to address the strategic issues are identified by the community along with the setting of achievable goals. The final result is a Community Health Improvement Plan (CHIP).
6. The sixth and final phase of the MAPP process is the **Action Cycle**, which is where the work happens for meeting the objectives set in the previous phase. Through these collaborative efforts, the health of the community is improved.



Social Determinants of Health

What Are Social Determinants of Health?



[Social determinants of health \(SDOH\)external icon](#) are defined as the conditions in which people are born, grow, live, work, and age. SDOH are shaped by the distribution of money, power, and resources throughout local communities, nations, and the world. Differences in these conditions lead to health inequities or the unfair and avoidable differences in health status seen within and between countries.

[Healthy People 2030external icon](#) includes SDOH among its leading health indicators. One of Healthy People 2030's five overarching goals is specifically related to SDOH: Create social, physical, and economic environments that promote attaining the full potential for health and well-being for all.

Through broader awareness of how to better incorporate SDOH throughout the multiple aspects of public health work and the [10 Essential Public Health Services](#), public health practitioners can transform and strengthen their capacity to advance health equity. Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health, such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

Round #5 CHNA focuses on Social Determinants & Health Equity.

Centers for Medicare & Medicaid Services Health Equity Domains

CMS' Hospital Commitment to Health Equity has introduced two equity-focused process measures in 2023: screening for Social Drivers of Health (SDOH-01) and Screen Positive Rate for Social Drivers of Health (SDOH-02). (Although these measures will not be required until 2024, it is highly recommended that hospitals begin tracking them in 2023.)

Domain 1: Equity as a Strategic Priority

The hospital has a strategic plan for advancing health care equity that accomplishes the following:

- Identifies priority populations who currently experience health disparities.
- Establishes health care equity goals and discrete action steps to achieve them.
- Outlines specific resources that are dedicated to achieving equity goals.
- Describes an approach for engaging key stakeholders, such as community partners.

Domain 2: Data Collection

The hospital is engaging in the following three key data collection activities.

- Collecting demographic information, including self-reported race and ethnicity, and SDOH information, on a majority of patients
- Training staff in the culturally sensitive collection of demographics and SDOH information
- Inputting patient demographic and/ or SDOH information into structured interoperable data elements using a certified electronic health record technology.

Domain 3: Data Analysis

The hospital stratifies key performance indicators by demographic and/ or SDOH variables to identify equity gaps and includes this information on hospital performance dashboards.

Domain 4: Quality Improvement

The hospital participates in local, regional and or national quality improvement activities that are focused on reducing health disparities.

Domain 5: Leadership Engagement

The hospital's senior leadership, including the chief executives and the entire hospital board of trustees, demonstrates a commitment to equity through the following two activities.

- Annual reviews of the hospital's strategic plan for achieving health equity
- Annual reviews of key performance indicators stratified by demographic and/ or social factors.

Sources:

The Joint Commission. (2022, June 20). R3 Report: New Requirements to Reduce Health Care Disparities. Retrieved from https://www.jointcommission.org/-/media/tje/documents/standards/r3-reports/r3_disparities_july2022-6-20-2022.pdf

Health Equity Innovation Network. (2022, August 29). Quick Start Guide: Hospital Commitment to Health Equity Measure. Retrieved from <https://hqin.org/wp-content/uploads/2022/08/Quick-Start-Guide-Hospital-Commitment-to-Health-Equity-Measure.pdf>

The Joint Commission (TJC) Elements of Performance - Regulatory and Accreditation Requirements Related to Health Equity and Social Determinants of Health

New and revised TJC requirements to reduce health care disparities went into effect Jan. 1, 2023. Below are the six elements of performance.

Element of Performance 1:

The organization designates an individual to lead activities aimed at reducing healthcare disparities. **(Hospital Responsibility)**

Element of Performance 2:

The organization assesses the patient's health-related social needs and provides information about community resources and support services. **(CHNA full report- Section I and III)**

Examples of health-related social needs may include the following:

- Access to transportation
- Difficulty paying for prescriptions or medical bills.
- Education and literacy
- Food insecurity
- Housing insecurity

Element of Performance 3:

The organization identifies healthcare disparities in its patient population by stratifying quality and safety data. **(CHNA Town Hall)** Examples of sociodemographic characteristics may include but are not limited to the following: , Age, Gender, Preferred Language, Race, and ethnicity.

Element of Performance 4:

The organization develops a written action plan that describes how it will address at least one of the healthcare disparities identified. **(CHNA IMPL Development Plan)**

Element of Performance 5:

The organization acts when it does not achieve or sustain goal(s) in its action plan to reduce health care disparities.

Element of Performance 6:

At least annually, the organization informs key stakeholders, identifying leaders, licensed practitioners, and staff, about its progress in reducing identified healthcare disparities. **(Hospital Responsibility)**

II. Methodology

b) Collaborating CHNA Parties

Working together to improve community health takes collaboration. Listed below is an in-depth profile of the local hospital and Health Department CHNA partners:

Pawnee Valley Community Hospital Profile

923 Carroll Ave, Larned, KS 67550

Administrator: Melanie Urban

History: Pawnee Valley Community Hospital – Pawnee County, formerly St. Joseph Memorial Hospital, was a religiously operated facility under the Catholic Health Initiative system until 2010. In March of 2010 the hospital official signed a 5-year affiliation agreement with Hays Medical Center. The facility remains locally owned and is keeping all of its assets, however, Hays Medical Center leases the facility and the equipment for the term of the agreement. Since this transition, Pawnee Valley Community Hospital has been able to expand the lab and diagnostic imaging with the help of HaysMed. The hospital was also able to re-open its swing bed program, physical therapy and respiratory therapy departments. Currently, Pawnee Valley Memorial Hospital is a critical access hospital licensed for 25 beds and 24-hour emergency services.

Mission Statement: Pawnee Valley Community Hospital will be the best Critical Access Hospital in rural America.

Vision Statement: To improve the quality of life for the communities we serve through exceptional healthcare and service excellence.

Pawnee Valley Community Hospital offers the following services to its community:

- CARDIOPULMONARY REHABILITATION
- CASE MANAGEMENT
- CENTER FOR REHABILITATION
- DIABETES SOLUTIONS
- EMERGENCY DEPARTMENT
- FAMILY MEDICINE
- LABORATORY SERVICES
- NUCLEAR MEDICINE
- PAT YOUNG IMAGING CENTER
- REHABILITATION THERAPIES
- SKILLED NURSING/SWING BED
- SLEEP AND DIAGNOSTIC CENTER
- SPECIAL NURSING SERVICES
- SPECIALTY CLINICS
- SURGICAL SERVICES
- WOMEN’S HEALTH
- WOUND CARE

Pawnee County Community Hospital works closely with its community partner – HaysMed to identify the needs of the citizens, as defined by the citizens themselves and the organizations that address the concerns.

Pawnee County Health Department Profile

715 Broadway St, Larned, KS 67550
Administrator/Health Officer: Cheryl Hoberecht RN
Medical Consultant: Mark Van Norden DO
Phone: 620-285-6963 or 800-211-4401
Regional District Office: SC Trauma Region: SC

The Pawnee County Health Department is open Monday, Wednesday, Thursday 7:30 am- 12:00 pm -1:00 -6pm Tuesday 8:00 AM-12:00 PM and 1:00-6:00 pm.

Mission: To provide health services that will assist Pawnee County citizens to prevent disease, maintain health, and promote wellness.

Offerings: Tuberculosis testing, consultations, prophylactic treatment, consultation and investigation of communicable diseases, HIV and STD counseling and testing, HIV education and prevention, physical exams, developmental evaluations, laboratory tests, vision and hearing screenings. Nail care clinics. Assistance with applications for Medicaid insurance for low-cost or no-cost health insurance for families with children.

Health Screening Clinics: Blood pressure, hearing, urine, health counseling, hemoglobin (anemia), and weight checks. Outreach clinics at senior centers. Monthly Lab Fairs.

Immunizations: Infant, adolescent, and adult vaccines provided. Annual influenza vaccinations. Pneumonia, Covid 19, RSV and Shingles vaccine. Foreign travel vaccines.

Family Planning Services: Annual exams, breast exams, pap smears, birth control, well woman exams, cervical and breast cancer screenings, diagnosis and treatment of vaginal infections, pregnancy testing, and infertility referrals. Pre-conception counseling.

Maternal and Child Health Services: Assure early and regular prenatal care through early referral assistance. Social worker, nutritionist, and registered nurse team to assist with education and use of resources. Newborn home visits by registered nurses, Healthy Start home visitor. Breastfeeding education, resources such as breastfeeding equipment to loan and referrals for Lactation Consultation. Safe Sleep Instructor and Safe Sleep Clinics. Car Seat Safety Technician and car seats.

WIC (Women, Infant and Child): Birth up to 5 years of age, pregnant, breastfeeding and postpartum women and children are eligible. Nutrition education and provision of healthy supplemental foods.

Farmworker program: Case management/access to health care for qualified individuals.

II. Methodology

b) Collaborating CHNA Parties Continued

Consultant Qualifications:

VVV Consultants LLC 601 N. Mahaffie, Olathe, KS 66061 (913) 302-7264

VVV Consultants LLC is an Olathe, KS based “boutique” healthcare consulting firm specializing in Strategy, Research and Business Development services. To date we have completed 83 unique community CHNA’s in KS, MO, IA, NE and WI (references found on our website VandehaarMarketing.com)

Introduction: Who We Are Background and Experience



Vince Vandehaar, MBA – Principal
VVV Consultants LLC – start 1/1/09 *
– Adjunct Full Professor @ Avila & Webster Universities
– 35+ year veteran marketer, strategist and researcher
– Saint Luke’s Health System, BCBS of KC,
– Tillinghast Towers Perrin, and Lutheran Mutual Life
– Central College Pella BA and University of Northern IA MBA
– Hometown: Bondurant IA



Cassandra Kahl, BHS – Director, Project Management
VVV Consultants LLC – Nov 2020
– University of Kansas – Health Sciences
– Park University - MHA
– Hometown: Maple, WI

VVV Consultants LLC (EIN 27-0253774) began as “VVV Research & Development INC” in early 2009 and converted to an LLC on 12/24/12. Web: VandehaarMarketing.com

Our Mission: to research, facilitate, train, create processes to improve market performance, champion a turnaround, and uncover strategic “critical success” initiatives.

Our Vision: meeting today’s challenges with the voice of the market.

Our Values:

Engaged – we are actively involved in community relations & boards.

Reliable – we do what we say we are going to do.

Skilled – we understand business because we’ve been there.

Innovative – we are process-driven & think “out of the box”.

Accountable – we provide clients with a return on investment.

II. Methodology

c) CHNA and Town Hall Research Process

Round #5 Community Health Needs Assessment (CHNA) process began in December of 2023 for Pawnee Valley Community Hospital in Pawnee County, KS to meet Federal IRS CHNA requirements.

In early December 2023, a meeting was called amongst the PVCH leaders to review CHNA collaborative options. <Note: VVV Consultants LLC from Olathe, KS was asked to facilitate this discussion with the following agenda: VVV CHNA experience, review CHNA requirements (regulations) and discuss CHNA steps/options to meet IRS requirements and to discuss next steps.> Outcomes from discussion led to the PVCH to request VVV Consultants LLC to complete a CHNA IRS aligned comprehensive report.

VVV CHNA Deliverables:

- Document Hospital Primary Service Area - meets the 80-20 Patient Origin Rule.
- Uncover / document basic secondary research county health data, organized by 10 tabs.
- Conduct / report CHNA Community Check-in Feedback Findings (primary research).
- Conduct a Town Hall meeting to discuss with community secondary & primary data findings leading to determining (prioritizing) county health needs.
- Prepare & publish CHNA report which meets ACA requirements.

To ensure proper PSA Town Hall representation (that meets the 80-20 Patient Origin Rule), a patient origin three-year summary was generated documenting patient draw by zips as seen below:

<i>Source: Hospital Internal Records</i>						
Pawnee- Defined Primary Serv Area KHA				Overall (IP/ER/OP)		
#	ZIP	City	County	Total 3YR	%	ACCUM
		TOTALS		52,410	100%	
1	67550	Larned, KS	Pawnee	39,674	75.7%	76%
2	67523	Burdett, KS	Pawnee	1,841	3.5%	79%
3	67529	Garfield, KS	Pawnee	1,839	3.5%	83%
4	67574	Rozel, KS	Pawnee	987	1.9%	85%

To meet IRS aligned CHNA requirements and meet Public Health accreditation criteria stated earlier, a four-phase methodology was followed:

Phase I—Discovery:

Conduct a 30-minute conference call with the CHNA county health department and hospital clients. Review / confirm the CHNA calendar of events, explain / coach clients to complete the required participant database, and schedule / organize all Phase II activities.

Phase II—Qualify Community Need:

A) Conduct secondary research to uncover the following historical community health status for the primary service area. Use Kansas Hospital Association (KHA), Vital Statistics, Robert Wood Johnson County Health Rankings, etc. to document current state of county health organized as follows:

Health Indicators - Secondary Research
TAB 1. Demographic Profile
TAB 2. Economic Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospital / Provider Profile
TAB 6. Behavioral / Mental Health Profile
TAB 7. High-Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

Phase III—Quantify Community Need:

Conduct a 90-minute Town Hall meeting with required community primary service area residents. At each Town Hall meeting, CHNA secondary data will be reviewed, facilitated group discussion will occur and a group ranking activity to determine the most important community unmet health needs was administered.


Phase IV—Complete Data Analysis and Create Comprehensive Community Health Needs Assessment:

Complete full documentation to create each CHNA section documented in the Table of Contents. Publish hard copy reports (2) for client usage plus create a full CHNA report pdf to be posted on the hospital website to meet government CHNA regulation criteria.

Specific project CHNA roles, responsibilities, and timelines are documented in the following calendar.

Pawnee Valley Community Hospital			
VVV CHNA Round #5 Work Plan - Year 2024			
Project Timeline & Roles as of 04/21/24			
Step	Timeframe	Lead	Task
1	9/1/2023	VVV / Hosp	Send Leadership information regarding CHNA Round #5 for review
2	9/20/2024	Hosp	Select CHNA Round #5 Option B. Approve (sign) VVV CHNA quote
3	12/1/2024	VVV	Send out REQCommInvite Excel file. HOSP & HLTH Dept to fill in PSA Stakeholders Names /Address /Email
4	12/5/2024	VVV	Hold Kick-off Meeting & Request Hospital Client to send KHA PO reports for FFY 18, 19 and 20. In addition, request hospital to complete 3 year historical PSA IP/OP/ER/Clinic patient origin file (Use ZipPSA_3yrPOrigin.xls)
5	On or Before 12/05/2024	VVV	Prepare CHNA Round #5 Stakeholder Feedback "online link". Send link for hospital review.
6	Dec-Jan 2024	VVV	Assemble & complete Secondary Research - Find / populate 10 TABS. Create Town Hall ppt for presentation.
7	12/11/2024	VVV / Hosp	Prepare/send out PR story#1 / E Mail Request #`1 announcing upcoming CHNA work to CEO to review/approve.
8	By 12/11/2024	VVV / Hosp	Place PR story to local media CHNA survey announcing "online CHNA Round #5 feedback". Request public to participate. Send E Mail request to local stakeholders
9	12/15/2024	VVV	Launch / conduct online survey to stakeholders: Hospital will e-mail invite to participate to all stakeholders. Cut-off 1/19/2024 for Online Survey
10	1/22/2024	Hosp	Prepare/send out Community TOWN HALL invite letter and place local AD.
11	1/22/2024	VVV / Hosp	Prepare/send out PR #2story to local media announcing upcoming Town Hall. VVV will mock-up PR release to media sources.
12	2/16/2024	ALL	Conduct conference call (time TBD) with Hospital / Public HLTH to review Town Hall data / flow
13	Thursday 2/22/2024	VVV	Conduct CHNA Town Hall. Lunch 11:30-1pm (Glory Be) Review & Discuss Basic health data plus RANK Health Needs.
14	On or Before 04/02/2024	VVV	Complete Analysis - Release Draft 1- seek feedback from Leaders (Hospital & Health Dept.)
15	On or Before 4/15/2024	VVV	Produce & Release final CHNA report. Hospital will post CHNA online (website).
16	5/16/2024	Hosp	Conduct Impl. Plan Development Stakeholder session.
17	On or before 6/30/24	Hosp	Hold Board Meetings discuss CHNA needs, create & adopt an implementation plan. Communicate CHNA plan to community.

2024 Community Health Needs Assessment Pawnee County Memorial Hospital (KS) Town Hall Meeting- 2/22/24



VVV Consultants LLC
Olathe, Kansas 66061

VandehaarMarketing.com
913-302-7264

1

Community Health Needs Assessment (CHNA) Onsite Town Hall Discussion Agenda

- **Opening Welcome / Introductions / Review CHNA Purpose and Process (5 mins)**
- **Discuss New Focus: Social Determinants of Health (5 mins)**
- **Review Current Service Area "Health Status"**
 - Review Secondary Health Indicator Data (10 TABs)*
 - Review Community Online Feedback (30 mins)*
- **Collect Community Health Perspectives**
 - Share Table Reflections to verify key takeaways*
 - Conduct an Open Community Conversation / Stakeholder Vote to determine the Most Important Unmet Needs (45 mins)*
- **Close / Next Steps (5 mins)**

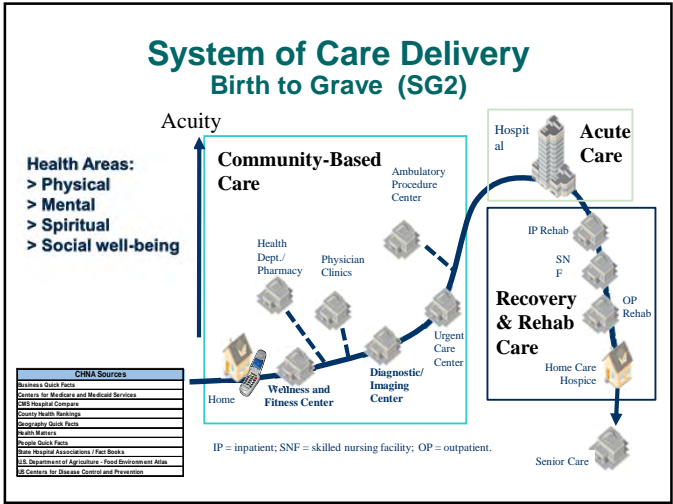
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Town Hall Participation, Purpose & Parking Lot

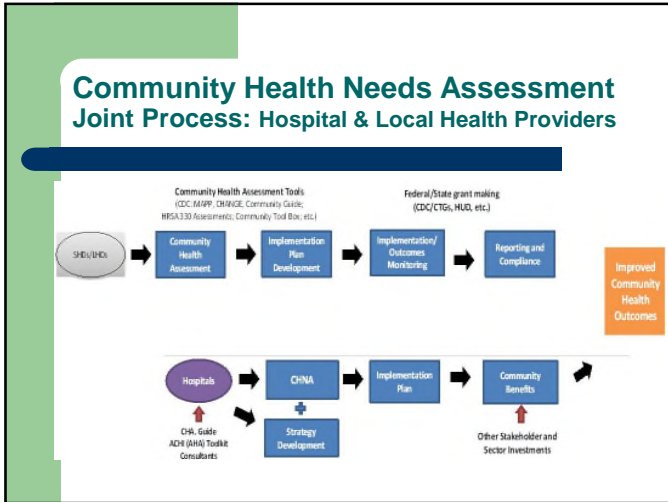


- ALL attendees practice "Safe Engagement", working together in table teams.
- ALL attendees are welcome to share. Engaging conversation (No right or wrong answer)
- Request ALL to Take Notes of important health indicators
- Please give truthful responses – Serious community conversation.
- Discuss (Speak up) to uncover unmet health needs
- Have a little fun along the way

3



4



5

II. Review of a CHNA

- What is a Community Health Needs Assessment (CHNA)..?
 - Systematic collection, assembly, analysis, and dissemination of information about the health of the community.
- A CHNA's role is to....
 - **Identify** factors that affect the health of a population and **determine** the availability of resources to adequately address those factors.
- Purpose of a CHNA – Why Conduct One?
 - Determine health-related trends and issues of the community
 - Understand / evaluate health delivery programs in place.
 - Meet Federal requirements – both local hospital and health department
 - Develop Implementation Plan strategies to address unmet health needs (4-6 weeks after Town Hall)

6

CHNA Written Report Documentation to meet IRS 990 CHNA Requirements: Table of Contents

- A description of the community served
- A description of the CHNA process
- The identity of any and all organizations and third parties which collaborated to assist with the CHNA
- A description of how the organization considered the input of persons representing the community (e.g., through meetings, focus groups, interviews, etc.), who those persons are, and their qualifications
- A prioritized description of all of the community needs identified by the CHNA.
- A description of the existing healthcare facilities and other resources within the community available to meet the needs identified through the CHNA

7

Social Determinants of Health

Social determinants of health are the conditions in the places where people live, learn, work, play, and worship that affect a wide range of health risks and outcomes.

Health equity is when everyone has the opportunity to attain their full health potential, and no one is disadvantaged from achieving this potential because of their social position or other socially determined circumstances.

TASK: Your Initial Thoughts on SDOH? (Small White Card)

8

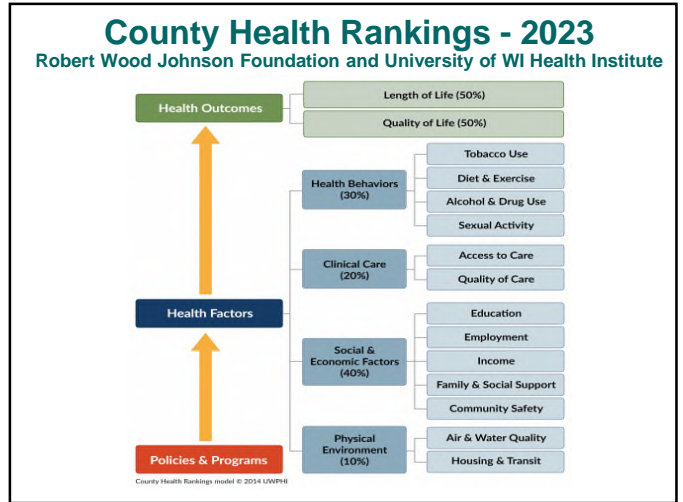
IV. Review Current County Health Status:

Secondary Data by 10 Tab Categories with a focus on Social Determinants with a Local Norm & State Rankings

Trends: Good Same Poor

Health Indicators - Secondary Research
TAB 1. Demographic Profile
TAB 2. Economic Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospital / Provider Profile
TAB 6. Behavioral / Mental Health Profile
TAB 7. High-Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

9



10

IV. Community Health Conversation: Your Perspectives / Suggestions !

Tomorrow:
What is occurring or might occur that would affect the "health of our community"?

Today:

- 1) What are the **Healthcare Strengths** of our community that contribute to health? **(BIG White Card)**
- 2) Are there healthcare services in your community/neighborhood that you feel **need to be improved and/or changed**? **(Small Color Card)**
- 3) *What other Ideas do you have to address Social determinants?* **(Small White Card -A)**

11

Community Health Needs Assessment Round #5 Year 2024

Thank You
Next Steps

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12

Data & Benchmarks Review

Community health assessments typically use both primary and secondary data to characterize the health of the community:

- **Primary data** are collected first-hand through surveys, listening sessions, interviews, and observations.
- **Secondary data** are collected by another entity or for another purpose.
- **Indicators** are secondary data that have been analyzed and can be used to compare rates or trends of priority community health outcomes and determinants.

Data and indicator analyses provide descriptive information on demographic and socioeconomic characteristics; they can be used to monitor progress and determine whether actions have the desired effect. They also characterize important parts of health status and health determinants, such as behavior, social and physical environments, and healthcare use.

Community health assessment indicators should be.

- Methodologically sound (valid, reliable, and collected over time)
- Feasible (available or collectable)
- Meaningful (relevant, actionable, and ideally, linked to evidence-based interventions)
- Important (linked to significant disease burden or disparity in the target community)

Jurisdictions should consider using data and indicators for the smallest geographic locations possible (e.g., county-, census block-, or zip code-level data), to enhance the identification of local assets and gaps.

Local reporting (County specific) sources of community-health level indicators:

CHNA Detail Sources
Quick Facts - Business
Centers for Medicare and Medicaid Services
CMS Hospital Compare
County Health Rankings
Quick Facts - Geography
Kansas Health Matters
Kansas Hospital Association (KHA)
Quick Facts - People
U.S. Department of Agriculture - Food Environment Atlas
U.S. Center for Disease Control and Prevention

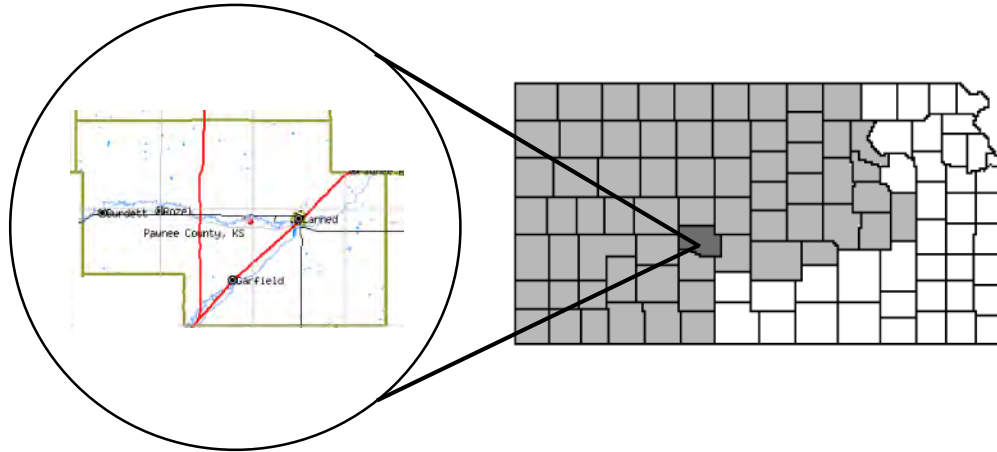
Sources of community-health level indicators:

- [County Health Rankings and Roadmaps](#)
The annual Rankings measure vital health factors, including high school graduation rates, obesity, smoking, unemployment, access to healthy foods, the quality of air and water, income inequality, and teen births in nearly every county in America. They provide a snapshot of how health is influenced by where we live, learn, work and play.
- [Prevention Status Reports \(PSRs\)](#)
The PSRs highlight—for all 50 states and the District of Columbia—the status of public health policies and practices designed to prevent or reduce important public health problems.
- [Behavioral Risk Factor Surveillance System](#)
The world's largest, ongoing telephone health survey system, tracking health conditions and risk behaviors in the United States yearly since 1984. Data are collected monthly in all 50 states, the District of Columbia, Puerto Rico, the US Virgin Islands, and Guam.
- The [Selected Metropolitan/ Micropolitan Area Risk Trends](#) project was an outgrowth of BRFSS from the increasing number of respondents who made it possible to produce prevalence estimates for smaller statistical areas.
- [CDC Wonder](#) Databases using a rich ad-hoc query system for the analysis of public health data. Reports and other query systems are also available.
- [Center for Applied Research and Engagement Systems external icon](#)
Create customized interactive maps from a wide range of economic, demographic, physical and cultural data. Access a suite of analysis tools and maps for specialized topics.
- [Community Commons external icon](#)
Interactive mapping, networking, and learning utility for the broad-based healthy, sustainable, and livable communities' movement.
- [Dartmouth Atlas of Health Care external icon](#)
Documented variations in how medical resources are distributed and used in the United States. Medicare data used to provide information and analysis about national, regional, and local markets, as well as hospitals and their affiliated physicians.
- [Disability and Health Data System](#)
Interactive system that quickly helps translate state-level, disability-specific data into valuable public health information.
- [Heart Disease and Stroke Prevention's Data Trends & Maps](#)
View health indicators related to heart disease and stroke prevention by location or health indicator.
- [National Health Indicators Warehouse external icon](#)
Indicators categorized by topic, geography, and initiative.
- [US Census Bureau external icon](#)
Key source for population, housing, economic, and geographic information.
- [US Food Environment Atlas external icon](#)
Assembled statistics on food environment indicators to stimulate research on the determinants of food choices and diet quality, and to provide a spatial overview of a community's ability to access healthy food and its success in doing so.
- [Centers for Medicare & Medicaid Services Research and Data Clearinghouse external icon](#)
Research, statistics, data, and systems.
- [Environmental Public Health Tracking Network](#)
System of integrated health, exposure, and hazard information and data from a variety of national, state, and city sources.
- [Health Research and Services Administration Data Warehouse external icon](#)
Research, statistics, data, and systems.
- [Healthy People 2030 Leading Health Indicators external icon](#)
Twenty-six leading health indicators organized under 12 topics.
- [Kids Count external icon](#)
Profiles the status of children on a national and state-by-state basis and ranks states on 10 measures of well-being; includes a [mobile site external icon](#).
- [National Center for Health Statistics](#)
Statistical information to guide actions and policies.
- [Pregnancy Risk Assessment and Monitoring System](#)
State-specific, population-based data on maternal attitudes and experiences before, during, and shortly after pregnancy.
- [Web-based Injury Statistics Query and Reporting System \(WISQARS\)](#)
Interactive database system with customized reports of injury-related data.
 - [Youth Risk Behavior Surveillance System](#)
Monitors six types of health-risk behaviors that contribute to the leading causes of death and disability among youth and adults.

II. Methodology

d) Community Profile (A Description of Community Served)

Pawnee County Community Profile



Demographics

The population of Pawnee County was estimated to be 6,290 citizens as of 2022, and had a -0.12% change in population from 2010–2017. Pawnee County covers 754 square miles and the area is home to the Pawnee County Courthouse, the Santa Fe Trail Center, Fort Larned National Historical site, Larned Correctional Mental Health Facility, and Larned State Hospital¹. The county has an overall population density of 9 persons per square mile. The county is located in Central Western Kansas and the most common industries are education, health and social services, agriculture, forestry, fishing, hunting and mining². The county was founded in 1872 and the county seat is Larned³.

The major highway transportation access to Pawnee County is U.S. Interstate 70, which runs north of the county. Kansas Highway 183 is the major North–South road as well as State Highway 56 that runs diagonal from the south corner to the northeast of the county. Additionally, Highway 156 runs East-West through the center of the county.

Pawnee County, KS Airports⁴

Name	USGS Topo Map
Larned-Pawnee County Airport	Larned
Rucker Burdett Airport	Burdett

¹ <http://kansas.hometownlocator.com/ks/pawnee/>

² http://www.city-data.com/county/Pawnee_County-KS.html

³ <http://www.skyways.org/counties/PN/>

⁴ <http://kansas.hometownlocator.com/features/cultural,class,airport,scfips,20145.cfm>

Schools in Pawnee County

Public Schools⁵

Name	Level
Fort Larned Elementary	Primary
Larned Middle School	Middle
Larned Sr High	High

Pawnee County Tourism

Santa Fe Trail Center

Fort Larned National Historic Site

Central States Scout Museum

Rose Manor

Camp Pawnee

Most Common Occupations

Management

Administrative

Healthcare Support

Sales

Farming, Fishing, Forestry

⁵ <http://kansas.hometownlocator.com/schools/sorted-by-county,n,pawnee.cfm>

⁶ <http://www.pawneecountykansas.com/CountyInformation/Tourism/tabid/9163/Default.aspx>

⁷ https://datausa.io/profile/geo/pawnee-county-ks/#category_occupations

Pawnee Co (KS) - Detail Demographic Profile

ZIP	NAME	ST	County	Population			Households			Per Capita ²³
				Year 2023	Year 2028	5yr CHG	Year 2023	Year 2028	HH Avg Size ²³	
67523	Burdett	KS	PAWNEE	319	304	-4.7%	131	125	2.4	\$32,813
67529	Garfield	KS	PAWNEE	274	268	-2.2%	125	123	2.2	\$37,665
67550	Larned	KS	PAWNEE	5,246	5,143	-2.0%	2,068	2,057	2.2	\$29,702
67574	Rozel	KS	PAWNEE	206	195	-5.3%	85	81	2.4	\$33,359
Totals				6,045	5,910	-3.5%	2,409	2,386	2.3	\$33,385

ZIP	NAME	ST	County	Population				Year 2020		Females
				Pop 21+	Pop. 65+	Kids<18	Gen Y	Males	Females	Age 20-35
67523	Burdett	KS	PAWNEE	244	73	73	68	160	159	45
67529	Garfield	KS	PAWNEE	220	87	52	49	144	130	41
67550	Larned	KS	PAWNEE	4076	1166	1107	1247	2,841	2405	1007
67574	Rozel	KS	PAWNEE	159	49	45	47	103	103	33
Totals				4,699	1,375	1,277	1,411	3,248	2,797	1,126

ZIP	NAME	ST	County	Population 2020				Year 2023		
				White%	Black%	Asian%	Hispan%	Housing Units	% Rentals	Soc Econ Index
67523	Burdett	KS	PAWNEE	89.7%	0.0%	0.6%	5.6%	177	13%	50
67529	Garfield	KS	PAWNEE	89.8%	0.0%	0.0%	6.6%	166	11%	58
67550	Larned	KS	PAWNEE	84.3%	4.7%	0.5%	9.3%	2,525	26%	55
67574	Rozel	KS	PAWNEE	92.2%	0.5%	0.5%	6.3%	126	16%	52
Totals				89.0%	1.3%	0.4%	7.0%	2,994	16.5%	54

Source: ERSA Demographics 2023

III. Community Health Status

[VVV Consultants LLC]

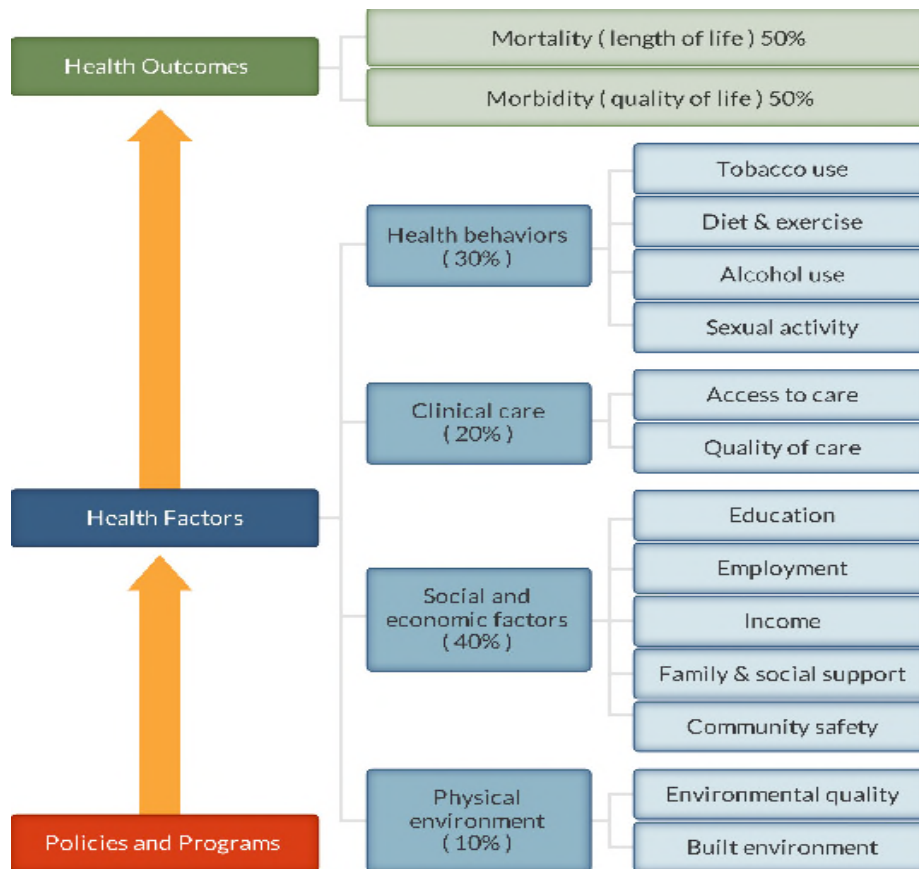
III. Community Health Status

a) Historical Health Statistics- Secondary Research

Health Status Profile

This section of the CHNA reviews published quantitative community health indicators from public health sources and results of community primary research. To produce this profile, VVV Consultants LLC staff analyzed & trended data from multiple sources. This analysis focuses on a set of published health indicators organized by ten areas of focus (10 TABS), results from the 2020 RWJ County Health Rankings and conversations from Town Hall participants. Each table published reflects a Trend column, with GREEN denoting growing/high performance indicators, YELLOW denoting minimal change/average performance indicators and RED denoting declining/low performance indicators.

Note: The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to release annual *County Health Rankings*. As seen below, RWJ's model uses a number of health factors to rank each county.



County Health Rankings model ©2012 UWPHI

National Research – Year 2023 RWJ Health Rankings:

#	2023 KS Rankings - 105 Counties	Definitions	Pawnee Co (KS) 2023	Pawnee Co (KS) 2020	Trend	NWKS Norm (18)
1	Health Outcomes		87	89		44
	Mortality	Length of Life	43	80		47
	Morbidity	Quality of Life	95	89	-	39
2	Health Factors		55	54		33
	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	89	66	-	50
	Clinical Care	Access to care / Quality of Care	6	21	+	43
	Social & Economic Factors	Education, Employment, Income, Family/Social Support, Community Safety	72	78		35
3	Physical Environment	Environmental quality	9	28	+	22

NWKS Counties: Decatur, Ellis, Gove, Graham, Logan, Ness, Norton, Pawnee, Phillips, Rawlins, Rooks, Rush, Russell, Sheridan, Osborne, Smith, Thomas, and Trego.

PSA Secondary Research:

When studying community health, it is important to document health data by topical areas for primary service area (PSA). Below is a summary of key findings organized by subject area.

Note: Each Tab has been trended to reflect County trends to NORM.

Health Indicators - Secondary Research
TAB 1. Demographic Profile
TAB 2. Economic Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospital / Provider Profile
TAB 6. Behavioral / Mental Health Profile
TAB 7. High-Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

Tab 1: Demographic Profile

Understanding population and household make-up is vital to start CHNA evaluation.

1	#	Population Health Indicators	Pawnee Co KS 2024	Pawnee Co Ks 2021	Trend	State of KS	NWKS Norm (N=18)	Source
	a	Population estimates, 2020-2022	6,179	6,414	-	2,913,314	5,300	People Quick Facts
	b	Persons under 5 years, percent, 2020-2022	4.1%	4.6%		6.4%	5.7%	People Quick Facts
	c	Persons 65 years and over, percent, 2020-2022	23.9%	21.5%		16.3%	24.5%	People Quick Facts
	d	Female persons, percent, 2020-2022	44.5%	43.8%		50.2%	48.9%	People Quick Facts
	e	White alone, percent, 2020-2022	89.0%	90.3%		86.3%	92.0%	People Quick Facts
	f	Black or African American alone, percent, 2020-2022	6.1%	5.7%		6.1%	1.6%	People Quick Facts
	g	Hispanic or Latino, percent, 2020-2022	7.8%	7.3%		12.2%	5.6%	People Quick Facts
	h	Language other than English spoken at home, percent of persons age 5 years+, 2017-2021	2.1%	2.8%		11.9%	3.8%	People Quick Facts
	i	Living in same house 1 year ago, percent of persons age 1 year+, 2017-2021	82.2%	74.7%		83.8%	87.1%	People Quick Facts
	j	Children in single-parent households, percent, 2017-2021	16.4%	33.5%	+	21.0%	15.0%	County Health Rankings
	k	Veterans, 2017-2021	502	248		176,444	306	People Quick Facts

Tab 2: Economic Profile

Monetary resources will (at times) drive health “access” and self-care.

2		Economic - Health Indicators	Pawnee Co KS 2024	Pawnee Co Ks 2021	Trend	State of KS	NWKS Norm (N=18)	Source
	a	Per capita income in past 12 months (in 2021 dollars), 2017-2021	\$28,956	\$22,672	+	\$31,814	\$32,780	People Quick Facts
	b	Persons in poverty, percent, 2020-2022	14.9%	14.0%		11.40%	11.7%	People Quick Facts
	c	Total Housing units, 2022	3,049	2,026		1,288,401	2,701	People Quick Facts
	d	Severe housing problems, percent, 2015-2019	4.9%	7.1%	+	12.5%	8.0%	County Health Rankings
	e	Total employer establishments, 2021	138	276		239,118	201	Business Quick Facts
	f	Unemployment, percent, 2021	2.2%	3.2%		3.2%	2.1%	County Health Rankings
	g	Food insecurity, percent, 2020	11.3%	11.6%		9.7%	9.9%	County Health Rankings
	h	Limited access to healthy foods, percent, 2019	8.7%	5.6%	-	8.4%	10.4%	County Health Rankings
	i	Long commute - driving alone, percent, 2017-2021	7.8%	10.9%		21.7%	17.0%	County Health Rankings
	j	Community Spending on Food, 2023	13.2%	NA		12.7%	13.3%	Kansas Health Matters
	k	Community Spending on Transportation, 2023	18.5%	NA		18.1%	20.0%	Kansas Health Matters
	l	Households With Internet Subscription (2017-2021)	83.3%	NA		86.7%	85.2%	Kansas Health Matters
	m	Student Loan Spending-to-Income Ratio, 2023	5.5%	NA		4.6%	5.3%	Kansas Health Matters

Tab 3: Educational Profile

Currently, school districts are providing on-site primary health screenings and basic care.

3	Education - Health Indicators	Pawnee Co KS 2024	Pawnee Co Ks 2021	Trend	State of KS	NWKS Norm (N=18)	Source
a	Children eligible for free or reduced price lunch, percent, 2020-2021	51.1%	53.4%		45.3%	44.8%	County Health Rankings
b	High school graduate or higher, percent of persons age 25 years+, 2017-2021	90.7%	90.7%		91.8%	93.1%	People Quick Facts
c	Bachelor's degree or higher, percent of persons age 25 years+, 2017-2021	19.5%	17.2%		34.7%	23.3%	People Quick Facts

#	School Health Indicators	Pawnee Co 2018	Pawnee Co 2015	Pawnee Co 2012
1	Total # Public School Nurses	1.5	1	2
2	School Nurse is part of the IEP team Yes/No	Yes	Yes	Yes
3	School Wellness Plan (Active)	Yes	Yes	Yes
4	VISION: # Screened / Referred to Prof / Seen by Professional	951/10/NA	1005/32/NA	1135/120/NA
5	HEARING: # Screened / Referred to Prof / Seen by Professional	951/13/NA	1005/47/NA	1135/47/NA
6	ORAL HEALTH: # Screened / Referred to Prof / Seen by Professional	883/99/NA	924/70/NA	1135/311/NA
7	SCOLIOSIS: # Screened / Referred to Prof / Seen by Professional	0/0/0	0/0/0	0 / 0 / 0
8	# of Students served with no identified chronic health concerns	884	931	876
9	School has a suicide prevention program	Yes	No	No
10	Compliance on required vaccinations (%)	99.5	99.8%	99.7%

Tab 4: Maternal / Infant Profile

Tracking maternal / infant care patterns are vital in understanding the foundation of family health.

4	Maternal/Infant - Health Indicators (Access/Quality)	Pawnee Co KS 2024	Pawnee Co Ks 2021	Trend	State of KS	NWKS Norm (N=18)	Source
a	Percent of Births Where Prenatal Care began in First Trimester, 2019-2021	80.6%	80.7%		81.0%	82.8%	Kansas Health Matters
b	Percentage of Premature Births, 2019-2021	10.0%	10.9%		9.1%	10.0%	Kansas Health Matters
c	Percent of Infants up to 24 months that received full Immunizations, 2017-2018	90.0%	88.2%		69.2%	81.5%	Kansas Health Matters
d	Percent of Births with Low Birth Weight, 2019-2021	6.3%	10.2%	+	7.3%	7.6%	Kansas Health Matters
e	Percent of all Births Occurring to Teens (15-19), 2019-2021	5.8%	5.1%		5.5%	3.8%	Kansas Health Matters
f	Percent of births Where Mother Smoked During Pregnancy, 2019-2021	15.7%	15.7%		10.0%	12.2%	Kansas Health Matters
g	Child Care Centers per 1,000 Children, 2010-2022	19.3	NA		7.0	8.3	County Health Rankings

#	Vital Statistics (Rate per 1,000)	Pawnee Co. (KS)	Kansas	NWKS RURAL NORM (18)
a	Total Live Births, 2017	12.1	12.5	10.9
b	Total Live Births, 2018	7.9	12.5	11.4
c	Total Live Births, 2019	10.1	12.1	10.4
d	Total Live Births, 2020	10.4	11.8	10.6
e	Total Live Births, 2021	9.6	11.8	11.0
f	Total Live Births, 2017- 2021 - 5Yr Rate (%)	10.0	12.1	10.9

Tab 5: Hospitalization and Provider Profile

Understanding provider access and disease patterns are fundamental in healthcare delivery. Listed below are several vital county statistics.

5	Hospital/Provider - Health Indicators (Access/Quality)	Pawnee Co KS 2024	Pawnee Co Ks 2021	Trend	State of KS	NWKS Norm (N=18)	Source
a	Primary care physicians (Pop Coverage per) (No extenders incl.) , 2020	1061:1	954:1		1260:1	1308:1	County Health Rankings
b	Preventable hospital rate per 100,000, 2020 (lower the better)	983	3344		2708	3,289	County Health Rankings
c	Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)	78%	87%	-	78.0%	80.8%	CMS Hospital Compare, Latest Release
d	Patients Who Reported Yes, They Would Definitely Recommend the Hospital	80%	92%	-	78.0%	76.6%	CMS Hospital Compare, Latest Release
e	Average (Median) time patients spent in the emergency, before leaving from the visit (mins)	97	103	+	112	115	CMS Hospital Compare, Latest Release

Tab 6: Behavioral / Mental Profile

Behavioral healthcare provides another important indicator of community health status.

6	Mental - Health Indicators	Pawnee Co KS 2024	Pawnee Co Ks 2021	Trend	State of KS	NWKS Norm (N=18)	Source
a	Adults Ever Diagnosed with Depression, 2021	19.0%	NA		NA	19.1%	Kansas Health Matters
b	Age-adjusted Suicide Mortality Rate per 100,000 population, 2018-2020	NA	NA		18.5	13.0	Kansas Health Matters
c	Mental Behavioral Hospital Admission Rates per 100,000, 2018-2020	28.9	33.9		70.6	29.3	Kansas Health Matters
d	Average Number of mentally unhealthy days, 2020	4.4	3.6		4.4	4.3	County Health Rankings

Tab 7a: Risk Indicators & Factors Profile

Knowing community health risk factors and disease patterns can aid in the understanding next steps to improve health.

7a	High-Risk - Health Indicators	Pawnee Co KS 2024	Pawnee Co Ks 2021	Trend	State of KS	NWKS Norm (N=18)	Source
a	Adult obesity, percent, 2020	39.6%	36.7%	-	35.8%	36.6%	County Health Rankings
b	Adult smoking, percent, 2020	20.8%	16.0%	-	17.2%	19.0%	County Health Rankings
c	Excessive drinking, percent, 2020	19.7%	18.3%	-	19.7%	19.8%	County Health Rankings
d	Physical inactivity, percent, 2020	25.7%	31.2%	+	21.4%	23.3%	County Health Rankings
e	Sexually transmitted infections (chlamydia), rate per 100,000 - 2020	140.3	149.7		501.8	233.0	County Health Rankings

Tab 7b: Chronic Risk Profile

7b	Chronic - Health Indicators	Pawnee Co KS 2024	Pawnee Co Ks 2021	Trend	State of KS	NWKS Norm (N=18)	Source
a	Adults who Have Taken Medication for High Blood Pressure, 2021, percent	81.3%	NA		81.8%	82.8%	Kansas Health Matters
b	Congestive Heart Failure Hospital Admission Rate, Percent 2018-2020	19.4	NA		24.1	23.8	Kansas Health Matters
c	Adults with Kidney Disease, percent, 2021	3.4%	NA		21.8%	3.6%	Kansas Health Matters
d	Adults with COPD, percent, 2021	8.0%	NA		NA	8.3%	Kansas Health Matters
e	Adults 20+ with Diabetes, percent, 2021	9.3%	NA		8.8%	8.0%	Kansas Health Matters
f	Adults with Cancer, percent, 2021	8.2%	NA		NA	9.1%	Kansas Health Matters
g	Adults with Current Asthma, percent, 2021	9.8%	NA		4.3%	9.8%	Kansas Health Matters
h	Adults who Experienced a Stroke, percent, 2021	3.6%	NA		3.1%	3.8%	Kansas Health Matters

Tab 8: Uninsured Profile and Community Benefit

Based on state estimations, the number of insured is documented below. Also, the amount of charity care (last three years of free care) from area providers is trended below.

8	Ins Coverage - Health Indicators	Pawnee Co KS 2024	Pawnee Co Ks 2021	Trend	State of KS	NWKS Norm (N=18)	Source
a	Uninsured, percent, 2020	9.1%	8.9%		10.3%	10.9%	County Health Rankings
b	Persons With Health Insurance, 2021	90.1%	NA		89.1%	88.7%	Kansas Health Matters
c	Kansas Medical Assistance Programs - Adults per 1,000 (ages 20-64), 2022	95.8	NA		99.40	97.4	Kansas Health Matters

Source: Internal Hospital Records				
	Pawnee Valley Community	YR 2021	YR 2022	YR 2023
1	Charity Care	\$270,906	\$459,325	\$537,603
2	Bad Debt Writeoffs	\$700,074	\$502,379	\$862,264

Source: DOH Internal Records - Pawnee County KS	
Community Contribution Local Health Dept Operations - Pawnee Co KS	
1	Core Community Services: Average of 170,000 dollars in contributions (taxpayer dollars to support local programing). Grant funding is an average of 50,000 dollars while WIC funding averages 98,000 dollars.
2	Childcare Inspections provided regionally via Barton County Health Department since 2018.
3	Healthy Start and MCH programming while ensuring proper referrals made to PAT and Kansas Children’s Service League.
4	Provide lab and other services on a fee basis.
5	STD testing is sometimes done without fees but is performed by the state lab at no cost to the county.
6	Vaccination Clients are charged a 30-dollar administration fee, and also works with Kancare.
7	WIC program expenses are entirely reimbursed by the federal program at no cost to county. In addition, the WIC program puts approximately 5,000 to 7,000 dollars back into the local economy @ local grocery stores.

Tab 9: Mortality Profile

The leading causes of county deaths from Vital Statistics are listed below.

9	Mortality - Health Indicators	Pawnee Co KS 2024	Pawnee Co Ks 2021	Trend	State of KS	NWKS Norm (N=18)	Source
a	Life Expectancy, 2018 - 2020	76.7	76.2		78.5	77.7	Kansas Health Matters
b	Age-adjusted Cancer Mortality Rate per 100,000 population, 2018-2020 (lower is better)	129.4	175.5	+	151.4	146.4	Kansas Health Matters
c	Age-adjusted Heart Disease Mortality Rate per 100,000 population, 2018-2020 (lower is better)	175.4	187.6		162.0	157.4	Kansas Health Matters
d	Age-adjusted Chronic Lower Respiratory Disease Mortality Rate per 100,000, 2018-2020 (Lower is better)	60.8	56.2		47.1	46.4	Kansas Health Matters
e	Alcohol-impaired driving deaths, percent, 2011-2015	16.7%	33.3%	+	19.4%	25.1%	County Health Rankings

Causes of Death by County of Residence, KS	Pawnee Co. YR21	%	Trend	Kansas	%
TOTAL (All Causes)	82	100.0%		31,637	100.0%
All Other Causes	26	31.7%		9,536	30.1%
Major Cardio vascular Diseases	20	24.4%		8,307	26.3%
Cancer	13	15.9%		5,379	17.0%
Diseases of Heart	13	15.9%		6,260	19.8%
Ischemic Heart Diseases	8	9.8%		3,605	11.4%
Cerebrovascular Diseases	6	7.3%		1,335	4.2%

Tab 10: Preventive Quality Measures Profile

The following table reflects future health of the county. This information also is an indicator of community awareness of preventative measures.

10	Preventative - Health Indicators	Pawnee Co KS 2024	Pawnee Co Ks 2021	Trend	State of KS	NWKS Norm (N=18)	Source
a	Access to exercise opportunities, percent, 2020 & 2022	66.7%	64.6%		79.7%	49.9%	County Health Rankings
b	Mammography annual screening, percent, 2017	29.0%	27.0%		42%	43.8%	County Health Rankings
c	Adults who have had a Routine Checkup, percent, 2021	74.9%	NA		NA	75.5%	County Health Rankings
d	Percent Annual Check-Up Visit with Dentist	61.2%	NA		63.0%	64.1%	Kansas Health Matters
e	Percent Annual Check-Up Visit with Eye Doctor	NA	NA		TBD	TBD	TBD

PSA Primary Research:

For each CHNA Round #5 evaluation, a community stakeholder survey has been created and administered to collect current healthcare information for Pawnee County, Kansas.

Chart #1 – Pawnee County, KS PSA Online Feedback Response (N=118)

Pawnee County KS - CHNA YR 2024			
For reporting purposes, are you involved in or are you a ...? (Check all that apply)	Pawnee Co, KS N=118	Trend	Round #5 Norms N=1699
Business/Merchant	6.5%		9.6%
Community Board Member	6.5%		8.1%
Case Manager/Discharge Planner	0.0%		0.7%
Clergy	0.9%		0.8%
College/University	2.8%		2.3%
Consumer Advocate	2.8%		1.5%
Dentist/Eye Doctor/Chiropractor	0.0%		0.3%
Elected Official - City/County	4.6%		1.5%
EMS/Emergency	4.6%		1.3%
Farmer/Rancher	7.4%		8.7%
Hospital	10.2%		18.0%
Health Department	0.9%		0.9%
Housing/Builder	0.0%		0.8%
Insurance	0.0%		1.1%
Labor	0.9%		3.5%
Law Enforcement	4.6%		0.8%
Mental Health	5.6%		2.1%
Other Health Professional	13.9%		9.9%
Parent/Caregiver	15.7%		14.2%
Pharmacy/Clinic	1.9%		1.9%
Media (Paper/TV/Radio)	0.0%		0.2%
Senior Care	3.7%		4.2%
Teacher/School Admin	3.7%		5.4%
Veteran	2.8%		2.1%
TOTAL	108		1491
*Norms: KS Counties: , Ellis, Pawnee, Russell, Sheridan, Smith, Thomas, Trego.			

Typical Sample Sizes Research Studies		
Number of Subgroup Analyses	Households	Firms
	Regional	Regional
None / Few (1-2)	200-500	50-200
Average (3-4).	500-1,000	200-1,000
Many (5+)	1,000+	1,000+

Sudman. *Applied Sampling*. (Academic Press, 1976), 87. Ibid., 30.

Quality of Healthcare Delivery Community Rating

Pawnee County, KS - CHNA YR 2024 N=118			
How would you rate the "Overall Quality" of healthcare delivery in our community?	Pawnee Co, KS N=118	Trend	*Round #5 Norms N=1699
Top Box %	15.3%	-	25.6%
Top 2 Boxes %	63.6%	+	71.9%
Very Good	15.3%		25.6%
Good	48.3%		46.4%
Average	30.5%	+	23.4%
Poor	5.1%		3.9%
Very Poor	0.8%		0.8%
Valid N	118		1,693
*Norms: KS Counties: , Ellis, Pawnee, Russell, Sheridan, Smith, Thomas, Trego.			

Re-evaluate Past Community Health Needs Assessment Needs

Pawnee County, KS - CHNA YR 2024 N=118					
Past CHNA Unmet Needs Identified		Ongoing Problem			Pressing
Rank	Ongoing Problem	Votes	%	Trend	Rank
1	Mental Health Services (Provider, Treatment, Aftercare)	56	16.1%		1
2	Drug / Alcohol Abuse	49	14.1%		2
3	Poverty / Employment	27	7.8%		4
4	Opioids	25	7.2%		8
5	Pediatric Care	23	6.6%		9
6	Womens Health	23	6.6%		10
7	Oncology / Cancer Treatment	22	6.3%		3
8	Water Quality	22	6.3%		7
9	Air Quality	21	6.1%		5
10	Nursing Home / Senior Care	18	5.2%		6
11	Awareness / Education of Healthcare Services	16	4.6%		11
12	Exercise / Fitness Services	15	4.3%		14
13	Home Health / Hospice	15	4.3%		13
14	Nutrition - Healthy Food Options	15	4.3%		12
Totals		347	100.0%		

Community Health Needs Assessment "Causes of Poor Health"

Pawnee County - CHNA YR 2024 N=118			
In your opinion, what are the root causes of "poor health" in our community? Please select top three.	Pawnee Co, KS N=118	Trend	Round #5 Norms N=1699
Chronic Disease Management	9.7%		8.7%
Lack of Health & Wellness	8.4%		10.9%
Lack of Nutrition / Access to Healthy Foods	6.3%		10.2%
Lack of Exercise	9.3%		14.4%
Limited Access to Primary Care	6.8%		4.1%
Limited Access to Specialty Care	11.0%		6.7%
Limited Access to Mental Health	14.3%		14.0%
Family Assistance Programs	3.8%		5.7%
Lack of Health Insurance	13.1%		11.7%
Neglect	10.5%		9.4%
Lack of Transportation	6.8%		4.1%
Total Votes	237		3,166
Norms: KS Counties: , Ellis, Pawnee, Russell, Sheridan, Smith, Thomas, Trego.			

Community Rating of HC Delivery Services (Perceptions)

Pawnee County - CHNA YR 2024 N=118	Pawnee Co, KS N=118		Trend	Round #5 Norms N=1350	
	Top 2 boxes	Bottom 2 boxes		Top 2 boxes	Bottom 2 boxes
How would our community rate each of the following?					
Ambulance Services	89.7%	1.0%		82.5%	2.6%
Child Care	18.8%	32.3%		42.0%	19.4%
Chiropractors	52.1%	9.4%		79.6%	2.7%
Dentists	49.5%	18.6%		47.6%	28.0%
Emergency Room	59.2%	13.3%		77.0%	4.7%
Eye Doctor/Optomtrist	55.7%	15.5%		74.7%	7.0%
Family Planning Services	35.1%	16.0%		49.0%	13.9%
Home Health	36.8%	11.6%		53.5%	9.8%
Hospice/Palliative	46.9%	14.6%		65.9%	6.8%
Telehealth	42.6%	17.0%		52.1%	11.0%
Inpatient Hospital Services	68.8%	4.3%		77.0%	4.6%
Mental Health Services	24.2%	37.4%		39.4%	24.6%
Nursing Home/Senior Living	47.3%	14.3%		59.6%	10.3%
Outpatient Hospital Services	72.0%	5.4%		75.8%	3.5%
Pharmacy	77.4%	3.2%		85.8%	2.0%
Primary Care	65.6%	6.5%		80.0%	3.5%
Public Health	63.7%	8.8%		61.3%	9.7%
School Health	54.4%	5.6%		58.3%	7.1%
Visiting Specialists	56.0%	12.1%		68.2%	7.0%
*Norms: KS Counties: , Ellis, Pawnee, Russell, Sheridan, Smith, Thomas, Trego.					

Community Health Readiness

Pawnee County - CHNA YR 2024 N=118		Bottom 2 boxes	
Community Health Readiness is vital. How would you rate each of the following? (% Poor / Very Poor)	Pawnee Co, KS N=118	Trend	Round #5 Norms N=1699
Behavioral/Mental Health	38.5%	Red	28.2%
Emergency Preparedness	9.0%	Yellow	6.0%
Food and Nutrition Services/Education	17.9%	Yellow	14.4%
Health Wellness Screenings/Education	10.3%	Yellow	8.1%
Prenatal/Child Health Programs	14.3%	Yellow	11.0%
Substance Use/Prevention	46.8%	Red	33.1%
Suicide Prevention	50.0%	Red	36.4%
Violence/Abuse Prevention	39.5%	Red	31.2%
Women's Wellness Programs	20.0%	Yellow	13.9%
Exercise Facilities / Walking Trails etc.	17.7%	Yellow	11.6%

Healthcare Access Review

Pawnee County - CHNA YR 2024 N=118			
Access to care is vital. Are there enough providers / staff available at the right times to care for you and our community?	Pawnee Co, KS N=118	Trend	Round #5 Norms N=1699
Yes	50.7%		60.6%
No	49.3%	Red	39.4%

Healthcare Delivery "Outside our Community"

Pawnee County - CHNA YR 2024 N=118			
In the past 2 years, did you or someone you know receive HC outside of our community?	Pawnee Co, KS N=118	Trend	Round #5 Norms N=1699
Yes	86.8%	Yellow	74.4%
No	13.2%		25.6%
Norms: KS Counties: , Ellis, Pawnee, Russell, Sheridan, Smith, Thomas, Trego.			

Specialties:

SPEC	CTS
DERM	6
ORTH	5
SURG	5
OPHTH	4
SPEC	4
CARD	3
ONC	3

What healthcare topics need to be discussed in further at our Town Hall?

Pawnee County - CHNA YR 2024 N=118			
What needs to be discussed further at our CHNA Town Hall meeting? Top 3	Pawnee Co, KS N=118	Trend	Round #5 Norms N=1699
Abuse/Violence	3.3%		4.2%
Access to Health Education	2.7%		3.0%
Alcohol	2.7%		4.2%
Alternative Medicine	2.7%		3.5%
Behavioral/Mental Health	9.0%		7.9%
Breastfeeding Friendly Workplace	0.3%		0.9%
Cancer	4.4%		2.7%
Care Coordination	2.2%		2.6%
Diabetes	2.7%		2.6%
Drugs/Substance Abuse	8.5%		6.8%
Family Planning	1.1%		1.6%
Health Literacy	1.4%		2.6%
Heart Disease	1.9%		1.6%
Housing	5.2%		5.9%
Lack of Providers/Qualified Staff	5.8%		4.5%
Lead Exposure	0.5%		0.5%
Neglect	2.2%		1.7%
Nutrition	3.3%		3.8%
Obesity	5.2%		5.3%
Occupational Medicine	0.3%		0.7%
Ozone (Air)	2.2%		0.5%
Physical Exercise	3.3%		4.3%
Poverty	4.7%		4.1%
Preventative Health/Wellness	3.0%		4.4%
Sexually Transmitted Diseases	1.6%		1.2%
Suicide	6.0%		6.3%
Teen Pregnancy	0.8%		1.8%
Telehealth	2.2%		2.0%
Tobacco Use	1.6%		2.1%
Transportation	3.8%		2.5%
Vaccinations	1.1%		2.0%
Water Quality	4.1%		2.3%
TOTAL Votes	365		4,811
*Norms: KS Counties: , Ellis, Pawnee, Russell, Sheridan, Smith, Thomas, Trego.			

IV. Inventory of Community Health Resources

[VVV Consultants LLC]

YR 2024 Update- Inventory of Health Services - Pawnee Co, KS				
Cat	HC Services Offered in county: Yes / No	Hospital	HLTH Dept	Other
Clinic	Primary Care	Yes	Yes (FP)	
Hosp	Alzheimer Center	No		Yes
Hosp	Ambulatory Surgery Centers	No		
Hosp	Arthritis Treatment Center	No		
Hosp	Bariatric/weight control services	No		
Hosp	Birthing/LDR/LDRP Room	No		
Hosp	Breast Cancer	No		
Hosp	Burn Care	No		
Hosp	Cardiac Rehabilitation	Yes		
Hosp	Cardiac Surgery	No		
Hosp	Cardiology services	Yes		Yes
Hosp	Case Management	Yes	Yes	
Hosp	Chaplaincy/pastoral care services	Yes		Yes
Hosp	Chemotherapy	No		
Hosp	Colonoscopy	Yes		
Hosp	Crisis Prevention	Yes		Yes
Hosp	CTScanner	Yes		
Hosp	Diagnostic Radioisotope Facility	Yes		
Hosp	Diagnostic/Invasive Catheterization	No		
Hosp	Electron Beam Computed Tomography (EBCT)	No		
Hosp	Enrollment Assistance Services	Yes	Yes	
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)	No		
Hosp	Fertility Clinic	No		
Hosp	FullField Digital Mammography (FFDM)	Yes		
Hosp	Genetic Testing/Counseling	No		
Hosp	Geriatric Services	Yes		
Hosp	Heart	No		Yes
Hosp	Hemodialysis	No		
Hosp	HIV/AIDS Services - Testing/Education/Referral	No	Yes -	
Hosp	Image-Guided Radiation Therapy (IGRT)	No		
Hosp	Inpatient Acute Care - Hospital services	Yes		
Hosp	Intensity-Modulated Radiation Therapy (IMRT) 161	No		
Hosp	Intensive Care Unit	No		
Hosp	Intermediate Care Unit	No		
Hosp	Interventional Cardiac Catheterization	No		
Hosp	Isolation room	Yes		
Hosp	Kidney	No		Yes
Hosp	Liver	No		
Hosp	Lung	No		Yes
Hosp	MagneticResonance Imaging (MRI)	Yes		
Hosp	Mammograms 3D	Yes		
Hosp	Mobile Health Services	Yes		
Hosp	Multislice Spiral Computed Tomography (<64 slice CT)	No		
Hosp	Multislice Spiral Computed Tomography (>64 slice CT)	Yes		
Hosp	Neonatal	No		
Hosp	Neurological services	No		
Hosp	Obstetrics	No		
Hosp	Occupational Health Services	Yes		

YR 2024 Update- Inventory of Health Services - Pawnee Co, KS				
Cat	HC Services Offered in county: Yes / No	Hospital	HLTH Dept	Other
Hosp	Oncology Services	No		
Hosp	Orthopedic services	NO		Yes
Hosp	Outpatient Surgery	Yes		
Hosp	Pain Management	Yes		
Hosp	Palliative Care Program	Yes		
Hosp	Pediatric	Yes		
Hosp	Physical Rehabilitation	Yes		Yes
Hosp	Positron Emission Tomography (PET)	No		
Hosp	Positron Emission Tomography/CT (PET/CT)	No		
Hosp	Psychiatric Services	Yes Clinic		Yes
Hosp	Radiology, Diagnostic	Yes		
Hosp	Radiology, Therapeutic	No		
Hosp	Reproductive Health (Pre-conception counseling/ED)	Yes Clinic	Yes	
Hosp	Robotic Surgery	No		
Hosp	Shaped Beam Radiation System 161	No		
Hosp	Single Photon Emission Computerized Tomography (SPECT)	No		
Hosp	Sleep Center	Yes		
Hosp	Social Work Services	Yes	Yes	
Hosp	Sports Medicine	Yes		Yes
Hosp	Stereotactic Radiosurgery	No		
Hosp	Swing Bed Services	Yes		
Hosp	Transplant Services	No		
Hosp	Trauma Center	Yes		
Hosp	Ultrasound	Yes		
Hosp	Women's Health Services	Yes	Yes	Yes
Hosp	Wound Care	Yes		
SR	Adult Day Care Program	No		Yes
SR	Assisted Living	No		Yes
SR	Home Health Services	No		Yes
SR	Hospice/Respite Care	Yes		Yes
SR	LongTerm Care	No		Yes
SR	Nursing Home Services	No		Yes
SR	Retirement Housing	No		Yes
SR	Skilled Nursing Care	Yes		Yes
ER	Emergency Services	Yes		
ER	Urgent Care Center	No		
ER	Ambulance Services	No		Yes
SERV	Program	No	Yes	Yes
SERV	Alcoholism-Drug Abuse	No		Yes
SERV	Annual Influenza Clinics locally and in surrounding communities	Yes	Yes	
SERV	Blood Donor Center	No		Yes
SERV	evaluation	No	No	
SERV	Chiropractic Services	No		Yes
SERV	Complementary Medicine Services	No		Yes
SERV	Dental Services	Yes		Yes
SERV	Developmental Screening	No	Yes	Yes

YR 2024 Update- Inventory of Health Services - Pawnee Co, KS				
Cat	HC Services Offered in county: Yes / No	Hospital	HLTH Dept	Other
SERV	Early Infant and Childhood Screenings and intervention/services	No	Yes	Yes
SERV	Fitness Center (Rehab facilities allow people to come in for a fee)	No		Yes
SERV	Healthy Start Home visits for prenatal, postnatal and infants/families	No	Yes	
SERV	Health Education Classes	Yes	Yes	Yes
SERV	Health Fair (Annual) (Partner together)	Yes	Yes	
SERV	Health Information Center	No	Yes	
SERV	Health Screenings	Yes	Yes	Yes
SERV	Immunizations and Foreign Travel	Yes	Yes	Yes
SERV	Infant/toddler/booster car seats with law enforcement agency	No	Yes	Yes
SERV	Maternal and Child Health Services	Yes	Yes	Yes
SERV	Meals on Wheels	No		Yes
SERV	Nail Care Clinics	No	Yes	Yes
SERV	Nursing Health Assessments	No	Yes	
SERV	Nutrition Programs (WIC)	No	Yes	
SERV	Housing	No	Yes	
SERV	Parenting Classes (Just starting)	No	No	Yes
SERV	Patient Education Center	No	Yes	
SERV	Pre-conception counseling	No	Yes	
SERV	Retail Store for Breastfeeding equipment and aids	No	Yes	
SERV	Sexually Transmitted Infection Screening and Treatment	Yes	Yes	Yes
SERV	Support Groups (Diabetic and BF Coalition)	No	Yes	Yes
SERV	Teen Outreach Services	No	Yes	
SERV	Tobacco Treatment/Cessation Program	No	Cessation	
SERV	Transportation to Health Facilities	No		Yes
SERV	Tuberculosis Screening, referral and treatment	Yes	Yes	
SERV	Wellness Program (DOH with Extension Office)	Yes	Yes	Yes

YR 2024 Update - Physician Manpower - Pawnee Co, KS

# of FTE Providers	Supply Working in County		
	County Based MD or DO	Visiting DR (FTE) to County	County based PA / NP
Pawnee Valley Campus Hospital Based:			
Primary Care:			
Family Practice	4	0.0	7
Internal Medicine	0	0.0	0
Obstetrics/Gynecology	0	0.0	0
Pediatrics	0	0.0	0
Medicine Specialists:			
Allergy/Immunology	0	0.0	0
Cardiology	0	1.0	0
Dermatology	0	0.0	0
Endocrinology	0	0.0	0
Gastroenterology	0	0.0	0
Oncology/RADO	0	0.0	0
Infectious Diseases	0	0.0	0
Nephrology	0	0.0	0
Neurology	0	0.0	0
Psychiatry	0	0.0	0
Pulmonary	0	1.0	1
Rheumatology	0	0.0	0
Surgery Specialists:			
General Surgery	0	1.0	0
Neurosurgery	0	0.0	0
Ophthalmology	1	0.0	0
Orthopedics	0	2.0	0
Otolaryngology (ENT)	0	0.0	0
Plastic/Reconstructive	0	0.0	0
Thoracic/Cardiovascular/Vasc	0	0.0	0
Urology	0	0.0	1
Hospital Based Specialists:			
Anesthesia/Pain	0	4.0	0
Emergency	0	0.0	5
Radiology	0	0.0	0
Pathology	0	0.0	0
Hospitalist *	0	0.0	0
Neonatal/Perinatal	0	0.0	0
Physical Medicine/Rehab	0	0.0	0
Dentistry	2	0.0	0
Larned State Hospital Based:			
Hospitalist *	2	0.0	4
Psychiatry	6	0.0	0
Dentistry	1	0.0	0
Larned Correctional MH Facility Based:			
Hospitalist *	1	0.0	1
Psychiatry	1	0.0	0
Dentistry	1	0.0	0
TOTALS	19	9.0	19

YR 2024 Update - Visiting Specialists to PVCH

Specialty	Physician Name	Group Name / Office Location	Schedule	Days per Month	FTE
CARDIOLOGY	Dr. Wagle	HaysMed DeBakey Heart Institute, Hays KS	Monthly-Every Fourth Wednesday of a Month	1	0.05
CARDIOLOGY	Megan Homolka, APRN	HaysMed DeBakey Heart Institute, Hays KS	Twice a month- First and Third Thursday	2	0.10
PULMONOLOGY	Lesa Klozenbutcher, APRN	HaysMed Pulmonary Associates, Hays KS	Twice a month-First Wednesday and Third Friday	2	0.10
GENERAL SURGERY	Brandon Cunningham	HaysMed Southwind Surgical, Hays KS	Twice a month- First Thursday of the first full week, and Third Thursday	2	0.10
UROLOGY	Ed Habash, PA	HaysMed Western Kansas Urological Associates, Hays KS	Twice a Month-First and Third Wednesday of a Month	2	0.10
PAIN	Dr. Green	HaysMed Pain Clinic, Hays KS	Monthly, Third Wednesday of a Month	1	0.05
SLEEP	Dr. Truong	Pulmonary and Sleep Consultants of Kansas, Wichita, KS	Monthly-Every Sixth Tuesday	1	0.05
WOUND CARE	Heather Holaday, APRN	Pawnee Valley Community Hospital Specialty Clinic, Larned KS	Twice a week- Mondays and Tuesdays	8	0.40
Pawnee Valley Specialty Clinic - 923 Carroll Ave, Larned					

Pawnee County Area Health Services Directory Year 2024 Update

Emergency Numbers:

Police/Sheriff	911
Fire	911
Ambulance	911

Non-Emergency Numbers:

Pawnee County Sheriff	620-285-2211
Pawnee County Ambulance	620-285-8505
Larned Fire Department	620-285-8520

Municipal Non-Emergency Numbers

	<u>Police/Sheriff</u>	<u>Fire</u>
Burdett	620-285-2211	620-525-6279
Garfield	620-285-2211	620-285-8520
Larned	620-285-8545	620-285-8520
Rozel	620-285-2211	620-527-4414

To provide updated information or to add new health and medical services to this directory, please contact:

Pawnee County Extension
715 Broadway, Room 6 (Larned)
620-285-6901

Other Emergency Numbers

National 211 Information and Referral for Kansas - United Way of the Plains

(Helps with food, housing, employment, health care, counseling and during emergency events).

Dial 2-1-1 for service area

Alternate #: 888-413-4327 24/7

Kansas Child/Adult Abuse and Neglect Hotline

1-800-922-5330

www.srskansas.org/hotlines.html

Domestic Violence Hotline

1-800-799-7233

www.ndvh.org

Emergency Management (Topeka)

785-274-1409

www.accesskansas.org/kdem

Federal Bureau of Investigation

1-866-483-5137

www.fbi.gov/congress/congress01/caruso100301.htm

Kansas Arson/Crime Hotline

1-800-KS-CRIME

800-572-1763

www.accesskansas.org/kbi

Kansas Bureau of Investigation (Topeka)

785-296-8200

www.accesskansas.org/kbi

Kansas Crisis Hotline (Domestic Violence/Sexual Assault)

1-888-END-ABUSE

www.kcsdv.org

Kansas Road Conditions

1-866-511-KDOT

511

www.ksdot.org

Poison Control Center

1-800-222-1222

www.aapcc.org

Suicide Prevention Hotline

1-800-SUICIDE

www.hopeline.com

800-273-TALK

www.suicidepreventionlifeline.com

Toxic Chemical and Oil Spills

1-800-424-8802

www.epa.gov/region02/contact.htm

Hospitals

Pawnee Valley Community Hospital

923 Carroll Avenue (Larned)

620-285-3161

www.pawneevalleyhospital.com

Pawnee Valley Community Hospital Services

Include:

Inpatient Care – 25 beds

24-Hour Emergency Room

Acute Care

Skilled Nursing/Swing Bed Services

Upper & Lower GI Scopes/Colonoscopies

Dental Surgery

PICC Lines

Specialized Nursing Services

Diagnostic Imaging/Radiology

Bone density scanning (Dexascan)

Cardiac nuclear medicine

64-Slice Low Dose CT Scanner

Endoscopies

Wide-bore Short-tube 1.5 Telsa MRI

Digital Mammography

Ultrasound

X-Ray

Sleep & Diagnostic Center – Fully Accredited

Cardiac Nuclear Stress Testing

EEG (Electroencephalogram)

Full Service Laboratory

Rehabilitative

Cardiac Rehabilitation

Dry Needling

Pulmonary Rehabilitation

Respiratory Therapy

Physical Therapy – Inpatient &

Outpatient

Occupational Therapy

Speech Therapy

Lymphedema Therapy

Vital Stem

Wound Care

Specialty Clinic's

Medicare Certified Critical Access Hospital

Health Department

Pawnee County Health Department

715 Broadway, Courthouse (Larned)

620-285-6963

1-800-211-4401

www.pawneecountykansas.com

Pawnee County Health Department Services include:

- Children's Health Services
 - Nursing Health Assessments
 - Developmental evaluations
 - Immunizations
 - Laboratory tests
 - Physical examinations
 - Referrals
 - Vision and hearing screenings
 - Lead Testing
 - Healthy Start Home Visitor
- Child Care Licensing Program
 - Orientation Classes, Survey Visits
 - Complaint reporting and follow-up
- Disease Control
 - Communicable disease investigation and consultations
 - HIV/AIDS counseling and testing
 - HIV education and prevention
 - STD testing and treatment
 - Tuberculosis testing and prophylactic treatment
- Women's Health Care
 - Cervical and breast cancer screening
 - Diagnosis and treatment of vaginal infections
 - Birth control and education
 - Pregnancy testing
 - Referral for infertility
 - Reproductive counseling
- Health Screening Clinics
 - Blood pressure
 - Health counseling
 - Hearing and vision screening
 - Lipid profile and blood sugar screening
 - Hemoglobin (anemia)
 - Pneumonia, tetanus/diphtheria, etc.
 - Vaccinations
 - Urine test
 - Weight check
 - Immunizations – infant through adult and foreign travel.
 - Maternal and Infant Program and Home visits
 - Home visits by Registered Nurse
 - Links to community resources
 - Pregnancy and parenting education
 - Prenatal medical care
 - Support and counseling
 - Breastfeeding education, support, and breast pumps available to rent or buy.
- WIC
 - Nutrition Program
 - Education and healthy supplemental foods

Medical Professionals

Chiropractors

Perez Chiropractic Clinic PA

510B Broadway Street (Larned)
620-285-6600
Luis Perez DC

Healthy Living Chiropractic LLC

606 Topeka (Larned)
(620) 285-6190
Dr. Lindsey VanSickle, D.C.

Clinics

A Healthy Choice Clinic

200 E. 8th Street
(620) 285-6041
www.healthychoiceclinic.com

Life Center Clinic

112 E 6th Street (Larned)
620-804-2691
www.lifecenterclinic.com

Heart of Kansas Family Health

522 Broadway (Larned)
620-804-6100

Pawnee Valley Medical Associates

713 W 11th Street (Larned)
620-804-6007

Specialty Clinics

Hays Medical Center

(Refer to Page 51 to Review Specialties)

Dentists

Rosenberg Joe O DDS PA

613 N Broadway Street (Larned)
620-285-3886
Joe & Tammy Rosenberg

Smith Dental Clinic

706 Fort Larned Avenue (Larned)
620-285-6531
Terry Smith D.D.S.
Trent Smith D.D.S.

Optometrists

Larned Eye Health

Douglas Ayre, D OD
722 Mann Avenue (Larned)
620-285-2105

Reed McAtee D OD

722 Mann Avenue (Larned)
620-285-2105

Pharmacies

Reed Pharmacy

326 W 14th Street (Larned)
620-285-6286

Physicians and Health Care Providers

A Healthy Choice Clinic

1200 E 8th St.
Larned, KS 67550
620-285-6041
Mark Van Norden D.O.

Heart of Kansas Family Healthcare

522 Broadway St.
Larned, KS 67550
620-804-6100

Pawnee County Health Department

P.O. Box 150, 715 Broadway, Courthouse (Larned)
620-285-6963
Cheryl Hoberecht RN
Amanda Lakin RN

Pawnee Valley Comm Hosp Family Medicine

713 W 11th Street (Larned)
620-804-6007
Arlo Reimer, M.D.
Heather Holaday, DNP-APRN
Marley Palmer, DNP-APRN
Susan Aistrup, APRN
Kathryn Buchanan, APRN

Life Center Clinic

Sheila Toon FNP CNM
Family Medicine
112 E. 6thMain Street
(Larned)
620-804-2691

Rehabilitation Services

Progressive Therapy & Sports Medicine

117 W 6th (Larned)
620-285-6011

Pawnee Valley Community Hospital Physical Therapy and Advanced Rehabilitation

923 Carroll Avenue (Larned)
620-285-8605

Other Health Services

Assisted Living/Nursing Homes/TLC

Country Living of Larned Memory Care

710 W 9th Street (Larned)
620-285-6212

Country Living of Larned

714 W 9th Street (Larned)
620-285-6900

Four Seasons Village

200 W 17th Street (Larned)
620-285-7425

Diversicare of Larned

1114 W 11th Street (Larned)
620-285-6324

Pawnee Plaza of Larned

1801 Broadway (Larned)
620-285-6661

Diabetes

Community Diabetes Education Class

Pawnee Valley Community Hospital
First & Second Tuesday of every other month
Physician Referral
1-855-429-7633

Diabetes Support Group

Welcome Inn, 2nd Thursday of each month
620-285-6963 for information

Arriva Medical

1-800-375-5137

Diabetes Care Club

1-888-395-6009

Disability Services

American Disability Group

1-877-790-8899

Kansas Department on Aging

1-800-432-3535
www.agingkansas.org/index.htm

RosewoodAdult Rehabilitation & Support Employment Assistance

384 N. Washington, Great Bend
620-793-5888

Sunflower Diversified Services Inc.

1312 Patton Road (Great Bend)
620-792-4087

Domestic/Family Violence

Child/Adult Abuse Hotline

1-800-922-5330
www.srskansas.org/services/child_protective_services.htm

General Information – Women’s Shelters

www.WomenShelters.org

Kansas Crisis Hotline

Manhattan
785-539-7935

Sexual Assault/Domestic Violence Center

(Hutchinson)
Hotline: 800-701-3630
Business Line: 620-663-2522

Family Crisis Center

1806 12th Street (Great Bend)
620-793-1885

Educational Training Opportunities

Association of Continuing Education
620-792-3218

Pawnee County Learning Center
209 E 6th Street (Larned)
620-285-7700

Food Programs

Helping Hands Food Pantry
501 Main Street (Larned)
4 – 6 p.m. M-F

Kansas Food 4 Life
4 Northwest 25th Road (Great Bend)
620-793-7100

Kansas Food Bank
1919 East Douglas (Wichita)
316-265-4421
www.kansasfoodbank.org

WIC Program

Pawnee County Health Department
715 Broadway, Larned, KS

Meals on Wheels
Welcome Inn
Larned, KS
620-285-3504

Government Healthcare

Kansas Department on Aging (KDOA)
503 South Kansas Avenue (Topeka)
785-296-4986 or 1-800-432-3535
www.agingkansas.org/

Kansas Department of Health and Environment (KDHE)
Curtis State Office Building
1000 South West Jackson (Topeka)
785-296-1500
www.kdheks.gov/contact.html

MEDICAID
Kansas Department of Social & Rehabilitation Services (SRS)
3000 Broadway (Hays)
785-628-1066

MEDICARE
Social Security Administration
1212 East 27th Street (Hays)
785-625-3496

Social & Rehabilitation Services (SRS)
3000 Broadway (Hays)
785-628-1066

Social Security Administration
1212 East 27th Street (Hays)
785-625-3496

Health and Fitness Centers

Larned Community Center
1500 North Toles (Larned)
620-285-6002

Melba Woods Fitness Center
620-263-3733

Unique Physique Gym
424 W 14th Street (Larned)
620-285-7015

Home Health

Kansas Home Care Association
2738 SW Santa Fe Drive
Topeka, KS 66614
(785) 478-3640
Fax: (785) 286-1835
khca@kshomecare.org

Golden Belt Home Health and Hospice
3520 Lakin Ave.
Great Bend, KS
620-792-8171

Southwest Area Agency on Aging
(620) 225-8230
FAX: (620) 225-8240

1-800-742-9531 Dodge City Office:
240 San Jose Drive
Dodge City, Kansas 67801

620) 793-6633 FAX: (620) 793-7435
1905 Washington
Great Bend, KS 67530

Elder Care
P.O. Box 1364
Great Bend, KS 67530
620-792-5942

Angels Care Home Health
1506 Vine Street
Hays, KS 67601
785-621-4200

Hospice

Golden Belt Home Health and Hospice
3520 Lakin Ave.
Great Bend, KS
620-792-8171

Kindred Hospice
Hutchinson, KS
620-664-5757

Medical Equipment and Supplies

American Medical Sales and Repair
1-866-637-6803

Central Kansas Respiratory Services, LLC
117 W 6th Street (Larned)
620-804-6104

Life Watch USA
1-800-716-1433

School Nurses

USD 495 Ft. Larned School District
120 E 6th (Larned)
Fort Larned Elementary School
620-285-2141
Larned Middle School
620-285-8430
Larned High School
620-285-2151
www.usd495.net

Pawnee Heights School District 496
P.O. Box 97, 100 W Grand (Rozel)
Elementary, Junior High, and High School
620-527-4211
www.phtigers.net

Senior Services

Burdett Seniors Inc.
203 Elm Street (Burdett)
620-525-6655

Elder Care, Inc.
PO Box 1364 (Great Bend)
620-792-5942

Older Kansans Employment
Southwest Kansas Area Agency on Aging
240 San Jose Drive
Dodge City, KS 67801
(316) 225-8230
<http://www.swkaaa.org/>

Over 50 Club
Garfield, KS

Welcome Inn Senior Center
113 W 4th Street (Larned)
620-285-3504

Veterinary Services

Larned Veterinary Clinic
1443 120th Avenue (Larned)
620-285-3153

Frick Veterinary Clinic
1112 K19 Hwy S (Larned)
620-285-5267

Local Government, Community, and Social Services

Adult Protection

Adult Protective Services (SRS)
1-800-922-5330
www.srskansas.org/ISD/ees/adult.htm

Elder Abuse Hotline
1-800-842-0078
www.elderabusecenter.org

Kansas Department of Social and Rehabilitation Services West Region Protection Reporting Center
1-800-922-5330

Alcohol and Drug Treatment

Alcohol and Drug Abuse Services
1-800-586-3690
http://www.srskansas.org/services/alc-drug_assess.htm

Alcohol Detoxification 24-Hour Helpline
1-877-403-3387
www.ACenterForRecovery.com

Center for Recovery
1-877-403-6236

G&G Addiction Treatment Center
1-866-439-1807

Road Less Traveled
1-866-486-1812

Seabrook House
1-800-579-0377

The Treatment Center
1-888-433-9869

Breastfeeding

Pawnee County Breastfeeding Coalition
Pawnee County Health Dept.
715 Broadway (Larned)
620-285-6963

Child Protection

Kansas Department of Social and Rehabilitation Services West Region Protection Reporting Center – i.e. PROTECTION REPORT CENTER FOR ABUSE
1-800-922-5330
Available 24 hours/7 days per week – including holidays

Children and Youth

Children's Alliance
627 SW Topeka Boulevard (Topeka)
785-235-5437
www.childally.org

Kansas Children's Service League
1-800-332-6378
www.kcsl.org

Community Centers

Garfield Community Center
217 3rd Street (Garfield)
620-569-2253

Larned Community Center
1500 Toles Avenue (Larned)
620-285-6002

Rozel Community Center
105 N Main Street
620-527-4366

Crime Prevention

Larned Police Department
419 Broadway Street (Larned)
620-285-8545

Pawnee County Crime Stoppers
419 Broadway Street (Larned)
620-285-3277

Pawnee County Sheriff's Office
116 W 8th Street (Larned)
620-285-2211

Day Care Providers – Adult

Country Living of Larned
714 W 9th Street Suite 19 (Larned)
620-285-6900

Diversicare of Larned
1114 W 11th Street (Larned)
620-285-6914

Day Care Providers – Children

Child Care Connections
Resource & Referral Agency
1-877-678-2548

Caring Hands Daycare
620-285-4869

Extension Office

Pawnee County Extension Office
715 Broadway, Room 6 (Larned)
620-285-6901

Funeral Homes

Beckwith Mortuary Inc. & Monuments
916 Main Street (Larned)
620-285-2121

Head Start

Larned Head Start
1010 Broadway Street (Larned)
620-285-6860

Housing

Four Seasons Village
200 W 17th Street (Larned)
620-285-7425

Pawnee Plaza Housing Apartments
1801 Broadway Street (Larned)
620-285-6661

Prairie Vista
1100 West 16th Street (Larned)
620-285-8529

Housing Opportunities, Inc.
1313 Stone St, Great Bend, KS 67530
(620) 792-3299

Legal Services

Helvie & Cowell Law Office
412 Broadway Street (Larned)
620-285-7446

Martin Law Office
702 Broadway Street (Larned)
620-285-3813

Smith Burnett & Hagerman LLC
111 E 8th Street (Larned)
620-285-3157

Libraries, Parks, and Recreation

Burdett City Park
Michigan Avenue & Locust Street (Burdett)

Burgess Park
1120 W 7th Street (Larned)

Camp Criley Park
3rd Street & 4th Street (Garfield)

Camp Pawnee

2 miles west of Larned to Junction 264, ½ mile South

City of Larned Swimming Pool

100 W 1st Street (Larned)
620-285-8570

City Hall & Library

207 Elm Street (Burdett)
620-525-6279

Doerr Vernon Park & Tennis Courts

Carroll Avenue & Fort Larned Avenue (Larned)

Downey Park

North of Highway 56, Pawnee Street (Garfield)

Fort Larned National Historic Site

1767 KS Highway 156 (Larned)
620-285-6911

Jordaan Memorial Library

724 Broadway Street (Larned)
620-285-2876

Larned City Pond

South Main and Cleveland Street (Larned)

Larned Country Club

681 E 14th Street (Larned)
620-285-3935

Moffett Stadium & Tennis Courts

318 Mann Street (Larned)

Pawnee County Fairgrounds

1800 Fair Drive (Larned)

Rozel Ballpark

Tuttle Street & Edwards Avenue (Rozel)

Rozel Park

Grand Avenue & Main Street (Rozel)

Santa Fe Trail Center

1349 K 156 Hwy (Larned)

Schnack-Lowery Park

544 W 1st Street (Larned)

State Theatre of Larned

617 Broadway (Larned)

Tera Jordaan Memorial Park

1600 Toles (Larned)

Pregnancy Services**Adoption is a Choice**

1-877-524-5614

Adoption Network

1-888-281-8054

Adoption Spacebook

1-866-881-4376

Graceful Adoptions

1-888-896-7787

Kansas Children's Service League

1-877-530-5275

www.kcsl.org

Pawnee County Health Department

715 Broadway, Courthouse (Larned)

620-285-6963

800-211-4401

www.kalhd.org/pawnee

Public Information**Larned Area Chamber of Commerce**

502 Broadway (Larned)

620-285-6916

Burdett City Hall & Library

207 Elm Street (Burdett)

620-525-6279

City of Garfield

217 3rd Street

620-569-2385

City of Rozel

105 Main Street (Rozel)

620-527-4399

Clerk of Pawnee County

715 Broadway Street, Courthouse (Larned)

620-285-3721

Larned City Hall

417 Broadway (Larned)

620-285-8500

Rape**Domestic Violence and Rape Hotline**

1-888-874-1499

Family Crisis Center

1806 12th Street (Great Bend)

620-793-1885

Kansas Crisis Hotline

Manhattan

785-539-7935

1-800-727-2785

Social Security**Social Security Administration**

1-800-772-1213

1-800-325-0778

www.ssa.gov

Transportation

Public Transportation Bus

Available for: doctor appointments, shopping,
general transportation use
Welcome Inn
114 W 4th Street (Larned)
620-285-3504

Volunteers In Action/RSVP

620-792-1614

Best Express

316-838-1419

LogistiCare

United: 877-796-5848
Sunflower: 877-917-8163

State and National Information, Services, Support

Adult Protection

Adult Protection Services

1-800-922-5330
www.srskansas.org/SD/ees/adult.htm

Domestic Violence and Sexual Assault (DVACK)

1-800-874-1499
www.dvack.org

Elder Abuse Hotline

1-800-842-0078
www.elderabusecenter.org

Elder and Nursing Home Abuse Legal

www.resource4nursinghomeabuse.com/index.html

Kansas Coalition Against Sexual and Domestic Violence

1-888-END-ABUSE (363-2287)
www.kcsdv.org/ksresources.html

Kansas Department on Aging Adult Care Complaint Program

1-800-842-0078

National Center on Elder Abuse

(Administration on Aging)
www.ncea.gov/NCEAroot/Main_Site?Find_Help/Help_Hotline.aspx

National Domestic Violence Hotline

1-800-799-SAFE (799-7233)
1-800-787-3224 (TTY)
www.ndvh.org

National Sexual Assault Hotline

1-800-994-9662
1-888-220-5416 (TTY)
www.4woman.gov/faq/sexualassault.htm

National Suicide Prevention Lifeline

1-800-273-8255

Poison Center

1-800-222-1222

Sexual Assault and Domestic Violence Crisis Line

1-800-701-3630

Social and Rehabilitation Services (SRS)

1-888-369-4777 (HAYS)
www.srskansas.org

Suicide Prevention Helpline

785-841-2345

Alcohol and Drug Treatment Programs

A 1 A Detox Treatment

1-800-757-0771

Recovery Connection 24/7 support

1-800-993-3869
1-800-511-9225

Abandon A Addiction

1-800-405-4810

Able Detox-Rehab Treatment

1-800-577-2481 (NATIONAL)

Abuse Addiction Agency

1-800-861-1768
www.thewatershed.com

AIC (Assessment Information Classes)

1-888-764-5510

AI-Anon Family Group

1-888-4AL-ANON (425-2666)
www.al-anon.alateen.org

Alcohol and Drug Abuse Hotline

1-800-ALCOHOL

Alcohol and Drug Abuse Services

1-800-586-3690
www.srskansas.org/services/alc-drug_assess.htm

Alcohol and Drug Addiction Treatment Programs

1-800-510-9435

Alcohol and Drug Helpline

1-800-821-4357

Alcoholism/Drug Addiction Treatment Center

1-800-477-3447

Kansas Alcohol and Drug Abuse Services Hotline

1-800-586-3690
www.srskansas.org/services/alc-drug_assess.htm

Mothers Against Drunk Driving

1-800-GET-MADD (438-6233)

www.madd.org**National Council on Alcoholism and Drug Dependence, Inc.**

1-800-NCA-CALL (622-2255)

www.ncadd.org**Recovery Connection**www.recoveryconnection.org**Regional Prevention Centers of Kansas**

1-800-757-2180

www.smokyhillfoundation.com/rpc-locate.html**Better Business Bureau****Better Business Bureau**

328 Laura (Wichita)

316-263-3146

www.wichita.bbb.org**Children and Youth****Adoption**

1-800-862-3678

www.adopt.org/**Boys and Girls Town National Hotline**

1-800-448-3000

www.girlsandboystown.org**Child/Adult Abuse and Neglect Hotline**

1-800-922-5330

www.srskansas.org/**Child Abuse Hotline**

1-800-922-5330

Child Abuse National Hotline

1-800-422-4453

1-800-222-4453 (TDD)

www.childhelpusa.org/home**Child Abuse National Hotline**

1-800-4-A-CHILD (422-4453)

www.childabuse.com**Child Find of America**

1-800-426-5678

Child Help USA National Child Abuse Hotline

1-800-422-4453

Child Protective Services

1-800-922-5330

www.srskansas.org/services/child_protective_services.htm**HealthWave**

P.O. Box 3599

Topeka, KS 66601

1-800-792-4884 1-800-792-4292 (TTY)

www.kansashealthwave.org**Heartspring (Institute of Logopedics)**8700 E. 29TH N

Wichita, KS 67226

www.heartspring.org**Kansas Big Brothers/Big Sisters**

1-888-KS4-BIGS

www.ksbbbs.org**Kansas Children's Service League (Hays)**

785-625-2244

1-877-530-5275

www.kcsl.org**Kansas Department of Health and Environment**

785-296-1500

www.kdheks.govE-mail: info@kdheks.gov**Kansas Society for Crippled Children**

106 W. Douglas, Suite 900

Wichita, KS 67202

1-800-624-4530

316-262-4676

www.kssociety.org**National Runaway Switchboard**

1-800-RUNAWAY

www.1800runaway.org/**National Society for Missing and Exploited Children**

1-800-THE-LOST (843-5678)

www.missingkids.com**Parents Anonymous Help Line**

1-800-345-5044

www.parentsanonymous.org/paIndex10.html**Runaway Line**

1-800-621-4000

1-800-621-0394 (TDD)

www.1800runaway.org/**Talking Books**

1-800-362-0699

www.skyways.lib.ks.us/KSL/talking/ksl_bph.html**Community Action****Peace Corps**

1-800-424-8580

www.peacecorps.gov**Public Affairs Hotline (Kansas Corporation Commission)**

1-800-662-0027

www.kcc.state.ks.us**Counseling****Care Counseling**

Family counseling services for Kansas and Missouri

1-888-999-2196

Castlewood Treatment Center for Eating Disorders

1-888-822-8938
www.castlewoodtc.com

Catholic Charities

1-888-468-6909
www.catholiccharitiessalina.org

Center for Counseling

5815 W Broadway (Great Bend)
1-800-875-2544

Central Kansas Mental Health Center

1-800-794-8281
Will roll over after hours to a crisis number.

Consumer Credit Counseling Services

1-800-279-2227
www.kscgccs.org/

Kansas Problem Gambling Hotline

1-866-662-3800
www.ksmhc.org/Services/gambling.htm

National Hopeline Network

1-800-SUICIDE (785-2433)
www.hopeline.com

National Problem Gambling Hotline

1-800-552-4700
www.npgaw.org

Self-Help Network of Kansas

1-800-445-0116
www.selfhelpnetwork.wichita.edu

Senior Health Insurance Counseling

1-800-860-5260
www.agingkansas.org

Sunflower Family Services, Inc.

(Adoption, crisis pregnancy, conflict solution center)
1-877-457-5437
www.sunflowerfamily.org

Disability Services

American Association of People with Disabilities (AAPD)

www.aapd.com

American Council for the Blind

1-800-424-8666
www.acb.org

Americans with Disabilities Act Information Hotline

1-800-514-0301
1-800-514-0383 (TTY)
www.ada.gov

Disability Advocates of Kansas, Incorporated

1-866-529-3824
www.disabilitysecrets.com

Disability Group, Incorporated

1-888-236-3348
www.disabilitygroup.com

Disability Rights Center of Kansas (DRC)

Formerly Kansas Advocacy & Protective Services
1-877-776-1541
1-877-335-3725 (TTY)
www.drckansas.org

Hearing Healthcare Associates

1-800-448-0215

Kansas Commission for the Deaf and Hearing Impaired

1-800-432-0698
www.srskansas.org/kcdhh

Kansas Relay Center (Hearing Impaired service)

1-800-766-3777
www.kansasrelay.com

National Center for Learning Disabilities

1-888-575-7373
www.ncld.org

National Library Services for Blind & Physically Handicapped

www.loc.gov/nls/
1-800-424-8567

Parmelee Law Firm

8623 E 32nd Street N, Suite 100 (Wichita)
1-877-267-6300

Environment

Environmental Protection Agency

1-800-223-0425
913-321-9516 (TTY)
www.epa.gov

Kansas Department of Health and Environment

Salina 785-827-9639
Hays 785-625-5663
Topeka 785-296-1500
www.kdheks.gov

Food and Drug

Center for Food Safety and Applied Nutrition

1-888-SAFEFOOD (723-3366)
www.cfsan.fda.gov/
www.healthfinder.gov/docs/doc03647.htm

US Consumer Product Safety Commission

1-800-638-2772
1-800-638-8270 (TDD)
www.cpsc.gov

USDA Meat and Poultry Hotline

1-888-674-6854
1-800-256-7072 (TTY)
www.fsis.usda.gov/

U.S. Food and Drug Administration

1-888-INFO-FDA
1-888-463-6332
www.fsis.usda.gov/

Poison Hotline

1-800-222-1222

Health Services

American Cancer Society

1-800-227-2345
www.cancer.org

American Diabetes Association

1-800-DIABETES (342-2383)
www.diabetes.org

AIDS/HIV Center for Disease Control and Prevention

1-800-CDC-INFO
1-888-232-6348 (TTY)
www.cdc.gov/hiv/

AIDS/STD National Hot Line

1-800-342-AIDS
1-800-227-8922 (STD line)

American Health Assistance Foundation

1-800-437-2423
www.ahaf.org

American Heart Association

1-800-242-8721
www.americanheart.org

American Lung Association

1-800-586-4872

American Stroke Association

1-888-4-STROKE
www.americanheart.org

Center for Disease Control and Prevention

1-800-CDC-INFO
1-888-232-6348 (TTY)
www.cdc.gov/hiv/

Elder Care Helpline

www.eldercarelink.com

Eye Care Council

1-800-960-EYES
www.seetolearn.com

Kansas Foundation for Medical Care

1-800-432-0407
www.kfmc.org

National Health Information Center

1-800-336-4797
www.health.gov/nhic

National Cancer Information Center

1-800-227-2345
1-866-228-4327 (TTY)

www.cancer.org

National Institute on Deafness and Other Communication Disorders Information Clearinghouse

1-800-241-1044
1-800-241-1055 (TTY)
www.nidcd.nih.gov

Hospice

Hospice-Kansas Association

1-800-767-4965

Kansas Hospice and Palliative Care Organization

1-888-202-5433
www.lifeproject.org/akh.htm

Southwind Hospice, Incorporated

www.southwindhospice.com
785-483-3161

Housing

Kansas Housing Resources Corporation

785-296-2065
www.housingcorp.org

US Department of Housing and Urban Development

Kansas Regional Office
913-551-5462

Legal Services

Kansas Attorney General

1-800-432-2310 (Consumer Protection)
1-800-828-9745 (Crime Victims' Rights)
1-800-766-3777 (TTY)
www.ksag.org/

Kansas Bar Association

785-234-5696
www.ksbar.org

Kansas Department on Aging

1-800-432-3535
www.agingkansas.org/index.htm

Kansas Legal Services

1-800-723-6953
www.kansaslegalservices.org

Southwest Kansas Area Agency on Aging

240 San Jose Drive
Dodge City, KS 67801
(316) 225-8230
<http://www.swkaaa.org/>

Medicaid Services

First Guard

1-888-828-5698
www.firstguard.com

Kansas Health Wave

1-800-792-4884 or 1-800-792-4292 (TTY)
www.kansashealthwave.org

Kansas Medical Assistance Program

Customer Service
1-800-766-9012
www.kmpa-state-ks.us/

Medicare Information

1-800-MEDICARE
www.medicare.gov

U.S. Department of Health and Human Services

Centers for Medicare and Medicaid Services
1-800-MEDICARE (1-800-633-4227) or
1-877-486-2048 (TTY)
www.cms.hhs.gov

Mental Health Services**Alzheimer's Association**

1-800-272-3900 or 1-866-403-3073 (TTY)
www.alz.org

Developmental Services of Northwest Kansas

1-800-637-2229

Kansas Alliance for Mentally III (Topeka, KS)

785-233-0755
www.namikansas.org

Make a Difference

1-800-332-6262

Mental Health America

1-800-969-6MHA (969-6642)

National Alliance for the Mentally III Helpline

1-800-950-NAMI (950-6264) or 703-516-7227 (TTY)
www.nami.org

National Institute of Mental Health

1-866-615-6464 or 1-866-415-8051 (TTY)
www.nimh.nih.gov

National Library Services for Blind and Physically Handicapped

1-800-424-8567
www.loc.gov/nls/music/index.html

National Mental Health Association

1-800-969-6642
1-800-433-5959 (TTY)
www.nmha.org

State Mental Health Agency

KS Department of Social and Rehabilitation Services
915 SW Harrison Street
Topeka, KS 66612
785-296-3959
www.srskansas.org

Suicide Prevention Hotline

1-800-SUICIDE [784-2433]
www.hopeline.com

Nutrition**American Dietetic Association**

1-800-877-1600
www.eatright.org

American Dietetic Association Consumer Nutrition Hotline

1-800-366-1655

Department of Human Nutrition

Kansas State University
119 Justin Hall
Manhattan, KS 66506
785-532-5500
www.humec.k-state.edu/hn/

Eating Disorders Awareness and Prevention

1-800-931-2237
www.nationaleatingdisorders.org

Food Stamps

Kansas Department of Social and Rehabilitation Services (SRS)
1-888-369-4777 or Local SRS office
www.srskansas.org/ISD/ees/food_stamps.htm

Kansas Department of Health and Environment

1000 SW Jackson, Suite 220
Topeka, KS 66612
785-296-1320
www.kdheks.gov/news-wic/index.html

Road and Weather Conditions**Kansas Road Conditions**

1-866-511-KDOT
511
www.ksdot.org

Senior Services**Alzheimer's Association**

1-800-487-2585

American Association of Retired Persons (AARP)

1-888-OUR-AARP (687-2277)
www.aarp.org

Americans with Disabilities Act Information Line

1-800-514-0301 or 1-800-514-0383 [TTY]
www.usdoj.gov/crt/ada

American Association of Retired Persons

1-888-687-2277
www.aarp.org

Area Agency on Aging

1-800-432-2703

Eldercare Locator

1-800-677-1116
www.eldercare.gov/eldercare/public/home.asp

Home Buddy

1-866-922-8339

www.homebuddy.org**Home Health Complaints**

Kansas Department of Social and Rehabilitation Services (SRS)

1-800-842-0078

Kansas Advocates for Better Care Inc.

Consumer Information

1-800-525-1782

www.kabc.org**Kansas Department on Aging**

1-800-432-3535 or 785-291-3167 (TTY)

www.agingkansas.org/index.htm**Kansas Foundation for Medical Care, Inc.**

Medicare Beneficiary Information

1-800-432-0407

Kansas Tobacco Use Quitline

1-866-KAN-STOP (526-7867)

www.kdheks.gov/tobacco/cessation.html**Older Kansans Employment Programs (OKEP)**

785-296-7842

www.kansascommerce.com**Older Kansans Hotline**

1-800-742-9531

Older Kansans Information Reference Sources on Aging (OKIRSA)

1-800-432-3535

Senior Health Insurance Counseling for Kansas

1-800-860-5260

www.agingkansas.org/SHICK/shick_index.html**SHICK**

1-800-860-5260

www.agingkansas.org/SHICK**Social Security Administration**

785-296-3959 or 785-296-1491 (TTY)

www.srskansas.org**SRS Rehabilitation Services Kansas**

785-296-3959

785-296-1491 (TTY)

www.srskansas.org**Suicide Prevention****Suicide Prevention Services**

1-800-784-2433

www.spsfv.org**Veterans****Federal Information Center**

1-800-333-4636

www.FirstGov.gov**U.S. Department of Veterans Affairs**

1-800-513-7731

www.kcva.org**Education (GI Bill)**

1-888-442-4551

Health Resource Center

1-877-222-8387

Insurance Center

1-800-669-8477

Veteran Special Issue Help Line

Includes Gulf War/Agent Orange Helpline

1-800-749-8387

U.S. Department of Veterans Affairs**Mammography Helpline**

1-888-492-7844

Other Benefits

1-800-827-1000

Memorial Program Service [includes status of headstones and markers]

1-800-697-6947

Telecommunications Device for the Deaf/Hearing Impaired

1-800-829-4833 (TTY)

www.vba.va.gov**Veterans Administration****Veterans Administration Benefits**

1-800-669-8477

Life Insurance

1-800-669-8477

Education (GI Bill)

1-888-442-4551

Health Care Benefits

1-877-222-8387

Income Verification and Means Testing

1-800-929-8387

Mammography Helpline

1-888-492-7844

Gulf War/Agent Orange Helpline

1-800-749-8387

Status of Headstones and Markers

1-800-697-6947

Telecommunications Device for the Deaf

1-800-829-4833

www.vba.va.gov

Benefits Information and Assistance

1-800-827-1000

Debt Management

1-800-827-0648

Life Insurance Information and Service

1-800-669-8477

Welfare Fraud Hotline

Welfare Fraud Hotline

1-800-432-3913

General Online Healthcare Resources

Doctors and Dentists--General

[AMA Physician Select: Online Doctor Finder](#) (American Medical Association) [DocFinder](#) (Administrators in Medicine) [Find a Dentist](#) (Academy of General Dentistry) [Find a Dentist: ADA Member Directory](#) (American Dental Association) [Physician Compare](#) (Centers for Medicare & Medicaid Services)

Hospitals and Clinics--General

[Find a Health Center](#) (Health Resources and Services Administration) [Find a Provider: TRICARE Provider Directories](#) (TRICARE Management Activity) [Hospital Quality Compare](#) (Centers for Medicare & Medicaid Services)

Doctors and Dentists--Specialists

[ACOG's Physician Directory](#) (American College of Obstetricians and Gynecologists) [ACR: Geographic Membership Directory](#) (American College of Rheumatology) [American College of Surgeons Membership Directory](#) (American College of Surgeons) [American Osteopathic Association D.O. Database](#) (American Osteopathic Association) [ASGE: Find a Doctor](#) (American Society for Gastrointestinal Endoscopy) [Cancer Genetics Services Directory](#) (National Cancer Institute) [Child and Adolescent Psychiatrist Finder](#) (American Academy of Child and Adolescent Psychiatry) [Dystonia: Find a Health Care Professional](#) (Dystonia Medical Research Foundation) [Expert Locator: Immunologists](#) (Jeffrey Modell Foundation) [Find a Dermatologic Surgeon](#) (American Society for Dermatologic Surgery) [Find a Dermatologist](#) (American Academy of Dermatology) [Find a Gastroenterologist](#) (American College of Gastroenterology) [Find a Gynecologic Oncologist](#) (Society of Gynecologic Oncologists) [Find a Hand Surgeon](#) (American Society for Surgery of the Hand) [Find a Hematologist](#) (American Society of Hematology) [Find a Neurologist](#) (American Academy of Neurology) [Find a Pediatric Dentist](#) (American Academy of Pediatric Dentistry) [Find a Pediatrician or Pediatric Specialist](#) (American Academy of Pediatrics) [Find a Periodontist](#) (American Academy of Periodontology) [Find a Physical Medicine & Rehabilitation Physician](#) (American Academy of Physical Medicine and Rehabilitation) [Find a Plastic Surgeon](#) (American Society of Plastic Surgeons) [Find a Podiatrist](#) (American Podiatric Medical Association) [Find a Thyroid Specialist](#) (American Thyroid Association) [Find a Urologist](#) (American Urological Association) [Find an ACFAS Physician](#) (American College of Foot and Ankle Surgeons) [Find an Allergist/Immunologist: Search](#) (American Academy of Allergy, Asthma, and Immunology) [Find an Endocrinologist](#) (Hormone Health Network) [Find an Eye M.D.](#) (American Academy of Ophthalmology) [Find an Interventional Radiologist](#) (Society of Interventional Radiology) [Find an Oncologist](#) (American Society of Clinical Oncology) [Find an Oral and Maxillofacial Surgeon](#) (American Association of Oral and Maxillofacial Surgeons) [Find an Orthopaedic Foot and Ankle MD](#) (American Orthopaedic Foot and Ankle Society) [Find an Otolaryngologist \(ENT\)](#) (American Academy of Otolaryngology--Head and Neck Surgery) [Finding an Eye Care Professional](#) (National Eye Institute) [GI Locator Service](#) (American Gastroenterological Association)

Other Healthcare Providers

[AMTA's Find a Massage Therapist](#) (American Massage Therapy Association) [Cancer Genetics Services Directory](#) (National Cancer Institute) [Find a Diabetes Educator](#) (American Association of Diabetes Educators) [Find a Genetic Counselor](#) (National Society of Genetic Counselors) [Find a Midwife](#) (American College of Nurse-Midwives) [Find a Nurse Practitioner](#) (American Academy of Nurse Practitioners) [Find a Physical Therapist](#) (American Physical Therapy Association) [Find a Professional: Online Directory of Audiology and Speech-Language Pathology Programs](#) (American Speech-Language-Hearing Association) [Find a Registered Dietitian](#) (Academy of Nutrition and Dietetics) [Find a Therapist](#) (Anxiety Disorders Association of America) [Find an Audiologist](#) (American Academy of Audiology) [Manual Lymphatic Drainage Therapists](#) (National Lymphedema Network) [National Register of Health Service Providers in Psychology](#) (National Register of Health Service Providers in Psychology) [NCCAOM: Find Nationally Certified Practitioners](#) (National Certification Commission for Acupuncture and Oriental Medicine) [Search for an Emergency Contraception Provider in the United States](#) (Princeton University, Office of Population Research)

Hospitals and Clinics--Specialized

[Accredited Birth Centers](#) (Commission for the Accreditation of Birth Centers) [Alzheimer's Disease Research Centers](#) (National Institute on Aging) [Cystic Fibrosis Foundation: Find a Chapter](#) (Cystic Fibrosis Foundation) [Cystic Fibrosis Foundation: Find an Accredited Care Center](#) (Cystic Fibrosis Foundation) [Dialysis Facility Compare](#) (Centers for Medicare & Medicaid Services) [FDA Certified Mammography Facilities](#) (Food and Drug Administration) [Find a Free Clinic](#) (National Association of Free Clinics) [Find an Indian Health Service Facility](#) (Indian Health Service) [Find Treatment Centers](#) (American Cancer Society) [Genetics Clinic Directory Search](#) (University of Washington) [Locate a Sleep Center in the United States by Zip Code](#) (American Academy of Sleep Medicine) [MDA ALS Centers](#) (Muscular Dystrophy Association) [Mental Health Services Locator](#) (Substance Abuse and Mental Health Services Administration) [NCI Designated Cancer Centers](#) (National Cancer Institute) [Neurofibromatosis Specialists](#) (Children's Tumor Foundation) [Post-Polio Directory 2011: Post-Polio Clinics, Health Professionals, Support Groups](#) (Post-Polio Health International including International Ventilator Users Network) [Spina Bifida Clinic Directory](#) (Spina Bifida Association of America) [Substance Abuse Treatment Facility Locator](#) (Substance Abuse and Mental Health Services Administration) [Transplant Center Search Form](#) (BMT InfoNet) [U.S. NMDP Transplant Centers](#) (National Marrow Donor Program) [VA Health Care Facilities Locator & Directory](#) (Veterans Health Administration) [Where to Donate Blood](#) (AABB) [Where to Donate Cord Blood](#) (National Marrow Donor Program)

Other Healthcare Facilities and Services

[Alzheimer's Disease Resource Locator](#) (Fisher Center for Alzheimer's Research Foundation) [American College of Radiology Accredited Facility Search](#) (American College of Radiology) [APA District Branch / State Association Directory](#) (American Psychiatric Association) [Directory of Organizations \(Deafness and Communication Disorders\)](#) (National Institute on Deafness and Other Communication Disorders) [Dog Guide Schools in the United States](#) (American Foundation for the Blind) [Eldercare Locator](#) (Dept. of Health and Human Services) [Find a Hospice or Palliative Care Program](#) (National Hospice and Palliative Care Organization) [Find Services \(for People with Vision Loss\)](#) (American Foundation for the Blind) [Find Urgent Care Centers by State](#) (Urgent Care Association of America) [Genetic Testing Laboratory Directory](#) (University of Washington) [Home Health Compare](#) (Centers for Medicare & Medicaid Services) [Medicare: Helpful Contacts](#) (Centers for Medicare & Medicaid Services) [Muscular Dystrophy Association Clinics and Services](#) (Muscular Dystrophy Association) [National Foster Care and Adoption Directory Search](#) (Children's Bureau) [Nursing Home Compare](#) (Centers for Medicare & Medicaid Services) [Organizations That Offer Support Services](#) (National Cancer Institute) [Poison Control Centers](#) (American Association of Poison Control Centers) [Resources and Information for Parents about Braille](#) (American Foundation for the Blind) [State-Based Physical Activity Program Directory](#) (Centers for Disease Control and Prevention) [TSA Chapters in the USA](#) (Tourette Syndrome Association) [Violence against Women: Resources by State](#) (Dept. of Health and Human Services, Office on Women's Health) [Where to Find Hair Loss Accessories and Breast Cancer Products](#) (American Cancer Society)

SOURCE: MedlinePlus provides links to directories to help you find libraries, health professionals, services and facilities. National Library of Medicine (NLM) does not endorse or recommend the organizations that produce these directories, nor the individuals or organizations that are included in the directories.

V. Detail Exhibits

[VVV Consultants LLC]

a.) Patient Origin Source Files

[VVV Consultants LLC]

Patient Origin History – Years 2021- 2023

Pawnee County, Kansas Residents				
#	Inpatients - KHA HIDI	FFY23	FFY22	FFY21
	Total	661	749	742
1	Pawnee Valley Community Hospital - Larned, KS	163	208	192
	% Patients Receiving Care in Home County	24.7%	27.8%	25.9%
2	HaysMed - Hays, KS	183	179	193
3	The University of Kansas Health System Great Bend Ca	79	102	114
4	The University of Kansas Health System - Kansas City, K	25	49	45
5	Wesley Healthcare - Wichita, KS	45	42	32
6	Ascension Via Christi Hospitals Wichita, Inc.- KS	34	31	43
7	Clara Barton Medical Center - Hoisington, KS	22	29	25
8	Hutchinson Regional Medical Center - Hutchinson, KS	23	25	21
9	Salina Regional Health Center - Salina, KS	19	16	17
10	Pratt Regional Medical Center - Pratt, KS	22	16	12
	Others	46	52	48

Pawnee County, Kansas Residents				
#	Outpatients - KHA HIDI	FFY23	FFY22	FFY21
	Total	17,334	18,329	17,073
1	Pawnee Valley Community Hospital - Larned, KS	12,225	12,758	12,035
	% Patients Receiving Care in Home County	70.5%	69.6%	70.5%
2	The University of Kansas Health System Great Bend Ca	1,831	2,117	1,960
3	HaysMed - Hays, KS	1,116	1,185	1,069
4	Clara Barton Medical Center - Hoisington, KS	619	616	435
5	Edwards County Medical Center - Kinsley, KS	300	394	330
6	The University of Kansas Health System - Kansas City,	213	282	286
7	Hodgeman County Health Center - Jetmore, KS	172	181	195
8	Hutchinson Regional Medical Center - Hutchinson, KS	100	85	87
9	Salina Regional Health Center - Salina, KS	74	81	71
10	Wesley Healthcare - Wichita, KS	78	76	69
11	Children's Mercy Kansas City - Kansas City, MO	80	69	66
12	Rush County Memorial Hospital - La Crosse, KS	80	67	57
13	Ascension Via Christi Hospitals Wichita, Inc., KS	46	66	53
	Others	400	352	360

Pawnee County, Kansas Residents				
#	Emergency - KHA HIDI	FFY23	FFY22	FFY21
	Total	2958	3013	2734
1	Pawnee Valley Community Hospital - Larned, K	2,322	2,327	2,111
	% Patients Receiving Care in Home County	78.5%	77.2%	77.2%
2	The University of Kansas Health System Great Bend	258	278	252
3	HaysMed - Hays, KS	120	140	134
4	Clara Barton Medical Center - Hoisington, KS	44	54	39
5	Edwards County Medical Center - Kinsley, KS	17	32	34
6	Wesley Healthcare - Wichita, KS	22	34	26
7	Ascension Via Christi Hospitals Wichita, Inc. - KS	23	25	13
8	Hutchinson Regional Medical Center - Hutchinson,	18	13	20
9	Hodgeman County Health Center - Jetmore, KS	16	11	23
10	Salina Regional Health Center - Salina, KS	21	12	13
11	The University of Kansas Health System - Kansas C	8	9	7
12	Centura St. Catherine Hospital - Dodge City - Dodge	9	4	8
13	Pratt Regional Medical Center - Pratt, KS	6	4	5
	Others	73	69	48

b.) Town Hall Attendees, Notes, & Feedback

[VVV Consultants LLC]

Attendance Pawnee Co, KS CHNA Town Hall 2/22/24 11:30-1pm N=35

#	Table	Lead	Attend	Last	First	Organization
1	A	xx	1	Madrid	Jose	Pawnee Valley Community Hospital
2	A		1	Demel	Cindy	
3	A		1	King	Scott	Pawnee County Sheriffs Office
4	A		1	Lessard	Sharon	Fusion Bank
5	B	xx	1	Filbert	Alex	Larned Area Chamber of Commerce
6	B	xx	1	Urban	Melanie	Pawnee Valley Community Hospital
7	B		1	Middleton	William	Heart of Kansas Family Health Care, Inc.
8	B		1	Sanchez	Giselle	Center for Counseling & Consultation
9	C	xx	1	Hoberecht	Cheryl	Pawnee County Health Department
10	C		1	Burton	Cindy	Pawnee Valley Community Hospital
11	C		1	Herrman	Leonard	Pawnee Valley Community Hospital
12	C		1	Spina	Vicki	PVCH Foundation
13	C		1	Tabler	Judi	Tiller and Toiler
14	D	xx	1	Davis	Jewel	Pawnee Valley Comm Hosp Fam Med
15	D	xx	1	Hearn	Antonio	Larned Police Department
16	D		1	Fischer	Del	Clock Realty and Insurance LLC
17	D		1	Thacker	Cody	Pawnee Valley Comm Hosp Foundation
18	E	xx	1	Burdett	Mike	Pawnee County Commission
19	E	xx	1	Dinkel	Lindsey	Larned State Hospital
20	E		1	Kidd	Lucky	Ad Astra Radio (KLQR/KGBK)
21	E		1	Owings	Charell	United Way of Central Kansas
22	F	xx	1	Barnes	Kim	Pawnee county coop city Larned
23	F		1	Atteberry	Dana	Country Living of Larned
24	F		1	Jecha	Kara	GBT
25	F		1	Reimer	Arlo	PVCH
26	F		1	Schartz	Lisa	Picket Fence RE
27	F		1	Spina	Charles	Danica Photo
28	G	xx	1	Kramp	Julie	Center for Counseling and Consultation
29	G		1	Gore	Wayne	LSCF
30	G		1	Lawson	Doug	Assistant Superintendent
31	G		1	Slattery	Shannon	PFAC
32	G		1	Veach	Shae	Haysmed
33	H	xx	1	Dupuis	Sabra	Pawnee County Health Department
34	H		1	Eilts	Brad	
35	H		1	Gilmore	Mike	News

Pawnee Valley Community Hospital Town Hall Event Notes

Date: 2/22/2024 – 11:30 p.m. to 1:00 p.m. Attendance: N=35

INTRO: Overview of community conversation during CHNA 2024 Town Hall

- Spanish is the other spoken language in the County.
- Hospital (PVMH) is accepting VA insurance.
- Backpacks (food) are going home with students in need in the schools.
- Schools are doing a decent job with school health/screenings (1 Elementary School nurse, 1 MS & 1 more part-time)
- Maternity/Labor & Delivery is going to Hays, Great Bend, Pratt, and Hutchinson.
- The community doesn't think the provider norms are correct. It's too low / there is a great need for providers.
- The underserved area that comes out of Topeka- changing PCP accuracy of #s.
- Community thinks County is higher than 19% for depression.
- Community is worried about meth, fentanyl, marijuana, & opioids.
- The community is worried about alcohol consumption.
- School Attendance is a problem in the community.
- Community goes to walking tracks, fitness center at High School

What is coming/occurring that will affect health of community:

- Sustainability of rural healthcare
- Immigration
- Insurance Coverage for dentists/need more Dentists.
- Election year

Things going well for healthcare in the community:

- We have 3 family medicine clinics.
- Has good collaboration with EMT, fire, and
- Have a thriving hospital in the hospital county- is paid for.
- Access to recreation and exercise
- Cost of living is good.
- Nursing Homes- quality and affordable
- Childcare Committee-improving childcare
- Has several internet providers-good connection
- Has mental health services / crisis available
- Opioid dispense is minimal.
- School has increased programs that foster parent involvement – including families in school health. Teaching life skills
- Community involvement
- Quality Health Dept
- The health fair is twice a year.
- State Hospital- continuing education

Community health areas we need to change/ and or improve:

- Access to Grocery Stores / Healthy Foods
- Access to Health Insurance
- Air Quality
- Childcare (Accessible & Affordable)
- Dental Care (Dentists)
- Health Education (Chronic/Prevention)
- Mental Health
- Obesity (Exercise & Nutrition)
- Physical activities for adults
- Physician Recruitment (Primary Care-MD, DO)
- School Attendance
- Sidewalk Improvements
- Specialty Care (ONC, Ortho, CV,GYN, EMT, Nep, Derm)
- Substance Abuse (Drugs & Alcohol)
- Teen Pregnancy/Family Planning
- Transportation (General)
- Youth Activities

Round #5 CHNA - Pawnee Co KS PSA

Town Hall Conversation - Strengths (Big White Cards) N=29

Card #	What are the strengths of our community that contribute to health?	Card #	What are the strengths of our community that contribute to health?
1	911 & Ambulance Services.	17	Fitness/ exercise availability.
7	Access to exercise.	18	FQHC.
19	Access to fitness.	10	Good doctors - general practitioners.
28	Access to food.	26	Good number of mid level providers.
7	Access to primary care providers.	24	Good pre-natal.
8	Access to providers.	20	Good schools.
28	Access to recreation center + exercise.	5	Great ER.
14	Access to specialty care.	6	Having a Hospital.
28	Ambulance + EP wait times/ care.	2	Health Care employment security.
5	Ambulance service/ Emt.	24	Health center - exercise options.
3	Ambulance.	29	Health department + hospital pro active.
24	Ambulance.	7	Health department quality.
21	Assisted living/ care home options.	6	Health department.
22	Availability of recreation (walkable).	8	Health department.
26	Better school programs.	17	Health department.
2	Business Cozen involvement.	20	Health department.
10	Business.	4	Health fair.
2	Caring community	20	Heart of Kansas (Mental health).
6	Child care committee.	15	High satisfaction.
27	Child care.	24	Hospital - debt free.
16	Childcare committee.	2	Hospital - EMS.
24	Childcare committee.	26	Hospital - in county.
29	Church involvement.	1	Hospital Facilities.
8	Clean air.	27	Hospital financially strong.
14	Clinic.	16	Hospital paid for.
13	Community activities increasing.	18	Hospital.
14	Community coming together to make a difference.	25	Hospital.
18	Community involvement.	10	Housing - rentals.
21	Community involvement.	23	Housing options are improving.
22	Community involvement.	7	Housing to buy.
15	Community oriented.	16	Improving providers (healthcare).
10	Community support - challenges.	26	Increase in local; mental health providers.
5	Community support.	26	Increased opportunity for exercise.
7	Community support.	1	Internet Access.
19	Cost of living.	7	Jobs - through many may be lower income.
9	County Health department.	10	Jobs.
19	County Health department.	6	Life skill teaching classes.
11	Crisis screening.	5	Local Hospital Care.
9	Critical access hospital.	8	Local Hospital.
21	Critical care hospital available.	19	Medical care access/ LTI care.
16	Educated services.	3	Medical Care.
13	Education services.	21	Medical transport available.
3	Education.	27	Mental health crisis screening.
6	Elderly care.	11	Mental health services being offered in Pawnee county.
29	ELI.	29	MLT in jail program.
1	Emergency care.	23	Multiple options for exercise and activities.
8	Emergency services.	23	Number of providers (health care).
19	EMS & collaborators.	7	Nursing homes quality.
9	EMS county service.	23	Opioid dispense has decreased.
6	EMS department.	13	Outpatient - medical services.
12	EMS has adequate equipment + well trained staff.	1	Overall Community support.
22	EMS is top-notch.	20	Physical (access to Px).
27	EMS service.	20	Providers.
13	EMS services.	12	Public health care is involved + provides a lot.
14	EMS services.	18	Public health.
25	EMS, fire, law enforcement.	22	PVCH provides great service.
17	EMS.	16	Quality public health.
20	EMS.	1	School & Educational support.
23	EMT response and ER wait time.	28	School nurse program.
29	Engages Schools.	6	Schools - Free lunches/ Summer buddies.
24	ER services.	15	Short Er wait times.
7	ER.	22	Small town living (slower pace, friendly).
14	ER.	2	Special Services - Trend Dr.
3	Exercise Accessibility.	26	Strong EMS.
27	Exercise facility.	29	The new group that is addressing needs - PCCAYC.
3	Fiber broadband internet availability	4	Up to date facility.
19	Fiber connection.	17	Working to improve childcare.
16	Fiber throughout county.	19	Youth committee/ parent life training.
4	Fitness center.		

Round #5 CHNA - Pawnee Co KS PSA

Town Hall Conversation - Weaknesses (Color Cards) N=32

Card #	Weaknesses of our community that contribute to health?	Card #	Weaknesses of our community that contribute to health?
1	Air Quality/Feed lot.	16	Look at sidewalk especially to school.
10	Access.	27	Primary Care
5	Affordable housing.	21	Transportation.
5	Air + Water Quality.	21	Childcare.
3	Air Quality.	19	Doctors - Specialties, Oncology.
6	Air Quality.	22	Child neglect.
11	Attract & maintain primary care physically.	28	Increase access to Mental Health + more providers
1	Availability of citizens to mentor kids.	17	Access to Specialty Care.
14	Availability of mental health care.	30	Dental.
2	Bring in a Dentist.	18	Mental health.
2	Bring in an Eye Dr.	19	Mental health providers.
12	Change college admissions.	29	Dental care.
15	Child care centers.	31	Smoking ed.
5	Child care.	21	Mental Health Access.
7	Childcare	22	More help for core services.
14	Childcare.	30	Substance abuse.
9	Community resource portal.	27	Poverty.
2	Cont. to work on childcare.	19	Drug Rehab.
9	Correlation poverty rates/ALICE data amt w/o hospital	27	Obesity + diabetes.
3	Cost of Health Care + Insurance Expenses.	19	Health Education.
14	Domestic violence due to poverty, drugs, alcohol.	31	Physician recruitment/retention.
5	Drug abuse.	22	Opioid awareness.
15	Drug problem/challenge.	31	Drug/Alcohol.
9	Drug/ Alcohol prevention.	27	Senior services.
4	Drugs.	20	Transportation.
2	Educate on lowering drug abuse and alcohol.	17	Drug problem.
4	Employment/ Staffing.	20	Price for specialty services.
7	Family dynamics.	24	Increase services available to the county - Mental Health
1	Good healthy food.	17	Mental Health Services.
10	Health Activities/ Awareness/ Ed.	27	Sidewalks to school.
1	Health Education.	16	Transportation.
7	Health Education.	25	More long-term providers.
7	Health insurance.	24	Increase access to SU treatment.
10	Healthy Foods.	27	Childcare.
13	Housing - Rentals.	30	Mental health services.
7	Housing needs.	24	Telemedicine (Telehealth mental health services).
15	Improvements - Sidewalks around school.	32	Quality housing.
3	Keep Health Providers in county.	19	Alcohol.
2	Lowering obesity and smoking.	17	Access to Child Care.
12	Lowering poverty (financial planning).	28	Cancel care - access.
13	Mental health providers.	30	Poverty.
15	Mental health services.	31	Behavioral health access.
1	More counseling for addiction.	16	Lowering obesity.
9	More mental health professionals + services.	26	Health education.
7	More mental health services.	25	More available & reliable childcare.
6	Need more childcare.	22	Depression + Mental Health awareness.
11	Nursing/ CDN/ CNA staff.	28	Including substance use providers.
12	Nutrition, Nutrition, Nutrition.	28	Obesity - Food scarcity/ quality.
9	Nutrition/ Obesity.	27	Mental health services.
4	Obesity Education	20	Childcare - Pre-school.
1	Obesity is a severe problem.	16	Lowering ATOD use.
7	Obesity.	25	Obesity.
15	Obesity.	32	Access to specialists.
13	Obesity/ Diabetes.	30	Sidewalks.
7	Poverty fight.	22	Community interest.
8	Poverty.	26	Access to SUD care
15	Poverty.	32	More nursing staff.
12	Prevent addiction early.	30	Childcare.
4	Primary care providers (M.D./ D.O.)	20	Youth Activities.
6	Programs for mental health, Depression & Suicide.	22	Suicide prevention.
2	Promote mammography.	18	Getting Providers.
2	Promote Specialty cares via zoom.	18	Childcare.
15	Provides - primary care modo.	32	More options for PCP.
2	Recruit Physicians x 2.	17	Community Activity.
6	Reduce teen pregnancy.	22	Poverty level.
10	Safe walking + biking.	27	Physicians + Specialty care (49%)
12	School attendance.	29	Cardiology providers.
8	School work attendance.	26	Access to Dental Care
7	Sidewalk / Trails.	25	School attendance / youth.
3	Sidewalks to/from the elementary.	19	Rentals.
7	Silos w/in community.	23	Therefore help to school staffs.
7	Social Capital lack social media gamesmanship.	23	Basic needs of students.
3	Specialty Care services: Unc Cardio Ortho EMT, OBGYN.	19	Childcare.
13	Substance use providers.	30	Chronic care.
4	Suicide and mental health.	20	Specialty Doctors.
7	Teen Pregnancy.	25	Even more mental health.
15	Telemedicine.	32	City funded exercise facility.
13	Water quality - air.	30	Specialists (OB, ENT, ORTHO, DERM, CARD, ONC).

Round #5 CHNA - Pawnee Co KS (PSA)

Social Determinants "A" Cards (21) 59 coded: E=19, P=12, N=10, C=10, ED=5 & F=3.

The social determinants of health



Card #	Code	First Impressions on Social Determinants Impacting Delivery	Card #	Code	First Impressions on Social Determinants Impacting Delivery
18	C	Air quality is low for the city	19	ED	Attendance at school.
19	C	Adults: help with learning to cook, do domestic chores.	17	ED / N	ES - C , Education - D, Health - A, Neighborhood B, Mental Health D.
3	C	Improve communication of available services	18	ED	Education is pretty good
17	C	Senior Transportation to appts.	20	ED	Education - housing - employment.
4	C	Social Determinants - Average	6	F	Diabetes - Obesity
13	C	Solid Community - Community oriented	20	F	Obesity.
20	C	Substance use.	19	F / C	Obesity, excessive drinking.
20	C	Suicide.	15	N	Assist home owners, elderly with maintenance
6	C	Youth School Attendance Childcare	4	N	Care for seniors
10	E	Childcare	15	N	abandoned degenerating homes
12	E	Childcare	11	P / E	Good range of services available to everyone, all ages and economics.
19	E	Childcare centers needed.	15	N	Too many home deteriorating
4	E	Childcare needs	6	N	Transportation
14	E	Childcare*	14	N	Transportation
16	E	Daycare	6	N / E	Unmet MH, ATOD, Poverty
6	P	Dental			
5	E	Economic Stability - Inflation	18	P	Depression + Suicide
7	E	More Childcare.	20	P	Depression.
18	E	Need more child care	18	P	Healthcare - access is limited
12	E	Persons in poverty	5	P	Mental Health - Self worth + Positive
20	E	Poverty - lack of jobs/ pay care.	6	P	mental health services
19	E	Poverty, better food bank.	7	P	More depression + Suicide awareness.
20	E	SDOH- Poverty (Free/Reduced lunch	18	P	Need more doctors - facility practioner
14	E	Uninsured	19	p	Need providers MD's.
15	E	Child care	15	P	Specialized providers
1	E / N	Childcare and housing is lacking*	12	P	We need providers
2	E / N	Lower income, need mental health (depression) (suicides) (drugs), elderly, price of food power takes, childcare, cancer, cost of insurance/med bills.	13	N	Housing (Elderly), Mental Health (Depression), Food Insecurity, Vaping/ Smoking, Childcare, Physical Health, Poverty, Transportation
10	ED	Assistance to schools, basic needs + mental health students.	18	E	Economic Stability - Big raises for LSH + LSCF, many school kids are on reduced or free meals up 50%.

Email Request: Cut & Paste into your email blind cc to community roster emails.

From: Melanie Urban, Administrator

Date: 12/11/2023

To: Community Leaders, Providers and Hospital Board and Staff

Subject: CHNA Round #5 Online Survey 2024

Pawnee Valley Community Hospital will be partnering with other community health providers to update the 2021 Community Health Needs Assessment (CHNA) for Pawnee County, KS

Your feedback and suggestions regarding community health delivery are especially important to collect to be able to complete the 2024 Community Health Needs Assessment and implementation plan updates. Our facility has again contracted VVV Consultants for the 5th round since 2012 to diligently and efficiently complete this work over the next few months.

To accomplish this work, a short online survey has been developed. Please utilize the link below to complete this survey.

LINK: https://www.surveymonkey.com/r/CHNA2024_PawneeValley_OnlineSurvey

This online survey is due and must be completed by **January 19th, 2024**. All responses are confidential.

Please **hold the date** for a community Town Hall event scheduled for **Thursday, February 22nd, 2024 for lunch from 11:30am-1pm**. All Community members are encouraged and invited to attend. Please stay on the lookout as more details on this will be coming soon!

Thank you in advance for your time and support in participating with this important request. If you have any questions please call (620) 285-3161

PVCH to host Community Health Needs Assessment



Great Bend Tribune Published: Dec 14, 2023

LARNED – Over the next few months, Pawnee Valley Community Hospital will be working together with other area community leaders to update the Pawnee County 2024 Community Health Needs Assessment (CHNA). PVCH is requesting Pawnee County community members' input regarding current healthcare delivery and unmet resident needs.

The goal of this assessment update is to understand progress from past community health needs assessments conducted in 2021, 2018, and 2015, while collecting up-to-date community health perceptions and ideas. VVV Consultants LLC, an independent research firm from Olathe, has been retained to conduct this countywide research.

A brief community survey has been developed to accomplish this work. The CHNA survey link can be accessed by visiting the Pawnee Valley Hospital website and/or Facebook page.

All community residents and business leaders are encouraged to complete this online survey by Jan. 19, 2024. In addition, a CHNA town hall meeting to discuss the survey findings and identify unmet needs will be held from 11 a.m.-1:30 p.m. on Thursday, Feb. 22, 2024.

If one has any questions regarding CHNA activities, call 620-285-8842.

PR#1 News Release

Local Contact: Melanie Urban, Admin

Media Release: 12/11/2023

2024 Community Health Needs Assessment to be Hosted by Pawnee Valley Community Hospital

Over the next few months, **Pawnee Valley Community Hospital** will be working together with other area community leaders to update the Pawnee County, KS 2024 Community Health Needs Assessment (CHNA). Today we are requesting Pawnee County community members' input regarding current healthcare delivery and unmet resident needs.

The goal of this assessment update is to understand progress from past community health needs assessments conducted in 2021, 2018 and 2015, while collecting up-to-date community health perceptions and ideas. VVV Consultants LLC, an independent research firm from Olathe, KS has been retained to conduct this countywide research.

A brief community survey has been developed to accomplish this work. <Note: The CHNA survey link can be accessed by visiting Pawnee Valley Hospital website and/or Facebook page. You may also utilize the QR code below for quick access.



All community residents and business leaders are encouraged to complete this online survey by **January 19th, 2024**. In addition, a CHNA Town Hall meeting to discuss the survey findings and identify unmet needs will be held on **Thursday, February 22nd 2024 for lunch from 11am-1:30pm**. More info to come soon! Thank you in advance for your time and support!

If you have any questions regarding CHNA activities, please call (620) 285-3161



PAWNEE VALLEY
COMMUNITY HOSPITAL
A HAYSMED PARTNER

We would like to hear from you!
Please access the health needs survey from our website, above, or just scan the QR code using your mobile device. Thank you!



PAWNEE VALLEY
COMMUNITY HOSPITAL
A HAYSMED PARTNER

923 Carroll Avenue
Larned, KS 67550
www.pawneevalleyhospital.com



Pawnee Valley Community Hospital is conducting our 2024 Community Health Needs Assessment.

Please take this survey to help us assess the health needs in our community.

Your voice matters!

EMAIL #2 Request Message

From: Melanie Urban

Date: 1/22/24

To: Area Community Leaders, Providers and Hospital Board & Staff

Subject: Pawnee County Community Health Needs Assessment Town Hall lunch– February 22,2024

Pawnee Valley Community Hospital will host a Town Hall Community Health Needs Assessment (CHNA) luncheon on Thursday February 22nd. The purpose of this meeting will be to review collected community health indicators and gather community feedback opinions on key unmet health needs for Pawnee, KS. **Note: This event will be held on Thursday, February 22nd from 11:30 a.m. - 1:00 p.m. at Glory Be in Larned, KS with check-in starting at 11:15am.**

We hope you find the time to attend this important event. All business leaders and residents are encouraged to join us. To adequately prepare for this event, it is imperative all RSVP who plan to attend town hall.

LINK: <https://www.surveymonkey.com/r/PawneeTownHallRSVP>



Thanks in advance for your time and support!

If you have any questions regarding CHNA activities, please call (620) 285-3161.

Join Pawnee Valley Community Hospital's CHNA Town Hall Thursday, February 22, 2024.

Media Release: 01/22/24

To gauge the overall community health needs of residents, **Pawnee Valley Community Hospital**, in conjunction with other area providers, invites the public to participate in a Community Health Needs Assessment Town Hall roundtable on Thursday, **February 22nd for lunch from 11:30 a.m. to 1:00 p.m.** located at the **Glory BE, 623 Broadway, Larned, KS.**

This event is being held to identify and prioritize the community health needs. Findings from this community discussion will also serve to fulfill both federal and state mandates.

To adequately prepare for this event, is vital everyone planning to attend this event RSVPs. Please visit our hospital website and social media sites to obtain the link to complete your RSVP OR please utilize the QR code below.



We hope that you will be able to join us for this discussion on February 22nd. Thanks in advance for your time and support!

If you have any questions about CHNA activities, please call (620) 285-3161.

###

d.) Primary Research Detail

[VVV Consultants LLC]

CHNA 2024 Community Feedback: Pawnee County, KS (N=118)

ID	Zip	Rating	c1	c2	c3	Q10. Being this a strong topic of interest, do you have any thoughts, ideas, and/or specific suggestions (food, housing, transportation, support, etc.) to address these 5 social determinants to improve our community health? (Please Be Specific)
1082	67550	Very Good	ACC	SERV	EDU	I feel like we have access to most everything, in order to receive services sometimes you have to ask. Continually educating those who are willing to learn continue to benefit our community.
1097	67550	Very Good	CC			The community is in need of childcare services, so the families can work.
1059	67550	Average	CLIN	TRAV	INSU	Having urgent care and/or telehealth options would help address needs that would help the patient not have to travel out of town to have certain needs met. Also, there is a perception that possible excessive testing is ordered when it is thought that a patient's insurance will cover the testing. Often there are high deductibles that have to be met by the patient before insurance assumes responsibility.
1081	67550	Poor	DOCS	RET	APP	Actively RECRUIT primary care PHYSICIANS and INCENTIVIZE their PERMANENT location here.
1032	67550	Average	DOCS	RET		We need continuity of providers who have the flexibility to look for reasons rather than merely treat symptoms.
1028	67550	Good	DOH	NUTR	MH	I think that a health care fair within our community would greatly benefit but make it fun and appealing to all age groups. Maybe have dillions sponsor things about nutrition or making healthier food swaps. Having PVCH associates come and talk about disease management and have someone from Hays talk about mental health or even pediatric or specialty care
1035	67530	Average	ECON	WAG	CC	Starting with jobs that offer a living wage and having adequate childcare is fundamental to economic stability.
1058	67550	Average	ECON	WAG		There is jobs available in this community, however, people need to adjust pay wages so people can afford to work instead of living off the government. People can't afford to work and pay daycare if they don't make enough money. Pawnee Valley Hospital and Clinic needs to increase pay for employees
1053	67550	Very Good	EDU	ALT	NUTR	Improve education holistic health....food as medicine.
1087	67550	Good	GOV	SPRT	REC	I think local government should be focusing on activity based programs such as walking trails, bicycle paths, etc. to aid in the development of personal health and exercise plans.
1093	67550	Poor	HOUS	CC	DRUG	lack of rentals and housing, lack of day care, community drug use
1073	67550	Very Good	HOUS	TRAN	CC	Housing, transportation and childcare are issues for our County.
1040	67550	Average	HOUS			need more housing in town
1033	67530	Good	INSU	EMER	RESO	It would be beneficial if Kansas expanded Kancare as it would help with any and all health concerns plus it would help financially as there would be less ER write offs the funding would also help locally because it would come from federal sources.
1038	67550	Good	NH	SCH	FEM	The Welcome Inn is very good about helping the elderly get to doctor appointments. There is a lack of health care for women at hospital and downtown.
1022	67550	Good	NH	TRAN	SCH	Elderly need more options for transportation to appointments, I recently learned that the welcome in cannot provide transportation to those in wheelchairs unless they have someone with them, if they had someone to go to appointments with them, they wouldn't need a ride. There is a lack of education opportunities for nutrition. Although we have access to healthy food, a large portion of the community don't know what is healthy or how to use it Lastly there is a lack of social support for all age groups. Social interaction is vital to mental health, particularly for the elderly, and there is no opportunities for social interactions for those who don't drive or are physically unable to garden or quilt or volunteer.
1016	67550	Good	NUTR	ECON		More good sit down restaurants not fast food
1079	67550	Good	OP	SERV		It would be helpful if more outpatient services were offered within the community to prevent patients from having to travel to other facilities.
1009	67550	Good	OWN			apathy
1094	67550	Good	REC	ACC		increase sidewalks in town to have more safe options for all ages
1050	67576	Good	TRAN	ACC	SCH	Maybe a day where a shuttle will go to and from places for appointments once a week.
1047	67550	Good	TRAN	ACC		Have the public transportation more readily available. It seems like it is hard to get them to answer
1051	67550	Good	TRAN	MH	STFF	Transportation is needed and we only have one service in town. More MH workers would be nice. It's hard for a lot of people to get clear to Hays or GBfor MH services.
1106	67550	Average	TRAN	SPEC	NH	More transportation options to go out of town to specialists, esp to those who can't drive or have transportation. We might also look at more senior housing or a retiree housing unit for all income levels. We can also use more home health care services so people can live in their homes longer.

CHNA 2024 Community Feedback: Pawnee County, KS (N=118)						
ID	Zip	Rating	c1	c2	c3	Q8. In your opinion, what are the root causes of "poor health" in our community? Other (Be Specific)
1025	67550	Average	ACC	DOCS	SCH	Hard to get in to see the doctor. Always full
1003	67550	Good	ADMIN			Hospital administration especially administrator
1032	67550	Average	DOCS	ACC		Lack of continuity of providers
1091	67550	Good	DRUG			Drugs
1093	67550	Poor	MANG			Poor management of the health care system
1101	67550	Average	OTHR			Feedlot
1048	67550	Good	OTHR			Noncompliance
1035	67530	Average	POV			Poverty
1022	67550	Good	QUAL	TRAV	SERV	People having had bad experiences at the hospital, so are unwilling to receive services there and therefor don't get services anywhere

CHNA 2024 Community Feedback: Pawnee County, KS (N=118)						
ID	Zip	Rating	c1	c2	c3	Q13. What "new" community health programs should be created to meet current community health needs?
1033	67530	Good	ADOL			Addressing youth concerns.
1044	67550	Very Good	CC	CLIN	HRS	More day care + a clinic could be open on Saturday mornings.
1050	67576	Good	CC	EDU		Childcare education
1097	67550	Very Good	CC	MH	DRUG	More childcare. More mental/drug abuse health programs.
1063	67550	Good	CLIN	NURSE		urgent care or a nurse hotline for patients to call.
1051	67550	Good	CLIN	SCH	CC	-Walk in services for non-emergency situations. -City daycare facility -increased MHS
1094	67550	Good	DOCS	SCH		actual doctors taking care of people when they wan to get in with a doctor
1047	67550	Good	DOH	PREV		More health fairs, maybe 4 a year
1075	67550	Good	DRUG	SH		Something to assist with the drugs in our community and most importantly, the schools.
1053	67550	Very Good	EDU	NUTR	PREV	Education on healthy eating
1079	67550	Good	EMS			Community Paramedicine
1052	67550	Good	ENDO	CANC	FEM	Endocrinology, Cancer services, Female Health
1113	67550	Average	FEM	CHRON		Women's health and chronic disease programs
1058	67550	Average	FEM	OBG	ONC	Bring in Womens Health (OBGYN) as a specialty to Pawnee Valley from HaysMed (they are a partner). Bring in oncology from HaysMed
1017	67550	Average	HH	HOSP		Home health and hospice care
1028	67550	Good	MH	AWARE	PEDS	Mental Health awareness/ coffee hour Pediatric Care Support groups such as AAA or others that can support those who are former or current addicts. Health fairs that encompass all ages not just the adult population.
1098		Good	MH	DRUG	EDU	Community mental health facility that also addresses substance abuse.
1117	67550	Average	MH	DRUG	THER	Mental Health programs, drug/alcohol programs such as therapy and treatment.
1093	67550	Poor	MH	DRUG		mental health, drug prevention and treatment
1064		Good	MH	OBG	ONC	Mental Health services, out reach clinics for OB and Oncology services.
1082	67550	Very Good	MH	STFF	TRAV	It would be great to find more mental healthcare providers, but unfortunately they're just aren't that many available. Even if you're willing to travel, it's hard to get established with them because they're so busy.
1019		Good	NO			i don't know because i never hear of any community health programs.
1016	67550	Good	NUTR	EDU		Healthy eating
1022	67550	Good	NUTR	EDU		Nutrition education
1038	67550	Good	ONC	DERM		Oncology and dermatology
1106	67550	Average	PHY	ACC		Add a pool to the physical therapy area to help patients with their treatment. That is badly needed.
1080	67529	Average	POD	ACC		Podiatrists, Dr.s who can treat neuropathy!
1081	67550	Poor	PRIM	DOCS	STFF	Family practice staffed with DOCTORS
1100	67550	Good	REC	FIT		An indoor walking track for people to use as well as an indoor swimming pool for year around use.
1032	67550	Average	RET	DOCS		retain good providers
1035	67530	Average	SPRT	QUAL		Maybe build up and support existing programs so that they can be sustainable and grow instead of looking at new programs
1087	67550	Good	SPRT	REC	FIT	Activity based programs, especially focusing on the outdoors and exercise.
1008	67550	Average	SPRT	RESO	NUTR	Need more programs or incentives for weight loss

Pawnee Valley Community Hospital (PVCH) area providers have begun the process of updating a comprehensive community-wide 2024 Community Health Needs Assessment (CHNA) to identify unmet health needs. To gather current area feedback, a short online survey has been created to evaluate current community health needs and delivery. NOTE: Please consider your answers to the survey questions as it relates to ALL healthcare services in our community, including but not limited to our local hospital.

While your participation is voluntary and confidential, all community input is valued. Thank you for your immediate attention! CHNA 2024 online feedback deadline is set for Jan 19, 2024.

1. In your opinion, how would you rate the "Overall Quality" of healthcare delivery in our community?

- Very Good
 Good
 Average
 Poor
 Very Poor

2. How would our community area residents rate each of the following health services?

	Very Good	Good	Fair	Poor	Very Poor
Ambulance Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chiropractors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dentists	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency Room	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eye Doctor/Optomtrist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family Planning Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Home Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospice/Palliative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Telehealth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. How would our community area residents rate each of the following health services?
(Continued)

	Very Good	Good	Fair	Poor	Very Poor
Inpatient Hospital Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nursing Home/Senior Living	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outpatient Hospital Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmacy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Primary Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Visiting Specialists	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. In your own words, what is the general perception of healthcare delivery for our community (i.e. hospitals, doctors, public health, etc.)? Be Specific.

5. In your opinion, are there healthcare services in our community/your neighborhood that you feel need to be improved, worked on and/or changed? (Please be specific)

6. From our past CHNA, a number of health needs were identified as priorities. Are any of these an ongoing problem for our community? Please select top three.

- | | |
|--|---|
| <input type="checkbox"/> Mental Health Services (Provider, Treatment, Aftercare) | <input type="checkbox"/> Awareness / Education of Healthcare Services |
| <input type="checkbox"/> Drug / Alcohol Abuse | <input type="checkbox"/> Nutrition - Healthy Food Options |
| <input type="checkbox"/> Air Quality | <input type="checkbox"/> Oncology / Cancer Treatment |
| <input type="checkbox"/> Poverty / Employment | <input type="checkbox"/> Womens Health |
| <input type="checkbox"/> Pediatric Care | <input type="checkbox"/> Home Health / Hospice |
| <input type="checkbox"/> Water Quality | <input type="checkbox"/> Exercise / Fitness Services |
| <input type="checkbox"/> Opioids | <input type="checkbox"/> Nursing Home / Senior Care |

7. Which past CHNA needs are NOW the "most pressing" for improvement? Please select top three.

- | | |
|--|---|
| <input type="checkbox"/> Mental Health Services (Provider, Treatment, Aftercare) | <input type="checkbox"/> Awareness / Education of Healthcare Services |
| <input type="checkbox"/> Drug / Alcohol Abuse | <input type="checkbox"/> Nutrition - Healthy Food Options |
| <input type="checkbox"/> Air Quality | <input type="checkbox"/> Oncology / Cancer Treatment |
| <input type="checkbox"/> Poverty / Employment | <input type="checkbox"/> Womens Health |
| <input type="checkbox"/> Pediatric Care | <input type="checkbox"/> Home Health / Hospice |
| <input type="checkbox"/> Water Quality | <input type="checkbox"/> Exercise / Fitness Services |
| <input type="checkbox"/> Opioids | <input type="checkbox"/> Nursing Home / Senior Care |

8. In your opinion, what are the root causes of "poor health" in our community? Please select top three.

- | | |
|--|--|
| <input type="checkbox"/> Chronic Disease Management | <input type="checkbox"/> Limited Access to Mental Health |
| <input type="checkbox"/> Lack of Health & Wellness | <input type="checkbox"/> Family Assistance Programs |
| <input type="checkbox"/> Lack of Nutrition / Access to Healthy Foods | <input type="checkbox"/> Lack of Health Insurance |
| <input type="checkbox"/> Lack of Exercise | <input type="checkbox"/> Neglect |
| <input type="checkbox"/> Limited Access to Primary Care | <input type="checkbox"/> Lack of Transportation |
| <input type="checkbox"/> Limited Access to Specialty Care | |

Other (Be Specific).

9. Community Health Readiness is vital. How would you rate each of the following?

	Very Good	Good	Fair	Poor	Very Poor
Behavioral/Mental Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency Preparedness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food and Nutrition Services/Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health Wellness Screenings/Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prenatal/Child Health Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance Use/Prevention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suicide Prevention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Violence/Abuse Prevention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Women's Wellness Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exercise Facilities / Walking Trails etc.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Social Determinants are impacting healthcare delivery. These determinants include 1) Education Access and Quality, 2) Economic Stability, 3) Social / Community support, 4) Neighborhood / Environment, and 5) Access to Quality Health Services. Being this a strong topic of interest, do you have any thoughts, ideas, and/or specific suggestions (food, housing, transportation, support, etc.) to address these 5 social determinants to improve our community health? (Please Be Specific)

11. Over the past 2 years, did you or someone in your household receive healthcare services outside of your county?

- Yes No

If yes, please specify the services received

12. Access to care is vital. Are there enough providers/staff available at the right times to care for you and your community?

- Yes No

If NO, please specify what is needed where. Be specific.



13. What "new" community health programs should be created to meet current community health needs?



14. Are there any other health needs (listed below) that need to be discussed further at our upcoming CHNA Town Hall meeting? Please select all that apply.

- | | | |
|---|--|--|
| <input type="checkbox"/> Abuse/Violence | <input type="checkbox"/> Health Literacy | <input type="checkbox"/> Poverty |
| <input type="checkbox"/> Access to Health Education | <input type="checkbox"/> Heart Disease | <input type="checkbox"/> Preventative Health/Wellness |
| <input type="checkbox"/> Alcohol | <input type="checkbox"/> Housing | <input type="checkbox"/> Sexually Transmitted Diseases |
| <input type="checkbox"/> Alternative Medicine | <input type="checkbox"/> Lack of Providers/Qualified Staff | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Behavioral/Mental Health | <input type="checkbox"/> Lead Exposure | <input type="checkbox"/> Teen Pregnancy |
| <input type="checkbox"/> Breastfeeding Friendly Workplace | <input type="checkbox"/> Neglect | <input type="checkbox"/> Telehealth |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Nutrition | <input type="checkbox"/> Tobacco Use |
| <input type="checkbox"/> Care Coordination | <input type="checkbox"/> Obesity | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Occupational Medicine | <input type="checkbox"/> Vaccinations |
| <input type="checkbox"/> Drugs/Substance Abuse | <input type="checkbox"/> Ozone (Air) | <input type="checkbox"/> Water Quality |
| <input type="checkbox"/> Family Planning | <input type="checkbox"/> Physical Exercise | |

Other (Please specify).



15. For reporting purposes, are you involved in or are you a....? Please select all that apply.

- | | | |
|--|--|--|
| <input type="checkbox"/> Business/Merchant | <input type="checkbox"/> EMS/Emergency | <input type="checkbox"/> Mental Health |
| <input type="checkbox"/> Community Board Member | <input type="checkbox"/> Farmer/Rancher | <input type="checkbox"/> Other Health Professional |
| <input type="checkbox"/> Case Manager/Discharge Planner | <input type="checkbox"/> Hospital | <input type="checkbox"/> Parent/Caregiver |
| <input type="checkbox"/> Clergy | <input type="checkbox"/> Health Department | <input type="checkbox"/> Pharmacy/Clinic |
| <input type="checkbox"/> College/University | <input type="checkbox"/> Housing/Builder | <input type="checkbox"/> Media (Paper/TV/Radio) |
| <input type="checkbox"/> Consumer Advocate | <input type="checkbox"/> Insurance | <input type="checkbox"/> Senior Care |
| <input type="checkbox"/> Dentist/Eye Doctor/Chiropractor | <input type="checkbox"/> Labor | <input type="checkbox"/> Teacher/School Admin |
| <input type="checkbox"/> Elected Official - City/County | <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Veteran |

Other (Please specify).



16. For reporting analysis, please enter 5-digit ZIP code. Thanks

e.) County Health Rankings & Roadmap Detail

[VVV Consultants LLC]

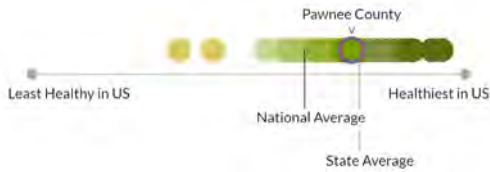
Pawnee County



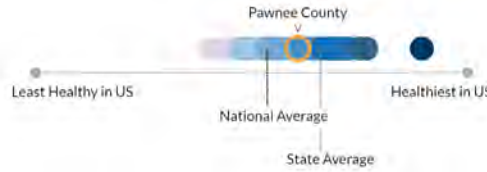
KANSAS HEALTH INSTITUTE

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Health Outcomes



Health Factors



khi.org
countyhealthrankings.org

Health Outcomes and Health Factors summaries replace the numerical ranking provided in previous years.

Each Kansas county with sufficient data is represented by a dot, placed on a continuum from least healthy to healthiest in the nation.

The color of each dot represents data-informed groupings of counties nationwide with similar Health Outcomes or Health Factors on the continuum.

Population: 6,179

	2020	2021	2022	2023	2024	Kansas 2024	U.S. 2024
Health Outcomes							
Length of life							
Premature death (years of potential life lost, per 100,000) ⁽¹⁾					7608	8079	7972
Quality of life							
% Reporting poor or fair health, adults ⁽¹⁾		18	18	15	15	14	14
Average number of poor physical health days, adults ⁽¹⁾		4	4	3	3.3	3.2	3.3
Average number of poor mental health days, adults ⁽¹⁾		4	4	4	4.8	5.0	4.8
% Low birthweight, <2,500 grams	9.1	8.5	8.9	8.9	9	7	8
Health Factors							
Health Behaviors							
% Smokers, adults ⁽¹⁾		21	19	21	19	16	15
% Obese, adults age 20 and older ⁽¹⁾			37	40	36	37	34
Food environment index, 0 (worst) to 10 (best)	8	7.9	7.9	7.6	7.4	7.1	7.7
% Physically inactive, adults age 20 and older ⁽¹⁾			30	26	26	23	23
% Access to exercise opportunities ⁽¹⁾				67	67	80	84
% Excessive drinking, adults ⁽¹⁾		19	20	20	18	20	18
% Driving deaths with alcohol-involvement	33	29	17	17	13	20	26
Sexually transmitted infection rate, per 100,000 population	150	180	140	140	192.8	506.1	495.5
Teen birth rate, per 1,000 females age 15-19 ⁽¹⁾					30	19	17
Clinical Care							
% Uninsured, population under age 65	9	8	9	9	10	11	10
Primary care physicians rate, per 100,000 population	105	107	109	94	96	78	75
Dentists rate, per 100,000 population	30	31	31	32	16	63	74
Mental health providers rate, per 100,000 population	610	608	628	594	566	237	314
Preventable hospital stays rate, per 100,000 Medicare enrollees	3344	3222	2079	983	2331	2576	2681
% Mammography screening, Medicare females age 65-74	27	28	26	29	35	48	43
% Flu vaccinations, Medicare enrollees	37	39	38	38	31	47	46
Social & Economic Factors							
% High school completion, adults age 25 and older ⁽²⁾		91	91	91	90	92	89
% With some college, adults age 25-44	53	55	51	50	46	71	68
% Unemployed, population age 16 and older	3.2	2.9	3.8	2.2	2.4	2.7	3.7
% Children in poverty	18	18	17	17	18	14	16
Income inequality ratio, 80th to 20th percentile	3.3	3.3	3.4	4	4.3	4.4	4.9
% Children in single-parent households	34	21	24	16	7	21	25
Membership associations rate, per 10,000 population	15	10.7	12.5	11	11.2	13.2	9.1
Injury death rate, per 100,000 population ⁽¹⁾					124	82	80
Physical Environment							
Average daily density of fine particulate matter ⁽³⁾	7.7	5.8	6.9	6.3	6.3	6.7	7.4
Drinking water violations?	No	No	No	No	No		
% Households with severe housing problems	7	8	4	5	8	12	17
% Driving alone to work	83	85	82	76	71	78	72
% Long commute - driving alone	11	11	9	8	13	22	36

Empty cells: Shaded cells indicate measures were omitted due to methodology change⁽¹⁾, new additions⁽²⁾, or are unavailable due to low reliability.

⁽³⁾Source data have not been updated since the 2023 County Health Rankings Release.

2024

Pawnee County

The annual *County Health Rankings & Roadmaps* data release provides a snapshot of the health of each county in two summaries: **Health Factors** (which measure issues that can shape the health outcomes) and **Health Outcomes** (which measure length and quality of life). Each county is placed on a continuum from least healthy to healthiest in the nation and categorized into a group of counties with similar Health Outcomes or Health Factors. The following tables illustrate the “drivers” for health of this county.

What do these drivers mean?

The drivers indicate the measures with the greatest impact on the health of the county. Drivers labeled with a green plus sign are measures on which the county performed particularly well compared to all counties nationwide. Those labeled with a red minus sign are measures which could be improved and may warrant additional attention.

Health Factors: Drivers with the greatest impact on health, Pawnee County, KS - 2024

	Measure	Description	Factor Category	County Value	U.S. Value	Direction of Impact
1	Unemployment	Percentage of population ages 16 and older unemployed but seeking work.	Social and Economic Environment	2.4%	3.7%	+
2	Some College	Percentage of adults ages 25-44 with some post-secondary education.	Social and Economic Environment	46%	68%	-
3	Injury Deaths	Number of deaths due to injury per 100,000 population.	Social and Economic Environment	124	80	-
4	Children in Single-Parent Households	Percentage of children that live in a household headed by a single parent.	Social and Economic Environment	7%	25%	+
5	Primary Care Physicians	Ratio of population to primary care physicians.	Clinical Care	96	75	+

Health Outcomes: Drivers with the greatest impact on health, Pawnee County, KS - 2024

	Measure	Description	Factor Category	County Value	U.S. Value	Direction of Impact
1	Premature Death	Years of potential life lost before age 75 per 100,000 population (age-adjusted).	Length of Life	7608	7972	+
2	Poor Physical Health Days	Average number of physically unhealthy days reported in past 30 days (age-adjusted).	Quality of Life	3.3	3.3	+
3	Poor Mental Health Days	Average number of mentally unhealthy days reported in past 30 days (age-adjusted).	Quality of Life	4.8	4.8	+
4	Poor or Fair Health	Percentage of adults reporting fair or poor health (age-adjusted).	Quality of Life	15%	14%	+
5	Low Birthweight	Percentage of live births with low birthweight (< 2,500 grams).	Quality of Life	9%	8%	-

N/A: Not applicable due to insufficient data.

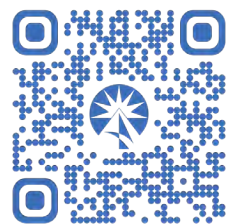
+ Green Plus: Measure with a positive impact on a county’s health grouping.

- Red Minus: Measure with a negative impact on a county’s health grouping.

Technical Note: The U.S. values are provided as a point of reference. However, the drivers and direction of impact are determined by using the county value and the average across counties in the U.S. and then applying measure weights. Drivers are provided in order of impact on health for this year. Values have been rounded according to how they are presented on the County Health Rankings and Roadmaps website. For more information on the derivation of health groups, please visit: bit.ly/2024CHRzScores. For more information on data sources, year(s) of data and weights for measures, please visit bit.ly/2024CHRmeasures.



CONTINUE THE JOURNEY
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 to move with data to action.**



SCAN FOR MORE INFORMATION



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VWV Consultants LLC is an Olathe, KS-based “boutique” healthcare consulting firm specializing in Strategy; Research, and Business Development services. We partner with clients. Plan the Work; Work the Plan