

2024 COMMUNITY HEALTH **NEEDS ASSESSMENT**



























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Executive Summary

A comprehensive Community Health Needs Assessment (CHNA) was conducted for Shawnee County, Kansas in the Spring of 2024. A Steering Committee, comprised of representatives from Stormont Vail Health, the Shawnee County Health Department, LiveWell Shawnee County, United Way of Kaw Valley, GraceMed Health Clinic, Family Service and Guidance Center, Valeo Behavioral Health Care, and The University of Kansas Health System St. Francis Campus planned and implemented the comprehensive CHNA.

The CHNA included:

- **3,816 Perception Survey responses** providing feedback on access to care, preventive care, social determinants of health, income, and demographics
- 12 Roundtables with under-represented voices of 140 residents providing feedback on community strengths, quality of care, concerns, underlying reasons for poor health, and suggested improvements
- Data analysis including review of recently released County Health Rankings
- Town Hall with 55 stakeholders representing 41 organizations to review Survey, Roundtable results, and County Health Ranking data. The event concluded with a prioritization exercise.

Priorities:

The following significant community health needs were determined priorities:

- Behavioral Health (Mental Health and Substance Use)
- Neighborhood Safety and Housing
- Healthy Eating Options
- Health Equity (including disparities related to sexually transmitted infections and infant mortality)

Next Steps:

Work on the Community Health Implementation Plan (CHIP) will begin in the fall of 2024 and be completed in 2025 identifying objectives and strategies to address each need over the next three years. In addition, Stormont Vail Health Flint Hills Campus developed a Hospital Implementation Plan including strategies the hospital will undertake over the next three years to address each of the identified priorities.

Documentation:

The CHNA, Hospital Implementation Plan and CHIP (when completed) are available in hard copy at each of the Steering Committee member organizations and as well as the websites of the individual Steering Committee member organizations. Any feedback should be directed to Karla Hedquist, Director Community Health Engagement at Stormont Vail Health, by email to khedquis@stormontvail.org or Craig Barnes, Division Manager Community Health Outreach and Planning Shawnee County Health Department, Craig.Barnes@snco.us.

Introduction

A Community Health Needs Assessment (CHNA) is an important tool used for examining and improving the health of a community. It provides insight into the current health status of a community by identifying needs and potential means of fulfilling them. The CHNA includes comprehensive information about health risks and outcomes based on systematic collection and analysis of data and conversations with community members and leaders. A Steering Committee comprised of representatives from Stormont Vail Health, the Shawnee County Health Department, Live Well Shawnee County, United Way of Kaw Valley, GraceMed Health Clinic, Family Service and Guidance Center, Valeo Behavioral Health Care, and The University of Kansas Health System St. Francis Campus determined and implemented the method of collecting information for the 2024 Shawnee County CHNA.

As of the 2023 census, Shawnee County was home to an estimated 177,746 residents. The 2024 CHNA included a Perception Survey completed by 3,816 community members, feedback from 12 Roundtables with 140 under-represented voices, a Town Hall community conversation attended by 55 individuals representing 41 organizations, and data compiled from County Health Rankings, Kansas Health Matters, Behavioral Risk Factor Surveillance System.

In addition to identifying and addressing community health issues, a CHNA fulfills a requirement for local health departments seeking accreditation from the National Public Health Accreditation Board (PHAB), Federally Qualified Health Center accreditation, and Certified Community Behavioral Health Center designation. The federal Patient Protection and Affordable Care Act (ACA) requires that each registered 501(c)3 hospital conduct a CHNA at least once every three years and adopt a strategy to meet identified needs.

Since the first comprehensive Community Health Needs Assessment (CHNA) was completed in Shawnee County in 2013, there has been constant analysis of the process itself and improvements made throughout each iteration. We are now on the fourth installment of the CHNA and are confident each report has been more demographically representative and provided a more comprehensive and accurate portrait of the community's health status in which to build upon for future community health improvement activities and interventions.

Community Health Improvement Planning Process

The information collected in the CHNA drives the development of a Community Health Improvement Plan (CHIP). The most recently completed 2023-2025 Shawnee County CHIP is posted at https://www.stormontvail.org/wp-content/uploads/SNCO-CHIP-2023-25.pdf. A CHIP details available resources and how they should be allocated in order to address community health issues. Together the CHNA and CHIP will educate community members, prioritize community health improvement methods, drive policy change, promote equity, and outline resources to promote better health in Shawnee County. While the completion of the CHNA is a significant achievement and should be celebrated, the CHNA is not designed to be a report that

is created and then stands alone. With the CHNA now completed for this cycle, our work as a community continues almost immediately in order to make impacts on current priorities and inform the decision-making around updating strategies through the health improvement planning process. The CHIP and the inspiration behind its creation is to develop a living document that serves as the platform for developing collective impact principles that focus on priorities that we determined through our comprehensive CHNA process; ultimately providing our community with a strategic roadmap to eliminating health disparities and improving health outcomes.



Work Completed on 2023-2025 Community Health Improvement Plan

Much has changed since the 2021 Community Health Needs Assessment was released. LiveWell Shawnee County, formerly Heartland Healthy Neighborhoods, is the community-based implementation arm of the Community Health Improvement Plan. Examples of work initiated since the release of the 2021 CHNA include

- K-State Research and Extension's Food Distribution Map
- Gaining leadership involvement from the Behavioral Health sector
- Stormont Vail Health's implementation of Team Birth, obtaining the Kansas Fights Addiction grant
- Shawnee County Health Department development of an Overdose Surveillance Dashboard, organization of the Whole Family Coalition
- Breadbasket Farmers Market hosting Kids at the Market,
- United Way of Kaw Valley's strategy development based on CHNA priorities
- LiveWell's first paid staff member, a Director, was brought on to lead the coalition in
 2022

The number of partnerships making up the coalition have grown as well as the number of workgroups including the Sexual Health Collaborative, Mental Health Collaborative, and Tobacco/Aerosol Prevention Workgroup. LiveWell also completed Phase II of the Pathways to a Healthy Kansas grant initiative in addition to obtaining other grants supporting social determinants of health.

2024 Shawnee County Community Health Needs Assessment Process

Steering Committee

In 2023, the Shawnee County Community Health Assessment (CHNA) Steering Committee began planning the 2024 CHNA. Led by Stormont Vail Health, the Steering Committee included collaborative participation from several community-based organizations: United Way of Kaw Valley, LiveWell Shawnee County, Valeo Behavioral Healthcare, Family Service & Guidance Center, GraceMed Health Clinic, the University of Kansas St. Francis campus, and the Shawnee County Health Department. In addition, the committee was aided by a Masters Level Nursing Student from Grand Canyon University concentrating on public health and a bi-lingual Senior from Washburn University interested in pre-medical education. This diverse committee aimed to comprehensively assess and address the health needs of the Shawnee County community.



Inclusivity and Representation

The primary objective of the CHNA Steering Committee was to ensure inclusivity and representation, particularly from traditionally under-represented communities, including those who are low-income, minorities, and organizations assisting those neighbors. Historical data indicated that previous data collection efforts did not fully reflect the community's demographic profile. To address this, the CHNA planning team meticulously designed the data collection process to better capture a representative sample of the community demographics. By engaging with a wide range of community voices and leveraging the strengths of various organizations, the CHNA Steering Committee was able to develop a comprehensive and inclusive assessment of Shawnee County's health needs. This process not only highlighted critical health priorities but also fostered a collaborative environment for ongoing community health improvement initiatives

Methodology

Collaboration and Community Engagement

The entire CHNA process emphasized the collaboration of many organizations and the inclusion of representatives from government, public health, low-income communities, minority groups, and organizations serving these populations. This collaborative approach ensured a broad spectrum of community voices were heard and considered and achieved greatly improved demographic representation. The data collection process comprised four major tasks:

1. Formal and Electronic Surveys

Surveys were conducted from March 11 to April 30, 2024, focusing on various health and social concerns, including access to care, preventive care, income, pregnancy/postpartum issues, and participant demographics. There were 3,816 surveys received and demographic representation of the community was greatly improved from prior iterations of the CHNA. The survey, created using SurveyMonkey, was distributed through multiple channels:

- Kickoff party at Topeka and Shawnee County Public Library: Attended by Steering Committee members and their organizational leaders, LiveWell Shawnee County workgroup chairs and members, and the media.
- Press Releases: Requests for community participation contained survey links
- **QR Code Business Cards**: Two-sided business cards with English on one side and Spanish on the other were distributed by community partners.
- **Email Distribution**: Utilizing lists generated by the Steering Committee, the Stormont Vail Health CEO emailed a request to complete the survey with survey links to over 350 contacts.
- Mass Cascading of Emails with Survey Links: Sent by all Steering Committee partners, Greater Topeka Chamber of Commerce, City of Topeka, Boy Scouts, and others.
- Paper Surveys: Available in English and Spanish, located at all Steering Committee locations, Topeka Rescue Mission, food distribution sites, & available in large print.

2024 Survey Results

The 2024 survey was divided into four sections: Access to care, Social Determinates of Health, Pregnancy, and Demographics. Following are the results from each section. The full survey can be found in English and Spanish in Appendix I.

Access to Care

Where do you usually go for-Non-Emergency Medical Care:

Answer	# Of responses
Personal/ Private Doctor	1630
Immediate/ Express Care	719
Private Clinics	309
Other (write in - VA and Gracemed	174
Did not seek medical care	170
Emergency department	167
Nonprofit community clinic	106
Retail Provider	74
Total	3349

In the past 12 months, did you need any following services:

Answer	# Of responses
Medical Care	2776
Prescription Medication	2727
Dental Care	2535
Counseling	1193
Quitting Tobacco/nicotine	170
Substance/ opioid use	100
total	3215

If you checked needing a service above, was it received:

Answer	# Of responses
Medical Care	2576
Prescription Medication	2536
Dental Care	2242
Counseling	974
Quitting Tobacco/nicotine	85
Substance/ opioid use	52
total	3011

If you did not receive care, why not?

Answer	# Of responses
Care was too expensive	346
Did not seek care	221
Other (answers all vary)	166
Care was not available	99
Lack of transportation	78
My language was not available	14

Preventative Care

For each of the health procedures, please indicate the last time procedure was done:

	Past 12	Last 1-5 yr.	More than 5	Never	N/A
	months		yr.		
Blood	3037	164	50	48	24
Pressure					
Dental	2379	466	290	61	54
Screening					
Flu Vaccine	2312	422	198	247	73
COVID Vacc	1353	1316	27	381	96
Mammogram	1309	366	125	665	644
Pap smear	640	936	363	277	775
Prostate	272	223	79	616	1755
exam					

Survey Feedback Related to Social Determinates of Health

Respondents were asked several questions to gauge the importance of specific issues that affect the health of our community. The responses show the effects of social determinants of health, including affordable health insurance, poverty, and obesity were important factors to improve upon.

Top major/moderate concerns combined	# of responses
1 Mental Health	996
2 Adult Obesity	978
3 Neighborhood Safety	877
4 Healthy Eating options	808
5 Safe/ Affordable/ Accessible Housing	803
6 Financial Assistance (medical areas)	785
7 Envi. Pollution/Recycling	755
8 Chronic Conditions	742
9 Financial Assistance Housing	704
10 Food Assistance	655
11 Homelessness	598

Pregnancy Related Survey Responses

Did you receive prenatal care?

Yes	235
No	113

How many weeks into pregnancy receive first checkup?

Less than 8 weeks	111
8-20 weeks	109
21-30 weeks	7
More than 30 weeks	6

Did you receive a postpartum checkup within 12 weeks?

, , , , , , , , , , , , , , , , , , , ,	
Yes	172
No	61

Did any of these things keep you from having a prenatal/ postnatal checkup?

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Reason Not listed above (miscarriage, baby still	41	
young or not born yet)= most popular answers)		
Did not know need one/felt fine	26	
Couldn't take time off	18	
Not enough money or insurance to pay	15	
Couldn't get appointment when I wanted one	15	
Didn't have transportation	12	

<u>Survey Response Demographics Versus Percent of County Population</u>

CHNA 2024 (n=3,816) vs. 2021 (n=2,536)				SNCO 2023 Census	
				Population = 177,746	
Gender Identity	Replies 2021	# Replies 2024	% Replies 2024	Shawnee County %	
Female	1,843	2,282	74.38%	51.20%	
Male	557	760	24.77%		
Non-Binary	11	17	0.55%		
Transgender	3	9	0.29%		
# Answered question	2,414	3,068	100.0%		
Age					
Under 18	N/A	64	2.07%	22.80%	
18-24	64	154	4.98%		
25-34	273	393	12.71%		
35-44	398	583	18.86%	18-64 = 57.7%	
45-54	439	489	15.82%		
55-64	535	594	19.22%		
65-74	531	521	16.86%	65+ = 19.5%	
75-84	177	228	7.38%		
85 or older		65	2.10%		
# Answered question	2,417	3,091	100.0%		
Race/Ethnicity					
Black or African American	151	302	9.61%	8.50%	
American Indian or Alaska Native	49	188	5.98%	1.40%	

Asian	12	59	1.88%	1.50%
Caucasian/White	2,014	2,236	71.12%	72.50%
Hispanic, Latino, or Spanish	119	300	9.54%	13.40%
Middle East	N/A	28	0.89%	N/A
Native Hawaiian/Pacific Islander	N/A	31	0.99%	0.10%
# Answered question	2,408	3,144	100.0%	
Household Income				
Less than \$10,000		217	7.16%	
\$10,000-\$14,999		146	4.82%	
\$15,000-\$24,999	Less than \$20,000-=193	178	5.87%	
\$25,000-\$34,999	\$20,000-\$29,000=190	224	7.39%	
\$35,000-\$49,999	\$30,000-\$49,999=403	291	9.60%	
\$50,000-\$74,999	\$50,000-\$59,999=228	469	15.48%	SNCO med inc: \$63,463
\$75,000-\$99,999	\$60,000-\$69,000=232	389	12.84%	
\$100,000-\$149,999	\$70,000 + =1096	482	15.91%	
\$150,000-\$199,999		238	7.85%	
\$200,000 or more		172	5.68%	
Don't Know	N/A	224	7.39%	
# Answered question	2,342	3,030	100.0%	

ZIP City	# Replies 2021	# Replies 2024	% Replies 2024
66614 Topeka	426	627	17.44%
66604 Topeka	336	506	14.08%
66605 Topeka	231	358	9.96%
66606 Topeka	182	283	7.87%
66618 Topeka	126	167	4.65%
66610 Topeka	154	197	5.48%
66611 Topeka	132	244	6.79%
66617 Topeka	114	128	3.56%
66609 Topeka	71	124	3.45%
66607 Topeka	62	149	4.14%
66615 Topeka	46	61	1.70%
66409 Berryton	43	54	1.50%
66608 Topeka	53	157	4.37%
66539 Silverlake	37	55	1.53%
66616 Topeka	47	98	2.73%
66402 Auburn	37	70	1.95%
66542 Tecumseh	46	68	1.89%
66612 Topeka	25	52	1.45%
66619 Topeka	25	37	1.03%
66603 Topeka	10	51	1.42%
66533 Rossville	10	62	1.72%
66546 Wakarusa	15	19	0.53%

66601 Topeka	3	1	0.03%
66621 Topeka	1	27	0.75%

Organizations Surveyed

The organizations and their constituents who received surveys include but were not limited to:

- Topeka Rescue Mission
- Food Distribution Sites including: Harvesters Food Distribution sites
- Senior Centers
- Hospital Patients and Employees
- Blue Cross and Blue Shield of Kansas
- Community Centers
- Nonprofit and Community Based Organizations including Junior League
- Washburn University Students and Employees
- All Steering Committee Organizations
- Various community partners via email distribution lists including: City of Topeka and Neighborhood Improvement Associations
- All School Districts in Shawnee County,
- Chamber of Commerce and Employers including Frito Lay and Reeser's

<u>Summary of Survey Response Themes</u>

Survey Top Major/Moderate Concerns for Shawnee County	# Responses
1 Mental Health	996
2 Adult Obesity	978
3 Neighborhood Safety	877
4 Healthy Eating options	808
5 Safe/Affordable/ Accessible Housing	803
6 Financial Assistance (medical areas)	785
7 Envi. Pollution/Recycling	755
8 Chronic Conditions	742
9 Financial Assistance Housing	704
10 Food Assistance	655
11 Homelessness	598

2. Roundtables

Representatives of the Steering Committee conducted 12 one-hour Roundtables (PowerPoint in Appendix III) with under-represented voices March 11 to April 30, 2024, engaging 140 residents.

Roundtables were conducted with the following groups:

- Rossville Library
- East Topeka Senior Center
- Washburn University Black Student Union
- Washburn University First Generation Students
- Washburn University Hispanic Leadership Organization
- SVH Patient and Family Partnership Council
- Shawnee County Health Department
- United Way
- Topeka Rescue Mission
- Family Service and Guidance Center Advisory Council
- Child Care Providers
- El Centro

These sessions focused on:

- Perceptions of community strengths related to health
- Quality of healthcare delivery
- Worries and concerns about health
- Underlying reasons for health concerns
- Suggested improvements

Notes from these meetings were meticulously recorded and common themes identified for use in the Town Hall prioritization process. In addition to the themes called out by surveys, the Roundtable groups also emphasized transportation and substance use and community needs. The chart below describes the groups participating, their top priorities, and key takeaways.

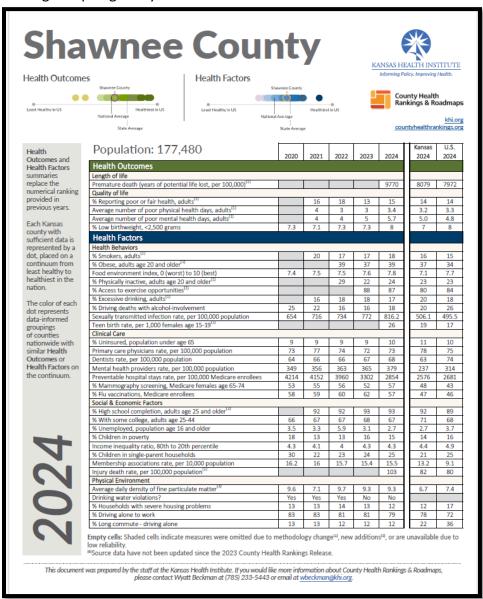
2024 CHNA Roundtables (# of Attendees)	Group Description	Top Priorities	Key Takeaways
Rossville Library (6)	Mixed gender professional adults and one student	Physical inactivity, Addiction/Substance Use, Lack of access to healthcare	Community feels loss of clinic. Going to appts requires time and planning. Need more opportunities for physical activity.
East Topeka Senior	Mixed gender, mostly	Community violence,	Neighborhoods need
Center (14)	African American	Financial resource strain,	more lights. Empty
	retirees	Lack of safe affordable	buildings need new

		housing, Chronic stress/	purposes. Need educ
		anxiety	about healthcare.
Washburn Black Student Union (20)	African American students ranging in age from 18-23	Access and education about healthcare, Lack of transportation, and Mental health	Education differs in different communities and visits need to reflect this. More access to healthcare
Washburn First Generation Students (18)	Mixed gender students ranging in age from 18-23	High cost of care and resources, low incomes. Accessibility of information. Stigma around accessing care. Lack of resources within walking distance	Food price going up and food resources are leaving community. Putting off care in new town due to fear of insurance not accepted
HALO (6)	Hispanic students ranging in age from 18-23	Lack of education regarding healthcare. Chronic stress and anxiety. Lack of access to food.	Many barriers to accessing care. Poor communication due to language barrier.
SVH Patient and Family Partnership Council (7)	Mixed race professional females	Obesity. Addiction and substance use. Lack of access to care.	COVID still effecting things. Lack of healthy lifestyle. Need to help the youth navigate health.
Shawnee County Health Department (8)	Mixed gender, mostly white professionals who work in all areas of health department	Lack of access to food, obesity, lack of healthcare education	Need more access and education about food in schools. Lower-middle class also needs help.
United Way (24)	Mostly female professionals, varying in age	Financial resource strain, Lack of safe affordable housing, cost of living.	Access to care, more spread-out options. More education and finance assistance
Topeka Rescue Mission (10)	Mixed raced, mostly white, individuals living at the Topeka Rescue Mission	Lack of transportation, Addiction/substance use. Lack of safe affordable housing, cost of living.	Hard to get in and see providers due to access and affordability. Need more healthcare education.
Family Service and Guidance Center Advisory Council (10)	Mixed race working professionals	Financial resource strain, Addiction/substance use, Lack of access to healthcare, cost of insurance.	Need more healthcare providers and local providers. Improve education in the schools and healthcare.
Child Care Providers (7)	Childcare providers from every licensed section of childcare	Mental health, Lack of access to food, Transportation, Lack of education.	Need satellite transportation options, consistent

			communication. Need more education.
El Centro (10)	Seven females, three males, mixed age with majority 40+	Lack of affordable healthcare, pace of lifestyle, mental health	Struggles with affording care and medication, language barrier to mental health.

3. Data Analysis

The Perception Survey and Roundtable responses were analyzed by the Steering Committee and Town Hall attendees including assessment of community demographic representation and economic factors. This also included an in-depth review of the recently released County Health Ranking compiling many data sets.



Shawnee County

khi.org | countyhealthrankings.org

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, Shawnee 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	2.7%	3.7%	+
2	Mammography Screening	Percentage of female Medicare enrollees ages 65-74 who received an annual mammography screening.	Clinical Care	57%	43%	+
3	High School Completion	Percentage of adults ages 25 and over with a high school diploma or equivalent.	Social and Economic Environment	93%	89%	+
4	Flu Vaccinations	Percentage of fee-for-service (FFS) Medicare enrollees who had an annual flu vaccination.	Clinical Care	57%	46%	+
5	Sexually Transmitted Infections	Number of newly diagnosed chlamydia cases per 100,000 population.	Health Behaviors	816.2	495.5	-

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

	Measure	Description	Factor Category	County Value	U.S. Value	Direction of Impact
1	Poor Mental Health Days	Average number of mentally unhealthy days reported in past 30 days (age- adjusted).	Quality of Life	5.7	4.8	-
2	Poor Physical Health Days	Average number of physically unhealthy days reported in past 30 days (age- adjusted).	Quality of Life	3.4	3.3	+
3	Poor or Fair Health	Percentage of adults reporting fair or poor health (age-adjusted).	Quality of Life	15%	14%	+
4	Low Birthweight	Percentage of live births with low birthweight (< 2,500 grams).	Quality of Life	8%	8%	+
5	Premature Death	Years of potential life lost before age 75 per 100,000 population (age-adjusted).	Length of Life	9770	7972	+

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

Explore resources and strategies to move with data to action.



CAN FOR MORE INFORMATION

TAKE ACTION TO IMPROVE HEALTH IN YOUR COMMUNITY

4) Town Hall Prioritization Process

A Town Hall Community Conversation was held May 15, 2024, at the Topeka and Shawnee County Public Library to review the outcomes of the community perception surveys, Roundtable feedback, and data analysis including the most recent County Health Rankings. Key stakeholders/community leaders attending included: 55 overall numbers, and 41 organizations attending.

Meeting Summary

Presentations:

- 1. Dr. Locke, Shawnee County Health Officer, presented an overview of the recently released County Health Rankings, highlighting key statistics and areas of concern. She emphasized the importance of understanding these rankings to improve community health initiatives.
- Karla Hedquist (SVH) and Sarah Karns (LiveWell) presented findings from the Community Health Needs Assessment. They discussed responses collected from Perception Surveys and Roundtables, significant trends, and the top 11 needs issues identified.

Activities:

- 1. Small Group Tabletop Discussion: Attendees were asked to respond to the following questions in a written exercise:
 - a. In reviewing the top 11 needs from the CHNA perception survey. Does your group agree with the health needs as listed? Does anything surprise you?
 - b. If your response to Question 1 was NO. In your opinion as a group, which health needs should have been prioritized higher or lower? Why? Are there health needs that are missing? If your response to Question 1 was YES, please move to question 3.
 - c. Why does your group believe these are the top health needs in our community? What are the major gaps or barriers that have caused these to become the top health needs?
 - d. In reviewing the top 11 health needs, and any needs your group may have added on Question 2, who are the key stakeholders and community partners that MUST be involved to make positive impacts in those areas?
 - e. In reviewing the top 11 needs, and any needs your group may have prioritized additionally on Question 2, what resources are necessary to make positive impacts in those areas? What are other solutions or programs to assist progress?

2. Prioritization Exercise: Participants engaged in an individual prioritization exercise, ranking what they felt were the top health concerns of Shawnee County. Each received three dots: one green, one orange and one pink. Each dot represents a level of priority: green (priority 1), orange (priority 2), pink (priority 3). They were asked to place their dots on wall posters identifying their individual priorities.



The Town Hall was visually recorded by artist Sara O' Keeffe:



Outcome:

All collected feedback and data was reviewed at the Town Hall event. identified priority areas will be addressed in the Community Health Implementation Plan. The following most significant community health needs were determined community health priorities:

- Behavioral Health (Mental Health and Substance Use)
- Neighborhood Safety and Housing
- Healthy Eating Options
- Health Equity (including disparities related to sexually transmitted infections and infant mortality)

Priority Area Descriptions

1) Behavioral Health (Includes Mental Health and Substance Misuse):

Mental Health

Mental health includes psychological, emotional, and social well-being. How individuals think, feel, and act, affects an individual's mental health, which then in part, determines how they handle stress, relate to others, and make choices. Mental health is critical to an individual's well-being, family and interpersonal relationships, and their ability to contribute to the community. An individual's mental health is also impacted by many, often interrelated factors, which can serve to protect or undermine their mental health. Factors, which have been found to strengthen an individual's resilience (i.e., mental health), include social and emotional skills and attributes of the individual, as well as positive social interactions, quality education, satisfying work, safe neighborhoods, and community cohesion. Shawnee County statistics from countyhealthrankings.org shows that Shawnee county has more Poor Mental health days at 5.7 as compared to Kansas with 5.0 and the United States at 4.8 This increase in poor mental health days is reflected in an increase of services being provided. One local mental health provider has seen a 23.2% increase (143592 vs 116556) in the number of services provided from January 1, 2024 through June 30,2024 as compared to the same time period in 2023. In addition a 70.2% increase in Substance Use Detox encounters was noted (12925 vs. 7594) and a 100.1% increase in outpatient counseling services (8269 vs 4114).

Recognizing the importance of mental health, Shawnee County survey respondents prioritized the need to address mental health within our community. In the 2024 Community Health Needs Survey, mental health was identified as the number one priority, with 996 respondents listing mental health as their top concern. Three of the twelve roundtables identified mental health as one of their top priorities with two other roundtables identifying chronic stress and anxiety. Mental health was identified under "Other concerns of importance to you in the past 12 months" on the 2024 Community Health Needs Survey with concerns such as availability of

services for individuals with mental health issues, employment opportunities after a mental health crisis, and mental health needs of those who are homeless being identified.



Substance Misuse

Substance use is any consumption of alcohol, tobacco, or drugs. Substance misuse is the use of alcohol or illicit or prescription drugs in a manner that may cause harm to the individual using the substance or those around them. Harms that can result from substance misuse include overdoses, interpersonal violence, motor vehicle crashes, injuries, homicides, and suicides. Substance misuse and substance use disorders, which are the medical illnesses that develop in some individuals who misuse substances, harm the health and wellbeing of individuals, families, and communities. Prevention and early intervention are two ways of addressing the challenges people who misuse substances face before they grow to develop life-long medical conditions or even cause premature death. One local provider has nine detox beds. In 2023, 527 people were served, with a total of 2,248 bed days used, making the average stay just over four days. The average length of stay has steadily been increasing due to the rise in opiate and fentanyl use requiring longer stays to reduce symptoms. For comparison, in 2022, 560 people used 1,810 bed days or just over 3 days per person. Much like other communities across the United States, Shawnee County has been impacted by the challenges of substance misuse. Substance use has been identified as an ongoing problem in the community. Although substance use was not identified within the top eleven priorities of those that completed the 2024 Community Health Needs Survey, four of the twelve roundtables identified addiction and substance use as one of their top priorities and substance misuse was ranked fifth in priority at the town hall meeting. This led the Steering Committee to include substance misuse as a behavioral health priority.

Currently available behavioral health resources can be found in the Appendix.

2) Neighborhood Safety and Housing:

Neighborhood Safety:

Neighborhood safety was ranked third in the list of most important issues from the 2024 CHNA community survey. In the 2021 CHNA survey, over 52% identified violence as a very big problem.

The Kansas Department of Health and Environment reported an age-adjusted homicide rate for Shawnee County (2020-2022) at 11.1 deaths per 100,000, compared to a Kansas rate of 6.4, a national rate of 5.7, and a Healthy People 2030 target of 5.5. In 2023, Shawnee County recorded 34 homicides. Shockingly, 31% of victims were under 18 years old. Firearms were used in 60% of those homicides across all ages. However, according to the Stormont Vail Health trauma registry, 63 additional individuals were treated for firearm injuries attributed to violence and survived. Nationally, firearm deaths average 13.0 per 100,000, with Shawnee County's rate at 21.0, per the CDC (2018-2021).

According to 2024 County Health Rankings, Shawnee County's premature death (years of potential life lost, per 100,000) was 9,770 years compared to 8,079 for Kansas and 7,972 nationally. The disproportionate impact of community violence on youth is a contributing factor. This is magnified within the Black/African American community, with a homicide rate ten times higher than that of white residents. The resulting loss of potential life for Black/African American residents, at 21,000 years compared to 8,700 years for white residents, starkly illustrates the gravity of these disparities.

The Kansas Bureau of Investigation highlights a bleak trend in Shawnee County, with the violent crime rate per 1,000 people surging from 5.0 in 2018 to 7.6 in 2022, surpassing both the statewide rate of 4.4 in 2022 and the national rate (3.7 in 2019). Geographic disparities have also been identified within the county. In 2018-2023, the zip code 66610 experienced 21 instances of violent crime, while 66604 had 1,080 instances, equating to 54 times more violent crimes.

Safe Affordable Housing:

Current Census data reflects that there are 60,054 housing units in the City of Topeka. Of those units, 6,116 are vacant housing units and not occupied. Of the current units, more than 40% report one or more critical household issues that need addressed for the homes to remain occupied within the next five years. Current data in coordination with the United States Census Bureau, finds that 36.4% of owner-occupied housing is reporting being cost-burdened (spending more than 30% of their income on housing costs). Of those, nearly 10% reports spending more than 50% of their income on housing-related costs, computing to being extraordinarily cost-burdened. To continue to address the needs for home repairs in low-income, owner-occupied housing and ensure that the vacancy rates does not increase to deteriorate our housing ecosystem the demand is great and continuing to increase. A market

study, conducted in partnership with the City of Topeka, noted a substantial demand for affordable housing in our community and an identified need in 2020 for approximately 5,000 dedicated housing units to households living at or below 60% of the Average Median Income. The study additionally noted that the aging cohort of the population is expected to increase by 20% and that trend will continue into the future. This has created a demand for more accessible and safer housing for the aging. The city is also experiencing increasing homelessness.

Currently available resources related to neighborhood safety and housing can be found in the Appendix.

3) Healthy Eating

Access to healthy food is essential for a person's overall well-being, influencing_a healthy weight and quality of life. Poor nutrition can elevate cancer risks_among other chronic and debilitating illnesses. Food plays a significant role in cultural expression and community cohesion. However, many residents of Shawnee County struggle to access fresh, nutritious, and affordable food. Barriers include lack of transportation, high prices, and limited availability to healthy food outlets. The USDA identifies low access areas as census tracts where many people live more than a mile from a grocery store in urban areas or more than 10 miles in rural areas. These areas often overlap with low-income regions, classified as food deserts. Food insecurity, defined by the USDA as inconsistent access to enough food for an active, and healthy life, leads many to rely on cheap, foods with low nutritional value. These foods, contribute to higher obesity rates among those with insufficient food access.

In Shawnee County, food access is a pressing concern. In the 2024 CHNA, Adult Obesity and enough options for healthy eating ranked in the top 5 major concerns. Food assistance was a top 10 need identified by residents in the 2024 CHNA survey. A March 2022 food assessment revealed that 11.6% of Shawnee County residents were food insecure in 2019, close to the Kansas state rate of 12.1% but higher than the Healthy People 2030 goal of 6.0%. Shawnee County's food insecurity rate has risen to 13.3%, higher than the state average of 12.7%. Child food insecurity is similar to the statewide rate, 18.4%.

Many Shawnee County residents suffering from food insecurity rely on services from Let's Help and Catholic Charities. These two agencies were located near the regional Feeding America food bank, Harvesters – The Community Food Network before moving to Lawrence in early summer 2024 because of the Polk-Quincy viaduct project. Harvesters provides food and other essential goods to nearly all food pantries in Shawnee County. Though we cannot yet fully know the impact of Catholic Charities and Let's Help, along with Harvesters, undergoing such changes, it is anticipated additional change will affect these agencies and the large low-income census tracts they serve.

Currently available resources related to healthy eating can be found in the Appendix.



4) Health Equity:

Health Equity ensures individuals within a given community have opportunities available to them to attain the best health outcome possible. The Robert Wood Johnson Foundation provides the following definition:

"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 house, safe environments, and health care."

As we have learned through analysis of health data and our community conversations with stakeholders, there are stark differences in the attainment of optimal health between the diverse sets of population that make up our community. A systematic shift back in 2018 for the CHNA planning committee integrated a wider social determinants of health (SDOH) lens and pushed our team to further explore root causes of the health inequities surrounding the conditions in which individuals are born, grow, live, work and play. Although health equity is cross cutting throughout all indicators of health, the planning committee implemented and developed an overarching Health Equity priority area to identify specific areas and opportunities for improvement on key drivers for health for ongoing future CHNA cycles.

Throughout the 2024 CHNA process, including the Perception Survey, Roundtables and the prioritization activities at Town Hall event, several issues were identified as areas with disconcerting disparities:

- 1. Maternal, Child and Infant Health
- 2. Neighborhood Safety
- 3. Obesity
- 4. Sexually Transmitted Infections

Maternal, Child and Infant Health

According to the Kansas Infant Mortality and Stillbirth Report, 2021 published May 2023:

"Infant mortality is an important indicator of community health. It is associated with a variety of factors such as economic development, general living conditions, social well-being, basic needs, illnesses such as diabetes and hypertension, and quality of the environment."

Across Kansas, infants born to Black and Hispanic mothers have higher mortality rates than those born to white women. In Shawnee County, infants born to Black and Hispanic mothers have markedly higher mortality rates than those born to White mothers. For example, the infant mortality rate among White infants in Shawnee County is 3.8 deaths per 1,000 live births, compared to the rate among Black infants of 18.0 deaths per 1,000 live births and 12.2 deaths per 1,000 live births for Hispanic infants. The overall infant mortality rate for Shawnee County is 7.9 deaths per 1,000 live births, drastically higher than the state and national values, both at 5.9 deaths per 1,000 live births ((KDHE – 2024), and higher than the Health People 2030 target of 5.0 deaths per 1,000 live births.

The overall rate of severe maternal morbidity (SMM) per 10,000 delivery hospitalizations in Kansas for Black women was 103.5: 83.5% higher than the rate among White women (56.4), 52.7% higher than the rate among Asian/Pacific Islanders (67.8), and 42.2% higher than the rate among Hispanics (72.8). The SMM rate for Black women was significantly higher than any other race and ethnicity (KMMRR-2023). Maternal death rates increased during the COVID-19 pandemic and racial disparities widened for Black women across the nation (KFF-2022).

In Kansas, overall teen births (ages 15-19) decreased slightly from 2022 (1,616) to 2023 (1,537) with the overall percentage decreasing from 4.7 to 4.5 percent (KDHE-2024). However, disparities in teen births continue to persist between different groups related to race, geographic location, and socioeconomic status (HHS-2020). The overall rate of teen births per 1,000 in the state of Kansas is 19.0. In Shawnee County, the overall rate is 26.0, higher than both state and national rates. Additionally, the birth rate for Black teens is 45.0, for Hispanic teens 40.0 compared to White teens at 17.0 (CHRR-2024).

Neighborhood Safety

Data indicates injuries through accidents or violence are the fourth leading cause of death in the United States, and the leading cause of death for those between the ages of 1 and 44 (CDC-2024). According to County Health Rankings and Roadmaps, accidents and violence affect health and quality of life in both short and long-term and living in unsafe neighborhoods can impact health in a multitude of ways. Neighborhood safety not only reflects violent acts, but also includes unintentional injuries in homes and streets caused through accidents. According to Health People 2030, racial and ethnic minorities and people with low incomes are more likely to live in neighborhoods with health and safety risks.

In Shawnee County, per 100,000 population a total of 9,800 years of potential life (YPLL) were lost to people under the age of 75 (Premature Death) (CHRR-2024). Those YPLL were not consistent across racial and ethnic populations. Notably, the YPLL for Black individuals was more than double the overall Shawnee County rate of 21,000. The rate for American Indian/Alaskan Native at 16,400 was also higher than the County rate and higher than both the Hispanic and White population, 8,200 and 8,700 respectively. These rates are all higher than the State (8,079) and Nation (7,972)(CHRR-2024).

Furthermore, for YPLL from Homicide in Shawnee County, there is a glaring discrepancy within race and ethnicity. The overall rate of YPLL per 100,000 population due to Homicide is 467.4 compared to the state value of 280.9. However, the rate for Black individuals is 2,389.7 years lost, 411 percent higher than the overall value. The rate for Hispanic is 0 and the rate for White is 410.4 (KHM-2024). Additionally, age-adjusted death rate due to homicide for Shawnee County per 100,000 population is 10.8 compared to 5.9 for Kansas and 6.6 for the nation. Disaggregated by race and ethnicity, the rate for Black individuals in Shawnee County is 51.7 compared to 5.6 for White individuals and 378.7 percent higher than the overall rate.

Data also shows disproportionate outcomes by race and ethnicity in YPLL due to traffic injury. The overall rate of YPLL per 100,000 population in Shawnee County due to Traffic Injury is 720.5 compared to the state value of 499.9. However, the rate for Black individuals is 1,912.9 years lost, 165.5 percent higher than the overall value, and the rate for Hispanic is 2,652.4, or 268.1 percent higher than the overall value; compared the rate for White individuals at 461.2 (KHM-2024).

Obesity

According to the 2023 State of Obesity Report, obesity rates have climbed for all population groups nationally with certain populations of color experiencing the highest rates, most often due to structural barriers to healthy eating and a lack of opportunities to be physically active. Nationally, 41.9 percent of adults have obesity. Black and Hispanic adults have the highest rates at 49.9 percent and 45.6 percent respectively. Similarly, obesity rates are increasing among children and adolescents across the United States. Nearly 20 percent of children (ages 2-19) have obesity (TFAH-2023). Again, Black and Hispanic youth have substantially higher rates of obesity than their White counterparts. Obesity rates are lower nationally among adults living in higher income households and among adults with college degrees. 43.9 percent of adults living in households 130 percent below the federal poverty level (FPL) suffered from obesity compared to 39 percent of adults who were above the FPL (TFAH-2023).

Kansas is one of 22 states in the United States with an obesity rate higher 35 percent and is the 17th highest rate in the nation at 35.7 percent. Furthermore, combining those who are considered obese with those who are considered overweight, the percentage increases to 69.1 percent, the 23rd highest rate in the United States. 23 percent of adults in Kansas are physically inactive, ranking the 24th highest rate in the United States (TFAH-2023).

In Shawnee County, 39 percent of adults reported being obese and 24 percent reported being physically inactive, both rates higher than state values (CHHR-2024). At the census tract level, tracts with higher rates of population of people of color and with lower income levels have higher rates of obesity. Most notably census tract 20177001100 reports 51.6 percent of adults being obese, the 11th highest rate in the state of Kansas (KHM-2021). This census tract has a median household income of \$27,750 compared to \$63,463 of Shawnee County and 74 percent of population is either Black (18 percent) or Hispanic (56 percent) compared to 24 percent White (ACS-2022). Additionally, 11 percent of residents have limited access to healthy foods, due to low incomes and not living close to a grocery store (CHRR-2024).

Sexually Transmitted Infections

Rates of sexually transmitted infections (STI or STD) are higher in Shawnee County than the Kansas average and vary widely by race, ethnicity, and age. In 2023, the overall Shawnee County STD (chlamydia, syphilis and gonorrhea) rate per 1,000 population was 10.4, higher that the state value of 6.1 (KDHE- 2023).

As of 2021, the rate per 100,000 population for reported Chlamydia cases in Shawnee County was 830.7, much higher that the Kansas rate of 511.4. State rates for Black residents were 1,599.4 and 679.1 for Hispanic residents, compared to 320.3 for White residents. In 2023, Shawnee County had a chlamydia case rate of 685.8 er 100,000 population. White residents had a chlamydia rate of 501.2 while Black residents had a rate more than four times that at 2,012.2. White residents of Shawnee County had a gonorrhea rate of 212.2 per 100,000 population, while Black residents had a rate of 1,006.1 (KDHE-2024). For Gonorrhea in Shawnee County, the rate per 100,000 populations was 397.2, again, much higher that the State value 193.0. State rates for Black residents were 918.7 and 168.9 for Hispanic residents, compared to 114.7 for White residents (KDHE- 2022).

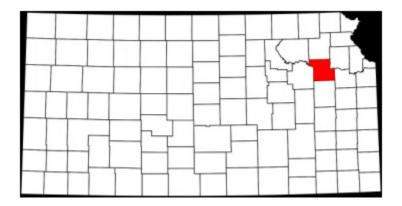
In Kansas, rates also disproportionately affect certain age groups. For Chlamydia, the rate per 100,000 population for ages 15-19 is 2,055.0, for ages 2,734.7 it is 2,734.7 compared to 1,236.0 for ages 25-29 and 644.2 for ages 30-24 (KDHE-2022). For Gonorrhea, this is more even distribution of rates by age compared to Chlamydia. The rate per 100,000 population for ages 15-19 is 497.1, ages 20-24 is 735.2, ages 25-29 is 526.9 and ages 30-34 is 465.8.

The HIV prevalence rate for Shawnee County per 100,000 population is 167.5 compared to the state rate of 147.4. Disaggregated by gender, the HIV prevalence rate for males is 287.0 compared to females at 55.7. The rate for Black individuals is 667.0, 298.2 percent higher than the overall rate, compared to 199.6 for Hispanic and 114.3 for White.

Currently available resources related to these health disparities can be found in the Appendix.

Community Profile (A Description of Community Served)

Shawnee County Kansas



Founded in 1855, Shawnee County is located in northeastern Kansas and is made up of 550 square miles of land. Its county seat, Topeka, is home to Kansas's Capitol Building and 62.76 total square miles of land. From 2010 to 2019 there was a 0.6% drop in the population¹. Health care and social assistance, educational services, and retail trade are the industries that provide the most employment².

Major highway transportation access to Shawnee County is Interstate 70, which crosses the county, as does the Kansas Turnpike. U.S. Route 75 crosses the county north to south and U.S. Route 40 and U.S. Route 24 cross the county east to west. K-4 serves part of the county from Dover in the southwest corner through Topeka, across the Kansas River and north into Jefferson County.

Residents are mostly of non-Hispanic white (72.1%) race as compared to Hispanic or Lation (14%), Black or African American (8.5%), two or more races (4.8%), Asian (1.5%), American Indian and Alaska Native (1.4%), and Native Hawaiian and other Pacific Islander (0.1%).

Demographic Profile

Understanding population and household makeup is vital in CHNA evaluation.

Demographic Indicator	Shawnee Co KS	State of KS	Source
Population estimates, July 1, 2020	177,746	2,940,546	U.S. Census
Population change, 2010-2023	-0.1%	3.1%	U.S. Census
Median Age	39.3	37.6	U.S. Census
Persons under 5 years, 2023	5.6%	6%	U.S. Census
Persons 65 years and over, 2023	20%	17.5%	U.S. Census
Female persons, 2023	51.3%	49.9%	U.S. Census
Veterans, 2018-2022	11,374	163,472	U.S. Census

Foreign born persons, 2018-	4.2%	7.1%	U.S. Census
2022			
Employment Rate	43%	41.7%	U.S. Census
Language other than English	7.4%	11.8%	U.S. Census
Spoken at home, 2018-2022			
Living in same house 1 year ago,	86.6%	84.4%	U.S. Census
2018-2022			
Total Employer Establishments	4,023	75,057	U.S. Census
Median Household Income	\$63,463	\$69,747	U.S. Census
Households, 2018-2022	74,394	1,148,635	U.S. Census
Total Housing Units	80,512	1,275,689	U.S. Census
Residents with Bachelor's	31.7%	34.7%	2022 American
Degrees or Higher (%)			Community Survey
Residents without Health Care	10.1%	10.3%	2022 American
Coverage (%)			Community Survey
Residents reporting Hispanic or	24,884	402,855	U.S. Census
Latino Ethnicity, 2023			
Residential Mobility in the last	18.8%	14.6%	2022 American
year.			Community Survey
% of residents who travel alone	75.5%	75.3%	2022 American
to work			Community Survey
Persons in poverty, 2023	13.6%	12%	U.S. Census
Children living below poverty level,	15.3%	13.9%	Kansas Health Matters
2018-2022			
High School Graduate or higher, %	92.8%	91%	2022 American
of persons age 25+ yrs 2022, 1 year			Community Survey
estimate	74.0%	68.3%	2022 American
School Enrollment, K-12	/4.0%	08.3%	2022 American Community Survey
			Community Survey

<u>Trends in health indicators reflect health status in Shawnee County compared to previous</u> periods

Based on health indicators provided by Kansas Health Matters, the overall health status of Shawnee County is trending in a negative direction in a few areas of key health drivers. In particular, the low birth and violent crime rate outcome measures moved in a negative direction in the most recent reporting period. However, the lead indicators including adults who are overweight, STI rate, infant mortality and age-adjusted suicide mortality either improved or did not decrease in a statistically significant fashion, as shown in the chart below. Red = significantly worse, Green = significantly improved, Yellow = No significant change.

Health Indicators	Trend	Shawnee Co KS	Prior Value (previous measurement period)	State of KS
Percent of Adults who are Overweight	0.3%	32.7%	32.6%	34.4%

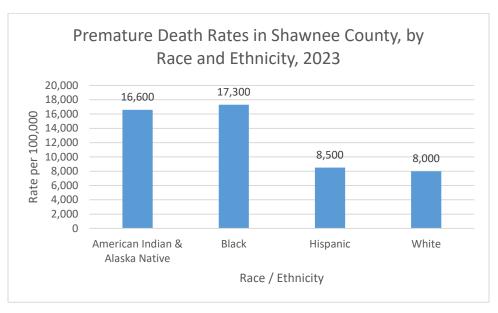
STI rate (Cases per 1000)	-15.4%	10.4	12.3	6.1
Infant Mortality (per 1000 live births)	-3.7%	7.9	8.2	5.9
Low Birth Weight, % of total live births	13.3%	8.5%	7.5%	7.5%
Age Adjusted Mortality per 100,000 population- Overall	6.1%	949.7	895.2	878.9
Age Adjusted Mortality per 100,000 population- Heart Disease	5.4%	182.4	173.0	170.4
Age Adjusted Mortality per 100,000 population- Suicide	-0.9%	22.9	23.1	19.3
Rate of Violent Crime per 1000 population	13.4%	7.6	6.7	4.4
Uninsured Population	11.4%	12.7%	11.4%	13.4%

Stormont Vail Health - Health System Patient Draw

The vast majority of patients who receive care at Stormont Vail Health facilities reside in Shawnee County. As such, Stormont Vail engages in community health improvement efforts focused on the needs expressed by Shawnee County residents during the CHNA process. We are early in the process for similar efforts in Riley and Lyon counties in partnership with those health departments, but have focused efforts on Shawnee to this point. Furthermore, Stormont Vail Health assumed the former Geary Community Hospital in Geary County and is also performing a CHNA focused on Geary County as a primary service area.

Unique Patients by county								
of residence at time of								
service ¹	% of total Unique Pati					ents Served		
								FY 2024
								(through July
County of Residence	FY 2021	FY 2022	FY 2023	FY 2024	FY 2021	FY 2022	FY 2023	31)
SHAWNEE	60.81%	60.33%	59.17%	58.95%	128,517	124,138	124,078	120,003
OSAGE	5.65%	5.72%	5.67%	5.55%	11,943	11,779	11,882	11,301
LYON	7.14%	7.34%	7.18%	6.66%	15,095	15,109	15,065	13,563
JEFFERSON	4.40%	4.51%	4.45%	4.48%	9,305	9,289	9,341	9,124
RILEY	6.75%	7.06%	7.37%	7.30%	14,260	14,524	15,446	14,869
JACKSON	3.41%	3.53%	3.47%	3.44%	7,203	7,271	7,286	7,006
POTTAWATOMIE	3.54%	3.66%	3.61%	3.48%	7,485	7,530	7,571	7,083
GEARY	2.36%	2.78%	4.31%	5.64%	4,987	5,716	9,032	11,476
WABAUNSEE	1.88% 1.91% 1.87% 1.86% 3,979 3,921		3,926	3,782				
DOUGLAS	3.21%	2.71%	2.70%	2.53%	6,792	5,574	5,654	5,149
Not provided	4.19%	4.52%	4.67%	4.79%	8,852	9,303	9,787	9,742
DICKINSON	0.52%	0.60%	0.80%	1.02%	1,103	1,228	1,673	2,085
MORRIS	0.52%	0.58%	0.61%	0.63%	1,107	1,203	1,289	1,282
CLAY	0.72%	0.75%	0.74%	0.80%	1,512	1,539	1,562	1,625
MARSHALL	0.56%	0.57%	0.62%	0.57%	1,174	1,183	1,295	1,165
JOHNSON	1.02%	0.74%	0.67%	0.59%	2,157	1,514	1,399	1,207
Others (1161 Counties)	7.70%	7.71%	7.46%	7.02%	19,526	19,188	18,849	17,208
Total	209,713	203,569						
¹ Patient may move betwee	¹ Patient may move between different service dates. The county shown is at the date of service.							

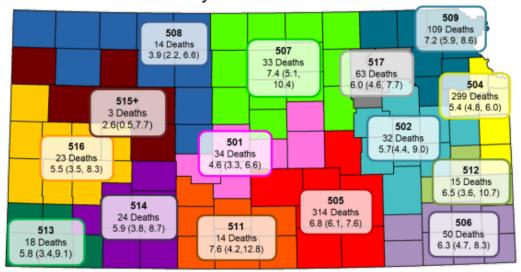
Secondary Research



Maternal and Infant Health Profile

According to the 2021 Kansas Infant Mortality and Stillbirth Report, during 2017 to 2021, Shawnee County had the 4th highest number of infant deaths in the State, at a count of 84, or 8%. It, along with Sedgwick, Johnson, and Wyandotte Counties, accounted for more than half (52.2%) of all infant deaths in the State. Shawnee County had the 3rd highest infant mortality rate during this five-year period, at 8.2 infant deaths per 1,000 live births (CI: 6.5, 8.1), surpassed only by Sumner (9.6) and Harvey (9.2) Counties. As the number of deaths was too small for analysis in many Kansas counties, counties were combined into regions based on their current Public Health Emergency Preparedness Regions (Figure 1). The region with the highest reliable infant mortality rate was the Northeast Corner, at 7.2 deaths per 1,000 live births (95% CI: 5.9, 8.6)³.

Figure I. Infant Deaths and Five-Year Average Mortality Rates* with 95% Confidence Intervals by Kansas Health Preparedness Region, 2017-2021 Rates by Urban/Rural Residence



Kansas Public Health Regions

501 - Central Kansas

505 - KS SC Metro

508 - Northwest BT Region 512 - SEK

515 - WC Pub Health Initiative

502 - EC Coalition 506 - Lower 8 of SE KS

516 - Western Pyramid

509 - Northeast Corner 513 - SW KS Health Initiative 504 - KC Metro 507 - NC KS Pub Health Initiative

511 - SC Coalition

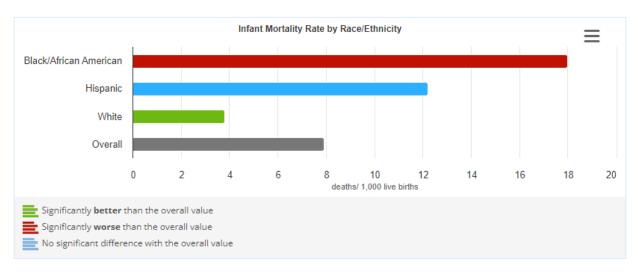
514 - SW Surveillance 517 - Wildcat

*Infant deaths per 1,000 live births.

*Numbers too small to calculate rates (Relative Standard Error > 50%).

Source: Bureau of Epidemiology and Public Health Informatics, Kansas Department of Health and Environment

According to Kansas Health Matters, from 2018 to 2022, the Black population infants in Shawnee County had the highest infant mortality die at a rate of 18 deaths per 1,000 live births, compared to 12.2 in the deaths for Hispanic population infants and 3.8 in the White population deaths for white infants.



The following chart compares Shawnee County with the State of Kansas in different infant and maternal health measures from 2018 to 2022⁴.

Health Indicator	Shawnee County	State of Kansas	
% of Births Where Prenatal Care	75.7%	81.2%	
Began in First Trimester			
% of Premature Births	10.9%	10.1%	
% of Births with Low Birth	8.5%	7.5%	
Weight			
% of WIC Mothers	14.9%	18.2%	
Breastfeeding Exclusively, 2023			
% of All Births Occurring to	7%	4.8%	
Teens (15-19 years of age)			
% of Births Occurring to	49.9%	36.4%	
Unmarried Women			
% of Births Where Mother	11.3%	6.9%	
Smoked During Pregnancy			

Hospitalization/Provider Profile

Understanding provider access and disease patterns is fundamental in healthcare delivery. Listed below are several vital county statistics from the 2023 County Health Rankings.

Health Indicator	Shawnee County	State of Kansas
Preventable Hospital	3,302	2,708
Stay Rate, per 100,000		
Medicare enrollees		
Flu Vaccination % of	62%	51%
Medicare enrollees		
Primary Care	1,390:1 population to	1,260:1 population to
Physicians	physicians	physicians
Dentists	1,500:1 population to	1,610 population to
	dentists	dentists
Mental Health	270:1 population to	450:1 population to
Providers	providers	providers
Mammography	52%	42%
Screening of female		
Medicare enrollees		
ages 65-74		

Chronic Health Status

The following chart lists the percentage of the population on Medicare reported to have common chronic health conditions in 2022, according to Kansas Health Matters. Shawnee County had higher reported percentages for all categories except heart failure, atrial fibrillation, and stroke⁴.

Health Indicator	Shawnee County	State of Kansas		
Hypertension	67%	66%		
Hyperlipidemia	72%	63%		
Diabetes	25%	24%		

Heart Failure	11%	11%		
Chronic Kidney Disease	21%	17%		
COPD	14%	12%		
Atrial Fibrillation	14%	15%		
Cancer	12%	11%		
Osteoporosis	12%	11%		
Asthma	8%	6%		
Stroke	5%	5%		

Mortality Profile

The leading causes of death in Shawnee County, according to Kansas Health Matters, are listed below. Shawnee County had a lower life expectancy than the State average, higher mortality rates for all age-adjusted chronic disease measures than the State, and a lower percentage of alcohol-impaired driving deaths than the State⁴.

Health Indicator	Shawnee County	State of Kansas		
Life Expectancy (years), 2019-	75.7	77 deaths per 100,000		
2021				
Age-Adjusted Cancer Mortality	149.2 deaths per 100,000	148.3 deaths per 100,000		
Rate, 2020-2022				
Age-Adjusted Heart Disease	182.4 deaths per 100,000	170.4 deaths per 100,000		
Mortality Rate, 2020-2022				
Age-Adjusted Chronic Lower	47.7 deaths per 100,000	43 deaths per 100,000		
Respiratory Disease Mortality				
Rate, 2020-2022				
Alcohol-Impaired Driving Deaths	17.7% of driving deaths	19.9% of driving deaths		
%, 2017-2021				

References

- 1. https://www.countyhealthrankings.org/health-data/kansas?year=2023&tab=0
- 2. https://www.khi.org/wp-content/uploads/2024/03/Shawnee-County-2024.pdf
- 3. https://www.kdhe.ks.gov/DocumentCenter/View/29631/Infant-Mortality-Report-2021-PDF
- 4. https://www.kansashealthmatters.org

Conclusion and Next Steps:

Upon completion of the 2024 CHNA process, Shawnee County now has a clear line of sight to the work ahead of us. The community defined our top four priority areas: Behavioral Health (Mental health and Substance Abuse), Neighborhood Safety and Housing, Healthy Eating, and Health Equity. While these topics are not small in scale by any means, they are the correct work in which the community needs to engage to achieve healthier outcomes.

Starting in the last quarter of 2024 and into 2025, the community will enter into a Community Health Improvement Planning (CHIP) process, focused on creating actionable and specific interventions targeted at the identified CHNA priority areas. The CHIP will be drafted in detail to add specific strategies and interventions required to help meet the corresponding goals and objectives. For the dedicated organizations of the Shawnee County community that will engage in this health improvement work, led by LiveWell Shawnee County, this will entail a commitment to work collaboratively to achieve a collective impact on the priorities identified in the 2024 Community Health Needs Assessment.

If you would like to be part of this important work moving forward, please contact Sarah Karns: skarns@livewellsnco.org

Appendix

Appendix I- Full Survey (English and Spanish)

2024 Community Health Needs Assessment

Ge	nera	l Inforn	nation										
	1.	Do you	ı live in Shaw	nee Coun	ty? 🗌 Ye	s 🗆 No {Ends t	he surve:	γ}					
	2.	What i	s the ZIP cod	le of your l	nome ad	dress? □66402	□66409	□66533	3 □66	539 🗆	66542 🗆	166546	□66603
	□66604 □66605 □66606 □66607 □66608 □66609 □66610 □66611 □66612 □66614 □66615 □66										□66616		
		□6661	7 🗆 66618 🛭	366619 □	56621 🗆	66622							
He		Care											
	3.	Where do you USUALLY go, when you or members of your household need basic, NON-EMERGENCY medicates (Mark only one.)											Y medical
		oid not	eek medical	care	□Eme	□Emergency department					□Immediate/ Express care		
		Vonprof	it Communit	y clinic	□Priva	te clinics				☐Personal/private doctor			
		Other: S	pecify		□Reta	il Provider (Am	azon, Wa	almart, C	VS)				
					<u> </u>			1.v 🗆	<u>.</u>		/T		
	4.			nousenoi	a covered	d by health insu	ırance₁∟	ı Yes ∟ı	NO IT NO	o, wny	(100 ex	pensive,	work doesn't
		offer, etc.) a. If YES: What types of coverage do you have? (Mark all that apply.)											
		;		at types of	<u>-</u>		(Iviair ai	r triat ap			···		1
		·	dicaid			Tricare	(DI	DI			pecify: _	<u>)</u>	
		IVIE	ulcare		-	Private insura	ice (Blue	CIOSS BI	ue Sili	eia, ei	c.)		
	5.	In the	past 12 mon	ths, did yo	u or anyo	one in your hou	isehold n	eed any	of the	follow	ing serv	ices:	
			Counseling	g – behavio	ral/men	I/mental healthcare ☐Yes ☐No							
			Dental care	2			□Yes	□No	If YES,	ΈS,	□Yes	□No	
			Medical ca	· -			□Yes	□No	was that	□Yes	□No		
	Quitting tobacco/nicotine						□Yes	□No		ire	□Yes	□No	
	Substance/opioid use						□Yes	□No	received?	□Yes	□No		
			Prescriptio	n Medicat	ion		□Yes	□No	<u> </u>		□Yes	□No	
			If you did r	not receive	care, wh	ny not?							
			□Care was	s not availa	able	□Care v	vas too e	xpensive	. 🗆	Did not	t seek ca	re	
			☐ My lang	uage was	not avail	able. 🗆 Lack o	f transpo	rtation		Other:	(Specify)	
			,								,	—′	
	6.	For eac	ch of the foll	owing hea	Ith proce	dures, please i	ndicate t	he last ti	me vo	u vour	self had	the pro	cedure done.
Γ				In the pa		In the last 1-5		e than 5		Never		,	applicable
months				years		year	rs ago						
	Blood pressure check												
	Dental screening												
	Flu vaccine COVID vaccine												
Mammogram 🔲													
	Рар	smear											
[Pros	tate ex	am										

 For each concern listed below, please share if - in the past 12 months - it has been a major concern, a moderate concern, a minor concern, or not a concern for your household.

#	Health or Social Concerns	Major	Moderate	Minor	Not a	Don't	Was
		Concern	Concern	Concern	Concern	Know	unavailable
1	Access to fresh fruits and vegetables						
2	Access to opportunities for physical activity						
3	Access to voting						
4	Adult basic education (job skills,						
	computers, literacy, etc.)						
5	Adult day care services						
6	Assistance to active military						
7	Assistance to military dependents						
8	Assistance to military veterans						
9	Before/after school services						
10	Bullying						
11	Commercial Tobacco Use						
12	Up to date information about						
	available community services						
13	Disaster response including shelter						
14	Domestic/family violence						
15	Environmental pollution/recycling						
16	Financial assistance (housing/utility)						
17	Financial assistance (medical, dental, behavioral health care)						
18	Financial/credit counseling (Including housing)						
19	Food assistance						
20	Home repair/safety						
21	Home/meal delivery services for homebound individuals						
22	Homelessness						
23	Human/sex trafficking						
24	Immunizations (both adult and child)						
25	Infant/child care, including daycare						
26	Injury prevention devices (bike helmets, etc)						
27	Job training/retraining assistance						
28	Juvenile delinquency						
29	Gang Activity						
30	Legal assistance						
31	Mental Health Concerns (Depression/ Anxiety)						
32	Mentoring for children/youth						
33	Child Obesity						
34	Adult Obesity						
35	Support to Transition into Community						
36	Neighborhood safety						
50	ricigilborriood surcty			L L			u u

	Health or Social Concerns	Major	Moderate	Minor	Not a	Don't	Was
		Concern	Concern	Concern	Concern	Know	unavailable
37	Opportunities for social interaction						
38	Parenting education/support						
39	Resources for caregivers/respite care						
40	Safe, affordable, accessible housing						
41	Sexual assault						
42	Student classroom attendance						
43	Substance use (i.e. opioid, alcohol)						
44	Enough options for healthy eating						
45	Treatment for Chronic Conditions (i.e.						
	Diabetes)						
46	Tutoring for children/youth						
47	Unintentional injuries (accidents, falls, etc.)						
48	Unplanned pregnancy						
49	Vaping						
50	Youth development/character						
	building programs						
	a. If NO: Are you: □ Disabled □ In the past 12 months, has anyone in workforce reduction? □Yes □No OTHER CONCERNS of importance to y	your house ou <u>in the p</u>	chold been laid	off from any	/ job due to	the econom	
1	O. Did you get Prenatal care during your have during your pregnancy? I If so, how many weeks into pregnancy doctor?	most rece	nt pregnancy?	□Yes □No H	low many t	otal checkur	
	a. Less than 8 weeks b. 8-20 weeks c. 21-30 weeks d. More than 30 weeks						
	 Since your new baby was born, have y regular health checkup you have 12 w Did any of these things keep you from 	eeks after/	giving birth. 🗆	Yes □No			
	 a.	y or insura ent when I	nce to pay for t wanted one		the appoint	ment	
	e. □ I couldn't take time off fro f. □ Reason Not Listed Above	m work or	school/ had to	o many thing			

Demo	ogra	phi	CS

This section of the survey asks for demographic information so that we are certain our respondents reflect the entire community. Your responses will remain anonymous. No individual surveys will be shared. All information will be summarized for analysis and reporting.

14.	To which age gr	oup do you curr	ently belong?
	□Under 18	□35-44	□65-74
	□18-24	□ 45-54	□75-84
	□25-34	□55-64	☐85 or older
15.	What is your pre	eferred gender i	dentity:
	□Male	□Non-binary	
	□Female	$\square Transgender$	
16.	Are vou Hispani	c? □Yes □No	

 Which (Ethnicity)categories describe you? Mark all boxes that apply. Note, you may report more than one group.

☐American Indian or Alaska Native

Alaska	Kickapoo	Iowa Tribe	Sac & Fox
Native	Tribe of	of Kansas	Nation of
	Indians of	and	Missouri
	the	Nebraska	(Kansas and
	Kickapoo		Nebraska)
	Reservation		
	in Kansas		
Cherokee	Prairie	Unknown	Other
Nation	Band		
	Potawatomi		
	Nation		

∟Asian				
Asian	Japanese			
Indian				
Chinese	Korean			
Filipino	Vietnamese			
Unknown	Other			

☐ Black or African American

African	Nigerian
American	
Ethiopian	Somali
Haitian	Other
Jamaican	Unknown

☐ Hispanic, Latino, or Spanish ☐ Middle East/NA

Colombian	Puerto
	Rican
Cuban	Salvadoran
Dominican	Other
Mexican or	Unknown
Mexican	
American	

Algerian	Moroccan
Egyptian	Syrian
Iranian	Other
Lebanese	Unknown

□Native Hawa		r	□White o	r Caucasiar	n
acific Islande	Г				
Chamorro	Samoan		English	Italian	Ukrainia
Fijian	Tongan		French	Polish	Other
Marshallese	Other		German	Scottish	Unknow
Native	Unknown		Irish	Swedish	
Hawaiian					
□Oth	er (Specify: _		_)		
18. What i	is your highe	st	level of ed	lucation?	
□Som	ne high schoo	ol	□ Vocati	onal/Tech	School
□GED)		☐High so	hool gradu	ıate
□Som	ne college				
	ege graduate	e			
	t-graduate e		ıcation		
	is your prefe			language?	
	nany people		-		_
	ople (total)			, , , , , , , , , , , , , , , , , , , ,	
	nany are adu	ılts	s age 65 ve	ars and old	der?
	e sure to inc				
	nany are chil		-		
	ildren		`	,	,
_					
21. Counti	ing income f	ro	m all sourc	es for ever	yone
living i	n your house	eh	old. which	category b	elow
_	ents your be		-	· .	
	e for 2023:		ne tax ann	aai 110asci	1010
	than \$10,00	20	□¢so	000-74,999	
	,000-14,999	JU		000-74,555	
	,000-24,999),000-149,9	
	,000-34,999),000-199,9	
-	,000-49,999		⊔\$200),000 or mo	ore
□Don	't know				

Evaluación de las necesidades de salud de la comunidad para 2024

Inf	orma	ación general								
	1.	¿Vive en el condado de S	hawnee? 🗆 s	Sí 🗆 No {Ends t	he surv	ey if not i	n Geary Cou	nty}		
	2.	¿Cuál es el código postal	de la direcció	n de su casa?	□6640	02 □6640	9 □66533 □	166539	⊒66542 [☐66546
		□66603 □66604 □6660	05 □66606 □	66607 □66608	3 □6660	9 □6661	0 □66611 □	66612 [⊒66614 [☐66615
		□66616 □66617 □6661	18 □66619 □	66621 □66622	2					
Ate	enció	on médica								
	3.	¿A dónde acude HABITU	ALMENTE cua	ndo usted o los	miemb	ros de su	familia nece	sitan at	ención m	édica básica
		que NO SEA DE EMERGEI	NCIA? (Marqu	e solo una opc	ión).					
	\square N	lo busqué atención médic	a	□Sala de eme	rgencia	S	□Ate	nción in	mediata/e	exprés
ĺ	□с	línica comunitaria sin fine	s de lucro	□Clínicas priv	adas		□Mé	dico per	sonal/priv	/ado
İ	Пο	tro: (Especificar:)		☐ Proveedor n	ninorist	3				
				(Amazon, Walı	mart, C\	/S)				
	4.	¿Todos los miembros de	su familia tier	nen cobertura o	de segur	o de salu	d? □ Sí □ No	o. Si la re	espuesta (es NO, ¿por
		qué? (Demasiado caro, n	ni trabajo no l	o ofrece, etc.)						
		a. Si la respuesta es	SÍ, ¿qué tipo	s de cobertura	tienen?	(Marque	todas las op	ciones o	que corres	pondan).
		□Medicaid		Tricare			□Otro: (Es	pecifica	r:)	
		□Medicare		Seguro privado	o (Blue 0	Cross Blue	Shield, etc.)			
	5.	En los últimos 12 meses,	mos 12 meses, ¿usted o alguien de su familia necesitó alguno de los siguientes servicios?							
		Asesoría: atención mé	dica conductı	ıal o mental	□Sí	□No	Si la	□Sí	□No	
		Atención dental			□Sí	□No	respuesta	□sí	□No	
		Atención médica			□Sí	□No	es Sĺ, ¿se	□sí	□No	
		Ayuda para dejar el ta	baco/la nicoti	na	□Sí	□No	recibió	□sí	□No	
		Atención por uso de su	ustancias y op	ioides	□sí	□No	esa	□sí	□No	
		Medicamentos receta	dos		□Sí	□No ate	atención?	ención? □Sí	□No	
		Si no recibió atención,	¿por qué no	?						
		☐ No estaba disponib	le	□La atención	era muy	/ costosa	□No b	usqué a	tención	
		☐ Mi idioma no estab	a disponible	□Falta de trai	nsporte		□Otro	: (Espec	ificar)
								. (25,522		_/
	_	Para cada uno de los sigu	iontos prosos	dimiontos mádi	icac ind	ائد دا میروز	tima voz avo	so lo so	alizaron	
i	····	rara cada uno de los sigu	En los	En los último		e más de			No ar	lica
			últimos	1 a 5 años	año		Nunca		140 0,	JIICU .
			12 meses	1 4 5 4 1105	0.110	,,,				
-	Cont	trol de presión arterial		† 						
İ	Eval	uación dental								
-	Vacu	ına contra la influenza								
ŀ	Vacu	ına contra la COVID		15						
-	Man	nografía		† 						
-		nicolau								
ŀ		nen de próstata		† 						

7. Comparta si, <u>en los últimos 12 meses</u>, cada una de las cuestiones mencionadas abajo ha sido una preocupación importante, moderada, menor o nula para su familia.

44	Constitute, moderada, men	· · · · · · · · · · · · · · · · · · ·		D	D:/	NI-	NI4-b-
#	Cuestiones sociales o de	Preocupación	Preocupación	Preocupación	Preocupación	No	No estaba
	<u>salud</u>	importante	moderada	menor	nula	sé	disponible
1	Acceso a frutas y verduras frescas						
2	Acceso a oportunidades para realizar actividad física						
3	Acceso a votación						
4	Educación básica para adultos						
	(habilidades para el trabajo,						-
	computadoras, alfabetización,						
	etc.)						
5	Servicios para el cuidado						
	diurno de adultos		_	_		_	-
6	Asistencia a militares en						
	servicio						-
7	Asistencia a dependientes de						
	militares						
8	Asistencia a veteranos de las						
L	fuerzas armadas						
9	Servicios antes/después de						
	clases						
10	Acoso						
11	Consumo de tabaco de venta						
	libre						
12	Información actualizada						
	acerca de servicios						
	comunitarios disponibles						
13	Respuesta en caso de						
	desastre, incluso refugio						
14	Violencia doméstica/familiar						
15	Contaminación						
	ambiental/reciclaje						
16	Asistencia financiera						
	(vivienda/servicios públicos)						
17	Asistencia financiera (atención						
	médica, odontológica, de salud						
	conductual)						
18	Asesoría financiera y crediticia						
	(incluyendo vivienda)						
19	Asistencia alimentaria						
20	Reparación/seguridad en el						
L	hogar						
21	Servicios de entrega de						-
21	Servicios de entrega de comidas a domicilio para						
21	Servicios de entrega de comidas a domicilio para personas confinadas en el						
	Servicios de entrega de comidas a domicilio para personas confinadas en el hogar						
22 23	Servicios de entrega de comidas a domicilio para personas confinadas en el						

	Cuestiones sociales o de	Preocupación	Preocupación	Preocupación	Preocupación	No	No estaba
	salud	importante	moderada	menor	nula	sé	disponible
24	Vacunas (tanto para adultos						
	como para niños)						
25	Cuidado de bebés/niños,						
2.5	incluyendo guardería					_	
26	Dispositivos para la prevención de lesiones	П					
	(cascos para bicicletas, etc.)						
27	Asistencia en capacitación y						
	readaptación laboral					_	
28	Delincuencia juvenil						
29	Actividad entre pandillas						
30	Asistencia legal						
31	Problemas de salud mental						
	(depresión/ansiedad)						
32	Tutoría para niños, niñas y						
2.2	jóvenes	_				_	
33	Obesidad infantil						
34	Obesidad adulta						
35	Apoyo a la transición a la comunidad						
36	Seguridad en el vecindario						
37	Oportunidades de						
	interacción social						
38	Educación/apoyo para padres						
39	Recursos para cuidadores/						
L_	atención de relevo						
40	Vivienda segura, asequible y accesible						
41	Agresión sexual						
42	Asistencia de estudiantes al						
	salón de clases	_]	1		
43	Consumo de sustancias (por						
	ejemplo, opioides, alcohol)						
44	Opciones suficientes para						
	comer de forma saludable						
45	Tratamiento para afecciones						
46	crónicas (por ejemplo, diabetes)						
46	Tutoría para niños/jóvenes Lesiones involuntarias						
4/	(accidentes, caídas, etc.)						
48	Embarazo no planeado						
49	Vapeo						
50	Programas de desarrollo						
	juvenil y de formación de la	_]	1		
	personalidad						

Ingreso	os y apo	yo
8.	_	empleo actualmente? □ Sí, de tiempo completo □ Sí, de medio tiempo □No Si la respuesta es NO, indique si usted es: □ Discapacitado □ Jefe de familia/Se queda en casa □ Jubilado □Estudiante □ Desempleado
9.		últimos 12 meses, ¿han despedido a alguien de su familia debido a la reducción de la economía o de la de trabajo? □Sí □No
	OTRAS	CUESTIONES de importancia para usted <u>en los últimos 12 meses</u> :
Embar	azo y po	sparto: <u>Solo responda las preguntas 10 a 13 si estuvo embarazada en los últimos 12 meses</u>
10		ió atención prenatal durante su último embarazo? □Sí □No ¿Cuántos controles médicos totales se durante el embarazo?
11		spuesta es SÍ, ¿cuántas semanas de embarazo tenía cuando se realizó el primer control de embarazo por
	parte d	le una partera o un médico?
	a.	Menos de 8 semanas
	b.	8-20 semanas
	c.	21-30 semanas
	d.	Más de 30 semanas
12	. Desde	que nació su nuevo bebé, ¿se ha realizado un control posparto para usted? El control posparto es un
	contro	l de salud regular que se realiza 12 semanas después de dar a luz. □Sí □No
13	Algunغ .	o de estos factores le impidió hacerse un control prenatal y posparto? Marque TODAS las que correspondan
	a.	□ No sabía que necesitaba uno/Me sentía bien
	b.	□ No tenía suficiente dinero o seguro para pagar la visita
	c.	☐ No pude conseguir una cita cuando quería
	d.	□ No tenía transporte/No tenía a nadie que me llevara a la cita
	e.	☐ No podía pedir permiso en el trabajo o la escuela/Estaba muy ocupada
	f.	☐ Motivo no mencionado anteriormente:

Dame	-	-4	ж.
Demo	gr	aı	lc

En esta sección de la encuesta, se solicita información demográfica para asegurarnos de que nuestros encuestados reflejan a toda la comunidad. Sus respuestas se mantendrán anónimas. No se compartirán encuestas

idividuales. Toda la información se resumira para fines de					
nálisis y elaboración de informes.					
14. ¿A qué grupo etario pertenece actualmente?					
\Box N	1enos de 18 □35-4	4 🗆	65-74		
□1	8-24 🗆 45-5	4 🗆	75-84		
□2	5-34 🗆 55-64	4 🗆	85 o mayor		
15. Cuá	l es su identidad de	género pre	ferida:		
□н	lombre 🗆 No b	inario			
	/ujer □Trans	sgénero			
	usted hispano/a? □	_			
	, , , , , , , , , , , , , , , , , , , ,				
17. ¿Qu	ié categorías (étnica	s) lo descri	ben? Marque		
toda	as las casillas que co	rrespondar	n. Tenga en		
cue	nta que puede perte	enecer a ma	ás de un grupo.		
□Indio americano o nativo de Alaska					
Nativo	Tribu de indios	Tribu	Nación Sac y		
de	Kickapoo de la	Iowa de	Fox del Misuri		
Alaska	reserva Kickapoo	Kansas y	(Kansas y		
	en Kansas	Nebraska	Nebraska)		
_					
Nación	Nación Prairie	Ninguna	Otro		
Cheroquí	Band Potawatomi				

□Asiático		
	Japonés	
co		

Indio	Japones
asiático	
Chino	Coreano
Filipino	Vietnamita
Ninguna	Otro

□Hispano, latino o español

Haitiano Otro Jamaiquino Ninguna

 \square De Oriente Medio/NA

☐ Negro o afroamericano

Afroamericano

Etíope

Colombiano	Puertorriqueño
Cubano	Salvadoreño
Dominicano	Otro
Mexicano o	Ninuga
méxicoamericano	

Argelino	Marroquí
Egipcio	Sirio
Iraní	Otro
Libanés	Ninuga

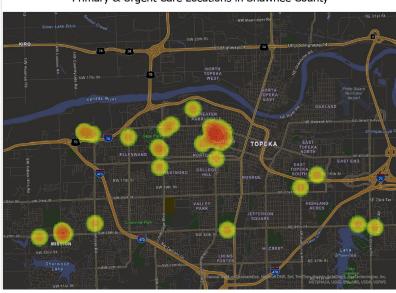
Nigeriano

Somalí

sleño del Pac Chamorro	Samoano	Inglés	Italiano	Ucrania
Fiyiano	Tonga	Francés	Polaco	Otro
Marshalés	Otro	Alemán	Escocés	Ningun
Nativo de	Ninuga	Irlandés	Sueco	
Hawái				
□Otr	o (Especificar	:)		
18. ¿Cuál cursa	es el nivel má do?	is alto de ec	lucación qu	ue ha
□Sec	undaria incon	npleta		
□ Esc	cuela de form	ación profe	sional/técn	ica
	loma GED		,	
	undaria comp	leta		
	versitario inc			
	versitario con	npieto		
	grado			
	es su idioma		_	
	itas personas		imente en	su casa :
	ersonas (en to			
	itos son adult			
	segúrese de i			
	ntos son niños	(menores o	de 18 años))?
n	iños			
21. Consi	derando toda	s las fuente	s de ingres	os de
todas	las personas	aue viven e	n su hogar.	¿cuál

Considerando todas las ruentes de ingresos de				
todas las personas que viven en su hogar, ¿cuá				
de las siguientes categorías representa el				
ingreso anual del grupo familiar				
correspondiente a 2023 antes de impuestos?				
☐Menos de \$10,000	□\$50,000-74,999			
□\$10,000-14,999	□\$75,000-99,999			
□\$15,000-24,999	□\$100,000-149,999			
□\$25,000-34,999	□\$150,000-199,999			
□\$35,000-49,999	□\$200,000 o más			
□No sé				

Appendix II- List of Health Services



Primary & Urgent Care Locations in Shawnee County

Stormont Vail Hospital

1500 SW 10th Avenue

Topeka, KS 66604

The University of Kansas Health System

St. Francis Campus

1700 SW 7th St.

Topeka, KS 66606

GraceMed Capitol Family Clinic

1400 SW Huntoon St

Topeka, KS 66604

GraceMed Highland Park Family Clinic

2025 SE California Ave

Topeka, KS 66607

Pine Ridge Family Health Center

2721 SE 10th St.

Topeka, KS 66607

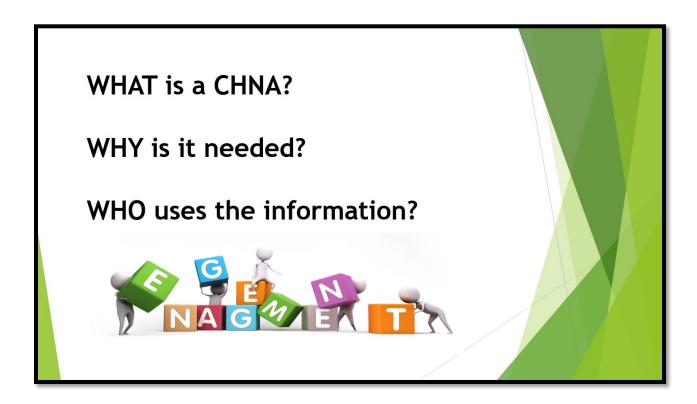
Topeka Veteran Affairs Medical Center

2200 SW Gage Blvd.

Topeka, KS 66622

Appendix III- Roundtable Slide Deck





A variety of input is gathered:

- Roundtables
- Formal Surveys
- Data Analysis
- Town Hall Meeting

Findings lead to development of a Community Health Improvement Plan



Current CHIP priority area work:

- Behavioral Health: Leadership Involvement
- Access to Food: KSU Interactive Food Map
- Substance Abuse: KS Fights Addiction Grant Receipt, SCHD Developing Overdose Surveillance Dashboard
- Health Equity: Whole Family Coalition 2Gen Grant Application, STI Workgroup, SVH Team Birth, UW Strategy Development



Today we hope you will:

- Think outside the box
- Be truthful with your responses there are no right/wrong answers
- Be assured your feedback is applied to aggregate information.

Please introduce yourself using your first name and zip code.

Five Questions for Discussion:

1) What are Shawnee County's <u>strengths</u> when it comes to health?



2) On a scale of 1-5, with 1 being poor and 5 the best, how would you rate the overall quality of healthcare delivery in Shawnee County? Why?

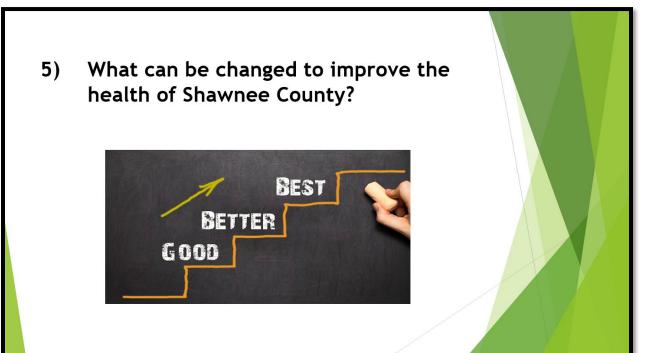
Healthcare includes all aspects of <u>care</u>: ED, primary care, specialty care, mental health, dental, optometry, etc...)



3) What worries you about the health of our county?

4) What are the <u>top three underlying reasons</u> for Shawnee County's overall health concerns? Why?

- · Lack of Access to Food
- · Lack of Transportation
- Physical Inactivity
- · Chronic Stress and Anxiety
- Community Violence
- · Addiction/Substance Use: Alcohol, Drugs, Tobacco
- · Financial Resource Strain
- Lack of Education/Skills Training
- · Lack of Access to Healthcare
- · Lack of Safe/Affordable Housing
- · Lack of Neighborhood Resources
- Obesity
- Lack of Access to Maternal/Child Healthcare
- Mental Health



Appendix IV- Currently Available Behavioral Health Community Resources

AARP 1-866-448-3619

Provides resources and support for behavioral health, including mental health education, counseling services, and wellness programs tailored to older adults.

Adult Protective Services Topeka Service Center 1-800-922-5330

Investigates reports of abuse, neglect, and exploitation of vulnerable adults and provides interventions to ensure their safety and well- being.

Aging and Disability Resource Center 1-855-200-2372

Offers information, assistance, and support to help older adults and individuals with disabilities navigate services and maintain their independence.

Alcoholics Anonymous 785-409-3072

A worldwide fellowship that offers support and a 12- step program to help individuals achieve and maintain sobriety from alcohol addiction.

Alzheimer's Association Heart of America Chapter 1-800-272-3900

Offers support groups, education, & resources for managing emotional & psychological challenges faced by individuals with Alzheimer's & their caregivers.

American Chronic Pain Association 785-235-2126

Provides peer-led groups, educational resources, and tools to help individuals manage emotional and psychological impacts of living with pain.

Brain Injury Association Support Group 785-207-2606

Offers groups that provide a safe space for individuals with brain injuries and their families to share experiences and access coping resources.

Breakthrough House, Inc 785-232-6807

Offers mental health services, including housing, peer support, and recovery programs, to individuals living with mental illness.

Cotton O'Neil Cancer Support Group 785-354-5300

A social work facilitated but member led group that meets every Monday at 11am (except holidays), to discuss treatment and life topics and for support from peers.

Compassionate Friends 785-272-4895

Support for families after the death of a child at any age.

<u>Divorce Care</u>-Topeka 785-234-5545 (sessions from September- December)

A weekly ministry support group were caring people come alongside you as you find healing from the pain of separation or divorce.

Families Together 1-800-264-6343

Parent training, information, and family-to-family health care center, dedicated to assisting Kansas parents and their sons and daughters with disabilities and/or special health care needs.

Family Service and Guidance Center 785-232-5005

Provides behavioral health care to children and families.

Florence Crittenton Services of Topeka 785-233-0516

Empowering families through a continuum of behavioral health services to increase hope, relieve distress, and achieve promising futures.

Friends of Recovery (Oxford Houses) 1-800-722-0366

Support and collaboration with Oxford Houses in Kansas, which are self-supporting, democratically operated homes for recovering individuals.

GraceMed Health Clinic 785-861-8800

Show and sharing the love of Jesus Christ by providing compassionate, accessible, high-quality health care for residents in the communities we serve.

Grief and Loss Support Group at Midland 785-232-2044

Providing education about the grief process, an opportunity to share experiences, and the chance to discover ways to help oneself and loved one's journey through grief.

Kansas Children's Service League 1-877-530-5275

To protect and promote the wellbeing of children.

Kansas Department for Aging and Disability Resource Center 1-800-432-3535

Fostering an environment that promotes security, dignity and independence for all Kansas.

Kansas Medical Society Professional Health Program 1-800-332-0156

Serves physicians and physician assistants in a range of concerns that impact the lives of those caring for patients.

<u>Kansas National Guard Joint Substance Abuse Prevention Program</u> 785-861-3933

To provide prevention training, outreach to military families, and treatment resources to military members to increase military discipline, individual performance, and combat readiness.

Keys for Networking 1-800-499-8732

Supports and mobilizes families of children with emotional/behavioral problems and the schools and agencies serving them through training, education, advocacy and system change.

KVC Kansas 785-409-6801

Enriching and enhancing the lives of children and families by providing medical and behavioral health care, social services and education.

LifeHouse Child Advocacy Center 785-232-5433

Bringing together people & resources to protect the physical &emotional wellbeing of children.

Midland Care – 1-866-394-3600

Meeting individual needs through innovative care solutions.

Mirror Inc 785-267-0561

Through broad-based partnerships, we will provide substance abuse, correctional, and other community health and human services to people in need.

Mothers Against Drunk Driving 1-800-443-6233

To stop drunk driving and support victims of this violent crime and prevent underage drinking.

Narcotics Anonymous 1-855-732-4673

4015 SW 21st St, Topeka, Back Entrance Thursdays @ 7:30pm

NAMI Kansas 785-233-0755

Dedicated to improving the lives of those affected by mental illness by providing leadership and working in partnership with local affiliates to ensure peer support, advocacy and education.

New Beginnings Health Care, PA 785-233-7138

New Beginnings helps people restore balance in their lives, offering a safe place where people can be heard and understood.

New Dawn Wellness and Recovery Center 785-266-0202

Providing the best service possible for those with substance abuse, addictions, or gambling problems.

Pathway Family Services LLC 785-783-8438

We offer comprehensive mental health and substance abuse treatment for youth.

Prevention & Resiliency Services 785-266-8666

A voluntary health organization committed to helping make our community a place where people of all ages are safe, connected, & free from the effects of crime & substance abuse.

SENT 785-783-2535

Community development non-profit that intentionally walks with neighbors through loving relationships and strategic development to accomplish holistic transformations of neighborhoods in Shawnee County.

Sims-Kemper Clinical Counseling 785-233-0666

A regional resource providing evaluation, education and treatment for problems with alcohol, drugs and/or gambling.

Stormont Vail Behavioral Health Services 785-270-4600

Offers inpatient and outpatient care, and short-term intervention and ongoing therapy for children, teenagers, adults, and seniors.

Sunshine Connection 785-232-0315

Dedicated to serving consumers with severe and persistent mental health challenges.

Valeo Behavioral Health Care 785-234-3300

Provides individuals seeking mental wellness with a supportive environment fostering personal growth.

Veterans Affairs Easter Kansas Health Care System 785-350-3111

Providing accessible, courteous, comprehensive, and quality health care to Veterans.

Villages 785-267-5900

Provide emotionally support for families and homes for children in need and teaches children about conserving and preserving our natural environment.

Appendix V- Currently Available Neighborhood Safety and Housing Resources

American Red Cross KS Capital Area Chapter 1-866-990-9910

Prevents and alleviates human suffering in the face of emergencies by mobilizing the power of volunteers and the generosity of donors.

Catholic Charities of NE Kansas 785-233-6300

A faith-based organization, inspired by God's love and compassion to provide unconditional love and help people of all faiths by stabilizing and strengthening individuals and families in need across the 21 counties of Northeast Kansas.

City of Topeka Animal Control 785-368-9203

Enforcement of various city ordinances regarding animals including the leash law, vaccination, licensing, the cruelty ordinance and checking on neglected or abused animals.

City of Topeka Burglary/Theft 785-368-9544

Committed to providing a safe environment for the citizens who live, work and play in our capital city.

City of Topeka Code Enforcement 785-368-3161

Committed to providing a safe environment for the citizens who live, work and play in our Capital City.

Shawnee County Crime Stoppers 785-368-9413

Promotes community participation in the apprehension of criminals, offering rewards and encouraging citizen responses to crime and violence by motivating the public to cooperate with law enforcement.

City of Topeka Crime Victims Assistance 785-368-9064

Provide crime victims with timely information, advocacy, and referrals to services.

City of Topeka Fire Department 785-368-4000

To protect lives and property, and to provide leadership and excellence in the following areas: fire, rescue, emergency medical response, fire prevention, and public education.

City of Topeka Police Department 785-368-9551

Committed to providing a safe environment for the citizens who live, work and play in our Capital City.

City of Topeka Neighborhood Relations 785-368-3711

Improve the city's partnerships with neighborhoods, citizens, and community stakeholders.

Community Action, Inc 785-836-4500

Helping people move from poverty toward prosperity through economic, social, and policy opportunities.

City of Topeka Planning Department 785-368-3728

Creating a vibrant city of lasting value by engaging community through neighborhood revitalization, sustainable land use and infrastructure choices, transportation planning, historic preservation, and zoning administration.

Community Resources Council 785-233-1365

To bring resources together through collaboration, advocacy, research and education.

Cornerstone of Topeka 785-232-1650

Interrupting the cycle of homelessness by providing decent, safe, accessible and affordable housing of choice to moderate & low-income households, & revitalizing Topeka neighborhoods.

Critter Care of Topeka 785-478-9985

A volunteer non-profit organization dedicated to stopping pet overpopulation. We promote the spaying and neutering of pets to reduce animal suffering caused by overpopulation.

District Attorney 785-251-4330

Ensuring justice, protecting rights, and supporting victims and witnesses.

Emergency Dispatch 785-368-9200 or 785-251-2200

A link between citizens and emergency responders, and ensuring the safety of life and property.

Environmental Health Services SCHA 785-251-5608

To protect and improve the health and environment of all Kansans.

Habitat for Humanity, Inc 785-234-4322

Builds homes, hope and community by increasing strength, stability and self-reliance through shelter.

Housing and Credit Counseling, Inc. 1-800-383-0217

To counsel and educate all people to achieve their personal housing and financial goals.

Kansas Legal Services 785-354-8531

Providing individual legal assistance to low-income residents of Shawnee, Douglas, Jefferson, Osage, and Wabaunsee counties who would be otherwise unable to afford legal counsel.

Kansas State Fire Marshall Y-Fire Program for child fire setters 785-296-3401

Helping boy & girls involved with unsupervised, experimental, mischievous or illegal use of fire.

Kansas Traffic Safety Resource office 1-800-416-2522

Providing information and education to protect Kansans from avoidable injury or death on roadways.

Resource Center for Independent Living, Inc 1-877-719-1717

Committed to working with individuals, families and communities to promote independent living and individual choice to persons with disabilities.

Safe Streets Prevention and Recovery Services 785-266-4606

To create a healthier community by addressing substance abuse and crime, through prevention education and citizen empowerment.

SENT 785-783-2535

A community development non-profit intentionally walking with neighbors through loving relationships and strategic development to accomplish holistic transformations of neighborhoods in Shawnee County.

Shawnee County Conservation District 785-338-9946

Promote a voluntary program of education, planning and application of conservation practices to conserve and protect our soil and water.

Shawnee County Emergency Management 785-251-4152

To create, develop and maintain a resilient community throughout all of Shawnee County.

Shawnee County Parks + Recreation 785-251-6800

Improving quality of life for residents by proactively responding to changing demographics, & emerging trends while maximizing available resources in providing quality parks & recreation facilities & programs that enhance health, promotes economic vitality and long-term sustainability now & future generations.

Shawnee County Sheriff's Office 785-368-2265 or 785-251-2200

Full time law enforcement services including patrol, traffic, animal control & criminal investigation.

Sheltered Living 785-233-2566

Supports the efforts of individuals with diverse abilities to achieve independence and actively participate in the community.

SVH Sexual Assault Nurse Examiner and Sexual Assault Response Team 785-354-6107

An immediate, compassionate, multi-disciplinary team response to victims of sexual assault or abuse.

Topeka Housing Authority 785-357-8842

To successfully provide accessible, affordable housing.

Topeka Independent Living Resource Center/Lewis Curtis Center 1-800-443-2207

Committed to working with individuals, families and communities to promote independent living and individual choice to persons with disabilities.

Topeka North Outreach 785-286-1370

A group of churches in Oakland and North Topeka dedicated to serving Christ by reaching out and meeting the needs of our communities.

Topeka Rescue Mission 785-354-1744

A non-denominational Christian organization dedicated to helping homeless neighbors providing emergency shelter, meals, clothing and other items, programs, and services, to homeless men, women, and families, as well as providing food and other necessities to those in need.

Topeka Youth Project Youth Court 785-273-4141

First time traffic tickets referred to the youth court by the district attorney and city attorney.

Washburn University School of Law 785-670-1191

To contribute to the education and development of law students into thoughtful, skilled ethical attorneys by providing them with the opportunity to practice law and represent clients while under the personalized supervision of an experienced faculty attorney.

YWCA Center for Safety and Empowerment 1-800-822-2983

Providing free and confidential services to victim-survivors of domestic and sexual violence, human trafficking and stalking in Shawnee, Jackson, and Wabaunsee Counties in Kansas.

Villages 785-267-5900

To provide emotionally supportive families and homes for children in need and to teach children about conserving and preserving our natural environment.

Appendix VI- Currently Available Healthy Eating Community Resources

4-H Youth Development 785-232-0062 ext 111

Services for youth development and educational programs including food and nutrition.

Auburn Community Action 785-836-4500

Programs and services that support low incomes individuals and families. Offer meals for children, free monthly food pantries in the Auburn community and food boxes.

Be Filled of South Topeka 785-861-0766

Provide clothing, hygiene products, and non-perishable food items at no cost. Offer services such as youth mentorship, recovery support and career readiness.

Bods Feeding Bods 785-670-3865

Provide free groceries, household items, hygiene products, and school supplies. Available to all Washburn Students, Washburn tech students and Washburn employees.

Catholic Charities of NE Kansas 785-233-6300

Emergency assistance for food by hosting drive-up mobile food distributions, free kids summer program, and a resource bus with food and hygiene items.

Community Action, Inc 785-836-4500

Free monthly food pantries in Auburn and Rossville with deliveries to homebound seniors in the Shawnee community.

Doorstep 785-357-5341

Emergency aid to families & individuals in need. Information on local services such as food assistance, reading programs, baby clothes and more. Food bank open 9:00 a.m. to 1:45 p.m., Monday – Friday.

Downtown Farmers Market 785-249-4704

Open every weekend during the spring and summer located at SW 6th Ave & SW Harrison ST in Topeka. Local vendors selling fresh farm products. Accept SNAP and EBT.

East Topeka Senior Center 785-232-7765

A variety of food assistance options: meal site for Meals on Wheels (Monday-Friday), host site for Harvesters and nutritional BINGO opportunities to win food and personal hygiene products.

Elwanda's Pantry 785-233-0166

Provides food to local individuals and families in need at no cost.

<u>Expanded Food & Nutrition Education of K-State Research and Extension</u> 785-232-0062 ext 119 Provides nutrition education to families with limited resources. Focus on stretching food dollars, feeding young children, preparing nutritionally-balanced meals, and more.

Fellowship & Faith 785-354-7262

Indoor/outdoor site with opportunity to select or receive groceries and/or household items.

Harvesters 877-353-6639

Food bank that offers nutritious food and related household products. Offer mobile food pantries, senior food deliveries, and a backsnack student program.

Hi-Crest Market 785-783-2535

Offer pre-bundled packages of meat and produce for \$30.

Hope House Ministries 785-232-0142

Offer drive thru for groceries and household items to take home.

Inward Faith Outreach 785-234-2332

Offer a variety of locations across the Shawnee County area for individuals to receive food.

Jayhawk Area Agency on Aging, Inc 785-235-1367

Those age 60 and older choose from different entrees and eat at their convenience seven days a week at CHAMPS locations throughout Shawnee, Jefferson, and Douglas counties.

K-State Research and Extension Shawnee Co 785-232-0062

Offer an expanded food and nutritional educational program and further information on locations of pantries, hot meals, and mobile pantries.

Let's Help 785-234-6208

Provide free hot meals Monday- Friday to anyone in the community, and community lunches 11:30am to 1pm Monday - Friday. Food pantry available for emergency needs and food boxes.

LULAC Senior Center, Inc. 785-234-5809

Site for meals on Wheels Congregate Dining and offer a Harvester's Senior Food Pantry – free produce for 60 and older.

Magic Meals Home Delivery, Auburn 785-554-4524

Sell a variety of precooked and frozen meals to Topeka and Lawrence with different options to order from with options to deliver.

Meals on Wheels 785-295-3980 or 785-430-2186

To help local programs improve the quality of life and health of seniors, so that no one is left hungry or isolated

Rossville Senior Center 785-584-6364

To provide nutrition, recreation and mobility to senior citizens in the Rossville area.

Salvation Army 785-233-9648

Preach the gospel of Jesus Christ and meet human needs in His name without discrimination.

Silver Lake Senior Citizen Center 785-582-5371

To provide recreation, nutrition and mobility to senior citizens in the Silver Lake area.

SNAP 1-877-653-9522

Provides qualifying households with food benefits to access healthy foods, plants, and seeds in order to sustain family nutrition along with education on food preparation and nutrition

Topeka Rescue Mission 785-354-1744

A non-denominational Christian organization dedicated to helping the homeless by providing emergency shelter, meals, clothing and other items, programs, and services, to homeless men, women, and families, as well as providing food and other necessities to those in need.

Appendix VII- Currently Available Community Resources Addressing Health Disparities

Communicable Diseases Shawnee County Health Department 785-251-5604

Works in partnership with community to promote & protect the health of all people, bridging gaps to eliminate health inequities, respecting diversity of community, through adaptive & innovative processes.

Community Action, Inc 785-836-4500

Helping people move from poverty toward prosperity through economic, social, & policy opportunities.

El Centro of Topeka 785-232-8207

Turning newcomers into neighbors.

Family Health Services Shawnee County Health Department 785-251-5647

All children and their families will live in homes where family members are healthy and demonstrate appropriate skills so that children experience a healthy development.

GraceMed Health Clinic 785-861-8800

To show and share the love of Jesus Christ by providing compassionate, accessible, high-quality health care for residents in the communities we serve.

La Leche League Topeka 785-256-0260

Help mothers to breastfeed through support from other mothers.

Kansas Children's Service League 1-877-530-5275

To protect and promote the wellbeing of children.

Parents as Teachers Topeka Public Schools 785-274-6480

Parents are their child's first and most influential teachers. Parents as Teachers offer parenting education and support for families with children, prenatal through the age of three.

Positive Connections 785-232-3100

A community-based program advocating for people living in NE Kansas. Provides comprehensive services to individuals impacted by HIV/AIDS, sexually transmitted infections, and Hepatitis C.

Parents Helping Parents Shawnee KCSL 785-501-8815

Improving parenting skills and connecting with resources.

Successful Connections 785-440-4509

Helps families link to information & community resources, including childcare.

Veterans Affairs Easter Kansas Health Care System 785-350-3111

To provide the best care anywhere by providing accessible, courteous, comprehensive, and quality health care to Veterans in an environment of excellence.

Women, Infants and Children Shawnee County Health Department 785-251-5607

Works in partnership with community to promote & protect the health of all people, bridging gaps to eliminate health inequities, respecting diversity of community, through adaptive & innovative processes.

Appendix VIII: Steering Committee Organizational Profiles

Stormont Vail Health

Mission

"Working together to improve the health of our community"

Vision

Stormont Vail Health will be a national leader in providing compassionate, high-quality and efficient integrated care through collaboration that results in a healthier community.

Stormont Vail Health has been committed to the communities we serve and to Kansas, providing the best possible health care for more than 130 years. Stormont Vail Hospital is the product of the 1949 merger between Christ's Hospital (Opened in 1884) and the Jane C. Stormont Hospital and Training School for Nurses (1895). Stormont Vail Hospital and Cotton O'Neil joined in 1995 to form Stormont Vail Health.

Stormont Vail is a nonprofit integrated health care system based in Topeka, Kansas, serving a multicounty region in northeast Kansas. With hospital campuses in Topeka and Junction City and multiple clinics across the region, Stormont Vail Health employs more than 500 providers and 5,700 team members. Stormont Vail has been recognized as a Magnet organization by the American Nurses Credentialing Center since 2009 for excellence in nursing services. Stormont Vail Health is proud to be a member of the Mayo Clinic Care Network and partner with Children's Mercy Topeka. Stormont Vail has the region's only Level III Neonatal Intensive Care and only verified trauma center.

Stormont Vail Health takes a holistic approach to providing care. We understand that health care goes beyond treating physical and mental ailments. That's why we provide our patients with vital connections to the community that help them learn, grow, and heal.

Every interaction with our patients, their families and our co-workers is an opportunity to leave a memorable, positive impact on their lives. A small moment, whether big or small, collectively shape who we are as a health care organization rooted in the communities we serve.

Shawnee County Health Department

Shawnee County Health Department (SCHD) is committed to working in partnership with our community to promote and protect the optimal health of all people by bridging gaps to eliminate health inequities, while respecting the diversity of our community, through adaptive and innovative processes. By being actively involved in the community and the initiatives that are taking place, SCHD strives to be a collaborative partner in improving the overall health of Shawnee County.

The Shawnee County Health Department is open Monday, Wednesday, Thursday, Friday 8 a.m. – 5 p.m. and Tuesdays 10 a.m. – 7 p.m.

Vision: Healthy People – Healthy Environment – Healthy Shawnee County

Core Values: Compassion, Respect, Inclusion, Integrity

Locations:

2600 SW East Circle Drive, Topeka, KS 66606 - Phone: 785.251.5600

1515 NW Saline St., Topeka, KS 66618 - Phone: 785.251.5750 2115 SW 10th Ave., Topeka, KS 66604 - Phone: 785.251.5700

Leadership:

Teresa Fisher, Director
Craig Barnes, Division Manager - Community Health Outreach and Planning
Kathleen Burrows, Division Manager - Finance and Administration
Carrie Delfs, Division Manager - Clinical Services
Missy Middendorf, Division Manager - Family Health
Dr. Erin Locke, Shawnee County Health Officer

Services:

— Child Care Licensing— Immunizations

Communicable Disease
 Environmental Health
 Environmental Health

— Newborn Home Visitation— Pregnancy Testing

Fetal Infant Mortality Review Board
 Sexually Transmitted Infection

Women, Infants, and Children
 Tuberculosis (TB) Clinic

Family Service & Guidance Center (FSGC)

Founded in 1904, Family Service & Guidance Center (FSGC) is a nonprofit community mental health center and Certified Community Behavioral Health Clinic (CCBHC) with extensive experience and expertise in meeting the behavioral health needs of children and families.

In 2023, FSGC served 4,510 individuals from more than 20 Kansas counties with clinical services, prevention, education, and outreach. FSGC is an innovator and recognized leader in behaviroal health, utilizing a variety of evidence based practices. The agency employs 302 staff members on a centralized four-building campus and an administrative building.

Mission: Family Service & Guidance Center provides quality behavioral healthcare for children and families.

Core Values:

Customers/Clients – Meet or exceed their expectations. Be family centered and treat them with dignity and respect.

Innovative — Responsive to changing conditions. Be one-step ahead with state-of-the-art treatment methods.

Integrity – High ethical standards. Operate with honesty and be a team people trust.

People – People are our greatest asset. Carefully select, train and motivate our employees. Remain committed to a diverse workforce.

Performance – Commitment to quality. A duty to maintain a healthy financial position to ensure resources are available to continue mission. Expect excellence.

Community – Positively impact the community by strengthening families and supporting community health.

FSGC offers a broad range of services, including crisis services, assessment, outpatient mental health and substance use services, psychiatry services, case management, and peer support.

University of Kansas - St. Francis Campus

Our Vision

To lead the nation in quality, service and safety for regional community health systems.

Our Mission

As part of The University of Kansas Health System, we provide the highest level of caring through teamwork, excellence and patient-centered care, while inspiring hope and providing compassion to those we serve.

Our Values

- Compassion
- Patient-Centered Care
- Excellence
- Teamwork

The University of Kansas Health System St. Francis Campus is proud to be a part of a long legacy of high-quality, compassionate care. The St. Francis hospital began serving its community in 1909 as the mission of a group of Catholic nuns who rose up to meet a need. Today, the hospital has 378 licensed beds, a history of technological advancements, and a generous and supportive community.

In 2017, through a partnership between Ardent Health Services and The University of Kansas Health System, St. Francis embarked on a new era. Ardent is renowned for its outstanding record of community investment, leading edge technology, and health care achievements to the hospital's management. The University of Kansas Health System is known for its medical and surgical advancements, quality of care, research, and expansive provider network. Both organizations are dedicated to building healthier communities through world-class health care.

With our new name we began a new chapter. One that celebrates and preserves this institution's rich legacy while evolving to meet the challenges of today. With a shared commitment to quality and unwavering dedication to our patients, we endeavor to strengthen and grow the system for future generations.

Valeo Behavioral Health Care

Since 1967, Valeo Behavioral Health Care has served the Topeka and Shawnee County area and has been the designated mental health authority for Shawnee County. Throughout the years, our services have expanded and evolved to better suit the needs of the people that we serve. "Valeo" is Latin, meaning "to be well." Our community understands that mental health is essential to overall health. Treatment benefits the individual, family, public health and community safety. Our vision is to close the gap on mental health needs and services offered, and provide early screening for mental health and substance use disorders.

Valeo is a Certified Community Behavioral Healthcare Clinic (CCBHC) that serves the mental health and substance use recovery needs of anyone who lives or works in the State of Kansas. We're equipped and experienced in delivering a full range of services to treat the most complex mental health issues. We offer 24-Hour crisis services and 29 recovery programs among nine

Valeo Behavioral Health Care Services

24-Hour Crisis Center – 400 SW Oakley 24-Hour Crisis Line – 785-234-3300 24-Hour Detox Line – 785-234-3448

locations. Together we build a safer, healthier community.

Assertive Community Treatment (ACT)
Case Management

Community Medication Outreach

(CMO) – Adults only Crisis Intervention

Crisis Residential Services - Adults

Only

Dialectical Behavior Therapy (DBT)

Expressive Therapies Health Coordination

Homeless Outreach & Housing Human & Sex Trafficking Prevention Integrated Dual Diagnosis Treatment

(IDDT)

In-Home Support Services

Intake Services

Illness Management & Recovery

Medication Assisted Treatment (MAT)

Adults only

Mobile Access Partnership (MAP) Mobile Crisis Response (MCR) NAVIGATE - AGES 15 - 36

Nicotine Cessation - Individual &

Groups

Nursing Facility for Mental Health (NFMH)

On-site Pharmacy – Genoa Healthcare Osawatomie State Hospital Liaison Outpatient Psychotherapy Services (OPS)

Projects for Assistance in Transition

from Homelessness (PATH)

Peer Support Psychotherapy

Psychiatric Medical Services Psychosocial Rehabilitation

Services for Employment Success (SES) SOAR – SSI/SSDI Outreach Access &

Recovery

Spravato Clinic – Adults only Transitional Housing – Adults only Valeo Recovery Center (VRC)

- Social Detox-Adults only
- Residential/Intermediate-Adults only
- Community Housing/Reintegration-

Adults only

- Intensive Outpatient
- Continuing Care Outpatient
- Jail Treatment Program
- Drug Testing
- Assessment and Referral

United Way of Kaw Valley

United Way of Kaw Valley (UWKV) brings together people, companies, and nonprofits to help individuals and families not just survive but thrive. We work to solve issues no single donor, charity or government agency can handle alone. By focusing on the whole family, we help more children graduate and achieve employment success, help more families move from crisis to financial stability and prosperity, and improve the health of individual and families in our community.

Over the past decade, UWKV has invested in the areas of Early Education, On-Grade Achievement, Financial Stability, Health, Substance Abuse, Racial Equity, and Basic Needs.

As we listened to our community during that time and looked at research and best practices emerging in the various areas of social services, we saw the need to apply a different lens to our work, a lens that would make it easier for families to access services and define and achieve success for themselves. We found this lens in a Whole Family/2Gen Approach to Poverty. Future grants and investment opportunities will center on this approach.

We work with residents, and public and private partners to co-create solutions that ensure everyone has the resources, support, opportunities, and networks they need to thrive. We commit to leveraging all of our assets (convening, strategic investments, awareness building, advocacy) to create more equitable communities.

LiveWell Shawnee County

LiveWell Shawnee County's current mission statement is to mobilize the community to take action on health priorities so that policy, environment, and practice influence a culture shift toward health and wellness for everyone in Shawnee County. We are a health and wellness coalition led by a Leadership Team comprised of local private business, nonprofit organizations, and governmental representatives leading work in improving social determinants of health. The coalition is organized around our Community Health Improvement Plan (CHIP) and is made up of workgroups that drive the CHIP strategies.

GraceMed Health Clinic, Inc.

Mission: To show and share the love of Jesus Christ by providing compassionate, accessible, high-quality health care for residents in the communities we serve.

Vision: GraceMed is the clinic of choice for comprehensive, integrated healthcare encompassing the spiritual, emotional, and physical needs of individuals and families in the communities we serve.

Core Values:

- Stewardship: We will judiciously use our resources to achieve our mission and vision.
- Excellence: We provide high-quality service, seeking ways to better ourselves individually and collectively through continuous learning.
- Loyalty: We will remain devoted to GraceMed's cause, culture, and core values at all times.
- Faith: We will integrate our faith with our work and service, recognizing spiritual diversity while embracing our Christian heritage.

Topeka Locations:

- Topeka Capitol Family Clinic 1400 Southwest Huntoon Street, Topeka, KS, 66604
- Topeka Highland Park Family Clinic 2025 SE California Avenue, Topeka, KS 66607

Leadership:

- Interim Chief Executive Officer/Chief Medical Officer: Dr. Julie Elder
- Chief Operating Officer: Jason Ybarra
- Chief Financial Officer: David Wuthnow
- Chief Compliance & Quality Assurance Officer: Clanita Jiggetts
- Chief Dental Officer: Dr. Eric DeShazerChief Information Officer: Keith Flippin

About Us:

We at GraceMed Health Clinic, Inc. believe in and demonstrate our mission every day as we touch lives and heal hearts. We believe that consistent and ongoing quality care by familiar and devoted providers is the best way for individuals and their families to receive health care. Beginning in 1979, GraceMed was founded upon the desire to address the growing healthcare needs of unemployed, underinsured persons in central Kansas. With the assistance of volunteers, dedicated providers and staff, visionary leadership, and generous supporters, the clinic continues to expand its reach and scope of care to individuals in need. GraceMed now operates as a Federally Qualified Health Center (FQHC) with a network of sixteen clinics located in Wichita, Topeka, McPherson, and Clearwater, Kansas. We provide primary medical, dental, vision, pharmacy, behavioral health services, and spiritual care to meet our patients' physical, mental, and spiritual needs our clinics provide treatment and testing to over 60,000 patients annually, including patients of all ages, races, and income levels. These high-quality services are provided through an income-based sliding fee scale, Medicaid and Medicare reimbursements, private insurance, grants, and donations.

Process to Provide Feedback on CHNA

If you would like to provide feedback on the 2024 Shawnee County Community Health Needs Assessment, please contact:

- Craig Barnes, Division Manager Community Health Outreach and Planning Shawnee County Health Department 785-251-5612 or Craig.Barnes@snco.us
 Or
- Karla Hedquist, Director Community Health Engagement Stormont Vail Health, 785-270-0139 or khedquis@stormontvail.org

