



KANSAS RURAL
HEALTH WORKS

Russell County Rural Health Works

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Sponsored by Kansas Rural Health Options Project

Program Agenda

- Overview – progress to date
- Community concerns revisited
- Survey results
- Health care directory update
- Charge for next meeting
- Next meeting date



Program Overview

- Help foster sustainable rural community health care system
- Community-driven process
- 5-6 one-hour working meetings over 4-5 months
- Emphasis is on development of information products
 - Economic impact of health care system
 - Health services directory
 - Community health care survey
 - Data and information reports
- Summary meeting at conclusion
 - Discuss tentative action plan at the final formal KRHW meeting

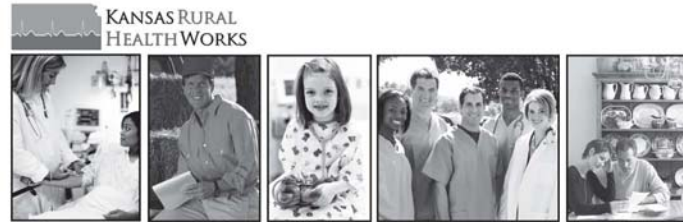


Community Concerns Themes

- Transportation Assistance
- Identifying and Accessing Public Assistance
- Public Awareness of Health Services and Providers
- Broad Community and Institutional Involvement on Healthcare Issues
- Other
 - Lack of local mental health services; adolescent alcohol and drug use; recruitment & retention of healthcare providers; prevention and wellness
- Potential action strategies.....



KANSAS RURAL HEALTHWORKS



The Importance of the Health Care Sector to the Economy of Russell County

Kansas Rural Health Options Project
January 2009

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Funding for this report
provided by: Health
Resources and Services
Administration

In cooperation with:

office of
Local Government
K-State Research and Extension
and **KSTATE**
Kansas State University
Research and Extension



Data Analysis

Russell County Rural Health Works

KANSAS RURAL HEALTHWORKS
Communities Build Affordable & Sustainable Healthcare Systems

Health and Behavioral Data

Introduction

Kansas Rural Health Works (KRHW) is dedicated to helping rural communities build affordable and sustainable local health care systems. Health care is important to seniors, young families and companies. But rural health care systems are facing many challenges: hospitals are closing, services have been cut, doctors won't come to the area or they don't stay. Medicare and Medicaid payments are too low. Rural residents can revitalize their local health care system. KRHW provides the tools. Local visionary leadership puts these tools to work. KRHW helps communities keep health care dollars at home. Sponsored by the Kansas Rural Health Options Project with funding from the Office of Rural Health Policy, Health Resources and Services Administration.

Health and Behavioral Data Summary

Following are a variety of data and statistics about health and behavioral characteristics in Russell County that may have implications for local health care needs. The data is reported by county.

Over time, the trend in nursing home occupancy may suggest an overall decline. This may reflect the preference for community-based care outside of a nursing home.

- Considering available indicators of children's welfare, the percentage of women receiving adequate prenatal care is below the state rate. The rates of youth tobacco use and binge drinking are over 20% and trending upward. Binge drinking is approaching 30%.
- Data related to persons served by selected publicly-funded services suggest a number of individuals and families in the county are in need of economic assistance.
- Data show that about 35% of newborns in the county received less than adequate prenatal care in 2007.
- There were five out-of-wedlock teenage pregnancies in 2007.
- Trends in recent hospital usage suggest a stable level of demand.

Russell County Health Market Area

ZIP codes within the Russell County Health Area. Source: Claritas, Inc. 2009

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Russell County Rural Health Works

KANSAS RURAL HEALTHWORKS
Communities Build Affordable & Sustainable Healthcare Systems

Education Data

Introduction

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Education Data Summary

Following are a variety of data and statistics about the K-12 school system in Russell County that may have implications related to local health care needs. The data in this case reflects information reported by the school districts located in Russell County.

- Following overall patterns in the general population, total student enrollment in the Russell County K-12 educational system has steadily declined since the mid-1990s.
- As the student population has declined, the student-to-teacher ratio also has declined.
- The trend in the student dropout rate has generally been declining in Russell County over the past decade.
- The trend in student-on-student violence has generally increased over time, while student-on-faculty violence continues unchanged.

Russell County Health Market Area

ZIP codes within the Russell County Health Area. Source: Claritas, Inc. 2009

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Russell County Rural Health Works

KANSAS RURAL HEALTHWORKS
Communities Build Affordable & Sustainable Healthcare Systems

Economic & Demographic Data

Introduction

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Economic Data Summary

Following are data and statistics about the economic and demographic characteristics of Russell County that may have implications related to local health care needs. Some of the data only is available at a county scale and reflects the Russell County boundaries. Some is available by ZIP code. Where possible, ZIP code data was used for the areas shown in the graphic below. This area reflects the approximate boundaries of the Russell Regional Hospital market area. This is probably the geographic extent most non-specialty health care services centered in Russell County would reach.

- The proportion of the population over 65 years is growing, and the female population over 85 years is growing fastest among the elderly group.
- 43% of the population lives alone, making individual acute and chronic care management challenging.
- More than 18% of households live on less than \$15,000 income per year.
- More than 37% of the housing stock is valued at less than \$40,000.
- Transfer income to persons is among the fastest growing sources of income in 2007. \$65 million in transfer income was paid to county residents.
- Within transfer income, government assistance such as Medicare, income maintenance, and veterans pension and disability benefits are growing most strongly.
- The county poverty rate decreased recently, but typically remains above the Kansas average and the trend is not encouraging.

Russell County Health Market Area

ZIP codes within the Russell County Health Area. Source: Claritas, Inc. 2009

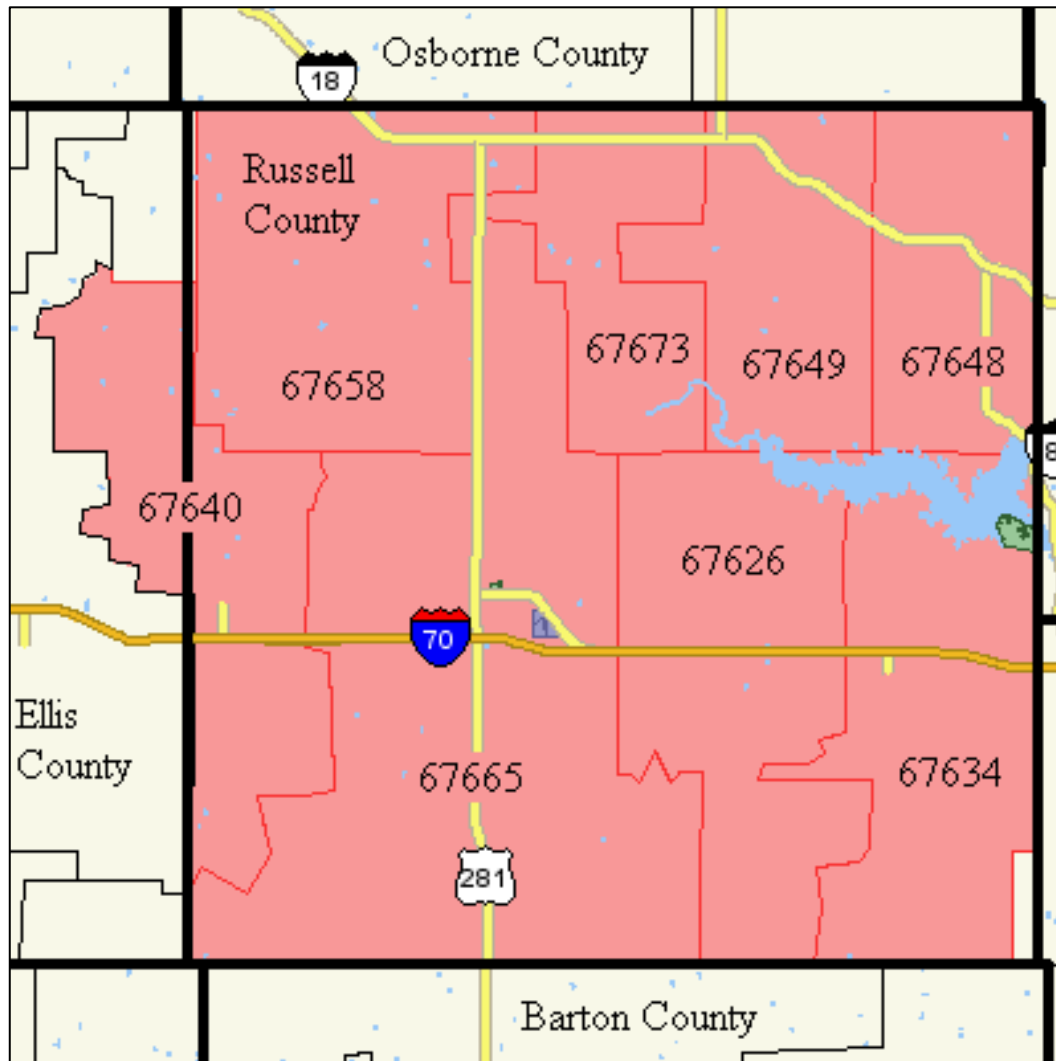
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Community Survey

- Calling between Nov. 2-23
- 204 completed surveys (302 additional calls screened out)



Russell Co. Health Market Area





Survey Results

- Geographic representation
- About 68% female (52%)

Survey			2000 Census	
Age Group	Frequency	Percent	Population	Percent
18-34	26	12.7%	1,065	18.9%
35-49	55	27.0%	1,561	27.8%
50-64	68	33.3%	1,260	22.4%
65+	55	27.0%	1,739	30.9%
Total	204	100.0%	5,625	100.0%

Healthcare Provider Usage

- 52% use physician; 36% use P.A. or N.P.
- 88% saw doctor within past year; 2% >5yrs/never
- 71% use Russell; 76% Russell County; 10% Hays
- 96% satisfied



General Hospital Usage

- 66% used a hospital in the past year
 - 46% used Russell; 25% used Hays
- Reasons by those who used other (<200)
 - referral (53%), specialty (50%), emergency (47%), preference (43%), distance (42%)
- Extrapolate 870 lost hospital visits partially by preference



Russell Hospital Use

- 76% had prior experience
 - inpatient – 9%
 - outpatient – 55%
 - emergency – 31%
- 88% were satisfied or somewhat satisfied



Use & Perceptions - Other

- Pharmacy – 67%; eye doctor – 67%; dentist – 54%; physical therapy – 31%; chiropractic – 25%; hospice – 5%
- Satisfaction generally 95%+
- Health department – 55%; home healthcare – 15%; ambulance – 35%; assisted living/nursing care – 14%
- Satisfaction generally 95%+, accept nursing care



Transportation Assistance

- 21% need to travel out of county for medical treatment once or more per month
- 10% find travel in/out of county a challenge
- 52%-57% would support public transportation partially funded by taxes (<200); 33%-37% oppose



Public Assistance

- 56% see need for community resource center for public assistance; 33% do not
- 76% support publically-funded community resource center; 12% do not



Community Wellness Center

- 56%-65% see need for community wellness center (<200); 30%-36% do not
- 76% say someone in their HH would use it
- 90% say they would pay a fee to use it

Insurance Coverage

- 89% HH has insurance; 11% do not
- Income breakout (<200): 20%-30% below \$30k
- Affordability most often cited (75%)



Drug/Alcohol Use

- 73% think illegal drugs are a problem
- 78% think underage drinking is a problem
- Finding local assistance for alcohol/drugs
 - 44% very confident
 - 34% somewhat confident
 - 14% not at all confident



Mental Health Services Office

- 48% believe local mental health services office is needed
- 33% believe it is not



Internet Usage

- 77% use the Internet (higher than other communities)
- No usage by age groups (<200)
 - 18-34 = 4%; 35-49 = 6%; 50-64 = 18%;
65+ = 58%
- 78% use it to find health information; 8% used it for local healthcare information
- 96% believe they could find local info.

Survey Preliminary Conclusions

- About 25%-50% of health care market “leaks” from the community
- Most who use local services are satisfied (95%+)
- Hospital capturing about one-half the market
 - “preference” (43%) might be changed
- Most (88%) are satisfied with hospital services
- 10% HH transportation challenge (320



Survey Preliminary Conclusions

- 50%+ see need for public assistance center; 75+ support a publically-supported center
- 50%+ support wellness center; 75% would use it; 90% would pay
- Insurance coverage uncertain
- 75% believe drugs/alcohol are problems
- <50% seen need for local mental health office
- 75% use the Internet; can find local information

Summary

- Overall: better than many communities
- Challenges: high levels of leakage
- Opportunity: high levels of satisfaction
- Acknowledge challenges with the survey
- Small percentages = large numbers of people

Community Concerns Themes

- Transportation Assistance
 - community need and support, likely little state financial assistance currently
- Identifying and Accessing Public Assistance
 - community need and support, likely little state financial assistance currently
- Public Awareness of Health Services and Providers
 - disconnect between market leakages and local satisfaction; I&E and the community



Community Concerns Themes

- Broad Community and Institutional Involvement on Healthcare Issues
 - convene a broader public dialogue
- Other
 - Lack of local mental health services; adolescent alcohol and drug use; recruitment & retention of healthcare providers; prevention and wellness
- Potential action strategies..... Convene subgroups to discuss before next meeting

Health Services Directory

- Feasible, but need corrections
- Later distribution
- Comprehensive to county or regional service availability

Next Meeting

- December 10
- Overall summary
- Discussion and reactions
 - Next steps?
 - Action planning?
 - Future meeting?
- Evaluation