



# Kit Carson County Health Service District 2022 Community Health Needs Assessment

## Background

**Mission statement.** To improve the health and lives in our communities by providing high quality healthcare close to home.

**Vision statement.** To be the regional provider setting the standard in quality and innovative healthcare and the first choice for patients and employees.

**Services.** KCCHSD is a 19-bed critical access hospital (CAH). A CAH is a federal designation for rural hospitals with less than 25 acute care beds, located more than 35 miles from the nearest hospital, although a few exceptions apply.<sup>1</sup> The organization offers a 24/7 emergency department and is a Level IV Trauma Center, with emergency air transport available.

KCCHSD provides many specialty services in their clinics, in order to allow residents and the area's countless visitors, quality care, without having to travel long distances. These include, but are not limited to: (1) family medicine (2) specialty clinics (3) laboratory (4) imaging (5) sleep studies (6) home health and end of life care (7) skilled nursing (8) physical therapy (9) ambulatory surgery (10) prenatal care<sup>2</sup>

**Hospital governance.** KCCHSD is governed by an elected seven- person board of trustees, all local residents.<sup>3</sup>

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<sup>1</sup> Rural Health Information Hub, <https://www.ruralhealthinfo.org/topics/critical-access-hospitals>

<sup>2</sup> KCCHSD, <https://www.kcchsd.org>

<sup>3</sup> KCCHSD Board of Directors, <https://www.kcchsd.org>

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**Summary.** This document provides a summary of KCCHSD’s plan to develop new, and to enhance established, community benefit programs and services. This plan is focused on addressing the top community health priorities identified in the 2022 community health needs assessment (CHNA), administered by KCCHSD and facilitated by Vertical Strategies.

## Target Areas, Economics and Populations

**Note on data collection.** KCCHSD primarily serves the residents of Kit Carson County. Data, however, were collected for Kit Carson County, when available, the Eastern Plains PUMA Region, Colorado, and at a national level. The rationale was to provide measurable comparisons for benchmarks. It is noted that for some indicators, the data for Kit Carson County is suppressed because of the small population.

Data was primarily collected from the US Census Bureau, County Health Rankings, and the Colorado State Demography Office. It appears that because of the Pandemic there is a delay in these bodies updating publicly available health and demographic data. Data presented to the community and in the body of this report is the most recently published data as of the time of this writing and has been used primarily for the purposes of inspiring communication and brainstorming among the participating community members.

The CHNA included data on all populations in Kit Carson County without regard to income, insurance, or any other discriminating factors. Selected characteristics of the population included<sup>4</sup>:

1. The current population of Kit Carson County is 6,950 (2021 estimate)
2. The median age of Kit Carson County residents is 38.4
3. Corresponding to the median age, males make up 50.5 percent of Kit Carson County population
4. People over the age of 65 constitute over 20.6 percent of all people living in Kit Carson County.

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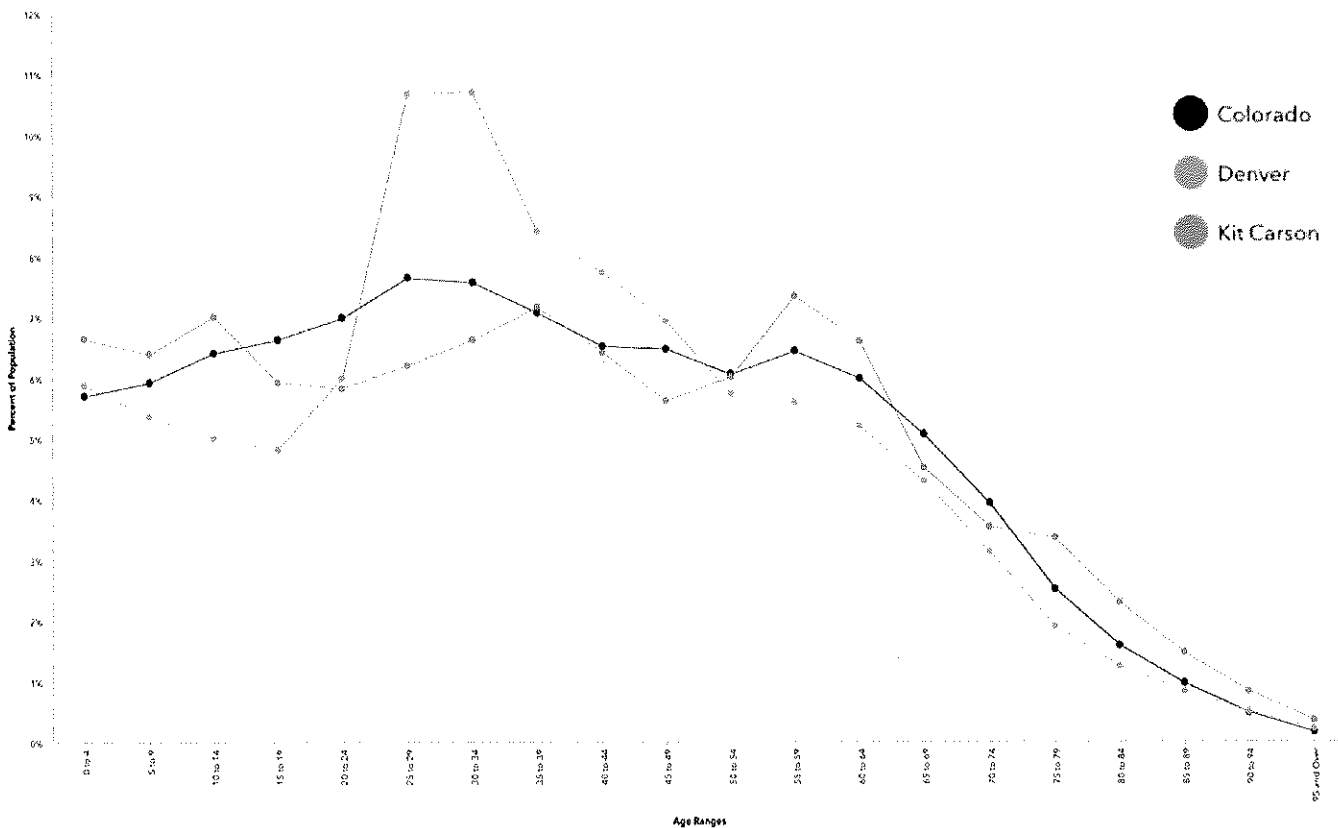
<sup>4</sup> US Census Bureau, American Fact Finder,  
<https://www.census.gov/quickfacts/fact/table/CO.kitcarsoncountycolorado/PST045221>

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5. The Kit Carson County community is predominantly Caucasian, contributing 94.2 percent of the population. Following are the race and ethnicity demographics, ranking by density:
  - a. White alone, not Hispanic or Latinx, 77.7%
  - b. Hispanic or Latinx, 18.6%
  - c. Two or more races, 2.2%
  - d. American Indian, Alaska Native, 1.7%
  - e. Black or African American, 0.9%
  - f. Asian, 0.8%
  - g. Native Hawaiian and other Pacific Islander, 0.2%
6. Kit Carson County's median household income is \$50,411 which is significantly less than the state of Colorado at \$75,231.
7. Nearly 11% (10.8%) of people living in Kit Carson County are living in poverty



## Economic Stability

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Healthcare employment is one of the most significant service industries in a local area, usually more so in rural areas. A rural hospital is often one of the largest employers in a rural economy, typically one of the top two employers in the area.<sup>5</sup> In Kit Carson County Agriculture and Healthcare are the top two industries and make up 34.8 percent of local employment. As employees spend money locally, additional jobs are created in other businesses in the community. These additional jobs are referred to as secondary and create additional economic impact in the community. The impact is estimated using multipliers<sup>6</sup> for both jobs and economic impact.

Because these healthcare facilities contribute significantly as an economic driver in the community, the use of health facilities by area residents supports employment and economic drivers.

## Process, Strategy and Community Impact

KCCHSD identified community health needs by undergoing an assessment process. This process incorporated a comprehensive review by KCCHSD community stakeholders. KCCHSD has re-engaged Vertical Strategies who facilitated the 2019 Community Health Needs Assessment. Vertical Strategies assisted by: (1) gathering and assimilating data, (2) facilitating and compiling results of group meetings and surveys, (3) drafting reports and public notices, and (4) other facilitation-type activities. Vertical Strategies is well suited to this type of project because of their expertise in rural health in Colorado and nationally, and the work their staff has done regarding many community-oriented projects in rural health services. The KCCHSD community stakeholders group was formed with members of the management team of the organization, including the CEO and others representing areas of strategy, communications, community benefit, finance, education, quality of patient care, and direct patient services.

The community stakeholders' group, assisted by Vertical Strategies, reviewed data from public sources such as the Colorado Department of Public Health and Environment, United States Census Bureau, Centers for Disease Control, US Department of Health and Human Services Health Resources and Services Administration, County Health Rankings published by the Robert Wood Johnson Foundation and the University of Wisconsin, among other resources. Data were compiled, formatted, and manipulated from these sources relating to the health status of the County population, health needs, incidence of disease, etc. and shared with community

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<sup>5</sup> National Center for Rural Health Works, Economic Impact of Rural Health Care

<sup>6</sup> Minnesota IMPLAN Group, Inc.

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members. The data, which helped form the assessment, provided the basis from which the community stakeholders group, and others, determined the health needs of the community. It is important to note that gaps exist in reported health data at the local level. The gaps exist because of the lack of reporting certain disease data and the characteristics of unique populations that may experience certain diseases and chronic conditions. In addition, low numbers of reported instances, due in large part to a low population base, make certain data unavailable or not readily comparable to state and national data.

While KCCHSD leadership has access to the entire data package developed by Vertical Strategies, a condensed version was presented by Vertical Strategies at community stakeholders meeting to inform those in attendance about the health status of Kit Carson County and surrounding areas. Vertical Strategies identified a number of top positive indicators and opportunities for improvement, based on the data.

Following the presentation of data, the meeting attendees discussed the data results. They were asked to identify other opportunities that were omitted from the initial presentation and to judge if the positive indicators were represented appropriately. The group was requested to identify the top three opportunities that were of most concern to them and how they perceive access to healthcare providers in the Kit Carson County area. In addition, attendees were asked how, given limited financial and human resources, could KCCHSD and its health care providers improve the health status of residents.

The community stakeholders group, in collaboration with Vertical Strategies, also conducted a survey of interested community residents. The survey included 33 multiple choice and open-ended questions on a variety of health, social determinants, and provider issues. The health questionnaire for KCCHSD was distributed by paper and web-based survey. The paper survey and link to the web-based survey were made available at KCCHSD through the organization's website at [www.kcchsd.org](http://www.kcchsd.org). The community was informed about the survey and provided the link in through flyers posted throughout the town, the website, and social media. The same questions were asked of all participants. There were 128 responses. The survey was provided in English and Spanish.

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The survey questions included a series of “yes or no” questions, prioritization ranking, as well as ample opportunities for the respondent to offer a free-flowing response. Vertical Strategies compiled the results of the survey to maintain the anonymity of respondents. KCCHSD leadership was provided a detailed response compilation of the survey results. Summary results of the survey findings were presented to the community stakeholder group. At that meeting, participants reviewed the survey summary data and used it to determine community priorities as outlined in this report.



▼ 80807		69.29%	88
▼ 80836		16.54%	21
▼ 80805		7.87%	10

Illustration of survey respondent’s place of residence

## Community Needs

Data derived from state and national resources indicated a number of health observation needs in Kit Carson County. Among them were:

1. The Lead Risk Rank in Kit Carson County is 9/10 which is higher than over 80% of other counties in Colorado<sup>7</sup>
2. Roughly 8.4 percent of Kit Carson County has low income and low access to healthy foods.<sup>8</sup>
3. Kit Carson County’s population of veterans makes up 7.2 percent of the total population.<sup>9</sup>
4. Only 51 percent of the population of Kit Carson County has access to exercise opportunities, significantly lower when compared to the state rate of 88 percent<sup>10</sup>

<sup>7</sup> Colorado Environmental Public Health Snapshots <https://coepht.colorado.gov/home/county-profiles>

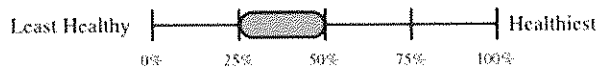
<sup>8</sup> Map the Meal Gap, <http://map.feedingamerica.org>

<sup>9</sup> US Census Bureau, American Fact Finder, <https://www.census.gov/quickfacts/fact/table/CO,kitcarsoncountycolorado/PST045221>

<sup>10</sup> County Health Rankings, <https://www.countyhealthrankings.org/app/colorado/2022/rankings/kit-carson/county/outcomes/overall/snapshot>

5. Twenty eight percent of residents are obese
6. Eighteen percent of adults identify as smokers.
7. Kit Carson County has a high rate of children experiencing poverty at 16 percent
8. Seventeen percent of people report poor or fair health, compared to the 14 percent Colorado average

## Kit Carson (KC)



### Health Outcomes

Kit Carson (KC) is ranked in the lower middle range of counties in Colorado (Lower 25%-50%)



### Health Factors

Kit Carson (KC) is ranked in the lower middle range of counties in Colorado (Lower 25%-50%)

The community stakeholders group used the qualitative results of the survey process to frame the story portrayed by the data gathered and discussion group observations. The survey results included the following sample observations:

- The most important health concerns were, by ranking:
  - Mental health problems
  - Aging problems
  - Diabetes
  - Substance Abuse
  - Cancer
  - Obesity
  - Heart Disease and stroke
- Respondents were asked if there was ever a time in the last 3 years they, or someone from their home thought they needed services but delayed or did not see a healthcare provider, to which nearly 60 percent of respondents indicated they had.
  - To follow up, we asked for those to indicate the top three reasons they chose to skip or delay healthcare or medical intervention- ranked from highest to lowest:
    - The cost was too high

- Too long to wait for an appointment
- They didn't like the doctors
- Insurance didn't cover the services
- They felt like they weren't treated with respect
- Could not get an appointment
- Nearly 5 percent of respondents (4.72 percent) noted that pain kept them from their activities of daily living more than 11 days per month which is down from the nearly 9 percent (8.27 percent) reported in the 2019 CHNA
- Ranked in order of highest number of responses, respondents told the survey where they receive their health information:
  - Internet
  - Pamphlets or other printed materials
  - Radio
  - Classes in the community
  - Newspaper
  - TV
- When asked what types of specialist services respondents have used in the last 24 months, ranked by number of responses:
  - Chiropractor
  - Physical Therapy
  - Dental
  - Orthopedics/Orthopedic Surgery
  - Massage
  - Cardiology
  - Gynecology
  - ENT
- When asked what types of healthcare settings they have used in the past 24 months, ranked by number of responses:
  - Primary Care
  - Hospital Emergency Department
  - Specialty Care
  - Surgery



## Prioritization of Needs

Following the assimilation of the detailed health data along with results from the surveys and community stakeholder meetings, KCCHSD developed a prioritization of health needs. Based on review of health, health access, and health outcomes data; demographic data; economic data; economic impact data; community survey data and the experience of meeting participants, the following issues were chosen by KCCHSD to pursue.

These needs were identified as most pressing:

1. Mental Health
  - a. Addressing stigma
  - b. Access to care
    - i. Diversified resources for care
      1. Holistic services
      2. Peer support
      3. Telemedicine
  - c. Incorporate resources into primary care
  - d. Continued education and support for Emergency Department and primary care staff
2. Specialty Care
  - a. Primary focus on expanding access and resources for Pulmonology
  - b. Review and evaluate current specialty service offerings for expansion/modification
3. Health Education and Awareness
  - a. Increase community health education offerings
  - b. Evaluate marketing and community awareness around existing services
    - i. Ex: access to gym equipment
  - c. Cultural awareness
    - i. Additional resources for Spanish speaking patients

Other issues were identified by the community as important, but KCCHSD has not addressed them in this plan as other groups have taken the lead on solutions. KCCHSD maintains a willingness to work with other entities within the community to look at providing appropriate programs.

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## Approval

The KCCHSD Board of Directors approves the prioritization of needs identified in the community health needs assessment.

09-14-2022 Jake Smith  
Name, Title, Date