# 2018

# Apache County Community Health Needs Assessment Report



Photo Credit: Terry Young, Employee, White Mountain Regional Medical Center In partnership with:

Apache County Drug Free Alliance Apache County Public Health Services Little Colorado Behavioral Health Center North Country Healthcare Town of Springerville White Mountain Regional Medical Center

### Acknowledgements

Thank you to the following organizations and stakeholders for devoting their leadership and professional expertise in developing the 2018 Apache County Community Health Needs Assessment.



**Apache County** 

Apache County Public Health Services District



Little Colorado Behavioral Health Center North Country Healthcare





Town of Springerville

White Mountain Regional Medical Center



### **Steering Committee Members**

White Mountain Regional Medical Center would like express gratitude to the following Steering Committee Members for dedicating their time and support in collecting surveys and developing the Community Health Needs Assessment.

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### **Executive Summary**

This Community Health Needs Assessment (CHNA) was conducted in collaboration with the Apache County Drug Free Alliance, the Apache County Public Health Services District, Little Colorado Behavioral Health Center, North Country Healthcare, the Town of Springerville and White Mountain Regional Medical Center.

The CHNA was conducted to identify the health needs, challenges and opportunities unique to our community, and to provide useful information to health care providers, collaborative groups, community groups and organizations, and consumers who are interested in improving healthcare in our communities. The results of the CHNA will enable us to strategically establish priorities, develop interventions and commit resources to improve the healthcare needs of Apache County.

As part of the process for evaluating the community's needs, a Steering Committee was formed. The Steering Committee provided guidance in all aspects of the CHNA process, including development of the process, prioritization of the significant health needs identified, and development of the implementation strategies.

### Assessment Process

The research and data analysis of the 2018 Community Health Needs Assessment began in August 2018. The primary service area was defined as Southern Apache County as well as a portion of Catron County, New Mexico. The Steering Committee reviewed the 2015 CHNA, the community health initiatives, and progress improvement. The Steering Committee then developed the community survey for the purpose of obtaining direct input regarding the health needs of residents living within the primary service area. The community survey was available in both English and Spanish and consisted of thirty-eight (38) questions related to health, status and behaviors.

The community survey was publicized and distributed widely throughout the primary service area. The CHNA survey was available to the community in paper form; electronically on White Mountain Regional Medical Center's website <u>www.wmrmc.com</u>; and on-line via Survey Monkey at <u>www.surveymonkey.com</u>. Four hundred and eighteen (418) residents completed the survey and provided input between September 2018 and November 2018. Analysis of the primary data was reviewed and summarized by the Steering Committee.

## Summary of Findings

Upon the completion of the CHNA, a summary of findings was presented to the Steering Committee and White Mountain Regional Medical Center Board of Directors for review. A needs assessment was developed to determine the gaps in health-related services. Once the significant health needs were identified, the Steering Committee made

# Executive Summary (Continued)

recommendations on how to best prioritize and address the health needs in the community.

Through the assessment and data collection process, the top health related priorities identified during the 2018 survey included:

- 1. Access to Community Resources
- 2. Mental Health Services: Depression, Anxiety, Substance Abuse, and Suicide Prevention
- 3. Allergies and Asthma
- 4. Women's Health Services
- 5. Access to Specialty Care
- 6. Food Security
- 7. High Blood Pressure
- 8. Dental and Vision Services for the un-insured

It is important to note that although the Steering Committee identified eight (8) top health related priorities, the decision was made to limit the focus to make a larger impact on the top three (3) areas that had the opportunity to improve the overall health of the community.

# Introduction

### Purpose of CHNA Report

The Patient Protection and Affordable Care Act (ACA), requires not-for-profit hospitals to conduct a Community Health Needs Assessment (CHNA) once every three (3) years. These assessments are designed to identify and prioritize the major health needs of the communities they serve. Healthcare related organizations utilize the results of the assessments to help make a positive impact on the health of residents and address the health needs of their community.

The purpose of the 2018 Apache County Community Health Needs Assessment was to complete a comprehensive assessment of the health status and health care needs of residents living in Apache County. The goal of the Community Health Needs Assessment is to improve the overall health of Apache County.

The Community Health Needs Assessment provides a framework of community action, engagement and accountability in addressing the health needs of residents living in Apache County. Its significance as a resource to community organizations is vital in prioritizing our health needs and initiatives.

In an effort to collect the most relevant information the Steering Committee used qualitative and quantitative methods for the data collection and analysis. Both primary and secondary data sources were collected during the process.

This CHNA report is available to the public on White Mountain Regional Medical Center's web site <u>www.wmrmc.com</u>. A paper copy is available upon request by emailing the Marketing Department at <u>marketing@wmrmc.com</u>.

### About White Mountain Regional Medical Center

White Mountain Regional Medical Center is a not-for-profit, twenty-one (21) bed Critical Access Hospital. The Hospital is located in Apache County, Arizona. The first Hospital (White Mountain Communities Hospital) was a fifteen (15) bed Medical Center and was located on land donated by the Town of Springerville. Between 1959 and 1965 the citizens of Southern Apache County launched an effort to raise funds for the construction of the current facility which was completed in 1965.

In 1971 the Board of Directors entered into a contractual agreement with Good Samaritan Hospital (later known as Samaritan Health System). In 1982, a one point five million dollar (\$1,500,000.00) expansion of the Medical Center was completed. Good Samaritan opened a long-term care facility adjoining the Hospital in 1987.

# Introduction (Continued)

## About White Mountain Regional Medical Center

In early 1995, Good Samaritan elected to end the relationship with the Hospital. The action created a crisis which could have left the community without vital medical services. The citizens in the service area responded and developed a "Save Our Services" campaign. Telethons, raffles and other fund raising events were held to provide funds to keep the Hospital open. Apache County, the Towns of Eagar and Springerville and local businesses also made contributions.

In July 1995, voters within the proposed tax district boundaries voted overwhelmingly to create the White Mountain Communities Special Health Care District. Funding for Emergency Medical Services was provided by a small secondary property tax through the Special Health Care District.

In August 1997, the Board of Directors voted to change the Hospital's name to White Mountain Regional Medical Center. In August 2000, the long-term care facility was close.

Today, White Mountain Regional Medical Center continues to provide vital medical services to Southern Apache County as well as a portion of Catron County, New Mexico. White Mountain Regional Medical Center is committed to providing a wide range of services to the community, including:

- Twenty-four (24) hour Emergency Services: Designated as a Level IV Trauma Center and certified as a Pediatric Prepared Care Emergency Department
- Inpatient and Outpatient Surgical Services
- Clinical Laboratory and Blood Bank Services
- Radiology Services: MRI, CT, Ultrasound, Nuclear Medicine, Echocardiography, Bone Densitometry and X-Ray
- Cardiopulmonary Services: Sleep Diagnostic Center, EKG, EEG, Pulmonary Function and Stress Testing
- Swing Bed Rehabilitation
- Outpatient IV Therapy
- Rehabilitation Services: Physical, Occupational and Speech Therapies
- Jean V. Hall Wellness Center
- Specialty and Family Care Clinic

### **Apache County Geography and Demographics**

On February 24, 1879 the Tenth Territorial Legislature created Apache County. The county encompassed all of the present day Navajo and Apache Counties as well as parts of Graham and Greenlee Counties. In 1881 a portion of the county was taken to form part of what is now Graham County. The county also lost significant territory when Navajo County was formed in 1895. Apache County is the longest county in the country.

Apache County is located in the northeast corner of Arizona covers a total of eleven thousand two hundred and eighteen (11,218) square miles. Apache County is the third largest county in Arizona and the sixth largest in the United States. Apache County has the most land designated as Indian reservation of any county in the United States.



According to the 2010 United States Census Bureau there were seventy-one thousand, five hundred and eighteen (71,518) people residing in Apache County. The 2012-2016 American Community Survey estimates the population of Apache Country has increased to seventy-two thousand, three hundred and forty-six (72,346).

Seventy-two point nine percent (72.9%) of the population residing in Apache County are American Indian; twenty-three percent point three percent (23.3%) are white; five point eight percent (5.8%) are Hispanic or Latino; two percent (2%) are from two or more races; one point three percent (1.3%) are from other races; point three percent (0.3%) are Asian; and, point two percent (0.2%) are African American.

Apache County, Arizona Demographics American Community Survey (2012-2016)			
Gender	Total	Percentage	
Total population	72,346	100%	
Male	35,740	49.4%	
Female	36,606	50.6%	
Age	Total	Percentage	
Under 5 years	5,285	7.3%	
5 to 9 years	5,873	8.1%	
10 to 14 years	6,209	8.6%	
15 to 19 years	6,408	8.9%	
20 to 24 years	4,914	6.8%	
25 to 34 years	8,563	11.8%	
35 to 44 years	7,793	10.8%	
45 to 54 years	9,140	12.6%	
55 to 59 years	4,481	6.2%	
60 to 64 years	4,042	5.6%	
65 to 74 years	5,721	7.9%	
75 to 84 years	2,893	4.0%	
85 years and over	1,024	1.4%	

Apache County, Arizona Demographics American Community Survey (2012-2016)			
Race	Total	Percentage	
Total Population	72,346	100.0%	
One Race	70,633	97.6%	
Two or More Races	1,713	2.4%	
One Race	70,633	97.6%	
White	16,307	22.5%	
Black or African American	361	0.5%	
American Indian and Alaska Native	52,978	73.2%	
Cherokee Tribal Grouping	38	0.1%	
Chippewa Tribal Grouping	10	0.0%	
Navajo Tribal Grouping	50,530	69.8%	
Sioux Tribal Grouping	32	0.0%	
Asian	259	0.4%	
Asian Indian	93	0.1%	
Chinese	5	0.0%	
Filipino	59	0.1%	
Korean	31	0.0%	
Vietnamese	39	0.1%	
Other Asian	32	0.0%	
Native Hawaiian and Other Pacific Islander	81	0.1%	
Native Hawaiian	21	0.0%	
Guamanian or Chamorro	10	0.0%	
Other Pacific Islander	50	0.1%	

Apache County, Arizona Demographics American Community Survey (2012-2016)					
Race Total Percenta					
Some Other Race	647	0.9%			
Two or More Races	1,713	2.4%			
White and Black or African American	247	0.3%			
White and American Indian and Alaska Native	795	1.1%			
White and Asian	39	0.1%			
Black or African American and American Indian	202	0.3%			
Hispanic or Latino and Race					
Total population	72,346	100.0%			
Hispanic or Latino (of any race)	4,303	5.9%			
Mexican	3,307	4.6%			
Puerto Rican	67	0.1%			
Cuban	53	0.1%			
Other Hispanic or Latino	876	1.2%			
Not Hispanic or Latino	68,043	94.1%			

American Community Survey (2012-2016)			
Households by Type	Total	Percentage	
Total households	19,351	100.0%	
Family households	13,334	68.9%	
With own children under 18 years	4.852	25.1%	
Married-couple family	7.794	40.3%	
With own children under 18 years	2,508	13.0%	
Male householder, no wife present	1,352	7.0%	
With own children under 18 years	541	2.86%	
Female householder, no husband present	4,188	21.6%	
With own children under 18 years	1,803	9.3%	
Nonfamily households	6,017	31.1%	
Householder living alone	5,295	27.4%	
Households with individuals 65 years and over	2,100	10.9%	
Household Size	Total	Percentage	
Average household size	3.67		
Average family size	4.63		
Relationship	Total	Percentage	
Total population	71,518	100.0%	
In households	70,577	98.7%	
Householder	19,351	27.3%	
Spouse	7,802	11.0%	
Child	28,058	39.6%	
Other relatives	12,607	17.8%	
Nonrelatives	3,113	4.4%	
Unmarried partner	1,281	1.8%	

# Apache County, Arizona Social Statistics

Apache County, Arizona Social Statistics American Community Survey (2012-2016)			
Marital Status	Total	Percentage	
Married males 15 years and over	27,106		
Widowed	820	3.0%	
Divorced	2,137	7.9%	
Married females 15 years and over	27,873		
Widowed	2,308	8.3%	
Divorced	2,700	9.7%	
Grandparents	Total	Percentage	
Number of grandparents living with own grandchildren under 18 years	3,494		
Number of grandparents responsible for own grandchildren under 18 years	1,682		
School Enrollment	Total	Percentage	
Population 3 years and over enrolled in school	21,074		
Nursery school/preschool	1,094	5.2%	
Kindergarten	1,280	6.1%	
Elementary school (grades 1-8)	9,706	46.1%	
High school (grades 9-12)	5,533	26.3%	
College or graduate school	3,461	16.4%	
<b>Educational Attainment</b>	Total	Percentage	
Population 25 years and over	43,657		
Less than 9th grade	4,933	11.3%	
9th to 12th grade, no diploma	4,566	10.5%	
High school graduate (includes equivalency)	14,622	33.5%	
Some college, no degree	11,567	26.5%	
Associate's degree	3,141	7.2%	
Bachelor's degree	3,129	7.2%	
Graduate or professional degree	1,699	3.9%	

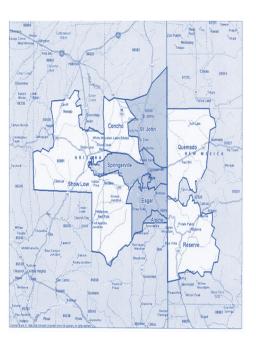
Apache County, Arizona Employment Statistics American Community Survey (2012-2016)		
Employment Status	Total	Percentage
Employed population 16 years and older	53,669	
In labor force	21,686	40.4%
Employed	18,258	34.0%
Unemployed	3,428	6.4%
Not in labor force	31,983	59.6%
Income & Benefits (In 2016 Inflation-Adjusted Dollars)	Total	Percentage
Total households	19,351	
Less than \$10,000	3,830	19.8%
\$10,000 to \$14,999	1,675	8.7%
\$15,000 to \$24,999	2,551	13.2%
\$25,000 to \$34,999	2,179	11.3%
\$35,000 to \$49,999	2,833	14.6%
\$50,000 to \$74,999	2,942	15.2%
\$75,000 to \$99,999	1,638	8.5%
\$100,000 to \$149,999	1,310	6.8%
\$150,000 to \$199,999	298	1.5%
\$200,000 or more	95	0.5%
Median household income	\$32,460	
Mean household income	\$42,584	
Income & Benefits by Type 2016 Inflation-Adjusted Dollars)	Total	Percentage
With earnings	11,662	60.3%
With Social Security	6,896	35.6%
Mean Social Security income	\$15,333	

Apache County, Arizona Employment Statistics American Community Survey (2012-2016)			
Income & Benefits by Type 2016 Inflation-Adjusted Dollars)	Total	Percentage	
With retirement income	3,762	19.4%	
Mean retirement income	\$19,407	(X)	
With Supplemental Security Income	2,573	13.3%	
Mean Supplemental Security Income	\$8,764	(X)	
With cash public assistance income	1,501	7.8%	
Mean cash public assistance income	\$4,306	(X)	
With Food Stamp/SNAP benefits in the past 12 months	5,150	26.6%	
Health Insurance Coverage	Total	Percentage	
Civilian non-institutionalized population	71,536		
With health insurance coverage	54,658	76.4%	
With private health insurance	23,917	33.4%	
With public coverage	34,994	48.9%	
No health insurance coverage	16,878	23.6%	

### **Service Area Definition**

The service area was defined by considering the geographic location and population served by the Apache Country Public Health Services District, Little Colorado Behavioral Health Center, North Country Healthcare and White Mountain Regional Medical Center. The service area includes Southern Apache County and a portion of Catron County, New Mexico. The service area is comprised of twelve (12) Zip Codes. The estimated population of the defined service area is twelve thousand, nineteen (12,019).

Zip Code	City/State	Population Estimates (2015)
85920	Alpine, AZ	74
85924	Concho, AZ	181
85925	Eagar, AZ	4,881
85927	Greer, AZ	42
85930	McNary, AZ	528
85932	Nutrioso, AZ	65
85936	St. Johns, AZ	3,508
85938	Springerville, AZ	1,956
85940	Vernon, AZ	122
87824	Luna, NM	158
87827	Quemado, NM	228
87830	Reserve, NM	276



# **Apache County Health Profile**

### Risk Factors and Health Rankings

A person's health is influenced by biological, social, economic and enviormnetal health factors. People living in rural areas are at higher risk for for poor health. Research indicates that social factors, including educational attainment and poverty, account for over one third (1/3) of the total deaths in the United States in a year.

Research further indicates the likelihood of premature death increases as a person's income decreases and lower education levels are directly connected to lower income and shorter life expectancy.

The *County Health Rankings and Roadmaps*, is a collaboration between the Robert Wood Johnson Foundation and the University Wisconsin Health Institute. The *County Health Rankings and Roadmapss is* based on a model of population health which emphasizes the many factors that help make communities healthier places to live. The *County Health Rankings and Roadmaps* measure the health of each county in the United States and rank

them within each state. These measures are standardized and combined to provide an overview of a community's health.

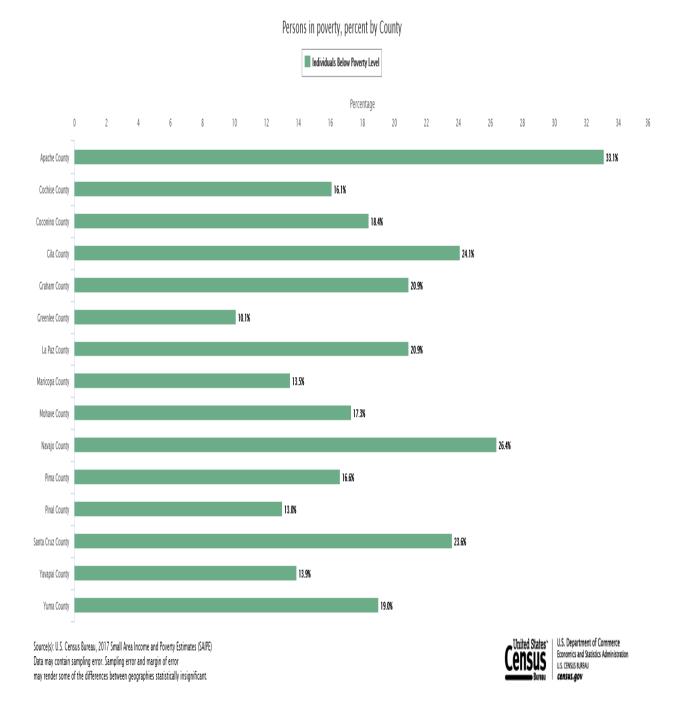
According to the *County Health Rankings and Roadmaps,* seventy-four point one percent (74.1%) of Apache County residents live in a rural area compared to ten point two percent (10.2%) statewide. Apache County therefore has the most rural areas in the state of Arizona.

The United States Census Bereau indicates thirty-three point two percent (33.2%) of Apache County residents live in poverty. According to the *Small Area Income and Poverty Estimates (SAIPE)*, forty-one point one percent (41.1%) of children living in Apache County under the age of eighteen (18) live in poverty. Additionally, Apache County has the highest poverty rate as compared to all other counties in the state of Arizona (see illustration from the *United States Census Bereau* on page 18).

Forty-eight point nine percent (48.9%) of Apache County residents are enrolled in Medicaid while twenty-three point six percent (23.6%) are uninsured.

# Apache County Health Profile (Continued)

### Risk Factors and Health Rankings



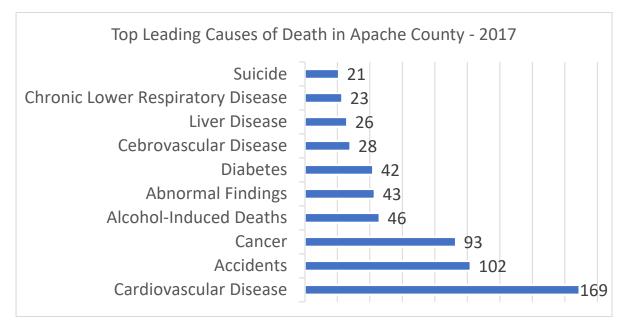
# Apache County Health Profile (Continued)

### Leading Causes of Death

According to the Centers for Disease Control and Prevention, the top ten (10) leading causes of death in Arizona for 2014 were as follows (see illustration from the *Centers for Disease Control and Prevention* below):

AZ Leading Causes of Death, 2014	Deaths	Death Rate***	State Rank*	U.S. Rate**
1. <u>Cancer</u>	11455	142.7	45th	161.2
2. <u>Heart Disease</u>	10805	136.4	47th	167.0
3. <u>Chronic Lower Respiratory Diseases</u>	3396	42.2	26th	40.5
4. <u>Accidents</u>	3322	47.0	20th	40.5
5. <u>Alzheimer's Disease</u>	2485	31.6	13th	25.4
6. <u>Stroke</u>	2235	28.3	47th	36.5
7. <u>Diabetes</u>	1936	24.3	9th (tie)	20.9
8. <u>Suicide</u>	1244	18.0	13th	13.0
9. Chronic Liver Disease/Cirrhosis	1084	14.3	4th	10.4
10. Hypertension	883	11.1	4th	8.2

In accordance with the Arizona Department of Health Services, the top leading causes of death in Apache County for 2017 were as follows:



## **Survey Results**

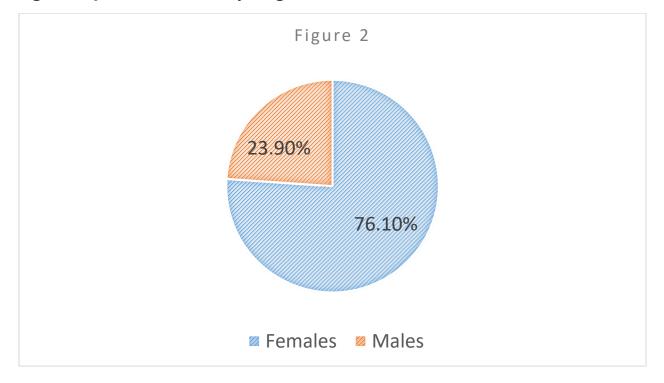
Four hundred and eighteen (418) adult residents from the service area completed the 2018 Community Health Needs Assessment Survey. Whenever possible data from the current CHNA process is compared in this report to the results of the survey completed in 2015. The sample size of the 2018 survey was significantly higher as compared to the 2015 survey which only had a sample size of two hundred and nineteen (219). All data in the **Figures** which follow are sourced directly from the survey results.

The majority of survey's received were from the Eagar, Springerville and St. Johns areas. Responses were also received from many additional areas within the service area as well as a few from outside the service area. The responses by Zip Code of the 2018 survey are outlined in **Figure 1**.

Figure 1			
Zip Code – City	2018 – Survey's Received	2015 – Survey's Received	
85749 – Tucson	1	0	
85901 – Show Low	3	4	
85920 – Alpine	7	5	
85922 – Blue	1	0	
85924 – Concho	16	1	
85925 – Eagar	184	129	
85927 – Greer	1	3	
85929 – Lakeside	4	0	
85932 – Nutrioso	6	2	
85936 – St. Johns	79	18	
85938 – Springerville	92	45	
85940 – Vernon	2	4	
86502 – Chambers	0	2	
86512 – Houck	0	1	
87824 – Luna	0	2	
87829 – Quemado	9	3	
87830 – Reserve	1	0	
No Zip Code Listed	12	0	
Total	418	219	

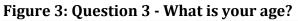
### Figure 1: Question 1 - What is your zip code?

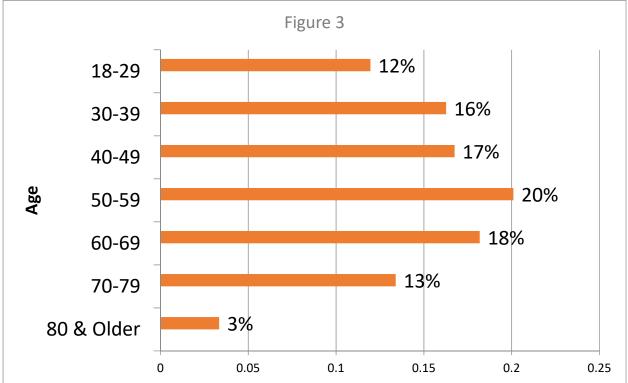
Seventy-six point one percent (76.1%) of the 2018 survey's were completed by female residents while twenty-three point nine percent (23.9%) were completed by males. In 2015 seventy-one point six percent (71.6%) of survey's were completed by female residents while only nineteen point six percent (19.6%) were completed by males. Eight point eight percent (8.8%) of the residents surveyed in 2015 did not specify a gender. See **Figure 2**.



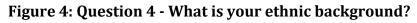
### Figure 2: Question 2 - What is your gender?

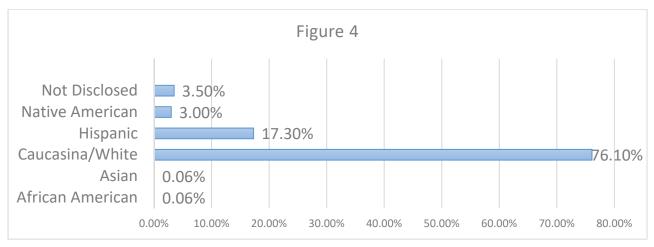
It was determined the largest portion of 2018 responses were received from individuals aged fifty (50) to fifty-nine (59). Seventy-one percent (71%) of the responses received were from individuals between the ages of thirty (30) to sixty-nine (69). In 2015 the largest portion of responses were received from individuals aged thirty (30) to thirty-nine (39), and the majority of responses were received from individuals aged thirty (30) to fifty-nine (59). See **Figure 3**.





Seventy-six point one four percent (76.1%) of the 2018 survey's were completed by caucasian/white residents and seventeen point three percent (17.3%) were completed by hispanic residents. The results of the 2015 survey indicate seventy-three percent (73%) of survey's were completed by caucasian/white residents and thirteen percent (13%) were completed by hispanic residents. See **Figure 4**.





Of the 2018 survey's received it was determined that fifty-nine point three percent (59.3%) were married while fifteen point eight percent (15.8%) were single. The 2015 survey results indicate sixty-six percent (66%) of surveys completed were by persons who are married and seventeen percent (17%) were completed by single individuals. See **Figure 5**.

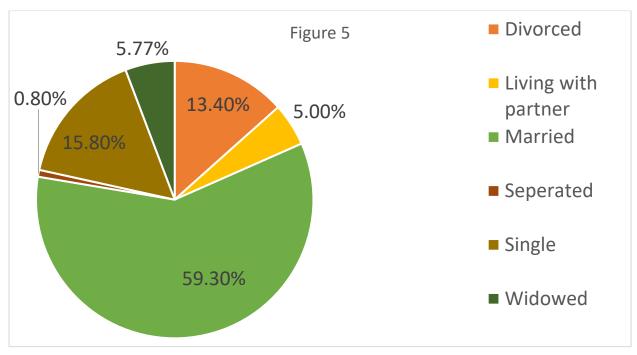
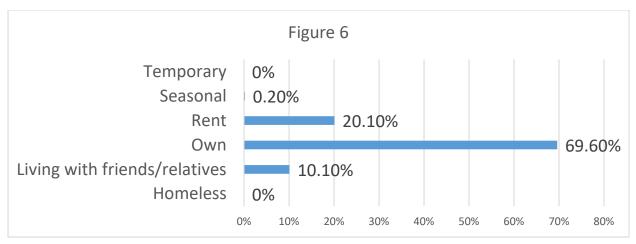


Figure 5: Question 5 - What is your marital status?

It was determined sixty-nine point six percent (69.6%) of those who completed the 2018 survey owned their home and twenty point one percent (20.1%) rent homes. The 2015 survey findings indicate sixty-three percent (63%) of those who completed the survey owned their home and twenty-three percent (23%) rented homes. See **Figure 6**.

Figure 6: Question 6 - What is your housing status?



The 2018 survey results indicate fifty point one percent (50.1%) of those surveyed were employed full-time and twenty-nine point four percent (29.4%) are retired. See **Figure 7**.

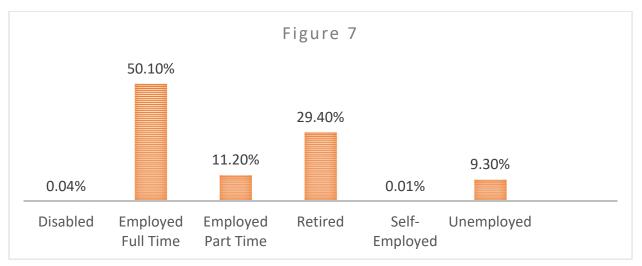
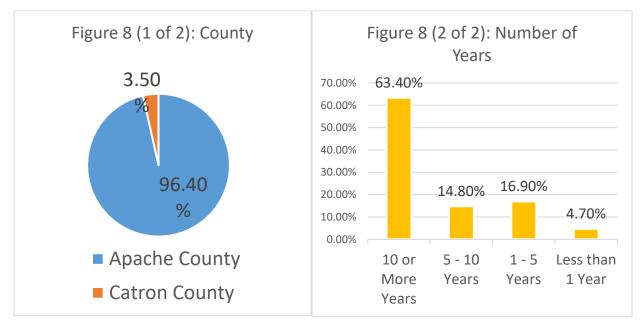


Figure 7: Question 7 - What is your employment status?

Ninety-six point four percent (96.4%) of respondents in 2018 indicated they reside in Apache County. Three point five percent (3.5%) of respondents in 2018 indicated they reside in Catron County. Sixty-three point four percent (63.4%) have resided in Apache and/or Catron County for ten (10) years or more. See **Figure 8 (1 and 2)**.

Figure 8: Question 8 - In which county do you reside, and how long have you lived there?



It was determined the annual income of twenty-five point four percent (25.4%) of those completing the 2018 survey was seventy thousand dollars (\$70,000) or more. Fifteen point nine percent (15.9%) reported an annual household income of ten thousand dollars (\$10,000) to twenty thousand dollars (\$20,000) in 2018. In 2015 thirty-one percent (31%) reported an annual housebold income of fifty thousdand dollars (\$50,000) or more; eighteen percent (18%) declined to provide their annual household income; and, fifteen percent (15%) reported an annual household income of twenty thousand dollars (\$20,000) to thirty thousand dollars (\$20,000). See **Figure 9**.



### Figure 9: Question 9 - What is your annual household income?

Eighty-two percent (82%) of indivuals surveyed in 2018 indicated there were no veterans living in their home. Eighteen percent (18%) of individuals surveyed in 2018 indicated they or someone living in their home was a veteran. Nine point nine percent (9.9%) of veterans reported they receive medical services. One point three percent (1.3%) of veterans reported they receive medical services at a VA Hospital. One point three percent (1.3%) reported they receive medical services in Apache County and one point two percent (1.2%) reported they receive medical services in Navajo County. Three point nine percent (3.9%) of veternas indicated they receive mental health services. One (1) person reported receiving mental health services in Apache County while three (3) reported they receive mental health services in Navajo County. See **Figure 10**.

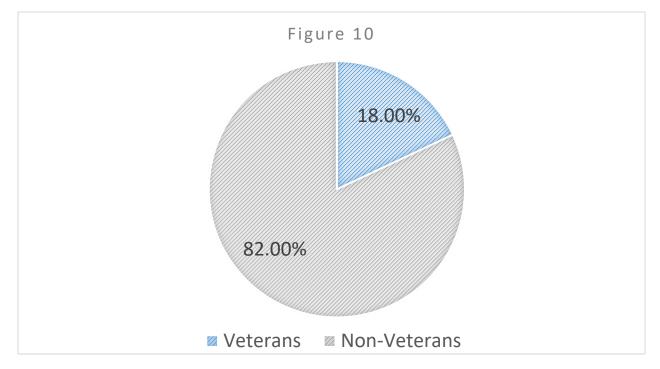


Figure 10: Question 10 - Are you or anyone living in your home a veteran?

It was determined that sixty-one point five percent (61.5%) of those who completed the 2018 survey did not have any children living at home while thirty-eight point five percent (38.5%) had children living at home. See **Figure 11**.

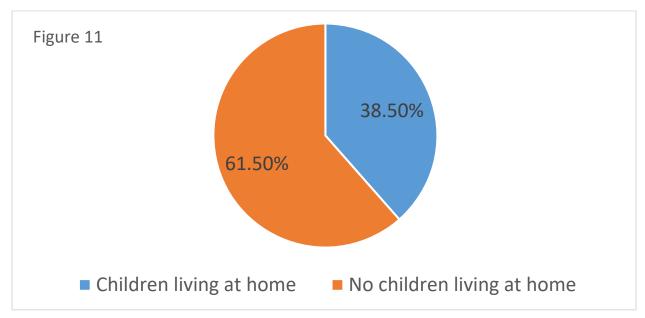


Figure 11: Question 11 - Do you have any children living at home?

During the 2018 survey process, data was collected for a total of one hundred and eighteen (118) children under the age of eighteen (18). Data could only be analyzed for sixty-four point four percent (64.4%) as the information submitted for the remaining thirty-five point five percent (35.5%) was incomplete. Body Mass Index (BMI) was calculated on the sixty-four point four percent (64.4%). It was determined that forty-two point one percent (42.1%) of the children had a BMI within the normal weight range (Normal Weight = BMI 18.5 – 24.9), while thirty-eight point one percent (38.1%) of the children were underweight (Underweight = BMI <18.5). Thirteen point one percent (13.1%) were classified as obese (Obesity = BMI of 30 or greater), and six point five percent (6.5%) were classified as overweight (Overweight = BMI 25 – 29.9). See **Figure 12**.

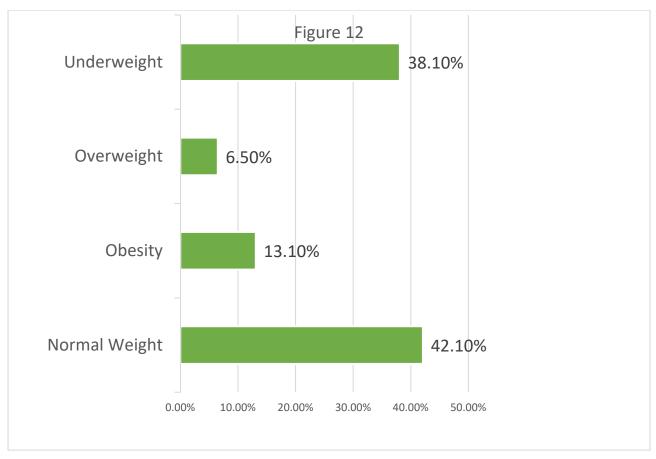


Figure 12: Body Mass Index of children under the age of eighteen (18)

Forty-seven point four percent (47.4%) of those surveyed in 2018 reported their overall health as fair; twenty-four point five percent (24.5%) reported their overall health as very good; and, twenty-two point eight percent (22.8%) reported their overall health as excellent. See **Figure 13**.

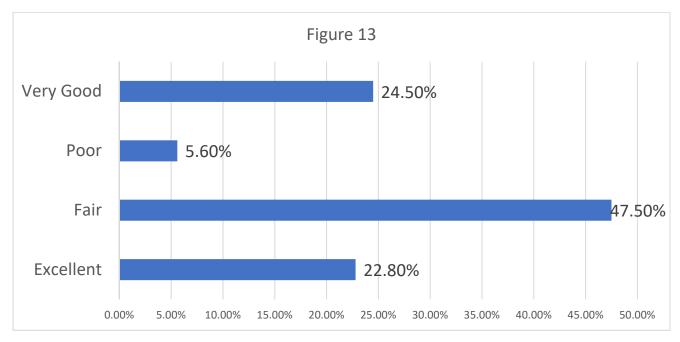
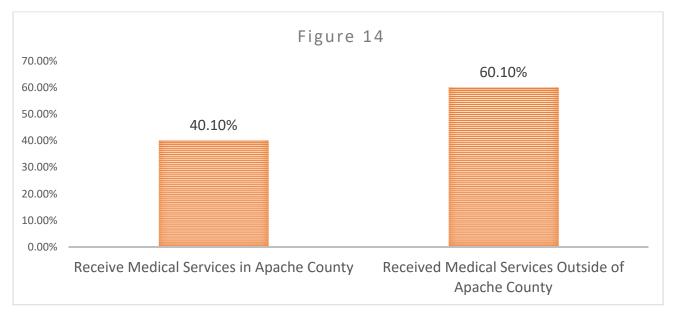


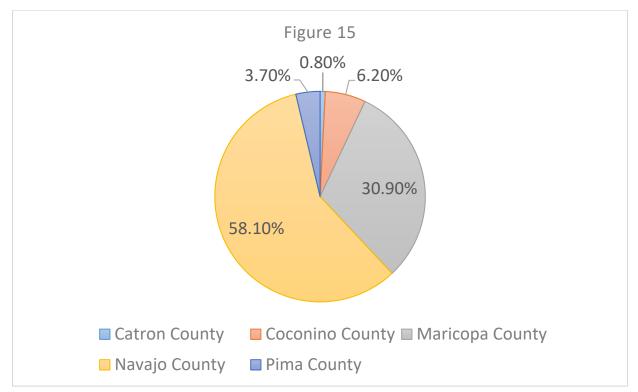
Figure 13: Question 12 - How would you describe your overall health?

The 2018 survey results indicate sixty point one percent (60.1%) of residents have received medical services in another County, while forty point one percent (40.1%) received medical services in Apache County. See **Figure 14**.

Figure 14: Question 13 - Have you or anyone living in your home received medical services in a County other than Apache County?

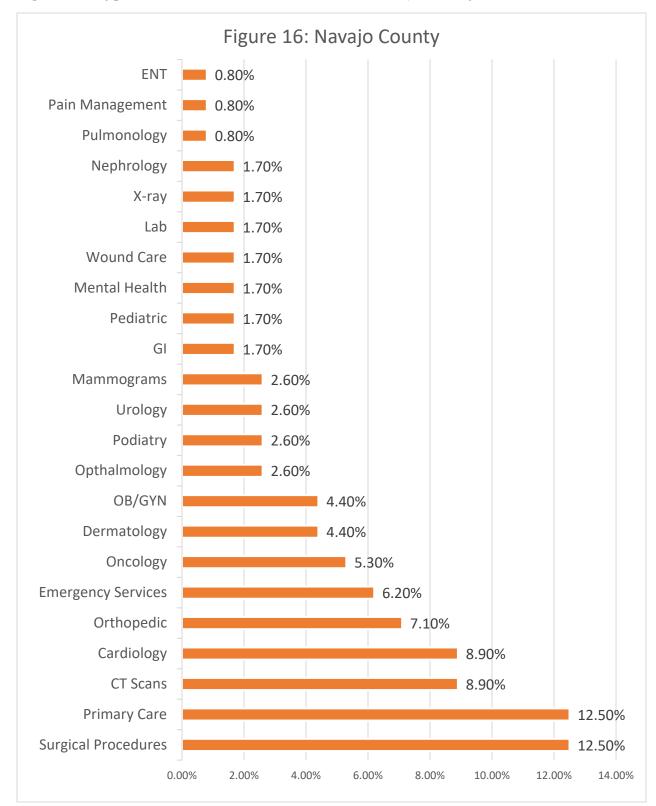


During the 2018 survey process, additional data was collected from two hundred and thirty-nine (239) individuals regarding other counties in which they have received medical services, and the type of medical services they received. Fifty-eight point one percent (58.1%) of those surveyed reported they receive medical services in Navajo County, while thirty point nine percent (30.9%) reported they receive medical services in Maricopa County. See **Figure 15**.



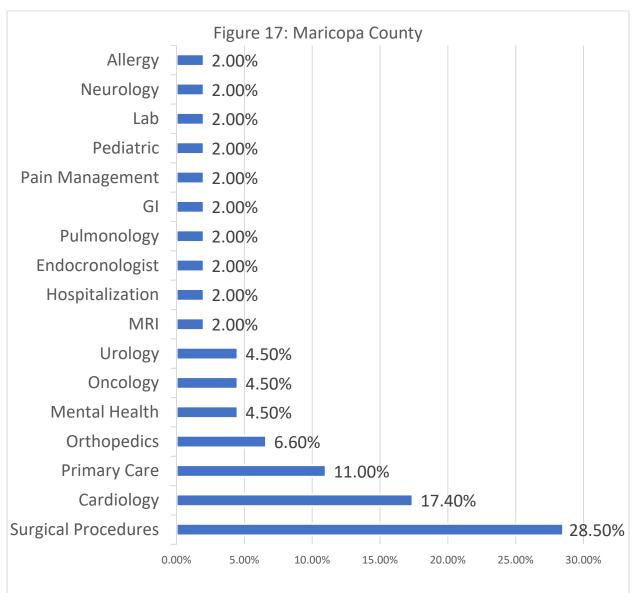


Survey results of 2018 indicate that of the fifty-eight point one percent (58.1%) of indivuals who received medical services in Navajo County, eighty point five percent (80.5%) provided information regarding the types of medical services they received. Nineteen point four percent (19.4%) of those surveyed did not provide information concerning the type of medical services they received. Of the eighty point five percent (80.5%) who provided information regarding the type of services received, twelve point five percent (12.5%) were for surgical procedures; twelve point five percent (12.5%) were for primary care visits; eight point nine percent (8.9%) were for CT Scans; eighty point nine percent (80.9%) were for orthopedic visits; and, six point two percent (6.2%) were emergency room visits. See **Figure 16**.



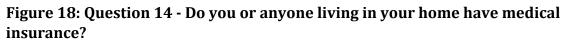
#### Figure 16: Types of medical services received in Navajo County

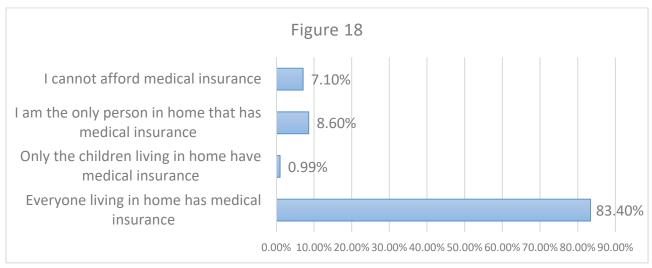
Survey results of 2018 indicate that of the thirty point nine percent (30.9%) of individuals who received medical services in Maricopa County, sixty-two point one percent (62.1%) provided information regarding the types of medical services they received. Thirty-seven point eight percent (37.8%) of those surveyed did not provide information concerning the type of medical services they received. Of the sixty-two point one percent (62.1%) who provided information regarding the type of services received, twenty-eight point five percent (28.5%) were for surgical procedures; seventeen point four percent (17.4%) were for cardiology services; eleven percent (11.0%) were for primary care visits; and, six point six percent (6.6%) were for orthopedic visits. See **Figure 17**.



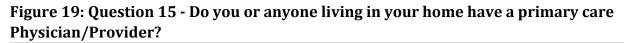
### Figure 17: Types of medical services received in Maricopa County

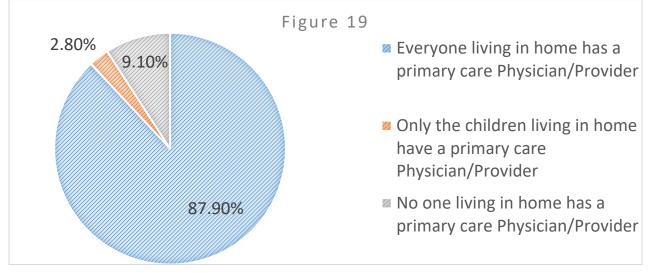
Eighty-three point four percent (83.4%) of those surveyed in 2018 reported everyone living in their home has medical insurance. Eight point six percent (8.6%) indicated they were the only person in their home with medical insurance, while seven point one percent (7.1%) reported they could not afford medical insurance. See **Figure 18**.



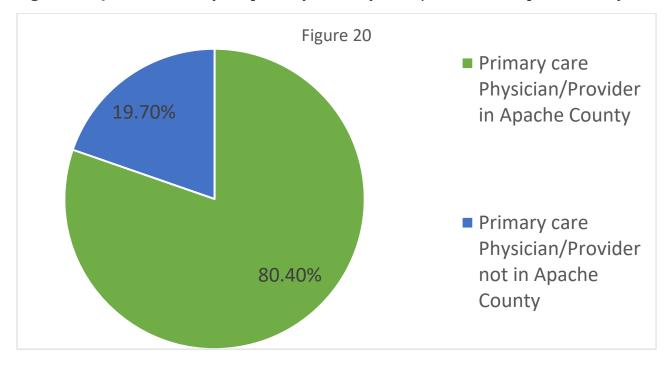


The 2018 survey results indicate eighty-seven point nine percent (87.9%) of those completed the survey have a primary care Physician/Provider, while nine point one percent (9.1%) do not have a primary care Physician/Provider. See **Figure 19**.



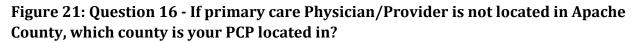


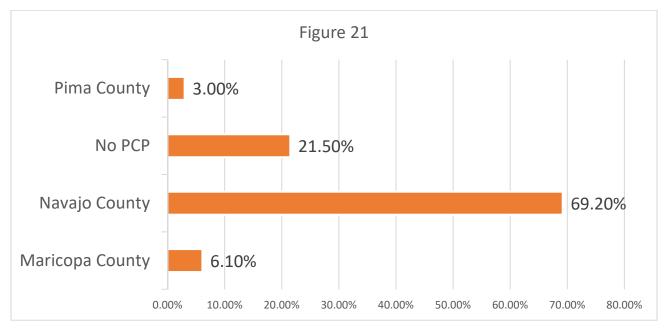
Eighty point four percent (80.4%) of those surveyed in 2018 reported their primary care Physician/Provider is located in Apache County. Nineteen point seven percent (19.7%) of those surveyed in 2018 reported their primary care Physician/Provider is not located in Apache County. Survey results indicated seventy percent (70%) of those surveyed in 2015 had a primary care Physician/Provider in Apache County, while thirty percent (30%) did not have a primary care Physician/Provider in Apache County. See **Figure 20**.





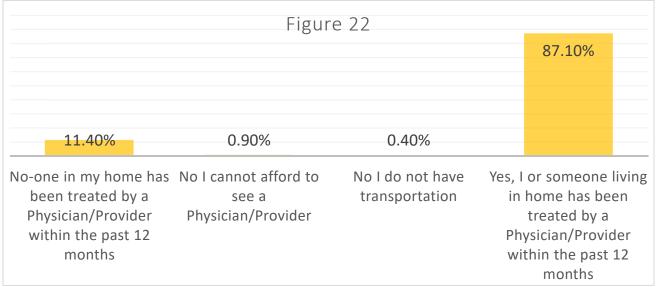
The survey results of 2018 indicate that of the nineteen point seven percent (19.7%) who indicated their primary care Physician/Provider is not in Apache County, sixty-nine point two percent (69.2%) reported thier primary care Physician/Provider is located in Navajo County. Twenty-one point five percent (21.5%) reported they do not have a primary care Physician/Provider, and six point one perecent (6.1%) reported their primary care Physician/Provider is located in Maricopa County. See **Figure 21**.



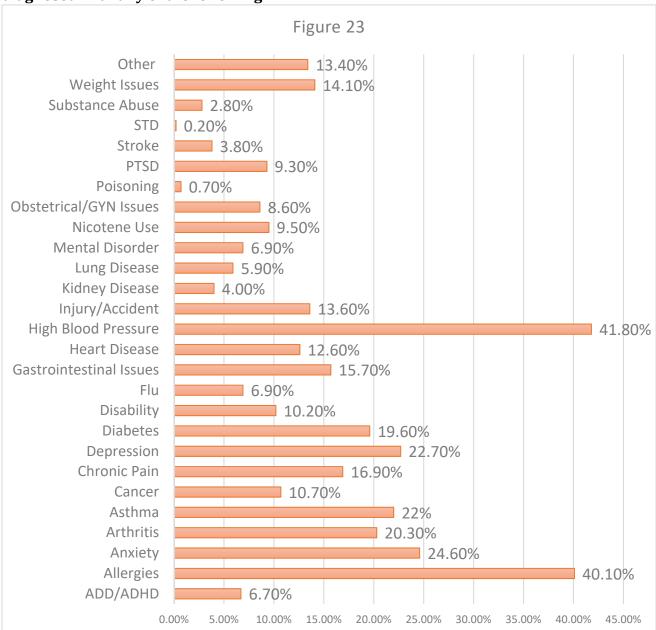


Eighty-seven point one percent (87.1%) of those surveyed in 2018 reported they were treated by a Physician/Provider within the past twelve (12) months. Eleven point four percent (11.4%) reported they have not been treated by a Physician/Provider within the past twelve (12) months. See **Figure 22**.

# Figure 22: Question 17- Have you or anyone living in your home been treated by a Physician/Provider within the past twelve (12) months?



The 2018 survey indicates the top ten (10) diagnosis in which individuals reported they were treated for or diagnosed with were: High Blood Pressure; Allergies; Anxiety; Depression; Asthma; Arthritis; Diabetes; Chronic Pain; Gastrointestinal Issues; and, Weight Issues. The 2015 survey indicates the top ten (10) diagnosis in which individuals were treated or diagnosed with were: High Blood Pressure; Asthma; Depression; High Cholesterol; Chronic Pain; Diabetes; Heart Disease; Arthritis; ADD/ADHD; and Anxiety. See **Figure 23**.



# Figure 23: Question 18 - Have you or anyone living in your home been treated for or diagnosed with any of the following?

Additional data was collected during the 2018 survey process on fifty-one point four percent (51.4%) of individuals who provided detailed information regarding the health issues they were most concerned with. Of the fifty-one point four percent (51.4%), the top ten (10) health concerns noted were: high blood pressure, diabetes, blood clots, chronic pain, depression, heart disease, anxiety, weight issues, cancer and asthma. See **Figure 24**.

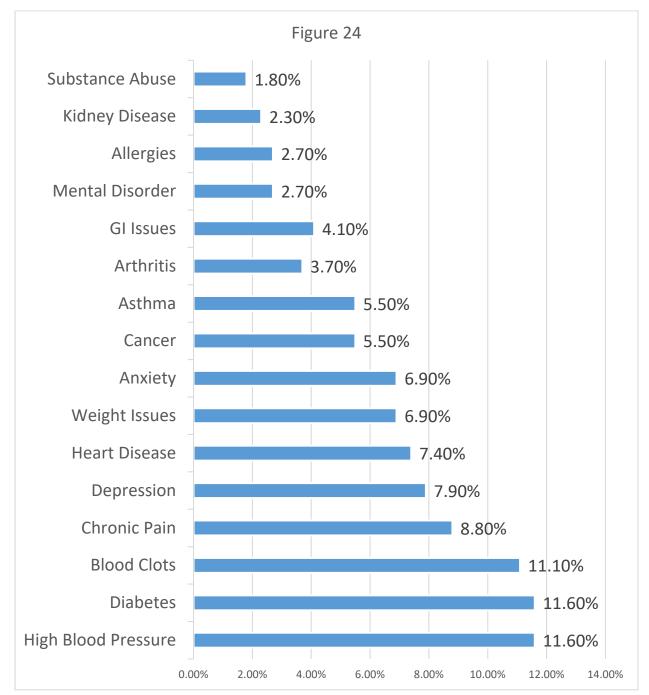
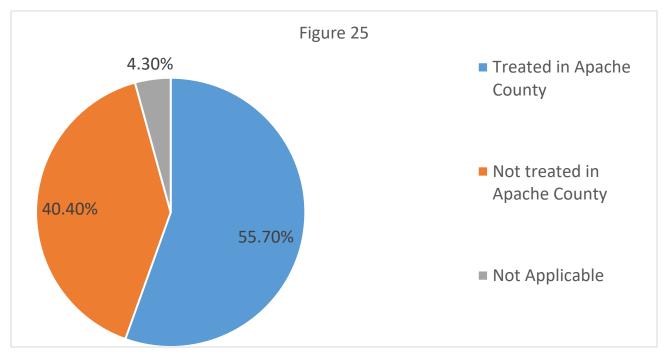


Figure 24: Question 18 - Which of your health issues concerns you the most?

It was determined that fifty-five point seven percent (55.7%) of individuals who responded to the 2018 survey were treated in Apache County for the health issues listed in **Figure 23**. Forty point four percent (40.4%) of those individuals were treated in another County. See **Figure 25**.

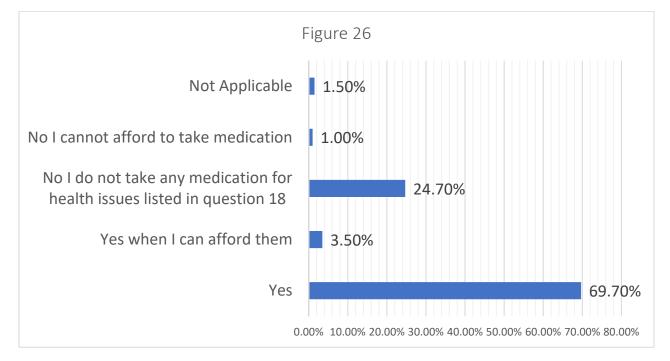
Of the forty point four percent (40.4%) of individuals who indicated on the 2018 survey that they were treated in another county for health issues listed in **Figure 23**, a mere fifty (50) individuals submitted detailed information regarding the other counties they were treated in. Seventy-eight percent (78.0%) of the fifty (50) indivuduals reported they were treated in Navajo County, and twenty-two percent (22.0%) of the fifty (50) individuals reported they were treated in Maricopa County.

Figure 25: Question 19 - Were you or anyone living in your home treated in Apache County for any of the health issues listed in question #18?

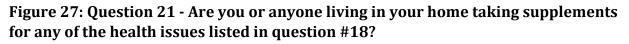


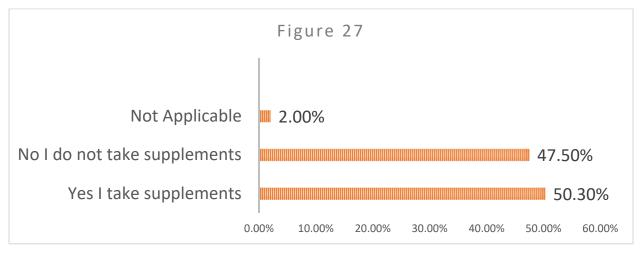
Sixty-nine point seven percent (69.7%) of those surveyed in 2018 reported they are taking prescription medications for health issues listed in **Figure 23**. Twenty-four point seven percent (24.7%) reported they are not taking prescription medications for health issues listed in **Figure 23**. The 2015 survey indicates thirty-one percent (31%) of individuals surveyed took their medication, while nearly sixty percent (60%) reported they did not take their medication. See **Figure 26**.

Figure 26: Question 20 - Are you or anyone living in your home taking prescription medicaitons for any of the health issues listed in question #18?

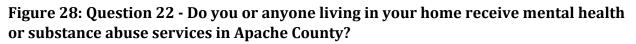


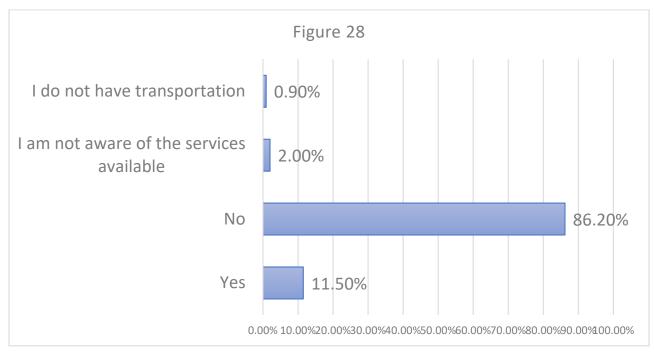
The 2018 survey results indicate fifty point three percent (50.3%) of individuals who complted the survey take supplements for health issues listed in **Figure 23**. Forty-seven point five percent (47.5%) indicated they do not take supplements for health issues listed in **Figure 23**. See **Figure 27**.



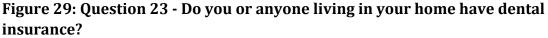


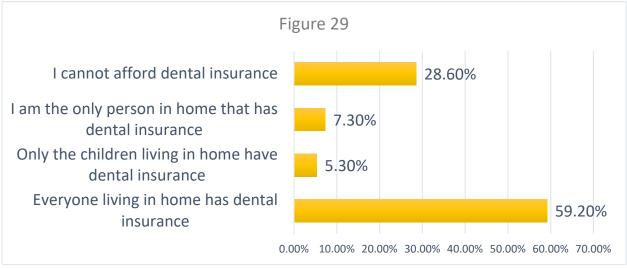
Eighty-six point two percent (86.2%) of those surveyed in 2018 reported they do not receive mental health or substance abuse services in Apache County. Eleven point five percent (11.5%) reported they do receive mental health or substance abuse services in Apache County. See **Figure 28**.



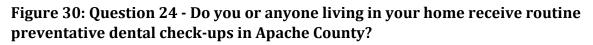


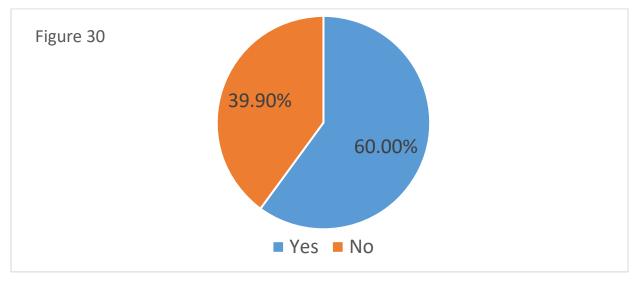
Fifty-nine point two percent (59.2%) of those surveyed in 2018 reported everyone living in their home has dental insurance. Twenty-eight point six percent (28.6%) reported they cannot afford dental insurance, while seven point three percent (7.3%) indicated they were the only person in their home with dental insurance. See **Figure 29**.





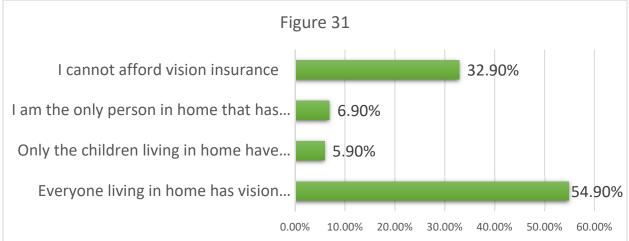
The 2018 survey results indicate sixty point five percent (60.5%) of individuals completing the survey receive routine preventative dental check-ups in Apache County. Thirty-nine point nine percent (39.9%) reported they do not receive routine preventative dental check-ups in Apache County. Of the thirty-nine point nine percent (39.9%) of individuals that do not receive routine preventative dental check-ups in Apache County, nineteen point six percent (19.6%) reported they receive routine preventative dental check-ups in Navajo County. See **Figure 30**.





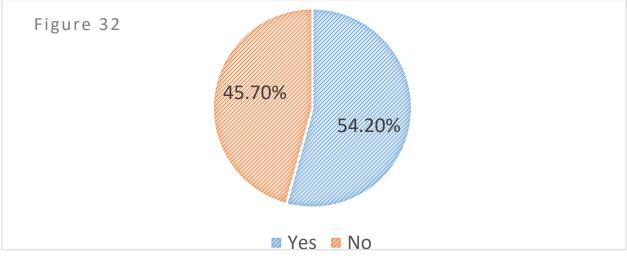
Fifty-four point nine percent (54.9%) of those surveyed in 2018 reported everyone living in their home has vision insurance. Thirty-two point nine percent (32.9%) reported they cannot afford vision insurance, while six point nine percent (6.9%) indicated they were the only person in their home with vision insurance. See **Figure 31**.





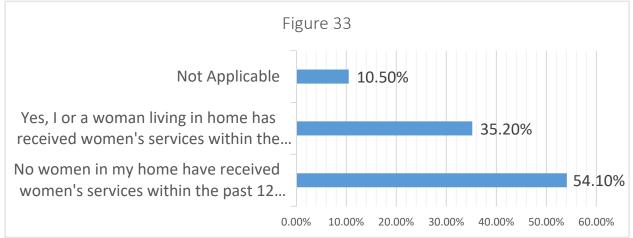
The 2018 survey results indicate fifty-four point two percent (54.2%) of individuals completing the survey receive routine vision care services in Apache County. Forty-five point seven percent (45.7%) reported they do not receive routine vision care services in Apache County. Of the forty-five point seven percent (45.7%) of individuals that do not receive routine vision care services in Apache County, twenty point eight (20.8%) reported they receive routine vision care services in Navajo County. See **Figure 32**.

Figure 32: Question 26 - Do you or anyone living in your home receive routine vision care services in Apache County?



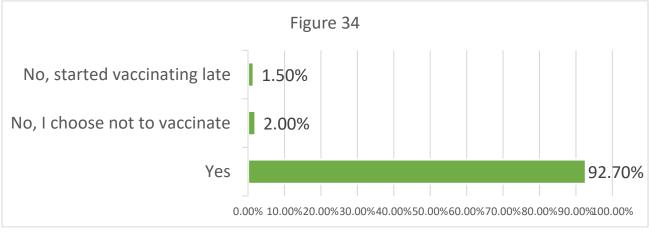
The 2018 survey results indicate fifty-four point one percent (54.1%) of those completing the survey have not received women's services within the past twelve (12) months. Thirty-five point two percent (35.2%) reported they have received women's services within the past twelve (12) months. See **Figure 33**.

Figure 33: Question 27 - Have you or any women living in your home received women's services within the past 12 months?



Of the total population surveyed only thirty-eight point five percent (38.5%) indicated they had children living at home. The 2018 survey results indicate of those surveyed who had children living in their home, ninety-two point seven percent (92.7%) reported children in home are up to date on their immunizations. Two percent (2.0%) choose not to vaccinate, while one point five percent (1.5%) started vaccinating late. Three point eight percent (3.8%) did not answer the question. See **Figure 34**.





Of the total population surveyed only thirty-eight point five percent (38.5%) reported they had children living at home. The 2018 survey results indicate of those surveyed who had children living in their home, fifty-eight point two percent (58.2%) receive their immunizations from a Physician/Provider office, while thirty-two point eight percent (32.8%) receive their immunizations at the Health Department. See **Figure 35**.

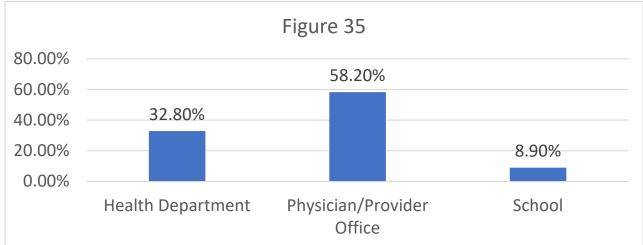
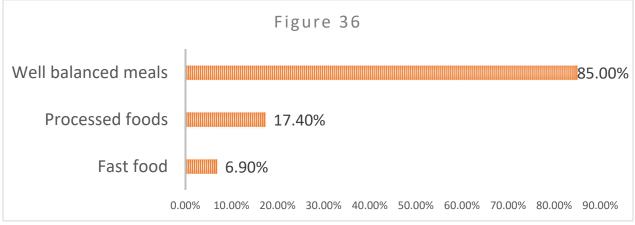


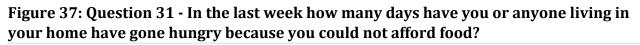
Figure 35: Question 29 - Where do the children living in your home receive their immunizations?

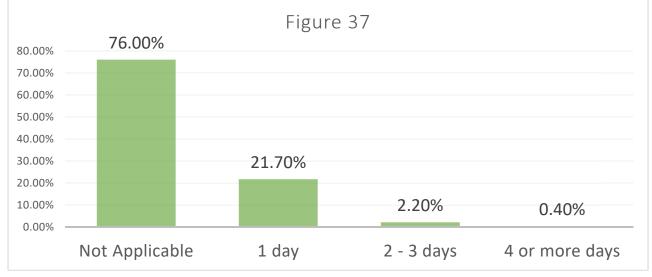
Eighty-five percent (85.0%) of individuals completing the 2018 survey reported the majority of meals served in their home were well balanced meals that were prepared in their homes. Seventeen point four percent (17.4%) reported the majority of meals served in their home were processed foods, while six point nine percent (6.9%) reported fast food was the majority of meals served in their home. See **Figure 36**.

## Figure 36: Question 30 - In the last month the majority of meals served in my home were:

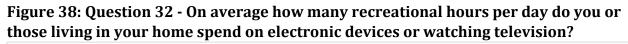


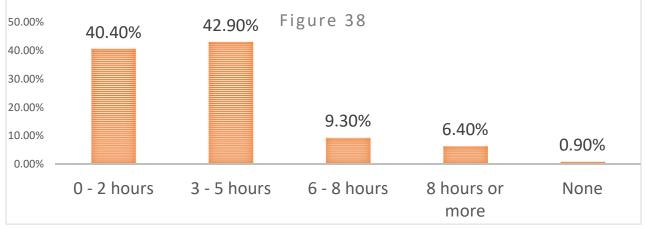
The 2018 survey results indicates twenty-one point seven percent (21.7%) of those completing the survey have gone hungry for up to one (1) day, while two point two percent (2.2%) have gone hungry for two (2) to three (3) days. Seventy-six percent (76.0%) indicated this was not applicable. See **Figure 37**.





Forty-two point 9 percent (42.9%) of those surveyed in 2018 reported they spend three (3) to five (5) recreational hours per day on electronic devices or watching television. Forty point four percent (40.4%) reported they spend zero (0) to two (2) recreational hours per day on electronic devices or watching television. See **Figure 38**.





The 2018 survey results indicate eighty-four point four percent (84.4%) of those completing the survey feel like they belong in their community, while fifteen point seven percent (15.7%) do not feel like they belong in their community. See **Figure 39**.

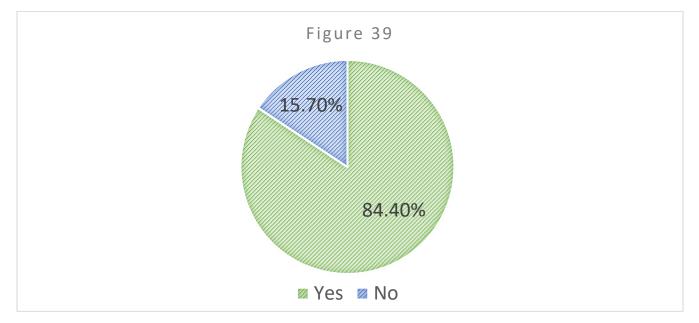


Figure 39: Question 33 - I feel like I belong in my community?

Of the total population surveyed only thirty-eight point five percent (38.5%) reported they had children living at home. The 2018 survey results indicate of those surveyed, ninety point six percent (90.6%) reported their children feel they belong in their school, and nine point four percent (9.4%) reported their children do not feel they belong in their school. See **Figure 40**.

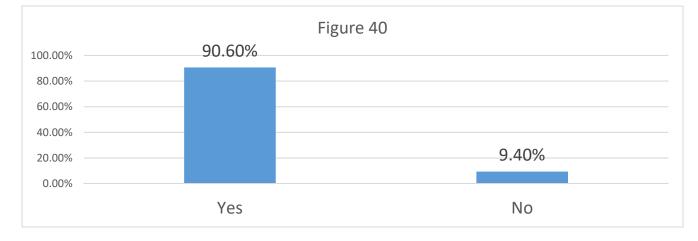


Figure 40: Question 35 - My children feel they belong in their school?

Of the total population surveyed only thirty-eight point five percent (38.5%) reported they had children living at home. The 2018 survey results indicate of those surveyed, ninety-five percent (95.0%) reported their children feel safe at their school, and five percent (5.0%) reported their children do not feel safe at their school. See **Figure 40**.

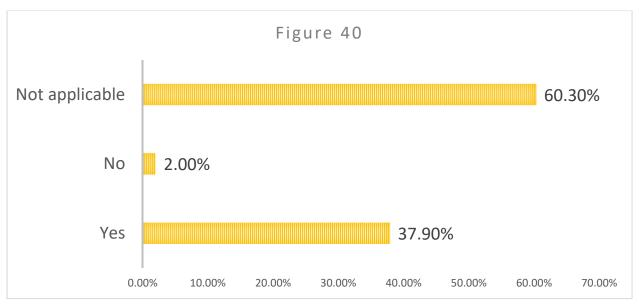
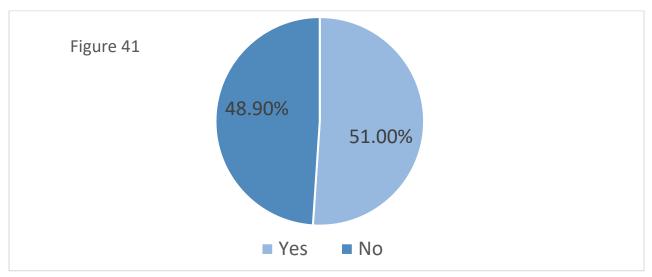


Figure 40: Question 35 - My children feel safe at their school?

The 2018 survey results indicate fifty-one percent (51.0%) of those surveyed are involved in community groups, while forty-eight point nine percent (48.9%) are not involved in community groups. See **Figure 41**.

Figure 41: Question 36 - I am involved in community groups?



Sixty-nine point eight percent (69.8%) of those surveyed in 2018 reported they are prepared in the event of an emergency or evacuation. Thirty point six percent (30.6%) reported they are not prepared in the event of an emergency or evacuation. See **Figure 42**.

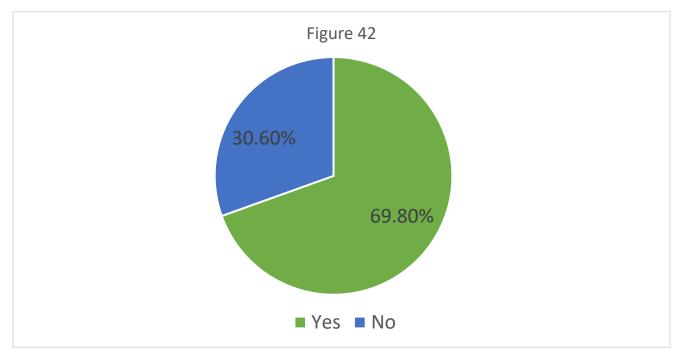
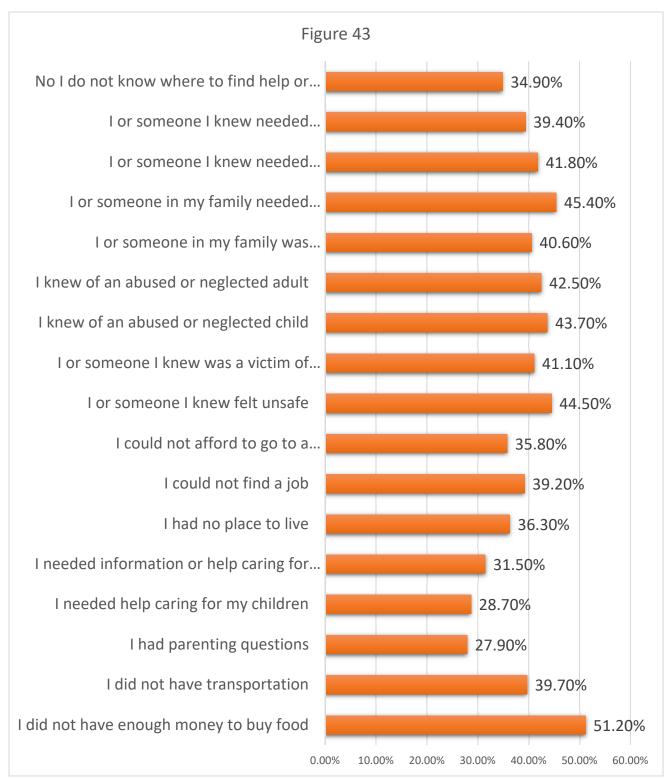


Figure 42: Question 37 - I am prepared in the event of an emergency or evacuation?

The 2018 survey results indicate thirty-four point nine percent (34.9%) of individuals completing the survey did not know where to find help or assistance for any of the services listed in question thirty-eight (38). This is a significant improvement from the 2015 survey which indicates seventy-four percent (74%) of individuals surveyed did not know where to find help or assistance for the services. See **Figure 43**.

#### Figure 43: Question 38 - I would know where to find help or assistance if.....



#### **Community Health Needs Priorities**

The Steering Committee developed a prioritization process and criteria in order to evaluate the significant health needs which were identified in the CHNA survey. The following summarizes each of the identified health needs priorities which is based on data and information gathered through the CHNA process. The Steering Committee narrowed the top three (3) priority needs (see below):

- 1. Access to Community Resources
- 2. Mental Health Services: Substance Abuse and Suicide Prevention
- 3. Chronic Disease Management

#### Implementation Strategies: Community Education

Community education is an important aspect to inspiring, challenging and empowering the community with knowledge to help improve their overall health and quality of life. The success of community education programs relies not only on the active involvement of participants, but also those who provide services in the community. The Steering Committee developed the following implementation strategies as it relates to community education:

- Develop and promote a community educational site and/or newsletters to be shared among local healthcare and community organizations in an effort to increase education in the community.
- Strengthen coordination among local healthcare and community organizations to expand educational opportunities within the community.
- Partner with local healthcare and community organizations in an effort to encourage community wellness events and programs.
- A coalition will be formed by the end of March 2019 to address the health needs priorities, implementation planning and evaluation planning. The coalition will involve multiple community agencies and community leaders. Implementation planning will align with existing assets and programs, as well as, with the goals and objectives outined in the CHNA. The coalition will additionally develop assessment measures to monitor whether or not goals and objectives are met.

#### Priority 1: Access to Community Resources

Community outreach is a key component in raising awareness of services available in the community. Establishing partnerships with local healthcare organizations, community organizations and community leaders is vital in increasing the health and wellness of the community. In addition to the implementation strategies developed by the Steering

#### Priority 1: Access to Community Resources (Continued)

Committee, the Steering Committee developed the following action plan as it relates to community resources:

• Develop and promote a community resource site and/or guide to be shared among local healthcare and community organizations in an effort to increase awareness of resources and services available in the community.

# *Priority 2: Mental Health Services: Substance Abuse and Suicide Prevention*

Substance abuse and suicide have a major impact on individuals, families and communities. The effects of substance abuse and suicide are cumulative and significantly contribute to social, physical, mental and public health problems. The health impact of substance abuse can furthermore lead to several negative health outcomes. Suicide is a leading cause of death in the United States. More than thirty-three thousand (33,000) people die by suicide each year in the United States. In addition to the implementation strategies developed by the Steering Committee, the Steering Committee developed the following action plan as it relates to substance abuse and suicide prevention:

- Provide and expand substance abuse and suicide prevention programs in collaboration with healthcare organizations and providers.
- Collaborate with healthcare organizations, community organizations and providers to improve care, awareness, management and promote prevention of substance abuse and suicide. Increase knowledge of substance abuse and suicide warning signs and enhance communication and intervention skills.

#### Priority 3: Chronic Disease Management

An integrated care approach to the management of chronic diseases includes screenings, check-ups, monitoring and coordinating treatment, and patient education. Chronic disease management is a critical component of primary care that contributes to improving a patients health and quality of life. In addition to the implementation strategies developed by the Steering Committee, the Steering Committee developed the following action plan as it relates to chronic disease management:

- Provide and expand chronic diesease self management programs in collaboration with healthcare organizations, community organizations and providers.
- Collaborate with healthcare organizations, community organizations and providers to improve care, awareness, management and promote prevention of chronic diseases.

#### **Appendix A: Data Sources**

The primary data sources utilized to compile information in the 2018 Community Health Needs Assessment report include the following:

- Apache County Community Health Needs Assessment (2013) Accessed data August 2018 - November 2018: https://www.co.apache.az.us/wp-content/uploads/2015/09/CHIP.pdf
- Apache County Community Health Needs Assessment (2015) Accessed data August 2018 November 2018
- Apache County Website (2018) Accessed data November 2018: https://www.co.apache.az.us/
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