Moab Regional Hospital
Moab, Utah

Community Health Needs Assessment, Focus Group Findings, and Secondary Data Analysis

December 2019

NATIONAL
RURAL HEALTH
RESOURCE CENTER

525 South Lake Avenue, Suite 320
Duluth, Minnesota 55802
(218) 727-9390 | info@ruralcenter.org | www.ruralcenter.org

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Introduction

Moab Regional Hospital (MRH) is a 17-bed not-for-profit critical access hospital (CAH) located in Moab, Utah, within Grand County. MRH participated in Community Health Needs Assessment (CHNA) services administrated by the National Rural Health Resource Center (The Center) of Duluth, Minnesota.

In the summer of 2019, The Center conferred with leaders from MRH to discuss the objectives of a regional CHNA. A mailed survey instrument was developed to assess the healthcare needs and preferences in the service area. The survey instrument was designed to be easily completed by respondents. Responses were electronically scanned to maximize accuracy. The survey was designed to assemble information from local residents regarding:

Demographics	Perception of community health	Utilization and perception of local health services

Sampling

MRH provided The Center with a count of inpatient hospital admissions by zip code from the previous year. Zip codes with the greatest number of admissions were stratified in the initial sample selection. Each area would be represented in the sampling proportionately to both the overall served population and the number of past admissions. Eight hundred addresses representing the sample area were selected randomly from PrimeNet Data Source, a marketing organization. Although the survey samples were proportionately selected, actual surveys returned from each population area varied. This may result in slightly less proportional results.

Survey Implementation

In September 2019, the CHNA, a cover letter on MRH's letterhead, and a postage paid reply envelope were mailed first class to 800 randomly selected residents in the targeted region (four zip codes). A press release was sent to local newspapers

prior to the survey distribution announcing that MRH would conduct a CHNA throughout the region, in cooperation with The Center.

One hundred twenty-nine (129) mailed surveys were returned, providing a 16% response rate. Based on the sample size, surveyors are 95% confident that the responses are representative of the service area population, with a margin of error of 7.91. Note that zero of the original 800 surveys sent were returned by the U.S. Postal Service as undeliverable. Based on the experience of The Center, zero undeliverable mailings is irregular. The response rate may be underestimated if some of the survey mailings were in fact undelivered. The Center administered a CHNA for MRH in 2016 and 2013. Comparative data is included in the survey findings, when applicable. Below is a chart comparing response rates.

Year	Number Sent	Undeliverable	Completed Surveys	Response Rate
2019	800	0	129	16%
2016	800	64	184	25%
2013	800	87	180	25%

A series of focus groups and secondary data analysis were also conducted to add information to the CHNA findings. Methodology and findings of the focus groups and secondary data are discussed later in the report. Content from the survey, focus groups, and secondary data analysis are discussed in the report where topics or findings relate. Recommendations are included for developing and implementing program plans to address key health issues identified by the community. A copy of the survey instrument is included in Appendix A.

Report Findings May be Used For:

- Developing and implementing plans to address key issues as required by the Patient Protection and Affordable Care Act §9007 for 501(c)3 charitable hospitals
- Promoting collaboration and partnerships within the community or region
- Supporting community-based strategic planning
- Writing grants to support the community's engagement with local healthcare services
- Educating groups about emerging issues and community priorities
- Supporting community advocacy or policy development

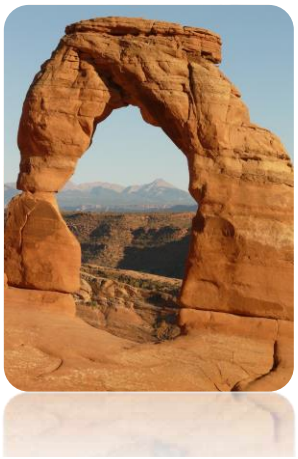
Survey Findings

In the following tables and graphs, the question asked on the mailed survey is emboldened and the question number from the mailed survey is appropriately labeled as "Q4". The number of respondents per question is also noted.

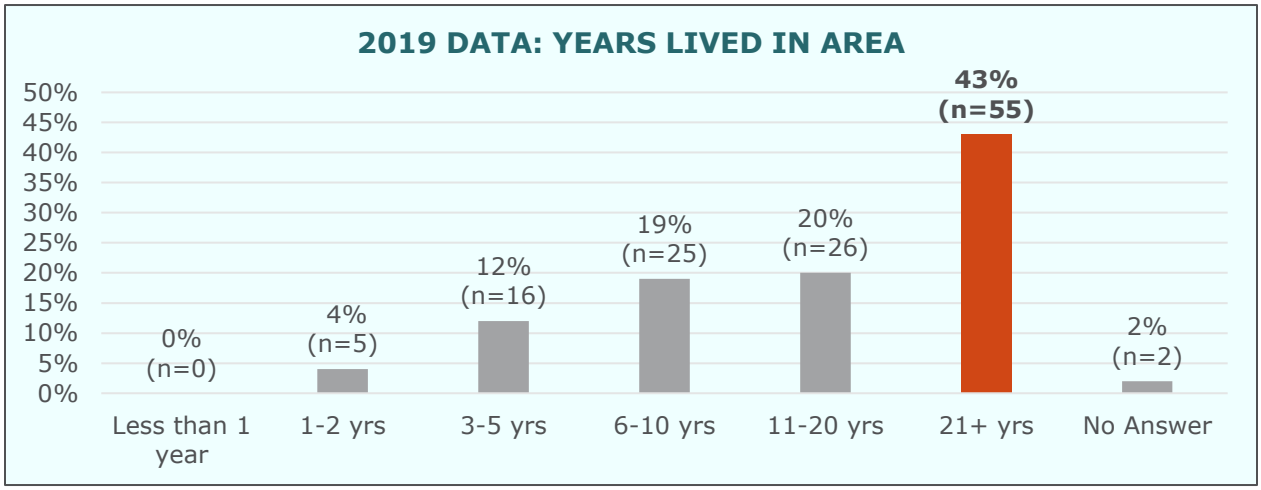
Demographics

Q27: Where do you currently live by zip code? Ninety-two percent of survey respondents live in Moab. The data from 2016 and 2013 is very similar. (N=129)

Zip Code	n=	2019	*2016*	*2013*
84532 (Moab)	**119**	**92%**	*96%*	*94%*
No Answer	4	3%	*0%*	*1%*
84525 (Green River)	2	2%	*0%*	*2%*
84540 (Thompson Springs)	2	2%	*1%*	*1%*
84530 (La Sal)	2	2%	*3%*	*3%*

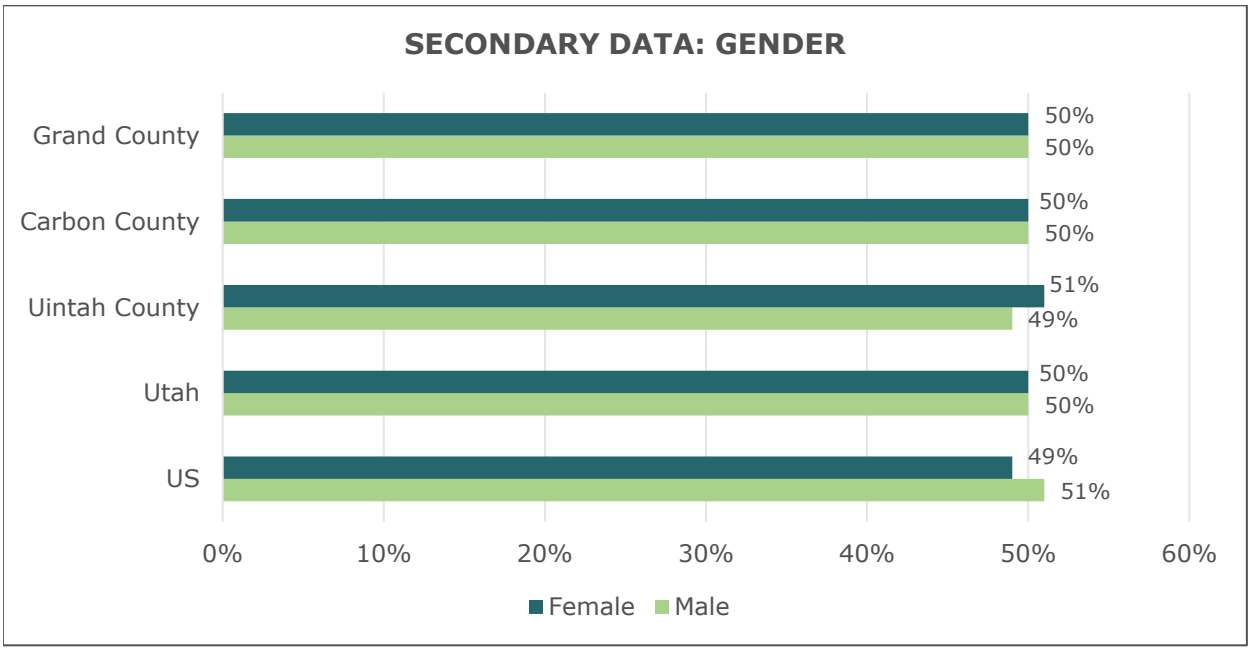


Q28: About how long have you lived in the area? Forty-three percent of survey respondents have lived in the area for 21 plus years. Thirty-nine percent have lived in the area for 6-20 years. (N=129)



Q29: What is your gender? Sixty-four percent of survey respondents are female. The data from 2016 and 2013 is very similar. (N=129)

Gender	n=	2019	*2016*	*2013*
Female	**82**	**64%**	*59%*	*58%*
Male	43	33%	*38%*	*38%*
No Answer	3	2%	*3%*	*4%*
Prefer to self-describe	1	1%	*N/A*	*N/A*
Transgender	0	0%	*N/A*	*N/A*
Gender-fluid	0	0%	*N/A*	*N/A*

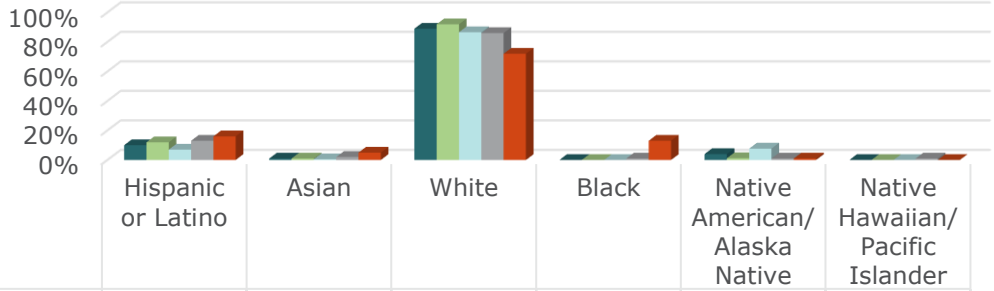


Q30: With what ethnicity do you most identify? (select all that apply)
Ninety-three percent of respondents are white/Caucasian. The data from 2016 and 2013 is very similar. Respondents were asked to select all that apply so the total does not equal 100 percent. (N=129)

Ethnicity	n=	2019	*2016*	*2013*
White/Caucasian	**117**	**93%**	*93%*	*91%*
Hispanic	7	6%	*1%*	*2%*
American Indian/Alaska Native	4	3%	*0%*	*1%*
Black/African American	2	2%	*0%*	*0%*
Latino/Latina	2	2%	*N/A*	*N/A*
Other	2	2%	*1%*	*2%*
Asian	1	1%	*0%*	*1%*
Don't Know/Not Sure	1	1%	*N/A*	*N/A*
Pacific Islander	0	0%	*N/A*	*N/A*

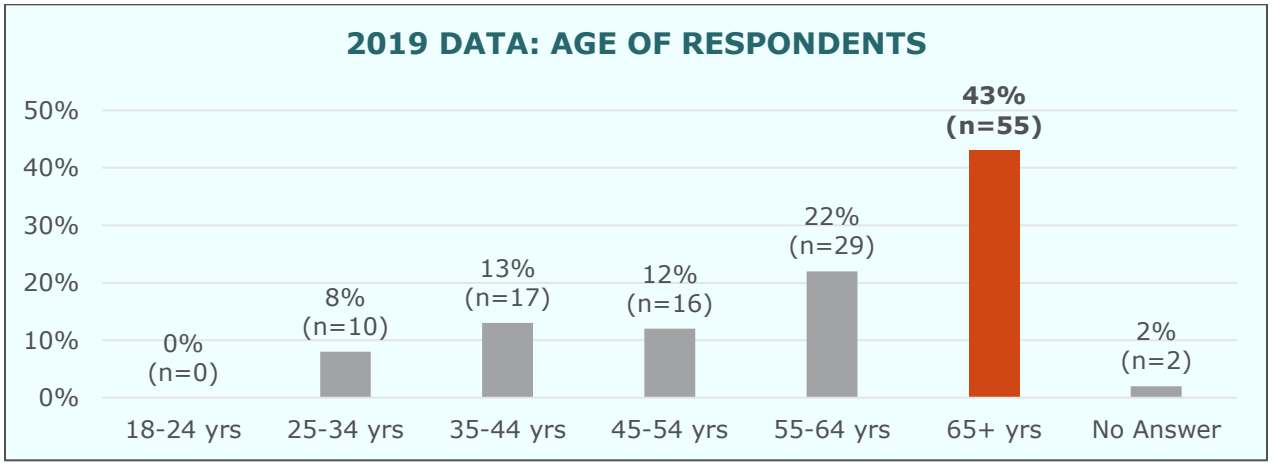
Below is secondary data comparing ethnicity among all three counties, Utah, and the US. The survey respondents are representative of the secondary data, though Hispanic or Latino population responding to the survey is lower.

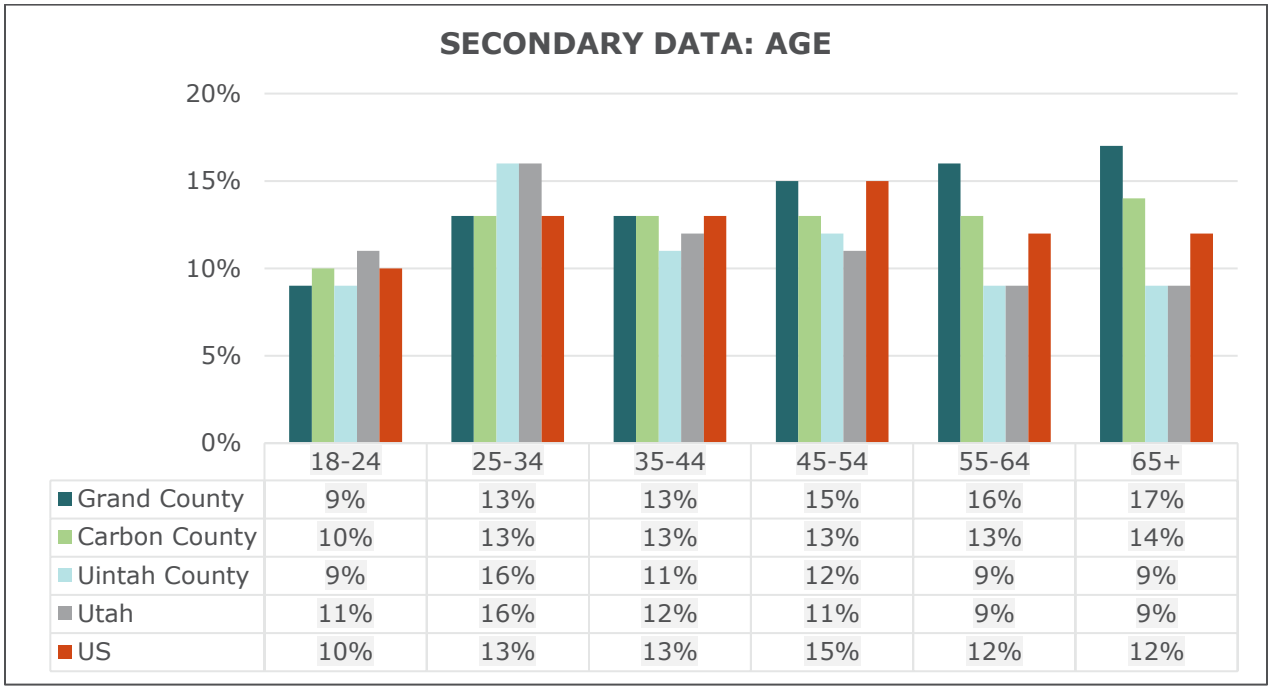
SECONDARY DATA: ETHNICITY



	Hispanic or Latino	Asian	White	Black	Native American/ Alaska Native	Native Hawaiian/ Pacific Islander
Grand County	10%	1%	89%	0%	4%	0%
Carbon County	12%	1%	92%	0%	1%	0%
Uintah County	7%	1%	87%	0%	8%	0%
Utah	13%	2%	86%	1%	1%	1%
US	16%	5%	72%	13%	1%	0%

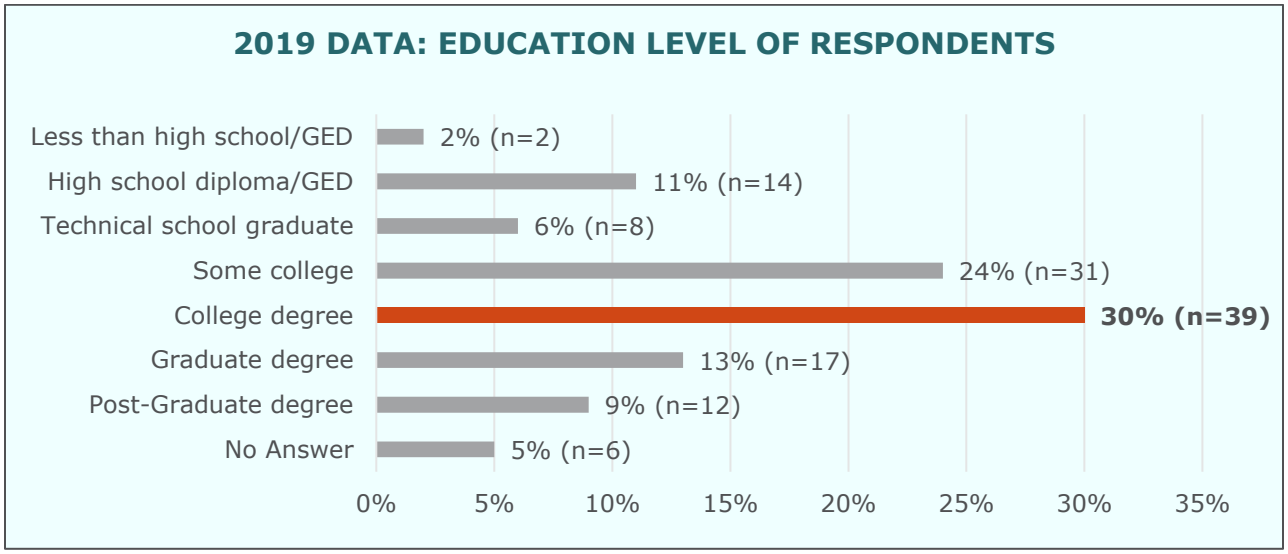
Q31: What is your age (in years)? Forty-three percent of respondents are 65 plus years old. Sixty-five percent of respondents are 55 plus years old. In 2016 and 2013, a different age scale was used. In 2016 and 2013, the top age of respondents was 56-65. (N=129)



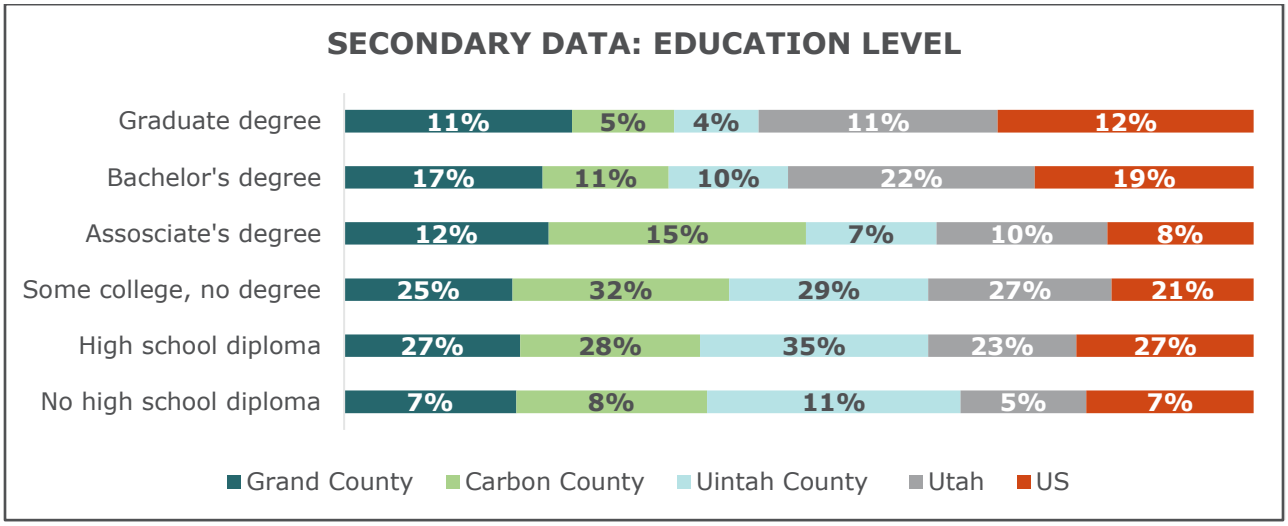


	18-24	25-34	35-44	45-54	55-64	65+
Grand County	9%	13%	13%	15%	16%	17%
Carbon County	10%	13%	13%	13%	13%	14%
Uintah County	9%	16%	11%	12%	9%	9%
Utah	11%	16%	12%	11%	9%	9%
US	10%	13%	13%	15%	12%	12%

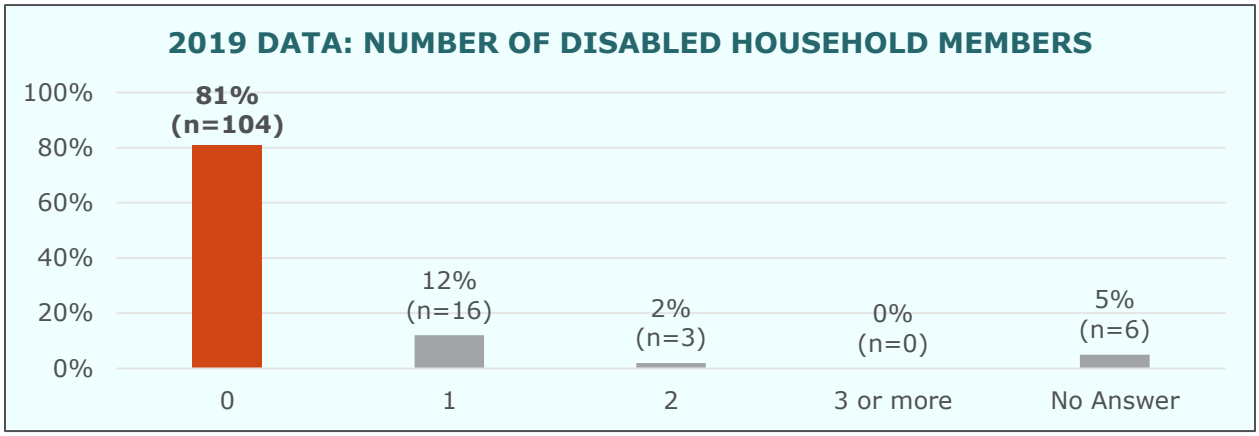
Q33: What is your highest level of education completed? The highest level of education completed among survey respondents is "college degree". (N=129)



Below is a graph comparing education level among the three counties, Utah, and the US. In Grand County, 29% of adults have a college degree (associates and bachelors) which is similar to survey respondents.



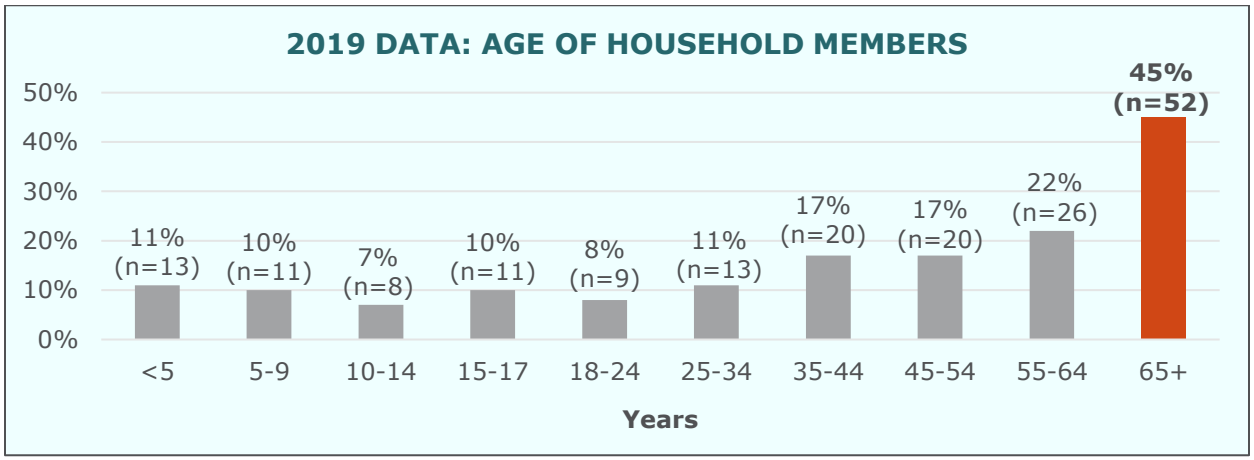
Q34: Including yourself, how many members of your household are disabled? Fourteen percent answered that one or two members of their household, including themselves, are disabled. (N=129)



Q35: Are you or a household member a primary caregiver for an aged, disabled, or chronically ill person? Seven percent of respondents selected "yes" that they or a household member is a primary caregiver for an aged, disabled, or chronically ill person. (N=129)

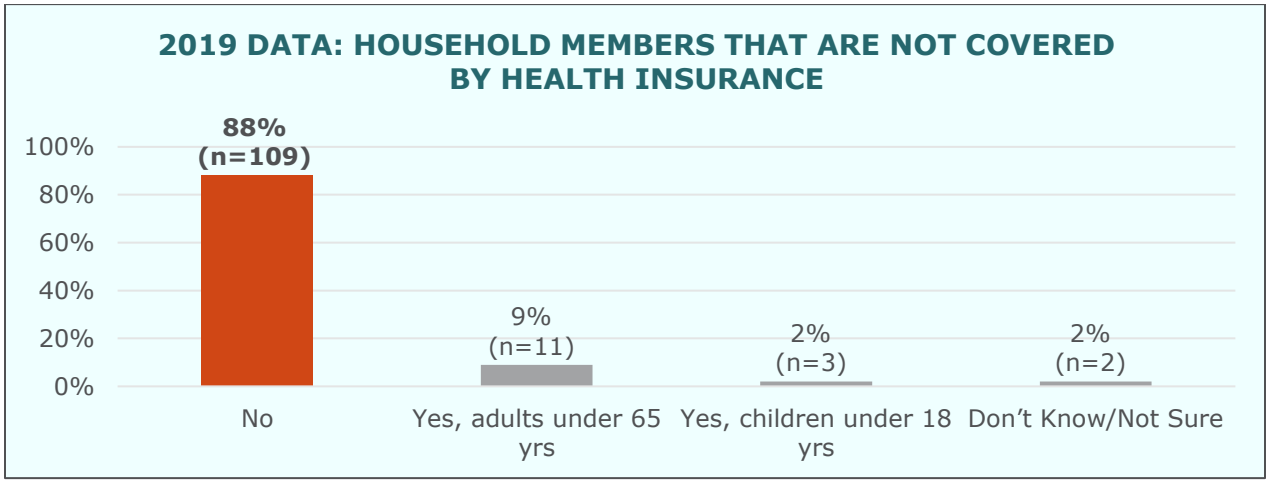
Household Demographics

Q32: Please select the age (in years) of your household members: (check all that apply). The most cited response was sixty-five plus. Respondents were asked to check all that apply so the total does not equal 100 percent. (n=116)

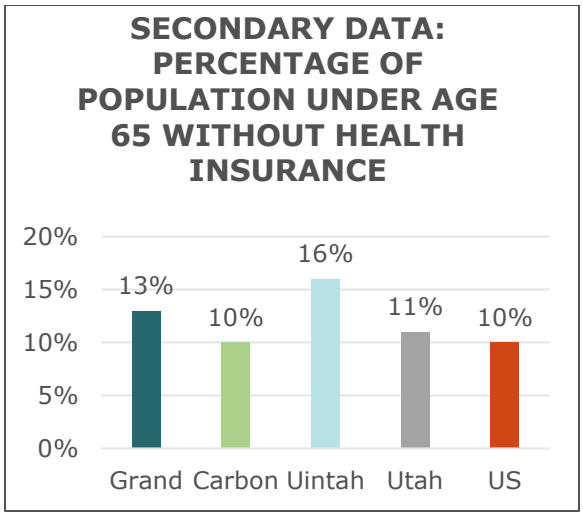


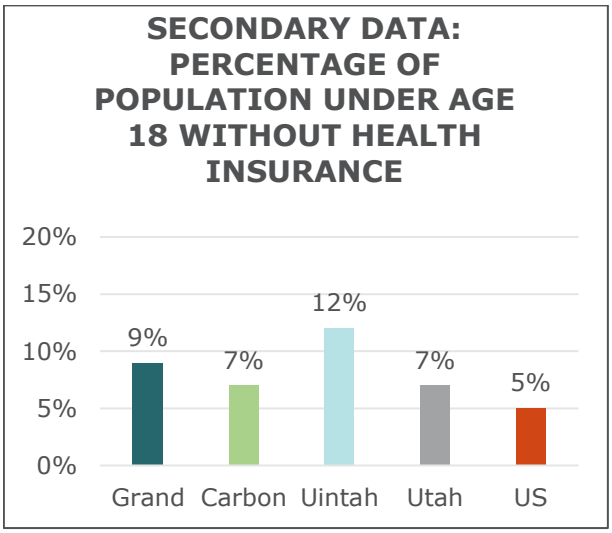
Health Insurance

Q13: Do you have any household members that are not covered by some form of health insurance? (check all that apply) Eleven percent of survey respondents selected "yes" that they have household members that are not covered by some form of health insurance. Respondents were asked to check all that apply so the total does not equal 100 percent. (n=124)



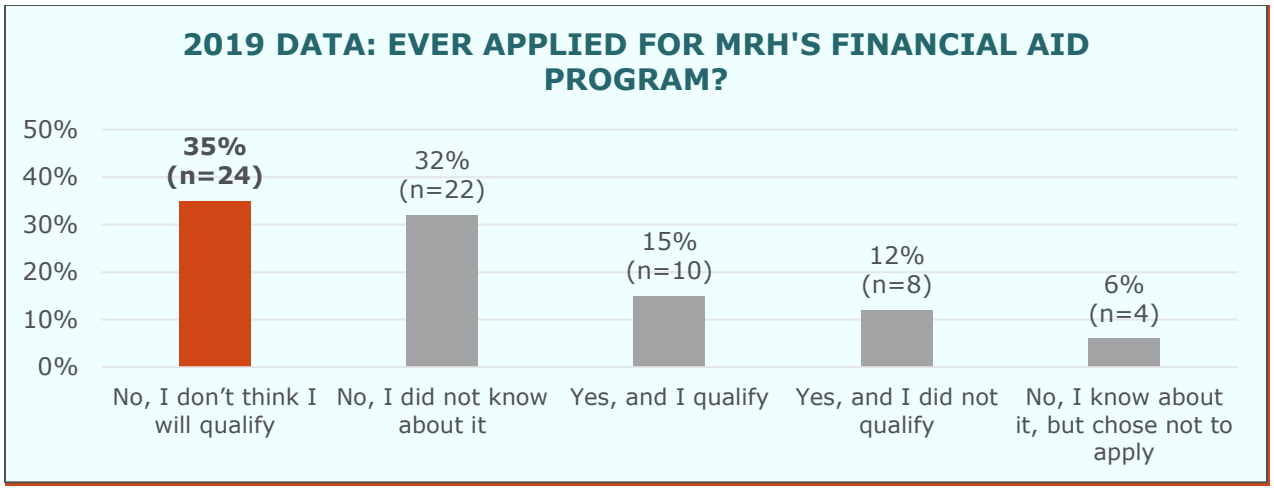
Below is secondary data comparing the percentage of the population under age 65 and the percentage of the population under age 18 without health insurance. Grand County has a higher percentage of uninsured individuals compared to the state and the US. The survey respondents report a higher rate of insurance coverage compared to the secondary data.



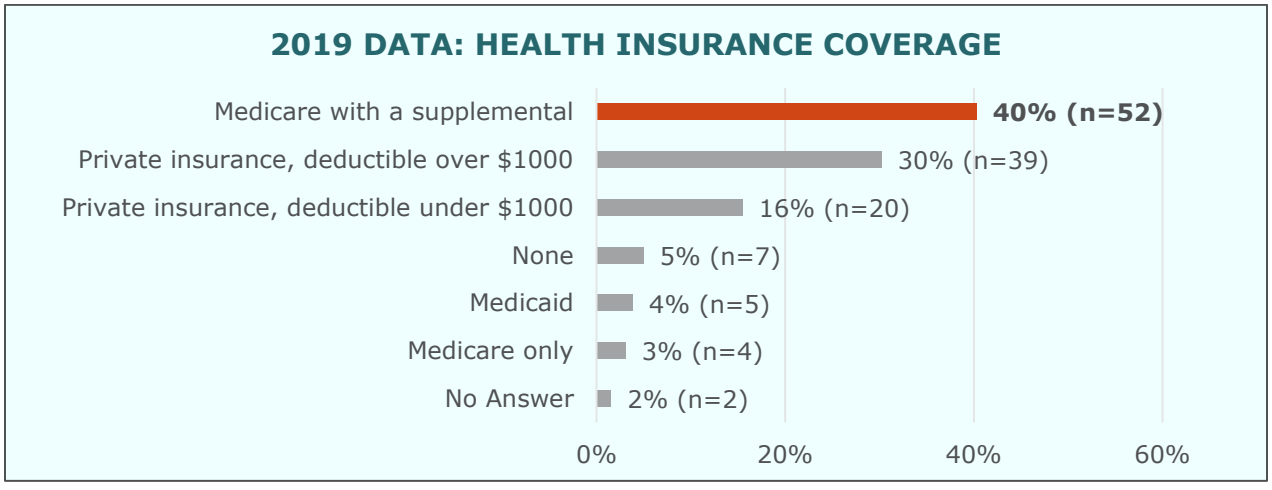


Q14: Have you ever had difficulty paying a medical bill? Forty-three percent of respondents have had difficulty paying a medical bill, while 50% have not. (N=129)

Q14a. If yes, have you ever applied for the Moab Regional Hospital financial aid program? Sixty-eight people answered this question, which is more than the number of respondents who said they have ever had difficulty paying their medical bills (n=56). Of those who answered this question, 35% did not apply for MRH's financial aid because they didn't think they would qualify. Thirty-two percent said they didn't apply because they didn't know about the program. (n=68)

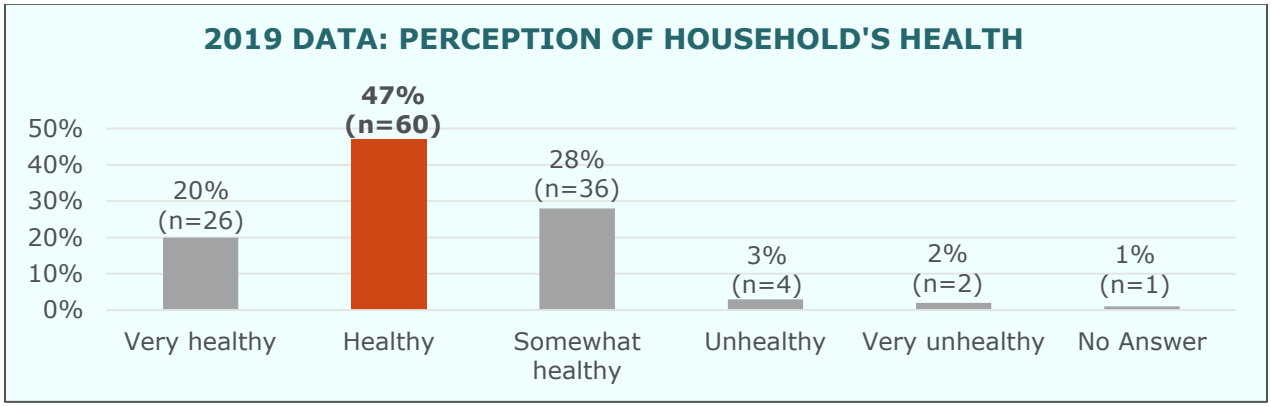


Q26: What health insurance coverage do you have? "Medicare with a supplemental" was the most popular health insurance selected for 40% of respondents, which correlates with the age demographics of most respondents. (N=129)



Perception of Household and Community Health

Q1: Overall, how would you rate your household's health? Ninety-five percent of respondents rated their household's health as "somewhat healthy", "healthy", or "very healthy". Only 5% of respondents selected "unhealthy" or "very unhealthy". (N=129)



Q2: How would you rate the general health of our community? Ninety percent of respondents rated the general health of their community as "somewhat healthy" or "healthy". Only 8% of respondents selected "unhealthy" or "very unhealthy". Results were similar in 2016 and 2013. (N=129)

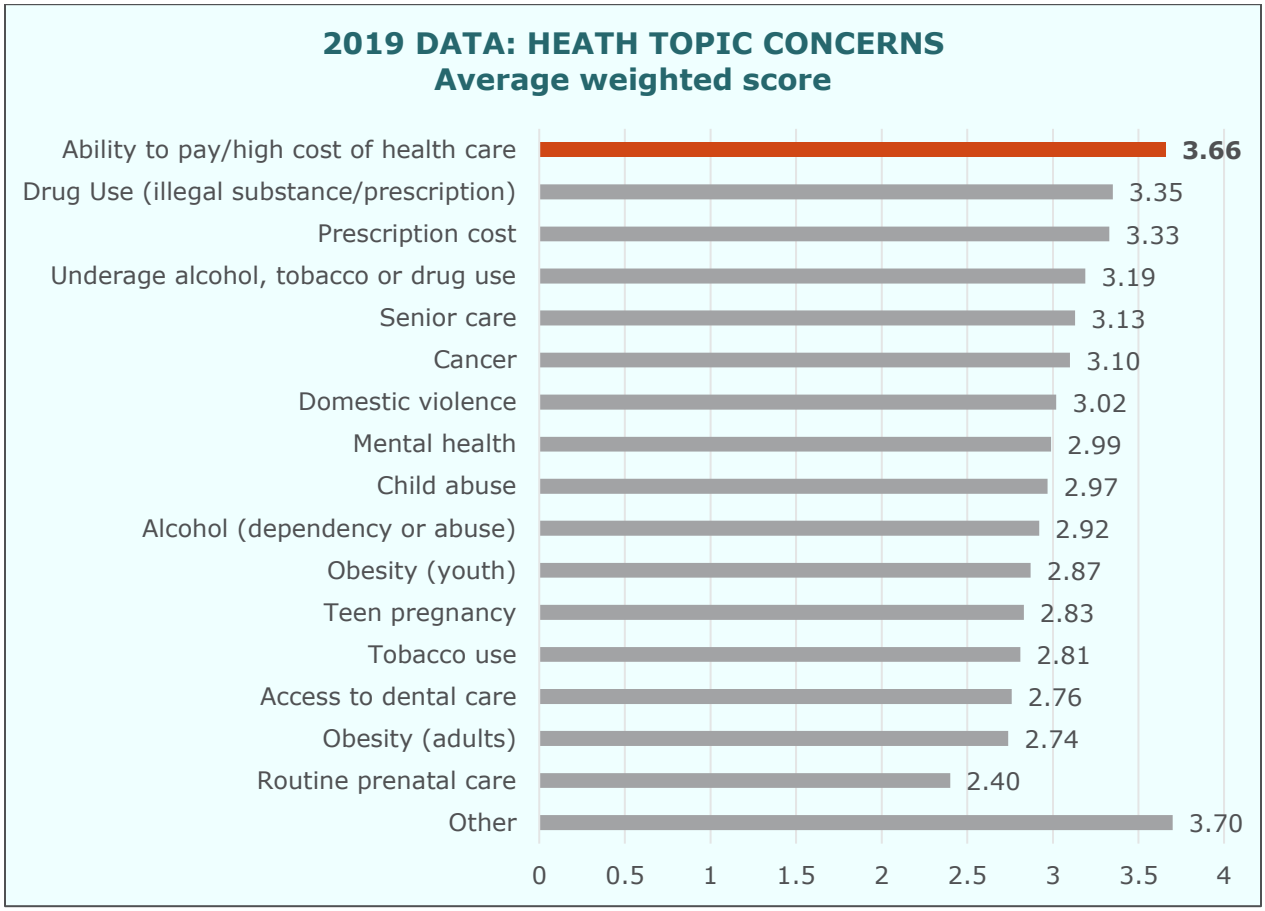
Perception of Community's Health	**n=**	**2019**	***2016***	***2013***
Very healthy	1	1%	*2%*	*1%*
Healthy	43	33%	*37%*	*39%*
Somewhat healthy	**73**	**57%**	***53%***	***50%***
Unhealthy	9	7%	*3%*	*5%*
Very unhealthy	1	1%	*1%*	*1%*
No Answer	2	2%	*4%*	*4%*

The focus group participants characterized the overall health of the community as average. There is a perception of inequity depending on where one lives, culture, and access to insurance.

Community Health Concerns

Q3: Please check the box that describes your level of concern with each of the health topics in our community. Respondents were asked to use a Likert scale of 1-4 where extremely concerned = 4, moderately concerned = 3, slightly concerned = 2, and not concerned = 1; don't know/not sure was also an option though not included in the scoring.

The health topic that respondents are most concerned about is "ability to pay/high cost of healthcare". "Other" was the number one answer, see comments in Appendix B. (N=129)



The top health topics identified by the focus group participants include lack of mental health and addiction services; inappropriate, substandard, or unaffordable housing; expense of healthcare or lack of knowledge about financial assistance; lack of or not enough availability of specialized care; and lack of enough primary care or family medicine providers resulting in long wait times for appointments.

Criteria for a Healthy Community

Q6: In your opinion, what are the top 3 priorities to improve our community's access to healthcare? (check up to 3 priorities) "More types of specialists," "more primary care providers," and "expanded primary care appointment times" are the top three priorities chosen. In 2016 and 2013, the results are similar. However, "removal of cost barrier" was the number one chosen priority in 2016 and 2013. This was not an option in 2019. Respondents were asked to select three answers, so the total does not equal 100 percent.

Priorities	**n=**	**2019**	***2016***	***2013***
More types of specialists	**62**	**49%**	*52%*	*33%*
More primary care providers	**61**	**48%**	*54%*	*39%*
Expanded primary care appointment times	**57**	**45%**	*N/A*	*N/A*
Financial aid navigator	41	33%	*N/A*	*N/A*
Improved quality of care	40	32%	*28%*	*43%*
Outpatient services	20	16%	*33%*	*26%*
More frequent health education opportunities	17	14%	*N/A*	*N/A*
Transportation assistance	15	12%	*17%*	*17%*
Other	15	12%	*11%*	*7%*
Cultural sensitivity	11	9%	*11%*	*8%*
Telemedicine	8	6%	*13%*	*4%*
Interpreter services	5	4%	*11%*	*7%*

The focus groups were asked to describe barriers to accessing healthcare and areas of improvement. The top three areas identified include uncertainty regarding services available, cost of services/fear of incurring debt/uncertainty about opportunities to receive financial support and assistance, and long waits for appointments.

Health Topics of Interest

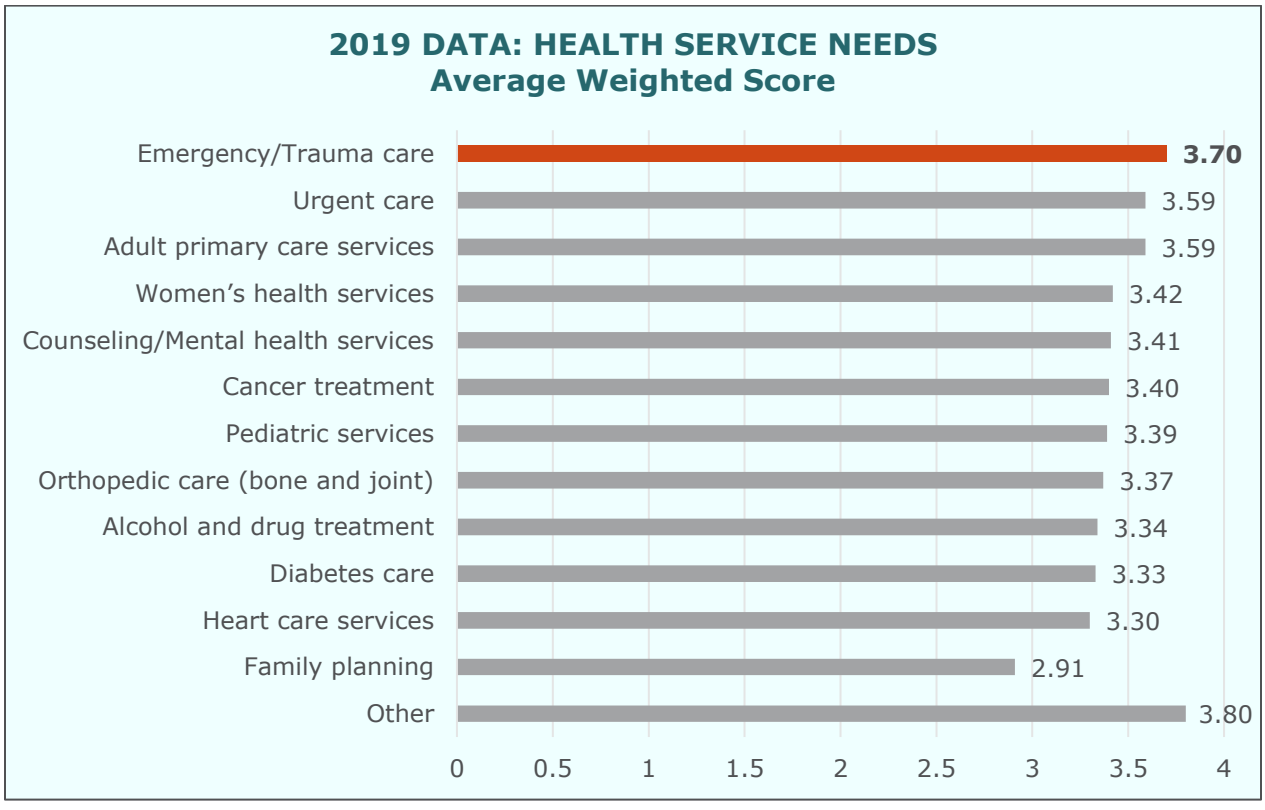
Q4: What are the top 3 health topics of interest to you? This was an open-ended question where respondents were able to write in any answer they wanted. The top answers are listed below. See the full list of answers in Appendix B.

1. Mental health/Drug and Alcohol Use
2. Cost of Healthcare
3. Access and Availability

Health Service Needs

Q5: Please check the box that describes the level of importance for each of the health service needs in our community: Respondents were asked to use a Likert scale of 1-4 where extremely important = 4, moderately important = 3, slightly important = 2, and not important = 1; don't know/not sure was also an option though not included in the scoring.

The health service that was ranked number one for importance was "Emergency/ Trauma care". "Other" was a common answer, see Appendix B. (N=129)



Ideas to Improve Access to Healthcare

Q25: What ideas or suggestions do you have for improving the overall health of our community? This was an open-ended question where respondents were able to write in any answer they wanted. The top three answers are listed below. See the full list of answers in Appendix B.

Availability	Specialty Care	Healthy Lifestyle
• More available doctors • More mental healthcare providers • Increase family practice providers – too long of a wait to get an appointment • Making it easier for people to make an appointment with a doctor • Recruit more medical doctors, specialists, and nurses • More primary care physicians • Easier access to family practice doctors • Central information/reference number • More physicians taking new patients • More in-network providers	• Dental care on Fridays • Medicinal marijuana available for the community • Increase level of care/add an intensive care unit • Interested in a pediatrician here • Expand surgical capacities • More pediatric services • More orthopedic care • Family planning • Rheumatologist • Endocrinologist	• Educate young adults on 'whole' health – diet, mind, exercise. Low sugar, low carbs • Do a public outreach by providing a once-a-month free public service to the community • More alternative education; i.e. food and supplement education • Increased wellness and nutrition awareness • Free screenings for major health concerns • Nutrition and weight loss programs • Watch what you eat and drink • More exercise, lose weight • Exercise diet counseling • No smoking or drinking

The focus group included a question about collaborations that could assist to improve the health of the communities. The top suggestions included increased collaboration with local schools, continue to increase partnership with Multi-Cultural Center, and partner with Utah State University and extension center to enhance workforce. Services most needed included mental health, addiction, and low-cost dental. These services align with some top health topics of interests from survey respondents: mental health/drug and alcohol use and cost of healthcare.

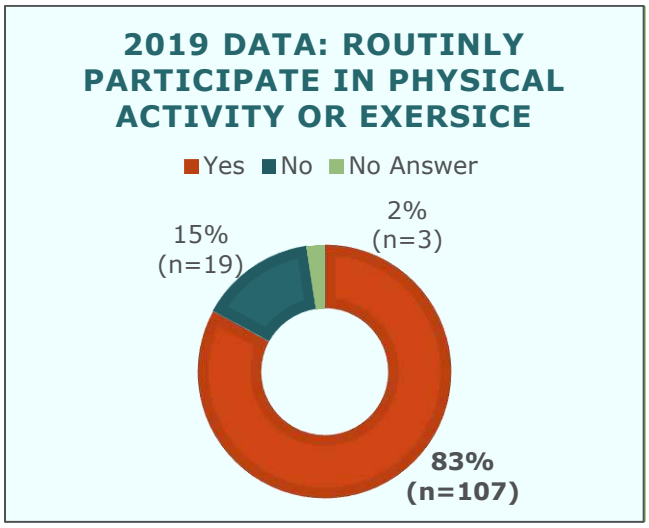
Seat Belt Use

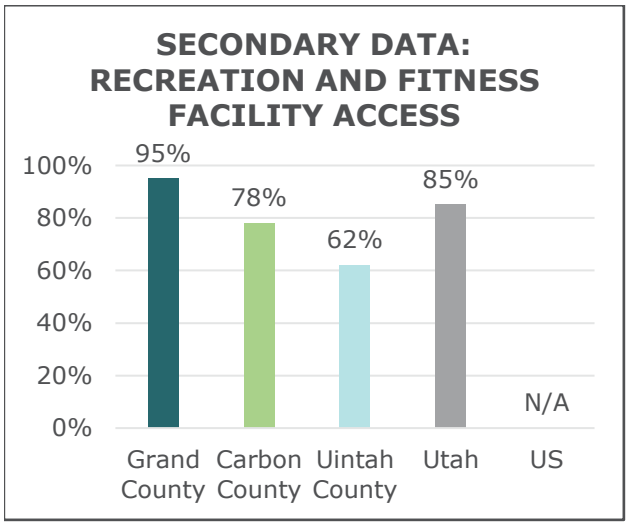
Q7: How often do you use seat belts when you drive or ride in a car? Ninety-eight percent of respondents answered that they "always" or "nearly always" wear a seat belt. (N=129)

Healthy Lifestyle

Q8: Do you routinely participate in physical activity or exercise? Eighty-three percent of respondents reported that they do routinely participate in physical activity or exercise. (N=129)

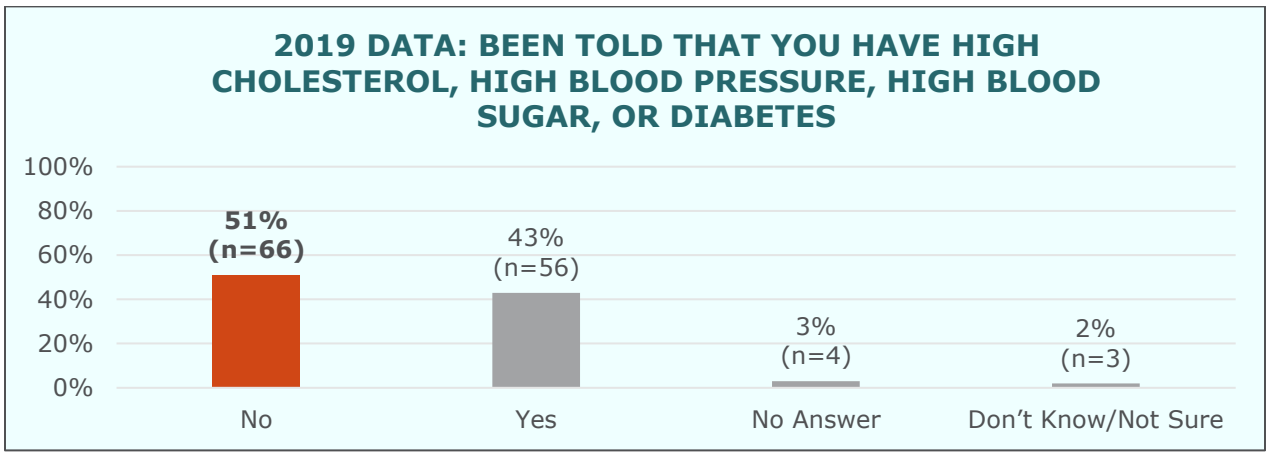
According to secondary data, Grand County has more access to recreation and fitness facilities than Carbon County, Uintah County, and Utah.



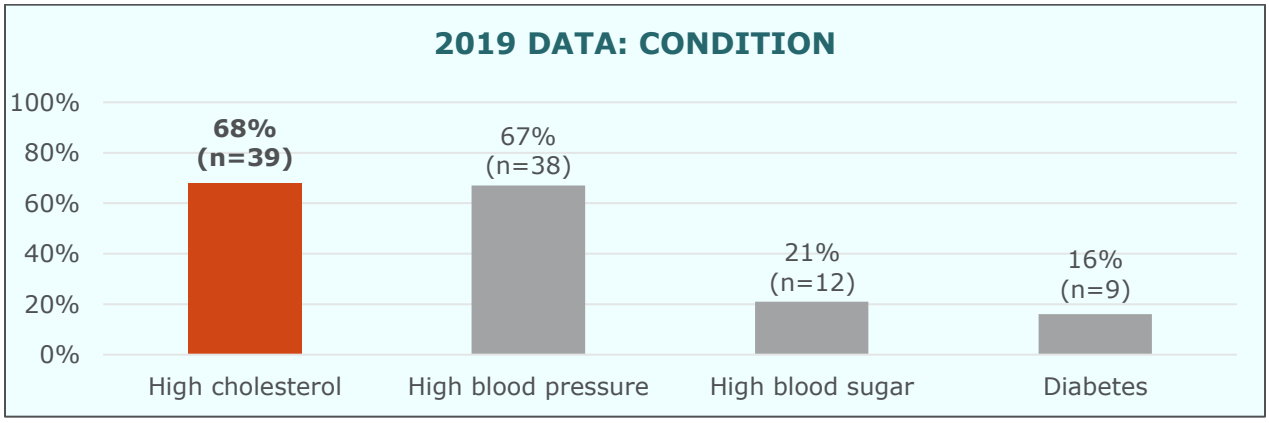


Health Conditions

Q17: Have you ever been told by a doctor or healthcare professional that you have high cholesterol, high blood pressure, high blood sugar, or diabetes? Fifty-one percent of respondents have not been told by their doctor that they have high cholesterol, high blood pressure, high blood sugar, or diabetes. However, 43% of respondents have been told by their doctor that they do have one of the health conditions. (N=129)



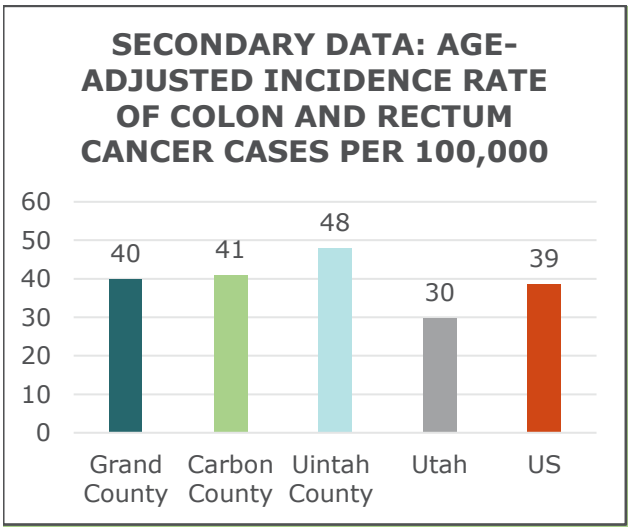
Q17a: If yes, please select the condition/conditions: Of the 57 respondents, there was a nearly equal split of people who have been told by their doctor they have high cholesterol (68%) or high blood pressure. Respondents were able to check all that apply so the total does not equal 100 percent. (n=57)



Preventative Measures

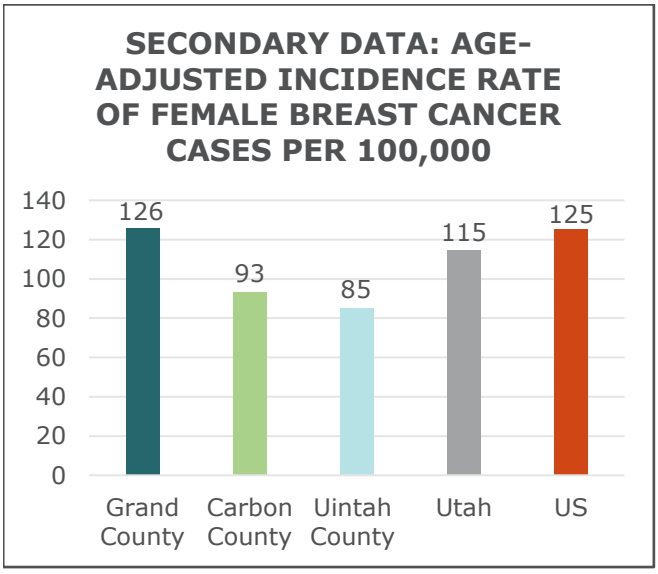
Q18: If you are over 50 years old, how long has it been since you had an exam or screening for colon cancer? Ninety-eight respondents answered this question. Fifty-one percent of those respondents have been screened for colon cancer within the past five years. (n=98)

Years	n=	2019
Within the past year	19	19%
1-5	**31**	**32%**
6-10	13	13%
10+	4	4%
Never	27	28%
Don't Know/Not Sure	4	4%

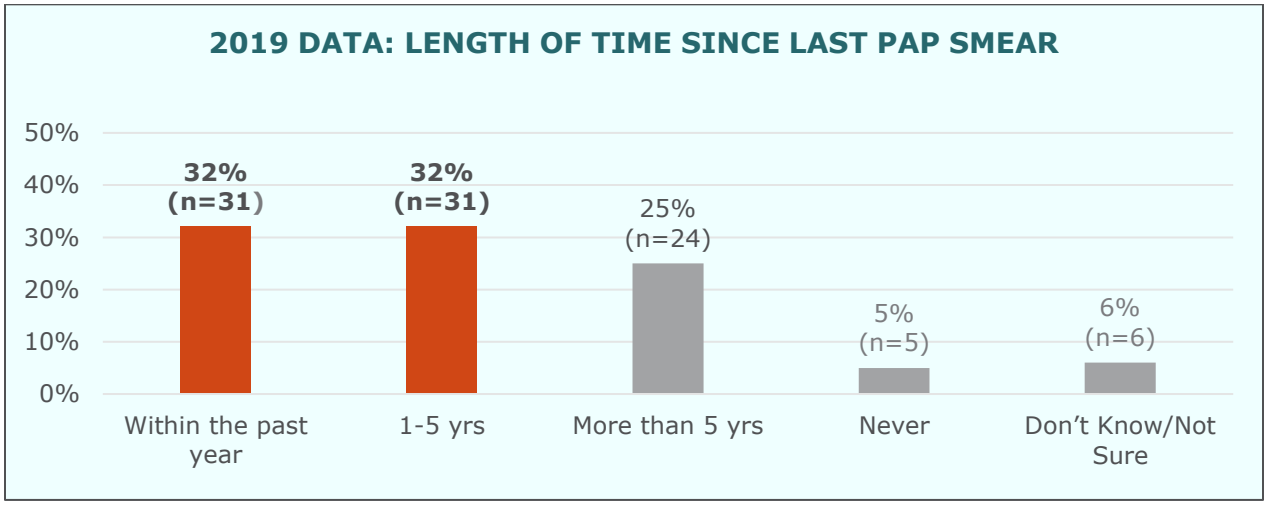


Q19: If you are female and over 40 years old, how long has it been since your last mammogram? Seventy-nine respondents answered this question. Seventy-three percent of those respondents have had a mammogram within the past five years, with 47% having a mammogram within the past year. (n=79)

Years	n=	2019
Within the past year	**37**	**47%**
1-5	21	27%
More than 5	11	14%
Never	7	9%
Don't Know/Not sure	3	4%

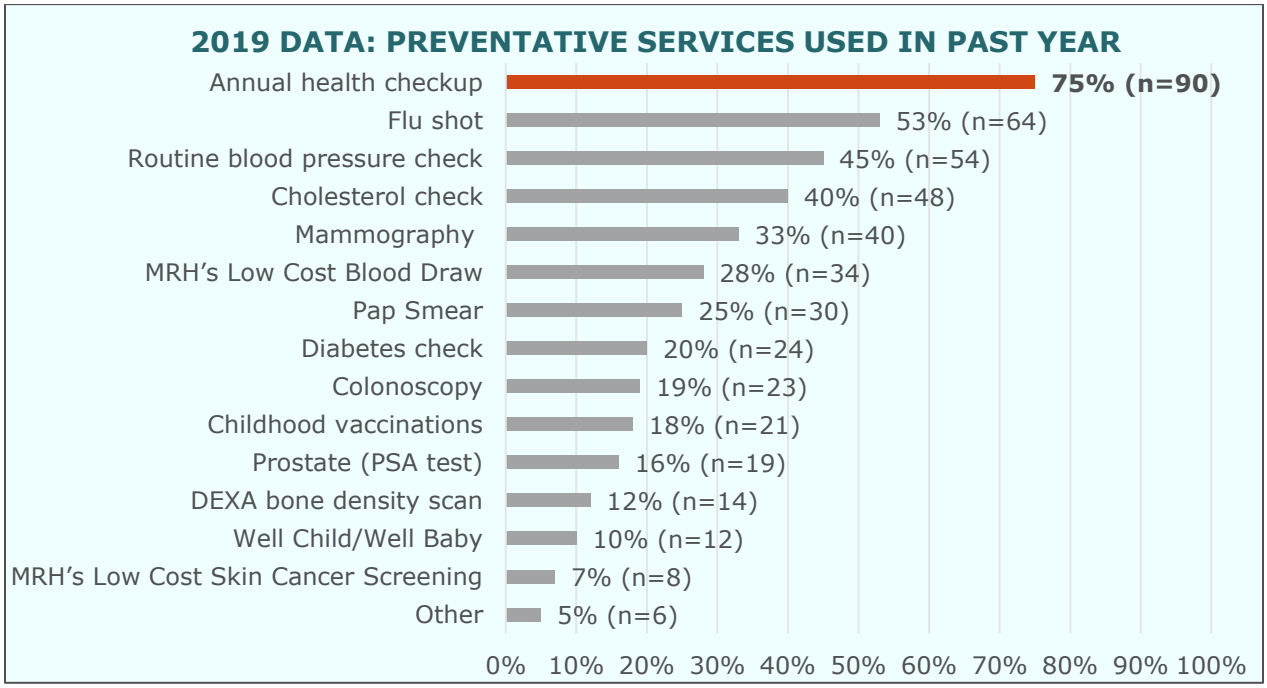


Q20: If you are female, how long has it been since your last Pap smear for cervical cancer? Ninety-seven respondents answered this question. Sixty-four percent of those respondents have had a Pap smear within the past five years, with 32% having a Pap smear within the past year. (n=97)



Preventative Services

Q16: In the past 12 months, please select all of the preventative services you or any household member have used. (check all that apply) The top preventative service used in the past 12 months amongst respondents is "annual health checkup". Respondents were asked to check all that apply so the total does not equal 100 percent. (n=120)



Utilization and Perception of Services

Identified Healthcare Providers

Q11: If you or a household member has a healthcare need, do you have a:

a. Doctor you can go to?

- 90% of respondents report "yes," they do have a doctor they can go to
- 5% report "no," they do not have a doctor they can go to
- 5% report that they don't know/not sure or chose not to respond

SECONDARY DATA: RATIO OF POPULATION TO PRIMARY CARE PHYSICIANS				
Grand County	Carbon County	Uintah County	Utah	US
800:1	1,850:1	2,800:1	1,770:1	1,330:1

b. Dentist you can go to?

- 85% of respondents report "yes," they do have a dentist they can go to
- 9% report "no," they do not have a dentist they can go to
- 6% report that they don't know/not sure or chose not to respond

SECONDARY DATA: RATIO OF POPULATION TO DENTISTS				
Grand County	Carbon County	Uintah County	Utah	US
1,380:1	1,270:1	1,950:1	1,490:1	1,460:1

c. Mental healthcare specialist you can go to?

- 19% of respondents report "yes," they do have a mental healthcare specialist they can go to
- 40% report "no," they do not have a mental healthcare specialist they can go to
- 42% report that they don't know/not sure or chose not to

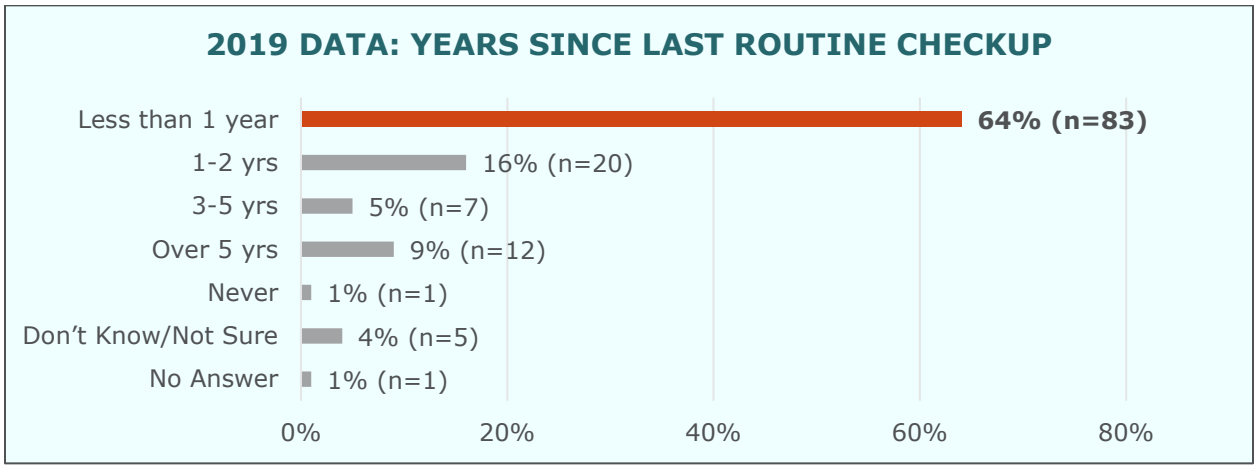
SECONDARY DATA: RATIO OF POPULATION TO MENTAL HEALTH PROVIDERS				
Grand County	Carbon County	Uintah County	Utah	US
440:1	530:1	860:1	330:1	440:1

d. Substance abuse counselor you can go to?

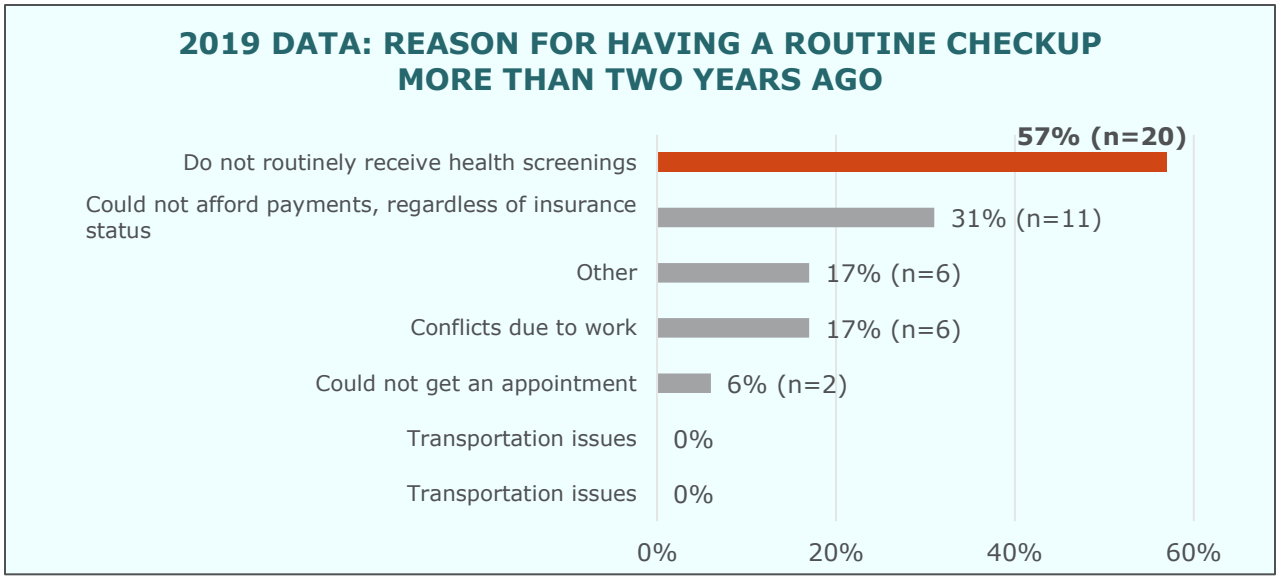
- 9% of respondents report "yes," they do have a substance abuse counselor they can go to
- 38% report "no," they do not have a substance abuse counselor they can go to
- 53% report that they don't know/not sure or chose not to

Routine Care

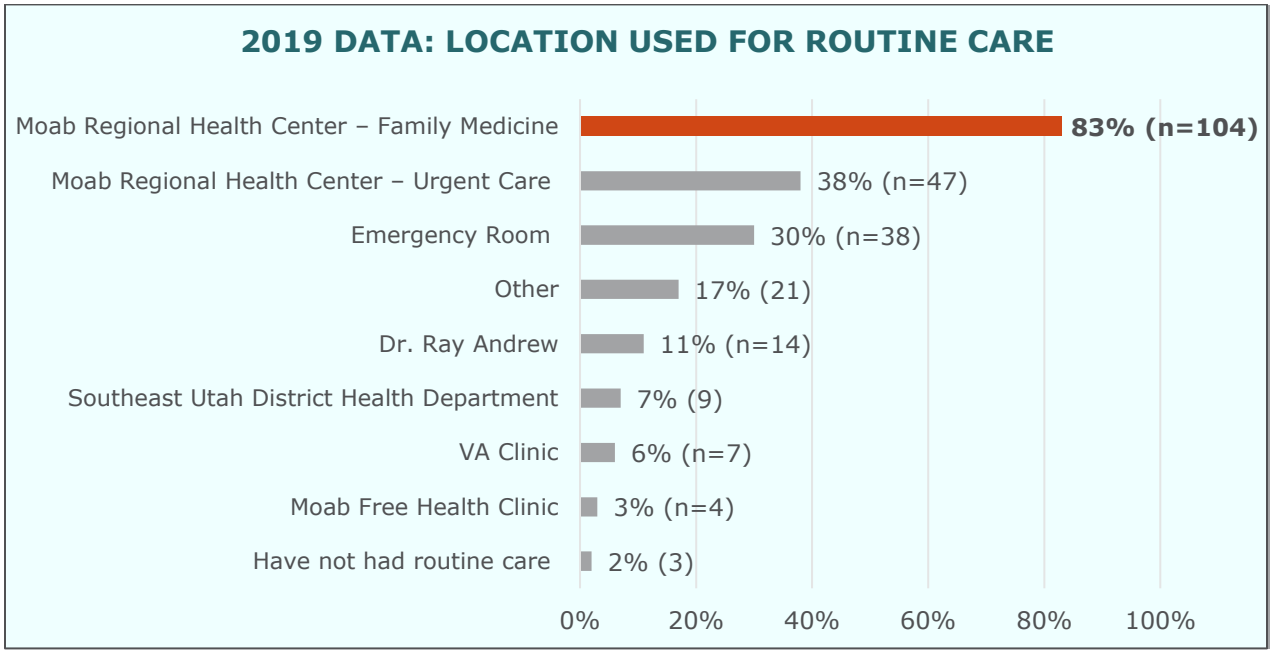
Q9: How long has it been since you last visited a doctor for a routine checkup (not a visit for a specific illness)? Sixty-four percent of respondents have had a routine checkup within a year. (N=129)



Q9a: If your last visit for a routine checkup was more than 2 years ago, was it because: (check all that apply) Fifty-seven percent of the 35 respondents "do not routinely receive health screenings". Respondents were asked to check all that apply, so the percent does not equal 100 percent. (n=35)

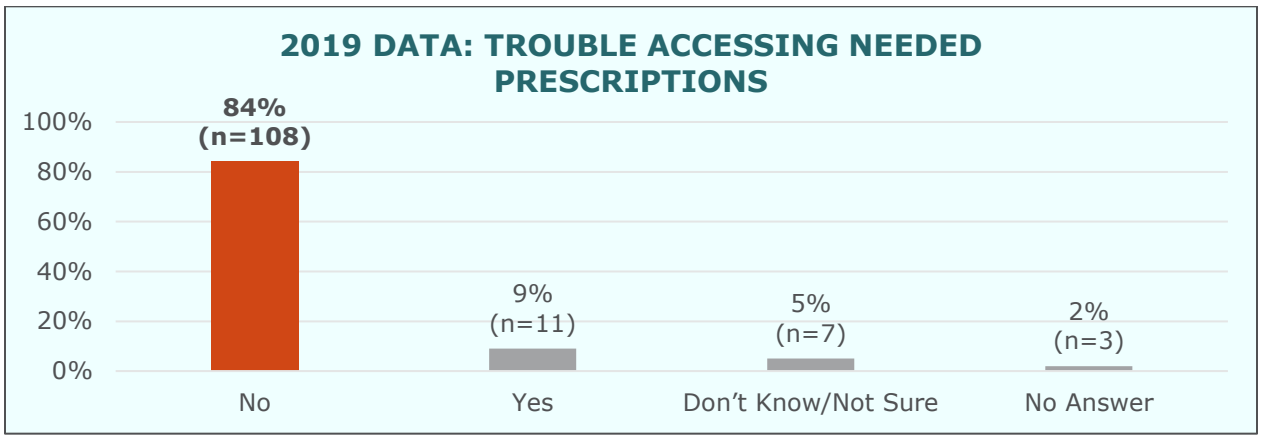


Q22: In the past 3 years, please select the location of the medical services that you or household members have used for routine care. (check all that apply) The top location used for routine care was Moab Regional Health Center – Family Medicine. Respondents were asked to check all that apply so the total does not equal 100 percent. (n=125)



Access to Prescriptions

Q12: Do you have trouble accessing any needed prescriptions? Nine percent of respondents have trouble accessing needed prescriptions. (N=129)



Delayed Healthcare Services

Q10: In the past three years, was there a time when you or a member of your household thought you needed healthcare services but did NOT get or delayed getting medical services? Forty-six percent of respondents reported not getting or delaying getting medical services. (N=129)

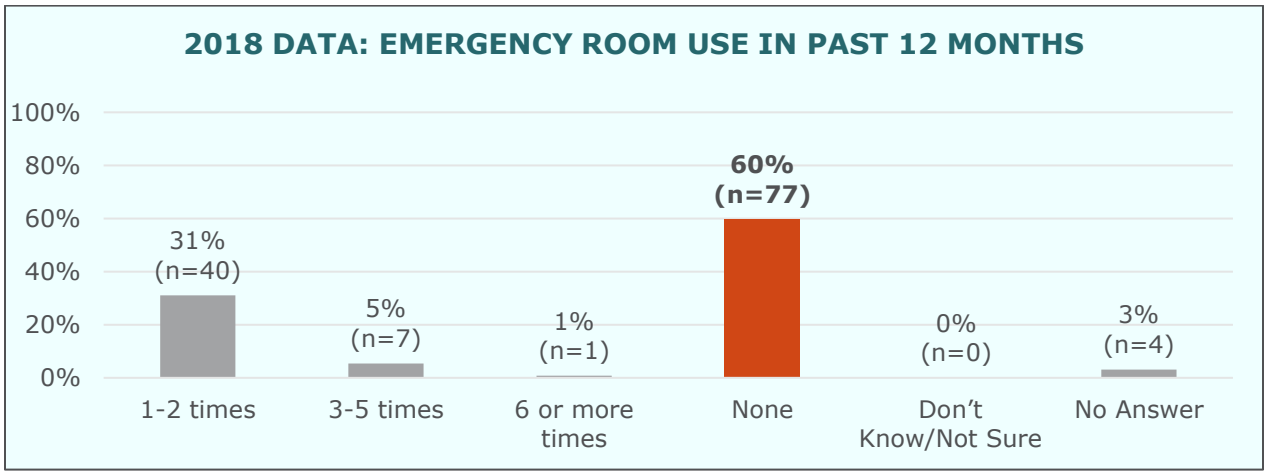
Did Not Get or Delayed Getting Services	n=	2019	*2016*	*2013*
No	**61**	**47%**	*52%*	*54%*
Yes	59	46%	*43%*	*41%*
Don't Know/Not Sure	5	4%	*N/A*	*N/A*
No Answer	4	3%	*4%*	*6%*

Q10a: If yes, please select the 3 most important reasons why you did not receive healthcare services? (check up to 3 reasons) The top reason respondents delayed getting healthcare services was because the "appointment wait was too long", followed by "costs too much" and "could not get an appointment". The most common responses in 2016 were the same. Respondents were asked to select three answers, so the total does not equal 100 percent. (n=61)

Reason to Delay	**n=**	**2019**	***2016***	***2013***
Appointment wait was too long	**31**	**51%**	*51%*	*25%*
Costs too much	**27**	**44%**	*56%*	*61%*
Could not get an appointment	**26**	**43%**	*32%*	*16%*
Insurance did not cover cost	22	36%	*27%*	*24%*
No insurance	9	15%	*20%*	*29%*
Other	7	12%	*20%*	*13%*
Unsure of available services	6	10%	*9%*	*7%*
Do not like doctors	5	8%	*5%*	*11%*
Not treated with respect	4	7%	*10%*	*11%*
Schedule conflicts due to work	4	7%	*N/A*	*N/A*
Too nervous or afraid	4	7%	*1%*	*9%*
Transportation issue	2	3%	*5%*	*2%*
No childcare	0	0%	*1%*	*0%*
Language barrier	0	0%	*0%*	*0%*
Didn't know where to go	0	0%	*5%*	*2%*

Utilized Hospital Emergency Room

Q15: In the past 12 months, how many times have you or a household member used a hospital emergency room? "None" or "1-2 times" were the most popular responses to this question with 91%. (N=129)



Specialty Care

Q21: In the past 3 years, please select all healthcare specialists that you or a household member have seen. (check all that apply) Eighty-seven percent of respondents have seen a dentist within the past three years. Respondents were asked to select all that apply, so the total does not equal 100 percent. (N=129)

Specialist	n=	2019	*2016*	*2013*
Dentist	**110**	**87%**	*40%*	*44%*
Physical Therapist	54	43%	*21%*	*23%*
Chiropractor	50	40%	*18%*	*14%*
Orthopedic Surgeon	38	30%	*32%*	*34%*
Dermatologist	35	28%	*18%*	*20%*
Ophthalmologist	34	27%	*18%*	*11%*
Radiologist	32	25%	*16%*	*14%*

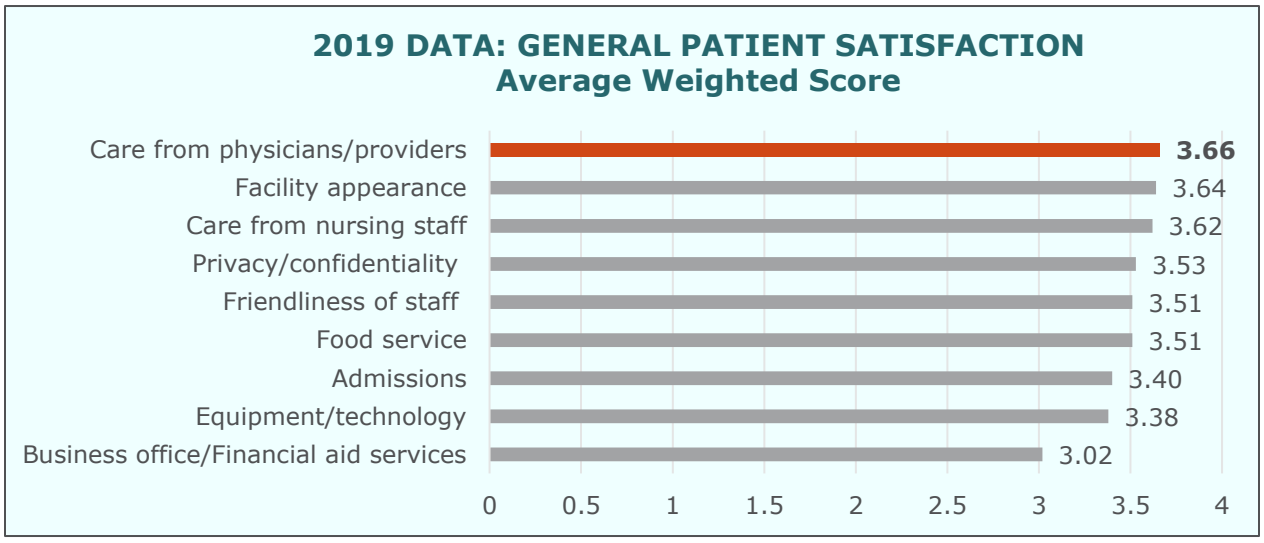
Specialist	n=	2019	*2016*	*2013*
Cardiologist	30	24%	*16%*	*15%*
Gastroenterologist	21	17%	*12%*	*10%*
General Surgeon	21	17%	*8%*	*22%*
OB/GYN	20	16%	*12%*	*11%*
ENT (ear/nose/throat)	19	15%	*15%*	*7%*
Mental Health Counselor	19	15%	*6%*	*7%*
Neurologist	17	14%	*8%*	*22%*
Allergist	13	10%	*5%*	*2%*
Other	10	8%	*9%*	*10%*
Pediatrician	10	8%	*2%*	*3%*
Pulmonologist	8	7	*3%*	*4%*
Urologist	8	6%	*12%*	*12%*
Chronic pain specialist	8	6%	*N/A*	*N/A*
Endocrinologist	8	6%	*5%*	*4%*
Rheumatologist	6	5%	*4%*	*2%*
Occupational Therapist	6	5%	*3%*	*1%*
Oncologist	6	5%	*10%*	*4%*
Psychiatrist	5	4%	*5%*	*4%*
Psychologist	5	4%	*5%*	*2%*
Neurosurgeon	4	3%	*4%*	*6%*
Speech Therapist	4	3%	*1%*	*1%*

Specialist	n=	2019	*2016*	*2013*
Dietician	3	2%	*1%*	*1%*
Social Worker	1	1%	*3%*	*1%*
Substance Abuse Counselor	1	1%	*0%*	*0%*

General Patient Satisfaction

Q23: If you have received care at Moab Regional Hospital or Moab Regional Health Center in the past 3 years, please rate your satisfaction with the following items. Respondents were asked to use a Likert scale of 1-4 where extremely satisfied = 4, moderately satisfied = 3, slightly satisfied = 2, and not satisfied = 1; don't know/not sure was also an option though not included in the score.

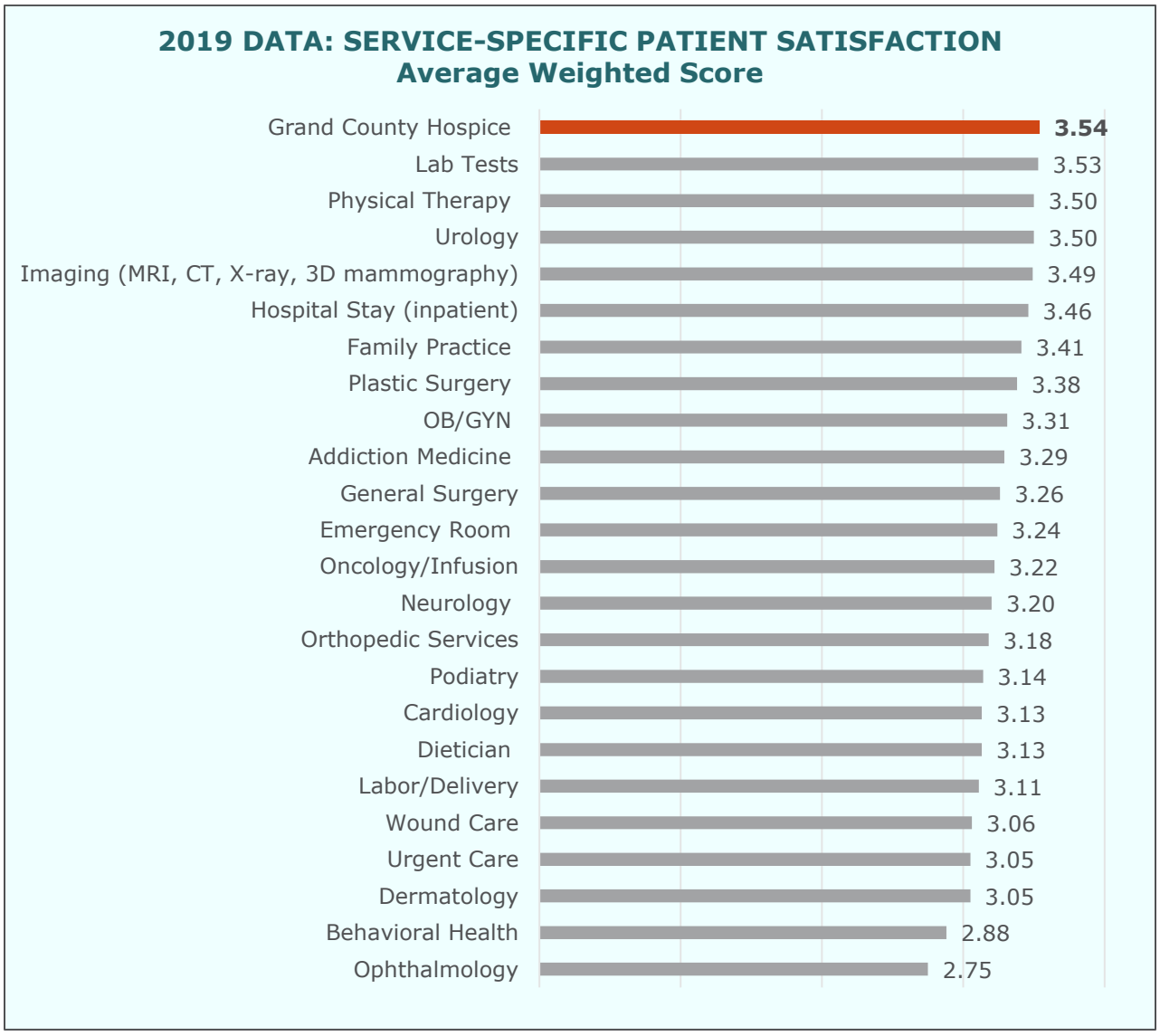
The service that respondents are most satisfied is "Care from physicians/providers." The total average weighted score was 3.49, which indicates that respondents are "moderately satisfied" with the care they have received at MRH. (N=129)



Regarding patient satisfaction, focus group participants were asked about MRH's strengths. The top three strengths described were availability of Trauma Center, responsiveness to needs of the community, and overall reputation and services offered.

Service-Specific Patient Satisfaction

Q24: The following services are available at Moab Regional Hospital. Please rate your satisfaction of each service that you have used. Respondents were asked to use a Likert scale of 1-4 where extremely satisfied = 4, moderately satisfied = 3, slightly satisfied = 2, and not satisfied = 1; don't know/not sure was also an option though not included in the score. The service that respondents are most satisfied is "Grand County Hospice". The total average weighted score was 3.32, which indicates that respondents are "moderately satisfied" with the services listed. (N=129)



Focus Group Findings

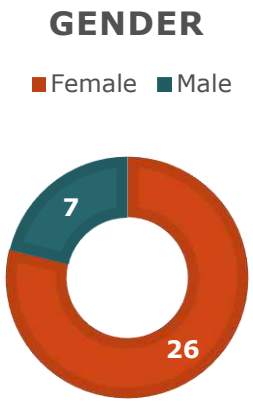
Introduction

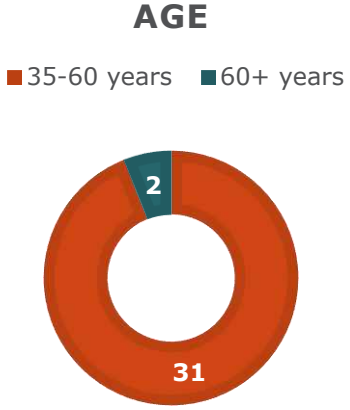
The Center was contracted by MRH to conduct focus group interviews to provide qualitative data on the strengths and needs of local healthcare services. Focus group comments reflect the perceptions of the individual and may differ or support survey and secondary data findings.

Background

Five focus groups were held over the course of two days, September 18-19, 2019, to obtain information from community residents for the MRH Community Health Needs Assessment. Thirty-three individuals participated.

Participant Demographics





Economic status: All were middle/upper class*

(*) This characterization was based on comments made during the discussion about current and past employment, housing, and lifestyle. All of those under age 60 were employed in professional careers.

Summary of Major Focus Group Findings

- The overall health status of Moab residents is perceived as average. There is a perception of inequity depending on where one lives, culture, and access to insurance.
- The greatest health needs/issues from participants point of view are:
    - Lack of, or not enough availability of specialized care (14)
    - Mental health and addiction services were most frequently mentioned
    - Inappropriate, substandard, and affordable housing
    - Expense of healthcare, or lack of knowledge about financial assistance
    - Lack of enough primary care or family medicine providers resulting in long wait times for appointments
- MRH is viewed positively and has a very good reputation in the area. Focus group attendees appreciate the availability of the Trauma Center. MRH is responsive to needs of the community and offers a range of services.
- Major barriers/limitations to care identified include uncertainty regarding services available, cost of services/fear of incurring debt/uncertainty about opportunities to receive financial support and assistance, and long waits for appointments.
- There were suggestions for several new services. The most frequently mentioned include mental health, addiction, and low-cost dental.
- There are opportunities for MRH to collaborate in the areas of schools, multi-cultural center, and Utah State University and the extension center.
- There are several reasons people leave the Moab for care; most noteworthy are:
    - Service is not available locally
    - Privacy concerns in a small town
    - Long waits for next available appointment

Limitations

There are two major limitations that should be considered when reviewing these results:

1. The information is based on comments from a small segment of the community, 33 individuals.
2. Participants represented professional and middle/upper income residents. Some segments of the community are not represented in the findings, specifically those with lower socioeconomic status, (i.e. employed in non-professional jobs and not employed) and young adults age 18-35.

Conclusions, Recommendations, and Acknowledgements

Conclusions

Overall, the survey and focus group findings indicate the community is happy with MRH, including care from physicians, the facility appearance, and care from nurses. The specific service most complimented in the survey is Grand County Hospice and laboratory service. Focus group participants echoed this, "Hospice is amazing" and "Lab staff who draw blood are amazing." A second service that was identified as extremely important in both the survey and the focus groups is trauma services. Attendees noted that, because Moab is a destination for sports and recreation, this is a service that is "must" to continue to draw the tourists and visitors which in turn impacts the economics of the community.

Rolled up feedback and data, suggest that Moab community is engaged in activities that promote health. The majority of survey respondents report that they are regularly active. Data indicates that many residents utilize regular preventative services such as annual check-ups and mammograms.

A theme in both the survey and focus groups involved the need for more primary care. This issue emerged in discussion of barriers to care and one of the biggest health needs and was mentioned at every focus group. In the survey, the top reason respondents delayed getting healthcare services was because the "appointment wait was too long", followed by "costs too much" and "could not get an appointment". Comparison of previous surveys indicate an increase in percentage of respondents delaying treatment as a result. It is noted that one focus group discussed the concerns around affordable housing as a barrier to increasing primary care providers (PCP).

Other community needs identified in both the survey and the focus groups included drug use, both prescription and illegal. This ranked second in survey health concerns and was ranked number one (along with mental health) in the focus group. Other concerns cited in both assessment tools included the high cost of healthcare, uncertainty about available financial assistance, access to care, and the need for additional dentists, especially for Friday hours and children.

Recommendations

Recommendations include exploring ways to increase primary care services. Findings indicate that the community members may delay treatment and this issue is one of the top concerns for them. Forward thinking hospitals are looking for new ways to attract PCPs since "lives" attached to PCPs are likely to impact their financial viability in the future payment models.

It is recommended that MRH capitalize on the health and wellness lifestyle and habits of community members. Focus group members stated that Moab has a wealth of not-for-profits and community action groups. It is in MRH's best interest of partner with them whenever possible. This will continue to increase MRH's reach and influence. In addition, this community partnership can make gains where the hospital alone cannot.

Finally, as in many communities, there is an opportunity to address issues related to substance abuse and mental illness. As with many recommendations, this is not something the hospital can do alone. MRH can leverage the respect and goodwill that was communicated in the survey and focus group to closely collaborate with other community champions on this effort.

Appendix A: Survey Instrument

Moab Regional Hospital
450 W. Williams Way
PO Box 998
Moab, UT 84532
ph: (435) 719-3500
www.mrhmoab.org

September 9, 2019

Dear Community Member:

Participate in our Community Health survey and have a chance to WIN $100.00!

Moab Regional Hospital is partnering with the National Rural Health Resource Center to administer a community health survey. The purpose of the survey is to obtain information from a wide range of participants to assist in planning our programs, services, and facilities to meet present and future needs, in addition to identifying community health and wellness needs.

Your name has been randomly selected as a resident who lives in the Moab Regional Hospital service area. **Your help is critical in determining health priorities and future needs.**

The survey covers topics such as:

- Use of health care services
- Awareness of services and health insurance
- Community health indicators
- Demographics

Once you complete your survey, simply **return it AND one of the raffle tickets in the enclosed self-addressed, postage paid envelope postmarked by October 21, 2019.** Keep the other raffle ticket in a safe place. The winning raffle ticket number will be announced in the Moab Sun News and Moab Times Independent newspaper, on KZMU Radio 90.1 FM & 106.7 FM, on the Moab Regional Hospital Facebook page, and on the hospital's website: www.mrhmoab.org the week of October 28, 2019.

We know your time is valuable so we have made an effort to keep the survey to about 10 minutes. Moab Regional Hospital is offering you this chance to win $100 as a thank you for completing the enclosed survey.

All survey responses will go to the National Rural Health Resource Center in Duluth, Minnesota, the organization that is assisting with this project. If you have any questions about the survey, please call Keely Lonetto at 218-216-7041. We believe, with your help, we can continue to improve health care services in our region.

Thank you for your assistance. We appreciate your time and feedback.

Sincerely,

Jennifer Sadoff, CEO
Moab Regional Hospital

COMMUNITY HEALTH NEEDS ASSESSMENT

Moab, Utah

INSTRUCTIONS: Fill in the circle next to the corresponding answer with a #2 pencil or ink pen to complete the survey and return it using the enclosed postage paid envelope. If you need assistance completing the survey, please contact the National Rural Health Resource Center at 1-800-997-6685. **All responses will be kept confidential.**

1. Overall, how would you rate your household's health?

○ Very healthy ○ Healthy ○ Somewhat healthy ○ Unhealthy ○ Very unhealthy

2. How would you rate the general health of our community?

○ Very healthy ○ Healthy ○ Somewhat healthy ○ Unhealthy ○ Very unhealthy

3. Please check the box that describes your level of concern with each of the health topics in our community:

Extremely Concerned = 4 Moderately Concerned = 3 Slightly Concerned = 2 Not Concerned = 1 Don't Know/Not Sure = DK

Ability to pay/high cost of health care	○ 4	○ 3	○ 2	○ 1	○ DK
Alcohol (dependency or abuse)	○ 4	○ 3	○ 2	○ 1	○ DK
Cancer	○ 4	○ 3	○ 2	○ 1	○ DK
Child abuse	○ 4	○ 3	○ 2	○ 1	○ DK
Domestic violence	○ 4	○ 3	○ 2	○ 1	○ DK
Drug use (illegal substance/prescription)	○ 4	○ 3	○ 2	○ 1	○ DK
Access to dental care	○ 4	○ 3	○ 2	○ 1	○ DK
Routine prenatal care	○ 4	○ 3	○ 2	○ 1	○ DK
Mental health	○ 4	○ 3	○ 2	○ 1	○ DK
Obesity (adults)	○ 4	○ 3	○ 2	○ 1	○ DK
Obesity (youth)	○ 4	○ 3	○ 2	○ 1	○ DK
Prescription cost	○ 4	○ 3	○ 2	○ 1	○ DK
Senior care	○ 4	○ 3	○ 2	○ 1	○ DK
Teen pregnancy	○ 4	○ 3	○ 2	○ 1	○ DK
Tobacco use	○ 4	○ 3	○ 2	○ 1	○ DK
Underage alcohol, tobacco or drug use	○ 4	○ 3	○ 2	○ 1	○ DK
Other (please describe):_____	○ 4	○ 3	○ 2	○ 1	○ DK

4. What are the top 3 health topics of interest to you?

_____

5. Please check the box that describes the level of importance for each of the health service needs in our community:

Extremely Important = 4 Moderately Important = 3 Slightly Important = 2 Not Important = 1 Don't Know/Not Sure = DK

Adult primary care services	○ 4	○ 3	○ 2	○ 1	○ DK
Alcohol and drug treatment	○ 4	○ 3	○ 2	○ 1	○ DK
Cancer treatment	○ 4	○ 3	○ 2	○ 1	○ DK
Counseling/Mental health services	○ 4	○ 3	○ 2	○ 1	○ DK
Diabetes care	○ 4	○ 3	○ 2	○ 1	○ DK
Emergency/Trauma care	○ 4	○ 3	○ 2	○ 1	○ DK
Family planning	○ 4	○ 3	○ 2	○ 1	○ DK
Heart care services	○ 4	○ 3	○ 2	○ 1	○ DK
Orthopedic care (bone and joint)	○ 4	○ 3	○ 2	○ 1	○ DK
Pediatric services	○ 4	○ 3	○ 2	○ 1	○ DK
Urgent care	○ 4	○ 3	○ 2	○ 1	○ DK
Women's health services	○ 4	○ 3	○ 2	○ 1	○ DK
Other (please describe):_____	○ 4	○ 3	○ 2	○ 1	○ DK

6. In your opinion, what are the top 3 priorities to improve our community's access to health care? (check up to 3 priorities)

- ○ Cultural sensitivity
- ○ Expanded primary care appointment times
- ○ Financial aid navigator
- ○ Interpreter services
- ○ Improved quality of care
- ○ More frequent health education opportunities
- ○ More primary care providers
- ○ More types of specialists
- ○ Outpatient services
- ○ Telemedicine
- ○ Transportation assistance
- ○ Other (please describe):_____

7. How often do you use seat belts when you drive or ride in a car?

○ Always ○ Nearly always ○ Sometimes ○ Seldom ○ Never ○ Don't Know/Not Sure

8. Do you routinely participate in physical activity or exercise? ○ Yes ○ No

9. How long has it been since you last visited a doctor for a routine checkup (not a visit for a specific illness)?

○ Less than 1 year ○ 1-2 yrs ○ 3-5 yrs ○ Over 5 yrs ○ Never ○ Don't Know/Not Sure

a. If your last visit for a routine checkup was more than 2 years ago, was it because: (check all that apply)

- ○ Do not routinely receive health screenings
- ○ Conflicts due to work
- ○ Could not get an appointment
- ○ Could not afford payments, regardless of insurance status
- ○ Transportation issues
- ○ Other (please describe):_____

10. In the past 3 years, was there a time when you or a household member thought you needed health care services but did not get or delayed getting the medical services? ○ Yes ○ No ○ Don't Know/Not Sure

a. If yes, please select the 3 most important reasons why you did not receive health care services? (check up to 3 reasons)

- ○ Could not get an appointment
- ○ Appointment wait was too long
- ○ Schedule conflicts due to work
- ○ Insurance did not cover cost
- ○ Unsure of available services
- ○ Didn't know where to go
- ○ Not treated with respect
- ○ Too nervous or afraid
- ○ Do not like doctors
- ○ Transportation issue
- ○ Cost too much
- ○ Language barrier
- ○ No child care
- ○ No insurance
- ○ Other (please describe):_____

11. If you or a household member has a health care need, do you have a:

a. Doctor you can go to? ○ Yes ○ No ○ Don't Know/Not Sure

b. Dentist you can go to? ○ Yes ○ No ○ Don't Know/Not Sure

c. Mental health care specialist you can go to? ○ Yes ○ No ○ Don't Know/Not Sure

d. Substance abuse counselor you can go to? ○ Yes ○ No ○ Don't Know/Not Sure

12. Do you have trouble accessing any needed prescriptions? ○ Yes ○ No ○ Don't Know/ Not Sure

13. Do you have any household members that are not covered by some form of health insurance? (check all that apply)

○ Yes, adults under 65 yrs ○ Yes, children under 18 yrs ○ No ○ Don't Know/Not Sure

14. Have you ever had difficulty paying a medical bill? ○ Yes ○ No ○ Don't Know/Not Sure

a. If yes, have you ever applied for the Moab Regional Hospital financial aid program?

- ○ Yes, and I qualify
- ○ Yes, and I did not qualify
- ○ No, I did not know about it
- ○ No, I know about it, but chose not to apply
- ○ No, I don't think I will qualify

15. In the past 12 months, how many times have you or a household member used a hospital emergency room?

○ None ○ 1-2 times ○ 3-5 times ○ 6 or more times ○ Don't Know/Not Sure

16. In the past 12 months, please select all of the preventative services you or any household member have used. (check all that apply)

- ○ Annual health checkup
- ○ Childhood vaccinations
- ○ Cholesterol check
- ○ Colonoscopy
- ○ DEXA bone density scan
- ○ Diabetes check
- ○ Flu shot
- ○ Mammography
- ○ Moab Regional Hospital's Low Cost Blood Draw
- ○ Moab Regional Hospital's Low Cost Skin Cancer Screening
- ○ Pap smear
- ○ Prostate (PSA test)
- ○ Routine blood pressure check
- ○ Well Child/Well Baby
- ○ Other (please describe):_____

17. Have you ever been told by a doctor or health care professional that you have high cholesterol, high blood pressure, high blood sugar, or diabetes? ○ Yes ○ No ○ Don't Know/Not Sure

a. If yes, please select the condition/conditions:

○ High cholesterol ○ High blood pressure ○ High blood sugar ○ Diabetes

18. If you are over 50 years old, how long has it been since you had an exam or screening for colon cancer?

○ Within the past year ○ 1-5 yrs ○ 6-10 yrs ○ 10 yrs+ ○ Never ○ Don't Know/Not Sure

19. If you are female and over 40 years old, how long has it been since your last mammogram?

○ Within the past year ○ 1-5 yrs ○ More than 5 yrs ○ Never ○ Don't Know/Not Sure

20. If you are female, how long has it been since your last Pap smear for cervical cancer?

○ Within the past year ○ 1-5 yrs ○ More than 5 yrs ○ Never ○ Don't Know/Not Sure

21. In the past 3 years, please select all health care specialists that you or a household member have seen. (check all that apply)

○ Allergist
○ Cardiologist
○ Chiropractor
○ Chronic Pain Specialist
○ Dentist
○ Dermatologist
○ Dietician
○ Endocrinologist
○ ENT (ear/nose/throat)
○ Gastroenterologist
○ General Surgeon
○ Mental Health Counselor
○ Neurologist
○ Neurosurgeon
○ OB/GYN
○ Occupational Therapist
○ Oncologist
○ Ophthalmologist
○ Orthopedic Surgeon
○ Pediatrician
○ Physical Therapist
○ Psychiatrist
○ Psychologist
○ Pulmonologist
○ Radiologist
○ Rheumatologist
○ Social Worker
○ Speech Therapist
○ Substance Abuse Counselor
○ Urologist
○ Other (please describe):_____

22. In the past 3 years, please select the location of the medical services that you or household members have used for routine care. (check all that apply)

○ Dr. Ray Andrew
○ VA Clinic
○ Emergency Room
○ Have not had routine care
○ Moab Free Health Clinic
○ Moab Regional Health Center – Family Medicine
○ Moab Regional Health Center – Urgent Care
○ Southeast Utah District Health Department
○ Other (please describe):_____

23. If you have received care at Moab Regional Hospital or Moab Regional Health Center in the past 3 years, please rate your satisfaction with the following items:

Extremely Satisfied = 4 Moderately Satisfied = 3 Slightly Satisfied = 2 Not Satisfied = 1 Don't Know/Not Sure = DK

Admissions	○ 4	○ 3	○ 2	○ 1	○ DK
Business office/Financial aid services	○ 4	○ 3	○ 2	○ 1	○ DK
Care from nursing staff	○ 4	○ 3	○ 2	○ 1	○ DK
Care from physicians/providers	○ 4	○ 3	○ 2	○ 1	○ DK
Equipment/technology	○ 4	○ 3	○ 2	○ 1	○ DK
Facility appearance	○ 4	○ 3	○ 2	○ 1	○ DK
Food service	○ 4	○ 3	○ 2	○ 1	○ DK
Friendliness of staff	○ 4	○ 3	○ 2	○ 1	○ DK
Privacy/confidentiality	○ 4	○ 3	○ 2	○ 1	○ DK

24. The following services are available at Moab Regional Hospital. Please rate your satisfaction of each service that you have used.

Extremely Satisfied = 4 Moderately Satisfied = 3 Slightly Satisfied = 2 Not Satisfied = 1 Don't Know/Not Sure = DK

Addiction Medicine	○ 4	○ 3	○ 2	○ 1	○ DK
Behavioral Health	○ 4	○ 3	○ 2	○ 1	○ DK
Cardiology	○ 4	○ 3	○ 2	○ 1	○ DK
Dermatology	○ 4	○ 3	○ 2	○ 1	○ DK
Dietician	○ 4	○ 3	○ 2	○ 1	○ DK
Emergency Room	○ 4	○ 3	○ 2	○ 1	○ DK
Family Practice	○ 4	○ 3	○ 2	○ 1	○ DK
General Surgery	○ 4	○ 3	○ 2	○ 1	○ DK
Grand County Hospice	○ 4	○ 3	○ 2	○ 1	○ DK
Hospital Stay (inpatient)	○ 4	○ 3	○ 2	○ 1	○ DK
Imaging (MRI, CT, X-ray, 3D mammography)	○ 4	○ 3	○ 2	○ 1	○ DK
Lab Tests	○ 4	○ 3	○ 2	○ 1	○ DK
Labor/Delivery	○ 4	○ 3	○ 2	○ 1	○ DK
Neurology	○ 4	○ 3	○ 2	○ 1	○ DK
OB/GYN	○ 4	○ 3	○ 2	○ 1	○ DK
Oncology/Infusion	○ 4	○ 3	○ 2	○ 1	○ DK
Ophthalmology	○ 4	○ 3	○ 2	○ 1	○ DK
Orthopedic Services	○ 4	○ 3	○ 2	○ 1	○ DK
Physical Therapy	○ 4	○ 3	○ 2	○ 1	○ DK
Plastic Surgery	○ 4	○ 3	○ 2	○ 1	○ DK
Podiatry	○ 4	○ 3	○ 2	○ 1	○ DK
Urgent Care	○ 4	○ 3	○ 2	○ 1	○ DK
Urology	○ 4	○ 3	○ 2	○ 1	○ DK
Wound Care	○ 4	○ 3	○ 2	○ 1	○ DK

25. What ideas or suggestions do you have for improving the overall health of our community?

_____

26. What health insurance coverage do you have?

- ○ Medicare with a supplemental
- ○ Private insurance, deductible under $1000
- ○ Private insurance, deductible over $1000
- ○ Medicare only
- ○ Medicaid
- ○ None

27. Where do you currently live by zip code?

○ 84532 (Moab) ○ 84525 (Green River) ○ 84540 (Thompson Springs) ○ 84530 (La Sal)

28. About how long have you lived in the area?

○ Less than 1 year ○ 1-2 yrs ○ 3-5 yrs ○ 6-10 yrs ○ 11-20 yrs ○ 21+ yrs

29. What is your gender?

○ Male ○ Female ○ Transgender ○ Gender-fluid ○ Prefer to self-describe:_____

30. With what ethnicity do you most identify? (select all that apply)

- ○ Hispanic
- ○ Asian
- ○ White/Caucasian
- ○ Latino/Latina
- ○ Black/African American
- ○ American Indian/Alaska Native
- ○ Pacific Islander
- ○ Other (please describe):_____
- ○ Don't Know/Not Sure

31. What is your age (in years)?

○ 18-24 ○ 25-34 ○ 35-44 ○ 45-54 ○ 55-64 ○ 65 or more

32. Please select the ages (in years) of your household members: (check all that apply)

○ <5 ○ 5-9 ○ 10-14 ○ 15-17 ○ 18-24 ○ 25-34 ○ 35-44 ○ 45-54 ○ 55-64 ○ 65+

33. What is your highest level of education completed?

- ○ Less than high school/GED
- ○ High school diploma/GED
- ○ Technical school graduate
- ○ Some college
- ○ College degree
- ○ Graduate degree
- ○ Post-Graduate degree

34. Including yourself, how many members of your household are disabled?

○ 0 ○ 1 ○ 2 ○ 3 or more

35. Are you or a household member a primary caregiver for an aged, disabled, or chronically ill person?

○ Yes ○ No

Please return using the postage paid envelope enclosed with this survey or mail to:
National Rural Health Resource Center, 525 S. Lake Ave., Suite 320, Duluth MN 55802

THANK YOU VERY MUCH FOR YOUR TIME

Appendix B: "Other" Survey Comments

3. **Please check the box that describes your level of concern with each of the health topics in our community:**
    - Engaged/focused mental health for children and teens at schools
    - Being able to see a doctor within in a week
    - Availability of needed healthcare
    - Access to healthy, fresh food/produce
    - Rape by men inflicted on women
    - Adult and child sexual abuse
    - Physician competence
    - High cost of dental
    - Preventative care
    - Teen suicide risk
    - Women's health
    - Physical fitness
    - Infertility care
    - Autoimmune
    - Meth heads
    - Counselors
    - Hemp use
    - Eye care

4. **What are the top 3 health topics of interest to you?**
    - Mental Health/Drug and Alcohol Use (65)
        - Teen/underage drug and alcohol use (18)
        - Drug use (16)
        - Drinking/alcohol (13)
        - Drugs/drug use (5)
        - Tobacco (4)
        - Mental health therapists for all ages
        - Anxiety/depression
        - Addiction
        - Suicide
        - Substance abuse
        - Pot use
        - Vaping Dependency
        - Mind/body connection
    - Cost of Healthcare (58)
        - High Costs (35)

    - Cost of prescription (16)
    - Ability to pay (2)
    - Low cost tests and screenings
    - For low income and all minority groups
    - Being able to cover costs at the nearest large hospital, which is out of state (1.5 hours in Colorado)
    - Financial aid
    - Affordable
- Access and availability (50)
    - Access (19)
    - Insurance (15)
    - Urgent care (3)
    - Quality care (2)
    - Access to abortions for unprepared parents
    - Immediacy of care
    - Good healthcare
    - Care centers
    - Local care
    - Hospital coverage
    - Limited number, skilled therapists for all ages
    - Single payer options
    - Uninsured
    - Doctors/Physicians
    - Good doctors and staff
- Specialty Care (39)
    - Dental care (7)
    - Cardiology (4)
    - Pediatric care (3)
    - Eye care (3)
    - Heart health (2)
    - Top gastroenterologist and surgeon
    - Sports medicine
    - Women's health
    - Rheumatology
    - Endocrinology
    - Gut health
    - Pulmonary
    - Internist
    - Allergies
    - Arthritis

    - OBGYN
    - Eye surgery for cataracts, Lasik, etc.
    - Another ophthalmologist
    - Vision care
    - Birth control
    - Dental
    - Vision
    - Heart clinic = top cardiologists
    - Specialty doctors
    - Diagnostics
- Chronic Disease (35)
    - Cancer (23)
    - Obesity (7)
    - Diabetes (5)
    - Auto-immune disorders (2)
- Prevention (28)
    - Nutrition (9)
    - Preventative care (6)
    - Weight management
    - Health check-ups
    - Preventative healthcare education
    - Preventative screening
    - Healthy cooking/eating
    - Poor nutrition
    - Diet
    - Healthy lifestyle choices
    - Vaccines
    - Wellness
    - Exercise
    - Fitness
    - Preventing gun violence
- Senior Care (26)
    - Senior care (20)
    - Assisted living for seniors – I am not familiar with health needs in our area
    - Service for all county seniors
    - Senior care facility
    - Senior health
    - Aging
- Social/Other (10)

    - Domestic violence (2)
    - Diversity
    - Patient Education
    - Apathy
    - Effects of environmental degradation
    - Women's right to choose
    - Abuse of medical system
    - Mal-practice lawsuits
    - Safe schools
    - Overall, I think MRH does a good job at listening to the community about needs and I think we are very fortunate to have all the available services that we have
- Alternative Methods (4)
    - Alternative treatments for pain other than opioid prescriptions
    - Marijuana and CBD for medicinal use needs to be a part of our healthcare
    - Natural methods
    - Preventative medicine and holistic
- Transportation (4)

5. **Please check the box that describes the level of importance for each of the health service needs in our community:**
    - Physical and occupational therapy – rehabilitation services
    - Better counseling/mental health services options
    - Counseling for alcohol and drugs
    - Integrative health physician
    - Geriatric physician
    - Senior healthcare
    - Good doctors
    - More doctors
    - Men's health
    - Diagnostics
    - Costs
    - Rape

6. **In your opinion, what are the top 3 priorities to improve our community's access to healthcare? (check up to 3 priorities)**
    - Affordability (4)
        - Lower cost (2)
        - Better insurance options
        - Insurance

- Listening to "people without homes" when they are trying to be heard, and then helping them with opiates, if they tell you they need them. This can't be via the ER. A 24/7 women's clinic staffed with a woman M.D. (s) who has the authority to either provide an opiate pill, then prescribe them, 10 at a time, would be, in my honest opinion, the top of 3 priorities you are asking about in question #6. Rape and domination by men on women must stop now.
- Access to care and treatment for low-income and all minorities
- Gender sensitivity
- Maybe partner with University of Utah
- Expand public health engagement
- Better primary care providers
- More mental health services
- Alternative healthcare
- Pain management
- 24/7 urgent care
- Pediatric care
- Screenings

9. **How long has it been since you last visited a doctor for a routine checkup (not a visit for a specific illness)?**
    - Too expensive!

    a. **If your last visit for a routine checkup was more than two years ago, it was because: (check all that apply)**

    - Have had two pregnancies with adequate prenatal and postpartum care so have not seen the need
    - Have seen many specialists that have been monitoring me
    - Do not feel the need to take care of my health
    - My husband has not had routine care in years
    - Not confident in doctors
    - $10,000 deductible
    - Not needed

10. **In the past 3 years, was there a time when you or a household member thought you needed healthcare services but did not get or delayed getting the medical services?**

    a. **If yes, please select the 3 most important reasons why you did not receive healthcare services? (check up to three reasons)**

    - Needed immediate care – appointments were over two months out. Pulled some local strings and got a same day appointment

- My child needed stitches on a weekend. Decided not to go to ER, in hindsight, should have gone but it would not have been covered by insurance
- We go to another state for colonoscopy because of cost savings
- Went to another hospital for recent foot surgery because of cost savings
- No specialist in Moab to address my need
- $10,000 deductible and huge premium
- Poor internet to call
- Specialist required
- No insurance

11. If you or a household member has a healthcare need to you have a:

a. Doctor you can go to?

- Wait time is long though

b. Dentist you can go to?

- Not in Moab

12. Do you have trouble accessing any needed prescriptions?

- Pretty much anything our doctor suggests
- Expensive epi pen

14. Have you ever had difficulty paying a medical bill?

a. If yes, have you ever applied for the Moab Regional Hospital financial aid program?

- Was long time ago – not Moab Hospital
- Yes, and left six messages but never had call returned

16. In the past 12 months, please selected all of the preventative services you or any household member have used. (check all that apply)

- Specialized endoscopy and swallow test with biopsies
- Did not know about MRH's low cost skin cancer screening option
- Tried MRH's low cost skin cancer screenings but it was full
- Cholesterol and blood pressure checks in Grand Junction
- Specialized bone density testing
- Colonoscopy in Grand Junction, Colorado
- I have a doctor outside the MRH system
- Heart problem (ER)
- A1c – Pre-diabetes
- Adult vaccinations
- Health ed talks
- DOT physical
- Acid reflux

- Not at MRH

17. **Have you ever been told by a doctor or healthcare processional that you have high cholesterol, high blood pressure, high blood sugar, or diabetes?**
    - High – no, borderline – yes

    a. If yes, please select the condition/conditions:
    - Borderline (3)
        - High cholesterol
        - High blood sugar
    - Slightly

21. **In the past 3 years, please select all healthcare specialists that you or a household member have seen. (check all that apply)**
    - Grand Junction Ophthalmologist
    - ER compression fracture
    - Functional medicine MD
    - Primary care provider
    - Family Medicine MD
    - Family doctor
    - Naturopath
    - Audiologist
    - Podiatrist

22. **In the past 3 years, please select the location of the medical services that you or household members have used for routine care. (check all that apply)**
    - St. Mary's (3)
        - Grand Junction
    - Doctors in Grand Junction (3)
        - Haven't had routine care, only knee surgery in Grand Junction
    - University of Utah (2)
        - Primary Children's
    - Foothill Family Clinic – Salt Lake City
    - Green River Medical Center
    - Annual blood screening
    - Green River Dental
    - MDVIP doctor in Salt Lake City
    - Salt Lake City dermatologist
    - Cortez Specialist
    - Salt Lake City surgeon
    - Moab dentist

- X-ray department
- Grand Junction Veterans Administration Medical Center
- Satisfied
- PROVD

23. **If you have received care at Moab Regional Hospital or Moab Regional Health Center in the past 3 years, please rate your satisfaction with the following items:**
    - Care from physicians/providers except from an ER doctor
    - I brought my neighbor and service was good, Medicare seems good

24. **The following services are available at Moab Regional Hospital. Please rate your satisfaction of each service that you have used.**
    - Takes a month to get lab results called to me
    - Dermatology
    - Physical Therapy
        - Mountainland

25. **What ideas or suggestions do you have for improving the overall health of our community?**
    - Availability (12)
        - More available doctors (3)
        - More mental healthcare providers
        - Increase family practice providers – too long of a wait to get an appointment
        - Making it easier for people to make an appointment with a doctor
        - Recruit more medical doctors, specialists and nurses
        - More primary care physicians
        - Easier access to family practice doctors
        - Central information/reference number
        - More physicians taking new patients
        - More in-network providers
    - Specialty Care (10)
        - Dental care on Fridays. I switched to a Grand Junction, Colorado dentist because I had a dental emergency on a Friday afternoon. Maybe the dentists could rotate coverage of Fridays?
        - Medicinal marijuana available for the community
        - Increase level of care/add an intensive care unit
        - Interested in a pediatrician here
        - Expand surgical capacities
        - More pediatric services
        - More orthopedic care

    - Family planning
    - Rheumatologist
    - Endocrinologist
- Healthy Lifestyle (10)
    - Educate young adults on 'whole' health – diet, mind, exercise. Low sugar, low carbs
    - Do a public outreach by providing a once-a-month free public service to the community
    - More alternative education; i.e. food and supplement education
    - Increased wellness and nutrition awareness
    - Free screenings for major health concerns
    - Nutrition and weight loss programs
    - Watch what you eat and drink
    - More exercise, lose weight
    - Exercise diet counseling
    - No smoking or drinking
- Lower costs (9)
    - Charge less for basic procedures like colonoscopies
    - Lab costs need to go down - unaffordable
    - Make healthcare affordable for all
    - Charge less for operating room
    - More low-cost dental clinics
    - Be less expensive
- Insurance (5)
    - Adequate (2)
    - Affordable (2)
    - Insurance for middle/working class and private business owners
- Quality of doctors and specialists (5)
    - In Urgent Care and ER
    - More qualified/quality of doctors needed in the community
- Substance Use (3)
    - More education about addictions/substance abuse
    - Substance abuse and alcohol abuse counseling
    - Clean up drug users
- Customer Service (3)
    - Store staff are rude – not friendly- thus, unhealthy
    - People come to visit and are welcome, not a welcoming place for locals
    - Staff at front/apartment desks disinterested, robotic
- Cost Transparency (2)
    - Improve cost knowledge so that you know the cost in advance
    - Transparency of costs for visits/procedures. This is a national issue!

- More mental health services (2)
    - There are very few mental health providers
- My biggest concern is if I end up hospitalized and if I am terminal or old a doctor would try too much to save me
- I think it is crazy when I run into uninsured poor people who are not using ACA
- If people on Medicaid can get immunizations at MRH it would keep kiddos on schedule and be easier for families
- Overall experience, except for the one ER doctor, who has made me never want to come back
- Expand senior services to all county seniors and publicize regularly those services
- The mosquitos that are carrying the diseases to our country
- This health needs assessment is a wonderful start!
- Hospital (school) collaboration with young people
- Housing! Including availability of housing for all residents, including homeless individuals
- Assisted living facility – closest is 2 hours away
- Most depends on national and state policies
- Cut back on tourism – especially off road
- Happy with the new urgent care services
- More financial support for EMS
- Education patient forums
- Access for all minorities
- Universal healthcare
- Doctors that care
- More outreach
- Transportation
- I wish I knew
- Affordability
- Urgent care
- Cardiology
- Education
- Internist
- Privacy

26. What health insurance coverage do you have?

- ACA – HSA – deductible over $10, 000
- It's over $10,000
- + CHIP for children
- VA

27. Where do you currently live by zip code?

- 84532 Castle Valley (3)

33. What is your highest level of education completed?

- College degree (2)

35. Are you or a household member a primary caregiver for an aged, disabled, or chronically ill person?

- My neighbor
- Not yet

Other comments:

- Please consider educating communities about the correlation between their health and overall wellbeing and what food they consume
- Improve helpfulness and customer satisfaction skills of staff

Appendix C: Secondary Data Analysis

Introduction

There are two different types of sources used to conduct a community health needs assessment. The first type is a primary source that is the initial material that is collected during the research process. Primary data is the data that The Center collects using methods such as surveys, focus groups, interviews, as well as objective data sources. Primary data is a reliable method to collect data as The Center knows the source, how it was collected and analyzed. Secondary data is the analysis of preexisting data. Secondary data analysis utilizes the data that was collected by another entity in order to further a study. Secondary data analysis is useful for organizational planning to complement primary data or if there is not time or resources to gather raw data. It has its drawbacks, however, as data from the different agencies is collected during different timeframes and with varying methods. This can make direct comparisons of secondary data difficult. See Appendix D for source details and definitions. Please note, the data collected for this report is the most current information as of December 2019. The types of measures selected to analyze in this report were identified based on data available for Grand County, Carbon County and Uintah County, Utah, and the United States.

For more secondary data information, The Center offers users the ability to extract multiple data elements that are focused on specific scenarios in population health management on the Population Health Portal: https://www.ruralcenter.org/population-health-portal/data

Geography and Demographics

	Grand County	Carbon County	Uintah County	Utah	US
Population	9,225	21,403	32,588	2,763,885	308,745,538
Land area	3,672	1,478	4,480	82,170	3,531,905
Population density	3	15	7	34	87
Male	50%	50%	51%	50%	49%
Female	50%	50%	49%	50%	51%
Age 0-4	7%	8%	5%	5%	3%
Age 5-9	6%	8%	5%	5%	3%
Age 10-14	6%	7%	4%	4%	3%
Age 15-17	3%	4%	5%	5%	4%
Age 18-24	9%	10%	9%	11%	10%
Age 25-34	13%	13%	16%	16%	13%
Age 35-44	13%	10%	11%	12%	13%
Age 45-54	15%	13%	12%	11%	15%
Age 55-64	16%	13%	9%	9%	12%
Age 65+	17%	14%	9%	9%	12%
White	89%	92%	87%	86%	72%
Black	0%	0%	0%	1%	13%

Asian	1%	1%	1%	1%	13%
Native American/ Alaska Native	4%	1%	8%	1%	1%
Native Hawaiian/ Pacific Islander	0%	0%	0%	1%	0%
Some other race	4%	3%	2%	6%	6%
Multiple races	2%	2%	2%	3%	3%
Hispanic or Latino	10%	12%	7%	13%	16%
Veterans	9%	8%	8%	8%	8%
Language other than English spoken at home	6%	6%	11%	15%	12%
Foreign born persons	5%	3%	2%	8%	13%

Health Outcomes

Indicators for Grand County that are equal to or better than the state average are green. Grand County indicators that are worse than the state average are pink.

	Grand County	Carbon County	Uintah County	Utah	US
Years potential life lost per 100,000 population	7,500	10,600	7,900	6,100	-
Life expectancy	79	75	77	80	79
Top three leading causes of death	-	-	-	Heart Disease, Malignant Neoplasms, Unintentional Injury	Heart Disease, Malignant Neoplasms, Unintentional Injury
Fair of poor health	14%	15%	14%	12%	16%
Poor physical health days	4	4	4	3	4
Poor mental health days	4	4	4	4	4
Low birth weight	8%	10%	8%	7%	8%
Diabetes prevalence	8%	10%	9%	7%	10%
HIV prevalence per 100,000 population	101	61	50	116	350

	Grand County	Carbon County	Uintah County	Utah	US
Suicide death rate per 100,000	23	40	28	20	14
Chronic Obstructive Pulmonary Disease	-	-	-	4%	6%
Asthma	-	-	-	9%	8%
All cancer sites per 100,000	398	421	393	403	448
Prostate cancer per 100,000	87	119	102	113	104
Breast cancer per 100,000	126	93	85	115	125
Colon and rectum cancer per 100,000	40	41	48	30	39
Uterine cancer per 100,000	N/A	N/A	26	27	27
Melanoma	33	16	32	40	22

Social and Economic

Indicators for Grand County that are equal to or better than the state average are green. Grand County indicators that are worse than the state average are pink.

	Grand County	Carbon County	Uintah County	Utah	US
No high school diploma	7%	8%	11%	5%	7%

	Grand County	Carbon County	Uintah County	Utah	US
High school diploma	27%	28%	35%	23%	27%
Some college, no degree	25%	32%	29%	27%	21%
Associate degree	12%	15%	7%	10%	8%
Bachelor's degree	17%	11%	10%	22%	19%
Graduate degree	11%	5%	4%	11%	12%
Unemployment rate	2%	4%	4%	2%	4%
Median household income	46,658	46,994	67,012	65,325	57,652
Poverty	13%	16%	12%	11%	15%
Children in poverty	19%	19%	13%	12%	20%
Free/reduced price lunch eligible	53%	49%	48%	36%	52%
Residential segregation – non-white/white	24	31	55	42	N/A
Violent crime rates per 100,000	269	131	124	229	385
Injury deaths per 100,000	86	133	82	67	60

Health Behaviors

Indicators for Grand County that are equal to or better than the state average are green. Grand County indicators that are worse than the state average are pink.

	Grand County	Carbon County	Uintah County	Utah	US
Current smokers	12%	11%	12%	9%	17%
No leisure time for physical activity	16%	23%	22%	16%	26%
Recreation and fitness facility access	95%	78%	62%	85%	-
Adult obesity	21%	25%	32%	26%	30%
Food insecurity	16%	15%	15%	13%	
Excessive drinking	13%	13%	14%	13%	16%
Alcohol-impaired driving deaths	23%	22%	46%	20%	31%
Drug overdose deaths per 100,000	-	49	16	21	22
Teen birth rate	34	29	34	19	19

Physical Environment

Indicators for Grand County that are equal to or better than the state average are green. Grand County indicators that are worse than the state average are pink.

	Grand County	Carbon County	Uintah County	Utah	US
Air pollution – particulate matter	5	6	7	6	11
Drinking water violations	No	Yes	No	-	-
Severe housing problems	13%	14%	13%	15%	19%
Households with no motor vehicle	2%	6%	4%	4%	9%

Clinical Care

Indicators for Grand County that are equal to or better than the state average are green. Grand County indicators that are worse than the state average are pink.

	Grand County	Carbon County	Uintah County	Utah	US
Uninsured	13%	10%	16%	11%	10%
Uninsured children	9%	7%	12%	7%	5%
Access to primary care physicians	800:1	1,850:1	2,800:1	1,770:1	1,330:1
Access to mental health providers	440:1	530:1	860:1	330:1	440:1
Access to dentists	1,380:1	1,270:1	1,950:1	1,490:1	1,460:1

	Grand County	Carbon County	Uintah County	Utah	US
Preventable hospital stays rate per 1,000	471	3,217	3,880	2,551	4,520
Readmissions rate	15	15	14	14	16
Medicare patients with mammogram within past two years	32%	35%	22%	30%	32%
Medicare patients with annual influenza vaccination	45%	46%	45%	48%	49%
Medicare diabetics with hemoglobin A1c test within past year	-	-	-	72.5%	79.5%
Adults over age 50 ever reporting having a colonoscopy or sigmoidoscopy	2%	4%	5%	4%	6%
Pneumonia vaccination age 65+ within last year	16%	16%	17%	16%	14%

Hospital Compare

Survey of MRH Patients' Experiences

Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) is a national survey that asks patients about their experiences during a recent hospital stay. In all but two categories, MRH's scores are equal to or better than the state and national averages. *Source: Hospital Compare*

	MRH	Utah	US
Given information about what to do during their recovery at home	80%	89%	87%
Doctors "Always" communicated well	87%	82%	81%
Room and bathroom were "Always" clean	73%	77%	75%
"Always" received help as soon as they wanted	76%	71%	76%
Nurses "Always" communicated well	86%	81%	81%
YES, they would definitely recommend the hospital	79%	77%	72%
Rated hospital 9 or 10	80%	77%	73%
Area around their room was "Always" quiet at night	74%	62%	62%
Staff "Always" explained about medicines before giving it to them	77%	66%	66%
"Strongly Agree" they understood their care when they left	58%	58%	53%

Survey of Patients' Experiences: Comparable Hospitals

Comparative results are included below for hospitals in Grand (MRH), Carbon (Castleview Hospital), and Uintah (Uintah Basin Medical Center) Counties. In all but two categories, MRH's scores are equal to or better than Castleview Hospital and Uintah Basin Medical Center.

	MRH	Castleview Hospital	Uintah Basin Medical Center
Given information about what to do during their recovery at home	80%	90%	80%
Doctors "Always" communicated well	87%	82%	77%
Room and bathroom were "Always" clean	73%	76%	68%
"Always" received help as soon as they wanted	76%	76%	66%
Nurses "Always" communicated well	86%	80%	69%
YES, they would definitely recommend the hospital	79%	68%	66%
Rated hospital 9 or 10	80%	74%	66%
Area around their room was "Always" quiet at night	74%	60%	56%
Staff "Always" explained about medicines before giving it to them	77%	67%	63%
"Strongly Agree" they understood their care when they left	58%	54%	46%

Timely and Effective Care

The following measures show how often or how quickly hospitals provide care for patients with certain conditions. This information can help you compare which hospitals provided recommended care most often as part of the overall care they provide to patients.

Timely and Effective Care: Average Time (minutes) Patients...	MRH	Castleview Hospital	Uintah Basin Medical Center	Utah	US
spent in the emergency department before leaving from the visit	110	103	112	110	112
spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room	-	42	41	58	55
spent in the emergency department, before they were admitted to the hospital as an inpatient	-	172	198	194	208
before outpatients with chest pain or possible heart attack got an ECG	-	8	7	8	8

Timely and Effective Care	MRH	Castleview Hospital	Uintah Basin Medical Center	Utah	US
Healthcare workers given influenza vaccination	-	98%	98%	95%	90%
Patients assessed and given influenza vaccination	73%	99%	74%	92%	93%

Appendix D: Index of Secondary Data Indicators

Data Areas	Description	Source and Dates
Population	Total population residing in the area.	American FactFinder, US Census Bureau. 2010
Land area	Area in square miles.	American FactFinder, US Census Bureau. 2010
Population density	Total persons per square mile.	American FactFinder, US Census Bureau. 2010
Male	Percent of male population.	American FactFinder, US Census Bureau. 2010
Female	Percent of female population.	American FactFinder, US Census Bureau. 2010
Age 0-4	Percentage of total population aged 0-4 in the designated geographic area.	American FactFinder, US Census Bureau. 2010
Age 5-9	Percentage of total population aged 5-9 in the designated geographic area.	American FactFinder, US Census Bureau. 2010
Age 10-14	Percentage of total population aged 10-14 in the designated geographic area.	American FactFinder, US Census Bureau. 2010
Age 15-17	Percentage of total population aged 15-17 in the designated geographic area.	American FactFinder, US Census Bureau. 2010
Age 18-24	Percentage of total population aged 18-24 in the designated geographic area.	American FactFinder, US Census Bureau. 2010

Data Areas	Description	Source and Dates
Age 25-34	Percentage of total population aged 25-34 in the designated geographic area.	American FactFinder, US Census Bureau. 2010
Age 35-44	Percentage of total population aged 35-44 in the designated geographic area.	American FactFinder, US Census Bureau. 2010
Age 45-54	Percentage of total population aged 45-54 in the designated geographic area.	American FactFinder, US Census Bureau. 2010
Age 55-64	Percentage of total population aged 55-64 in the designated geographic area.	American FactFinder, US Census Bureau. 2010
Age 65+	Percentage of total population aged 65+ in the designated geographic area.	American FactFinder, US Census Bureau. 2010
White	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa. It includes people who indicate their race as "White" or report entries such as Irish, German, Italian, Lebanese, Arab, Moroccan, or Caucasian.	American FactFinder, US Census Bureau. 2010
Black	A person having origins in any of the Black racial groups of Africa. It includes people who indicate their race as "Black or African American," or report entries such as African American, Kenyan, Nigerian, or Haitian.	American FactFinder, US Census Bureau. 2010
Asian	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. This includes people who reported detailed Asian responses such as: "Asian Indian," "Chinese,"	American FactFinder, US Census Bureau. 2010

Data Areas	Description	Source and Dates
	"Filipino," "Korean," "Japanese," "Vietnamese," and "Other Asian" or provide other detailed Asian responses.	
Native American/Alaska Native	A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment. This category includes people who indicate their race as "American Indian or Alaska Native" or report entries such as Navajo, Blackfeet, Inupiat, Yup'ik, or Central American Indian groups or South American Indian groups.	American FactFinder, US Census Bureau. 2010
Native Hawaiian/Pacific Islander	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. It includes people who reported their race as "Fijian," "Guamanian or Chamorro," "Marshallese," "Native Hawaiian," "Samoan," "Tongan," and "Other Pacific Islander" or provide other detailed Pacific Islander responses.	American FactFinder, US Census Bureau. 2010
Some other race	A person identifying as some other race.	American FactFinder, US Census Bureau. 2010
Multiple races	People may choose to provide two or more races either by checking two or more race response check boxes, by providing multiple responses, or by some combination of check boxes and other responses. For data product purposes, "Two or More Races" refers to combinations of two or more of the following race categories: "White," "Black or African American," American Indian or Alaska Native," "Asian," Native Hawaiian or Other Pacific Islander," or "Some Other Race"	American FactFinder, US Census Bureau. 2010

Data Areas	Description	Source and Dates
Hispanic or Latino	The estimated population that is of Hispanic, Latino, or Spanish origin.	American FactFinder, US Census Bureau. 2010
Veterans	Percent of the civilian population 18 years of age and older who served in the US military.	American FactFinder, American Community Survey, US Census Bureau. 2013-17
Language other than English spoken at home	Percent of the population that primarily speak a language other than English at home.	American FactFinder, American Community Survey, US Census Bureau. 2013-17
Foreign born persons	Percent of the population that were not born in a US state or territory or abroad to American parent(s).	American FactFinder, American Community Survey, US Census Bureau. 2013-17
Years potential life lost	Years of potential life lost before age 75 per 100,000 population (age-adjusted).	County Health Rankings. 2015-17
Life expectancy	Average number of years a person can expect to live.	County Health Rankings. 2015-17 Centers for Disease Control and Prevention, National Center for Health Statistics. 2017
Top three leading causes of death	Leading cause of death, all ages.	Center for Disease Control and Prevention, CDC Wonder. 2017
Fair or poor health	Percentage of adults reporting fair or poor health (age-adjusted).	County Health Rankings. 2016 Centers for Disease Control and Prevention, Behavioral Risk factor Surveillance System Prevalence and Trends Data. 2016
Poor physical health days	Average number of physically unhealthy days reported in past 30 days (age-adjusted).	County Health Rankings. 2016 Centers for Disease Control and Prevention, Behavioral Risk factor Surveillance System

Data Areas	Description	Source and Dates
		Prevalence and Trends Data. 2016
Poor mental health days	Average number of mentally unhealthy days reported in past 30 days (age-adjusted).	County Health Rankings. 2016 Centers for Disease Control and Prevention, Behavioral Risk factor Surveillance System Prevalence and Trends Data. 2016
Low birth weight	Percentage of live births with low birthweight (< 2,500 grams).	County Health Rankings. 2011-17 Centers for Disease Control and Prevention, National Center for Health Statistics. 2017
Diabetes prevalence	Percentage of adults aged 20 and above with diagnosed diabetes.	County Health Rankings. 2015 Centers for Disease Control and Prevention, Behavioral Risk factor Surveillance System Prevalence and Trends Data. 2016
HIV prevalence	Number of people aged 13 years and older living with a diagnosis of human immunodeficiency virus (HIV) infection per 100,000 population.	County Health Rankings. 2015 Centers for Disease Control and Prevention, HIV Surveillance Report. 2010-16
Suicide death rate	Crude rate per 100,000 population of deaths with leading cause of death as suicide.	Center for Disease Control and Prevention, CDC Wonder. 2017
Chronic obstructive pulmonary disease	Age-adjusted percentage of adults with COPD.	Centers for Disease Control and Prevention, Chronic Obstructive Pulmonary Disease, Fact Sheets. 2017
Asthma	Percent of children and adults with current asthma.	Centers for Disease Control and Prevention, Data, Statistics and Surveillance. 2017

Data Areas	Description	Source and Dates
All cancer sites	Age-adjusted incidence rate of all cancer site cases per 100,000.	State Cancer Profiles, National Cancer Institute, Centers for Disease Control and Prevention. 2012-16
Prostate cancer	Age-adjusted incidence rate of male prostate cancer cases per 100,000.	State Cancer Profiles, National Cancer Institute, Centers for Disease Control and Prevention. 2012-16
Breast cancer	Age-adjusted incidence rate of female breast cancer cases per 100,000.	State Cancer Profiles, National Cancer Institute, Centers for Disease Control and Prevention. 2012-16
Colon and rectum cancer	Age-adjusted incidence rate of colon and rectum cancer cases per 100,000.	State Cancer Profiles, National Cancer Institute, Centers for Disease Control and Prevention. 2012-16
Uterine cancer	Age-adjusted incidence rate of female uterus cancer cases per 100,000.	State Cancer Profiles, National Cancer Institute, Centers for Disease Control and Prevention. 2012-16
Melanoma	Age-adjusted incidence rate of melanoma cancer cases per 100,000.	State Cancer Profiles, National Cancer Institute, Centers for Disease Control and Prevention. 2012-16
No high school degree	Population 25 years and over without a high school degree.	American FactFinder, American Community Survey, US Census Bureau. 2013-17
High school degree	Population 25 years and over with a high school degree.	American FactFinder, American Community Survey, US Census Bureau. 2013-17
Some college, no degree	Population 25 years and over with some college but no degree.	American FactFinder, American Community Survey, US Census Bureau. 2013-17
Associate degree	Population 25 years and over with an Associate Degree.	American FactFinder, American Community Survey, US Census Bureau. 2013-17

Data Areas	Description	Source and Dates
Bachelor's degree	Population 25 years and over with a bachelor's degree.	American FactFinder, American Community Survey, US Census Bureau. 2013-17
Graduate degree	Population 25 years and over with a master's degree.	American FactFinder, American Community Survey, US Census Bureau. 2013-17
Unemployment rate	Unemployment rates, not seasonally adjusted.	US Department of Labor, Bureau of Labor Statistics. August, 2019
Median household income	Median income of households in the geographic area.	American FactFinder, American Community Survey, US Census Bureau. 2013-17
Poverty	Percent of all individuals below the poverty level.	American FactFinder, American Community Survey, US Census Bureau. 2013-17
Children in poverty	Percent of children below 18 years old below the poverty level.	American FactFinder, American Community Survey, US Census Bureau. 2013-17
Free/reduced price lunch eligible	Percentage of children enrolled in public schools that are eligible for free or reduced-price lunch.	County Health Rankings. 2016-17 National Center for Education Statistics, Digest of Education Statistics. 2015-16
Residential segregation – Non-white/white	Index of dissimilarity where higher values indicate greater residential segregation between non-white and white county residents. A demographic measure of the evenness with which two groups (non-white and white residents, in this case) are distributed across the component geographic areas (census tracts, in this case) that make up a larger area (counties, in this case). The residential segregation index ranges from 0 (complete integration) to 100 (complete segregation).	County Health Rankings. 2013-17

Data Areas	Description	Source and Dates
Violent crime rates	Number of reported violent crime offenses per 100,000 population.	County Health Rankings. 2014, 2016 Crime Data Explorer, Federal Bureau of Investigation. 2018
Injury deaths	Number of deaths due to injury per 100,000 population (includes planned (e.g. homicide or suicide) and unplanned (e.g. motor vehicle deaths) injuries).	County Health Rankings. 2013-17 Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. 2017
Current smokers	Percentage of adults who are current smokers (smoke every day or most days and have smoked at least 100 cigarettes in their lifetime).	County Health Rankings. 2016 Centers for Disease Control and Prevention, Behavioral Risk factor Surveillance System Prevalence and Trends Data. 2016
No leisure time for physical activity	Percentage of adults age 20 and over reporting no leisure-time physical activity in the past month (such as running, calisthenics, golf, gardening, or walking for exercise)	County Health Rankings. 2015 Centers for Disease Control and Prevention, Behavioral Risk factor Surveillance System Prevalence and Trends Data. 2015
Recreation and fitness facility access	Percentage of population with adequate access to locations for physical activity (reside in a census block that is within a half mile of a park or reside in a rural census block that is within three miles of a recreational facility).	County Health Rankings. 2010, 2018
Adult obesity	Percentage of the adult population (age 20 and older) that reports a body mass index (BMI) greater than or equal to 30 kg/m2.	County Health Rankings. 2015 Centers for Disease Control and Prevention, Behavioral Risk factor Surveillance System Prevalence and Trends Data. 2016

Data Areas	Description	Source and Dates
Food insecurity	Percentage of population who lack adequate access to food during the past year (with a lack of access, at times, to enough food for an active, healthy life or uncertain availability of nutritionally adequate foods).	County Health Rankings. 2016 Feeding America, Map the Meal Gap. 2017
Excessive drinking	Percentage of adults reporting binge or heavy drinking (Binge drinking is defined as a woman consuming more than four alcoholic drinks during a single occasion or a man consuming more than five alcoholic drinks during a single occasion. Heavy drinking is defined as a woman drinking more than one drink on average per day or a man drinking more than two drinks on average per day).	County Health Rankings. 2016 Centers for Disease Control and Prevention, Behavioral Risk factor Surveillance System Prevalence and Trends Data. 2016
Alcohol-impaired driving deaths	Percentage of driving deaths with alcohol involvement.	County Health Rankings. 2013-17 Centers for Disease Control and Prevention, Impaired Driving, Motor Vehicle Safety. 2016
Drug overdose deaths	Number of drug poisoning deaths per 100,000 population.	County Health Rankings. 2015-17 Centers for Disease Control and Prevention, Drug Overdose Deaths. 2017
Teen birth rates	Number of births per 1,000 female population ages 15-19.	County Health Rankings. 2011-17 Centers for Disease Control and Prevention, Reproductive Health: Teen Pregnancy. 2017
Air pollution-particle matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5).	County Health Rankings. 2014 National Environmental Public Health Tracking Network. 2014

Data Areas	Description	Source and Dates
Drinking water violations	Indicator of the presence of health-related drinking water violations in community/public water systems. Yes, indicates the presence of a violation, No indicates no violation.	County Health Rankings. 2015-17
Severe housing problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities.	County Health Rankings. 2011-15 US Department of Housing and Urban Development, Consolidated Planning, Comprehensive Housing Affordability Strategy data. 2012-16
Households with no motor vehicle	Among occupied housing units, percent of housing units with no vehicles available.	American FactFinder, American Community Survey, US Census Bureau. 2013-17
Uninsured	Percentage of population under age 65 without health insurance.	US Census Bureau, Small Area Health Insurance Estimates Program. 2017
Uninsured children	Percentage of population under age 18 without health insurance.	US Census Bureau, Small Area Health Insurance Estimates Program. 2017
Access to primary care physicians	Ratio of population to primary care physicians (practicing non-federal physicians (M.D.s and D.O.s) under age 75 specializing in general practice medicine, family medicine, internal medicine, and pediatrics).	County Health Rankings. 2016. America's Health Rankings, United Health Foundation. 2018
Access to mental health providers	Ratio of population to mental health providers (psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists, and mental health providers that treat alcohol and other drug abuse, as well as advanced practice nurses specializing in mental healthcare).	County Health Rankings. 2018. America's Health Rankings, United Health Foundation. 2017

Data Areas	Description	Source and Dates
Access to dentists	Ratio of population to dentists (registered dentists with a National Provider Identification).	County Health Rankings. 2017. America's Health Rankings, United Health Foundation. 2017
Preventable hospital stays rate	Rate of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees.	National Rural Health Resource Center, Population Health Toolkit. 2016
Readmissions rate per 100 per year	Rate of unplanned readmission to an acute care hospital in the 30 days after discharge from a hospitalization, all-cause.	CMS Hospital Compare. 2017
Medicare patients with mammogram within past two years	Percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening.	Centers for Medicare and Medicaid Services, Mapping Medicare Disparities. 2017
Medicare patients with annual influenza vaccination	Percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination.	Centers for Medicare and Medicaid Services, Mapping Medicare Disparities. 2017
Medicare diabetes with hemoglobin A1c test within past year	Percentage of diabetic Medicare enrollees with hemoglobin A1c test within past year	http://archive.dartmouthatlas.org/data/table.aspx?ind=160. 2015
Adults over age 50 ever reporting having a colonoscopy or sigmoidoscopy	Medicare enrollees over age 50 ever reporting having a colonoscopy or sigmoidoscopy.	Centers for Medicare and Medicaid Services, Mapping Medicare Disparities. 2017
Pneumonia vaccination age 65+	Medicare enrollees over age 65 receiving a pneumococcal vaccination within the last year.	Centers for Medicare and Medicaid Services, Mapping Medicare Disparities. 2017

Data Areas	Description	Source and Dates
within last year		

Appendix E: Focus Group Invitation

NATIONAL RURAL HEALTH RESOURCE CENTER

MOAB REGIONAL HOSPITAL

[date]

Dear [name]:

You have been identified as an area community leader by Moab Regional Hospital's CEO, Jennifer Sadoff.

We invite you to **participate in a focus group** conducted by the National Rural Health Resource Center on behalf of Moab Regional Hospital. Focus groups are an excellent way for community members to share their opinions in an honest yet confidential environment. The goal of this focus group is to assist the Moab Regional Hospital in identifying strengths and needs of health services for the region.

This information will be used for strategic planning, grant applications, new programs and by community groups interested in addressing health in the region. This process will help to maintain quality health care in the community. Participants for focus groups were identified as those living in the area that represent different groups of health care users including seniors, family caregivers, business leaders, and health care providers. Whether you or a family member are involved with local health care services or not, this is your chance to help guide high quality local health services in the future.

We invite you to participate in the focus group scheduled for **[date]** from **[time]** at **[location]**. Your identity is not part of the focus group report and your individual responses will be kept confidential. Snacks will be provided by Moab Regional Hospital.

Please confirm your attendance by contacting Keely at the National Rural Health Resource Center by phone (218) 216-7041 or e-mail (klonetto@ruralcenter.org) **by [date].**

We look forward to your participation. Thank you.

Sincerely,

Tracy Morton, Director of Population Health
National Rural Health Resource Center