



Community Health Needs Assessment Johnson County, KS

On Behalf of Olathe Medical Center



June 2024

**VVV Consultants LLC
Olathe, KS**

Community Health Needs Assessment

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I. Executive Summary

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I. Executive Summary

Olathe Medical Center (Primary Service Area) – Johnson County, KS - 2024 Community Health Needs Assessment (CHNA)

The previous Community Health Needs Assessment for Olathe Medical Center (OMC) and its primary service area was completed in 2021. (Note: The Patient Protection and Affordable Care Act (ACA) requires non-profit hospitals to conduct a CHNA every three years and adopt an implementation strategy to meet the needs identified by the CHNA). The Round 5 Johnson County, KS CHNA began in December of 2023 and was facilitated/created by VVV Consultants, LLC (Olathe, KS) staff under the direction of Vince Vandehaar, MBA.

Creating healthy communities requires a high level of mutual understanding and collaboration among community leaders. The development of this assessment brings together community health leaders, providers, and other residents to research and prioritize county health needs while documenting community health delivery success. This health assessment will serve as the foundation for community health improvement efforts for the next three years.

Important community CHNA Benefits for both the local hospital and the health department, are as follows: 1.) Increases knowledge of community health needs and resources 2.) Creates a common understanding of the priorities of the community’s health needs 3.) Enhances relationships and mutual understanding between and among stakeholders 4.) Provides a basis upon which community stakeholders can make decisions about how they can contribute to improving the health of the community 5.) Provides rationale for current and potential funders to support efforts to improve the health of the community 6.) Creates opportunities for collaboration in delivery of services to the community and 7.) Guides the hospital and local health department on how they can align their services and community benefit programs to best meet needs, and 8.) fulfills the Hospital's “Mission” to deliver.

County Health Area of Future Focus on Unmet Needs

Area Stakeholders held a community conversation to review, discuss, and prioritize health delivery. Below are two tables reflecting community views and findings:

2024 CHNA Priorities - Unmet Health Needs on behalf of Olathe Medical Center - Primary Service Area Town Hall on 05/09/24 with 32 Attendees (Total Votes =128)				
#	Community Health Needs to Change and/or Improve	Votes	%	Accum
1	Mental Health (Diagnosis, Placement, Aftercare, Access to Providers)	26	20.3%	20%
2	Crisis BH Care	20	15.6%	36%
3	Collaboration of Community Recourses	15	11.7%	48%
4	Substance Abuse (Drugs & Alcohol)	14	10.9%	59%
5	Housing (Affordable & Accessible)	13	10.2%	69%
6	Lack of Healthcare Navigators	11	8.6%	77%
7	Transportation	7	5.5%	83%
Total Votes		128	100%	
Other needs receiving votes: Social Isolation, Nutrition Education, Livable Wages, Childcare (Availability / Affordable), Chronic Disease Management, and Mobile Care.				

Town Hall CHNA Findings: Areas of Strengths

Johnson Co, KS - Community Health Strengths			
#	Topic	#	Topic
1	Education	6	Improved awareness for mental health
2	Walking trails and parks	7	School health
3	Collaboration for community health	8	Availability and economic base
4	People can navigate their own care	9	Great reputation and competent providers
5	Innovative approaches for access to care	10	FQHC

Key CHNA Round #5 Secondary Research Conclusions found:

KANSAS HEALTH RANKINGS: According to the 2023 Robert Woods Johnson County Health Rankings, Johnson Co, KS, on average was ranked 1st in Health Outcomes, 1st in Health Factors, and 26th in Physical Environmental Quality out of the 105 Counties.

TAB 1. Johnson County's population is 619,195 (based on 2023 findings). About six percent (5.8%) of the population is under the age of 5, while the population that is over 65 years old is 16.2%. Children in single parent households make up a total of 15.2% compared to the Big KS Norm of 22%, and 85.9% are living in the same house as one year ago.

TAB 2. In Johnson County, the average per capita income is \$56,364 while 5.4% of the population is in poverty. The severe housing problem was recorded at 10.3% compared to the Big KS Norm of 14.2%. Those with food insecurity in Johnson County is 7.2%, and those having limited access to healthy foods (store) is 2.3%. Individuals recorded as having a long commute while driving alone is 23.5% compared to the Big KS Norm of 19.5%.

TAB 3. Children eligible for a free or reduced-price lunch in Johnson County is 21.4%. Findings found that 96.5% of Johnson County ages 25 and above graduated from high school while 56.7% has a bachelor's degree or higher (2022).

TAB 4. The percentage of births where prenatal care began in the first trimester was recorded at 87.3% compared to the Big KS Norm of 81.3%. Additionally, the percentage of births with low birth weight was 6.7%. Johnson County recorded 1.9% of births occurring to teens between ages 15-19. The percentage of births where mother smoked during pregnancy was 1.9% compared to the Big KS Norm of 8%.

TAB 5. The Johnson County primary care service coverage ratio is 1 provider (county based office physician who is a MD and/or DO) to 809 residents. There were 2,496 preventable hospital stays in compared to the Big KS Norm of 2,698. Patients who gave their hospital a rating of 9 or 10 (scale 0-10) was 69% while patients who reported they would definitely recommend the hospital was recorded at 67%. On average patients spend 205 minutes in the ER before leaving from their visit compared to the Big KS Norm of 154 minutes.

Secondary Research Continued

TAB 6. In Johnson County, adults ever diagnosed with depression as of 2021 was 18%. The Mental Behavioral hospital admissions rate per 100,000 was 68.5 compared to the Big KS Norm of 73.4. The age adjusted suicide mortality rate per 100,000 was recorded at 15.2 for Johnson County.

TAB 7a – 7b. Johnson County has an obesity percentage of 28.6% and a physical inactivity percentage is 14.7%. The percentage of adults who smoke is 11.2%, while the excessive drinking percentage is 19.8%. The percentage of adults who have taken medication for high blood pressure is 79%, while their heart failure admissions rate was recorded at 20.6. Those with kidney disease is 2.4% compared to the Big KS Norm of 2.9%. The percentage of adult individuals who were recorded with cancer was 7% while adults recorded with diabetes (20+) is 6.9% compared to the Big KS Norm of 9.9%.

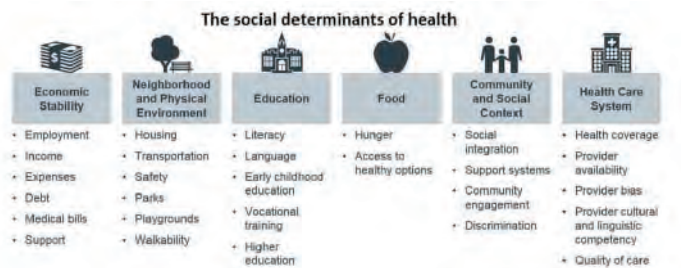
TAB 8. The adult uninsured rate for Johnson County is 6% compared to the Big KS Norm of 10.7%.

TAB 9. The life expectancy rate in Johnson County for males and females is roughly 81 years of age (81.4). Alcohol-impaired driving deaths for Johnson County is 16.9% while age-adjusted Cancer Mortality rate per 100,000 is 127.9. The age-adjusted heart disease mortality rate per 100,000 is at 124.1.

TAB 10. A recorded 96.7% of Johnson County has access to exercise opportunities. Continually, 49% of women have done a mammography screening compared to the Big KS Norm of 44%. Adults recorded in Johnson County who have had a regular routine check-up is 75.9%.

Social Determinants Views Driving Community Health: From Town Hall conversations Provider Access followed by Economic Stability, Community/Social Support, and Neighborhood / Physical Environment are impacting community health, see Sec V for detailed analysis

Social Determinants Online Community Feedback – OMC PSA N=448



KEY "Social Determinant Takeaways" to Improve Our Community Health	
Addressing access to <u>affordable and timely mental health care services</u> would be high on my list!	There seems to be many <u>small organizations</u> helping people in these areas, but no <u>central coordination</u> for helping people in need.
The <u>economic stability</u> is challenging especially since COVID, the cost of housing, food, transportation etc has drastically increased and income isn't going as far	We need more <u>transportation options</u> in certain areas of the county. And more help with housing- cost of rent is skyrocketing. Need a larger sense of owning our health and health apathy.
<u>Educate public</u> about how to access services, regardless of their insurance / economic status.	There are not enough <u>community agencies ready/able</u> to address SDOH needs.

Key CHNA Round #5 Primary Research Conclusions found:

Community Feedback from residents, community leaders, and providers (N=448) provided the following community insights via an online perception survey:

- Using a Likert scale, the average between Johnson County stakeholders and residents that would rate the overall quality of healthcare delivery in their community as either Very Good or Good; is 66.7%.
- Johnson County stakeholders are very satisfied with the following services: Ambulance Services, Dentists, Optometry, and Telehealth.
- When considering past CHNA needs, the following topics came up as the most pressing: Mental Health Services, Affordable Housing, Affordable Health Services, Drugs / Substance Abuse, Medicaid Expansion, Obesity, Senior Care, Alcohol Abuse, Cost Transparency, and Preventative Health / Wellness.

OMC Primary Service Area - CHNA YR 2024 N=448					
Past CHNA Unmet Needs Identified		Ongoing Problem			Pressing
Rank	Ongoing Problem	Votes	%	Trend	Rank
1	Mental Health Services (Access, Provider, Treatment, Aftercare)	206	12.9%		1
2	Affordable Housing	128	8.0%		2
3	Affordable Healthcare Services	114	7.1%		3
4	Drugs / Substance Abuse	105	6.6%		4
5	Obesity (Fitness / Nutrition)	96	6.0%		6
6	Drug / Alcohol Abuse	89	5.6%		8
7	Cost Transparency	77	4.8%		9
8	Transportation	76	4.8%		13
9	Senior Care	70	4.4%		7
10	Medicaid Expansion	69	4.3%		5
11	Homeless	68	4.3%		12
12	Suicide	68	4.3%		11
13	Housing	62	3.9%		15
14	Preventative Health / Wellness	60	3.8%		10
15	Food Insecurity	59	3.7%		16
16	Chronic Disease Management	52	3.3%		14
17	Healthcare Education	46	2.9%		18
18	Violence / Abuse	45	2.8%		20
19	Mobile Health Services	43	2.7%		21
20	Accepting Medicaid	35	2.2%		17
21	Cultural Competency	32	2.0%		19
Totals		1600	100.0%		

II. Methodology

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II. Methodology

a) CHNA Scope and Purpose

The federal Patient Protection and Affordable Care Act (ACA) requires that each registered 501(c)3 hospital conduct a Community Health Needs Assessment (CHNA) at least once every three years and adopt a strategy to meet community health needs. Any hospital that has filed a 990 is required to conduct a CHNA. IRS Notice 2011-52 was released in late fall of 2011 to give notice and request comments.

JOB #1: Meet/Report IRS 990 Required Documentation

1. A description of the community served by the facility and how the community was determined;
2. A description of the process and methods used to conduct the CHNA;
3. The identity of any and all organizations with which the organization collaborated and third parties that it engaged to assist with the CHNA;
4. A description of how the organization considered the input of persons representing the community (*e.g., through meetings, focus groups, interviews, etc.*), who those persons are, and their qualifications;
5. A prioritized description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and
6. A description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

Section 501(r) provides that a CHNA must take into account input from persons who represent the broad interests of the community served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: Government agencies with current information relevant to the health needs of the community and representatives or members in the community who are medically underserved, low-income, minority populations, and populations with chronic disease needs. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility's defined community (*e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc.*).

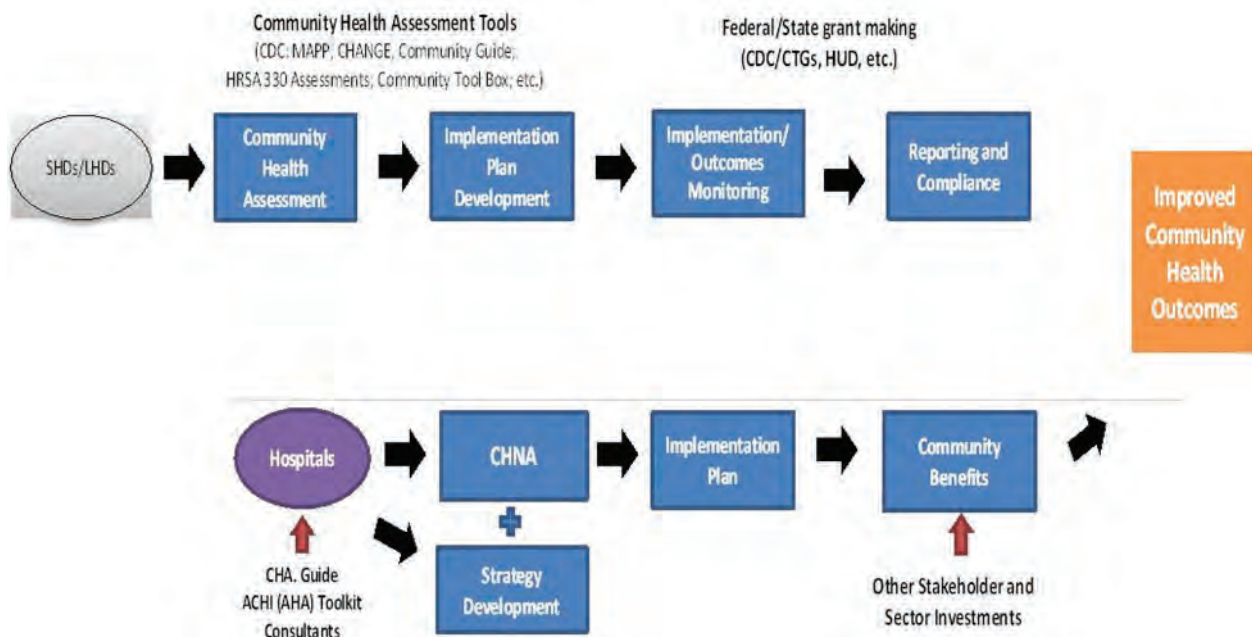
JOB #2: Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be "conducted" in the taxable year that the written report of the CHNA findings is made widely available to the public. The Notice also indicates that the IRS intends to pattern its rules for **making a CHNA "widely available to the public"** after the rules currently in effect for Form 990. Accordingly, an organization would make a **facility's written report** widely available by posting the final report on its website either in the form of (1) the report itself, in a readily accessible format or (2) a link to another organization's website, along with instructions for accessing the report on that website. *The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.*

JOB #3: Adopt an Implementation Strategy by Hospital

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. The Notice defines an “implementation strategy” as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it. A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

Great emphasis has been given to work hand-in-hand with leaders from hospitals, the state health department and the local health department. A common approach has been adopted to create the CHNA, leading to aligned implementation plans and community reporting.



IRS Requirements Overview (Notice 2011-52)

Notice and Request for Comments Regarding the Community Health Needs Assessment Requirements for Tax-exempt Hospitals

Applicability of CHNA Requirements to “Hospital Organizations”

The CHNA requirements apply to “hospital organizations,” which are defined in Section 501(r) to include (1) organizations that operate one or more state-licensed hospital facilities, and (2) any other organization that the Treasury Secretary determines is providing hospital care as its principal function or basis for exemption.

How and When to Conduct a CHNA

Under Section 501(r), a hospital organization is required to conduct a CHNA for each of its hospital facilities once every three taxable years. ***The CHNA must take into account input from persons representing the community served by the hospital facility and must be made widely available to the public. The CHNA requirements are effective for taxable years beginning after March 23, 2012.*** As a result, a hospital organization with a June 30 fiscal year end must complete a CHNA full report every 3 years for each of its hospital facilities by fiscal June 30th.

Determining the Community Served

A CHNA must identify and assess the health needs of the **community served** by the hospital facility. Although the Notice suggests that geographic location should be the primary basis for defining the community served, it provides that the organization may also take into account the target populations served by the facility (e.g., children, women, or the aged) and/or the facility’s principal functions (e.g., specialty area or targeted disease). *A hospital organization, however, will not be permitted to define the community served in a way that would effectively circumvent the CHNA requirements (e.g., by excluding medically underserved populations, low-income persons, minority groups, or those with chronic disease needs).*

Persons Representing the Community Served

Section 501(r) provides that a CHNA must take into account input from **persons who represent the broad interests of the community** served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: (1) government agencies with current information relevant to the health needs of the community and (2) representatives or members of medically underserved, low-income, and minority populations, and populations with chronic disease needs, in the community. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility’s defined community (e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc.).

Required Documentation

The Notice provides that a hospital organization will be required to separately document the CHNA for each of its hospital facilities in a **written report** that includes the following information: 1) a description of the community served by the facility and how the community was determined; 2) a description of the process and methods used to conduct the CHNA; 3) the identity of any and all organizations with which the organization collaborated and third parties that it engaged to assist with the CHNA; 4) a description of how the organization considered the input of persons representing the community (e.g., through meetings, focus groups, interviews, etc.), who those persons are, and their qualifications; 5) a prioritized

description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and 6) a description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be **“conducted”** in the taxable year that the written report of the CHNA findings is made widely available to the public. The Notice also indicates that the IRS intends to pattern its rules for making a CHNA “widely available to the public” after the rules currently in effect for Forms 990. *Accordingly, an organization would make a facility’s written report widely available by posting on its website either (1) the report itself, in a readily accessible format, or (2) a link to another organization’s website, along with instructions for accessing the report on that website. The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.*

How and When to Adopt an Implementation Strategy

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. **The Notice defines an “implementation strategy” as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need, or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it.** A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

Under the Notice, an implementation strategy is considered to be “adopted” on the date the strategy is approved by the organization’s board of directors or by a committee of the board or other parties legally authorized by the board to act on its behalf. Further, the formal adoption of the implementation strategy must occur by the end of the same taxable year in which the written report of the CHNA findings was made available to the public. For hospital organizations with a June 30 fiscal year end, that effectively means that the organization must complete and appropriately post its first CHNA no later than its fiscal year ending June 30, 2013, and formally adopt a related implementation strategy by the end of the same tax year. *This final requirement may come as a surprise to many charitable hospitals, considering Section 501(r) contains no deadline for the adoption of the implementation strategy.*

IRS Community Health Needs Assessment for Charitable Hospital Organizations - Section 501(0)(3) Last Reviewed or Updated: 21-Aug-2020

In addition to the general requirements for tax exemption under Section 501(c)(3) and Revenue Ruling 69-545 hospital organizations must meet the requirements imposed by Section 501(r) on a facility-by-facility basis in order to be treated as an organization described in Section 501(c)(3). These additional requirements are:

1. Community Health Needs Assessment (CHNA) - Section 501(r)(3),
2. Financial Assistance Policy and Emergency Medical Care Policy - Section 501(r)(4),
3. Limitation on Charges - Section 501(r)(5), and
4. Billing and Collections - Section 501(r)(6).

Medically underserved populations include populations experiencing health disparities or that are at risk of not receiving adequate medical care because of being uninsured or underinsured, or due to geographic, language, financial, or other barriers. Populations with language barriers include those with limited English proficiency. Medically underserved populations also include those living within a hospital facility’s service area but not receiving adequate medical care from the facility because of cost, transportation difficulties, stigma, or other barriers.

Additionally, in determining its patient populations for purposes of defining its community, a hospital facility must take into account all patients without regard to whether (or how much) they or their insurers pay for the care received or whether they are eligible for assistance under the hospital facility's financial assistance policy. If a hospital facility consists of multiple buildings that operate under a single state license and serve different geographic areas or populations, the community served by the hospital facility is the aggregate of these areas or populations.

Additional Sources of Input

In addition to soliciting input from the three required sources, a hospital facility may solicit and take into account input received from a broad range of persons located in or serving its community. This includes, but is not limited to:

- Health care consumers and consumer advocates
- Nonprofit and community-based organizations
- Academic experts
- Local government officials
- Local school districts
- Health care providers and community health centers
- Health insurance and managed care organizations,
- Private businesses, and
- Labor and workforce representatives.

Although a hospital facility is not required to solicit input from additional persons, it must take into account input received from any person in the form of written comments on the most recently conducted CHNA or most recently adopted implementation strategy.

Collaboration on CHNA Reports

A hospital facility is permitted to conduct its CHNA in collaboration with other organizations and facilities. This includes related and unrelated hospital organizations and facilities, for-profit and government hospitals, governmental departments, and nonprofit organizations.

In general, every hospital facility must document its CHNA in a separate CHNA report unless it adopts a joint CHNA report. However, if a hospital facility is collaborating with other facilities and organizations in conducting its CHNA, or if another organization has conducted a CHNA for all or part of the hospital facility's community, portions of a hospital facility's CHNA report may be substantively identical to portions of the CHNA reports of a collaborating hospital facility or other organization conducting a CHNA, if appropriate under the facts and circumstances.

If two hospital facilities with overlapping, but not identical, communities collaborate in conducting a CHNA, the portions of each hospital facility's CHNA report relevant to the shared areas of their communities might be identical. So, hospital facilities with different communities, including general and specialized hospitals, may collaborate and adopt substantively identical CHNA reports to the extent appropriate. However, the CHNA reports of collaborating hospital facilities should differ to reflect any material differences in the communities served by those hospital facilities. Additionally, if a governmental public health department has conducted a CHNA for all or part of a hospital facility's community, portions of the hospital facility's CHNA report may be substantively identical to those portions of the health department's CHNA report that address the hospital facility's community.

Collaborating hospital facilities may produce a joint CHNA report as long as all of the collaborating hospital facilities define their community to be the same and the joint CHNA report contains all of the same basic information that separate CHNA reports must contain. Additionally, the joint CHNA report must be clearly identified as applying to the hospital facility.

Joint Implementation Strategies

As with the CHNA report, a hospital facility may develop an implementation strategy in collaboration with other hospital facilities or other organizations. This includes but is not limited to related and unrelated

hospital organizations and facilities, for-profit and government hospitals, governmental departments, and nonprofit organizations. In general, a hospital facility that collaborates with other facilities or organizations in developing its implementation strategy must still document its implementation strategy in a separate written plan that is tailored to the particular hospital facility, taking into account its specific resources. However, a hospital facility that adopts a joint CHNA report may also adopt a joint implementation strategy. With respect to each significant health need identified through the joint CHNA, the joint implementation strategy must either describes how one or more of the collaborating facilities or organizations plan to address the health need or identify the health need as one the collaborating facilities or organizations do not intend to address. It must also explain why they do not intend to address the health need.

A joint implementation strategy adopted for the hospital facility must also: Be clearly identified as applying to the hospital facility, Clearly identify the hospital facility's role and responsibilities in taking the actions described in the implementation strategy as well as the resources the hospital facility plans to commit to such actions, and Include a summary or other tool that helps the reader easily locate those portions of the joint implementation strategy that relate to the hospital facility.

Adoption of Implementation Strategy

An authorized body of the hospital facility must adopt the implementation strategy. See the discussion of the Financial Assistance Policy below for the definition of an authorized body. This must be done on or before the 15th day of the fifth month after the end of the taxable year in which the hospital facility finishes conducting the CHNA. This is the same due date (without extensions) of the Form 990.

Acquired Facilities A hospital organization that acquires a hospital facility (through merger or acquisition) must meet the requirements of Section 501(r)(3) with respect to the acquired hospital facility by the last day of the organization's second taxable year beginning after the date on which the hospital facility was acquired. In the case of a merger that results in the liquidation of one organization and survival of another, the hospital facilities formerly operated by the liquidated organization will be considered "acquired," meaning they will have until the last day of the second taxable year beginning after the date of the merger to meet the CHNA requirements. Thus, the final regulations treat mergers equivalently to acquisitions.

New Hospital Organizations

An organization that becomes newly subject to the requirements of Section 501(r) because it is recognized as described in Section 501(c)(3) and is operating a hospital facility must meet the requirements of Section 501(r)(3) with respect to any hospital facility by the last day of the second taxable year beginning after the latter of: The effective date of the determination letter recognizing the organization as described in Section 501(c)(3), or The first date that a facility operated by the organization was licensed, registered, or similarly recognized by a state as a hospital.

New Hospital Facilities

A hospital organization must meet the requirements of Section 501(r)(3), with respect to a new hospital facility it operates by the last day of the second taxable year beginning after the date the facility was licensed, registered, or similarly recognized by its state as a hospital.

Transferred/Terminated Facilities

A hospital organization is not required to meet the requirements of Section 501(r)(3) with respect to a hospital facility in a taxable year if the hospital organization transfers all ownership of the hospital facility to another organization or otherwise ceases its operation of the hospital facility before the end of the taxable year. The same rule applies if the hospital facility ceases to be licensed, registered, or similarly recognized as a hospital by a state during the taxable year. By extension, a government hospital organization that voluntarily terminates its Section 501(c)(3) recognition as described in Rev. Proc. 2018-5 (updated annually) is no longer considered a hospital organization for purposes of Section 501(r) and therefore is not required to meet the CHNA requirements during the taxable year of its termination.

Public Health Criteria:

Domain 1: Conduct and disseminate assessments focused on population health status and public health issues facing the community.

Domain 1 focuses on the assessment of the health of the population in the jurisdiction served by the health department. The domain includes systematic monitoring of health status; collection, analysis, and dissemination of data; use of data to inform public health policies, processes, and interventions; and participation in a process for the development of a shared, comprehensive health assessment of the community.

DOMAIN 1 includes 4 STANDARDS:

- **Standard 1.1** - Participate in or Conduct a Collaborative Process Resulting in a Comprehensive Community Health Assessment
- **Standard 1.2** - Collect and Maintain Reliable, Comparable, and Valid Data That Provide Information on Conditions of Public Health Importance and on the Health Status of the Population
- **Standard 1.3** - Analyze Public Health Data to Identify Trends in Health Problems, Environmental Public Health Hazards, and Social and Economic Factors That Affect the Public's Health
- **Standard 1.4** - Provide and Use the Results of Health Data Analysis to Develop Recommendations Regarding Public Health Policy, Processes, Programs, or Interventions

Required CHNA Planning Process Requirements:

- a. Participation by a wide range of community partners.
- b. Data / information provided to participants in CHNA planning process.
- c. Evidence of community / stakeholder discussions to identify issues & themes. Community definition of a "healthy community" included along with list of issues.
- d. Community assets & resources identified.
- e. A description of CHNA process used to set priority health issues.

Seven Steps of Public Health Department Accreditation (PHAB):

1. Pre-Application
2. Application
3. Document Selection and Submission
4. Site Visit
5. Accreditation Decision
6. Reports
7. Reaccreditation

MAPP Process Overview

Mobilizing for Action through Planning and Partnerships (MAPP) is a flexible strategic planning tool for improving the health and quality of life for the community. Like most strategic planning, MAPP involves organizing partners, creating a vision and shared values, collecting data, identifying areas for improvement, and developing goals and strategies to address them. Through collaboration with partners and the community, MAPP allows us to focus our efforts and work on issues to strengthen the local public health system.

The MAPP process includes the following six phases. It's important to note that MAPP has no set end point and will continue throughout the life cycle of the Community Health Improvement Plan (CHIP).

1. In this first phase, **Organize for Success/Partnership Development**, various sectors of the community with established relationships are reviewed, leading to the identification of areas for partnership development and creation of new relationships to enhance the MAPP process.
2. In the second phase, **Visioning**, a shared community vision and common values for the MAPP process are created.
3. In the third phase, **Four MAPP Assessments**, data is collected from existing and new sources about the health of our community, which results in a Community Health Assessment (CHA).
4. In the fourth phase, **Identify Strategic Issues**, community partners and health professionals select issues based on data collected from the third phase that are critical to the local public health system and align with the vision from the second phase.
5. In the fifth phase, **Formulate Goals and Strategies**, potential ways to address the strategic issues are identified by the community along with the setting of achievable goals. The final result is a Community Health Improvement Plan (CHIP).
6. The sixth and final phase of the MAPP process is the **Action Cycle**, which is where the work happens for meeting the objectives set in the previous phase. Through these collaborative efforts, the health of the community is improved.



Social Determinants of Health

What Are Social Determinants of Health?



[Social determinants of health \(SDOH\)](#) external icon are defined as the conditions in which people are born, grow, live, work, and age. SDOH are shaped by the distribution of money, power, and resources throughout local communities, nations, and the world. Differences in these conditions lead to health inequities or the unfair and avoidable differences in health status seen within and between countries.

[Healthy People 2030](#) external icon includes SDOH among its leading health indicators. One of Healthy People 2030's five overarching goals is specifically related to SDOH: Create social, physical, and economic environments that promote attaining the full potential for health and well-being for all.

Through broader awareness of how to better incorporate SDOH throughout the multiple aspects of public health work and the [10 Essential Public Health Services](#), public health practitioners can transform and strengthen their capacity to advance health equity. Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health, such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

Round #5 CHNA focuses on Social Determinants & Health Equity.

Centers for Medicare & Medicaid Services Health Equity Domains

CMS' Hospital Commitment to Health Equity has introduced two equity-focused process measures in 2023: screening for Social Drivers of Health (SDOH-01) and Screen Positive Rate for Social Drivers of Health (SDOH-02). (Although these measures will not be required until 2024, it is highly recommended that hospitals begin tracking them in 2023.)

Domain 1: Equity as a Strategic Priority

The hospital has a strategic plan for advancing health care equity that accomplishes the following:

- Identifies priority populations who currently experience health disparities.
- Establishes health care equity goals and discrete action steps to achieve them.
- Outlines specific resources that are dedicated to achieving equity goals.
- Describes an approach for engaging key stakeholders, such as community partners.

Domain 2: Data Collection

The hospital is engaging in the following three key data collection activities.

- Collecting demographic information, including self-reported race and ethnicity, and SDOH information, on a majority of patients
- Training staff in the culturally sensitive collection of demographics and SDOH information
- Inputting patient demographic and/ or SDOH information into structured interoperable data elements using a certified electronic health record technology.

Domain 3: Data Analysis

The hospital stratifies key performance indicators by demographic and/ or SDOH variables to identify equity gaps and includes this information on hospital performance dashboards.

Domain 4: Quality Improvement

The hospital participates in local, regional and or national quality improvement activities that are focused on reducing health disparities.

Domain 5: Leadership Engagement

The hospital's senior leadership, including the chief executives and the entire hospital board of trustees, demonstrates a commitment to equity through the following two activities.

- Annual reviews of the hospital's strategic plan for achieving health equity
- Annual reviews of key performance indicators stratified by demographic and/ or social factors.

Sources:

The Joint Commission. (2022, June 20). R3 Report: New Requirements to Reduce Health Care Disparities. Retrieved from https://www.jointcommission.org/-/media/tje/documents/standards/r3-reports/r3_disparities_july2022-6-20-2022.pdf

Health Equity Innovation Network. (2022, August 29). Quick Start Guide: Hospital Commitment to Health Equity Measure. Retrieved from <https://hqin.org/wp-content/uploads/2022/08/Quick-Start-Guide-Hospital-Commitment-to-Health-Equity-Measure.pdf>

The Joint Commission (TJC) Elements of Performance - Regulatory and Accreditation Requirements Related to Health Equity and Social Determinants of Health

New and revised TJC requirements to reduce health care disparities went into effect Jan. 1, 2023. Below are the six elements of performance.

Element of Performance 1:

The organization designates an individual to lead activities aimed at reducing healthcare disparities. **(Hospital Responsibility)**

Element of Performance 2:

The organization assesses the patient's health-related social needs and provides information about community resources and support services. **(CHNA full report- Section I and III)**

Examples of health-related social needs may include the following:

- Access to transportation
- Difficulty paying for prescriptions or medical bills.
- Education and literacy
- Food insecurity
- Housing insecurity

Element of Performance 3:

The organization identifies healthcare disparities in its patient population by stratifying quality and safety data. **(CHNA Town Hall)** Examples of sociodemographic characteristics may include but are not limited to the following: Age, Gender, Preferred Language, Race, and ethnicity.

Element of Performance 4:

The organization develops a written action plan that describes how it will address at least one of the healthcare disparities identified. **(CHNA IMPL Development Plan)**

Element of Performance 5:

The organization acts when it does not achieve or sustain goal(s) in its action plan to reduce health care disparities.

Element of Performance 6:

At least annually, the organization informs key stakeholders, identifying leaders, licensed practitioners, and staff, about its progress in reducing identified healthcare disparities. **(Hospital Responsibility)**

II. Methodology

b. Collaborating CHNA Parties

Working together to improve community health takes collaboration. Listed below is an in-depth profile of the local hospitals and health department CHNA partners:

Olathe Medical Center

20333 West 151st St

Olathe, KS 66061

CEO: Jason Hannagan

Olathe Medical Center (OMC) is now part of The University of Kansas Health System. The vision of the health system is to lead the nation in caring, healing, teaching and discovering. The mission of the health system is as an academic health system serving the people of Kansas, the region and the nation, The University of Kansas Health system will enhance the health and wellness of the individuals, families and communities we serve.

About Us: For more than 70 years, OMC has expanded its services to meet the growing needs of the community. Today, Olathe Medical Center is located at Olathe Medical Park, one of the largest hospital campuses in the Midwest - a nearly 250-acre campus at 151st Street and I-35 in southern Johnson County. The five-story acute-care medical center is licensed for 300 beds and averages more than 44,000 patient care days per year. Its emergency care center is one of the busiest in the region, with more than 42,000 patients treated annually.

The not-for-profit medical center and its network of practicing physicians specialize in nearly every area of medicine. Olathe Medical Park houses several centers of excellence, including the Cardiovascular Center, Cancer Center, The Birth Place and The Kansas Joint Specialty Center. What began in 1953 as a 30-bed hospital has become a regional medical center.

Mission:

The mission of the health system is as an academic health system serving the people of Kansas, the region and the nation, The University of Kansas Health system will enhance the health and wellness of the individuals, families and communities we serve.

Vision:

The vision of the health system is to lead the nation in caring, healing, teaching and discovering.

Services and Specialties:

As a member of Olathe Health System, OMC has access to numerous health delivery areas such as:

- Allergy & Clinical Immunology
- Aortic Care
- Aquatic Physical Therapy
- Arthritis & Rheumatology
- Audiology Nephrology
- Bariatric Surgery (Weight Loss)
- Behavioral Care
- Blood Disorders (Hematology)
- Bone Health Program
- Breast Care
- Burn and Wound Care
- Cancer Care (Oncology)
- Cardiac and Pulmonary Rehab
- Cardiothoracic Surgery
- Cardiovascular Care (Heart)
- Concussion Management
- Critical / Intensive Care
- Dentistry
- Dermatology
- Diabetes Care
- Doctors Who Deliver Babies
- Ear, Nose & Throat (Otolaryngology)
- Emergency Medicine
- Endocrinology
- Eye Care Radiation Oncology
- Family Medicine
- Gastroenterology
- Gender-Affirming Medicine
- Geriatric Medicine (general and specialty care)
- Gynecologic Oncology
- Hand Surgery
- Hearing and Balance
- Heart rhythm disorders and electrophysiology
- Hematology
- Hepatology
- Home Healthcare
- Hospice
- Hospital Medicine
- Infectious Disease
- Infertility (Reproductive Endocrinology)
- Internal Medicine
- Interventional Radiology
- Joint Replacement
- Labor and Delivery
- Laboratory and pathology
- Lymphedema Management
- Mammography
- Maternal-Fetal Medicine
- Migraine Surgery
- Neonatology
- Neurology and Neurosurgery
- Nuclear Medicine
- Nurse Navigation
- Obstetrics/Gynecology
- Occupational Medicine
- Oncology
- Ophthalmology
- Orthopedics & Sports Medicine
- Pain Management
- Palliative Care
- Pediatric therapy
- Pediatrics (general and specialty care)
- Pharmacy
- Physical Medicine and Rehabilitation
- Plastic & Reconstructive Surgery
- Podiatry
- Primary Care
- Psychology
- Pulmonology
- Radiology
- Rehabilitation Services (Physical, Occupational, Speech)
- Rheumatology
- Robotic surgery
- Sinus Care
- Skull base care
- Sleep Disorders
- Speech-language pathology
- Spine care
- Sports Medicine
- Stroke Care
- Surgical Care
- Telehealth
- Transplant Services
- Trauma and critical care surgery
- Urgent Care
- Urology
- Vascular Surgery
- Vein Care
- Women's Health
- Wound Care and Hyperbaric Medicine

Johnson County Department of Health and Environment

111 S Cherry St.

Olathe, KS 66061

913-715-5000

Director: Dr. Charles Hunt

About Us: Public health is one of the most important services we provide the residents of Johnson County Government. Every day, in many ways, we strive to prevent disease and promote wellness. Our Olathe and Mission walk-in clinics offer services including immunizations, pregnancy testing and family planning, and Tuberculosis testing. The Johnson County Mental Health Center provides a wide range of mental health and substance abuse services to residents. We serve clients of the Kansas WIC program, teach classes for childcare providers, manage disease investigation and reporting, and so much more.

Services include: Disease Containment, Immunizations, Prenatal, Women's/Men's Health, Laboratory Services, Public Health Emergency Preparedness, Epidemiology, On-Site Wastewater Treatment, school Inspections, Child Care Licensing and Environmental regulatory inspections, WIC, Targeted Case Management

Services are provided at three sites: 11875 S. Sunset Drive, Olathe (Health Services Center); 11811 S. Sunset Drive, Olathe (Sunset Building); and 6000 Lamar Ave., Mission (Northeast Office Building).

Vision: To be a trusted partner working to develop more equitable conditions across Johnson County so all can lead healthier lives.

Mission: To protect the health and environment, for all who live, work and play in our community.

II. Methodology

b) Collaborating CHNA Parties Continued

Consultant Qualifications:

VVV Consultants LLC 601 N. Mahaffie, Olathe, KS 66061 (913) 302-7264

VVV Consultants LLC is an Olathe, KS based “boutique” healthcare consulting firm specializing in Strategy, Research and Business Development services. To date we have completed 83 unique community CHNA’s in KS, MO, IA, NE and WI (references found on our website VandehaarMarketing.com)

Introduction: Who We Are

Background and Experience



VVV Consultants LLC
601 N Mahaffie
Olathe, KS 66061



Vince V Vandehaar, MBA – Principal

VVV Consultants LLC – start 1/1/09 *

Adjunct Full Professor @ Avila, MNU & Webster Universities

40+ year veteran marketer, strategist and researcher

Saint Luke’s Health System, BCBS of KC, and Towers Perrin

Hometown: Bondurant IA



Cassandra Kahl Parker, MHA- Dir, Project Management

University of KS / Park University

Hometown: Maple, WI



Olivia G Hewitt- Associate

Emporia State University- BS Communication

Hometown: Olathe, KS

VVV Consultants LLC (EIN 27-0253774) began as “VVV Research & Development INC” in early 2009 and converted to an LLC on 12/24/12. Web: VandehaarMarketing.com

Our Mission: to research, facilitate, train, create processes to improve market performance, champion a turnaround, and uncover strategic “critical success” initiatives.

Our Vision: to meet today’s challenges with the voice of the market solutions.

Our Values:

Engaged – we are actively involved in community relations & boards.

Reliable – we do what we say we are going to do.

Skilled – we understand business because we’ve been there.

Innovative – we are process-driven & think “out of the box.”

Accountable – we provide clients with a return on their investment.

II. Methodology

c) CHNA and Town Hall Research Process

Round #5 Community Health Needs Assessment (CHNA) process began in January of 2023 for Olathe Medical Center in Johnson County, KS to meet Federal IRS CHNA requirements.

In early January 2023, a meeting was called amongst the Olathe Medical Center leaders to review CHNA collaborative options. <Note: VVV Consultants LLC from Olathe, KS was asked to facilitate this discussion with the following agenda: VVV CHNA experience, review CHNA requirements (regulations) and discuss CHNA steps/options to meet IRS requirements and to discuss next steps.> Outcomes from discussion led to the Hays Medical Center to request VVV Consultants LLC to complete a CHNA IRS aligned comprehensive report.

VVV CHNA Deliverables:

- Document Hospital Primary Service Area - meets the 75% Patient Origin Rule.
- Uncover/document basic secondary research county health data, organized by 10 tabs.
- Conduct / report CHNA Community Check-in Feedback Findings (primary research).
- Conduct a Town Hall meeting to discuss with the community secondary & primary data findings leading to determining (prioritizing) county health needs.
- Prepare & publish a CHNA report which meets ACA requirements.

To ensure proper PSA Town Hall representation (that meets the 75% Patient Origin Rule), a patient origin three-year summary was generated documenting patient draw by zips as seen below:

OMC- Defined Primary Serv Area (KHA: 2021-23)					Overall (IP/ER/OP)		
#	ZIP	City	ST	County	Tot 3YR	%	ACCUM
1	66061	Olathe, KS	KS	JOHNSON	138,846	23.4%	23.4%
2	66062	Olathe, KS	KS	JOHNSON	138,291	23.3%	46.7%
3	66063	Olathe, KS	KS	JOHNSON	621	0.1%	46.8%
4	66030	Gardner, KS	KS	JOHNSON	70,126	11.8%	58.6%
5	66083	Spring Hill, KS	KS	JOHNSON	28,273	4.8%	63.3%
6	66071	Paola, KS	KS	MIAMI	20,261	3.4%	66.7%
7	66092	Wellsville, KS	KS	FRANKLIN	10,098	1.7%	68.4%
8	66221	Overland Park, KS	KS	JOHNSON	9,298	1.6%	70.0%
9	66067	Ottawa, KS	KS	FRANKLIN	9,176	1.5%	71.6%
10	66064	Osawatomie, KS	KS	MIAMI	9,075	1.5%	73.1%
11	66213	Overland Park, KS	KS	JOHNSON	8,818	1.5%	74.6%
12	66021	Edgerton, KS	KS	JOHNSON	7,600	1.3%	75.8%

To meet IRS aligned CHNA requirements and meet Public Health accreditation criteria stated earlier, a four-phase methodology was followed:

Phase I—Discovery:

Conduct a 30-minute conference call with the CHNA county health department and hospital clients. Review / confirm the CHNA calendar of events, explain / coach clients to complete the required participant database, and schedule / organize all Phase II activities.

Phase II—Qualify Community Need:

A) Conduct secondary research to uncover the following historical community health status for the primary service area. Use Kansas Hospital Association (KHA), Vital Statistics, Robert Wood Johnson County Health Rankings, etc. to document current state of county health organized as follows:

Health Indicators - Secondary Research
TAB 1. Demographic Profile
TAB 2. Economic Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospital / Provider Profile
TAB 6. Behavioral / Mental Health Profile
TAB 7. High-Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

Phase III—Quantify Community Need:

Conduct a 90-minute Town Hall meeting with required community primary service area residents. At each Town Hall meeting, CHNA secondary data will be reviewed, facilitated group discussion will occur and a group ranking activity to determine the most important community unmet health needs was administered.

Phase IV—Complete Data Analysis and Create Comprehensive Community Health Needs Assessment:

Complete full documentation to create each CHNA section documented in the Table of Contents. Publish hard copy reports (2) for client usage plus create a full CHNA report pdf to be posted on the hospital website to meet government CHNA regulation criteria.

Specific project CHNA roles, responsibilities, and timelines are documented in the following calendar.

Olathe Medical Center			
VVV CHNA Round #5 Work Plan - Year 2024			
Project Timeline & Roles as of 02/21/2024			
Step	Timeframe	Lead	Task
1	Jan. 2024	VVV / Hosp	Sent Leadership information regarding CHNA Wave #5 for review
2	2/14/2024	Hosp	Select CHNA Wave #5 Option B. Approve (sign) VVV CHNA quote
3	2/29/2024	VVV	Send out REQCommInvite Excel file. HOSP & HLTH Dept to fill in PSA Stakeholders Names /Address /Email
4	2/1/2024	VVV	Hold Kick-off Meeting & Request Hospital Client to send KHA PO reports for FFY 18, 19 and 20. In addition, request hospital to complete 3 year historical PSA IP/OP/ER/Clinic patient origin file (Use ZipPSA_3yrPOrigin.xls)
5	On or Before 2/29/2024	VVV	Prepare CHNA Wave#5 Stakeholder Feedback "online link". Send link for hospital review.
6	Mar-April 2024	VVV	Assemble & complete Secondary Research - Find / populate 10 TABS. Create Town Hall ppt for presentation.
7	3/11/2024	VVV / Hosp	Prepare/send out PR story #1 / E Mail Request announcing upcoming CHNA work to CEO to review/approve.
8	3/11/2024	VVV / Hosp	Place PR story to local media CHNA survey announcing "online CHNA Wave #5 feedback". Request public to participate. Send E Mail request to local stakeholders
9	3/12/2024	VVV	Launch / conduct online survey to stakeholders: Hospital will e-mail invite to participate to all stakeholders. Cut-off 4/12/2024 for Online Survey
10	4/8/2024	Hosp	Prepare/send out Community TOWN HALL invite letter and place local AD.
11	4/8/2024	VVV / Hosp	Prepare/send out PR story #2 to local media announcing upcoming Town Hall. VVV will mock-up PR release to media sources.
12	5/7/2024	ALL	Conduct conference call (time TBD) with Hospital / Public HLTH to review Town Hall data / flow
13	5/9/2024	VVV	Conduct CHNA Town Hall. Breakfast 8:30-10:00am (location TBD) Review & Discuss Basic health data plus RANK Health Needs.
14	On or Before 06/14/2024	VVV	Complete Analysis - Release Draft 1- seek feedback from Leaders (Hospital & Health Dept.)
15	On or Before 06/21/2024	VVV	Produce & Release final CHNA report. Hospital will post CHNA online (website).
16	8/20/2024	VVV / Hosp	Conduct Client Implementation Plan Development PSA Leadership session.
17	on or before 6/30/2024	Hosp	Hold Board Meetings discuss CHNA needs, create & adopt an implementation plan. Communicate CHNA plan to community.

2024 Community Health Needs Assessment

Olathe Medical Center PSA

The University of Kansas Health System
Town Hall Meeting- 05/09/24



VVV Consultants LLC
Olathe, Kansas 66061

VandehaarMarketing.com
913-302-7264

1

Community Health Needs Assessment (CHNA) Onsite Town Hall Discussion Agenda

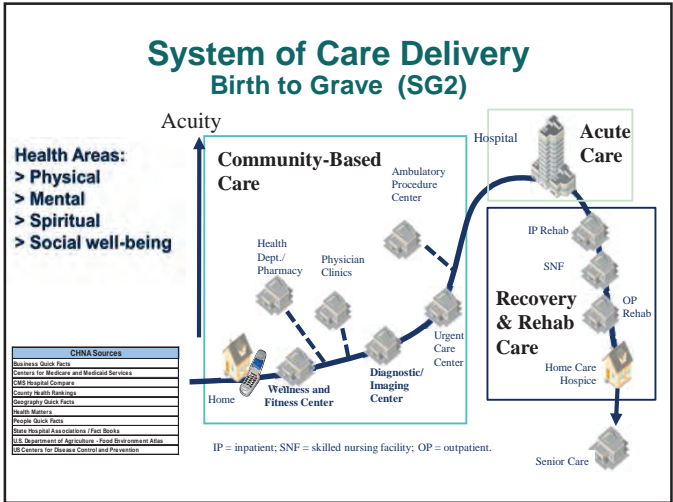
- > **Opening Welcome / Introductions / Review CHNA Purpose and Process (5 mins)**
- > **Discuss New Focus: Social Determinants of Health (5 mins)**
- > **Review Current Service Area "Health Status"**
 - Review Secondary Health Indicator Data (10 TABs)*
 - Review Community Online Feedback (30 mins)*
- > **Collect Community Health Perspectives**
 - Share Table Reflections to verify key takeaways*
 - Conduct an Open Community Conversation / Stakeholder Vote to determine the Most Important Unmet Needs (45 mins)*
- > **Close / Next Steps (5 mins)**

2

Town Hall Participation / Purpose & Parking Lot

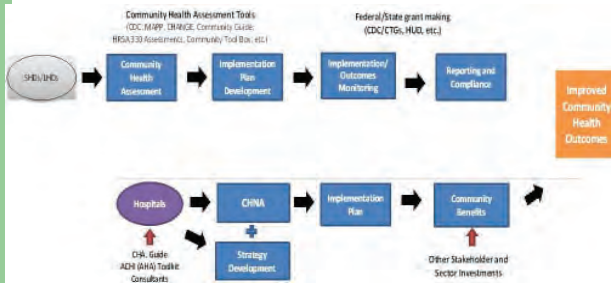
- ALL attendees practice "Safe Engagement", working together in table teams.
- ALL attendees are welcome to share. Engaging conversation (No right or wrong answer)
- Request ALL to Take Notes of important health indicators
- Please give truthful responses – Serious community conversation.
- Discuss (Speak up) to uncover unmet health needs
- Have a little fun along the way

3



4

Community Health Needs Assessment Joint Process: Hospital & Local Health Providers



5

A Conversation with the Community & Stakeholders

Community Stakeholder – An Inclusive Conversation

Consumers: Uninsured/underinsured people, Members of at-risk populations, Parents, caregivers and other consumers of health care in the community, and Consumer advocates.

Community leaders and groups: The hospital organization's board members, Local clergy and congregational leaders, Presidents or chairs of civic or service clubs – Chamber of Commerce, veterans' organizations, Lions, Rotary, etc., Representatives from businesses – owners/CEO's of large businesses (local or large corporations with local branches), Business people & merchants (e.g., who sell tobacco, alcohol, or other drugs), Representatives from organized labor, Political, appointed and elected officials, Foundations, United Way organizations. And other "community leaders."

Public and other organizations: Public health officials, Directors or staff of health and human service organizations, City/Community planners and development officials, Individuals with business and economic development experience, Welfare and social service agency staff, Housing advocates - administrators of housing programs: homeless shelters, low-income-family housing and senior housing, Education officials and staff - school superintendents, principals and teachers, Public safety officials, Staff from state and area agencies on aging, Law enforcement agencies - Chiefs of police, Local colleges and universities, Coalitions working on health or other issues.

Other providers: Physicians, Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services, Leaders from Catholic Charities and other faith-based service providers, Mental health providers, Oral health providers, Health insurers, Parish and congregational nursing programs, Other health professionals

6

II. Review of a CHNA

- What is a Community Health Needs Assessment (CHNA)..?
 - Systematic collection, assembly, analysis, and dissemination of information about the health of the community.
- A CHNA's role is to....
 - Identify factors that affect the health of a population and determine the availability of resources to adequately address those factors.
- Purpose of a CHNA – Why Conduct One?
 - Determine health-related trends and issues of the community
 - Understand / evaluate health delivery programs in place.
 - Meet Federal requirements – both local hospital and health department
 - Develop Implementation Plan strategies to address unmet health needs (4-6 weeks after Town Hall)

7

CHNA Written Report Documentation to meet IRS 990 CHNA Requirements: Table of Contents

- A description of the community served
- A description of the CHNA process
- The identity of any and all organizations and third parties which collaborated to assist with the CHNA
- A description of how the organization considered the input of persons representing the community (e.g., through meetings, focus groups, interviews, etc.), who those persons are, and their qualifications
- A prioritized description of all of the community needs identified by the CHNA.
- A description of the existing healthcare facilities and other resources within the community available to meet the needs identified through the CHNA

8

Social Determinants of Health

Economic Stability **Education Access and Quality** **Health Care Access and Quality** **Neighborhood and Built Environment** **Social and Community Context**

Social determinants of health are the conditions in the places where people live, learn, work, play, and worship that affect a wide range of health risks and outcomes.

Health equity is when everyone has the opportunity to attain their full health potential, and no one is disadvantaged from achieving this potential because of their social position or other socially determined circumstances.

TASK A: Your Initial Thoughts on SDOH? (Small White Card)

9

IV. Review Current County Health Status: Secondary Data by 10 Tab Categories with a focus on Social Determinants with a Local Norm & State Rankings

Trends: Good Same Poor

Health Indicators - Secondary Research
TAB 1. Demographic Profile
TAB 2. Economic Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospital / Provider Profile
TAB 6. Behavioral / Mental Health Profile
TAB 7. High-Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

10

County Health Rankings Scoring

Robert Wood Johnson Foundation and University of WI Health Institute

Users of the 2024 RWJ report will find representation of county health has changed significantly.

Rather than a numerical ranking, each county in a state is represented by a dot, shaded a certain color and placed on a scale from least healthy to healthiest in the nation. The new visual tool then shows where one county falls on a "continuum" of health nationally, compared to the least healthy and most healthy counties, which are unnamed in the visualization.

County Health Rankings model © 2014 UWPHS

11

IV. Community Health Conversation: Your Perspectives / Suggestions !

Tomorrow:
What is occurring or might occur that would affect the "health of our community"?

Today:

- 1) What are the **Healthcare Strengths** of our community that contribute to health? **(BIG White Card)**
- 2) Are there healthcare services in your community/neighborhood that you feel **need to be improved and/or changed?** **(Small Color Card)**
- 3) *What other Ideas do you have to address Social determinants?* **(Small White Card - A)**

12

Data & Benchmarks Review

Community health assessments typically use both primary and secondary data to characterize the health of the community:

- **Primary data** are collected first-hand through surveys, listening sessions, interviews, and observations.
- **Secondary data** are collected by another entity or for another purpose.
- **Indicators** are secondary data that have been analyzed and can be used to compare rates or trends of priority community health outcomes and determinants.

Data and indicator analyses provide descriptive information on demographic and socioeconomic characteristics; they can be used to monitor progress and determine whether actions have the desired effect. They also characterize important parts of health status and health determinants, such as behavior, social and physical environments, and healthcare use.

Community health assessment indicators should be.

- Methodologically sound (valid, reliable, and collected over time)
- Feasible (available or collectable)
- Meaningful (relevant, actionable, and ideally, linked to evidence-based interventions)
- Important (linked to significant disease burden or disparity in the target community)

Jurisdictions should consider using data and indicators for the smallest geographic locations possible (e.g., county-, census block-, or zip code-level data), to enhance the identification of local assets and gaps.

Local reporting (County specific) sources of community-health level indicators:

CHNA Detail Sources
Quick Facts - Business
Centers for Medicare and Medicaid Services
CMS Hospital Compare
County Health Rankings
Quick Facts - Geography
Kansas Health Matters
Kansas Hospital Association (KHA)
Quick Facts - People
U.S. Department of Agriculture - Food Environment Atlas
U.S. Center for Disease Control and Prevention

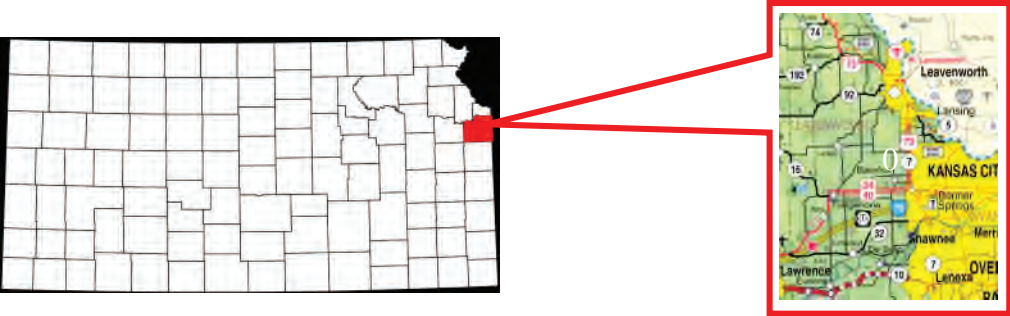
Sources of community-health level indicators:

- [County Health Rankings and Roadmaps](#)
The annual Rankings measure vital health factors, including high school graduation rates, obesity, smoking, unemployment, access to healthy foods, the quality of air and water, income inequality, and teen births in nearly every county in America. They provide a snapshot of how health is influenced by where we live, learn, work and play.
- [Prevention Status Reports \(PSRs\)](#)
The PSRs highlight—for all 50 states and the District of Columbia—the status of public health policies and practices designed to prevent or reduce important public health problems.
- [Behavioral Risk Factor Surveillance System](#)
The world's largest, ongoing telephone health survey system, tracking health conditions and risk behaviors in the United States yearly since 1984. Data is collected monthly in all 50 states, the District of Columbia, Puerto Rico, the US Virgin Islands, and Guam.
- The [Selected Metropolitan/ Micropolitan Area Risk Trends](#) project was an outgrowth of BRFSS from the increasing number of respondents who made it possible to produce prevalence estimates for smaller statistical areas.
- [CDC Wonder](#) Databases using a rich ad-hoc query system for the analysis of public health data. Reports and other query systems are also available.
- [Center for Applied Research and Engagement Systems external icon](#)
Create customized interactive maps from a wide range of economic, demographic, physical and cultural data. Access a suite of analysis tools and maps for specialized topics.
- [Community Commons external icon](#)
Interactive mapping, networking, and learning utility for the broad-based healthy, sustainable, and livable communities' movement.
- [Dartmouth Atlas of Health Care external icon](#)
Documented variations in how medical resources are distributed and used in the United States. Medicare data used to provide information and analysis about national, regional, and local markets, as well as hospitals and their affiliated physicians.
- [Disability and Health Data System](#)
Interactive system that quickly helps translate state-level, disability-specific data into valuable public health information.
- [Heart Disease and Stroke Prevention's Data Trends & Maps](#)
View health indicators related to heart disease and stroke prevention by location or health indicator.
- [National Health Indicators Warehouse external icon](#)
Indicators categorized by topic, geography, and initiative.
- [US Census Bureau external icon](#)
Key source for population, housing, economic, and geographic information.
- [US Food Environment Atlas external icon](#)
Assembled statistics on food environment indicators to stimulate research on the determinants of food choices and diet quality, and to provide a spatial overview of a community's ability to access healthy food and its success in doing so.
- [Centers for Medicare & Medicaid Services Research and Data Clearinghouse external icon](#)
Research, statistics, data, and systems.
- [Environmental Public Health Tracking Network](#)
System of integrated health, exposure, and hazard information and data from a variety of national, state, and city sources.
- [Health Research and Services Administration Data Warehouse external icon](#)
Research, statistics, data, and systems.
- [Healthy People 2030 Leading Health Indicators external icon](#)
Twenty-six leading health indicators are organized under 12 topics.
- [Kids Count external icon](#)
Profiles the status of children on a national and state-by-state basis and ranks states on 10 measures of well-being; includes a [mobile site external icon](#).
- [National Center for Health Statistics](#)
Statistical information to guide actions and policies.
- [Pregnancy Risk Assessment and Monitoring System](#)
State-specific, population-based data on maternal attitudes and experiences before, during, and shortly after pregnancy.
- [Web-based Injury Statistics Query and Reporting System \(WISQARS\)](#)
Interactive database system with customized reports of injury-related data.
- [Youth Risk Behavior Surveillance System](#)
Monitors six types of health-risk behaviors that contribute to the leading causes of death and disability among youth and adults.

II. Methodology

d) Community Profile (A Description of Community Served)

Johnson County (KS) Community Profile



The population of Johnson County was estimated to be 601,230 citizens in 2018 and a population density of 1,270 persons per square mile. Johnson County covers 480 square miles and is in east Kansas.

The major highway transportation access to Johnson County is Interstate 35 and 435 from Kansas City. I-35 runs diagonally through Johnson County from the top right corner to the bottom left corner towards Ottawa.

Johnson County Pubic Airports¹

Name	USGS Topo Map
Cedar Air Park	De Soto
Clear View Farm Airport	Ocheltree
Gardner Municipal Airport	Gardner
Hermon Farm Airport	Gardner
Hillside Airport	Belton
Johnson County Executive Airport	Stilwell
Menorah Medical Center Heliport	Lenexa
New Century Aircenter	Gardner
Overland Park Regional Medical Center Heliport	Lenexa
Shawnee Mission Medical Center Heliport	Lenexa

¹ <https://kansas.hometownlocator.com/features/cultural,class,airport,scfips,20091.cfm>

Schools in Johnson County: Public Schools²

School	Levels		
Apache Elem	Primary	Moonlight Elementary School	Primary
Arbor Creek Elementary	Primary	Morse Elementary	Primary
Belinder Elem	Primary	Nieman Elem	Primary
Bentwood Elem	Primary	Nike Elementary	Primary
Black Bob Elem	Primary	Northview Elem	Primary
Blue River Elementary	Primary	Oak Hill Elementary	Primary
Blue Valley High	High	Oak Park - Carpenter Elementary	Primary
Blue Valley Middle	Middle	Olathe East Dr High	High
Blue Valley North High	High	Olathe North Sr High	High
Blue Valley Northwest High	High	Olathe Northwest High School	High
Blue Valley West High	High	Olathe South Dr High	High
Bluejacket-Flint	Primary	Oregon Trail Middle School	Middle
Brairwood Elem	Primary	Overland Park Elem	Primary
Broken Arrow Elem	Primary	Overland Trail Elementary	Primary
Brookridge Elem	Primary	Overland Trail Middle	Middle
Brougham Elem	Primary	Oxford Middle	Middle
California Trail Middle School	Middle	Pawnee Elem	Primary
Cedar Creek Elem	Primary	Pioneer Ridge Middle School	Middle
Cedar Hills Elementary	Primary	Pioneer Trail Middle School	Middle
Central Elem	Primary	Pleasant Ridge Elem	Primary
Chisholm Trail Middle School	Middle	Pleasant Ridge Middle	Middle
Christa McAuliffe Elem	Primary	Prairie Center Elem	Primary
Clear Creek Elem	Primary	Prairie Creek Elementary	Primary
Clearwater Creek Elementary	Primary	Prairie Elem	Primary
Comanche Elem	Primary	Prairie Ridge Elementary School	Primary
Corinth Elem	Primary	Prairie Star Elementary	Primary
Cottonwood Point Elementary	Primary	Prairie Star Middle	Middle
Countryside Elementary	Primary	Prairie Trail Middle School	Middle
Crestview Elem	Primary	Ravenwood Elementary	Primary
De Soto High School	High	Ray Marsh Elem	Primary
East Antioch Elem	Primary	Regency Place Elementary	Primary
Edgerton Elem	Primary	Rhein Benninghoven Elem	Primary
Fairview Elem	Primary	Ridgeview Elem	Primary
Forest View Elem	Primary	Rising Star Elem	Primary
Frontier Trail Middle School	Middle	Riverview Elementary	Primary
Gardner Edgerton High	High	Roesland Elem	Primary
Gardner Elem	Primary	Rolling Ridge Elem	Primary
Green Springs Elem	Primary	Rosehill Elem	Primary
Harmony Elementary	Primary	Rushton Elem	Primary
Harmony Middle	Middle	Sante Fe Trail Elem	Primary
Havencroft Elem	Primary	Sante Fe Trail Middle School	Middle
Heartland Elementary	Primary	Scarborough Elem	Primary
Heatherstone Elem	Primary	Shawano Elem	Primary
Heritage Elementary	Primary	Shawnee Mission East High	High
Highlands Elem	Primary	Shawnee Mission North High	High
Hocker Grove Middle	Middle	Shawnee Mission Northwest High	High
Horizon Elementary	Primary	Shawnee Mission South High	High
Indian Creek Elem	Primary	Shawnee Mission West High	High
Indian Creek Middle	Middle	Spring Hill Elementary School	Primary
Indian Trail Middle School	Middle	Spring Hill High School	High
Indian Valley Elementary	Primary	Stanley Elementary	Primary
Indian Woods Middle	Middle	Starside Elem	Primary
Insight School of KS at Hilltop Ed Center	High	Stilwell Elementary	Primary
John Diemer Elem	Primary	Sunflower Elem	Primary
Lakewood Elementary	Primary	Sunflower Elementary	Primary
Lakewood Middle	Middle	Sunnside Elementary School	Primary
Leawood Elementary	Primary	Sunrise Point Elementary	Primary
Leawood Middle	Middle	Sunset Ridge Elementary	Primary
Lexington Trails Middle School	Middle	Timber Creek Elementary School	Primary
Liberty View Elementary	Primary	Tomahawk Elem	Primary
Madison Elementary	Primary	Trailridge Middle	Middle
Madison Place Elementary	Primary	Trailwood Elem	Primary
Mahaffie Elem	Primary	Valley Park Elementary	Primary
Manchester Park Elementary	Primary	Walnut Grove Elem	Primary
Meadow Lane Elem	Primary	Washington Elem	Primary
Merriam Park Elementary	Primary	Westridge Middle	Middle
Mill Creek Elem	Primary	Westview Elem	Primary
Mill Creek Middle School	Middle	Westwood View Elem	Primary
Mill Valley High School	High	Wheatridge Middle School	Middle
Mission Trail Elementary	Primary	Woodland Elem	Primary
Mize Elementary	Primary		
Monticello Trails Middle School	Middle		

² <https://kansas.hometownlocator.com/schools/sorted-by-county,n.johnson.cfm>

OMC Primary Service Area - Detail Demographic Profile

ZIP	NAME	ST	County	Population			Households			Per Capita23
				Year 2023	Year 2028	5yr CHG	Year 2023	Year 2028	HH Avg Size23	
66061	Olathe	KS	JOHNSON	67,587	68,883	1.9%	23,957	24,573	2.8	\$43,821
66062	Olathe	KS	JOHNSON	79,669	81,526	2.3%	28,403	29,308	2.8	\$45,287
66030	Gardner	KS	JOHNSON	25,586	26,713	4.4%	8,941	9,431	2.8	\$35,371
66083	Spring Hill	KS	JOHNSON	12,232	12,902	5.5%	4,265	4,527	2.9	\$41,405
66221	Overland Park	KS	JOHNSON	26,046	26,762	2.7%	8,384	8,695	3.1	\$73,883
66213	Overland Park	KS	JOHNSON	33,108	33,479	1.1%	13,713	13,943	2.41	\$59,490
66021	Edgerton	KS	JOHNSON	2,655	2,640	-0.6%	948	951	2.8	\$36,726
66071	Paola	KS	MIAMI	12,867	13,040	1.3%	5,170	5,280	2.5	\$40,596
66064	Osawatomie	KS	MIAMI	6,116	6,211	1.6%	2,301	2,357	2.6	\$27,808
66092	Wellsville	KS	FRANKLIN	4,301	4,312	0.3%	1,623	1,654	2.6	\$37,147
66067	Ottawa	KS	FRANKLIN	16,103	16,054	-0.3%	6,523	6,601	2.4	\$31,665
Totals				286,270	292,522	1.8%	104,228	107,320	2.7	\$43,018

ZIP	NAME	ST	County	Population				Year 2023		Females
				Pop 21+	Pop. 65+	Kids<18	Gen Y	Males	Females	Age 20-35
66061	Olathe	KS	JOHNSON	45,776	8,455	21,079	19,192	33,626	33,961	13,215
66062	Olathe	KS	JOHNSON	54,606	8,395	24,047	22,911	39,730	39,939	18,059
66030	Gardner	KS	JOHNSON	16,983	2,564	8,340	7,564	12,823	12,763	5,879
66083	Spring Hill	KS	JOHNSON	8,805	1,909	3,291	3,254	6,179	6,053	2,698
66221	Overland Park	KS	JOHNSON	17,525	2,753	8,273	7,899	12,969	13,077	4,521
66213	Overland Park	KS	JOHNSON	24,633	4,836	8,079	8,753	16,236	16,872	6,993
66021	Edgerton	KS	JOHNSON	1,940	366	683	740	1,404	1,251	489
66071	Paola	KS	MIAMI	9,618	2,579	3,113	3,183	6,243	6,624	2,225
66064	Osawatomie	KS	MIAMI	4,382	1,110	1,656	1,518	2,994	3,122	1,079
66092	Wellsville	KS	FRANKLIN	3,122	757	1,129	1,107	2,114	2,187	775
66067	Ottawa	KS	FRANKLIN	11,403	2,864	4,423	3,672	7,903	8,200	2,876
Totals				198,793	36,588	84,113	79,793	142,221	144,049	58,809

ZIP	NAME	ST	County	Population 2023				Year 2023		
				White%	Black%	Asian%	Hispan%	Housing Units	% Rentals	Soc Econ Index
66061	Olathe	KS	JOHNSON	71.4%	5.9%	3.4%	16.5%	25,140	26.0%	53
66062	Olathe	KS	JOHNSON	75.5%	5.8%	5.2%	9.8%	29,290	23.6%	61
66030	Gardner	KS	JOHNSON	79.5%	3.6%	1.7%	10.3%	9,324	27.0%	56
66083	Spring Hill	KS	JOHNSON	88.1%	1.7%	0.8%	5.1%	4,489	12.2%	60
66221	Overland Park	KS	JOHNSON	77.0%	2.5%	12.3%	4.1%	8,827	14.2%	73
66213	Overland Park	KS	JOHNSON	74.3%	4.1%	11.9%	6.4%	14,308	40.4%	66
66021	Edgerton	KS	JOHNSON	87.0%	1.2%	0.3%	6.1%	1,002	13.3%	59
66071	Paola	KS	MIAMI	89.9%	1.4%	0.4%	3.3%	5,539	19.0%	58
66064	Osawatomie	KS	MIAMI	88.5%	2.5%	0.4%	4.2%	2,639	26.3%	53
66092	Wellsville	KS	FRANKLIN	91.9%	0.3%	0.4%	2.7%	1,707	16.2%	60
66067	Ottawa	KS	FRANKLIN	87.1%	1.7%	0.4%	5.7%	7,128	27.9%	52
Totals				82.8%	2.8%	3.4%	6.7%	109,393	22.4%	59

Source: ERSA Demographics 2023

III. Community Health Status

[VVV Consultants LLC]

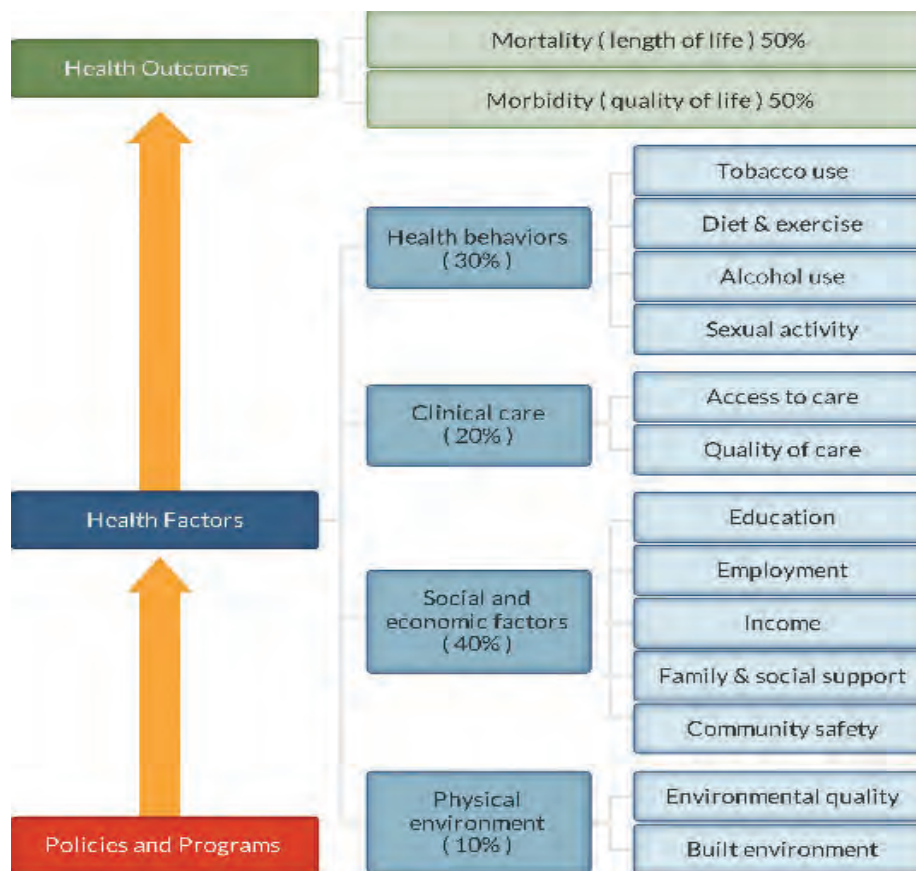
III. Community Health Status

a) Historical Health Statistics- Secondary Research

Health Status Profile

This section of the CHNA reviews published quantitative community health indicators from public health sources and results of community primary research. To produce this profile, VVV Consultants LLC staff analyzed & trended data from multiple sources. This analysis focuses on a set of published health indicators organized by ten areas of focus (10 TABS), results from the 2020 RWJ County Health Rankings and conversations from Town Hall participates. Each table published reflects a Trend column, with GREEN denoting growing/high performance indicators, YELLOW denoting minimal change/average performance indicators and RED denoting declining/low performance indicators.

Note: The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to release annual *County Health Rankings*. As seen below, RWJ’s model uses a number of health factors to rank each county.



County Health Rankings model ©2012 UWPHI

National Research – Year 2023 RWJ Health Rankings:

#	2023 KS Rankings - 105 Counties	Definitions	Johnson Co KS 2024	Johnson Co KS 2021	Trend	Big KS Norm (N=12)
1	Health Outcomes		1	1		49
	Mortality	Length of Life	1	1		36
	Morbidity	Quality of Life	1	1		61
2	Health Factors		1	1		44
	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	1	1		38
	Clinical Care	Access to care / Quality of Care	1	1		24
	Social & Economic Factors	Education, Employment, Income, Family/Social Support, Community Safety	1	1		53
3	Physical Environment	Environmental quality	26	56	+	72
Big KS Norm Counties (12): Butler, Douglas, Ellis, Finney, Johnson, Leavenworth, Reno, Riley, Saline, Sedgwick, Shawnee, and Wyandotte						

<http://www.countyhealthrankings.org>, released 2023

PSA Secondary Research:

When studying community health, it is important to document health data by topical areas for primary service area (PSA). Below is a summary of key findings organized by subject area.

Note: Each Tab has been trended to reflect County trends to NORM.

Health Indicators - Secondary Research
TAB 1. Demographic Profile
TAB 2. Economic Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospital / Provider Profile
TAB 6. Behavioral / Mental Health Profile
TAB 7. High-Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

Tab 1: Demographic Profile

Understanding population and household make-up is vital to start CHNA evaluation.

1	Population Health Indicators	Johnson Co KS 2024	Johnson Co KS 2021	Trend	State of KS	Big KS Norm (N=12)	Source
a	Population estimates, 2020-2022	619,195	602,401	+	2,936,716	167,654	People Quick Facts
b	Persons under 5 years, percent, 2020-2022	5.8%	6.2%		6.0%	5.8%	People Quick Facts
c	Persons 65 years and over, percent, 2020-2022	16.2%	15.0%		17.2%	16.0%	People Quick Facts
d	Female persons, percent, 2020-2022	50.5%	50.9%		49.8%	49.3%	People Quick Facts
e	White alone, percent, 2020-2022	86.1%	86.6%		85.9%	85.4%	People Quick Facts
f	Black or African American alone, percent, 2020-2022	5.3%	4.9%		6.2%	6.8%	People Quick Facts
g	Hispanic or Latino, percent, 2020-2022	8.5%	7.9%		13.0%	15.1%	People Quick Facts
h	Language other than English spoken at home, percent of persons age 5 years+, 2017-2021	11.8%	11.9%		11.8%	13.3%	People Quick Facts
i	Living in same house 1 year ago, percent of persons age 1 year+, 2017-2021	85.9%	84.3%		84.4%	82.0%	People Quick Facts
j	Children in single-parent households, percent, 2017-2021	15.2%	20.7%	-	21.0%	22.0%	County Health Rankings
k	Veterans, 2017-2021	26,649	20,533	+	163,472	8,900	People Quick Facts

Tab 2: Economic Profile

Monetary resources will (at times) drive health “access” and self-care.

2	Economic - Health Indicators	Johnson Co KS 2024	Johnson Co KS 2021	Trend	State of KS	Big KS Norm (N=12)	Source
a	Per capita income in past 12 months (in 2021 dollars), 2017-2021	\$56,364	\$32,281	+	\$38,108	35,797	People Quick Facts
b	Persons in poverty, percent, 2020-2022	5.4%	5.3%		12.00%	13.1%	People Quick Facts
c	Total Housing units, 2022	258,465	248,495		1,292,622	71,645	People Quick Facts
d	Persons per household, 2017-2021	2.5	2.4		2.5	2.5	People Quick Facts
e	Severe housing problems, percent, 2015-2019	10.3%	10.9%		12.5%	14.2%	County Health Rankings
f	Total employer establishments, 2021	18,623	18,150	+	75,057	4190	Business Quick Facts
g	Unemployment, percent, 2021	2.7%	2.9%		3.2%	3.2%	County Health Rankings
h	Food insecurity, percent, 2020	7.2%	10.2%	-	9.7%	10.7%	County Health Rankings
i	Limited access to healthy foods, percent, 2019	2.3%	2.4%		8.4%	9.8%	County Health Rankings
j	Long commute - driving alone, percent, 2017-2021	23.5%	23.4%		21.7%	19.5%	County Health Rankings
k	Community Spending on Food, 2023 *	11.7%	NA		12.7%	12.9%	Kansas Health Matters
l	Community Spending on Transportation, 2023 *	16.7%	NA		18.1%	18.2%	Kansas Health Matters
m	Households With Internet an Subscription (2017-2021) *	95.1%	NA		86.7%	88.1%	Kansas Health Matters
n	Student Loan Spending-to-Income Ration, 2023 *	3.4%	NA		4.6%	4.7%	Kansas Health Matters

*New Social Determinant Data Resources

Tab 3: Educational Profile

Currently, school districts are providing on-site primary health screenings and basic care.

3	Education - Health Indicators	Johnson Co KS 2024	Johnson Co KS 2021	Trend	State of KS	Big KS Norm (N=12)	Source
a	Children eligible for free or reduced price lunch, percent, 2020-2021	21.4%	23.7%		48.0%	44.6%	County Health Rankings
b	High school graduate or higher, percent of persons age 25 years+, 2017-2021	96.5%	95.4%	+	91.0%	91.0%	People Quick Facts
c	Bachelor's degree or higher, percent of persons age 25 years+, 2017-2021	56.7%	49.6%	+	34.7%	34.5%	People Quick Facts

#	2021 School Health Indicators	Olathe **	Gardner	Spring Hill
1	Total # Public School Nurses	66	12	8
2	School Nurse is part of the IEP team	Yes	Yes	Yes
3	School Wellness Plan in place (Active)	Yes	Yes	Yes
4	VISION: # Screened / Referred to Prof / Seen by Professional	18,402/ 1156/ 736	3,000	830/ 48/ 48
5	HEARING: # Screened / Referred to Prof / Seen by Professional	16,155/ 562/ 402	3,000	581/ 10/ 10
6	ORAL HEALTH: # Screened / Referred to Prof / Seen by Professional	2,542	1,500	N/A
7	SCOLIOSIS: # Screened / Referred to Prof / Seen by Professional	N/A	N/A	N/A
8	# of Students served with no identified chronic health concerns	12,737	5,000	2,214
9	School has a suicide prevention program	Yes	Yes	Yes
10	Compliance on required vaccinations (%)	99%	98%	98%

** Note: OMC counts based on 2018-19 data due to variance in typical practice due to COVID that impacted last 2 school years.

Tab 4: Maternal / Infant Profile

Tracking maternal / infant care patterns are vital in understanding the foundation of family health.

4	Maternal / Infant - Health Indicators	Johnson Co KS 2024	Johnson Co KS 2021	Trend	State of KS	Big KS Norm (N=12)	Source
a	Percent of Births Where Prenatal Care began in First Trimester, 2019-2021	87.3%	88.0%		81.3%	81.2%	Kansas Health Matters
b	Percentage of Premature Births, 2019-2021	9.1%	8.9%	-	9.1%	10.0%	Kansas Health Matters
c	Percent of Infants up to 24 months that received full Immunizations, 2017-2018	76.7%	76.7%		69.2%	71.8%	Kansas Health Matters
d	Percent of Births with Low Birth Weight, 2019-2021	6.7%	6.8%		7.3%	7.6%	Kansas Health Matters
e	Percent of all Births Occurring to Teens (15-19), 2019-2021	1.9%	1.9%		6.5%	4.9%	Kansas Health Matters
f	Percent of births Where Mother Smoked During Pregnancy, 2019-2021	1.9%	2.6%	+	10.0%	8.0%	Kansas Health Matters
g	Child Care Centers per 1,000 Children, 2010-2022 *	7.8	NA		7.0	6.8	County Health Rankings

#	Vital Statistics (Rate per 1,000)	Johnson Co. KS	State of KS	CSW KS NORM (20)
a	Total Live Births, 2017	12.2	12.5	11.6
b	Total Live Births, 2018	11.9	12.5	11.6
c	Total Live Births, 2019	11.5	12.1	10.8
d	Total Live Births, 2020	11.2	11.8	10.4
e	Total Live Births, 2021	11.4	11.8	11.1
f	Total Live Births, 2017- 2021 - 5YR (%)	11.7	12.1	11.1

Tab 5: Hospitalization and Provider Profile

Understanding provider access and disease patterns are fundamental in healthcare delivery. Listed below are several vital county statistics.

5	Hospital/Provider - Health Indicators	Johnson Co KS 2024	Johnson Co KS 2021	Trend	State of KS	Big KS Norm (N=12)	Source
a	Primary care physicians (Pop Coverage per) (No extenders incl.) , 2020	809:1	815:1	-	1260:1	1918:1	County Health Rankings
b	Preventable hospital rate per 100,000, 2020 (lower the better)	2,496	3790	-	2708	2,628	County Health Rankings
c	Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)	69%	76%	-	NA	67%	CMS Hospital Compare, Latest Release
d	Patients Who Reported Yes, They Would Definitely Recommend the Hospital	67%	74%	-	NA	63%	CMS Hospital Compare, Latest Release
e	Average (Median) time patients spent in the emergency department, before leaving from the visit (mins)	205	156	-	NA	154	CMS Hospital Compare, Latest Release

Tab 6: Behavioral / Mental Health Profile

Behavioral healthcare provides another important indicator of community health status.

6	Mental - Health Indicators	Johnson Co KS 2024	Johnson Co KS 2021	Trend	State of KS	Big KS Norm (N=12)	Source
a	Adults Ever Diagnosed with Depression, 2021 *	18.0%		-	NA	20.5%	Kansas Health Matters
b	Age-adjusted Suicide Mortality Rate per 100,000 population, 2018-2020	15.2	16.3	-	18.7	18.5	Kansas Health Matters
c	Mental Behavioral Hospital Admission Rates per 100,000, 2018-2020	68.5	68.9	-	75.1	73.4	Kansas Health Matters
d	Average Number of mentally unhealthy days, 2020	4.0	2.9	-	4.4	4.4	County Health Rankings

*New Social Determinant Data Resources

Tab 7a: Risk Indicators & Factors Profile

Knowing community health risk factors and disease patterns can aid in the understanding next steps to improve health.

7a	High-Risk - Health Indicators	Johnson Co KS 2024	Johnson Co KS 2021	Trend	State of KS	Big KS Norm (N=12)	Source
a	Adult obesity, percent, 2020	28.6%	27.1%	-	35.8%	36.9%	County Health Rankings
b	Adult smoking, percent, 2020	11.2%	10.6%	-	17.2%	17.9%	County Health Rankings
c	Excessive drinking, percent, 2020	19.8%	21.3%	+	19.7%	19.0%	County Health Rankings
d	Physical inactivity, percent, 2020	14.7%	17.5%	-	21.4%	23.1%	County Health Rankings
e	Sexually transmitted infections (chlamydia), rate per 100,000 - 2020	351.3	340.8	-	501.8	547.8	County Health Rankings

Tab 7b: Chronic Risk Profile

7b	Chronic - Health Indicators	Johnson Co KS 2024	Johnson Co KS 2021	Trend	State of KS	Big KS Norm (N=12)	Source
a	Adults who Have Taken Medication for High Blood Pressure, 2021, percent **	79.0%	NA		55.2%	78.0%	Kansas Health Matters
b	Congestive Heart Failure Hospital Admission Rate, 2018-2020	20.6	NA		24.1	24.5	Kansas Health Matters
c	Adults with Kidney Disease, percent, 2021 **	2.4%	NA		NA	2.9%	Kansas Health Matters
d	Adults with COPD, percent, 2021 **	4.6%	NA		NA	6.4%	Kansas Health Matters
e	Adults 20+ with Diabetes, percent, 2021 **	6.9%	NA		NA	9.9%	Kansas Health Matters
f	Adults with Cancer, percent, 2021 **	7.0%	NA		NA	6.7%	Kansas Health Matters
g	Adults with Current Asthma, percent, 2021 **	6.9%	NA		NA	10.0%	Kansas Health Matters
h	Adults who Experienced a Stroke, percent, 2021 **	2.3%	NA		NA	2.9%	Kansas Health Matters

*New Social Determinant Data Resources

Tab 8: Uninsured Profile and Community Benefit

Based on state estimations, the number of insured is documented below. Also, the amount of charity care (last three years of free care) from area providers is trended below.

8	Ins Coverage - Health Indicators	Johnson Co KS 2024	Johnson Co KS 2021	Trend	State of KS	Big KS Norm (N=12)	Source
a	Uninsured, percent, 2020	6.0%	7.2%	+	10.3%	10.7%	County Health Rankings
b	Persons With Health Insurance, 2021	93.5%	NA		89.1%	88.6%	Kansas Health Matters
c	Kansas Medical Assistance Programs - Adults per 1,000 (ages 20-64), 2022	43.3	NA		99.4	97.4	Kansas Health Matters

	Charity Care - Olathe Medical Center Round#5	YR 2021	YR 2022	YR 2023
1	Charity Care and Means-Tested Gov Programs	\$10,568,957	\$8,752,006	\$11,802,697
2	Subsidized Health Services	\$2,435,439	\$1,280,561	\$1,397,096
3	Health Professional ED	\$756,633	\$193,816	\$211,904
4	General Community support	\$536,133	\$565,932	\$620,529

Johnson County Dept of Health - Community Contribution	YR 2021	YR 2022	Yr 2023
Core Community Public Health (Admin, Strategic Planning, Disease Containment Admin, DC, Outreach Nurse, PHEP, CH, FHS Admin)	\$4,304,346	\$8,073,056	\$7,721,237
Child Care Inspections	\$544,573	\$559,795	\$630,844
Environmental Services	\$1,589,926	\$1,732,864	\$1,743,131
Home Health / Healthy Start (MCH)	\$506,755	\$582,097	\$538,461
Immunizations / Vaccine \$	\$151,827	\$320,307	\$258,229
Immunizations / Vaccine # (VFC & private)	150,466	273,589	339,215
Vaccine - received from State	120,406	111,477	90,715
Screenings: Blood pressure / STD (includes STI & FP)	\$894,216	\$1,020,640	\$1,120,275

*Reflects only county funding-no grant funded expenses are included in the values above.

Tab 9: Mortality Profile

The leading causes of county deaths from Vital Statistics are listed below.

9	Mortality - Health Indicators	Johnson Co KS 2024	Johnson Co KS 2021	Trend	State of KS	Big KS Norm (N=12)	Source
a	Life Expectancy, 2018 - 2020	81.4	82.1		77.8	78.2	Kansas Health Matters
b	Age-adjusted Cancer Mortality Rate per 100,000 population, 2018-2020 (lower is better)	127.9	144.8		151.4	149.8	Kansas Health Matters
c	Age-adjusted Heart Disease Mortality Rate per 100,000 population, 2018-2020 (lower is better)	124.1	115.7		162.0	152.8	Kansas Health Matters
d	Age-adjusted Chronic Lower Respiratory Disease Mortality Rate per 100,000, 2018-2020 (Lower is better)	28.1	30.3		47.1	46.9	Kansas Health Matters
e	Alcohol-impaired driving deaths, percent, 2016-2020	16.9%	24.4%	-	19.38%	20.5%	County Health Rankings

Causes of Death by County of Residence, KS (Year 2021)	Johnson Co KS	%	Trend	State of KS	%
TOTAL (All Causes)	4,813	100.0%		31,637	100.0%
All Other Causes	1,558	32.4%		9,536	30.1%
Major Cardio Vascular Diseases	1,219	25.3%		8,307	26.3%
Cancer	902	18.7%		5,379	17.0%
Diseases of Heart	868	18.0%		6,260	19.8%
Ischemic Heart Diseases	470	9.8%		3,605	11.4%
Other Heart Diseases	304	6.3%		1,892	6.0%
Cancer of Digestive Organs	243	5.0%		1,443	4.6%
Cerebrovascular Diseases	237	4.9%		1,335	4.2%
Other Accidents & Adverse Effects	228	4.7%		1,565	4.9%
Other Cancers	213	4.4%		1,161	3.7%

Tab 10: Preventive Quality Measures Profile

The following table reflects the future health of the county. This information also is an indicator of community awareness of preventative measures.

10	Preventative - Health Indicators	Johnson Co KS 2024	Johnson Co KS 2021	Trend	State of KS	Big KS Norm (N=12)	Source
.2	a Access to exercise opportunities, percent, 2020 & 2022	96.7%	94.6%	+	79.7%	83.5%	County Health Rankings
	b Mammography annual screening, percent, 2017	49.0%	50.0%		42.0%	44.0%	County Health Rankings
	c Adults who have had a Routine Checkup, %, 2021	75.9%	NA		45.0%	74.0%	Kansas Health Matters
	d Percent Annual Check-Up Visit with Dentist %, 2021	77.0%	NA		NA	64.7%	CDC
	e Percent Annual Check-Up Visit with Eye Doctor	NA	NA		TBD	TBD	TBD
Big 12 KS Counties: Butler, Douglas, Ellis, Finney, Johnson, Leavenworth, Reno, Riley, Saline, Sedgwick, Shawnee, and Wyandotte							

PSA Primary Research:

For each CHNA Round #5 evaluation, a community stakeholder survey has been created and administered to collect current healthcare information for Johnson County, Kansas.

Chart #1 – Johnson County, KS PSA Online Feedback Response (N=448)

OMC PSA - CHNA YR 2024 (N=448)			
For reporting purposes, are you involved in or are you a ...? (Check all that apply)	OMC PSA N=448	Trend	*Round #5 Norms N=3849
Business/Merchant	3.4%		10.7%
Community Board Member	2.8%		9.2%
Case Manager/Discharge Planner	2.1%		0.9%
Clergy	2.4%		1.2%
College/University	3.1%		2.5%
Consumer Advocate	1.5%		2.2%
Dentist/Eye Doctor/Chiropractor	0.0%		0.7%
Elected Official - City/County	1.5%		2.1%
EMS/Emergency	2.1%		2.3%
Farmer/Rancher	0.0%		9.3%
Hospital	27.5%		23.5%
Health Department	0.9%		1.4%
Housing/Builder	0.3%		0.7%
Insurance	0.3%		1.3%
Labor	0.3%		4.0%
Law Enforcement	0.9%		1.0%
Mental Health	3.1%		2.5%
Other Health Professional	23.5%		13.8%
Parent/Caregiver	13.5%		18.8%
Pharmacy/Clinic	3.7%		2.7%
Media (Paper/TV/Radio)	0.0%		0.3%
Senior Care	1.5%		4.4%
Teacher/School Admin	3.4%		6.0%
Veteran	2.1%		2.6%
TOTAL	327		2848
*Norms: KS Counties: Ellis, Pawnee, Russell, Sheridan, Smith, Thomas, Trego, Barton, Norton, Decatur, Harper, Pratt, Nemaha, Miami, Johnson.			

Typical Sample Sizes Research Studies		
Number of Subgroup Analyses	Households	Firms
	Regional	Regional
None / Few (1-2)	200-500	50-200
Average (3-4).	500-1,000	200-1,000
Many (5+)	1,000+	1,000+

Sudman. Applied Sampling. [Academic Press, 1976]. 87. Ibid., 30.

Quality of Healthcare Delivery Community Rating

OMC PSA - CHNA YR 2024 (N=448)			
How would you rate the "Overall Quality" of healthcare delivery in our community?	OMC PSA N=448	Trend	*Round #5 Norms N=3849
Top Box %	23.4%		26.2%
Top 2 Boxes %	66.7%		68.2%
Very Good	23.4%		26.2%
Good	43.3%		42.0%
Average	28.8%		24.7%
Poor	3.8%		5.7%
Very Poor	0.7%		1.3%
Valid N	448		3,835
*Norms: KS Counties: Ellis, Pawnee, Russell, Sheridan, Smith, Thomas, Trego, Barton, Norton, Decatur, Harper, Pratt, Nemaha, Miami, Johnson			

Re-evaluate Past Community Health Needs Assessment Needs

OMC Primary Service Area - CHNA YR 2024 N=448					
Past CHNA Unmet Needs Identified		Ongoing Problem			Pressing
Rank	Ongoing Problem	Votes	%	Trend	Rank
1	Mental Health Services (Access, Provider, Treatment, Aftercare)	206	12.9%		1
2	Affordable Housing	128	8.0%		2
3	Affordable Healthcare Services	114	7.1%		3
4	Drugs / Substance Abuse	105	6.6%		4
5	Obesity (Fitness / Nutrition)	96	6.0%		6
6	Drug / Alcohol Abuse	89	5.6%		8
7	Cost Transparency	77	4.8%		9
8	Transportation	76	4.8%		13
9	Senior Care	70	4.4%		7
10	Medicaid Expansion	69	4.3%		5
11	Homeless	68	4.3%		12
12	Suicide	68	4.3%		11
13	Housing	62	3.9%		15
14	Preventative Health / Wellness	60	3.8%		10
15	Food Insecurity	59	3.7%		16
16	Chronic Disease Management	52	3.3%		14
17	Healthcare Education	46	2.9%		18
18	Violence / Abuse	45	2.8%		20
19	Mobile Health Services	43	2.7%		21
20	Accepting Medicaid	35	2.2%		17
21	Cultural Competency	32	2.0%		19
Totals		1600	100.0%		

Community Health Needs Assessment “Causes of Poor Health”

OMC PSA - CHNA YR 2024 (N=448)			
In your opinion, what are the root causes of "poor health" in our community? Please select top three.	OMC PSA N=448	Trend	*Round #5 Norms N=3849
Chronic Disease Management	10.2%		8.6%
Lack of Health & Wellness	11.0%		11.1%
Lack of Nutrition / Access to Healthy Foods	8.3%		9.9%
Lack of Exercise	10.1%		13.4%
Limited Access to Primary Care	7.8%		5.2%
Limited Access to Specialty Care	5.8%		6.7%
Limited Access to Mental Health	19.8%		15.1%
Family Assistance Programs	4.5%		5.0%
Lack of Health Insurance	12.4%		11.9%
Neglect	5.2%		8.7%
Lack of Transportation	4.9%		4.3%
Total Votes	782		7,280
*Norms: KS Counties: Ellis, Pawnee, Russell, Sheridan, Smith, Thomas, Trego, Barton, Norton, Decatur, Harper, Pratt, Nemaha, Miami, Johnson			

Community Rating of HC Delivery Services (Perceptions)

OMC PSA - CHNA YR 2024 N=448 (+10% Red)	OMC PSA N=448		Trend	Round #5 Norms N=3849	
	Top 2 boxes	Bottom 2 boxes		Top 2 boxes	Bottom 2 boxes
How would our community rate each of the following?					
Ambulance Services	83.7%	2.6%		81.2%	4.2%
Child Care	52.1%	12.7%		37.8%	23.8%
Chiropractors	69.5%	5.7%		74.2%	5.0%
Dentists	83.4%	0.6%		60.6%	18.1%
Emergency Room	66.0%	12.8%		72.3%	8.6%
Eye Doctor/Optomtrist	84.0%	1.6%		73.7%	7.3%
Family Planning Services	55.0%	9.2%		46.9%	15.3%
Home Health	60.4%	8.6%		56.6%	10.3%
Hospice/Palliative	67.5%	8.5%		64.6%	8.0%
Telehealth	68.6%	4.8%		51.9%	12.5%
Inpatient Hospital Services	72.0%	6.4%		74.6%	7.2%
Mental Health Services	23.5%	36.4%		33.4%	30.2%
Nursing Home/Senior Living	46.4%	14.3%		55.4%	14.1%
Outpatient Hospital Services	72.3%	5.8%		73.9%	6.1%
Pharmacy	75.3%	5.9%		84.6%	2.9%
Primary Care	73.8%	7.3%		76.9%	6.7%
Public Health	53.9%	14.5%		62.3%	10.0%
School Health	61.7%	8.4%		59.3%	8.3%
Visiting Specialists	59.2%	12.8%		66.6%	8.6%
*Norms: KS Counties: Ellis, Pawnee, Russell, Sheridan, Smith, Thomas, Trego, Barton, Norton, Decatur, Harper, Pratt, Nemaha, Miami, Johnson					

Community Health Readiness

OMC PSA - CHNA YR 2024 (N=448)		% Bottom 2 Boxes (Lower is better)	
Community Health Readiness is vital. How would you rate each? (% Poor / Very Poor)	OMC PSA N=448	Trend	*Round #5 Norms N=3849
Behavioral/Mental Health	37.7%		32.6%
Emergency Preparedness	6.8%		7.6%
Food and Nutrition Services/Education	15.5%		16.6%
Health Wellness Screenings/Education	12.0%		10.3%
Prenatal/Child Health Programs	7.7%		13.5%
Substance Use/Prevention	26.3%		34.4%
Suicide Prevention	29.5%		36.8%
Violence/Abuse Prevention	28.1%		33.3%
Women's Wellness Programs	15.1%		17.4%
Exercise Facilities / Walking Trails etc.	9.6%		14.1%

Healthcare Delivery "Outside our Community"

Specialties:

OMC PSA - CHNA YR 2024 (N=448)			
In the past 2 years, did you or someone you know receive HC outside of our community?	OMC PSA N=448	Trend	*Round #5 Norms N=3849
Yes	33.1%		70.5%
No	66.9%		29.5%

*Norms: KS Counties: Ellis, Pawnee, Russell, Sheridan, Smith, Thomas, Trego, Barton, Norton, Decatur, Harper, Pratt, Nemaha, Miami, Johnson

SPEC	CTS
EMER	12
PRIM	11
SPEC	7
SURG	5
TRAV	5
ORTH	4

Access to Providers / Staff in our Community

OMC PSA - CHNA YR 2024 (N=448)			
Access to care is vital. Are there enough providers / staff available at the right times to care for you and our community?	OMC PSA N=448	Trend	*Round #5 Norms N=3849
Yes	39.2%		56.5%
No	60.8%		43.5%

What healthcare topics need to be discussed in future Town Hall Meeting

OMC PSA - CHNA YR 2024 (N=448)			
What needs to be discussed further at our CHNA Town Hall meeting? Top 3	OMC PSA N=448	Trend	*Round #5 Norms N=3849
Abuse/Violence	3.0%	Yellow	3.5%
Access to Health Education	4.0%	Yellow	3.0%
Alcohol	2.2%	White	3.8%
Alternative Medicine	3.4%	White	3.4%
Behavioral/Mental Health	10.4%	Red	8.5%
Breastfeeding Friendly Workplace	1.6%	White	1.1%
Cancer	1.8%	White	2.6%
Care Coordination	4.7%	Red	2.8%
Diabetes	1.2%	White	2.6%
Drugs/Substance Abuse	5.4%	Red	6.5%
Family Planning	1.6%	White	1.7%
Health Literacy	3.6%	Yellow	2.8%
Heart Disease	1.4%	White	1.6%
Housing	5.3%	Red	6.1%
Lack of Providers/Qualified Staff	6.3%	Red	5.0%
Lead Exposure	0.1%	White	0.4%
Neglect	1.6%	White	1.7%
Nutrition	4.0%	Yellow	4.0%
Obesity	5.0%	Red	4.9%
Occupational Medicine	0.4%	White	0.6%
Ozone (Air)	0.6%	White	0.4%
Physical Exercise	3.4%	Yellow	4.4%
Poverty	3.9%	Yellow	4.3%
Preventative Health/Wellness	6.6%	Red	4.9%
Sexually Transmitted Diseases	1.2%	White	1.3%
Suicide	4.9%	Red	5.4%
Teen Pregnancy	1.3%	White	1.7%
Telehealth	2.0%	White	2.1%
Tobacco Use	1.6%	White	1.9%
Transportation	3.2%	Yellow	2.4%
Vaccinations	3.1%	Yellow	1.9%
Water Quality	1.2%	White	2.6%
TOTAL Votes	1114		11,174
*Norms: KS Counties: Ellis, Pawnee, Russell, Sheridan, Smith, Thomas, Trego, Barton, Norton, Decatur, Harper, Pratt, Nemaha, Miami, Johnson			

IV. Inventory of Community Health Resources

[VVV Consultants LLC]

Inventory of Health Services 2024- OMC Primary Service Area				
Cat	Healthcare Services Offered in County: Yes / No	Hospital	Health Dept	Other
Clinic	Primary Care	Yes	Yes	Yes
Hosp	Alzheimer Center	Yes		Yes
Hosp	Ambulatory Surgery Centers	Yes		Yes
Hosp	Arthritis Treatment Center			Yes
Hosp	Bariatric / Weight Control Services	Yes		Yes
Hosp	Birthing / LDR / LDRP Room	Yes		
Hosp	Breast Cancer / Screening	Yes	Yes	Yes
Hosp	Burn Care			
Hosp	Cardiac Rehabilitation	Yes		
Hosp	Cardiac Surgery	Yes		
Hosp	Cardiology Services	Yes		
Hosp	Case Management	Yes	Yes	Yes
Hosp	Chaplaincy / Pastoral Care Services	Yes		Yes
Hosp	Chemotherapy	Yes		
Hosp	Colonoscopy	Yes		
Hosp	Crisis Prevention	Yes	Yes	Yes
Hosp	CT Scanner	Yes		Yes
Hosp	Diagnostic Radioisotope Facility	Yes		
Hosp	Diagnostic / Invasive Catheterization	Yes		
Hosp	Electron Beam Computed Tomography (EBCT)			
Hosp	Insurance Enrollment Assistance Services	Yes	Yes	Yes
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)	Yes		
Hosp	Fertility Clinic	Yes		Yes
Hosp	FullField Digital Mammography (FFDM)	Yes		
Hosp	Genetic Testing / Counseling	Yes		Yes
Hosp	Geriatric Services	Yes	Yes	Yes
Hosp	Heart	Yes		Yes
Hosp	Hemodialysis	Yes		Yes
Hosp	HIV / AIDS Services	No	Yes	Yes
Hosp	Image-Guided Radiation Therapy (IGRT)	Yes		
Hosp	Inpatient Acute Care - Hospital Services	Yes		
Hosp	Intensity-Modulated Radiation Therapy (IMRT) 161	Yes		
Hosp	Intensive Care Unit	Yes		
Hosp	Intermediate Care Unit	Yes		
Hosp	Interventional Cardiac Catheterization	Yes		
Hosp	Isolation room	Yes		
Hosp	Kidney	Yes		
Hosp	Liver	Yes		
Hosp	Lung	Yes		
Hosp	MagneticResonance Imaging (MRI)	Yes		Yes
Hosp	Mammograms	Yes		Yes
Hosp	Mobile Health Services	Yes		Yes
Hosp	Multislice Spiral Computed Tomography (<64 slice CT)	Yes		
Hosp	Multislice Spiral Computed Tomography (<64+ slice CT)	Yes		
Hosp	Neonatal	Yes		
Hosp	Neurological services	Yes		Yes
Hosp	Obstetrics / Prenatal	Yes	Yes	Yes
Hosp	Occupational Health Services	Yes		Yes
Hosp	Oncology Services	Yes		
Hosp	Orthopedic Services	Yes		Yes
Hosp	Outpatient Surgery	Yes		Yes
Hosp	Pain Management	Yes		Yes
Hosp	Palliative Care Program	Yes		Yes
Hosp	Pediatric	Yes		
Hosp	Physical Rehabilitation	Yes		Yes
Hosp	Positron Emission Tomography (PET)			
Hosp	Positron Emission Tomography/CT (PET/CT)	Yes		

Inventory of Health Services 2024- OMC Primary Service Area				
Cat	Healthcare Services Offered in County: Yes / No	Hospital	Health Dept	Other
Hosp	Psychiatric Services	Yes	Yes	Yes
Hosp	Radiology, Diagnostic	Yes		Yes
Hosp	Radiology, Therapeutic	Yes		Yes
Hosp	Reproductive Health	Yes	Yes	
Hosp	Robotic Surgery	Yes		
Hosp	Shaped Beam Radiation System 161	Yes		
Hosp	Single Photon Emission Computerized Tomography (SPECT)	Yes		
Hosp	Sleep Center	Yes		
Hosp	Social Work Services	Yes	Yes	Yes
Hosp	Sports Medicine	Yes		Yes
Hosp	Stereotactic Radiosurgery	Yes		
Hosp	Swing Bed Services	Yes		
Hosp	Transplant Services			
Hosp	Trauma Center			
Hosp	Ultrasound	Yes		
Hosp	Women's Health Services	Yes	Yes	Yes
Hosp	Wound Care	Yes		Yes
SR	Adult Day Care Program	Yes		Yes
SR	Assisted Living	Yes		Yes
SR	Home Health Services	Yes	Yes	Yes
SR	Hospice	Yes		Yes
SR	LongTerm Care	Yes		Yes
SR	Nursing Home Services	Yes		Yes
SR	Retirement Housing	Yes		Yes
SR	Skilled Nursing Care	Yes		Yes
ER	Emergency Services	Yes		Yes
ER	Urgent Care Center	Yes		
ER	Ambulance Services			Yes
SERV	Alcoholism-Drug Abuse		Yes	Yes
SERV	Blood Donor Center	Yes		Yes
SERV	Chiropractic Services			Yes
SERV	Complementary Medicine Services	Yes		
SERV	Dental Services			Yes
SERV	Fitness Center			Yes
SERV	Health Education Classes	Yes	Yes	Yes
SERV	Health Fair (Annual)	Yes		Yes
SERV	Health Information Center	Yes	Yes	
SERV	Health Screenings	Yes	Yes	Yes
SERV	Meals on Wheels		Yes	Yes
SERV	Nutrition Programs	Yes	Yes	Yes
SERV	Patient Education Center	Yes		
SERV	Support Groups	Yes		Yes
SERV	Teen Outreach Services		Yes	Yes
SERV	Tobacco Treatment / Cessation Program	Yes	Yes	Yes
SERV	Transportation to Health Facilities			Yes
SERV	Wellness Program	Yes	Yes	

Area Providers Delivering Care in OMC PSA - 2024			
FTE Providers Working in County	PSA Based (Z=12)	Olathe Medical Center **	
		MD / DO	PA / NP
Primary Care:			
Family Practice	55.0	41.0	47.0
Internal Medicine / Geriatrician	13.0	6.0	1.0
Obstetrics/Gynecology	23.0	7.0	0.0
Pediatrics	12.0	6.0	0.0
Internal Med/Peds	0.0	2.0	5.0
Medicine Specialists:			
Allergy / Immunology	1.0	1.0	0.0
Cardiology	17.0	9.0	8.0
Dermatology	12.0	0.0	0.0
Endocrinology	2.0	3.0	2.0
Gastroenterology	8.0	4.0	2.0
Oncology / Radiology	2.0	5.0	2.0
Infectious Diseases	0.0	7.0	0.0
Nephrology	2.0	3.0	0.0
Neurology	3.0	2.0	1.0
Psychiatry	9.0	6.0	0.0
Pulmonary	7.0	6.0	1.0
Rheumatology	5.0	1.0	0.0
Surgery Specialists:			
General Surgery / Colon / Oral	3.0	5.0	3.0
Neurosurgery	2.0	0.0	0.0
Ophthalmology	8.0	4.0	0.0
Orthopedics	7.0	21.0	4.0
Otolaryngology	9.0	3.0	1.0
Plastic / Reconstructive	4.0	4.0	1.0
Thoracic / Cardiovascular / Vasc	0.0	14.0	2.0
Urology	15.0	8.0	4.0
Hospital Based:			
Anesthesia / Pain (CRNA's included)		23.0	42.0
Emergency		13.0	6.0
Radiology		29.0	0.0
Pathology		3.0	0.0
Hospitalist		8.0	0.0
Neonatal / Perinatal	17.0	12.0	18.0
Physical Medicine / Rehab	0.0	1.0	0.0
Occ Medicine	2.0	0.0	0.0
Podiatry	7.0	2.0	0.0
Chiropractor	72.0	0.0	0.0
Optometrist	83.0	0.0	0.0
Dentist	89.0	2.0	0.0
TOTALS	489.0	261.0	150.0

*OMC PSA Zips: 66018, 66021, 66030, 66061, 66062, 66083

**Total credentialed doctors, physician assistants and nurse practitioners with OMC

2024 Visiting Specialists to Olathe Medical Center						
<i>Specialty</i>	<i>Provider / Degree</i>	<i>Group Name</i>	<i>From (City / ST)</i>	<i>SCHEDULE</i>	<i>Days per YR</i>	<i>FTE</i>
Orthopededics	Michael Latteier, MD	Kansas City Bone & Joint	Overland Park, KS	Every Thursday		0
Breast Surgery	Jamie Wagner, DO, MBA Holly Bachman, PA-C Veronica Castellano, PA-C	The University of Kansas Cancer Center	Overland Park, KS	One day per week in clinic, one day per week in surgery		0
Plastic Surgery	Chris Jehle, MD Richard Korentager, MD David Megee, MD	The University of Kansas Health System Plastic Surgery – Medical Pavilion	Kansas City, KS	Twice/week Once/week Every Tuesday		0

**OMC Primary Service Area
Health Services Directory 2024**

Healthcare providers (Alphabetical Order) within Olathe Medical Center's primary service area zip codes: DeSoto (66018), Edgerton (66021), Gardner (66030), Olathe (66061 and 66062), and Spring Hill (66083).

BEHAVIORAL HEALTH RESOURCES

• **MENTAL HEALTH SERVICES**

Allies Therapeutic Services

Stephanie Baker
Kimberly Divine
Val Merriman
Andrea Reeve
21901 Victory Rd.
Spring Hill, KS 66083
913-357-5381
www.alliestherapy.com

Archway Psychotherapy

Mary Archer
Katherine Cation
Sara Cruse
Rachel Donoho
Tiffany Gantz
Caty Hernandez
Keeley Marrow
Caitlin McGee
Grace Moore
Abby Woods
25055 W. Valley Pkwy., Suite 102
Olathe, KS 66061
913-494-8550
www.archwaypsychotherapy.com

Attuned Family & Child Therapy

Julie Lane
110 S. Cherry St.
Olathe, KS 66061
913-645-9126
www.attunedfamilychild.com

Bloom Psychotherapy

Erin Meador
13839 S. Mur-Len Rd., Suite H
Olathe, KS 66062
913-274-9920
bloompsychotherapy.clientsecure.me

Briscoe-Cooper Counseling

Amanda Briscoe
Stacey Cooper
110 S. Cherry St.
Olathe, KS 66061
816-217-1101
www.briscoecoopercounseling.com

Cadence Counseling

Elizabeth McWhorter
16500 Indian Creek Pkwy.
Olathe, KS 66062
913-815-0606
www.cadencecounseling.com/elizabethmcwhorter/Welcome

A Conscious Peace LLC

Lisa Cannady

22450 S. Harrison St.
Spring Hill, KS 66083
913-353-9020
www.aconsciouspeace.com

Cottonwood Springs

13351 S. Arapaho Dr.
Olathe, KS 66062
913-353-3000
www.cottonwoodsprings.com

Family Counseling of Greater Kansas City

Gary Armour
Sarah Armour
405 Clairborne, Suite 1
Olathe, KS 66062
913-609-1345
www.familycounselingkc.com

Gateway of Hope

801 N. Mur-Len Rd., Suite 111
Olathe, KS 66062
913-393-4283
www.qwhope.org

Grow Counseling

Samantha Thomas
110 S. Cherry St., Suite 200
Olathe, KS 66061
816-287-0633
www.sthomasounseling.com

Health Partnership Clinic

Thao Le
Christina Menager
Ming Strother
Jennifer Truman
Christopher Woodward
407 S. Clairborne Rd., Suite 104
Olathe, KS 66062
913-730-3664
www.hpcks.org/our-services/behavioral-health

Humble Hearts Counseling Services

Brittany Campbell
Allison Daggett
Chastity Nichols
Jimmie Smiley
Megan Wilson
601 N. Mur-Len Rd., Suite 3
Olathe, KS 66062
913-214-2022
www.humbleheartscounseling.com

Johnson County Mental Health Center

1125 W. Spruce St.
Olathe, KS 66061
913-826-4200
www.jocogov.org/contact-us/all-locations/olathe-mental-health-office

Kansas City Mental Health Associates

513 N. Mur-Len Rd.
Olathe, KS 66062
913-648-2512

Kids TLC

480 S. Rogers Rd.
Olathe, KS 66062
913-764-2887
www.kidstlc.org

KVC Behavioral Healthcare

21344 W. 153rd St.
Olathe, KS 66061
913-499-8100
www.kansas.kvc.org/services/outpatient-services

Lakemary Center

15145 S. Keeler St.
Olathe, KS 66062
913-557-4000
www.lakemary.org

Lifeline Counseling Center

Juanita Bartel
Ginger Brown
Lyle Gibbens
Phil Hause
Gail Snowbarger
Laura Stallbaumer
Jason Stary
Adriene Tietz
Denise Weller
Marcie Wheatley
405 S. Clairborne Rd., Suite 1
Olathe, KS 66062
913-764-5463
www.lifelinecounselingcenter.org

Mindgarten Counseling

Kim Moss
110 S. Cherry St., Suite 300
Olathe, KS 66061
913-283-4866
www.mindgartenkc.com

Pathway to Hope

Sharon Lawrenz
520 S. Harrison, Suite206
Olathe, KS 66061
913-397-8552
www.pathwaytohope.org

Preferred Family Healthcare

1009 Old 56 Highway
Olathe, KS 66061
913-764-7555
www.pfh.org

Professional Association

Everette DeHaven
John DeHaven
Leif E. Leaf
W.A. "Mike" Moffitt
Kelsey Moffitt-Carney
Jacqueline Pfeifer
Annalise Tinker
101 E. Cedar St.

Olathe, KS 66061

913-393-3828
www.professionalassociationphd.com

Renew Counseling Center

Katelyn Frits
Anna Dietz-Henk
Mackenzie Lujin
Cheri L. McHenry
Maria Moylan
Devin Nickell
Nicole Schafer
Diane Sinclair-Smith
Jami Soukup
11695 S. Black Bob Rd.
Olathe, KS 66062
913-768-6606
www.anxietycenterkc.com

Soothing Hearts Counseling Services, LLC

Tracy Bennett
115 S. Sycamore
Gardner, KS 66030
913-938-6369
www.soothingheartscounselingservices.com

Summit Counseling Services

Dennis Smith
815 S. Clairborne Rd., Suite 250
Olathe, KS 66062
913-530-4736
www.dsmithlcpc.com

The Counseling Collaborative

Kelsey Foss
Caitlin Gable
Madison Graham
Grace Scott
Carlyn Timp
Donna Washington
Tara Westerhouse
100 E. Park St., Suite 2
Olathe, KS 66061
913-839-3377
www.thecounselingco.com

ViewPoint Mental Health Counseling

Tana Arnold
13651 S. Mur-Len Rd.
Olathe, KS 66062
913-214-1083
www.vpmentalhealth.com

Landon Frye

14201 S. Mur-Len Rd.
Olathe, KS 66062
913-335-0635
www.attachmentcounselor.com/landenfrye-ma-lpc-copy

Melissa Frye

2020 E. Sheridan
Olathe, KS 66062
913-634-2348
www.attachmentcounselor.com/melissa-frye

Todd Frye

14180 S. Mur-Len Rd.
Olathe, KS 66062

913-626-1387
www.attachmentcounselor.com/todd-frye

Gerald Gentry
302 E. Park St.
Olathe, KS 66061
816-374-3838

Taylor Johnson
14201 S. Mur-Len Rd., Suite 200D
Olathe, KS 66062
913-302-0899

Natasha Klutts
1715 E. Cedar St., Suite 112
Olathe, KS 66062
210-325-9823
www.natashaklutts.com

Lindsey Largen
201 E. Loula St.
Olathe, KS 66061
785-524-2005
www.lindseylargen.com

Jolena Mauldin
801 N. Mur-Len Rd., Suite 101
Olathe, KS 66062
713-710-9382

Nicole Palmer
14131 S. Mur-Len Rd.
Olathe, KS 66062
913-521-8975
www.nicolepalmercounseling.com

Daniel Rincones
14201 S. Mur-Len Rd., Suite 201
Olathe, KS 66062
913-732-3404
www.attachmentcounselor.com/daniel-rincones-ma-lpc

Todd Schemmel
1707 E. Cedar St., Suite 120
Olathe, KS 66062
913-206-8236

Jennifer Sweeton
513 N. Mur-Len Rd.
Olathe, KS 66062
913-648-2512
www.jennifersweeton.com

James Waddle
115 S. Sycamore St.
Gardner, KS 66030
913-208-6972

Michael Ward
110 N. Cherry St., Suite 235
Olathe, KS 66061
913-940-2051
www.mikewardmft.com

Leanne Ware
1715 E. Cedar St., Suite 111 and 112
Olathe, KS 66062
913-908-3306

www.leannewarephd.com

Laura Weaver
501 N. Mur-Len Rd., Suite 6
Olathe, KS 66062
913-732-3133
www.attachmentcounselor.com/laura-weaver

Jeffrey Wilson
527 N. Mur-Len Rd., Suite A
Olathe, KS 66062
913-839-3555
www.jeffreywilson.com

- **SUICIDE PREVENTION RESOURCES**

Suicide Prevention Lifeline
988
www.suicidepreventionlifeline.org

Kansas Suicide Prevention Resource Center
785-841-2345
www.kansasuicideprevention.org

- **ALCOHOL AND DRUG TREATMENT RESOURCES**

Alcohol and Drug Abuse Helpline - Kansas
1-866-645-8216
www.usa.gov/substance-abuse

Apple Core
226 S. Kansas Ave.
Olathe, KS 66061
913-706-4132
www.1applecore.com

Choices Alcohol and Drug Assessments, Education, and Counseling
401 S. Clairborne Rd., Suite 201
Olathe, KS 66062
913-390-0100
www.choiceskc.com

Johnson Count Mental Health Center- Detox Unit
913-826-4100
www.jocogov.org/departments/mental-health/our-services/substance-use/adult-detox

Preferred Family Healthcare
1009 Old 56 Highway
Olathe, KS 66061
913-764-7555
www.pfh.org

COMMUNITY RESOURCES

- **ADULT PROTECTION RESOURCES**

Kansas Adult Abuse Hotline
1-800-922-5330
www.dcf.ks.gov/services/PPS/Pages/APS/AdultProtectiveServices.aspx

- **BETTER BUSINESS BUREAU**

Better Business Bureau – Midwest Plains
816-421-7800
www.bbb.com

- **DEPARTMENT OF HEALTH**

Johnson County Department of Health and Environment
11875 S. Sunset Dr., Suite 300
Olathe, KS 66061
913 826-1200
www.jocogov.org/dept/health-and-environment/home

- **DOMESTIC AND FAMILY VIOLENCE RESOURCES**

Kansas Crisis Hotline (Domestic Violence and Sexual Assault)
1-888-363-2287
www.kcsdv.org

National Domestic Violence Hotline
1-800-799-7233
www.thehotline.org

Safehome (Shelter and Support)
913-262-2868
www.safehome-ks.org

Metropolitan Organization to Counter Sexual Assault
913-642-0233
www.mocsa.org

- **DISABILITY RESOURCES**

Americans with Disabilities Act
1-800-514-0301
www.ada.gov

Kansas Commission on Disability Concerns
800-295-5232
www.kcdcinfo.ks.gov

- **ENVIRONMENTAL RESOURCES**

Environmental Protection Agency
800-233-0425
www.epa.gov

**Kansas Department of Health and Environment-
Northeast District Office**
785-842-4600
www.kdheks.gov

- **FOOD ASSISTANCE PROGRAMS**

Olathe Catholic Charities (Food Pantry)
333 E. Poplar
Olathe, KS 66061
913-782-4077
www.catholiccharitiesks.org/locations/olathe

Center of Grace (Community Meal)
520 S. Harrison
Olathe, KS 66061

913-764-1353
www.centerofgrace.center/ministries/community-dinners

First Christian Church of Olathe (Food Pantry)
200 E. Loula St.
Olathe, KS 66061
913-764-3555
www.firstchristianolathe.org/food-pantry

Hope Chapel Church (Food Pantry)
12480 S. Black Bob Rd.
Olathe, KS 66062
913- 829-0712
www.openarmskc.org/food

New Hope Food Pantry
13310 S. Black Bob Rd.
Olathe, KS 66062
913- 782-0955
www.nhfp.weebly.com

Redemption Church (Food Pantry)
515 S. Ridgeview Rd.
Olathe, KS 66061
913- 712-8520
www.redemptionchurchkc.com/mobile-food-pantry

Salvation Army (Food Pantry)
420 E. Santa Fe
Olathe, KS 66061
913- 782-3640
www.centralusa.salvationarmy.org/olathe

College Church of the Nazarene (Food Pantry)
2020 E. Sheridan St.
Olathe, KS 66062
www.collegechurch.com/need-help

Starfish Project (Food Pantry)
134B S. Clairborne Rd
Olathe, KS 66062
913-839-8567
www.starfishproject21.org

YMCA (Food Pantry)
21400 W. 153rd St.
Olathe, KS 66061
913- 393-9622
www.kansascityymca.org/locations/olathe

Edgerton United Methodist Food Pantry
300 E. 4th St.
Edgerton, KS 66021
913-882-6735
www.edgertonumc.org/mission-ministry

Johnson County Aging and Human Services (Food Pantry)
510 W Main St. Suite D
Gardner, KS 66030
913-715-6653
www.jocogov.org/department/aging-and-human-services/outreach-services/food-pantries

The De Soto Ks Food Pantry
32905 W. 84th St.
De Soto, KS 66018
www.desotoksfoodpantry.wordpress.com

The Hope Market (Food Pantry)

233 E. Main St.
Gardner, KS 66030
801-358-0656
www.thehopemarket.org

Johnson County WIC Program- Olathe

11875 S. Sunset Dr Suite 300
Olathe, KS 66061
913-477-8330
www.wicfeedsks.kees.ks.gov

- **FOOD AND DRUG RESOURCES**

US Food and Drug Administration

1-888-463-6332
www.fda.gov

- **HOMELESS SHELTERS**

Catholic Charities of NE Kansas - Olathe

333 E. Poplar St.
Olathe, KS 66061
913-782-4077
www.catholiccharitiesks.org

Salvation Army – Olathe

420 E. Sante Fe
Olathe, KS 66061
913-782-3640
www.centralusa.salvationarmy.org/olathe/

- **LEGAL SERVICES**

Kansas Attorney General

785-296-2215
www.ag.ks.gov

Kansas Legal Services

785-233-2068
www.kansaslegalservices.org

Kansas Elder Law Hotline

1-888-353-5337

- **ROAD CONDITIONS**

Kansas Rd. Conditions

511
www.kandrive.org

- **WELFARE FRAUD HOTLINE**

Welfare Fraud Hotline

1-800-432-3913
www.dcf.ks.gov/Agency/GC/Pages/Fraud/Fraud-Investigation-Unit.aspx

- **OTHER RESOURCES**

United Way

211
www.211kansas.myresourcedirectory.com

Kansas Tobacco Use Quitline

800-784-8669
www.quitnow.net/kansas

Americans with Disabilities Act Information Hotline

800-514-0301
www.ada.gov

SENIOR SERVICES

- **SENIOR RESOURCES**

Alzheimer's Association

1-800-272-3900
www.alz.org

American Association of Retired Persons (AARP)

877-687-2277
www.local.aarp.org/olathe-ks/?intcmp=CSN-LOCAL-NAV-HOME

Eldercare Locator

1-800-677-1116
www.eldercare.acl.gov

Johnson County Aging and Human Services

11811 S. Sunset Dr. Suite 1300
Olathe, KS 66061
913-715-8800
www.jocogov.org/department/aging-and-human-services

Kansas Advocates for Better Care, Inc.

800-525-1782
www.kabc.org

Kansas Aging and Disability Resource Center (ADRC)

855-200-2372
www.kdads.ks.gov/kdads-commissions/aging-and-disability-resource-centers

Kansas Home Health Abuse Hotline

1-800-842-0078
www.kdads.ks.gov/hotlines

Medicare

www.medicare.gov

Senior Health Insurance Counseling of Kansas (SHICK)

1-800-860-5260
www.kdads.ks.gov/commissions/commission-on-aging/medicare-programs/shickk

Social Security Administration

15375 W 95th St
Lenexa, KS 66219
1-800-772-1213
www.ssa.gov

- **ASSISTED LIVING/NURSING HOMES**

Aberdeen Village

17500 W. 119th St.
Olathe, KS 6606
913-251-9479

www.aberdeenvillage.com

Anthology of Olathe

101 W. 151st St.
Olathe, KS 66061
913-600-2772
www.anthologyseniorliving.com/senior-living/ks/olathe/west-151st-St

Heritage Avonlea of Olathe

625 N. Lincoln St.
Olathe, KS 66061
913-829-6020
www.heritageavonlea.com

Azria Health Olathe

201 E. Flaming Rd.
Olathe, KS 66061
913-829-2273
www.azriahealth.com/locations/azria-health-olathe

Benton House

15700 W 151st St
Olathe, KS 66062
913-349-7300
www.bentonhouse.com/senior-living-olathe-ks

Bloom Living

14001 W. 133rd St.
Olathe, KS 66062
913-738-4335
www.bloomlivingusa.com

Cedar Lake Village

15325 S. Lone Elm Rd.
Olathe, KS 66061
913-780-9916
www.cedarlakevillagekc.org

Connect 55+

13350 S. Greenwood St.
Olathe, KS 66062
913-285-5671
www.connect55.com/communities/olathe

Colonial Oaks Senior Living

22550 S. Franklin
Spring Hill, KS 66083
913-686-3170
www.colonialoaks.com/locations/springhill

Evergreen Community

11875 S. Sunset Dr., Suite 100
Olathe, KS 66062
913-477-8227
www.jocogov.org/evergreen-community

Good Samaritan Center

20705 W. 151st St.
Olathe, KS 66061
913-395-2964
www.good-sam.com/locations/olathe

Hillside Village of DeSoto

33600 W. 85th St.
De Soto, KS 66018
913-583-1266
www.hillsidedesoto.com

Homestead Assisted Living of Olathe

751 N. Somerset Terrace
Olathe, KS 66061
913-297-2447
www.midwest-health.com/olathe

Medicalodges of Gardner

223 Bedford St.
Gardner, KS 66030
913-856-6520

Santa Marta

13800 W. 116th St.
Olathe, KS 66062
913-828-4180
www.santamartaretirement.com

The Health Care Resort of Olathe

21250 W. 151st St.
Olathe, KS 66061
913-390-0444
www.thehealthcareresortolathe.com

Spring Hill Care and Rehabilitation Center

251 E. Wilson St.
Spring Hill, KS 66083
913-592-3100
www.missionhealthcommunities.com/spring-hill-care-and-rehab

Valley Springs Senior Apartments

31605 W. 83rd Circle
De Soto, KS 66018
913-858-9998

Villa St. Francis

1660 W. 126th St.
Olathe, KS 66062
913-829-5201
www.villasf.org

Vintage Park of Gardner

869 Juniper Terrace
Gardner, KS 66030
913-856-7643
www.vintageparkassistedliving.com/locations/gardner

HEALTHCARE

• **HOSPITAL SERVICES**

Olathe Medical Center

20333 W. 151st St,
Olathe, KS 66061
913-791-4200
www.olathehealth.org

• **HOME HEALTH HOSPICE**

A Friend in Need Home Care

1715 E Cedar St. Sute 101
Olathe, KS 66062
913-289-8849
www.afriendinneedhomecare.com

BrightStar Care

25501 W Valley Parkway, Suite 150
Olathe, KS 66061
913-382-2145
www.brightstarcare.com

Care at Home

15954 S Mur-Len Rd. Suite 321
Olathe, KS 66062
913-717-7833
www.careathom.com

Caring Senior Service

100 E Park St, Suite 207
Olathe, KS 66061
913-55-8923
www.caring seniorservice.com/kansas-city

Evergreen Hospice Care

11875 Sunset Dr. Suite 200
Olathe, KS 66061
913-477-8248
www.evergreenhospiceks.org

Good Shepherd Hospice

1317 S. Fountain Dr.
Olathe, KS 66061
913-322-3297
www.goodshepherdhospice.com

Heaven Sent Home Care

13914 S. Kaw St.
Olathe, KS 66062
913-390-8758

Madison Home Health

2011 E Crossroads Ln., Suite301
Olathe, KS 66062
913-544-7764
www.madisonhealthkc.com

Olathe Health Hospice Care

20920 W. 151st St., Suite201
Olathe, KS 66061
913-324-8515
www.olathehealth.org/services-and-specialties/hospice-care/

Olathe Health Hospice House

15310 S. Marion St.
Olathe, KS 66061
913-324-8588
www.olathehealth.org/locations/hospice-house

- **CHIROPRACTORS**

Advanced Sports and Family Chiropractic and Acupuncture

Aleesa Harris
Drew Woodle
Kolt Newell
10454 S. Ridgeview Rd
Olathe, KS 66061
913-689-233
www.asfca.com

Advanced Healthcare & Sports Injury

Kirk J Iodice

801 N. Mur Len Rd., Suite 103
Olathe, KS 66062
913-764-2271
www.kchealthandsport.com

Arbor Creek Chiropractic

Tim Bakta
401 S. Clairborne Rd., Suite202
Olathe, KS 66062
913-397-6900
www.drjimdc.com

Beck Chiropractic and Acupuncture

Aaron Beck
969 E Lincoln Ln.
Gardner, KS 66030
913-605-1223
www.beck-chiro.com

Brown Chiropractic Clinic for Nutrition

Richard Brown
405 S. Clairborne Rd. Suite 6
Olathe, KS 66062
913-829-4909

Chiropractic Lifestyle Center

Cory Koch
2139 E. 151st St.
Olathe, KS 66062
913-768-0000
www.justadjustme.com

Complete Care Chiropractic

Devin Morton
784 N. Ridgeview Rd.
Olathe, KS 66061
913-396-9729
www.completecare-kc.com

Cook Family Chiropractic

Brian Cook
204 E Main St. Suite A
Gardner, KS 66030
913-856-0200
www.cookfamilychiropractic.com

Decker Chiropractic

George Decker
Ron Sweeney
13025 S. Mur-Len Rd., Suite100
Olathe, KS 66062
913-829-5111
www.deckerchiropractic.com

Fulk Chiropractic

Anthony Liberuote
Brenda L. Beaty
W. Chris Beaty
Erin Butt
Charles Fulk
Corey Fulk
Sandra Liperuote
Cody McNulty
Ron Muirhead
Jeff Spoonemore
2110 E Santa Fe St.
Olathe, KS 66062
www.fulkchiropractic.com

Hedman Chiropractic and Acupuncture

1815 E. Santa Fed St
Gardner, KS 66030
913-884-2057

Hilger Chiropractic Clinic

Kevin Hilger
1853 S. Ridgeview Rd.
Olathe, KS 66062
913-829-1313

Jeurink Family Chiropractic and Wellness Center

Tobi Jeurink
325 E. Main St., Suite C
Gardner, KS 66030
913-856-4595
www.drtoebi.com

KC Chiropractic Health Center

Kyle Koerner
Nick Rodriguez
1011 E. 151 St.
Olathe, KS 66062
913-325-0720
www.kcchiropractichealth.com

Key Dynamics Chiropractic

Amanda Buchanan
153 W. 151st St., Suite150
Olathe, KS 66061
913-930-9355
www.keydynamicschiropractic.com

Lane Chiropractic

Brian Lane
407 S. Clairborne Rd., Suite201
Olathe, KS 66062
913-764-7722

Life Chiropractic and Wellness Center

Fred Clarke
Jeremiah Clarke
13849 S. Mur-Len Rd. E
Olathe, KS 66062
913-764-7575
www.lifechiropractic-olathe.com

Wilson Chiropractic

Jeff Wilson
122 E. Park St.
Gardner, KS 66030
913-856-7067
www.jeffwilsonchiro.com

Miley Chiropractic

Kim Miley
13095 S. Mur-Len Rd., Suite170
Olathe, KS 66062
913-393-2611
www.mileychiro.com

Miller Chiropractic Health Center

Dennis Miller
13470 S. Arapaho Dr., Suite150
Olathe, KS 66062
913-782-7260
www.millerchiropractichealth.com

Mills Chiropractic and Wellness Center

Jere Mills
13795 S. Mur-Len Rd., Suite203A
Olathe, KS 66062
913-764-5900
www.millswellness.com

Naturally Chiropractic

Aaron Wolfswinkel
11124 S. Lone Elm Rd.
Olathe, KS 66061
913-381-2525
www.naturallychiropractic.org/dr-aaron-wolfswinkel

Nexus Chiropractic and Wellness

Janine Hauser
110 N. Cherry St., Suite 110
Olathe, KS 66061
913-712-8581
www.nexuchirokc.com

Olathe Chiropractic

Joseph Anderson
Jeremy Landry
16077 S. Bradley Dr.
Olathe, KS 66062
913-839-8643
www.olathechiropracticclinic.com

Psalm 30:2 Chiropractic

Brandon Van Anne
105 S. Sycamore
Gardner, KS 66030
620-794-5466
www.psalms30-2chiropractic.com

Performance Chiropractic

Brett Dworkis
708 S. Rogers Rd., Suite A
Olathe, KS 66062
913-782-5000
www.myperformancechiropractic.com

Pro C.A.R.E.

Molly Scott
Tobi Scott
15211 S. Black Bob Rd.
Olathe, KS 66062
913-393-1303
www.procarekc.com

Ridgeview Chiropractic

Craig Koshlap
17775 W. 106th St., Suite 105
Olathe, KS 66061
913-890-7370
www.ridgeviewchiropractic.com

Rockers Chiropractic

Troy Rockers
501 N. Mur-Len Rd., Suite A
Olathe, KS 66062
913-254-9495
www.rockerschiropractic.com

Performance Chiropractic

Brett Dworkis

708 S. Rogers Rd Suite A
Olathe, KS 66062
913-782-5000
www.myperformancechiropractic.com

Sozo Chiropractic

Alyssa O'Connor
Katie Manning
22386 S. Harrison St
Spring Hill, KS 66083
913-592-0010
www.sozochiroks.com

Spring Hill Chiropractic

Daniel Harding
22450 S. Harrison St., Suite101
Spring Hill, KS 66083
913-592-3541
www.chiropractorspringhill.com

Trajectory Spine and Strength

Brandon Reed
19915 W 161st St
Olathe KS, 66062
913-353-6143
www.trajectoryspineandstrength.com

Vitality Chiropractic and Family Wellness

Stacy Jiménez
18122 W. 119th St.
Olathe, KS 66061
913-730-1800
www.vitalitychirokc.com

Well Balanced Family Chiropractic

Madison Gilbert
511 N. Mur Len Rd. Suite B
Olathe, KS 66062
913-333-0618
www.wellbalancedkc.com

Williams Chiropractic Clinic

Jimmie Williams III
14101 S. Mur-Len Rd.
Olathe, KS 66062
913-764-9077
www.docwilliamskc.com

Wilson Chiropractic

Jeff Wilson
122 E. Park St.
Gardner, KS 66030
913-856-7067
www.jeffwilsonchiro.com

Woodroof Chiropractic and Acupuncture

Ike Woodroof
1463 E 151 St
Olathe, KS 66062
913-735-6351
www.woodroofchiro.com

Unruh Chiropractic Wellness

Ryan Unruh
1815 S Ridgeview Rd
Olathe, KS 66062
www.unruhchiropractic.com

Winters Chiropractic

Todd Winters
802 E. Main St.
Gardner, KS 66030
913-856-8135
www.doctodd.com

Darrin Larremore

320 E Nelson St
Edgerton, KS 66021
913-944-7544

Don Reith

33255 Lexington Avenue
De Soto, KS 66018
913-583-3700
www.desotokschiro.com

• DENTISTS

Appletree Cosmetic and Family Dentistry

Philip Farruggia
517 N. Mur-Len Rd.
Olathe, KS 66062
913-780-4084
www.appletreefamilydental.com

Arbor Creek Dental

Theo Daniels
Jason Knag
15990 S. Bradley Dr., Suite102
Olathe, KS 66062
913-390-5300
www.arborcreekdental.com

Baldwin Periodontics and Implant Dentistry

Elizabeth Baldwin
16093 W 135th St. Suite B
Olathe, KS 66062
913-213-5641
www.baldwinperio.com

Bucher Family Dentistry

Bill Bucher
Ryan Bucher
Jessica Withhart
975 N. Mur-Len Rd., Suite B
Olathe, KS 66062
913-764-5114
www.bucherdental.com

Cedar Place Dental

Juliana Ervin
Nickie Perry
304 S. Clairborne Rd., Suite100
Olathe, KS 66062
913-764-6367
www.cedarplacedental.com

Celebrate Dental and Braces

Trent Finley
Jeff Jepperson
Matthew Russell
1828 E. Santa Fe St
Olathe, KS 66062
www.celebratedental.com/locations/olathe-kansas/

Dental Care

David Ewing
Navkiran Warya
1717 S Mur-Len Rd
Olathe, KS 66062
913-372-2834
www.dentalcareolathe.com

DeSoto Dental Center

Charles Klestinske
32980 W. 83rd St.
De Soto, KS 66018
913-583-3233

E-Care Dentistry

Mark Juarez
Owen Lonergan
Patrick Lucaci
15010 S. Black Bob Rd.
Olathe, KS 66062
913-764-1018
www.ecaredentistry.com

Esthetic Enhancement

Steven Lieurance
Anthony Marengo, Jr.
James Perll
Jacob Sylvester
16103 W. 135th St.
Olathe, KS 66062
913-829-9222
www.marengodds.com

Fales Pediatric Dentistry

John Fales
13496 S. Arapaho Dr.
Olathe, KS 66062
913-782-2207
www.kidzdentist.com

Family Dental Care

Douglas Lerner
325 E. Main St.
Gardner, KS 66030
913-856-8721
www.gardnerfamilydentalcare.com

Family Dental Care of Olathe

Swetha Nagaraju
2001 E. Santa Fe St.
Olathe, KS 66062
913-289-5067
www.familydentalcareofolathe.com

Five Point Family Dentistry

David Vasquez
10408 S. Ridgeview Rd.
Olathe, KS 66061
913-390-3555
www.fivepoint.dental

Gardner Dentists

Jason Haworth
Greg Markway
115 N Moonlight Rd
Gardner, KS 66030
913-856-7123
www.gardnerdentists.com

Great Plains Oral and Maxillofacial Surgery

Dan Nielson
965 N Mur-Len Rd
Olathe, KS 66062
913-780-3100
www.gpoms.com

Health Partnership Clinic

Christina Cook
Nader Rastgoftar
407 S. Clairborne Rd., Suite104
Olathe, KS 66062
913-648-2266
www.hpcks.org/our-services/dental

Howell Family Dentistry

Mike Howell
14924 S. Black Bob Rd.
Olathe, KS 66062
913-390-0077
www.howellfamilydentistry.com

Humphries Family Dentistry

Julie Humphries
434 W Main St.
Gardner, KS 66030
913-856-2333
www.humphriesfamilydentistry.com

Imagine Dental

Eric Mayuga
204 E. Main St.
Gardner, KS 66030
913-856-6171
www.mygardnerdentist.com

Johnson County Periodontics and Dental Implants

Lara Ryan
15074 S Black Bob Rd
Olathe, KS 66062
913-491-5548
www.jocoperio.com

Kansas Kids Dental

Aaron Kamp
Jennifer Vyas
Cayce Wallace
12708 S. Black Bob Rd. Suite B
Olathe, KS 66062
913-225-9749
www.kansaskidsdental.com

Leland Klaassen, PA

Leland Klaassen
407 S. Clairborne Rd., Suite203
Olathe, KS 66062
913-782-1335

LeBlanc and Associates Dentistry for Children

Sara Crow
Stefanie Curtis
Bryan Henrie
Brianna Kerns
Mary Le
Michael LeBlanc
Emily Meyer
Kyle Pedersen

15151 S Black Bob Rd
Olathe, KS 66062
913-764-5600
www.kidsmilekc.com

Lovingood Orthodontics

Thomas Lovingood
1295 E. 151st St, Suite 1
Olathe, KS 66062
913-782-1663
www.dr14braces.com/locations/olathe

Moon Signature Dentistry

Beverly Moon
12710 S Pflumm Rd. Suite 210
Olathe, KS 66062
913-361-7088
www.monsignaturedentistry.com

Nielson Family Dentistry

Donald Nielson
16500 Indian Creek Pkwy, Suite100
Olathe, KS 66062
913-829-8700
www.nielsonfamilydentistry.com

Olathe Dental Care Center

James Barsetti
11164 S. Noble Dr. Suite 103
Olathe, KS 66061
913-782-1420
www.olathedentalcarecenter.com

Olathe Endodontics

Bart Putnam
16093 W. 135th St., Suite A
Olathe, KS 66062
913-829-3050
www.olatheendo.com

Olathe Kids Dentistry

David Cobb
975 N. Mur Len Rd
Olathe, KS 66062
913-829-0981

Olathe Family Dentists

Karl Breuckmann
15095 W. 123rd St
Olathe, KS 66062
913-782-6533
www.olathefamilydentists.com

Olathe Family Dentistry

Josh Kiene
Joel Piper
450 S. Parker St.
Olathe, KS 66061
913-829-1438
www.olathefamilydentistry.com

Olathe Pointe Dental

Ross Thompson
14979 W. 119th St
Olathe, KS 66062
913-780-0080
www.olathepointedental.com

Olathe Smiles Dentistry

Robert Fechner
Stacie Anstead Fechner
Brittany Rezin
15281 W 119th St
Olathe, KS 66062
913-353-2259
www.olathesmilesdentistry.com

Olathe South Dentistry

Chao Chem
Rachel Loggan
Theresa Rawalt
16587 W 151st St.
Olathe, KS 66062
913-286-4548
www.olathesouthdentistry.com

Olathe West Dentistry

Rashin Alipour
Caitlin Chidsey
Pratik Sheth
2180 W Dartmouth St.
Olathe, KS 66061
913-732-9408
www.olathewestdentistry.com

Pediatric and Laser Dentistry

Nick Prater
13095 S. Mur-Len Rd., Suite160
Olathe, KS 66062
913-764-6222
www.pediatricandlaserdentistry.com

Phye Family Dentistry

Greg Alton
Sara Gasaway
Adrian Gomez
Jasmyn Thole
401 S. Clairborne Rd., Suite A
Olathe, KS 66062
913-782-2231
www.phyefamilydentistry.com

Rhoades Family Dentistry

Rachel Driscoll
Amy Hahn
13400 S. Black Bob Rd.
Olathe, KS 66062
913-782-8900
www.rhoadesdds.com

Ridgeview Family Dentistry

Anne Isinger
18130 W 119th St.
Olathe, KS 66061
913-347-4307
www.ridgeviewfamilydentistry.com

Ryan Dental

William Ryan
Randy Regier
Katie Walker
15074 S. Black Bob Rd
Olathe, KS 66062
913-318-3388
www.ryandental.com

Serenity Dental

Michael Silva
1203 W Harold St
Olathe, KS 66061
913-229-4519
www.serenitydentalkc.com

Sheldon Dental Group

Christina Fangman
Dan Sheldon
Andrew Sousa
125 E. Park St.
Olathe, KS 66061
913-782-7580
www.sheldondentalolathe.com

Show Your Grin Dental

Douglas Sjogren
13772 S. Black Bob Rd.
Olathe, KS 66062
913-469-8019
www.showyourgrin.com

Spring Hill Dental Care

Anthony Line
21900 S. Webster, Suite A
Spring Hill, KS 66083
913-592-2200
www.springhilldentalcare.com

Spring Hill Family Dentistry

Kurt Echols
22450 S. Harrison St.
Spring Hill, KS 66083
913-592-4149
www.echolsdds.com

Sunnybrook Dental

Dan Bednarczyk
Kayla Hanna
Jeremy Johnston
21645 College Blvd.
Olathe, KS 66061
913-361-5542
www.sunnybrookdental.com

Waters Davidson Family Dentistry

Lindsay Davidson
Nevin Waters
751 N. Mur-Len Rd., Suite B
Olathe, KS 66062
913-782-1330
www.watersdavidsonfamilydentistry.com

Your Olathe Dentist

Britain Doolittle
Aaron Parkin
Sylvia Aves Spradlin
11132 S. Lone Elm Rd.
Olathe, KS 66061
913-870-0011
www.yourolathedentist.com

Gloria Einhellig

1807 S. Ridgeview Rd.
Olathe, KS 66062
913-782-0900

Kent Grassle

507 N Mur Len Rd
Olathe, KS 66062
913-782-0873
www.kentgrassledentist.com

Ron Burgmeier

13025 S. Mur-Len Rd., Suite250
Olathe, KS 66062
913-764-1169
www.ronburgmeierdds.com

Fain Oral Surgery

Douglas Fain
20168 W. 153rd St.
Olathe, KS 66062
913-839-9709
www.fainoralsurgery.com

Sylvia Spradlin

11132 S. Lone Elm Rd.
Olathe, KS 66061
913-780-0123

Jeffrey Walmann

20186 W. 153rd St.
Olathe, KS 66062
913-829-7668

- **GOVERNMENT HEALTHCARE**

Kansas Medicaid Assistance Program

800-766-9012
www.kmap-state-ks.us

Medicare Information

800-633-4227
www.medicare.gov

U.S. Department of Health and Human Services

800-633-4227
www.cms.gov

- **HEALTH AND FITNESS CENTERS**

9Round Fitness

18583 E. 151st St.
Olathe, KS 66062
913-948-2350
www.9round.com/locations/ks/olathe/151st-St

Anytime Fitness

1473 E. 151st St.
Olathe, KS 66062
913-971-4060
www.anytimefitness.com

CrossFit On Track

15140 S. Keeler St. Suite A
Olathe, KS 66062
913-214-6868
www.crossfitontrack.com

Equanimity With Peggy

130 N. Cherry St.
Olathe, KS 66061
913-219-8971

www.equanimitywithpeggy.com

Evexia Health and Performance

138 S. Clairborne Rd.
Olathe, KS 66062
913-380-0938
www.evexiakc.com

F45 Training Olathe

15293 W. 119th St.
Olathe, KS 66062
913-600-5840
www.f45training.com

Fullsturkur Fitness

255 N. Stone Creek Dr.
Gardner, KS 66030
913-305-7498
www.fullsturkurfitness.com

Gardner Athletic Club

214 E. Main St.
Gardner, KS 66030
913-856-4223
www.gardnerathleticclub.com

Genesis Health Clubs

1780 W 106th St.
Olathe, KS 66061
913-888-0505
www.genesishealthclubs.com

13655 S. Alden St
Olathe, KS 66062
913-764-5444
www.genesishealthclubs.com

13370 S. Blackfoot Dr.
Olathe, KS 66062
913-829-4503
www.genesishealthclubs.com

GotEm Fit

899 N Jan Mar St.
Olathe, KS 66061
913-708-2677
www.gotemfit.com

Grace Fitness LLC

13849 S. Mur-Len Rd. Suite H
Olathe, KS 66062
www.gracefitness.biz

GreatLife Fitness

7909 Wyandotte St.
De Soto, KS 66018
913-301-3000
www.greatlife-burningtree.com

Jazzercise

2067 E. Santa Fe St.
Olathe, KS 66062
913-489-7509
www.jazzercise.com/location/jazzercise-olathe-east-fitness-center

136 E. Main St.
Gardner, KS 66030

913-938-6010
www.jazzercise.com/location/jazzercise-gardner-studio

32905 W. 84th St.
De Soto, KS 66018
913-226-4616
www.jazzercise.com

KAMO Athletics CrossFit

19915 W. 161st St.
Olathe, KS 66062
816-718-7374
www.kamoathletics.com

Kansas Built Fitness

15150 S. Keeler St. Suite A
Olathe, KS 66062
913-440-4353
www.kansasbuiltfitness.com

Legacy Fitness

810 Creekside Dr.
Gardner, KS 66030
913-207-3003
www.legacyfitnesskc.com

Olathe Community Center

1205 E Kansas City Rd.
Olathe, KS 66061
913-971-8563
www.olatheks.gov/residents/community-center

Orangetheory Fitness

20144 W. 153rd St.
Olathe, KS 66062
913-274-1415
www.orangetheory.com

Paradiso Pilates

1855 S. Ridgeview Rd.
Olathe, KS 66062
913-355-6564
www.paradisopilates.com

Planet Fitness

13509 S. Mur-Len Rd.
Olathe, KS 66062
913-732-9350
www.planetfitness.com

Primal Fit Lab

15280 S. Keeler St.
Olathe, KS 66062
913-839-2746
www.primalfitlab.com

Skylight Pilates

33900 Lexington Ave.
De Soto, KS 66018
913-547-9277
www.skylight-pilates.com

Spring Hill Civic Center

401 N. Madison St.
Spring Hill, KS 66083
913-592-3664
www.springhillks.gov/702/Civic-Center

Spring Hill Fitness

21231 W. 233rd St.
 Spring Hill, KS 66083
 913-686-2027
www.spring-hill-fitness.com

Sweatbox Fitness Club

1809 S. Ridgeview Rd.
 Olathe, KS 66062
 913-600-7675
www.sweatboxfitclub.com

The Fountain Olathe – 24hr Gym

15274 W 119th St.
 Olathe, KS 66062
 913-839-8651
www.tfgyms.com

YMCA

21400 W. 153rd St.
 Olathe, KS 66061
 913-393-9622
www.kansascityymca.org/locations/olathe

- **MASSAGE THERAPY**

Better Naturally, LLC

130 N. Cherry St., Suite 202
 Olathe, KS 66061
 913-378-4279
www.betternaturallykc.com

Hand and Stone Massage and Facial Spa

20160 W. 153rd St.
 Olathe, KS 66062
 913-286-6931
www.handandstoneolathe.com

Hikari Massage Therapy

2235 E. Kansas City Rd.
 Olathe, KS 66061
 913-732-0343
www.hikari.massagetherapy.com

KC Thai Massage

601 N. Mur-Len Rd., Suite 5
 Olathe, KS 66062
 816-714-9768
www.thaimassagekc.com

Lu Lavender Massage

515 N. Mur-Len Rd. Suite B
 Olathe, KS 66062
 913-603-7386
www.lulavender.com

Massage Envy

14913 W. 119th St.
 Olathe, KS 66062
 913-747-3689
www.locations.massageenvy.com/kansas/olathe/14913-west-119th-street

15032 S. Black Bob Rd.
 Olathe, KS 66062
 913-390-6400

www.locations.massageenvy.com/kansas/olathe/15032-s-black-bob-road

Ocean Massage

403 S. Parker St.
 Olathe, KS 66061
 913-828-1017

Peking Spa

16555 W. 151st St.
 Olathe, KS 66062
 913-292-4946
www.pekingspa.com

The Radical Empath, LLC

201 E. Loula St., Suite 209
 Olathe, KS 66061
 913-201-9086
www.theradicalempath.abmp.com

Rewind Massage

924 E. Old 56 Highway
 Olathe, KS 66061
 913-353-2656

Village Vibe Massage

33065 W. 83rd St., Suite 103
 De Soto, KS 66018
 913-954-7147
www.village-vibes-massage.square.site

Zen Massage

13628 S. Black Bob Rd.
 Olathe, KS 66062
 913-764-000
www.zenmassageusa.com/olathe

Tina Barner-Smith

14670 S. Harrison St.
 Olathe, KS 66061
 913-998-4345

- **MEDICAL EQUIPMENT AND SUPPLIES**

Great Plains Medical

1849 S. Ridgeview Rd.
 Olathe, KS 66062
 913-764-3800
www.greatplainsmedical.com/

- **NUTRITIONISTS**

College Park Family Care Center

11164 Noble Dr.
 Olathe, KS 66061
 913-829-2440

1803 S. Ridgeview
 Olathe, KS 66062
 913-829-0505

www.collegeparkfamilycare.com/service/nutrition-services

Johnson County Nutrition Center

401 Madison St.
 Spring Hill, KS 66083
 913-715-8861

NCES Health & Nutrition Education

1904 E. 123rd St.
Olathe, KS 66061
913-782-4385
www.ncescatalog.com/

Olathe Medical Center

20375 W. 151st St.
Olathe, KS 66061
913-791-4200

Olathe Nutrition

21510 W. 121st St.
Olathe, KS 66061
913-390-5377

- **OPTOMETRISTS (EYE DOCTORS)**

Crawford Family Eye Care

Kevin Crawford
1295 E. 151st St., Suite3
Olathe, KS 66062
913-782-4983
www.fcrawfordfamilyeyecare.com

Reed Family Vision

Darren Reed
2123 E. 151st St.
Olathe, KS 66062
913-732-2552
www.curtsandreed.com/

Discover Vision Center

Javed Sayed
15710 W. 135th St.
Olathe, KS 66062
816-750-6261
www.discovervision.com

Drs. Hawks, Besler, Rogers & Stoppel

L. Gregory Besler
Terry Hawks
Jason Rogers
Jon Stoppel
315 E. Main St.
Gardner, KS 66030
913-856-6360
www.hbreyecare.com/

Eye Associates of Olathe

Cassie Baker
Christina Bartimus
John Davis
Ty Diggs
Carrie Turley
15257 W. 135th St.
Olathe, KS 66062
913-780-9696
www.seetheclarity.com/location/olathe/

Eye Associates of South Olathe

Cassie Baker
Andrea Buchbaum
16021 S. Bradley St.
Olathe, KS 66062
913-440-9819

www.seetheclarity.com/location/olathe-new/

Family Eye Care

Dawn Ertel
Brian McDonald
Joanna Meats
Aaron Meyer
15205 S. Black Bob Rd.
Olathe, KS 66062
913-390-4900
www.chamberlainmcdonald.com/

Galbrecht Eyecare

Diane Galbrecht
395 N. K-7 Highway
Olathe, KS 66061
913-764-9300
www.galbrechteyecare.com/

Gardner Vision Care

Kristin Van Becelaere
1725 E. Santa Fe St.
Gardner, KS 66030
913-884-7316
www.gardnervisioncare.com

Grin Eye Care

Lori Berwald
Emily Enright
Hannah Fann
Jeffry Gerson
Milton Grin
Brian Heining
Jennifer Johnson
Breanne Niebuhr
Jeff Wongs
Barbara Wolock
21020 W. 151st St.
Olathe, KS 66061
913-829-5511
www.grineyecare.com/

Hahn Price Vision Center

Melissa Hahn Price
792 N. Ridgeview Rd.
Olathe, KS 66061
913-839-0084
www.hahnpricevisioncenter.com/

In Sight Vision Center

Lauren Bozsa
Melanie Linderer
Neal Troyer
Justine Weigel
11148 S. Lone Elm Rd.
Olathe, KS 66061
913-945-1852
www.insightvisioncenters-olathe.com

Kyle Marr

Neal Troyer
Justin Weigel
967 E. Lincoln Ln.
Gardner, KS 66030
913-884-6800
www.insightvisioncenters.com/gardner

Midland Eye Care

Dustin Honeyman
Kinsey Honeyman
Chad Renner
15345 W. 119th St.
Olathe, KS 66062
913-428-7911
www.midlandeyecarekc.com/

My Eye Care
Tu Bui
Tuan Bui
15306 W 119th St. Suite B
Olathe, KS 66062
www.myeyecarekc.com

Olathe Eye Care
Paul Brinckman
16124 W. 135th St.
Olathe, KS 66062
913-764-3937
www.olatheeyecare.com/

Olathe Family Vision
Mary Pirotte Hemphill
Wayne Hemphill
Gerard Lozada
13839 S. Mur-Len Rd., Suite A
Olathe, KS 66062
913-782-5993
www.olathefamilyvision.com/

Ridgeview Eye Care
Keri Dennis
Carrie Hartigan
Trent Henderson
Scott Hickman
Jacob Letourneau
Erin Mills
18208 W. 119th St.
Olathe, KS 66061
913-2708598
www.ridgevieweyecare.com/

The Eye Doctors Optometrists
Nathan Kluttz
Jessica Putnam
751 N. Mur-Len Rd.
Olathe, KS 66062
913-764-2020
www.theeyedoctors.net/locations/ks/olathe/olathe-mur-len

Erin Hamilton
Madison Howard
Jessica Putnam
Edwin Rodriguez
15311 W. 119th St.
Olathe, KS 66062
913-780-3200
www.theeyedoctors.net/locations/ks/olathe/olathe

Vision Today
Matt Laurie
Matt Lowenstein
Beth-Ann Reeves-Castro
12120 S. Strang Line Rd.
Olathe, KS 66062
913-397-9111

www.visiontodayeyecare.com

Whitesell Optometry
Courtney Bloodgood
William Whitesell
21900 S. Webster, Suite B
Spring Hill, KS 66083
913-592-2020
www.visionsource-springhill.com

- **PHARMACIES**

Auburn Long Term Care Pharmacy
401 W. Frontier St., Suite 300
Olathe, KS 66061
913-294-9125
www.auburnpharmacies.com/long-term-care

Auburn Pharmacy
20375 W. 151st St., Suite100A
Olathe, KS 66061
913-393-4440
www.auburnpharmacies.com/olathe-ks

Cedar Creek Pharmacy
34040 Commerce Dr,
De Soto, KS 66018
913-583-1117
www.cedarcreekpharmacy.org/

CenterWell Pharmacy
16575 W. 119th St.
Olathe, KS 66061
913-815-5006

CVS Pharmacy
1075 W. Santa Fe
Olathe, KS 66061
913-764-5858

1785 S. Mur-Len Rd.
Olathe, KS 66062
913-390-9892

18351 W. 119th St.
Olathe, KS 66061
913-397-7325

20255 W. 154th St.
Olathe, KS 66061
913-782-8756

15345 W. 119th St.
Olathe, KS 66062
913-393-4420

110 W. Main St.
Gardner, KS 66030
913-856-0280

Hen House Pharmacy
13600 S. Black Bob Rd.
Olathe, KS 66062
913-782-2039

HyVee Pharmacy
14955 W. 151st St.

Olathe, KS 66062
913-780-9449

18101 W. 119th St.
Olathe, KS 66061
913-393-4150

Price Chopper Pharmacy

22350 S. Harrison St.
Spring Hill, KS 66083
913-592-5350

15970 S. Mur-Len Rd.
Olathe, KS 66062
913-393-8000

660 E. Main St.
Gardner, KS 66030
913-393-8000

Walgreens Pharmacy

750 E. Main St.
Gardner, KS 66030
913-884-7912

545 E. Santa Fe
Olathe, KS 66061
913-393-2757

1453 E. 151st St.
Olathe, KS 66062
913-538-5019

15066 W. 151st St.
Olathe, KS 66062
913-393-2886

13450 S. Black Bob Rd.
Olathe, KS 66062
913-829-3176

Walmart Pharmacy

1725 E. Santa Fe St.
Gardner, KS 66030
913-884-8411

395 N. K7 Highway
Olathe, KS 66061
913-764-7165

18555 W. 151st St.
Olathe, KS 66061
913-489-3459

13600 S. Alden St.
Olathe, KS 66062
913-829-4404

• **REHABILITATION SERVICES**

Active Life Physical Therapy

Jadyn Smith
Troy Smith
14138 W. 119th St.
Olathe, KS 66062
913-232-8864
www.alptkc.com

ARC Physical Therapy

15455 S. Rogers Rd.
Olathe, KS 66062
913-254-0568
www.arcpt.com/clinics/olathe-ks

Athletico Physical Therapy

141 S. Parker St.
Olathe, KS 66061
913-538-5453
www.athletico.com/locations/olathe-santa-fe-k7

14895 W. 151st St.
Olathe, KS 66062
913-440-0092

www.athletico.com/locations/olathe

F.I.T. Muscle and Joint Clinic

David Cantwell
Rachelle Colyer
Nate Greenwood
Viny Parisi
2113 E. Kansas City Rd.
Olathe, KS 66061
913-791-0144
www.physicaltherapy.fitmjc.com

Hoeger House

20911 W. 153rd St.
Olathe, KS 66061
913-397-9051
www.good-sam.com/locations/hoeger-house

Marquette Physical Therapy

Jay Anderson
Brienne Atteberry
Michelle Claassen
Dylan Crawford
Kayli LaRocca
Jay Marquette
Kayla Nonnast
Blake Overmiller
Haley Smith
33255 Lexington Ave., Suite A
De Soto, KS 66018
913-585-9844
www.marquettept.com

Meadowbrook Rehabilitation Hospital

427 W. Main St.
Gardner, KS 66030
913-856-8747
www.meadowbrookrh.com

Nottingham Health and Rehabilitation

14200 W. 134th Pl.
Olathe, KS 66062
913-738-8300
www.nottinghamhealthandrehab.com

Olathe Health Rehabilitation

23450 College Blvd.
Olathe, KS 66061
913-254-5494
www.olathehealth.org/locations/olathe-health-rehabilitation-services-college-point

824 E. Main St.
Gardner, KS 66030
913-324-8680

www.olathehealth.org/locations/olathe-health-rehabilitation-services-gardner

21400 W. 153rd St.
Olathe, KS 66061
913-355-8621

www.olathehealth.org/locations/olathe-health-rehabilitation-services-olathe-ymca-2

20920 W. 151st St., Suite 201
Olathe, KS 66061
913-355-4325

www.olathehealth.org/locations/olathe-health-rehabilitation-services-olathe-medical-park-north

13657 S. Mur-Len Rd.
Olathe, KS 66062

913-324-8685

www.olathehealth.org/locations/olathe-health-rehabilitation-services-santa-fe-commons-3

PT Solutions

11970 S. Black Bob Rd., Suite 100
Olathe, KS 66062

913-632-4770

www.ptsolutions.com/clinics/ks/olathe-station

18581 W. 151st St.
Olathe, KS 66062

912-632-4780

www.ptsolutions.com/clinics/ks/olathe

Rise Physical Therapy LLC

Scott Moreland

120 N. Cherry St., Suite 203H

Olathe, KS 66061

913-732-3831

www.riseptkc.com

Select Physical Therapy

Rick Kristoffersen

Julie O'Connor

Jess Sheble

Paige Stivers

1061 E. 151st St.

Olathe, KS 66062

913-829-3133

www.selectphysicaltherapy.com/contact/find-a-location/ks/olathe/olathe

SERC Physical Therapy

12755 S. Mur-Len Rd., Suite B1

Olathe, KS 66062

913-782-8729

www.serc.urpt.com/locations/olathe

225 N. Moonlight Rd.
Gardner, KS 66030

918-856-7506

www.serc.urpt.com/locations/gardner

Spring Hill Care and Rehabilitation Center

251 E. Wilson St.

Spring Hill, KS 66083

913-592-3100

www.missionhealthcommunities.com/spring-hill-care-and-rehab

A Therapeutic Experience

Anna Van den Berghe

33345 W. 95th St.

De Soto, KS 66018

913-940-8152

www.atherapeuticexperience.com

Thrive Physical Therapy

Chelsea Jerabek

13795 S. Mur-Len Rd., Suite 203

Olathe, KS 66062

913-754-0700

www.thriveptks.com

• **OTHER CLINICS**

CareNow Urgent Care – Olathe

14721 W. 151st St

Olathe, KS 66062

913-361-7090

www.carenow.com/locations/kansas-city/olathe

ER of Olathe

13505 S. Alden St.

Olathe, KS 66062

www.hcamidwest.com/locations/er-of-olathe

First Point Urgent Care Inc.

907 E Lincoln Ln.

Gardner, KS 66030

913-856-1369

www.firstpointurgentcare.org

Health Partnership Clinic

407 S. Clairborne Rd. Suite 104

Olathe, KS 66062

913-648-2266

www.hpcks.org

Rhythmic Medicine

Janalea Hoffman

10425 W. 177th Terrace

Olathe, KS 66062

913-851-5100

www.rhythmicmedicine.com

Urgent Care of Kansas

314 E Main St

Gardner, KS 66030

913-938-4726

33391 Lexington Ave Suite A

De Soto, KS 66018

913-535-8664

www.urgentcareofkansas.com

V. Detail Exhibits

[VVV Consultants LLC]

a.) Patient Origin Source Files

[VVV Consultants LLC]

Patient Origin History 2021- 2023 for IP, OP and ER – OMC PSA, KS

OMC PSA, Kansas Residents					
#	Inpatients - KHA HIDI	YR23	YR22	YR21	Total
	Total	57,702	55,201	55,729	168,632
1	AdventHealth Shawnee Mission - Shawnee Mission, KS	13,298	13,596	14,815	41,709
2	The University of Kansas Health System - Kansas City, KS	10,029	9,380	9,136	28,545
3	Overland Park Regional Medical Center - Overland Park, KS	8,615	8,590	8,363	25,568
4	Olathe Health - Olathe, KS	8,044	7,437	7,849	23,330
5	Menorah Medical Center - Overland Park, KS	4,044	4,044	3,855	11,943
6	Saint Luke's South Hospital - Overland Park, KS	3,382	3,652	3,865	10,899
7	Saint Luke's Hospital of Kansas City - Kansas City, MO	2,817	2,272	2,359	7,448
8	Children's Mercy Kansas City - Kansas City, MO	2,259	1,819	1,770	5,848
9	AdventHealth South Overland Park - Overland Park, KS	1,386	947	95	2,428
10	Research Medical Center - Kansas City, MO	813	684	911	2,408

OMC PSA, Kansas Residents					
#	Outpatients - KHA HIDI	YR23	YR22	YR21	Total
	Total	1,033,455	1,009,245	1,028,039	3,070,739
1	The University of Kansas Health System - Kansas City, KS	417,077	392,967	376,850	1,186,894
2	AdventHealth Shawnee Mission - Shawnee Mission, KS	108,975	139,424	170,966	419,365
3	Olathe Health - Olathe, KS	124,191	115,940	116,739	356,870
4	Children's Mercy Hospital Kansas - Overland Park, KS	61,406	63,744	67,185	192,335
5	Saint Luke's South Hospital - Overland Park, KS	55,652	61,638	60,164	177,454
6	Overland Park Regional Medical Center - Overland Park, KS	60,253	56,899	55,340	172,492
7	Children's Mercy Kansas City - Kansas City, MO	59,239	50,632	55,787	165,658
8	Menorah Medical Center - Overland Park, KS	41,155	40,534	39,709	121,398
9	Saint Luke's Hospital of Kansas City - Kansas City, MO	35,965	30,647	30,388	97,000
10	St. Joseph Medical Center - Kansas City, MO	17,171	13,254	12,407	42,832

OMC PSA, Kansas Residents					
#	Emergency - KHA HIDI	YR23	YR22	YR21	Total
	Total	186,201	179,516	164,844	530,561
1	AdventHealth Shawnee Mission - Shawnee Mission, KS	40,779	35,234	38,142	114,155
2	Overland Park Regional Medical Center - Overland Park, KS	33,517	31,728	27,118	92,363
3	Olathe Health - Olathe, KS	29,844	27,983	26,470	84,297
4	Saint Luke's South Hospital - Overland Park, KS	21,682	28,941	27,109	77,732
5	Children's Mercy Hospital Kansas - Overland Park, KS	14,865	15,885	14,111	44,861
6	The University of Kansas Health System - Kansas City, KS	11,844	10,449	9,334	31,627
7	Menorah Medical Center - Overland Park, KS	8,791	8,187	7,336	24,314
8	AdventHealth South Overland Park - Overland Park, KS	7,615	6,768	1,259	15,642
9	Children's Mercy Kansas City - Kansas City, MO	4,431	3,673	3,301	11,405
10	Saint Luke's Hospital of Kansas City - Kansas City, MO	3,219	2,460	2,432	8,111

b.) Town Hall Attendees, Notes, & Feedback

[VVV Consultants LLC]

Attendance Johnson Co, KS CHNA Town Hall (N=32) 4/9/24 7:30-9am

#	Table	Lead	Attend	Last	First	Organization
1	A	XX	X	Mitchell	Barbara	JO CO Dept. of HLTH and Environment
2	A		X	Kutz	Jenny	KVC Health Systems
3	B	XX	X	Salava	Angie	Olathe School District
4	B		X	Jensen	Mike	The University of Kansas Health Sys
5	B		X	VonFeldt	Cindy	Olathe Public Schools Foundation
6	C	XX	X	Kane	Lacey	The University of Kansas Health Sys
7	C		x	DePriest	Joyce	Olathe Housing Authority
8	C		X	Miller	Joy	Johnson County Extension Office
9	C		X	Roberts	Zachary	Gardner Police Department
10	D	XX	X	Carr	Barb	Community Member
11	D		X	Haupt	Sarah	Johnson County Government
12	D		X	McKeirnan	Robert	Olathe Police Department
13	E	XX	X	Rice	Catherine	Health Partnership Clinic
14	E		X	Brady	Tim	Gardner Edgerton Schools Foundation
15	E		X	Danneberg	Tim	City of Olathe
16	E		x	Heckman	Neal	First Christian Church
17	G		X	Falk	Amy	Health Partnership Clinic
18	H		X	Dugan	Erin	Kids TLC
19	H		X	Kanatzar	Maggie	St. Paul Catholic Church
20	I	XX	X	Ferguson	Lois	Johnson County Government
21	I		X	Feehan	John	The University of Kansas Health Sys
22	J	XX	X	Velarde	Adriana	The University of Kansas Health Sys
23	J		X	Armand	Aaron	St Paul Catholic Church
24	J		X	Little	Maggie	YMCA
25	J		X	Schap	Jaymi	Johnson County Mental Health Center
26	K	XX	X	Alfatal	Sabah	The University of Kansas Health Sys
27	K		X	Pham	Kim	St. Paul Catholic Church
28	K		X	Tryon	Kelsie	Cedar Lake Village
29	K		X	Weers	Christena	Meadowbrook Rehabilitation Hosp
30	L		X	Wholf	Timothy	Johnson Co Gov Dept Aging Human Serv
31	L		X	Willoughby	Jean	The University of Kansas Health Sys
32	L		X	Winchester	Lisa	Garmin

OMC PSA (Johnson Co KS) - Town Hall Event Notes

Date: 5/9/2024 – 7:30- 9:00am @ JCCC OMC Education Center (N= 32)

INTRO: Following is a recap of the community conversation during CHNA 2024 Town Hall

- If people not speaking English, they are speaking Spanish, Arabic, Ethiopian, French, Somalian, Portuguese, or ASL.
- Veterans go to care at KC VA or Leavenworth and mental health in Lenexa, Topeka VA.
- “We are absolutely worried about the homeless” There is a homelessness issue and major worry of community members.
- Free school lunch is higher than reported and was recorded Sept. ~29.2% for Olathe.
- Affordable and safe childcare is a concern for the community.
- Opioids are coming from the border that look like real pills but are pressed with Fentanyl.
- Meth is still a big concern, and younger kids are using Marijuana.
- Alcohol is a concern and the most used. The community had varying opinions on whether alcohol and drugs should be together or separate.
- The Health Department is worried about STDs.
- Food is an issue, specifically eating healthy food. High reports of obesity in the community due to lack of time. People are spending their time in the car driving because of the long commutes to work. About 4-5% of employees in JoCo do not live there.
- Homelessness, Medicaid expansion, and housing are issues that need to be moved up on problems list of past CHNA Needs.
- The Emergency Room has a long weight time because there are not enough staff and mental health patients are filling up the Emergency Room. Also, the Emergency Room is being used as an urgent care and lack of insurance causes people to go to the Emergency Room.
- Attempted suicide calls (not sure if they are going up but they have stayed the same)
- Mental health calls to the police department are going up (50-65% are suicide threats and acute mental health calls are a large majority).
- The community expressed that health care access is an issue.

What is coming/occurring that will affect health of community:

- Accessible education with the growing price in transportation
- Growing population
- Inflation and cost of living
- Refugees and undocumented (new languages and unemployment increasing)
- Unemployment
- Workforce

Strengths (Table Reports)

- Education K-12 JOCO colleges and universities
- FQHC
- Good job availability and economic base.
- Great reputation and competent providers locally

- Health care access to primary and specialty services
- Improved awareness for mental health and passionate community willing to talk about it.
- Innovative approaches for access to care
- Lots of groups collaborating to improve community health.
- People can navigate their own care.
- School health
- Social engagement opportunities
- Walking trails and parks

Areas to Improve or Change (Table reports)

- Accessible and affordable housing for all ages
- Addressing social isolation and loneliness
- Alcohol and substance abuse care
- Bilingual and language needs
- Childcare
- Chronic disease management (diabetes, stroke, etc.)
- Collaboration amongst community resources no silos
- Community culture of health involvement (health apathy)
- Competent and effective mental health care/access
- Coordination of available services (navigators of health services)
- Crisis care
- Emergency services quality and access
- Expand access to programs like mobile integrative.
- Food and nutrition education (access to healthy food)
- Increase specialty care locally (cancer centers because it was high on list)
- Inpatient substance abuse care (affordable)
- Livable wages
- Medicaid expansion
- Transportation
- Welcoming community to all people

Round #5 CHNA - OMC PSA (Johnson Co KS)

Town Hall Conversation - Strengths (Big White Cards) N=37

Card #	What are the strengths of our community that contribute to health?	Card #	What are the strengths of our community that contribute to health?
15	Access (top-notch providers/access)	11	Health education
33	Access to community services	36	Healthcare availability
29	Access to food	37	Healthcare available
26	Access to food- pantry, Harvesters, etc.	25	Healthcare providers
23	Access to free/low cost physical activity	24	Healthcare providers are good
11	Access to general health care providers	31	Healthcare systems- multiple "higher" provider to PT ratios
29	Access to healthcare	19	High quality healthcare providers and hospitals
24	Access to healthcare- many options	4	High quality of life indicators
23	Access to healthy food	31	High quality schools support success
5	Access to immunizations	31	Highly educated residents with access to info, highly insured
26	Access to internet	34	Home health
17	Access to Parks and Recreation	6	Hospitals- location and access
29	Access to physical activity	3	Hospitals- number and quality of care
14	Access to physical activity opportunities	37	Innovative approaches to healthcare- mobile integrated
7	Access to physical activity, trails, etc.	21	KU Med buying Olathe Med
33	Access to preventative care (ex. Routine vaccination)	15	Law enforcement- engagement
22	Access to resources	35	Legal system
27	Access to resources- food available in Olathe but not in rural zip codes	26	Less single parent households
27	Access to specialty care with University of KS health system	26	Low poverty rate
1	Adding children's natal health hospital	31	Low unemployment, high job opportunities with increased pay
1	Affluency	7	Many services available for health
14	Availability of healthcare providers/hospital access	24	Many specialties available
8	Awareness and increase conversations on mental health	33	Medical provider care
13	Awareness and willingness to take action	34	Mental health
10	Awareness of need for mental health access and conversations	18	MIHV
21	Care of leaders and community	27	Mobile integrated health- going to client
24	Chronic disease management	28	Neighborhood and built environment
18	City/county resources	19	Neighborhoods
21	Closeness to other providers in JoCo	14	Opportunities for social connection
18	Collaboration between hospitals and city/county resources	3	Outdoor health- parks, pools, trails, etc.
10	Collaboration with county services	32	Outreach groups- MIH, MCRT, ACT
10	Collaboration with schools/education	21	Overall healthcare system
27	Community Agency collaboration	20	Overall healthy community
3	Community centers	36	Overall, we are a healthy county compared to other KS counties
25	Community collaboration	35	Parks and Recreation
30	Community collaboration	24	Parks and trails
15	Community collaboration/engagement- libraries, farmer's market	25	Parks and trails for exercise
11	Community resources	32	People who care and want to make changes
12	Community resources	15	Physical environment improving- parks, walkability
29	Community resources	3	Police and Fire Emergency services
6	Community- walkability, safety, green space, clean water	5	Primary care access
19	Community, social, church, civic	34	PT
11	Compotent local providers	25	Public health professional expertise
35	Compotent skilled healthcare providers (excellent collaboration)	8	Quality and skill of healthcare
6	County government is forward thinking and active	20	Quality hospitals
37	Dedicated community to problem solutions	16	Quality of care
3	Dental quality	29	Quality of healthcare
16	Early childhood care and education- PAT, ABC Trainers, school district programs- Headstart	12	Recreation activities
30	Economic means	22	Relative financial stability
28	Economic stability	22	Relatively healthy and educated community
13	Economic stability (good jobs)	10	Reputation of our local providers
19	Economy/jobs/resources	30	Resources- access, availability
17	Educated citizens	11	School attention to health
4	Education	19	Schools
9	Education	35	Schools and education- K-12, JCCC/ University
13	Education	3	Schools are excellent
25	Education	18	Schools' attention to health
33	Education (access to and quality of K-12)	15	Schools- screenings, access to resources
2	Education on self-care and mental health being provided in schools by mental health specialists	14	Senior care
26	Education success (graduation rates)	5	Seniors transitional living
8	Education/ school system	2	Several specialists
33	Employment rate (relative to other counties and nationwide)	32	Sliding scale clinic access
9	Exercise opportunities	34	Speciality providers
20	FQHC Model	22	Strong education systems
13	Good community resources/collaboration	22	Strong NPO/Faith community support
11	Good economics	31	Strong park and recreational options with clean environments
7	Good education systems	12	Types of providers
17	Good infrastructure	1	Walking trails and parks
35	Good jobs	13	Walking trails and parks

Round #5 CHNA - OMC PSA (Johnson Co KS)

Town Hall Conversation - Weaknesses (Color Cards) N= 38

Card #	What are the weaknesses of our community that contribute to health?	Card #	What are the weaknesses of our community that contribute to health?
35	Access to affordable accessible housing.	34	Languages/ cultural welcoming all people.
35	Access to affordable child care.	24	Let's keep an eye on veterans- this population is increasing.
38	Access to affordable healthcare.	28	Limited access to healthy food.
35	Access to affordable mental health providers.	37	Livable wage.
38	Access to affordable mental health.	14	Livable wages.
33	Access to care for those on KanCare- dental, eye, routine care.	5	Medicaid expansion.
30	Access to care- health coverage.	6	Medicaid expansion.
36	Access to care/ insurance/Medicaid.	9	Medicaid expansion.
18	Access to childcare.	10	Medicaid expansion.
9	Access to counseling/ therapy.	31	Medicaid expansion.
25	Access to healthcare- mental, behavioral & physical.	37	Medicaid expansion.
2	Access to mental health services.	5	Mental health crisis/ stabilization.
16	Access to services for mental health and other healthcare needs.	30	Mental health- prevention, access, drug and alcohol.
31	Access to specialty care.	18	Mental health services.
20	Access to substance use disorder & mental health services.	27	Mental health services.
11	Activities for children.	28	Mental health services.
34	Adequate healthcare staff.	32	mental health treatment- # of available providers, affordability, what to do in crisis
15	Affordable childcare.	36	Mental health treatment.
27	Affordable childcare.	6	Mental health.
10	Affordable day care.	37	Mental health.
15	Affordable food.	15	Mental healthcare access.
12	Affordable health care.	11	Money for car seats, pack & plays.
18	Affordable healthy food.	8	More affordable access- Medicaid expansion.
7	Affordable healthy foods.	23	more availability to screening, diagnosis of mental health, autism- behavioral issues
32	Affordable housing- difficult for our young adults.	22	More collaboration on adaptive challenges.
7	Affordable housing.	23	More convenient times/ locations to access care.
9	Affordable housing.	23	More coordinated with all services.
10	Affordable housing.	10	More crisis services for mental health.
26	Affordable housing.	10	More private mental health providers.
29	Affordable housing.	2	More providers taking insurance.
37	Affordable housing.	34	Navigation of healthcare services.
30	Affordable housing/ homeless.	21	Need more access to affordable food.
20	Affordable options for specialty care for underinsured and uninsured patients	21	Need more and more affordable mental health.
25	After-care treatment- collaboration of resources/ services.	21	Need more emphasis on nutrition and exercise.
19	Ambulance service- more per city.	13	Need more focus on loneliness and social isolation.
34	Behavioral/ mental health.	21	Need more PA and NP to support Drs.
7	Better coordination and connection to community services.	21	Need more partnering of organizations.
14	Bilingual support service providers.	13	Not affordable healthcare.
31	Cancer care access.	5	Not enough services for IDD.
6	Child care.	23	Number of affordable specialists.
14	Child care.	33	Number of providers- mental health.
26	Child care.	4	Number of uninsured- Medicaid expansion.
9	Chronic disease (ex. Diabetes & stroke) clinics to provide education, different languages, medication, testing supplies	6	Obesity.
18	Chronic disease prevention and treatment.	15	Obesity.
32	Community connection and engagement.	31	Obesity.
8	Community culture of wellness and health.	17	Open discussion on value of increasing diversity on informing
5	Coordination/ mental health/ between agencies.	17	opportunities to improve job skills that are accessible to those who are working
30	Crisis intervention- access.	11	Parent support- mental health support.
29	Develop workforce for healthcare services.	33	Public information campaign to let underserved know of community-based programs
11	Domestic violence support.	6	Public transportation.
15	Drug addiction recovery.	13	Quality of services often times are a concern.
27	Drug education- schools.	17	Range of housing options for all incomes, stages of life.

Round #5 CHNA - OMC

Social Determinants "A" Card Themes (N = 37 with 104 Votes): E=27, N=15, ED=11, C=19, F=4 & P=28



Card #	Code	First Impressions on Social Determinants Impacting Delivery	Card #	Code	First Impressions on Social Determinants Impacting Delivery
9	C	Community and social context.	28	ED	Child care- kids home alone.
17	C	Family environment.	32	ED	Education access + quality.
18	C	Social and community context (family).	36	ED	Education access and quality- language.
15	C	Social and community context- apathy + acceptable.	2	ED	Education.
24	C	Social and community context- social integration, engagement.	3	F	Food- education about nutrition.
6	C	Social and community context- support systems transportation.	16	F	Healthier supplies for food pantries.
13	C	Social and community context- support systems.	8	F	Healthy food.
14	C	Social and community context- support systems.	12	F	Food insecurity- healthy + affordable food.
11	C	Social and community context.	8	N	Green space (good factor).
12	C	Social and community context.	3	N	Housing
14	C	Social and community context.	17	N	Neighborhood and built environment.
17	C	Social and community.	7	N	Neighborhood and built environments.
19	C	Social and community.	8	N	Neighborhood.
25	C	Social- support systems.	8	N	Transport (public).
8	C	Social.	16	N	Transportation- increased jobs for drivers, more wheelchair options, and microtransit options.
1	C	Quality social + community context.	35	N	Built environment.
29	C	Social and community- community engagement.	12	N	Homelessness.
30	C	Social and community context- community engagement.	26	N	Housing.
34	C	Social and community context.	21	N	Housing/ transportation.
19	E	Debt vs. income.	12	N	Neighborhood.
25	E	Economic- employment + expenses.	26	N	Transportation.
10	E	Economic security.	25	P	Health access- availability + insurance.
23	E	Economic stability- debt/ expenses.	8	P	Health care access (mental health).
24	E	Economic stability- income, expenses, debt, support.	4	P	Health care access + quality.
13	E	Economic stability- inflation/ debt.	19	P	Health care access + quality.
14	E	Economic stability.	23	P	Health care access + quality.
18	E	Economic stability.	9	P	Health care access and quality.
20	E	Economic stability.	14	P	Health care access and quality.
7	E	Economic stability.	6	P	Health care access- especially MH.
9	E	Economic stability.	21	P	Health care access- medical expansion + more affordable specialty care.
11	E	Economic stability.	10	P	Health care access.
12	E	Economic stability.	15	P	Health care access.
8	E	Debt.	27	P	Health access- health coverage.
3	E	Economic stability- debt.	33	P	Health care access + quality (cultural / linguistic competency).

EMAIL Request to OMC Stakeholders

From: Lacey Kane

Date: March 8th, 2024

To: Community Leaders, Providers, Hospital Board and Staff

Subject: 2024 Community Health Needs Assessment Online Feedback Survey

Over the next few months, **Olathe Medical Center (OMC)** will be working with other area providers to update the 2021 Community Health Needs Assessment (CHNA) for Johnson County, KS. We are seeking input from OMC community members regarding the healthcare needs to complete the 2024 CHNA. The goal of this assessment update is to understand progress in addressing community health needs cited in 2021, 2018 and 2015 reports and to collect up-to-date community health perceptions and ideas.

VVV Consultants LLC, an independent healthcare consulting firm from Olathe, KS, has been retained to conduct this countywide research. All responses will be confidential.

To gather community feedback, a short confidential online survey has been developed. We hope you find a few mins to participate to provide feedback for this community event by utilizing the link below.

LINK: https://www.surveymonkey.com/r/CHNA2024_OMCOnlineSurvey

All community residents and business leaders are encouraged to complete the 2021 CHNA online survey by **Friday, April 12th, 2024**. In addition, please **HOLD the date** for the Town Hall meeting scheduled for **Thursday, May 9th**, for Breakfast from **8:30 a.m. - 10:00 a.m.** Please stay on the lookout for more information to come soon.

If you have any questions regarding the CHNA survey or activities, please direct them to Lacey Kane at lacey.kane@olathehealth.org

Thanks in advance for your time and support!

Email Request: Cut & Paste into your email blind cc to community roster emails

From: Jason Hannagan

Date: March 5th, 2024

To: Community Leaders, Providers, Hospital Board and Staff

Subject: 2024 Community Health Needs Assessment Online Feedback Survey

Olathe Medical Center (OMC), now part of The University of Kansas Health System; will be partnering with other community health providers to update the 2021 Community Health Needs Assessment (CHNA) for Olathe, KS. Our facility has again contracted VVV Consultants to complete this work over the next few months.

Your feedback and suggestions regarding community health delivery are especially important to collect to be able to complete the 2024 Community Health Needs Assessment and implementation plan updates.

To accomplish this work, a short online survey has been developed. Please utilize the link below to complete this survey.

LINK: https://www.surveymonkey.com/r/CHNA2024_OMCOnlineSurvey

This online survey must be completed by **April 12th, 2024.** All responses are confidential.

Please **hold the date** for a community Town Hall scheduled for Thursday, **May 9th, 2024, for breakfast from 7:30-9:00am** to discuss research findings. If possible, we encourage you to attend. Stay tuned for further details! More information on this will be provided shortly.

Thank you in advance for your time and support in participating with this important request.

If you have any questions regarding the CHNA survey or activities, please direct them to Lacey Kane at lkane5@kumc.edu.

Olathe Medical Center Begins 2024 Community Health Needs Assessment

Media Release: 03/05/24

Local Contact: Lacey Kane

Olathe Medical Center (OMC), now part of The University of Kansas Health, will be working with area providers over the next few months to update the 2021 Johnson County Community Health Needs Assessment (CHNA). We are seeking input from OMC community members regarding the healthcare needs in the community in order to complete the 2024 CHNA.

The goal of this assessment update is to understand progress in addressing community health needs cited in the 2021, 2018 and 2015 assessment reports while collecting up-to-date community health perceptions and ideas. VVV Consultants LLC, an independent research firm from Olathe KS, has been retained to conduct this community research.

A brief community survey has been developed to accomplish this work. If you would like to participate, please visit our website and social media sites to obtain the link to the survey. You may also utilize the QR code below with your smartphone.



All community residents and business leaders are encouraged to complete the 2024 CHNA online survey by **Friday, April 12th**. In addition, we ask that you please **HOLD the date** for the Town Hall meeting scheduled for **Thursday, May 9th**, for Breakfast from **7:30 a.m. - 9:00 a.m.** Thank you in advance for your time and support!

If you have any questions regarding the CHNA survey or activities, please direct them to Lacey Kane at lkane5@kumc.edu.

###

EMAIL #2 Request Message (Cut & Paste)

From: Lacey Kane

Date: 4/08/2024

To: Community Leaders, Providers and Hospital Board and Staff

Subject: 2024 CHNA Town Hall Scheduled – May 9th, 2024

Olathe Medical Center (OMC) will be hosting a 2024 Community Health Needs Assessment (CHNA) Town Hall on May 9th, 2024. The purpose of this meeting will be to review the community health indicators and gather feedback and opinions on key community needs.

All area community leaders and residents are encouraged to join us for conversation. This event will be held on **Thursday, May 9th, for Breakfast from 7:30 a.m. – 9:00 a.m. at the Olathe Health Education Center.**

It is imperative that you complete an RSVP to adequately prepare for this important meeting. We hope you find the time to attend this event and RSVP using the link below.

LINK: https://www.surveymonkey.com/r/CHNA2024_TownHallRSVP_OMC

If you have any questions regarding CHNA activities, email call Lacey Kane at
lacey.kane@olathehealth.org

Thanks in advance for your time and support!

Olathe Medical Center Schedules Local Community Health Needs Assessment Town Hall

Media Release: 04/08/24

Local Contact: Lacey Kane

Olathe Medical Center (OMC) has scheduled a Town Hall meeting for the 2024 Community Health Needs Assessment on **Thursday, May 9th, from 7:30 a.m. – 9:00 a.m.** at the Olathe Education Center. During this event, we will review current community health indicators and gather feedback and opinions on key community health needs for OMC's service area.

Those who wish to attend must RSVP to adequately prepare for this important meeting. You may do this by visiting the Olathe Medical Center website and social media sites to access and complete the RSVP link. You may also utilize the QR code below with your smartphone to complete your RSVP.



We hope you can find the time to join us for this important event on May 9th, 2024. *Thank you in advance for your time and support!*

If you have any questions regarding CHNA activities, please contact Lacey Kane at lacey.kane@olathehealth.org

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d.) Primary Research Detail

[VVV Consultants LLC]

CHNA 2024 Community Feedback: Johnson County, KS (N=448)						
ID	Zip	Rating	c1	c2	c3	Q10. Being this a strong topic of interest, do you have any thoughts, ideas, and/or specific suggestions (food, housing, transportation, support, etc.) to address these 5 social determinants to improve our community health? (Please Be Specific)
1092	66210	Good	ACC	EDU		You can provide everything, however, you cannot make anyone participate. If it is not free, many will not come and some will not come because it is free. Can only strive to do our best to educate. Trusted information is vital.
1433	66061	Very Good	ACC	FINA	MH	Addressing access to affordable and timely mental health care services would be high on my list!
1409	66061	Poor	ACC	NUTR	ALT	Better access to health foods and "alternative" healthcare.
1115	66062	Average	CC	MH	SH	Community facilitated job sharing with child care. More access/more providers for mental health at schools (more before/after schools appointments). Increased promotion of meet up groups to help with socialization.
1374	66223	Average	CLIN	SH	INSU	I think for some people their health is lower on the importance scale. Not because they don't care but because other issues are a higher priority. Having health clinics in schools to offer care for those you can't get to a doctor, offer more health insurance clinic for people to sign up and learn about their care. Medical care needs to be included in any other social services someone might be getting.
1436	66062	Good	COLLAB	ACC		There seems to be many small organizations helping people in these areas, but no central coordination for helping people in need.
1170	66083	Average	COLLAB	DRUG	HOME	I think we need to partner with Healing House of KCMO and start their program here in Johnson County. We have no viable programs here for long term living issues such as substance abuse, homelessness, and other problems that need long term care and support. These people fly under the radar in Johnson County. The only place to get help is in KC MO.
1437	66062	Very Good	COLLAB			More community wellness events and collaborative community partnerships to identify needs.
1305	66083	Good	COMM	AWARE		better communication as to where to even look or go
1065	66061	Good	COMM	EDU		I believe we need more platforms for honest and open dialogue on the challenges of community health care without fear of being silenced or cancelled if dialogue begins to address actual issues and challenges faced by health care system. Health care should not be limited to screenings and vaccinations. Being healthy includes a list of 100 other factors besides that yet those conversations are not encouraged.
1150	66061	Average	DRUG	HOUS		more drug abuse help and affordable housing for the poor and stop trying to make us like Lenexa and OP
1082	66013	Good	ECON	FINA	MH	Most of the county is not "low income," especially the southeastern portions, but mental health and senior services are still lacking.
1300	66061	Very Good	ECON	HOUS	NUTR	There are not enough community agencies ready/able to address SDOH needs. The economic stability is challenging especially since COVID, the cost of housing, food, transportation etc has drastically increased and income isn't going as far. Families are forced to choose between daily needs and paying for expensive healthcare. Transportation is a huge problem with driver shortages and creative solutions for combining rides for some agencies have created lengthy wait times for patients who are ill or debilitated, making it very difficult on them. Poor reimbursement rates for Medicaid cause post acute services to be unable to take this insurance, leaving the most vulnerable populations at risk of not receiving necessary services for good health care. Mental healthcare for lower income families has long wait times and limited options. Overall, we need more focus and funding for community resource agencies that assist with SDOH needs. We can't continue to screen for these needs and then not have any resources to help address them. The data and research is there to prove the benefits of addressing these needs but we need the resources to be able to do it justice. This needs to be a priority at the government level in order to make an impact in our community.
1013	66213	Good	ECON			Economic stability
1322	66061	Good	ECON			Johnson County, including Olathe, is widely different from very affluent to socially and economically disparaged. I think the people you need to hear from most may never get this survey since it is electronic.
1178	66083	Average	EDU	ACC		We need to realize there are a lot of people who have low capacities for learning. They need education in simple terms. Instead of just handing out free care we need to educate people.
1042	66062	Average	EDU	NUTR	MH	Onsite Educational Programs: Partner with local daycares, schools, and community centers to provide onsite educational materials and wellness information. This could include workshops, presentations and interactive sessions on topics such as nutrition, exercise, mental health awareness, and disease prevention. Health and Wellness Days: Organize health and wellness days, featuring activities like health screenings, fitness classes, cooking demonstrations, and mindfulness sessions. Invite healthcare professionals to provide guidance and answer questions related to healthy living. Financial Assistance Programs: Establish programs or partnerships with healthcare providers, clinics, and hospitals to offer financial assistance or sliding scale fees for low-income individuals and families. This could involve subsidies, discounts, or payment plans tailored to individuals' financial circumstances.
1249	66062	Good	EDU	SAFE	CLIN	1-Educating parents not only children of non spiking Engles people. 2-Having more safety net clinics that also have specialist.
1050	66221	Good	EDU	SERV	INSU	Educate public about how to access services, regardless of their insurance / economic status.
1159	66062	Good	EDU	TRAN	NUTR	Lack of education on health and wellness, lack of available transportation to get to proper specialists, inability to pay for healthier foods and the high incidence of a very high calorie diet and sedentary lifestyle along with the exposures to the farming chemicals and smoking.
1422	66006	Average	EDU			Opportunities for education and conversation around these areas.
1314	66062	Good	FAC	HOME		We need a permanent facility for people who experience homelessness.

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1321	66062	Very Good	FINA	HOUS	ACC	Housing costs are skyrocketing! Apts and rentals are astronomical and you families can not afford to live in these due to income limitations. Affordable housing is unheard of anymore. You can't find something < \$300k and many young families can not afford a \$300k mortgage.
1186	66030	Average	FINA	NUTR	WAG	The cost of living and food is making each family struggle. Even employees that do not get paid enough or get raises this has an impact on. We need to do better as a whole.
1377	66062	Poor	FINA	SERV		Reduce costs for healthcare. Innovate and experiment with new models for service delivery.
1419	66083	Good	FINA	SERV		The cost of healthcare is outrageous. Not knowing how much a visit is going to cost until you are blindsided with a bill a month later is prohibiting people from seeking care.
1127	66204	Good	FINA	TRAN	SCH	Cost of living it too high, I have many patients deciding between health procedures/medication or rent/food. Transportation is lacking, especially south Johnson County and out in rural areas - Franklin and Miami Counties. We have patients that live there that come out to Olathe to receive care, but no transportation makes it hard to make appointments.
1049	66210	Very Good	FINA	TRAN	SERV	Affordable transportation to mental and medical health services.
1022	66062	Good	FINA	TRAN	WAIT	Access is a huge burden. Additional low-cost transportation services could allow patients to access some of the existing services in our community. Microtransit, Z-trip, 1010 taxi, etc are very limited on drivers and patients often have to wait hours, missing appointments or taking a whole day to get groceries.
1330	66083	Average	FINA			The stress of affording to live in Johnson County due to constantly increasing property taxes is causing family to scramble to afford to live at their current addresses taking on additional jobs just to try to make it. This makes it incredibly hard to prioritize healthcare when simply trying to keep head above water.
1136	66226	Average	FIT	FINA	POV	While exercise facilities exist, they are far too expensive for people with lower incomes struggling just to survive. We need facilities with lower costs - and NOT just for families! Single senior citizens are overlooked too.
1244	66061	Good	FUND	SPRT	HOUS	State and County need to set aside funds that are to only be used to support the areas needed. Put rent control into place as they do in some large cities. The rents have gotten so high the average person can barely afford it.
1382	66061	Good	HOUS	FINA	ADOL	Work on planning housing that is affordable and allows for greater interaction among residents. Provide more community opportunities for our teens.
1194	66061	Good	HOUS	FINA	CHRON	Creating affordable housing to reduce household cost-burden. Increasing access to wellness and chronic disease management to reduce need for health care interventions. Providing more mental health resources for vulnerable populations.
1139	66209	Good	HOUS	FINA	EDU	More affordable housing in southern Johnson County meaning \$250k or less (affordable housing does not start at \$400k. Farmers Market in south Johnson County (aware of the one in Olathe- but no others this side of 435) Better access to quality mental health services for the late teen/early adult population Offer classes on financial readiness focused on the late teen/early adult population (credit card and balanced spending, investing/retirement) instead of blowing through all of their money
1295	66061	Very Good	HOUS	FINA	HOME	Affordable housing/elimination of homelessness should be a higher priority for our elected officials.
1272	66062	Very Good	HOUS	FINA	POV	Affordable housing for low income single adults.
1118	66226	Very Good	HOUS	FINA		We need cheaper housing. We have none available in our area
1267	66062	Very Good	HOUS	NUTR	FINA	Lack of housing security due to fast rising housing costs coupled with the 20+% rise in food costs is likely having a negative impact on families on the lower rungs of the socioeconomic ladder.
1104	66061	Average	HOUS	NUTR	TRAN	Start with the basics of ensuring housing, food, utilities, transportation. Move to child care, preventative care, schools and health education. Finally add in disease management. At every level, success will be seen by meeting the criteria before it.
1276	66061	Very Good	HOUS	POV	NUTR	1. There are a lot of empty buildings around the area - could any of them be converted to support low income housing that is appropriately low income (\$800 - 1000 a month is not reasonable for most of those individuals). 2. I know that in Olathe we have a decent sized community garden, but what about a program similar to a co-op that community members could join and donate backyard garden fresh veggies/fruit, eggs, etc. to folks who are in need (similar to food pantry pickups)?
1246	66062	Good	HOUS	STFF	FF	Require each apartment complex developer/owner to allocate a small portion for rent assisted units. Increase staffing at doctor offices and require 24 hour callbacks.
1423		Very Good	INSU	ACC	PREV	Expand Medicaid, so they can have access to preventive care since many families cannot afford health insurance.
1235	66062	Good	INSU	ACC	SERV	Expand Medicaid in Kansas. It's a simple way to provide access to care to those who fall in the insurance gap. It's time...we've waited far too long to do this.
1426	66062	Good	INSU	ACC		Expand Medicaid
1339	66210	Good	INSU	HOUS		expand medicaid in KS, more affordable housing, more frequent busses on routes
1253	66215	Poor	INSU	SPEC		Expand Medicaid. Get more specialists here
1438	66061	Very Good	INSU	TRAN	FINA	Lack of health insurance and lack of reliable transportation are barriers to health care. A dedicated, low-cost, on demand transportation service could be helpful to those without reliable transportation.
1444	66062	Average	MH	EMER		Johnson county mental health needs to establish a emergency mental health for those who need involuntary committal.
1014	66061	Average	MH	FINA	ACC	Need more mental health facilities that are affordable. Need to be able to get in to see a doctor in a reasonable amount of time.

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1119	66223	Good	MH	RESO	FINA	Access to mental health resources that are affordable and covered by insurance is difficult. Mental health is not a low income issue, cost affects middle income families as well. Support groups are needed as well as within the community, neighborhoods, and for families that deal with issue like substance abuse that compound these issues. There is almost nowhere to turn for support in dealing with a family member's alcohol abuse.
1221	66061	Good	MRKT	AWARE		Publicize options available better
1256	66227	Good	MRKT	STFF		Advertise volunteer events and jobs, offer entry level jobs to school of nursing students and other medical students. Many medical students don't want to work in a hospital but would consider working somewhere to help others
1209	66061	Very Good	NH	HH	INSU	Our neighbor Bill has suddenly had multiple health issues requiring treatment from several different health care specialties. His aging spouse has worn herself out trying to coordinate his care. And at times just does not get prompt replies or responses to her husband's needs. I think her frustration speaks to the need of establishing case ombuds personnel that follow a complex case and help patient caregivers migrate the complexities of health care systems, insurance and medical staff care.
1107		Average	NH	RESO	SERV	Elderly, demented or significantly mentally impaired patients who are not safe to live alone are out there without help and/or resources. I don't know how to fix this, but this is becoming a crisis with the baby boomer generation.
1312	66221	Very Good	NH	SAFE		4. Neighborhood and Environment- I feel with some of the aging Neighborhoods it makes sense to spend time ensuring safety of sidewalks and updating parks to facilitate community health.
1375	66030	Good	NUTR	EDU	ALT	Better nutrition (TRUTHFUL nutritional educational services NO Sugar, LIMITED Carbs, No Processed foods) and better access to Non Pharma Approaches to medical care
1399	66061	Good	NUTR	EDU	HOUS	1) Work with local food pantries to get both nutrition education and healthy food options to the underserved community 2)Work with Olathe Housing Authority, Habitat For Humanity, etc to bring more affordable housing to the area
1203	66062	Very Good	NUTR	EDU	PREV	Increase personal responsibility and how it directly relates to health outcomes (food choices, lack of activity, non-compliance with medical advice/orders, etc.).
1144	66062	Average	NUTR	FINA		Food prices are increasing out of proportion to inflation. Any work that can be done to reduce food costs would help the community.
1072	66212	Very Good	OTHR	INSU		Our Kansas Legislature needs to stop bullying the Trans community and people seeking abortions. I believe the happiest communities are those where individuals can be authentically themselves. Medical decisions need to be made by patients and their doctors and not the government. If the KS Leg wants to do something helpful, they should expand Medicaid and other social services to take care of our most vulnerable neighbors.
1306	66216	Very Good	OTHR			Need to talk to the people having struggles with these SDoH. Hear what they specifically are struggling with the most. I can guess what they are missing/need help with, but I am doing ok, so I will probably guess wrong. Ask THEM.
1073	66062	Good	OWN			Johnson County is the haves vs have nots. I do not see the people needing help getting it from anyone. In one of the wealthiest counties in the country, the lacking of the above 5 areas is not something that the health system here at KU can control. I believe even making inroads will be difficult due to just how many people are barely making it that they are worried to miss a day of work to see a doctor because they will be fired.
1281	66061	Very Good	PREV	DOH	NH	City of Olathe used to, or may still, have a Wellness Fair for employees. At this event, benefits representatives and local providers of different types of care would show up in order to discuss what services were offered. Olathe Med would also send resources for skin cancer screening, biometrics, and education on preventative health. Is anything offered like this within either Johnson County or Olathe? There's a huge bubble of aging population, while there's also a diminishing supply of assisted living beds and workers. Folks will need to aid their parents at home if the trend continues, which will result in a broader need for mobile assets and education.
1036	66213	Average	PSY	TELE	CLIN	mobile psych clinics -- take the clinic to the people mobile psych case management at those clinics
1058	66061	Good	QUAL			This is an ongoing problem everywhere.
1217	66061	Very Good	QUAL			Your doing a great job. i am no help
1051	66061	Average	REC	MH	NUTR	More access to safe walking trails/outdoor activities (non-club), improved access to mental health providers, better access to healthy food choices-- there are hardly any restaurants or establishments in Olathe the offer healthier food options.
1091	66083	Very Good	REC	QUAL		Improve walking trails/ make available in Spring Hill
1397	66083	Good	RESO	COLLAB	SERV	Community partners can be very impactful in vetting and delivering resources to families to assist with these issues. Addressing and improving social determinants in Olathe is one of the primary goals of the Olathe Firefighters Outreach.
1166	66030	Poor	SCH	TRAV	PEDS	Families are having to drive to far for clinic appointments, procedures, and in patient's stays all the way on Missouri side to go to Children's Mercy. There needs to be Children's hospital closer to home for Kansas Residents. The community wants a children's hospital in Kansas!
1393		Good	SCREE	NUTR	SPRT	Screen for food insecurity and other social drivers - and refer to community resources. Prescriptive pantries or other food/nutrition supports at clinics and health systems.
1442	66061	Very Good	SERV	ACC		Community understanding and involvement in addressing social determinants is helpful.
1251		Average	SERV	SCREE	EDU	Provide the community services Olathe Health used to. We could become the center for services, screenings, education, fitness and nutrition like we used to be.
1003	66062	Good	SH	ACC	RESO	Programs through the health system taught in the schools starting in kindergarten to teach children how to access, use appropriately, resources for food, housing, transportation available.
1273	66061	Good	SH	NUTR	RESO	Make school lunches free for children. Provide additional resources.

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1414	66219	Good	SPRT	HOUS	FINA	For the people we support, we need more health providers that accept Medicaid, affordable housing is a big issue as they have limited resources. Transportation to access services needs to be a priority as the people we support don't have the ability to drive.
1260	66062	Average	SPRT			More support from community hospitals
1097	66061	Very Good	STFF			Need more staff
1269	66062	Average	TRAN	ACC	RESO	Lack of transportation of hard. Accessing health resources is costly
1415	66061	Very Good	TRAN	EDU		Address transportation needs and Improve upon education about navigating the healthcare system.
1211	66219	Very Good	TRAN	HOUS	FINA	We need more transportation options in certain areas of the county. And more help with housing- cost of rent is skyrocketing and people are losing their homes because of it.
1389	66061	Very Good	TRAN	NH	ACC	Having some form of public transit for the elderly or poor might be good.
1080	66030	Good	TRAN	NH	DRUG	Transportation for the elderly that do not have access to computers to set up rides. Many times physical health is jeopardized by their mental issues or substance /alcohol abuse.
1432	66061	Good	TRAN	SERV		Additional transportation options, stronger partnerships to address community issues.
1223	66061	Very Good	TRAN	SH	EDU	Community bus line, lack of education in school
1383	66030	Very Good	TRAN			Johnson County has a very weak public transportation system. It's generally only useful when it's ubiquitous and capacity has to lead demand. With a layout designed for cars, very few people have services within their immediate surroundings.

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ID	Zip	Rating	c1	c2	c3	Q8. In your opinion, what are the root causes of "poor health" in our community? Other (Be Specific)
1440	66204	Average	ACC	QUAL	WAIT	Access to quality care in a timely manner
1307	66061	Good	AWARE	EDU		Lack of awareness for programs
1280	66062	Average	DENT	POV		Lack of dental care for low income adults
1022	66062	Good	EDU	ACC	AWARE	Lack of knowledge - how to access, general health and wellness
1065	66061	Good	EDU	AWARE		Lack of open dialogue about what it actually means to be healthy. When we fail to connect the dots for ourselves and our patients, we fail to do more than put out fires. We need to translate what we know to be true for health and promote that community wide.
1005	66221	Good	EDU			Health illiteracy
1236		Very Good	FINA	INSU		Expense even w insurance
1251		Average	FINA	PREV	SERV	Can't afford healthcare services or preventive care
1237	66210	Average	FINA	SERV		Cost. People aren't being paid near enough to afford basic healthcare.
1127	66204	Good	FINA			Cost of living is too high, health needs are put on back burner
1377	66062	Poor	FINA			Excessive cost of health care.
1269	66062	Average	FINA			Health is expensive
1170	66083	Average	FINA			High cost of healthcare.
1343	66030	Very Good	FINA			Lack of money
1267	66062	Very Good	HOME	HOUS	FINA	Homelessness due to high housing costs.
1258	66085	Good	IM	SPEC	ACC	Need more Internal Med & Specialists in South Johnson County.
1288	66061	Very Poor	INSU	ALT		no coverage for functional medicine
1104	66061	Average	MAN	PREV	EDU	Disease management/health care education
1119	66223	Good	MH	INSU	NUTR	Mental Health care such as psychologists and psychiatry should be fully covered by insurance. Our food industry is not concerned with people's health. They are concerned with making money. There are too many additives, and preservatives in food and the cost of organic food is higher.
1249	66062	Good	NUTR	OWN		Culture. Eating habits are self destructive in the US.
1374	66223	Average	OTHR			ACE's
1223	66061	Very Good	OWN			Lack of motivation
1165	66062	Poor	QUAL			poor reputation, because of that I would seek out care from another area
1039	66207	Good	SPEC	WAIT	ACC	getting into specialists in a timely manner
1375	66030	Good	SPRT	MH		De ay of family relationships and social media mental health

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1357	66215	Good	ACC	CLIN		Access to in network urgent care in south JoCo
1022	66062	Good	ACC	COLLAB		Additional access is in my opinion the most important. Our mobile programs are currently working on expanding to meet that need in collaboration with PD, JCMH, HPC, and other community partners.
1139	66209	Good	ALT	NUTR	EDU	Functional Health that focuses not on pushing meds but through healthier eating and vitamin and minerals . For example not using statins to lower cholesterol (because of the increased risk of dementia or Alzheimers) but teach patients how to lower cholesterol with OTC vitamins and minerals and diet. Show them and teach not just tell it during an office visit
1282	66061	Good	AWARE	ACC		not sure, may not know about what is available
1050	66221	Good	AWARE	RESO		Awareness of what resources are available.
1142		Good	CARD	PREV	EDU	Cardiology Wellness and Prevention Education
1097	66061	Very Good	CLIN	FINA		Hospital should offer a free clinic
1073	66062	Good	CLIN	MH	DRUG	Clinics opened in at risk communities. Food banks in at risk communities. Mental health/drug and alcohol abuse/familial abuse assistance programs with language appropriate resources.
1183	66018	Good	CLIN	PRIM	SCH	More clinics and primary care especially where there is growth in the community. Strongly thinking about switching primary care drs because there is one in DeSoto not affiliated with KU but closer to home and has more flexible scheduling.
1374	66223	Average	CLIN	SH		health clinics in schools
1306	66216	Very Good	CLIN	STFF	REF	pop up wellness clinics? Could be staffed with an NP, RN, MA, Dietician, Social Worker. Help folks get caught up on immunizations, routine screenings, referrals to specialists and aid programs. Have Harvesters on site with info, someone to help with ACA sign ups.
1391	66061	Very Good	COUN	MH		More counselors for mental health.
1346	66203	Very Good	COUN	MH		New counseling and crisis mental health services.
1280	66062	Average	DENT	FINA	THER	Free/sliding scale dental care for low income adults. Group therapy/art therapy offerings. Free swim lessons for low income children and adults for water safety.
1322	66061	Good	DENT	SH	COLLAB	Mobile units to meet people where they are if they can't take of work to come to healthcare. Mobile dentistry units - this would be huge, especially for kids. Could partner with schools and see kids who need cleanings.
1092	66210	Good	DIAB	EDU	NUTR	Diabetes education; Nutrition education; ETOH/drug education;
1409	66061	Poor	DOCS	CHIR	ALT	Easier access to "alternative" healthcare providers. Chiropractors, Acupuncturist and Functional Medicine to start!
1178	66083	Average	DOH	EDU	OWN	More health fairs with professionals who can guide people. Set up a plan of care with goals and specific dates to meet them. Make them accountable for their health.
1080	66030	Good	DOH	EDU		Health fairs
1281	66061	Very Good	DOH	RESO	EDU	City of Olathe used to, or may still, have a Wellness Fair for employees. At this event, benefits representatives and local providers of different types of care would show up in order to discuss what services were offered. Olathe Med would also send resources for skin cancer screening, biometrics, and education on preventative health. Is anything offered like this within either Johnson County or Olathe? There's a huge bubble of aging population, while there's also a diminishing supply of assisted living beds and workers. Folks will need to aid their parents at home if the trend continues, which will result in a broader need for mobile assets and education.
1408	66030	Average	DRUG	EDU	ADOL	more drug education for teens
1444	66062	Average	EDU	AWARE	FEM	More education and awareness for women's access to birth control and abortions. The voters voted to have access to abortion not for the legislature to continue to chip away at women's rights.
1249	66062	Good	EDU	EMER	PRIM	A program to educate patient where to go depending if their particular health needs. Like ER, urgent care, call the PCP... etc
1065	66061	Good	EDU	GAS	OBG	1. Community education: RED-S in young students and student athletes (and others) 2. Community education: gut health and importance of mitochondrial support and microbiome support (for pretty much everything related to health and well-being) 3. Improved access to care for pregnancy and postpartum related concerns 4. community programs for Pregnancy support for prevention of pre-term births 5. Community education on stress resiliency 6. Community education on sleep hygiene 7. Community education about effects of social media and screen time on mental health
1305	66083	Good	EDU	NUTR	FIT	education classes on nutrition, exercise classes for elderly
1203	66062	Very Good	EDU	NUTR	RESO	Emphasize programs which help inform and educate people about controllable factors (food choice, activity level, medical advice compliance, etc.).
1290	66062	Average	EDU	SH		education on childrens health and wellness
1154	66061	Very Good	EDU	SH		infuse education into the schools starting in elementary school. We need to educate and foster independence in our youth where so much influence is coming from social media and distracted/detached parents
1159	66062	Good	EDU			Health education
1136	66226	Average	FINA	FIT		Lower cost exercise facilities.
1127	66204	Good	FINA	HOUS	FUND	financial assistance for housing. Johnson county only has a utility assistance program, but their rental assistance program is only covers certain parts of the county, Olathe residents are experiencing financial hardships. Funding at service places like catholic charities, el centro, salvation army are limited (often to only families) affordable housing is a major issue. The housing authority only opens their waitlist once a year but even if you get on it, you have to wait 2-3 years before even possibly getting a place
1014	66061	Average	FINA	MH		First and foremost, affordable mental health care.
1194	66061	Good	FINA	MH		Low-cost wellness visits for vulnerable populations. Include mental health assessment and teach mental health self-care toolkit during or in addition to these visits.
1330	66083	Average	FINA	NUTR	FIT	Affordable healthy eating & exercise options - community centers that are lower cost

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1254	66061	Very Good	FINA	POV	SPRT	Lower cost of community center for families that meet low income guidelines
1377	66062	Poor	FINA	SERV	INSU	Low cost services. Access to affordable health insurance.
1244	66061	Good	FINA	TRAN	EDU	Improved and minimal cost public transportation so people can get to appointments. Community Health programs that are hosted monthly that offer different health topics and healthcare personnel there that can assist with education, take blood pressures do fingerstick accuchecks etc.
1104	66061	Average	FINA	TRAN	EDU	Would love to see inexpensive transportation to facilities or programs. Education on basic health care to chronic health care management. Kind of a "school" to education patients on caring for themselves.
1049	66210	Very Good	FINA	TRAN	MH	Affordable transportation, increase in mental health services
1296	66030	Very Good	FIT	OBES	NUTR	Fitness programs - America is obese and we need ready access to healthy eating, fitness, education, weight management, and this should be paid for by the insurance as preventative measures to keep healthy.
1077	66223	Very Good	FIT			fitness reimbursement
1010		Good	GER	PSY	HOUS	More Geriatric psych, more affordable housing
1156		Very Good	HH	IP		More hospital at home options instead of inpatient care.
1246	66062	Good	HH	TELE		Focus on home health and telehealth.
1129	66212	Very Good	HOME	INSU	PREV	Addressing healthcare needs for homeless or people without insurance, particularly preventative care.
1284	66216	Good	HOME	MH	DRUG	The homeless crisis is increasing. We need to do a better job with mental health and substance abuse centers.
1295	66061	Very Good	HOME			Homeless outreach
1267	66062	Very Good	HOUS	NUTR	SPRT	Some type of housing and/or food support for families struggling with both given their much higher costs. Of the two, housing security would be the higher priority.
1025	66030	Average	HRS	CLIN		Better hours for clinics and urgent care facilities and open 7 days a week
1437	66062	Very Good	INSU	ACC		Community Advocate Job Titles to help place people in the community to the right care that accepts their insurance.
1170	66083	Average	INSU	FINA	DRUG	Access for those who lack insurance, cannot afford healthcare, and the homeless and substance abuse care.
1419	66083	Good	IP	MH		Inpatient mental healthcare
1256	66227	Good	MAN			More case managers they are stretched too thin
1236		Very Good	MH	ACC		More mental health, easier to access,
1111	66030	Good	MH	ADOL		mental health for all, esp youth
1339	66210	Good	MH	CLIN	THER	additional mental health clinics, therapists.
1286	66030	Average	MH	DRUG	EDU	Mental health, drug addiction - education
1057	66062	Good	MH	DRUG	SPRT	More mental health and substance abuse programs available
1150	66061	Average	MH	DRUG	WAG	behavior health, drug addictions and pay increase for these health care providers
1215	66062	Good	MH	DRUG		mental health and substance abuse programs
1211	66219	Very Good	MH	EDU		Need more mental health programs.
1438	66061	Very Good	MH	PSY	ADOL	Mental health crisis stabilization center and psychiatric adolescent care.
1433	66061	Very Good	MH	SERV		Mental health care services at local libraries or other public places.
1308	66061	Average	MH	SH	THER	Employ licensed mental health professionals in all public school buildings (K-12) to increase access to qualified therapy providers throughout the school day and remove common cost/transportation barriers.
1039	66207	Good	MH	SPRT	COUN	affordable mental health support like counseling, coping skills, etc.
1414	66219	Good	MH	SPRT	DOCS	Mental and behavioral health supports, programs and providers
1119	66223	Good	MH	SPRT	DRUG	Mental health programs. Programs to deal with family members who abuse substances.
1354	66062	Good	MH	SPRT		More mental health programs
1389	66061	Very Good	MH			Improved mental health facilities.
1095	66213	Average	MH			mental health
1291	66061	Good	MH			Mental Health
1334	66061	Good	MH			Mental Health
1431	66207	Good	MH			Mental health
1118	66226	Very Good	MH			Mental health care
1107		Average	NH	MH		Care for the elderly, mentally impaired, demented and confused patients.
1375	66030	Good	NH	NUTR	EDU	Sr Care, Nutritional Education
1221	66061	Good	NH			Senior programs
1288	66061	Very Poor	NUTR	ALT	PREV	nutrition and functional medicine. Wellness and prevention rather than treating conditions that are preventable.
1399	66061	Good	NUTR	EDU	PREV	Can we bring CPR, Nutrition Education and Health * & Wellness classes to Olathe High Schools, Non-Profits (like Catholic Charities and the Salvation Army) and Businesses?
1042	66062	Average	NUTR	FIT		Nutrition programs with recipes & group fitness activities in the community to try new opportunities.
1273	66061	Good	NUTR	PREV	FINA	Food assistance programs. Free school lunches. Wellness and routine visits should be free or very inexpensive so people will not avoid going due to not being able to afford. Taking care of health should be rewarded. More community gardens and activities centered around doing healthy things.
1276	66061	Very Good	OBES	SPRT	NUTR	Weight loss support would be helpful - from being able to do meal planning with a dietician to planning workouts with a trainer. There has been so much noise over the years that sometimes a person gets to the point that it's overwhelming to peel back to the basics of eating and working out - and then they don't start or don't stick with it.
1255	66030	Good	OBG	EDU		Maternal health awareness and postpartum services. Pregnancy assistance, and education even if the Pregnancy ends in a miscarriage or stillbirth.
1003	66062	Good	OTHR	POV	DOCS	A second Integrative mobile health unit would help, and more low income providers for healthcare
1251		Average	OTHR			All that were previously mentioned. Like Olathe Health used to provide.
1442	66061	Very Good	OTHR			Larger focus on the environment, to include recognizing climate change and the importance of sustainability initiatives.

CHNA 2024 Community Feedback: Johnson County, KS (N=448)						
ID	Zip	Rating	c1	c2	c3	Q13. What "new" community health programs should be created to meet current community health needs?
1208	66030	Very Good	OTHR			Spiritual well being
1260	66062	Average	PALL			Palliative care
1166	66030	Poor	PEDS	ACC		MORE CHILDREN SPECIALTIES
1243	66210	Very Good	PREV	EDU		A higher focus on preventative needs. Community focuses so much on treatment when issue arises and not enough on well-being to prevent these issues. Basically, well-being maintenance.
1269	66062	Average	PREV	FINA		Free wellness help
1382	66061	Good	PREV	MH		Preventative health care especially as it relates to mental health
1082	66013	Good	PRIM	INSU	MH	There needs to be more PCPs, especially those that take Medicare/Medicaid pts, and there absolutely needs to be more mental health specialists.
1187	66030	Poor	PRIM	SPEC		primary care and specialists closer to here.
1421	66062	Good	PSY	PEDS	GER	Psych beds, children and geri
1370	66061	Good	PSY	STFF		Acute Psychiatric Care in a facility designed to provide the care and by staff trained to provide it.
1415	66061	Very Good	PSY			Online psychiatry
1397	66083	Good	QUAL	SERV		I think increases Olathe's quality of life and ensuring its residents have their basic needs met should be a focus before adding a new service.
1369	66083	Average	REC	FIT		Build a community center in Spring Hill with a gym and pool to help the community achieve its fitness goals and be healthier.
1091	66083	Very Good	REC	SH	SERV	walking/ bike trails to connect neighborhoods to each other, the schools, and the town. Add additional library services, such as activities for children.
1018	66216	Good	SERV	EDU		Additional/new outreach and education to all community members regarding whole person wellness
1098	66061	Good	SERV	TRAN		health programs are great but those most in need have limited access due to transportation needs and often time commitment (working 2 jobs, etc)
1223	66061	Very Good	SH	EDU		JoCoMH seminars in schools, private and public
1272	66062	Very Good	SH	OBES	EDU	More programs in schools concerning the impact on your health by being overweight.
1258	66085	Good	SPRT	NUTR	FIT	Ongoing depression groups/support. More nutrition/exercise groups led by health system.
1189	66030	Very Good	SPRT			Assistance programs
1144	66062	Average	TRAN	EDU	POV	Transportation to and from school is a major problem in Olathe. This impacts access to education. A much better system is needed, including more bus routes and lower cost to families.
1046	66061	Average	TRAN	NH	SCH	Transportation for seniors to appointments
1235	66062	Good	TRAN	SERV	POV	Transportation options would be helpful to some of our under served populations.
1432	66061	Good	TRAN	SERV		Adequate transportation services for people to access services.

Olathe Medical Center (OMC), now part of The University of Kansas Health System, will partner with area providers have begun the process of updating a comprehensive community-wide 2024 Community Health Needs Assessment (CHNA) to identify unmet health needs. To gather current area feedback, a short online survey has been created to evaluate current community health needs and delivery. NOTE: Please consider your answers to the survey questions as it relates to ALL healthcare services in our community, including but not limited to our local hospital.

While your participation is voluntary and confidential, all community input is valued. Thank you for your immediate attention! CHNA 2024 online feedback deadline is April 12th, 2024.

1. In your opinion, how would you rate the "Overall Quality" of healthcare delivery in our community?

- Very Good Good Average Poor Very Poor

2. How would our community area residents rate each of the following health services?

	Very Good	Good	Fair	Poor	Very Poor
Ambulance Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chiropractors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dentists	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency Room	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eye Doctor/Optomtrist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family Planning Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Home Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospice/Palliative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Telehealth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. How would our community area residents rate each of the following health services?
(Continued)

	Very Good	Good	Fair	Poor	Very Poor
Inpatient Hospital Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nursing Home/Senior Living	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outpatient Hospital Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmacy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Primary Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Visiting Specialists	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



4. In your own words, what is the general perception of healthcare delivery for our community (i.e. hospitals, doctors, public health, etc.)? Be Specific.



5. In your opinion, are there healthcare services in our community/your neighborhood that you feel need to be improved, worked on and/or changed? (Please be specific)



6. From our past CHNA, a number of health needs were identified as priorities. Are any of these an ongoing problem for our community? Please select top three.

- | | |
|--|--|
| <input type="checkbox"/> Mental Health Services (Access, Provider, Treatment, Aftercare) | <input type="checkbox"/> Cost Transparency |
| <input type="checkbox"/> Drugs / Substance Abuse | <input type="checkbox"/> Cultural Competency |
| <input type="checkbox"/> Preventative Health / Wellness | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Drug / Alcohol Abuse | <input type="checkbox"/> Accepting Medicaid |
| <input type="checkbox"/> Affordable Housing | <input type="checkbox"/> Obesity (Fitness / Nutrition) |
| <input type="checkbox"/> Medicaid Expansion | <input type="checkbox"/> Food Insecurity |
| <input type="checkbox"/> Affordable Healthcare Services | <input type="checkbox"/> Violence / Abuse |
| <input type="checkbox"/> Chronic Disease Management | <input type="checkbox"/> Senior Care |
| <input type="checkbox"/> Mobile Health Services | <input type="checkbox"/> Healthcare Education |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Housing |
| <input type="checkbox"/> Homeless | |



7. Which past CHNA needs are NOW the "most pressing" for improvement? Please select top three.

- | | |
|--|--|
| <input type="checkbox"/> Mental Health Services (Access, Provider, Treatment, Aftercare) | <input type="checkbox"/> Cost Transparency |
| <input type="checkbox"/> Drugs / Substance Abuse | <input type="checkbox"/> Cultural Competency |
| <input type="checkbox"/> Preventative Health / Wellness | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Drug / Alcohol Abuse | <input type="checkbox"/> Accepting Medicaid |
| <input type="checkbox"/> Affordable Housing | <input type="checkbox"/> Obesity (Fitness / Nutrition) |
| <input type="checkbox"/> Medicaid Expansion | <input type="checkbox"/> Food Insecurity |
| <input type="checkbox"/> Affordable Healthcare Services | <input type="checkbox"/> Violence / Abuse |
| <input type="checkbox"/> Chronic Disease Management | <input type="checkbox"/> Senior Care |
| <input type="checkbox"/> Mobile Health Services | <input type="checkbox"/> Healthcare Education |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Housing |
| <input type="checkbox"/> Homeless | |



8. In your opinion, what are the root causes of "poor health" in our community? Please select top three.

- | | |
|--|--|
| <input type="checkbox"/> Chronic Disease Management | <input type="checkbox"/> Limited Access to Mental Health |
| <input type="checkbox"/> Lack of Health & Wellness | <input type="checkbox"/> Family Assistance Programs |
| <input type="checkbox"/> Lack of Nutrition / Access to Healthy Foods | <input type="checkbox"/> Lack of Health Insurance |
| <input type="checkbox"/> Lack of Exercise | <input type="checkbox"/> Neglect |
| <input type="checkbox"/> Limited Access to Primary Care | <input type="checkbox"/> Lack of Transportation |
| <input type="checkbox"/> Limited Access to Specialty Care | |

Other (Be Specific).



9. Community Health Readiness is vital. How would you rate each of the following?

	Very Good	Good	Fair	Poor	Very Poor
Behavioral/Mental Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency Preparedness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food and Nutrition Services/Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health Wellness Screenings/Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prenatal/Child Health Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance Use/Prevention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suicide Prevention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Violence/Abuse Prevention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Women's Wellness Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exercise Facilities / Walking Trails etc.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



10. Social Determinants are impacting healthcare delivery. These determinants include 1) Education Access and Quality, 2) Economic Stability, 3) Social / Community support, 4) Neighborhood / Environment, and 5) Access to Quality Health Services. Being this a strong topic of interest, do you have any thoughts, ideas, and/or specific suggestions (food, housing, transportation, support, etc.) to address these 5 social determinants to improve our community health? Be Specific

11. Over the past 2 years, did you or someone in your household receive healthcare services outside of your county?

Yes

No

If yes, please specify the services received

12. Access to care is vital. Are there enough providers/staff available at the right times to care for you and your community?

Yes

No

If NO, please specify what is needed where. Be specific.

13. What "new" community health programs should be created to meet current community health needs?

14. Are there any other health needs (listed below) that need to be discussed further at our upcoming CHNA Town Hall meeting? Please select all that apply.

- | | | |
|---|--|--|
| <input type="checkbox"/> Abuse/Violence | <input type="checkbox"/> Health Literacy | <input type="checkbox"/> Poverty |
| <input type="checkbox"/> Access to Health Education | <input type="checkbox"/> Heart Disease | <input type="checkbox"/> Preventative Health/Wellness |
| <input type="checkbox"/> Alcohol | <input type="checkbox"/> Housing | <input type="checkbox"/> Sexually Transmitted Diseases |
| <input type="checkbox"/> Alternative Medicine | <input type="checkbox"/> Lack of Providers/Qualified Staff | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Behavioral/Mental Health | <input type="checkbox"/> Lead Exposure | <input type="checkbox"/> Teen Pregnancy |
| <input type="checkbox"/> Breastfeeding Friendly Workplace | <input type="checkbox"/> Neglect | <input type="checkbox"/> Telehealth |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Nutrition | <input type="checkbox"/> Tobacco Use |
| <input type="checkbox"/> Care Coordination | <input type="checkbox"/> Obesity | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Occupational Medicine | <input type="checkbox"/> Vaccinations |
| <input type="checkbox"/> Drugs/Substance Abuse | <input type="checkbox"/> Ozone (Air) | <input type="checkbox"/> Water Quality |
| <input type="checkbox"/> Family Planning | <input type="checkbox"/> Physical Exercise | |

Other (Please specify).



15. For reporting purposes, are you involved in or are you a...? Please select all that apply.

- | | | |
|--|--|--|
| <input type="checkbox"/> Business/Merchant | <input type="checkbox"/> EMS/Emergency | <input type="checkbox"/> Mental Health |
| <input type="checkbox"/> Community Board Member | <input type="checkbox"/> Farmer/Rancher | <input type="checkbox"/> Other Health Professional |
| <input type="checkbox"/> Case Manager/Discharge Planner | <input type="checkbox"/> Hospital | <input type="checkbox"/> Parent/Caregiver |
| <input type="checkbox"/> Clergy | <input type="checkbox"/> Health Department | <input type="checkbox"/> Pharmacy/Clinic |
| <input type="checkbox"/> College/University | <input type="checkbox"/> Housing/Builder | <input type="checkbox"/> Media (Paper/TV/Radio) |
| <input type="checkbox"/> Consumer Advocate | <input type="checkbox"/> Insurance | <input type="checkbox"/> Senior Care |
| <input type="checkbox"/> Dentist/Eye Doctor/Chiropractor | <input type="checkbox"/> Labor | <input type="checkbox"/> Teacher/School Admin |
| <input type="checkbox"/> Elected Official - City/County | <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Veteran |

Other (Please specify).



16. For reporting analysis, please enter your 5-digit ZIP code.

e.) County Health Rankings & Roadmap Detail

[VVV Consultants LLC]

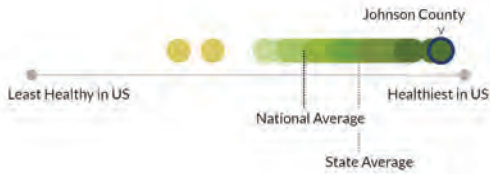
Johnson County



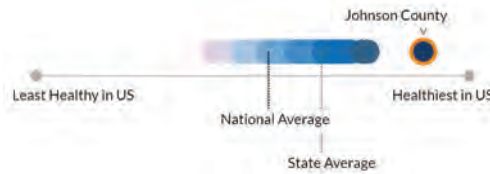
KANSAS HEALTH INSTITUTE

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Health Outcomes



Health Factors



khi.org
countyhealthrankings.org

Health Outcomes and Health Factors summaries replace the numerical ranking provided in previous years.

Each Kansas county with sufficient data is represented by a dot, placed on a continuum from least healthy to healthiest in the nation.

The color of each dot represents data-informed groupings of counties nationwide with similar Health Outcomes or Health Factors on the continuum.

Population: 619,195

	2020	2021	2022	2023	2024	Kansas 2024	U.S. 2024
Health Outcomes							
Length of life							
Premature death (years of potential life lost, per 100,000) ⁽¹⁾					4774	8079	7972
Quality of life							
% Reporting poor or fair health, adults ⁽¹⁾		11	12	8	10	14	14
Average number of poor physical health days, adults ⁽¹⁾		3	3	2	2.4	3.2	3.3
Average number of poor mental health days, adults ⁽¹⁾		3	4	4	4.1	5.0	4.8
% Low birthweight, <2,500 grams	6.5	6.6	6.5	6.5	7	7	8
Health Factors							
Health Behaviors							
% Smokers, adults ⁽¹⁾		13	12	11	10	16	15
% Obese, adults age 20 and older ⁽¹⁾			31	29	29	37	34
Food environment index, 0 (worst) to 10 (best)	8.6	8.8	9	9.1	9.3	7.1	7.7
% Physically inactive, adults age 20 and older ⁽¹⁾			19	15	16	23	23
% Access to exercise opportunities ⁽¹⁾				97	97	80	84
% Excessive drinking, adults ⁽¹⁾		20	21	20	20	20	18
% Driving deaths with alcohol-involvement	24	22	17	17	19	20	26
Sexually transmitted infection rate, per 100,000 population	341	362	357	351	369.4	506.1	495.5
Teen birth rate, per 1,000 females age 15-19 ⁽¹⁾					7	19	17
Clinical Care							
% Uninsured, population under age 65	7	7	7	6	7	11	10
Primary care physicians rate, per 100,000 population	123	124	123	124	119	78	75
Dentists rate, per 100,000 population	83	87	88	88	89	63	74
Mental health providers rate, per 100,000 population	230	242	255	272	294	237	314
Preventable hospital stays rate, per 100,000 Medicare enrollees	3919	3790	3335	2496	2357	2576	2681
% Mammography screening, Medicare females age 65-74	50	51	54	49	55	48	43
% Flu vaccinations, Medicare enrollees	58	61	61	65	61	47	46
Social & Economic Factors							
% High school completion, adults age 25 and older ⁽²⁾		96	96	96	97	92	89
% With some college, adults age 25-44	84	84	85	85	85	71	68
% Unemployed, population age 16 and older	2.9	2.8	5.1	2.7	2.3	2.7	3.7
% Children in poverty	6	6	4	5	5	14	16
Income inequality ratio, 80th to 20th percentile	4	3.9	3.9	3.8	3.8	4.4	4.9
% Children in single-parent households	21	16	16	15	15	21	25
Membership associations rate, per 10,000 population	8.6	8.6	8.5	8.3	8.4	13.2	9.1
Injury death rate, per 100,000 population ⁽¹⁾					55	82	80
Physical Environment							
Average daily density of fine particulate matter ⁽³⁾	9.8	6.9	7.8	6.2	6.2	6.7	7.4
Drinking water violations?	No	No	No	No	No		
% Households with severe housing problems	11	11	11	10	10	12	17
% Driving alone to work	85	85	81	77	74	78	72
% Long commute - driving alone	23	24	24	24	23	22	36

Empty cells: Shaded cells indicate measures were omitted due to methodology change⁽¹⁾, new additions⁽²⁾, or are unavailable due to low reliability.

⁽³⁾Source data have not been updated since the 2023 County Health Rankings Release.

2024

The annual *County Health Rankings & Roadmaps* data release provides a snapshot of the health of each county in two summaries: **Health Factors** (which measure issues that can shape the health outcomes) and **Health Outcomes** (which measure length and quality of life). Each county is placed on a continuum from least healthy to healthiest in the nation and categorized into a group of counties with similar Health Outcomes or Health Factors. The following tables illustrate the “drivers” for health of this county.

What do these drivers mean?

The drivers indicate the measures with the greatest impact on the health of the county. Drivers labeled with a green plus sign are measures on which the county performed particularly well compared to all counties nationwide. Those labeled with a red minus sign are measures which could be improved and may warrant additional attention.

Health Factors: Drivers with the greatest impact on health, Johnson County, KS - 2024

	Measure	Description	Factor Category	County Value	U.S. Value	Direction of Impact
1	Adult Smoking	Percentage of adults who are current smokers (age-adjusted).	Health Behaviors	10%	15%	+
2	Children in Poverty	Percentage of people under age 18 in poverty.	Social and Economic Environment	5%	16%	+
3	Some College	Percentage of adults ages 25-44 with some post-secondary education.	Social and Economic Environment	85%	68%	+
4	Unemployment	Percentage of population ages 16 and older unemployed but seeking work.	Social and Economic Environment	2.3%	3.7%	+
5	Adult Obesity	Percentage of the adult population (age 18 and older) that reports a body mass index (BMI) greater than or equal to 30 kg/m2 (age-adjusted).	Health Behaviors	29%	34%	+

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

	Measure	Description	Factor Category	County Value	U.S. Value	Direction of Impact
1	Premature Death	Years of potential life lost before age 75 per 100,000 population (age-adjusted).	Length of Life	4774	7972	+
2	Poor Physical Health Days	Average number of physically unhealthy days reported in past 30 days (age-adjusted).	Quality of Life	2.4	3.3	+
3	Poor Mental Health Days	Average number of mentally unhealthy days reported in past 30 days (age-adjusted).	Quality of Life	4.1	4.8	+
4	Poor or Fair Health	Percentage of adults reporting fair or poor health (age-adjusted).	Quality of Life	10%	14%	+
5	Low Birthweight	Percentage of live births with low birthweight (< 2,500 grams).	Quality of Life	7%	8%	+

N/A: Not applicable due to insufficient data.

+ Green Plus: Measure with a positive impact on a county’s health grouping.

- Red Minus: Measure with a negative impact on a county’s health grouping.

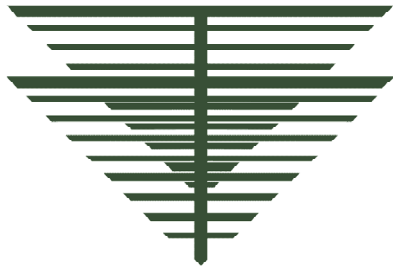
Technical Note: The U.S. values are provided as a point of reference. However, the drivers and direction of impact are determined by using the county value and the average across counties in the U.S. and then applying measure weights. Drivers are provided in order of impact on health for this year. Values have been rounded according to how they are presented on the County Health Rankings and Roadmaps website. For more information on the derivation of health groups, please visit: bit.ly/2024CHRzScores. For more information on data sources, year(s) of data and weights for measures, please visit bit.ly/2024CHRmeasures.



CONTINUE THE JOURNEY
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SCAN FOR MORE INFORMATION



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VVV Consultants LLC is an Olathe, KS-based “boutique” healthcare consulting firm specializing in Strategy; Research, and Business Development services. We partner with clients. Plan the Work; Work the Plan