



2012 Health Needs Assessment

Summit County Public Health

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PROJECT INTRODUCTION

In 2012, Corona Insights was retained by Summit County Public Health to conduct a community health needs assessment for Summit County, CO. Corona is pleased to present the final community health needs assessment findings. The following report contains all of the different components of that community health assessment. These components include:

- ➔ Review of Secondary Data
- ➔ Public Survey
- ➔ Spanish-Language Survey
- ➔ Public Focus Groups
- ➔ Spanish-Language Focus Groups
- ➔ Key-Informant Surveys

Each of these components can be viewed as a stand-alone document, but all components have been combined to form a complete and comprehensive community needs assessment. Both quantitative and qualitative methods were used to gather primary data for the needs assessment. Throughout the needs assessment, key findings for each component are presented.

Appendices for each specific component can be found at the end of the report. Each Appendix is given a corresponding alphabet letter, and has a title associated with the data being presented within. A detailed background, introduction and methodology is given for all reports (excluding the review of secondary data).

REVIEW OF SECONDARY DATA

INTRODUCTION

Corona Insights is pleased to present this report to Summit County on the results of our review of secondary data examined as part of the overall 2012 Health Needs Assessment.

REPORT LAYOUT

This report is divided up into a number of major sections, which include the following:

- ➔ **Summary of Key Findings** – This section contains a brief overview of the key findings and themes of the research.
- ➔ **Demographic Overview of Summit County** – In order to provide context for the health needs assessment, this first section includes basic demographic information about the residents of Summit County.
- ➔ **Detailed Research Findings** – This section contains findings from each of the various data sources examined in the process.

SUMMARY OF KEY FINDINGS

The following section includes detailed findings about various indicators of health in Summit County. This section provides a general overview of the key takeaways from that analysis.

DEMOGRAPHIC OVERVIEW OF SUMMIT COUNTY

Among residents of Summit County, there is a slightly higher percentage of men than women (55 percent vs. 45 percent), and the population tends to be slightly younger than in the state of Colorado as a whole (8 percent age 65 or older vs. 11 percent statewide). Similarly, like the rest of the state, a significant portion of Summit County's population (14 percent) is Hispanic, but this figure is considerably lower than the statewide incidence (21 percent).

Summit County's population tends to be very well-educated with roughly half of residents having a bachelor's degree or higher (compared to 36 percent statewide). In addition, roughly half of Summit County households are family households (with related house members), while the other half are largely comprised by single residents or households with unrelated house members.

Despite the relatively low incidence of seniors in Summit County today, this figure is expected to increase dramatically in the coming years. According to the U.S. Census Bureau, the number of seniors in Summit County is expected to increase by over 250 percent between 2010 and 2030.

POVERTY AND UNEMPLOYMENT

According to 2010 Census figures, roughly one in ten residents of Summit County lives in poverty, and roughly one-third of students are eligible for either free or reduced lunches. Furthermore, this percentage has been climbing steadily in the past decade; only 11 percent of students were eligible a decade ago.

According to this same data set, only four percent of Summit County residents were unemployed in 2010; however, it should be noted that 1) this calculation includes individuals who are not in the labor force such as children and seniors and 2) this does not account for any level of *under*employment that may exist. Anecdotal evidence suggests that many residents may be employed, but that their level of employment is considerably lower than they would prefer.

OVERALL HEALTH OUTCOMES

Overall, Summit County is considered to be a relatively healthy county in terms of mortality and morbidity rates as compared with other counties in Colorado. It is ranked behind only Pitkin, Douglas, Eagle, and Boulder Counties in terms of these factors. Furthermore, Summit County is ranked behind only Douglas, Pitkin, and Routt Counties in terms of a variety of health measures (such as prevalence of healthy behaviors, clinical care, social and economic factors, and physical environment).

INSURANCE AND ACCESS TO HEALTH CARE

A recent study by the Center for Health Administration at the University of Colorado suggests that Summit County has slightly higher rates of uninsured individuals than the rest of the state (17 percent vs. 16 percent), and has slightly lower participation rates in Medicaid programs. However, Summit County does

have a slightly higher participation rate among eligible CHP+ children compared to the rest of the state (77 percent vs. 63 percent).

As is common across the country, there are a number of disparities among populations with regard to health insurance. More specifically, the likelihood of a person having insurance increases with age, education level, and income. In addition, Hispanic individuals are less likely to have insurance than non-Hispanics, men are less likely than women, and married individuals are more likely to have insurance than single residents.

EMERGENCY DEPARTMENT AND HOSPITALIZATIONS

Given the heavily outdoor-oriented lifestyle of Summit County residents, it is not surprising that many of the most common reasons for emergency room visits are due to injury (concussions, bone fractures, etc.) or high-altitude effects. In addition, pneumonia and acute pancreatitis were both common diagnoses for inpatient admissions in early 2012.

LEADING CAUSES OF DEATH

Overall, Summit County's death rates are lower for nearly all common conditions compared to the State of Colorado as a whole. Heart disease and malignant neoplasms (cancer) are the leading causes of death in both areas, but the rates of each are considerably lower in Summit County than in the state as a whole. This could partially be due to the slightly younger age of County residents, but may also be due to the generally healthy lifestyle of many County residents compared to others in the state.

ILLNESS AND INJURY

Generally speaking, Summit County has lower rates of illnesses and injuries compared to the state as a whole in nearly all of the areas investigated for this report. For example, the county's rates of fall-related injuries, hepatitis, tuberculosis, cancer, heart disease, hypertension, and high cholesterol were all much lower than the state as a whole.

However, Summit County's incidence of preventive health care is generally lower than the rest of the state. For example, the county had lower rates of pneumonia vaccinations, flu vaccinations than the state as a whole. Though county-level figures were not available, Colorado also has considerably lower prevalence rates of breast cancer screenings and pap smears than the U.S. as a whole.

BEHAVIORAL AND MENTAL HEALTH

Similar to the trends discussed above, Summit County tends to have lower rates of mental health issues than Colorado as a whole, and the county also has one of the state's lowest suicide rates.

In terms of behavioral health, Summit County residents had lower teen fertility rates, lower rates of tobacco usage, and better oral health statistics compared to the state as a whole. The prevalence of sexually transmitted diseases was generally comparable to statewide figures. However, as was seen above in the cases of illnesses and injuries, many preventive behaviors, such as teen birth control usage and HIV screenings, were less common in Summit County compared to the state as a whole.

ENVIRONMENT

While environmental issues are more difficult to quantify than many other issues, Summit County does seem to have some areas that are of at least minor concern. For example, nearly half of homes in Summit County have radon levels that are higher than the CDC-recommended level. In addition, a significant portion of Summit County homes draw their drinking water from wells that are not tested as thoroughly as municipal drinking water. On the other hand, Summit County's favorable outdoor environment helps residents to be more physically active and is likely a large contributor in the county's relatively good health situation.

IN CONCLUSION

Overall, Summit County is one of Colorado's healthiest counties. Despite the fact that the county's residents are somewhat less likely than those in Colorado as a whole to do many preventive health care activities (i.e., screenings, vaccinations, etc.), Summit County generally has lower death rates and illness rates compared to the rest of the state. This is likely at least in part due to the fact that the county has a highly-active population that results in generally healthy people.

Even so, a significant portion of the county's residents do not have health insurance making it especially difficult for some types of residents to obtain the care they need. Thus, it is especially important for the county to provide services for such individuals in order to improve the county's overall health care situation.

DETAILED RESEARCH FINDINGS

DEMOGRAPHIC OVERVIEW OF SUMMIT COUNTY

Exhibit 1
Basic Demographic Profile from U.S. Census Bureau and Colorado DOLA

Summit County, Colorado (2010) Demographic Characteristic	U.S. Census Bureau		Colorado Dept. of Local Affairs	
	Number	Percent	Number	Percent
<i>Total Population (2010)</i>	27,994		28,047	
Gender				
Male	15,378	55%	15,384	55%
Female	12,616	45%	12,663	45%
Age				
Under age 18	4,884	17%	4,885	17%
Age 18 to 64	20,952	75%	20,954	75%
Age 65 and over	2,158	8%	2,208	8%
Age by Gender				
Under age 18				
<i>Male</i>	2,511	51%	2,509	51%
<i>Female</i>	2,373	49%	2,376	49%
Age 18 to 64				
<i>Male</i>	11,683	56%	11,670	56%
<i>Female</i>	9,269	44%	9,284	44%
Age 65 and over				
<i>Male</i>	1,184	55%	1,205	55%
<i>Female</i>	974	45%	1,003	45%
Race/Ethnicity				
Hispanic (all races)	3,989	14.2%	3,998	14.3%
White, non-Hispanic	23,158	82.7%	23,388	83.4%
Black, non-Hispanic	208	0.7%	234	0.8%
Asian, non-Hispanic	269	1.0%	329	1.2%
American Indian, non-Hispanic	55	0.2%	98	0.3%
Other race, non-Hispanic	44	0.2%	n/a	
Two or more races, non-Hispanic	271	1.0%	n/a	
Educational Attainment (among those age 25 and older)				
Less than high school diploma	1055	5%		
High school diploma or GED	3,780	19%		
Some college, no degree	3,611	18%		
Associate's degree	1,361	7%		
Bachelor's degree	6,794	35%		
Graduate or professional degree	2,983	15%		

Exhibit 2
Summit County Household Types

Summit County, Colorado (2010)	U.S. Census Bureau	
Demographic Characteristic	Number	Percent
<i>Total Households (2010)</i>	<i>11,754</i>	
Household Types		
Husband-wife, without children under 18	3,493	30%
Husband-wife, with children under 18	2,100	18%
"Single Dad" with children under 18	212	2%
"Single Mom" with children under 18	405	3%
Other family households (without spouses or children under 18)	343	3%
Male living alone	1,898	16%
Female living alone	1,124	10%
Nonfamily roommates	2,179	19%

POPULATION CHANGE: AGING PROJECTIONS

The population of people age 65 and older in Summit County grew by over 100 percent between 2000 and 2010 (Summit was one of only five Colorado counties to do so). Additionally, it's projected that the population 65 and older will increase by over 250% from 2010 to 2030. *Source:* U.S. Census Bureau.

POVERTY AND UNEMPLOYMENT

Exhibit 3

Poverty Thresholds for 2010 by Size of Family and Number of Related Children Under 18 Years

Size of family unit	Weighted average thresholds	Related children under 18 years								
		None	One	Two	Three	Four	Five	Six	Seven	Eight or more
One person (unrelated individual).....	\$11,139									
Under 65 years.....	\$11,344	\$11,344								
65 years and over.....	\$10,458	\$10,458								
Two people.....	\$14,218									
Householder under 65 years.....	\$14,676	\$14,602	\$15,030							
Householder 65 years and over.....	\$13,194	\$13,180	\$14,973							
Three people.....	\$17,374	\$17,057	\$17,552	\$17,568						
Four people.....	\$22,314	\$22,491	\$22,859	\$22,113	\$22,190					
Five people.....	\$26,439	\$27,123	\$27,518	\$26,675	\$26,023	\$25,625				
Six people.....	\$29,897	\$31,197	\$31,320	\$30,675	\$30,056	\$29,137	\$28,591			
Seven people.....	\$34,009	\$35,896	\$36,120	\$35,347	\$34,809	\$33,805	\$32,635	\$31,351		
Eight people.....	\$37,934	\$40,146	\$40,501	\$39,772	\$39,133	\$38,227	\$37,076	\$35,879	\$35,575	
Nine people or more.....	\$45,220	\$48,293	\$48,527	\$47,882	\$47,340	\$46,451	\$45,227	\$44,120	\$43,845	\$42,156

Source: U.S. Census Bureau.

Exhibit 4

The Self-Sufficiency Standard for Summit County, CO 2011

MONTHLY COSTS	Adult	Adult + Preschooler	Adult + Infant Preschooler	Adult + Preschooler School-age	Adult + School-age Teenager	Adult + Infant + Preschooler + School-age	2 Adults + Infant + Preschooler	2 Adults + Preschooler School-age
Housing	\$910	\$1,189	\$1,189	\$1,189	\$1,189	\$1,693	\$1,189	\$1,189
Child Care	\$0	\$1,199	\$2,067	\$1,584	\$385	\$2,452	\$2,067	\$1,584
Food	\$230	\$349	\$458	\$524	\$607	\$618	\$657	\$720
Transportation	\$238	\$246	\$246	\$246	\$246	\$246	\$468	\$468
Health Care	\$167	\$449	\$460	\$471	\$499	\$482	\$517	\$528
Miscellaneous	\$155	\$343	\$442	\$401	\$293	\$549	\$490	\$449
Taxes	\$400	\$950	\$1,287	\$1,083	\$683	\$1,789	\$1,289	\$1,136
Earned Income Tax Credit (-)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Child Care Tax Credit (-)	\$0	(\$50)	(\$100)	(\$100)	(\$50)	(\$100)	(\$100)	(\$100)
Child Tax Credit (-)	\$0	(\$83)	(\$167)	(\$167)	(\$167)	(\$250)	(\$167)	(\$167)
SELF-SUFFICIENCY WAGE								
HOURLY	\$11.93	\$26.09	\$33.43	\$29.72	\$20.94	\$42.50	\$18.21 per adult	\$16.50 per adult
MONTHLY	\$2,100	\$4,592	\$5,884	\$5,231	\$3,685	\$7,479	\$6,412	\$5,808
ANNUAL	\$25,197	\$55,104	\$70,602	\$62,776	\$44,219	\$89,753	\$76,939	\$69,691

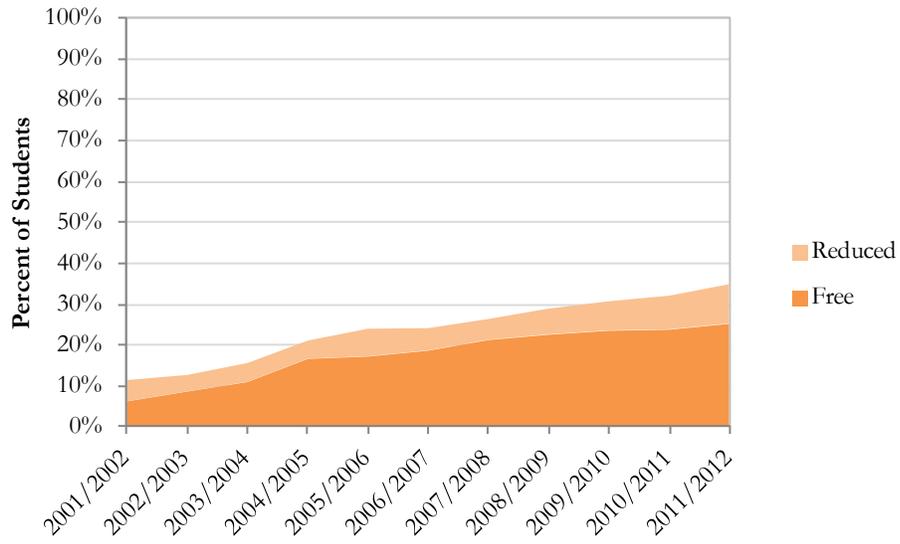
Source: Center for Women's Welfare at <http://www.selfsufficiencystandard.org>

Exhibit 5

Income and Employment Demographics for Summit County

Summit County, Colorado (2010) Demographic Characteristic	U.S. Census Bureau	
	Number	Percent
Employment (<i>among those age 16 and over</i>)	22,754	
Employed	18,086	79%
Unemployed, looking for work	900	4%
Not in labor force	3,768	17%
Household Income	10,553	
Less than \$10,000	444	4%
\$10,000 to \$14,999	152	1%
\$15,000 to \$24,999	480	5%
\$25,000 to \$34,999	985	9%
\$35,000 to \$49,999	1,326	13%
\$50,000 to \$74,999	2,266	21%
\$75,000 to \$99,999	1,907	18%
\$100,000 to \$149,999	1,679	16%
\$150,000 to \$199,999	753	7%
\$200,000 or more	561	5%
Households with Public Income Sources		
Social Security Income	1,347	13%
Supplemental Security Income	22	0%
Cash Public Assistance	150	1%
Food Stamp/SNAP Benefits	188	2%
Poverty Status		
Individuals in Poverty (all ages)	2,831	10.1%
Individuals in Poverty (under age 18)	623	12.9%
Individuals in Poverty (age 5-17)	392	11.9%
Free & Reduced Lunch (2011/2012)		
Students Receiving Free Lunch	797	25%
Students Receiving Reduced Price Lunch	301	10%

Exhibit 6
Trends in Students Receiving Free or Reduced Lunch 2001-2012



OVERALL HEALTH OUTCOMES

University of Wisconsin Population Health Institute (2012). *County Health Rankings 2012: Colorado*.

- ❖ Summit County is ranked #5 among counties in Colorado for best health outcomes. The top 4 counties, in order, are: Pitkin, Douglas, Eagle, and Boulder. Health outcome rankings are based on mortality (length of life) and morbidity (self-reported quality of life).
- ❖ Summit County is ranked #4 among counties in Colorado for best health factors. Douglas, Pitkin, and Routt are ranked 1, 2, and 3, respectively. Health factors are the determinants of health outcomes, and include a variety of measures to assess healthy behaviors (e.g., tobacco use, alcohol use, diet and exercise, and sexual behavior), clinical care (access and quality of care), social and economic factors (e.g., education, employment, income), and physical environment (environmental quality and built environment).

INSURANCE AND ACCESS TO HEALTH CARE

Exhibit 7: Insurance and Access in Summit County

Summit County, Colorado (2010) Demographic Characteristic	HRSA Fact Sheet	
	Number	Percent
<i>Total Population (2010)</i>	27,994	
Insurance Status		
Uninsured	6,158	22%
Medicare (Elderly)	1,406	5%
Medicare (Disabled)	122	0%
Access to Care		
Primary Care Physicians	30	108.04 per 100,000 Pop.
Dentists	23	81.96 per 100,000 Pop.

Source: Health Resources and Services Administration (HRSA) Community Fact Sheet for Summit County, Colorado. Their sources are: Uninsured from U.S. Census Bureau Small Area Estimates, 2006; Medicare and Access from HRSA Area Resource File, 2008.

Center for Health Administration at University of Colorado Denver. (2012). *Access. Centura Health: St. Anthony Summit Medical Center, 2012 Community Health Needs Assessment.*

- ❖ People without health insurance are less likely than those with insurance to have a usual source of health care (such as a designated primary care doctor), are less likely to receive preventative care, are more likely to postpone or go without treatment or medication when they are sick or injured, and are more likely to be at a later stage of disease when first diagnosed.
- ❖ **Summit County lags the state in health insurance coverage.** In Summit County, 82.8 percent of adults have some health insurance, compared with 84.3 percent of adults in the state of Colorado as a whole (based on data from 2003-2010).
- ❖ **Summit County lags the state in getting eligible adults enrolled in Medicaid.** In Summit County, 42.2 percent of adults who are eligible for Medicaid are not enrolled. Statewide in Colorado, 28 percent of eligible adults are not enrolled.
- ❖ **Summit County lags the state in getting eligible children enrolled in Medicaid.** In Summit County, 14.5 percent of children who are eligible for Medicaid are not enrolled. Statewide in Colorado, 13.3 percent of eligible children are not enrolled.
- ❖ **Summit County beats the state in getting eligible children enrolled in CHP+.** CHP+ is low cost health insurance for children who don't qualify for Medicaid, but can not afford regular insurance. In Summit County, 23.4 percent of children who are eligible for CHP+ are not enrolled. Statewide in Colorado, 37.2 percent of eligible children are not enrolled.
- ❖ **Demographic disparities in insurance status:** In Colorado as a whole, the proportion of people with health insurance increases with age, it also increases with level of education attained, and annual income. Hispanic individuals are less likely to have health insurance than non-Hispanic individuals. Men are less likely to have insurance than women. Married people are more likely to have health insurance than people who are not currently married or have never been married.

EMERGENCY DEPARTMENT AND HOSPITALIZATIONS

St. Anthony Summit Medical Center, *Top Five Emergency Department Admits, Outpatient and Inpatient, FY 2012 (July – Feb)*.

- ❖ The five most common diagnoses for emergency department outpatient admissions at St. Anthony Summit Medical Center are:
 - ⇒ Concussion
 - ⇒ High altitude effects
 - ⇒ Headache
 - ⇒ Chest pain
 - ⇒ Syncope and collapse (fainting/blackout)
- ❖ The five most common diagnoses for emergency department inpatient admissions at St. Anthony Summit Medical Center are:
 - ⇒ Fracture of tibia or fibula (lower leg bones)
 - ⇒ Pneumonia
 - ⇒ Acute pancreatitis
 - ⇒ Fracture of lumbar vertebra (back)
 - ⇒ Fracture of femur (upper leg bone)

National Research Center (2011). *Northwest Colorado Council of Governments, Rural Resort Region: Gap Analysis of Services for an Aging Population*.

- ❖ One-quarter of people age 60 or older reported spending at least one day in the hospital during 2010. In addition, one-quarter of people age 60 or older reported falling or injuring themselves during 2010.

LEADING CAUSES OF DEATH

The snapshot below was based off a previous Community Health Assessment done in Summit County. Data was provided by the Colorado Health Information Dataset (CoHID) for the years 2007-2009. *Rates are for the leading cause of death, and are listed as the age adjusted rate per 100,000 population.*

Exhibit 8 Leading Causes of Death in Summit County

Summit County, Colorado (2007-2009) Type of health condition:	Source: CoHID	
	Summit County	State
Heart disease	84.9	154.9
Malignant neoplasms	89.3	148.5
Unintentional injuries	32.2	45.3
Suicide	9.8	51.4
Chronic liver disease and cirrhosis	6.6	38.9
Cerebrovascular diseases	15.4	33.5
Alzheimers disease	21.0	16.8
Influenza and pneumonia	17.0	17.6

ILLNESS AND INJURY

Center for Health Administration at University of Colorado Denver. (2012). *Injury. Centura Health: St. Anthony Summit Medical Center, 2012 Community Health Needs Assessment.*

- ❖ **Among people ages 1 to 44, injuries are the leading cause of death – largely from accidents involving motor vehicles.** Each year in Colorado, approximately 300 people die in motor vehicle crashes while another 2500 are hospitalized for injuries sustained in these types of events. The total costs associated with these injuries are more than \$103 million per year.
- ❖ **Increased seatbelt use has lowered the number of vehicle-related deaths, but Summit County lags behind much of the state.** Although Summit County statistics were reportedly based on “weak data,” numbers showed that only 58.6 percent of county residents from 2005-2010 wear a seatbelt when driving or riding in car. The statewide figure is 83.3 percent, and the Colorado Winnable Battle Goal is 90 percent for 2016 – which is estimated would save \$16.4 million in hospitalization costs.
- ❖ **In terms of fall-related injuries, Summit County has the lowest rate of fall-related hospitalizations in Colorado.** Each year in Colorado, approximately 400 people 65 or older die from fall-related injuries, and an additional 10,000+ are hospitalized due to injuries sustained from falls. In Summit County, however, hospitalizations are nearly three times less frequent than the statewide average.
- ❖ **In terms of injuries related to domestic violence, simple assault was by far the most common type of incident reported in Colorado.** In 2010, this was nearly five times more frequent than any other category.

OMNI. (2011). *Healthy Kids Colorado Survey. 2010-2011 Results for Summit High School.*

OMNI. (2011). *Healthy Kids Colorado Survey. 2010-2011 Results for Summit Middle School.*

- ❖ **About half of Summit High School students report “always” wearing a seatbelt when driving a car, and 58 percent report “always” wearing a seatbelt when riding in a car.** Similarly, 58 percent of Summit Middle School students report always wearing a seatbelt when riding in a car.
- ❖ **In the past 30 days, one quarter of Summit High School seniors drove after drinking, and one third drove after using marijuana.** One third of high school students rode in a car with someone who had been drinking, and 45 percent rode in a car with someone who had been smoking marijuana.
- ❖ **Among those who rode a bicycle in the past 12 months, just over one quarter of middle-school students always wore a helmet when riding a bicycle, compared with 19 percent of high school students.**
- ❖ **One in ten Summit High School students had been injured in a physical fight in the past 30 days and had to be treated by a doctor or nurse.** Similarly, 7 percent of Summit Middle School students reported being treated for injuries obtained in a physical fight within the past 30 days.

Center for Health Administration at University of Colorado Denver. (2012). *Communicable Diseases. Centura Health: St. Anthony Summit Medical Center, 2012 Community Health Needs Assessment.*

- ❖ **Acute respiratory infections are the 8th leading cause of death in the United States, accounting for 56,000 deaths annually.** As part of this, influenza alone averages more than 200,000 hospitalizations and 36,000 deaths each year.
- ❖ **Summit County has significantly lower incidence rates of hepatitis compared to the rest of the state.** It's estimated that 4.4 million Americans live with chronic hepatitis, and about 80,000 new infections occur each year. However, rates in Summit County are relatively low. For example, the county has an incidence rate of less than half the statewide average for Hepatitis B.
- ❖ **Summit County has slightly lower incidence rates of tuberculosis compared to the rest of the state.** While the county isn't quite yet achieving the Healthy People 2020 goal of a 1.0 percent incidence rate, it has a 1.6 percent rate compared to 2.0 percent statewide.
- ❖ **The prevalence rate of adults in Summit County who received a pneumonia vaccination is significantly below the statewide average.** Only 13.7 percent of residents reported to have ever had a pneumonia vaccination compared to 23.6 percent statewide. Numbers have been rising since 2005, but the Healthy People 2020 goal is to increase the prevalence rate to 60 percent of people ages 18-64.
- ❖ **The prevalence rate of adults in Summit County who received a flu shot is slightly below the statewide average.** In the past 12 months, 36.5 percent of Summit County residents received a flu shot compared to 38.8 percent statewide. Numbers have been rising since 2005, but the Healthy People 2020 goal is to increase the prevalence rate to 80 percent, overall.
- ❖ **The CDC recommends that everyone gets a flu vaccine each flu season.** High-risk groups that this is especially important for include: pregnant women, children younger than 5, people 50 years of age or older, people who live in nursing homes or other long-term care facilities, people who live with or care for any of the aforementioned groups.

Center for Health Administration at University of Colorado Denver. (2012). *Cancer. Centura Health: St. Anthony Summit Medical Center, 2012 Community Health Needs Assessment.*

- ❖ **Cancer is the second leading cause of death in the US.** There are over 100 different types of cancer that, when added together, account for almost one in every four deaths – which is true for both Colorado and the US as a whole. Heart disease is the leading cause.
- ❖ **Cancer death rates from common types of cancer are significantly lower in Colorado (and especially in Summit County) compared to nationwide averages.** Per 100,000 people, the cancer death rate is 118.9 people. However, Colorado's figure is 74.5 and Summit County's, specifically, is even lower at just 49.4. This was the lowest of any county listed in the study.
- ❖ **The prevalence rate of breast cancer screening in women over fifty in Colorado is lower than the nation.** In Colorado, only 69.6 percent of women statewide reported having a clinical

breast exam and mammogram in the past two years compared to 78.9 percent nationwide. Colorado's 2015 goal is 80 percent. It's estimated that one in seven Colorado women will have breast cancer at some point in their lifetime.

- ❖ **The prevalence rate of women 18 and older who have received a pap smear is slightly higher in Colorado than the nation.** Within the state, 85.4 percent of Colorado women reported having a pap smear in the past three years compared to 83.5 percent nationwide. Colorado's 2015 goal is 90 percent.
- ❖ **The prevalence rate of colon cancer screening in adults 50 and over in Colorado is lower than the nation.** While the literature did not state the percentage of people nationwide who are screened for colon cancer, it did note that Colorado is below the national average with its rate of 62.4 percent of people getting screened within the past ten years. The 2015 goal is 80 percent.

Also note that, unlike breast cancer screenings and pap smears, the number of colon cancer screenings has dramatically increased since 2004 (going from about 50 percent to over 62 percent). The numbers of breast cancer screenings and pap smears have both seen steady declines during that same time.

- ❖ **Improvements are needed in Colorado regarding skin cancer prevention.** Skin cancer is the most common form of cancer in the US and, given Colorado's high elevation and over 300 days of sunshine per year, residents must take extra precautions. Currently, only 37.4 percent of residents always or nearly always use a method of sun protection. The 2015 goal is 72 percent – or nearly double what it currently is.

Also note that mortality rates for melanoma in Colorado have been steadily climbing for the past decade and are significantly higher than US averages.

Center for Health Administration at University of Colorado Denver. (2012). *Heart Disease and Stroke. Centura Health: St. Anthony Summit Medical Center, 2012 Community Health Needs Assessment.*

- ❖ **Heart disease is the leading cause of death in the US and in Colorado.** Roughly 25 percent of all deaths are related to heart disease, which is just slightly higher than the percentage of deaths related to cancer. Major risk factors for heart disease are aging, smoking, diets high in fat and salt, hypertension, diabetes, sedentary lifestyle, obesity, and stress.
- ⇒ **Summit County has a low death rate for heart disease.** With 71.2 deaths per 100,000 in population, Summit County is well below the state average (144.5) and the national average (179.8). In fact, Summit County has the lowest rate of all counties listed in Colorado.

Also note that the death rates due to heart disease are decreasing in Colorado at a fairly steady pace.

- ❖ **Strokes are the third leading cause of death in the US and in Colorado.** They're also the principal cause of serious long term disability. The leading risk factor for strokes is hypertension, followed by smoking, diabetes, and obesity. Additionally, most strokes occur in people over 65 years old and are more common in African-Americans than in whites.

- ⇒ **Summit County has roughly an average death rate for cerebrovascular disease.** These deaths are typically caused by strokes. With 35.8 deaths per 100,000 in population, Summit County is close to the state average (37.9) and the national average (38.9).

Also note that the death rates due to cerebrovascular disease have remained relatively steady over the past 20 years.

- ❖ **Compared to other parts of the country and the state, Summit County has relatively low hypertension rates.** Of all the counties listed in the study, Summit County had the lowest rate – perhaps due to its young and active population. Only 16.1 percent of people in the county reported being told by a health professional that they have high blood pressure, compared to 20.4 percent statewide and 26.7 percent nationwide.

Hypertension rates increase with age and are generally higher with people in lower income brackets.

- ❖ **Summit County also has low rates for high cholesterol.** Of all the counties listed in the study, Summit County again had the lowest rate. Only 21.5 percent of people who were tested for cholesterol reported being told that they have high levels, compared to 33.1 percent statewide and 36.0 percent nationwide.

High cholesterol increases with age and is generally higher with people in lower income brackets.

BEHAVIORAL AND MENTAL HEALTH

Center for Health Administration at University of Colorado Denver. (2012). *Mental Health. Centura Health: St. Anthony Summit Medical Center, 2012 Community Health Needs Assessment.*

- ❖ **Mental disorders are the leading causes of disability in the US.** There's a strong correlation between mental illness and both substance abuse and suicide. Many people with serious substance abuse issues also struggle with underlying mental illness, and many people with mental illness struggle with suicidal thoughts. The most common serious mental disorders include schizophrenia, bipolar disorder, manic depression, attention deficit hyperactivity disorder (ADHD), generalized anxiety disorder, obsessive-compulsive disorder, post-traumatic stress disorder, panic disorder and antisocial personality disorder.
 - ⇒ In 2007, 7 percent of all adults in Colorado reported suffering from depression.
 - ⇒ Colorado's suicide rates consistently rank among the nation's ten highest states. Colorado also has a particular problem with youth suicide (ages 10-14), as it's the second-leading cause of death in that age group, and nearly one out of every 13 youth in the state reported attempting suicide in the past year.
- ❖ **Most people with mental disorders do not receive treatment.** Although the use of mental health services is higher now than in the past, it's estimated that 60 percent of all people with a mental disorder receive no treatment for it. Tying this back to mental health being related to substance abuse, many people take drugs and alcohol to "self-medicate" with their mental disorders rather than seeing a professional.
- ❖ **Summit County is significantly below the state average for people reporting long-term mental health problems.** In Summit County, only 5.7 percent of respondents reported a negative mental health status for 8 or more days in the past month. The state average is approximately 12 percent.
- ❖ **Suicide mortality rates are also lower in Summit County.** Of all the Colorado counties in the study, Summit had the lowest rate. However, it's still slightly higher than the national average.

OMNI. (2011). *Healthy Kids Colorado Survey. 2010-2011 Results for Summit High School.*

OMNI. (2011). *Healthy Kids Colorado Survey. 2010-2011 Results for Summit Middle School.*

- ❖ **In the past 12 months, nearly one third of Summit High School students experienced depression, 22 percent seriously considered suicide, 15 percent attempted suicide, and 7 percent made a suicide attempt that required medical treatment.** Among Summit Middle School students, one quarter experienced depression, 11 percent seriously considered suicide, 6 percent attempted suicide, and 1 percent made a suicide attempt that required medical treatment.

Center for Health Administration at University of Colorado Denver. (2012). *Sexual Health. Centura Health: St. Anthony Summit Medical Center, 2012 Community Health Needs Assessment.*

- ❖ **Nearly four out of ten pregnancies in Colorado are unintended, and they cost the state more than \$160 million annually in Medicaid.** Nationally, for every dollar spent on prevention, \$3.74 is saved in Medicaid costs. Women under the age of 25, with a high school education or less, who are African-American or Hispanic/Latina, or are classified as low-income are more likely to have an unintended pregnancy.

Colorado's prevalence rate of unintended pregnancies (37.2 percent) is lower than the estimated national average (49.0 percent), and rates haven't changed much (either positively or negatively) in the past five years. Statistics weren't available for Summit County, specifically.

- ❖ **Summit County has better than average teen fertility rates.** In fact, Summit County's rate is roughly half that of the state average. It also has the lowest rate of all counties listed in the study.
- ❖ **Summit County is below average in terms of birth control usage rates.** A total of 64.7 percent of sexually active 18-44 year olds in Summit County use some form of birth control. This is below the state average of 75.7 percent, and below the Colorado Winnable Battle goal of 80 percent.
- ❖ **In terms of sexually transmitted diseases, Summit County's incidence rates are higher than the state in some areas and lower in others.** It's higher than the state average in new Chlamydia cases but lower in new gonorrhea cases. Additionally, Summit County has a lower rate of HIV screenings but also a lower rate of HIV incidences. The incidence of new cases of AIDS is very close to the state average.

OMNI. (2011). *Healthy Kids Colorado Survey. 2010-2011 Results for Summit High School.*

OMNI. (2011). *Healthy Kids Colorado Survey. 2010-2011 Results for Summit Middle School.*

- ❖ **A majority of Summit High School students are sexually active, and nearly half of sexually active students are not using condoms.** Among Summit High School seniors, 71 percent of males and 54 percent of females are sexually active. Among freshmen, 21 percent are sexually active, jumping to 48 percent of sophomores. Overall, 46 percent of sexually active students did not use a condom the last time they had sexual intercourse; among high school students in Colorado as a whole, 37 percent of sexually active students did not use a condom the last time they had sexual intercourse.

Center for Health Administration at University of Colorado Denver. (2012). *Tobacco. Centura Health: St. Anthony Summit Medical Center, 2012 Community Health Needs Assessment.*

- ❖ **Colorado spends \$1.3 billion annually on tobacco-related health costs.** Additionally, employers in the state lose about \$1 billion annually in lost productivity due to smoking-related losses in productivity.

On a similar note, the tobacco industry spends up to \$140 million in advertising each year in Colorado alone.

- ❖ **Summit County residents smoke significantly less than Colorado residents statewide.** Of all the counties in the study, Summit County had the lowest percentage of cigarette smokers (11.9 percent). (Data was from the averages of years 2003-2010). This was well below the state average of 18.1 percent, and it's already below the HP2020 target and the Colorado Winnable Battles goal of 12 percent.
- ❖ **Cigarette smoking is trending down, overall.** Colorado's percentage of cigarette smokers has declined from 19.3 percent in 2004 to 16.5 percent in 2010. National rates are slightly higher than Colorado's rates, but they're also trending down.
- ❖ **Cigarette smoking is most common in males, people with lower incomes, and those 18-24 years old.** Additionally, those who haven't attended college are much more likely to be tobacco users. The smoking trend among high school students has decreased over the past decade, but it's still above the adult rate.

OMNI. (2011). *Healthy Kids Colorado Survey. 2010-2011 Results for Summit High School.*

OMNI. (2011). *Healthy Kids Colorado Survey. 2010-2011 Results for Summit Middle School.*

- ❖ **Substance use is fairly common at Summit High School.** Seventy percent of Summit High School survey respondents reported drinking alcohol at some point in their lives; nearly 50 percent had tried marijuana, and more than one quarter had used prescription pills without a prescription. Among Summit Middle School students, one quarter reported drinking alcohol at some point in their lives, more than 10 percent had used inhalants, and just under 10 percent had tried marijuana or prescription pills. More than one third of high school students report being sold, offered, or given an illegal drug on school property in the past 12 months; 13 percent of middle school students report the same.

Center for Health Administration at University of Colorado Denver. (2012). *Oral Health. Centura Health: St. Anthony Summit Medical Center, 2012 Community Health Needs Assessment.*

- ❖ **Only 58 percent of adults in Colorado reported having dental insurance.** Regular check-ups can help reduce future dental costs by up to 40 percent, but many people in the state are uninsured or underinsured and can't afford this type of care. Roughly 70 percent of adults in Colorado have been to the dentist in the past 12 months.
- ❖ **There's an increased emphasis being placed on oral health in the state of Colorado.** Reducing the burden of oral disease has been identified as one of Colorado's greatest opportunities for ensuring the health of citizens and has been selected as a top ten "Winnable Battle" by the Colorado Department of Public Health and Environment.
- ❖ **Summit County is above average in many aspects of oral health.** Compared to the statewide average, Summit County has a lower rate of kids with untreated cavities and has a higher rate of kids with dental sealants. Both metrics are already ahead of Colorado's 2016 goals. One area where Summit County (and the rest of the state) can still improve in is the number of dental visits by infants and toddlers.

In terms of adults, Summit County has an extremely low percentage of adults who have ever lost a tooth due to decay or periodontal disease (1.4 percent) compared to the statewide average (35.9 percent).

ENVIRONMENT

FOOD SAFETY

Centers for Disease Control and Prevention. CDC Estimates of Foodborne Illness in the United States. Obtained from: <http://www.cdc.gov/foodborneburden/index.html>

- ❖ **Each year there are an estimated 4,666 foodborne illnesses occurring in Summit County residents.** This does not include illnesses acquired by visitors. This is based on the latest national estimates that one in six Americans gets sick from foodborne illness every year. Based on CDC estimates, 0.29 Summit County residents will die each year from a foodborne illness.

RADON

United States Environmental Protection Agency. Radon Health Risks. Obtained from: <http://www.epa.gov/radon/healthrisks.html>

Colorado Department of Public Health and Environment. Colorado Environmental Public Health Tracking. Figure 2: Average concentration of indoor radon by county, based on test results reported to CDPHE. Figure 3: Percent of radon tests above 4 pCi/L by county, based on test results reported to CDPHE. Obtained from: <http://www.coepht.dphe.state.co.us/environment/radon.aspx>

- ❖ **According to the CDPHE, the average level of radon in Summit County is 8.2 pCi/L.** Radon is the second leading cause of lung cancer deaths overall, and the leading cause of lung cancer deaths among nonsmokers. EPA recommends reducing radon below 4.0 pCi/L in all homes. In Summit County, an estimated 48.7 percent of homes have radon levels higher than 4.0 pCi/L.

USA Deaths (EPA)	21,000 per year (2010 U.S. population of 308,745,538)
Summit County	2 per year (2010 Summit County population of 27,994)

DRINKING WATER

Personal communication from Dan Hendershott, REHS, Environmental Health Manager, Public Health Department, Summit County. He references the Summit Assessor, local water districts, and National Institutes of Health.

Centers for Disease Control and Prevention. Private well water and fluoride. Obtained from: http://www.cdc.gov/fluoridation/fact_sheets/wellwater.htm

- ❖ **About 2,573 homes get drinking water from private unregulated wells.** Many of these wells have never been tested for contamination. If they have been tested they usually only test for bacteria and nitrates. Chronic disease pollutants are rarely tested.

- ❖ According to the CDC, “The recommended fluoride level in drinking water for good oral health is 0.7 mg/L (milligrams per liter).” About 4,100 homes in Summit County have drinking water that is not fluoridated (>.3 ppm) or is not tested to determine whether an adequate amount. Insufficient fluoride can lead to an increase in dental caries. There has been a slight, although significant, increase in dental caries since the mid 90’s in children. This after consistent decreases were observed from the 70’s through the 90’s. Although fluoride in drinking water is not the sole reason for this, it may be a contributor.
- ❖ Among children in Region 12 (which includes Summit County), 19.5 percent had fair or poor condition of teeth. Colorado average is 9.9 percent (BRFSS).

GENERAL DISEASE CONTROL

Personal communication from Dan Hendershott, REHS, Environmental Health Manager, Public Health Department, Summit County. He references CDPHE Communicable Disease data 2006-2010.

- ❖ Summit County has much higher rates of three enteric diseases when compared with Grand County.

	<i>Grand</i>	<i>Summit</i>
Salmonella	2	16
Campylobacter	3	18
Giardia	12	36

PHYSICAL ENVIRONMENT SUPPORTS FOR EXERCISE & DIET

Exhibit 9 Summit County Physical Health Predictors

Summit County, Colorado (2010)	Source: CDPHE	
Health outcomes	Summit County %	State %
Bike/Walk Commute	6.4	3.1
Utilize Public Transportation	5.6	3.3
Rates of Healthy Food Outlets per 10,000	2.4	1.1

Source: Previous Community Health Assessment done in Summit County, Colorado. Data from Colorado Department of Public Health and Environment (2010).

OMNI. (2011). *Healthy Kids Colorado Survey. 2010-2011 Results for Summit High School.*
OMNI. (2011). *Healthy Kids Colorado Survey. 2010-2011 Results for Summit Middle School.*

- ❖ Most Summit County kids are getting at least a minimal amount of exercise. In all, 87 percent of Summit High School students had spent at least 20 minutes engaged in strenuous physical exercise in the past 7 days, as had 91 percent of Summit Middle School students. However, 18 percent of high school students describe themselves as slightly or very overweight and 37 percent say they are trying to lose weight; similarly, 21 percent of middle school students say they are overweight and 31 percent are trying to lose weight.

PUBLIC SURVEY

INTRODUCTION

Corona Insights is pleased to present this report to Summit County on the results of public surveys conducted in May 2012. This community survey is intended to measure the general health needs and health environment in Summit County, through a full understanding of what the needs of residents in the area are today.

REPORT LAYOUT

This report is divided up into a number of major sections, which include the following:

- ➔ **Summary of Key Findings** – This section contains a brief overview of the key findings and themes of the research.
- ➔ **Background and Methodology** – This section provides a detailed description of the approach used for this project in terms of goals, methodology, and demographic characteristics of respondents.
- ➔ **Detailed Research Findings** – This section contains findings of each of the survey’s main questions individually.
- ➔ **Appendix A: Detailed Analysis Tables** – In this section, cross-tabulations are provided of each survey question individually. These tabulations are broken out by a number of subpopulations, allowing conclusions to be drawn about how awareness changed between the three survey waves among respondents with varying demographic backgrounds.
- ➔ **Appendix B: Survey Instrument** – This section contains the survey instrument used for this project.

SUMMARY OF KEY FINDINGS

BASIC ASPECTS OF HEALTH CARE

- The majority of respondents said that the quality of life in Summit County was very good. Older respondents were most likely to rate the quality of life as very good, as were those who have healthy personal habits. ([Exhibit 1.1](#))
- Respondents were likely to consider most aspects of health care in Summit County to be adequate in terms of availability and quality. Highest ratings were given to routine care, providers that take respondents' insurance, and preventive health care services. However, ratings of the availability of low-cost health care options and specialized illnesses were somewhat lower. ([Exhibit 1.2](#))

ACCESS TO HEALTH CARE

- The majority of respondents said that they were at least moderately aware of the local health care resources available to them in Summit County. The groups most aware of these services are also those who are most likely to use the services often (i.e. parents with young children, the elderly, those with unhealthy habits). ([Exhibit 2.1](#))
- Roughly one in six residents of Summit County (16 percent) has no insurance. Not unexpectedly, a majority of those who do have insurance have coverage through an employer (44 percent) or through on a policy purchased on their own (25 percent). ([Exhibit 2.2](#))
- Respondents who believed their insurance coverage to be inadequate were most likely to cite high deductibles as the reason for their dissatisfaction. Others felt that their coverage excluded needed services. ([Exhibit 2.3](#))

HEALTH CARE LOCATION AND INFORMATION

- Summit County residents were most likely to typically see a doctor inside Summit County. A small number of respondents, mostly those with unhealthy life habits, responded that they don't see any doctor at all. ([Exhibit 3.1](#))
- Most Summit County residents surveyed said that the last place they received health care in Summit County was at their family doctor's office. In addition, a small but significant portion said that they went to a low-cost clinic. Finally, some (especially among males and those ages 45 to 54) went to the hospital for care.. ([Exhibit 3.2](#))

ADEQUACY OF SERVICES PROVIDED IN SUMMIT COUNTY

- When asked about their satisfaction with the quality of specific health care services in Summit County, respondents were most likely to give favorable ratings to hospitals, family medicine physicians, and dentists. Their highest level of dissatisfaction was with the quality of specialty physicians. ([Exhibit 4.1](#))
- When asked about their satisfaction with the number of choices of specific health care services in Summit County, respondents were most likely to give favorable ratings to dentists, hospitals, and emergency room services. Their highest level of dissatisfaction was with the number of choices of specialty physicians. ([Exhibit 4.2](#))
- When asked about whether or not they would obtain specific health care services in Summit County, respondents were most likely to say they would chose local emergency room services, dentists, and hospitals. Consistent with other satisfaction measures, they were most likely to leave Summit County to see specialty physicians. ([Exhibit 4.3](#))
- Summit County residents surveyed had differing opinions on which health-related areas are being sufficiently covered in the county and which should continue to be top priorities in the next five years. Respondents were most likely to believe the county is doing enough to prevent problems with clean air and water, but many think mental health/substance abuse and tobacco-related issues should take top priority. ([Exhibit 4.4](#))

PERSONAL HEALTH RISKS

- Most Summit County residents surveyed did not report having unhealthy habits. Those who did report unhealthy habits were most likely to say they do not receive regular preventative screenings. Lack of exercise and healthy eating were also among top unhealthy behaviors. ([Exhibit 5.1](#))
- Respondents had likely heard of the SC Alert system, and many were already registered with the system. Largest differences in awareness and subsequent registration were observed between different age groups within the survey population. ([Exhibit 5.3](#))

IN CONCLUSION

Clearly, residents of Summit County are relatively satisfied with their options for health care in Summit County. The major exceptions appear to be the availability of specialist care and low-cost care options. As was seen in the previous 2007 needs assessment, respondents seem to feel that improved mental health and substance abuse programs are an area for improvement in the county.

BACKGROUND AND METHODOLOGY

SURVEY INSTRUMENT

The survey instrument for this project was designed via a collaboration of key staff from Corona Insights and Summit County. Concepts and questions were initially developed in a meeting of key stakeholders in Summit County, and were then revised into a viable survey format by Corona Insights. This initial draft of the survey instrument was then revised collaboratively until a final version was agreed upon.

SAMPLING METHOD AND SURVEY MODE

All surveys were collected via telephone. Respondents were drawn using a Random Digit Dialing (RDD) sampling approach - a list of randomly generated telephone numbers known to be in Summit County. Surveys were conducted between May 17 and May 24, 2012.

SAMPLE SIZE AND MARGIN OF ERROR

In total, 273 surveys were completed. This response level is sufficient to achieve a maximum margin of sampling error of ± 6.3 percent at the 95 percent confidence level for respondents overall. Readers should note, however, that the report frequently includes analyses by various subpopulations. Among these subgroups, margins of error are considerably higher. For that reason, readers should consider such analyses to be directional in nature rather than statistically strong.

WEIGHTING

To ensure that the findings were as representative of the total population in the study areas as possible, Corona applied corrective weightings. The age and gender of respondents was compared to the known distribution of ages and genders in Summit County. This comparison revealed that the survey had a disproportionately high level of females and older respondents, which is typical in a public survey of this type. For that reason, males and younger respondents were weighted more heavily in our analysis than females and older respondents.

DEMOGRAPHICS

The following table summarizes the general profile of *unweighted* survey respondents. These characteristics should be considered as context and background when examining findings herein.

Demographic Characteristic	Percent of Respondents	Demographic Characteristic	Percent of Respondents
Gender		Age	
Male	41%	18-34	7%
Female	59%	35-44	15%
Marital Status		45-54	22%
Married	67%	55-64	27%
Living with a partner	1%	65+	29%
Widowed	3%	Household Income	
Divorced	8%	\$0 to \$29,999	8%
Separated	0%	\$30,000 to \$49,999	14%
Single	19%	\$50,000 to \$74,999	15%
Race/Ethnic Group		\$75,000 to \$99,999	17%
African American/Black	1%	\$100,000 to \$199,999	17%
Asian/Asian American	0%	\$200,000 or more	7%
Hispanic/Latino	1%	Veteran Status	
Native American	0%	Yes, veteran	12%
White	96%	Yes, active	3%
Multi-racial	0%	No	85%
Other	0%	Employment Status	
		Employed Full-time	49%
		Employed Part-time	12%
		Not employed	38%

DETAILED RESEARCH FINDINGS

In the following pages, we present the results of each of the questions asked on the survey along with a general discussion of the implications of each question. Note that some comparisons between demographic groups are mentioned throughout the report that may not necessarily be shown in the associated exhibits. This is primarily done to ensure clarity in reading and additional context in interpretation. A full analysis of every question, complete with results by segment, is provided in Appendix A.

REPORTING NOTES

When reviewing the following exhibits, it is important to keep the following in mind:

- Figures in all graphs and tables have been rounded for reporting purposes. Occasionally, a graph may not add exactly to 100 percent for this reason. Also, this may cause some bars labeled with common values to have slightly different lengths.
- Very small percentage labels (typically 4 percent or less) on graphs are often removed for clarity in reading.
- In addition to analyses that focus on age and gender, questions are sometimes examined by whether or not the respondent had any unhealthy lifestyle habits. Respondents who answered 'yes' to at least one of the personal health habits questions (*Question 21*) are listed in the group having 'unhealthy habits' and those who did not answer 'yes' to any of those questions are in the group having 'healthy habits.'

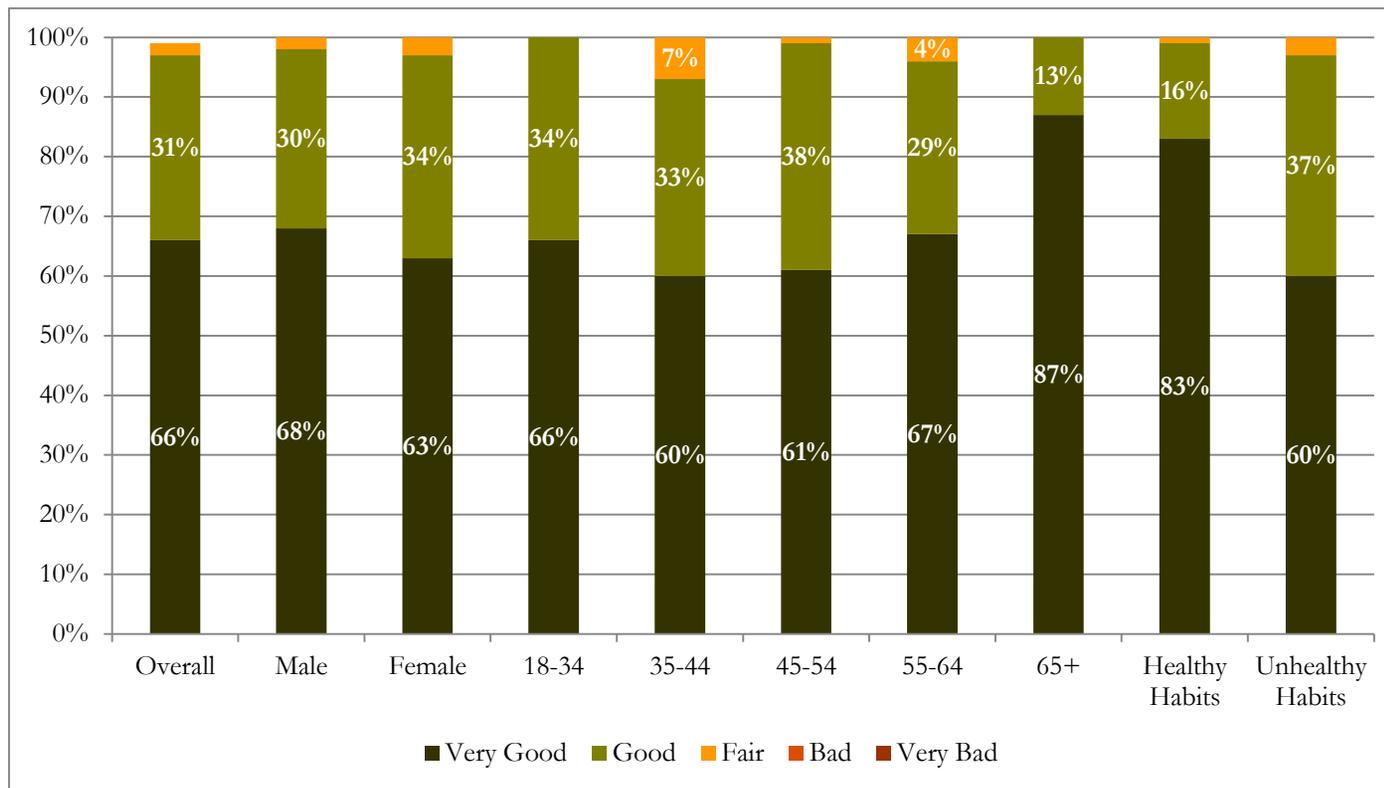
BASIC ASPECTS OF HEALTH CARE

QUALITY OF LIFE RATINGS

Respondents were initially asked their opinions on the quality of life in Summit County. Overall, 66 percent said the quality of life in Summit County was ‘very good,’ with 31 percent rating it ‘good’ and 2 percent rating it ‘fair.’ As shown in Exhibit 1.1, slight differences were observed between

Exhibit 1.1

How would you rate your quality of life in Summit County?



different demographic groups in terms of their opinions of the quality of life in Summit County.

Respondents over 65 were far more likely to consider the quality of life in Summit County ‘very good,’ with 87 percent giving this response. Additionally, respondents with healthy lifestyle habits were more likely to rate the quality of life as ‘very good,’ with 83 percent of respondents giving this answer.

Respondents in the 35 to 44 age group were most likely to say the quality of life in Summit County is ‘fair,’ with 7 percent giving this response.

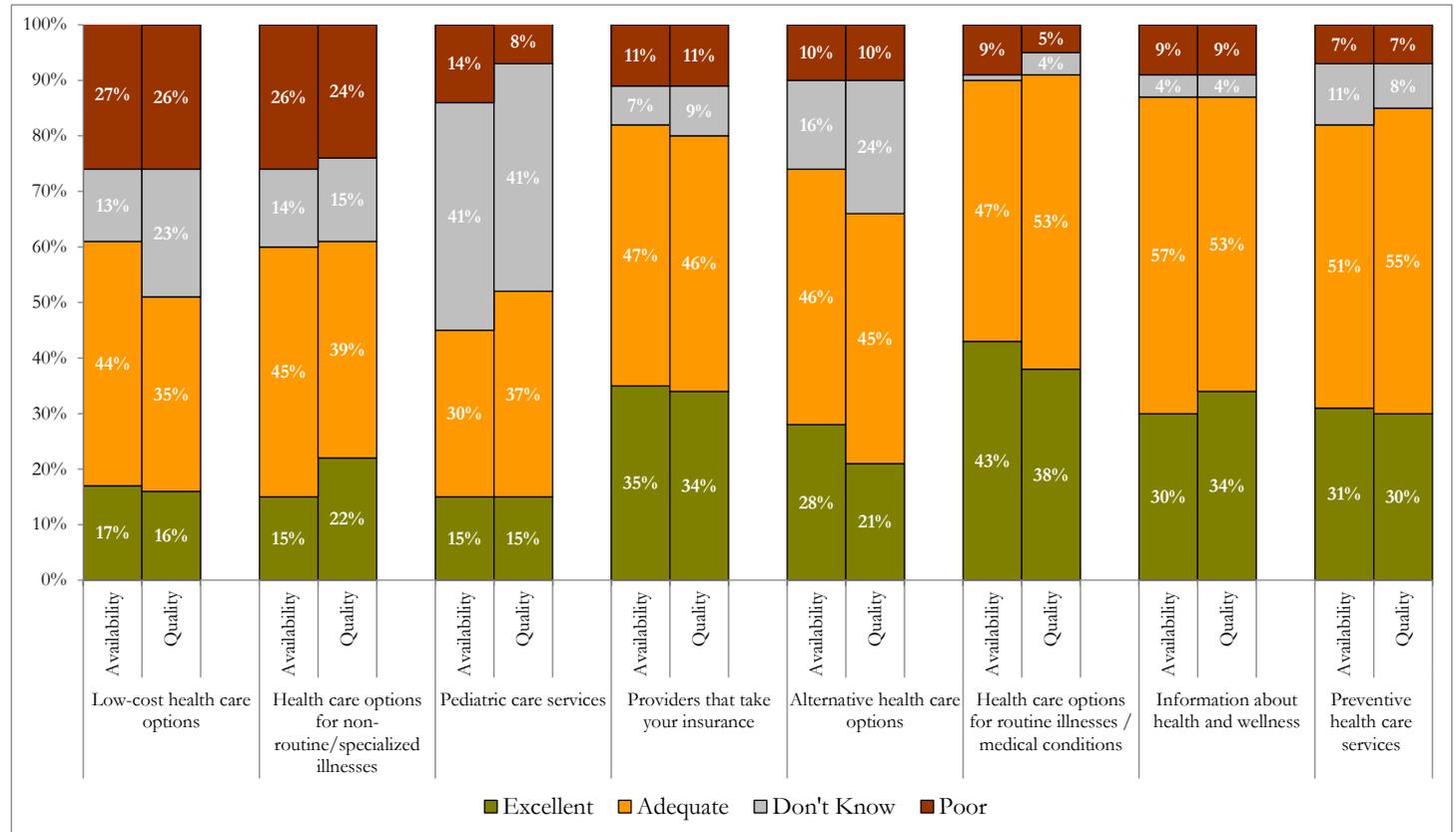
AVAILABILITY AND QUALITY OF BASIC HEALTH CARE SERVICES

As shown in Exhibit 1.2, respondents were asked to rate the quality and availability of various aspects of health care in Summit County as compared with other communities with which they are familiar. Respondents were most likely to rate availability and quality similarly for the various aspects of health care. Health care options for routine illnesses and preventive health care services were most likely to be considered ‘excellent services,’ with 43 percent and 31 percent respectively giving this response.

The largest number of respondents said that low-cost health care options were lacking in both availability and quality, with 27 percent and 26 percent giving these answers, respectively. Respondents were also likely to be dissatisfied with the availability and quality of health care options for non-routine/specialized illnesses (26 percent and 24 percent).

Many respondents (41 percent) did not know about the availability or quality of pediatric services, presumably those respondents without children. Breakdowns by demographic subgroup can be found in Appendix A.

Exhibit 1.2
Compared to other communities you’re familiar with, how would you rate the following aspects of health care in Summit County?



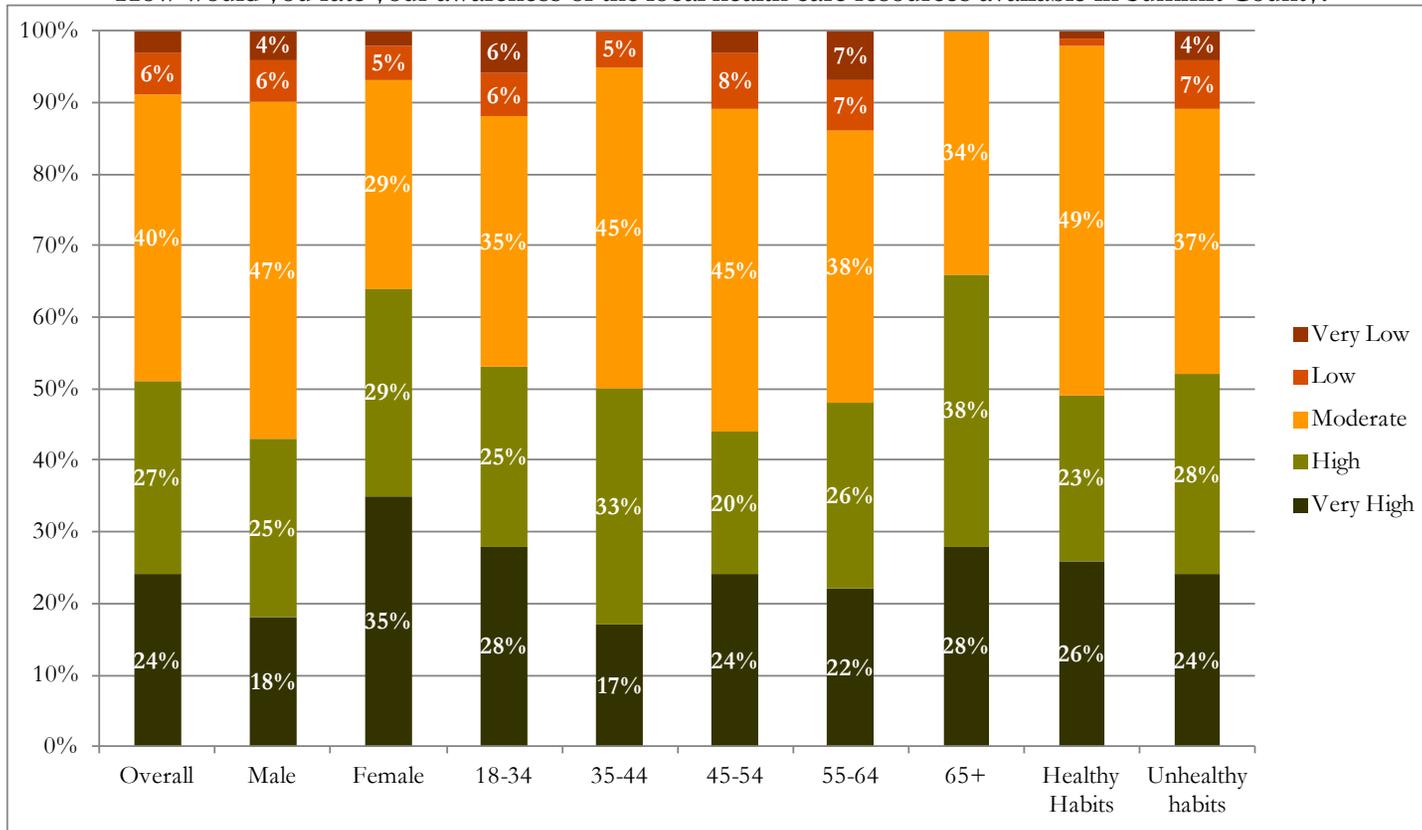
ACCESS TO HEALTH CARE

AWARENESS OF LOCAL RESOURCES

Respondents were then asked to rate their level of awareness with local health care resources available to them in Summit County. Overall, most respondents said their awareness was ‘moderate,’ with 40 percent giving this response. For all respondents, awareness of resources was generally high, with 91 percent saying their awareness was either ‘moderate,’ ‘high,’ or ‘very high.’

Exhibit 2.1

How would you rate your awareness of the local health care resources available in Summit County?



Within demographic groups, females were more likely to have ‘high’ or ‘very high’ awareness than males (64 percent versus 43 percent). Those having the most “low” or “very low” levels of awareness of health care resources in Summit County were those in the 18 to 34 age group (12 percent), those in the 45 to 54 age group (11 percent), those in the 55 to 64 age group (14 percent), and those with unhealthy lifestyle habits (11 percent).

It can be inferred that awareness is generally high among all groups, but those who access health care services most frequently are most knowledgeable about it.

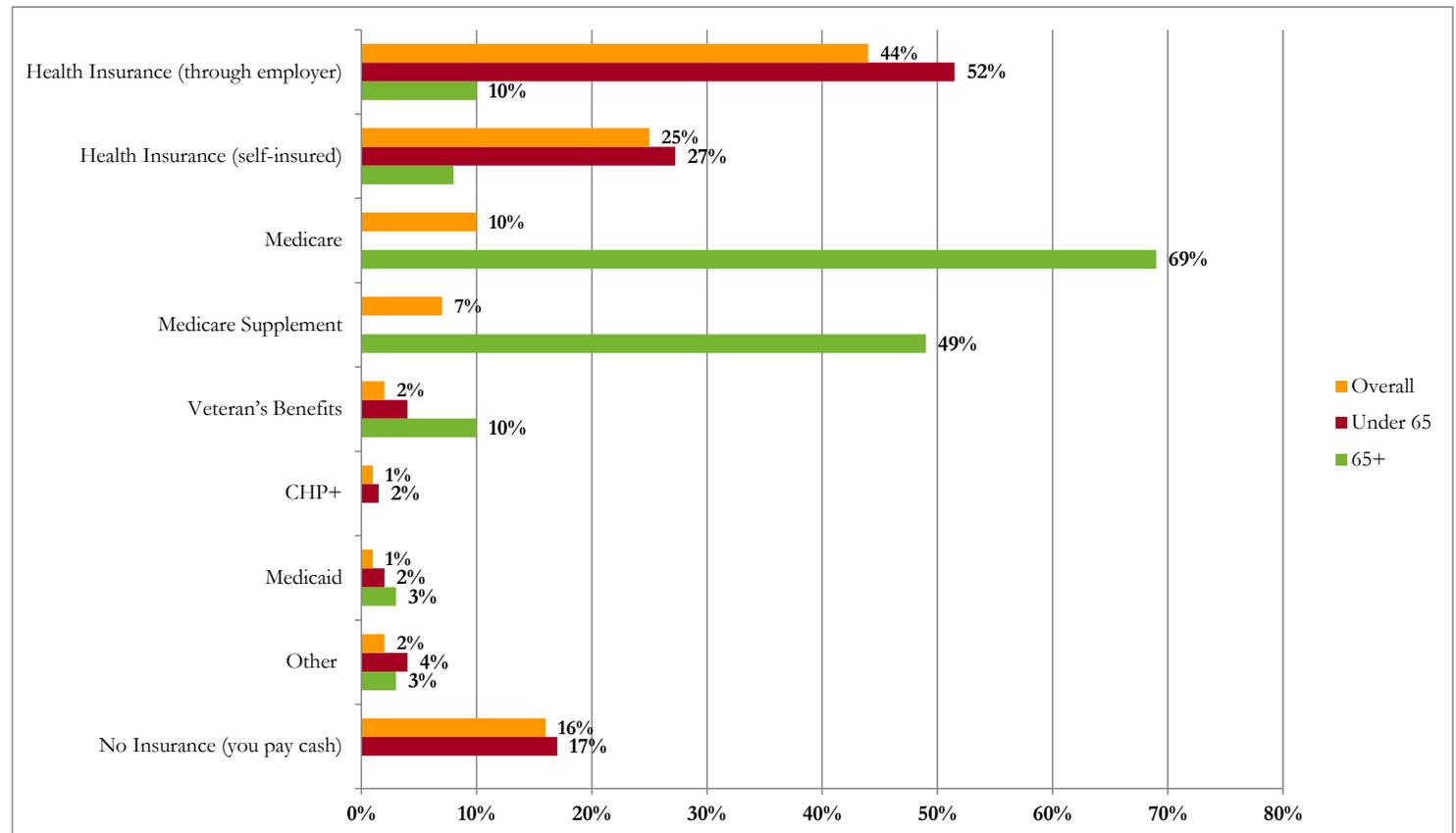
CURRENT INSURANCE SITUATION

Respondents were then asked about their current health insurance coverage, as seen in Exhibit 2.2. The largest number of respondents reported having health insurance through their employer (44 percent). Furthermore, 25 percent of respondents reported being on health insurance they had personally purchased. Sixteen percent of respondents reported having no insurance.

In terms of demographic groups, respondents mostly gave responses typical to those in their life situation. For example, 69 percent of those respondents over age 65 reported Medicare as their health insurance option. Also, younger respondents (18-34) were more likely to report having no insurance (32 percent).

Those respondents with unhealthy life habits were also more likely to have no insurance, with 21 percent giving this response.

Exhibit 2.2
Which of the following describe your current health insurance for you and your family? (multiple responses allowed)



HEALTH INSURANCE INADEQUACIES

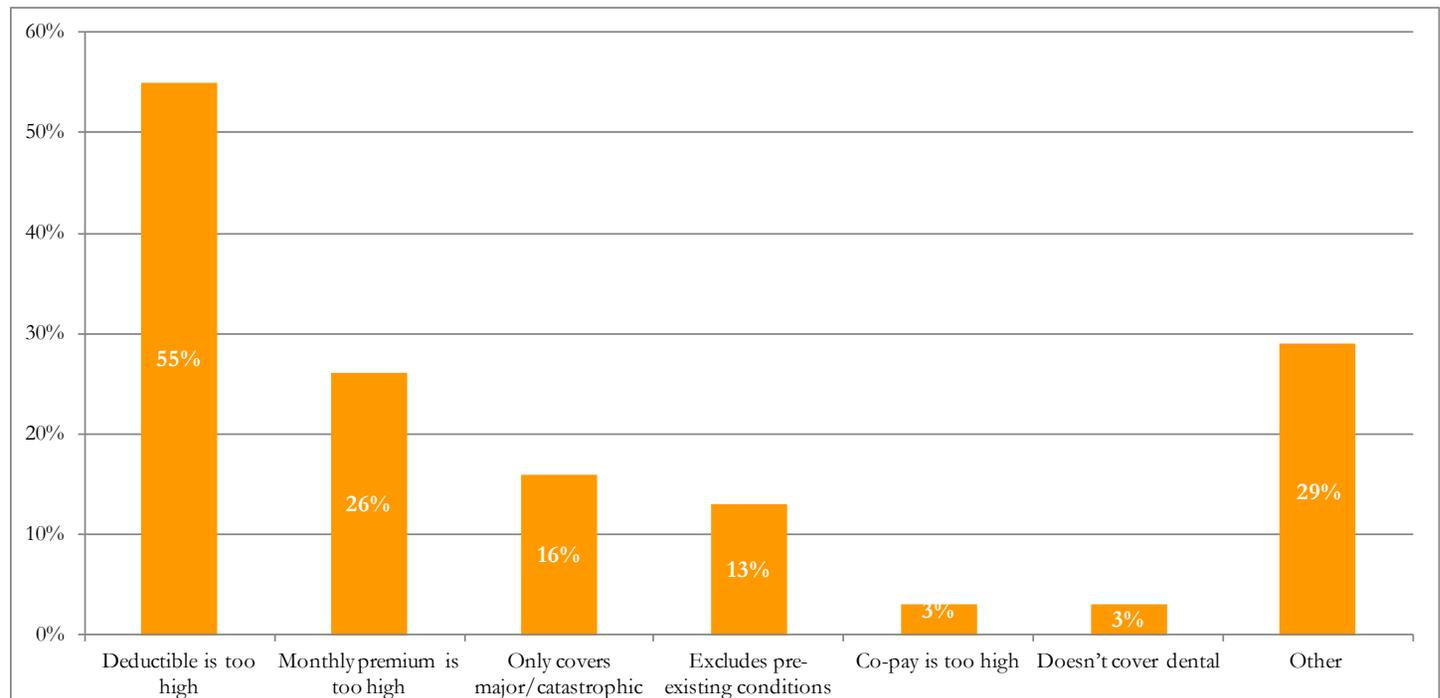
After being asked further about their health insurance situation (results available in Appendix A), respondents who indicated that their health insurance was inadequate for their family’s needs were asked the reasons for this inadequacy. Overall, the majority (55 percent) of these respondents cited a high deductible as the reason for the shortcomings of their health insurance. The next highest number of respondents (26 percent) cited high monthly premiums as the reason for their

dissatisfaction.

Respondents were given numerous options to express their reasons for believing their insurance to be inadequate, but in addition to the answers detailed in the preceding paragraph, only four others were cited. These were insurance only covering major injuries/illnesses (16 percent), insurance excludes preexisting conditions (13 percent), co-pay is too high (3 percent), and insurance doesn’t cover dental work (3 percent).

The most frequent “other” responses included concerns about insurance being accepted by specific doctors.

Exhibit 2.3
What is inadequate about your health insurance?

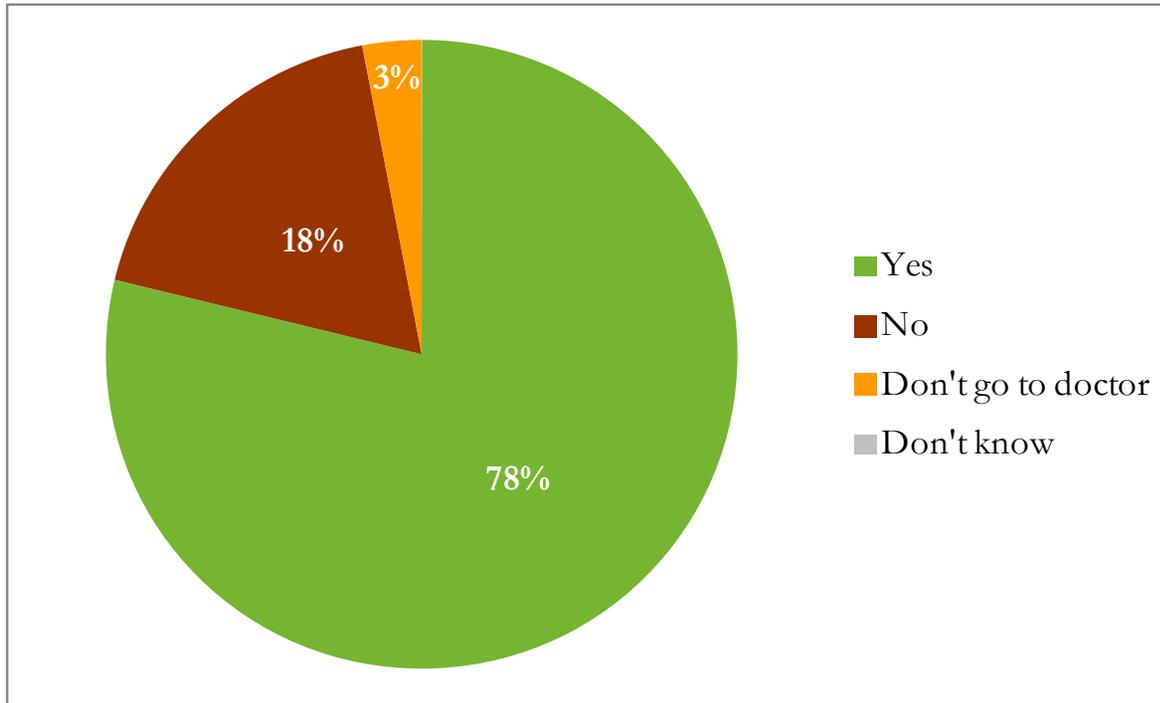


Note: This question was only asked to respondents who said that their insurance was inadequate (n=36).

HEALTH CARE LOCATION AND INFORMATION

LOCATION OF HEALTH CARE SERVICES

Exhibit 3.1
Is the doctor you typically go to located in Summit County?



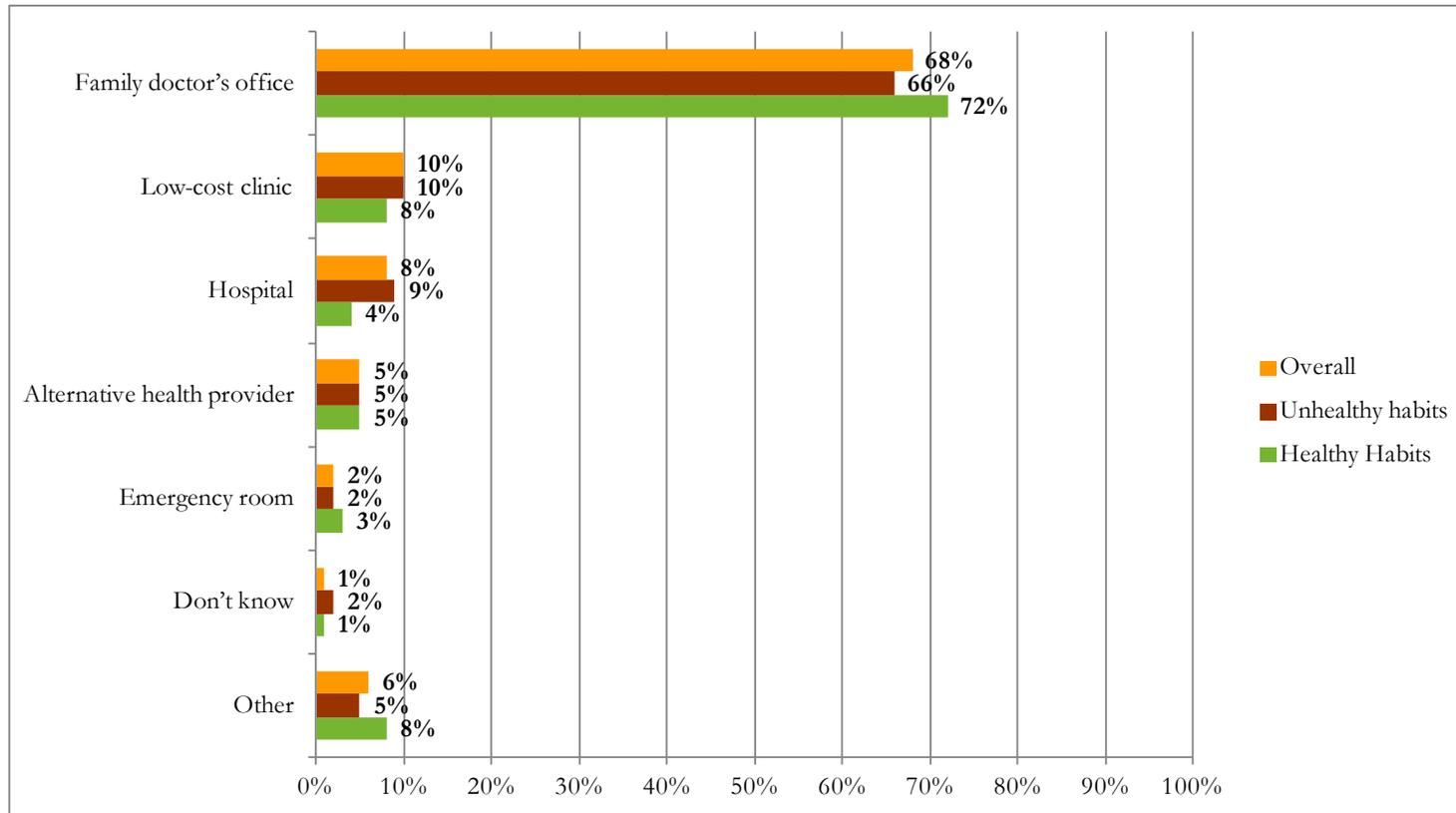
Survey respondents were then asked about the location and specialization of their usual and most recent health care services. The first question (shown in Exhibit 3.1) asked respondents if the doctor they typically see is located in Summit County. The majority (78 percent) said their doctor is in Summit County, while 18 percent said their doctor is not in Summit County. An additional 3 percent responded that they do not regularly go to the doctor either in or outside of Summit County.

In agreement with conventional wisdom, more men (5 percent) than women (zero percent) responded that they do not go to the doctor. Respondents with healthy life habits were more likely to see a doctor outside of Summit County (24 percent) than respondents with unhealthy life habits (16 percent).

LOCATION OF LAST CARE RECEIVED

As shown in Exhibit 3.2, the majority of respondents (68 percent) responded that they last received medical care at their family doctor’s office. The next largest number of respondents cited a low-cost clinic as the last place they received health care, with 10 percent giving this response. Eight percent of respondents said they had last received care at a hospital.

Exhibit 3.2
Where did you go to receive that care?



Within demographic groups, the largest

differences were seen in age groups on this question. No respondents in the 55 to 64 or 65 and older age groups reported having gone to a low-cost clinic, while 15 percent and 19 percent of 18 to 34 year-olds and 35 to 44 year-olds, respectively, reported doing so. Males and those in the 45- 54 year-old age group were the most likely to have gone to the hospital for their most recent care, with 11 percent and 14 percent respectively giving this response.

ADEQUACY OF SERVICES PROVIDED IN SUMMIT COUNTY

QUALITY OF SPECIFIC HEALTH CARE SERVICES

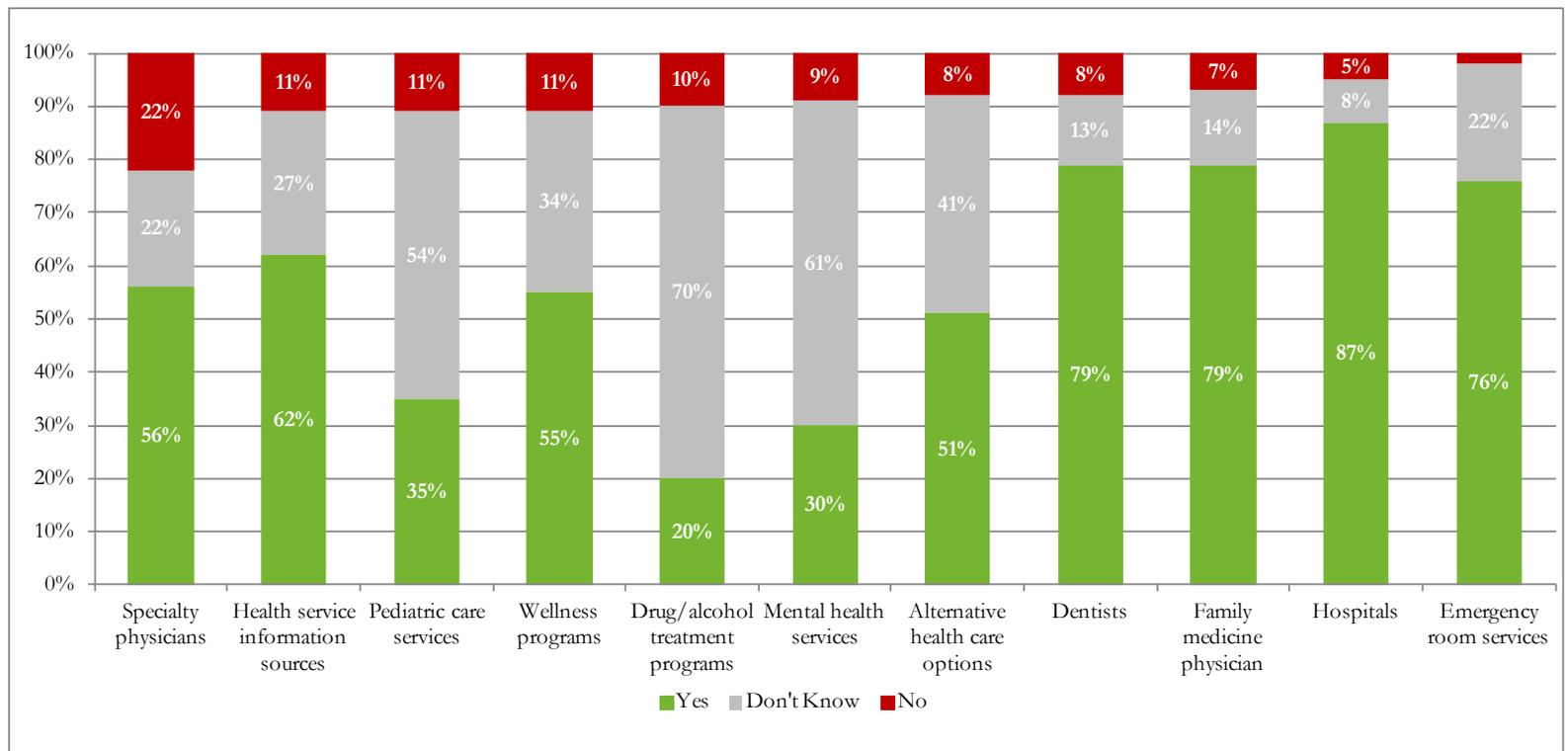
In the next line of questioning, respondents were asked about different factors in the health care system in Summit County. First, as shown in Exhibit 4.1, respondents were asked about their satisfaction with the quality of specific health care services. The highest level of satisfaction (87 percent) was given to hospitals, followed closely by family medicine physicians and dentists, each at 79 percent.

Also observed were high numbers of respondents saying they did not know about the quality of these specific services. For example, a full 70 percent responded they were not knowledgeable about the quality of drug/alcohol treatment programs in Summit County.

The largest number of respondents replied that they were not satisfied with the quality of the specialty physicians in Summit County, with 22 percent giving this response. However, 56 percent of respondents did say they were satisfied with the quality of specialty physicians in Summit County.

Exhibit 4.1

Are you satisfied with the quality of the following health care services that you have received or can receive in Summit County?



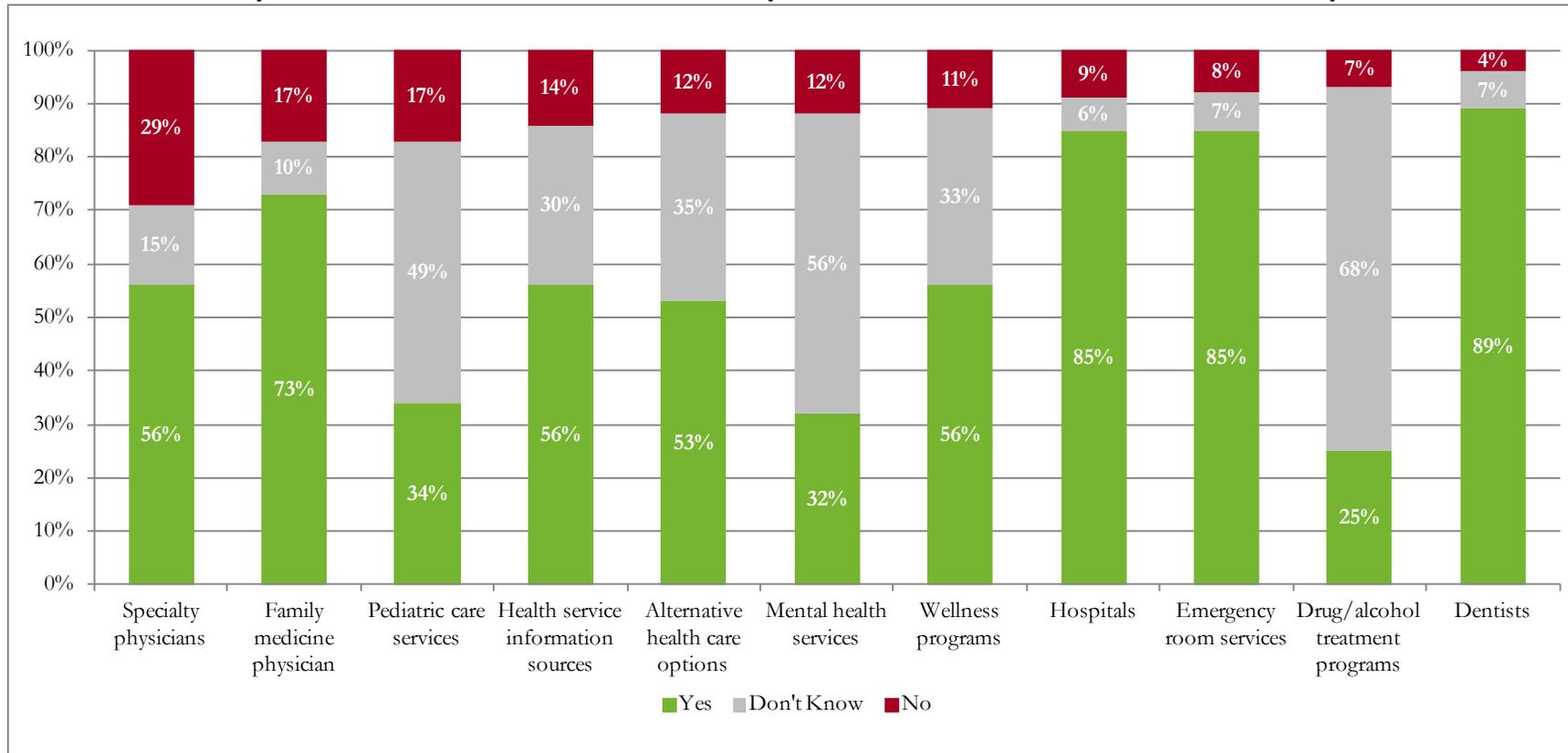
SATISFACTION WITH HEALTH CARE SERVICE CHOICES

As shown in Exhibit 4.2, respondents were then asked about their satisfaction with the number of choices available to them for specific care areas in Summit County. The largest number of respondents said they were satisfied with the number of choices of dentists in Summit County, with 89 percent giving this response. This was followed by satisfaction in selection among hospitals (85 percent) and emergency room services (also 85 percent).

Again, respondents saying they didn't know about the number of choices of certain services was a factor in the results, with 68 percent saying they didn't know about the number of options for drug and alcohol treatment programs. Again, the largest number of dissatisfied respondents was in speciality physicians, with 29 percent saying they were not satisfied with the number of choices in Summit County.

Exhibit 4.2

Are you satisfied with the number of choices that you have received or can receive in Summit County?

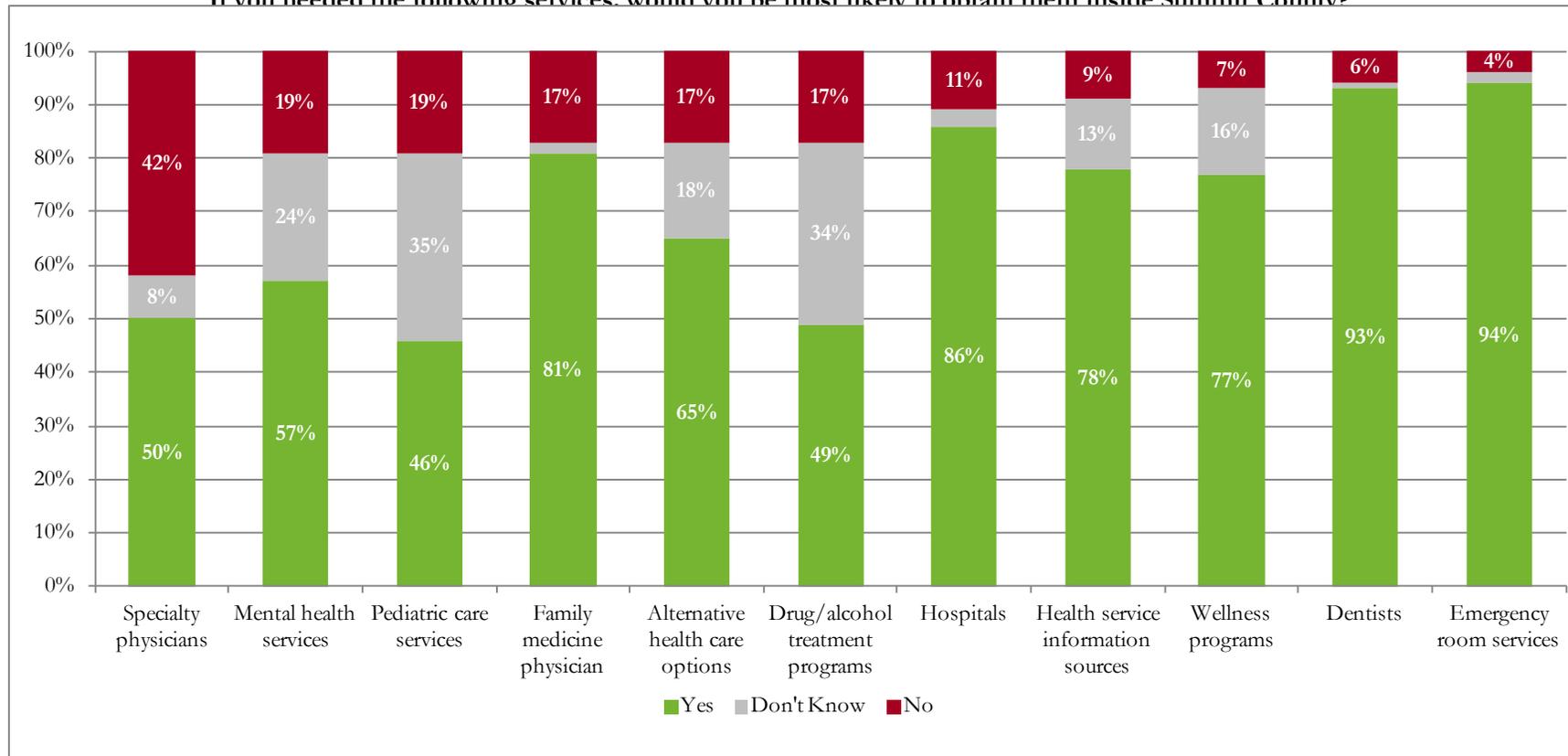


LIKELIHOOD OF OBTAINING SERVICES IN SUMMIT COUNTY

Respondents were then asked about their likelihood of obtaining specific services within Summit County. Nearly all respondents (94 percent) stated that they would obtain emergency room services inside Summit County if they needed them, and 93 percent said they would go to a dentist in Summit County. The largest number of respondents saying they would seek specific health care outside Summit County was those seeking specialty physicians, with 42 percent giving this response. Nineteen percent of respondents said they would go outside of Summit County for mental health services and pediatric care services. With few exceptions, the majority of respondents said that they would stay in Summit County for their health care needs.

Exhibit 4.3

If you needed the following services, would you be most likely to obtain them inside Summit County?



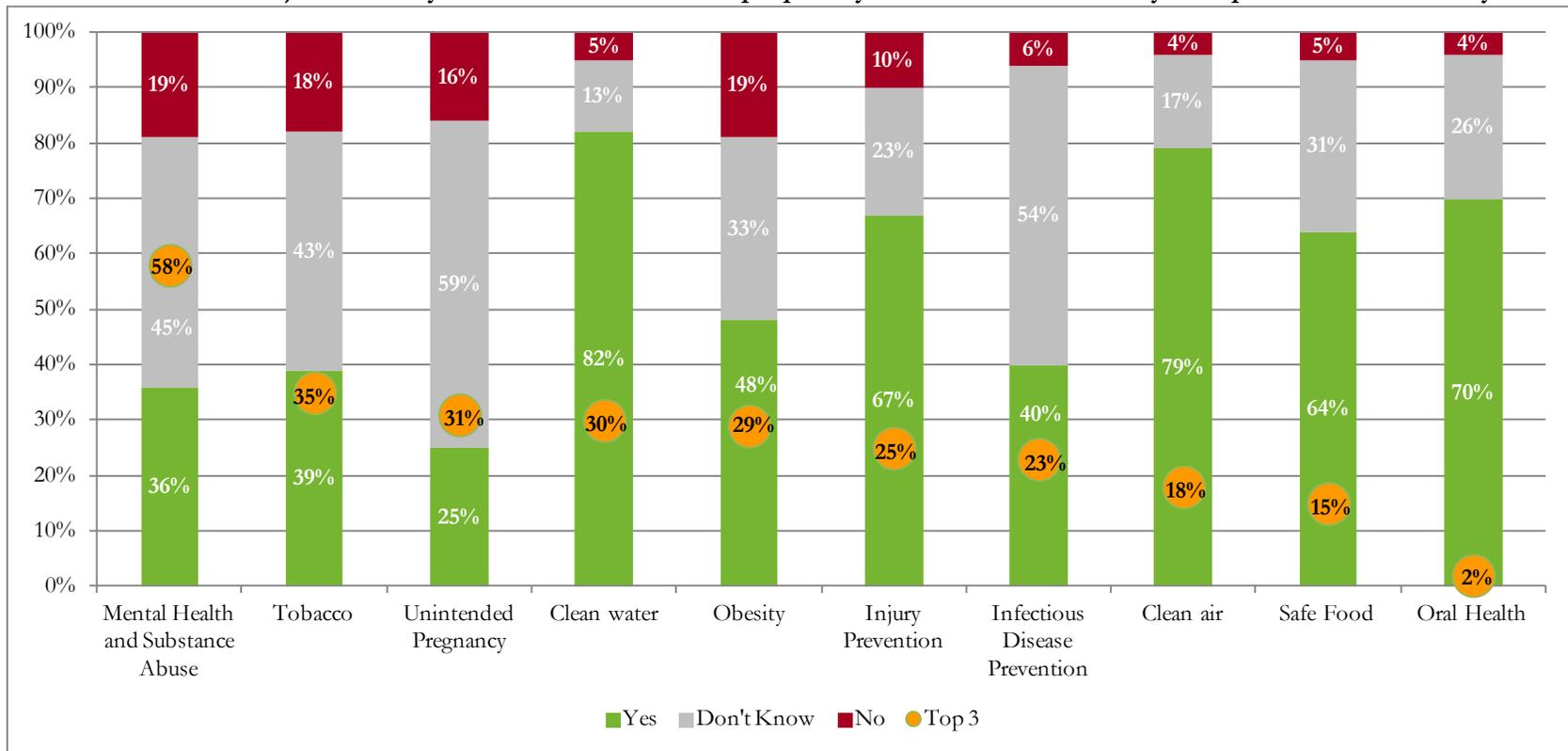
PRIORITY HEALTH CARE PROBLEM AREAS

As shown in Exhibit 4.4, respondents were then asked whether or not they believe Summit County is doing enough to prevent problems in specific health-related areas. They were also asked to name which of the same issues should be top three priorities for the county to improve over the next five years. The largest number of respondents said they believed Summit County was not doing enough to prevent mental health/substance abuse issues or obesity issues, with 19 percent giving this response. Respondents believed that the county was doing enough to prevent problems with clean water (82 percent) and clean air (79 percent). The three top issues for prioritization, according to survey respondents, were mental health/substance abuse issues (58 percent), tobacco (35 percent), and unintended pregnancy (31 percent).

Exhibit 4.4

Does Summit County do enough to prevent problems in the following health-related areas?

Which of the areas I just read do you think should be the Top 3 priority areas for Summit County to improve in the next five years?



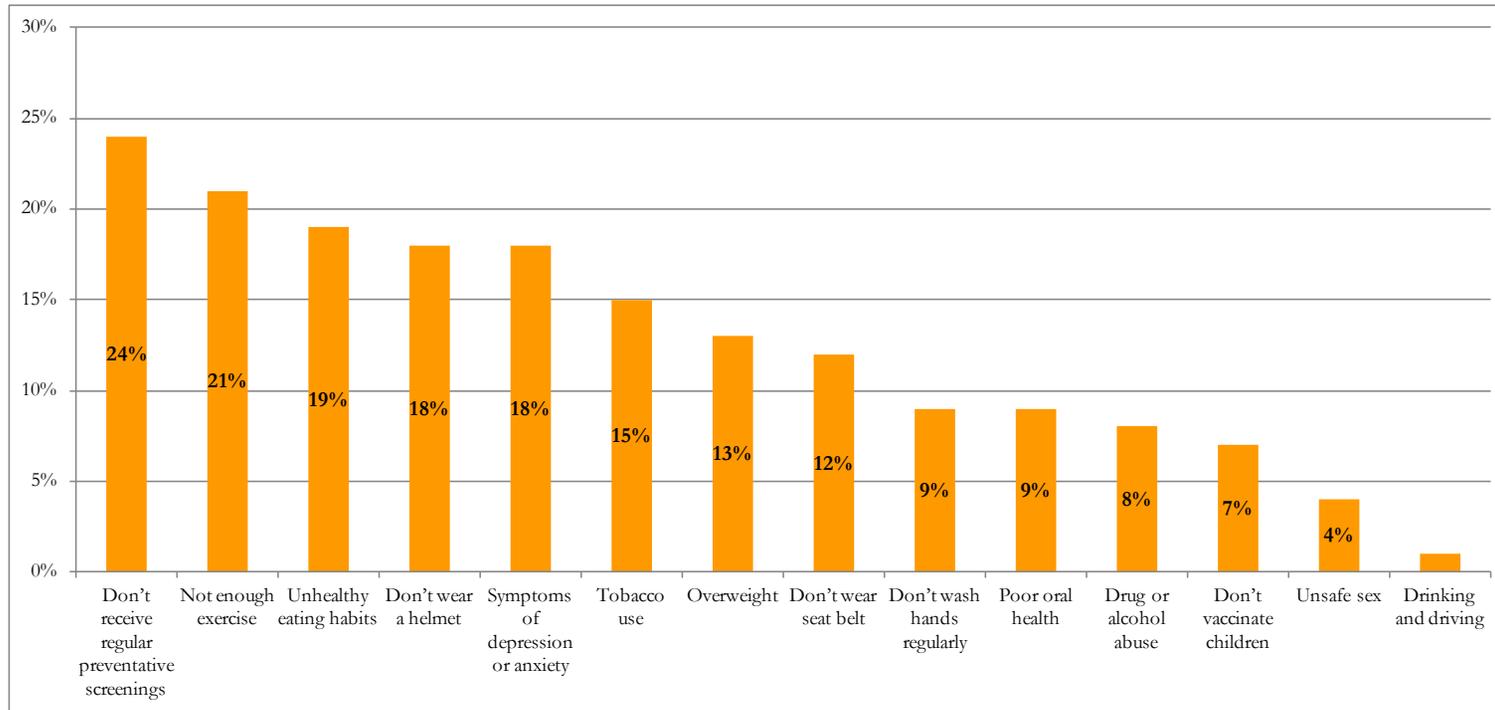
PERSONAL HEALTH RISKS

PERSONAL HEALTH HABITS

Respondents were also asked about their personal health behaviors and habits. They were given a list of ‘unhealthy’ activities and asked whether or not it applies to them personally. The most frequent response given was respondents who don’t receive regular preventative screenings, with 24 percent giving this answer. Lack of exercise (21 percent) and unhealthy eating habits (19 percent) were the next most frequent responses.

Exhibit 5.1

I’m going to read a list of items about your personal health. For each one, please tell me whether or not it applies to you by answering yes or no.



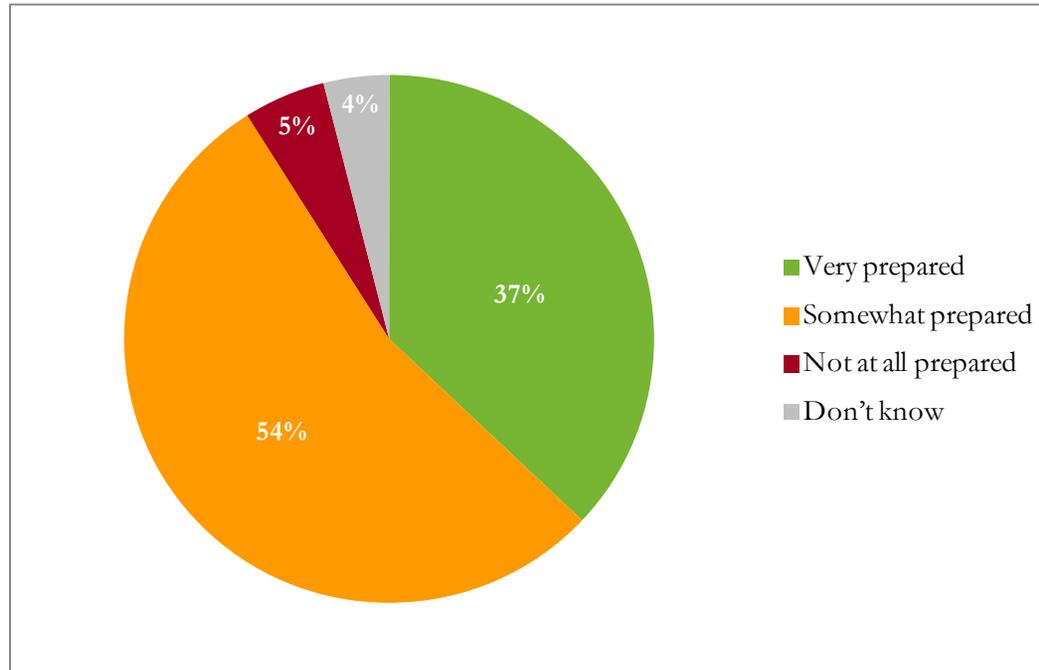
Overall, males were most likely to have engaged in unhealthy behaviors, along with those in the 18 to 34 age group. Certain personal health habits were more prevalent among women, such as symptoms of depression or anxiety, with 24 percent of females giving this response, compared to 14 percent of males.

Of respondents who said at least one of these habits applied to them, 34 percent said they do not receive regular screenings, meaning the people with the least healthy habits are least likely to get basic care.

COUNTY EMERGENCY PREPAREDNESS

Respondents were then asked about their beliefs regarding Summit County’s level of preparedness should an emergency situation like a natural disaster arise. Overall, 91 percent of respondents said that Summit County was at least somewhat prepared to respond to an emergency situation like a natural disaster. However, five percent of respondents said they thought Summit County was not at all prepared. Males were more likely to believe Summit County is very prepared for an emergency situation, with 44 percent giving this response, compared with 23 percent of females. Respondents in the 45 to 54 age group were most likely to say that Summit County was not at all prepared, as 13 percent gave this response.

Exhibit 5.2
How prepared do you think Summit County is to respond to a potential emergency situation, such as a wildfire or other natural disaster?

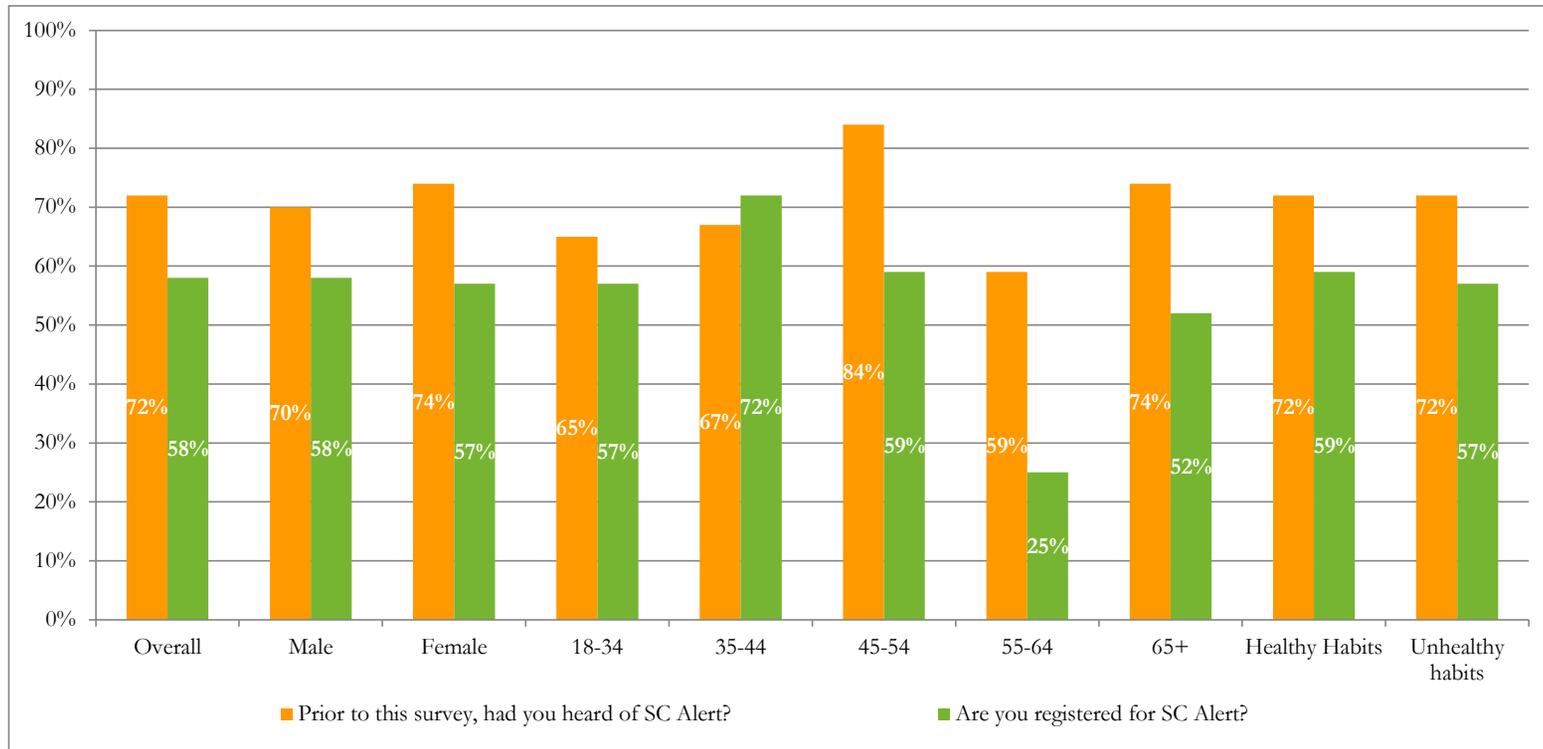


SC ALERT AWARENESS AND PARTICIPATION

As a final line of questioning, respondents were asked about their level of awareness of the SC Alert emergency alert system and whether or not they are currently registered with the system. The overall majority of respondents (72 percent) were aware of the SC Alert system prior to the survey. Of those who were not aware of the system, the largest number was in the 55 to 64 age group, among whom only 59 percent said that they were aware of the service.

The majority (58 percent) of survey respondents said they were currently registered for SC Alert. The largest group registered was those aged 35 to 44, with 72 percent responding this way. The 55 to 64 age group was least likely to say they are registered, with only 25 percent giving this response.

Exhibit 5.3
Prior to this survey, had you heard of the emergency alert system, SC Alert?
Are you currently registered for SC Alert?



SPANISH-LANGUAGE SURVEYS

INTRODUCTION

Corona Insights is pleased to present this report to Summit County on the results of supplementary surveys conducted with Spanish-speaking residents of the County. This survey was meant to be an addition to the telephone surveys conducted with the general public in order to yield a basic understanding of how Spanish-speaking residents of the county vary from their English-speaking counterparts.

REPORT LAYOUT

This report is divided up into a number of major sections, which include the following:

- ➔ **Background and Methodology** – This section provides a detailed description of the approach used for this project in terms of goals, methodology, and demographic characteristics of respondents.
- ➔ **Summary of Key Findings** – This section contains a brief overview of the key findings and themes of the research.
- ➔ **Appendix A: Detailed Analysis Tables** – In this section, tabulations are provided of each survey question individually.
- ➔ **Appendix B: Survey Instrument** – This section contains the survey instrument used for this project.

BACKGROUND AND METHODOLOGY

SURVEY INSTRUMENT

The survey instrument for this project was simply a translation of the telephone survey from English to Spanish. The English version of the survey was designed via a collaboration of key staff from Corona Insights and Summit County. Concepts and questions were initially developed in a meeting of key stakeholders in Summit County, and were then revised into a viable survey format by Corona Insights. This initial draft of the survey instrument was then revised collaboratively until a final version was agreed upon.

SAMPLING METHOD AND SURVEY MODE

This task was completed independently of Corona, but County staff made efforts to collect surveys from a variety of locations around Summit County such as churches, food banks, and the Family and Intercultural Resource Center in order to provide a broad view of how the County's Spanish-speaking residents feel. All surveys were conducted between and May 14th and June 19th, 2012.

SAMPLE SIZE AND MARGIN OF ERROR

In total, 78 surveys were completed. This response level allows basic conclusions to be drawn about the opinions of Summit County's Spanish speakers, but is relatively weak from a statistical standpoint. Thus, readers should consider these findings to be directional in nature rather than statistically strong.

WEIGHTING

Corona typically applies corrective weightings to the results of our surveys in order to ensure that the results more closely match those of the entire population on key demographic factors. Due to small sample sizes, this process would most likely only introduce more error into the findings. Thus, no weights were applied to the results presented in this report.

SUMMARY OF KEY FINDINGS

The following is a brief discussion of the survey's findings as they relate to those seen among English-speaking telephone respondents. Note that these paper surveys were not necessarily conducted in a truly random manner, so readers should keep this in mind when interpreting the results.

BASIC ASPECTS OF HEALTH CARE

- ➔ Among Spanish-language survey respondents, quality ratings of life in Summit County were high, but considerably lower than that of telephone respondents. In the public telephone survey, 98 percent of respondents rated their quality of life as being “very good” or “good” compared to roughly three in four Spanish-language respondents.
- ➔ Spanish-language survey respondents had similar perceptions of the availability and quality of various aspects of health care in Summit County compared to respondents to the public telephone survey (and in some cases, Spanish-language respondents gave even higher ratings). However, it should be noted that many respondents were drawn from service providers in the area, so these individuals may be more familiar with health care options in Summit County than the average Spanish speaker in the general public.

ACCESS TO HEALTH CARE

- ➔ Awareness of health care options in Summit County were similar between Spanish-language survey respondents and the public telephone surveys. Overall, roughly half of respondents to both surveys said that their awareness of local health care options was “high” or “very high.”
- ➔ Roughly two-thirds percentage of Spanish-language survey respondents had no health insurance. While this may again be a function of the types of locations in which respondents were surveyed, this would seem to indicate that a substantial percentage of the Spanish-speaking public likely has no insurance.
- ➔ Even among those who said they did have health insurance, nearly half of Spanish-language survey respondents said that it was not adequate for their needs. More specifically, many such respondents said that their health insurance didn't cover other members of their family and that the co-pays were too high for them to afford.

HEALTH CARE LOCATION AND INFORMATION

- ➔ Most respondents (from either survey) seek care in Summit County. However, respondents to the Spanish-language survey were more likely to say that they simply don't go to the doctor. Among those who do, a vast majority of Spanish-language survey respondents said that they went to a low-cost clinic, while most respondents to the public telephone survey went to a family doctor's office.
- ➔ Transportation to health care is more of an obstacle for Spanish-speaking respondents. More specifically, approximately one-third of respondents said that transportation was an issue compared to only 7 percent of public telephone survey respondents.

ADEQUACY OF SERVICES PROVIDED IN SUMMIT COUNTY

- Spanish-language survey respondents were generally satisfied with the quality and quantity of specific health care services in Summit County. Compared to public telephone survey respondents, they were somewhat more likely to say that they were satisfied with services such as drug/alcohol treatment programs, mental health services, and pediatric care services. However, they were somewhat less likely to say they were satisfied with the quality of emergency room services and hospitals.
- Most Spanish-language survey respondents said that they would seek care for most types of health care services in Summit County (at similar rates of respondents to the public telephone survey). However, they were more likely to say that they would seek care for drug/alcohol treatment programs, pediatric care services, and specialty physicians in Summit County compared to respondents to the public telephone survey.
- Spanish-language survey respondents varied significantly on their priorities for improvements in Summit County. While respondents to the public telephone survey focused on mental health/substance abuse, tobacco, and unintended pregnancy in their responses, Spanish-language survey respondents tended to instead focus on obesity, clean air/water, and infectious disease prevention in their chosen priorities.

PERSONAL HEALTH RISKS

- Spanish-language survey respondents were considerably more likely to report having almost all of the “unhealthy behaviors” tested in the survey compared to their public telephone survey counterparts. Some of this difference can likely be accounted for by inherent response biases between telephone and mail surveys (i.e., respondents are more likely to answer honestly when they are not giving a response directly to another person), this would seem to indicate that Spanish-speakers may be a good target audience to improve unhealthy behaviors in the future.
- Spanish-language survey respondents were considerably less likely to be aware and registered for SC Alert compared to respondents to the public telephone survey. Among public respondents, 72 percent were aware of the service and 42 percent overall were registered. Among Spanish-language survey respondents, however, fewer than half were aware of the service, and only roughly one in eight were registered.

IN CONCLUSION

As was seen among respondents in the general public, overall ratings of the availability and quality of various health services in Summit County are high among Spanish-language survey respondents. However, their ability to access that care seems to be considerably lower. A large percentage of respondents had no health insurance, and even among those who did have insurance, many didn't feel that their health insurance was sufficient for the needs of themselves and their families. Generally speaking, it would seem that the highest priorities for Spanish speakers in Summit County are more about improving access to care across the board than on any specific type of care needed. Helping to make care accessible (via transportation) and affordable will help to ensure that the health needs of Summit County's Spanish-speakers are met in the future.

PUBLIC FOCUS GROUPS

INTRODUCTION

OVERVIEW

Corona Insights is pleased to present this report of research findings for two focus groups conducted in June, 2012, with full-time Summit County residents. This research was designed to assess feelings, perceptions, and knowledge of healthcare in the county to establish priorities for improving the availability of public health services in the future.

The following report includes a description of the project design, methodology, and implementation of the research, along with detailed focus group findings.

REPORT LAYOUT

This report is divided up into a number of major sections, which include the following:

- ➔ **Summary of Key Findings** – This section contains a brief overview of the key findings and themes of the research.
- ➔ **Background and Methodology** – This section provides a detailed description of the approach used for this project in terms of goals, methodology, and demographic characteristics of respondents.
- ➔ **Detailed Research Findings** – This section contains findings of each of the study’s main questions individually.
- ➔ **Appendix: Moderator Guide** – The moderator guide used for this study is included in this final appendix.

SUMMARY OF KEY FINDINGS

Key findings produced from in-depth analysis of the focus groups are presented below. [Detailed findings](#), which expand on the following key findings and include verbatim comments from interviewees, are presented later in this report.

- **As a whole, residents are generally satisfied with healthcare offerings in Summit County.** In terms of quality of care, many people feel that Summit County is second to none. Many residents also feel fortunate that the county has as many services available as it does – especially when considering its relatively small population.

Specifically, perceived strengths relate to:

- ⇒ Primary care
- ⇒ First class orthopedic surgery and physical therapy
- ⇒ High quality doctors, first responders, and professional staff
- ⇒ A strong network that lends itself to great referrals statewide

- **Most of the perceived areas for improvement are related to increasing specialty care options.** Participants often raved about their experiences with standard visits and procedures in Summit County, and they appreciated that doctors are quickly able to find a specialist in Denver or Vail when necessary, but they also wanted more specialty care services offered within the county at least on a part-time basis.

The most commonly mentioned potential areas for improvement include:

- ⇒ Pediatric and geriatric care
- ⇒ Mental health and substance abuse treatment
- ⇒ Issues with youth – such as tobacco, obesity, and unintended pregnancy

Of these potential areas for improvement, both groups thought that an additional pediatrician is necessary in the county, and they strongly felt that Public Health needs to start helping provide services such as assisted living facilities, home health options, and more senior rehab facilities.

In terms of mental health, substance abuse, and the other issues listed, they're viewed as important areas for Public Health to address because they're all areas where insurance is inadequate to help people receive treatment.

- **Low-cost options are viewed as necessary in Summit County, but many people don't think that Public Health needs to spend additional money to provide more services.** It was widely discussed that much of the county's population is uninsured or underinsured, but it was also discussed that there are some good options for them that already exist. Many thought that the Community Care Clinic is a tremendous resource; it's just not being used to its potential.

- ⇒ Participants tended to lean more toward promoting the low-cost services already available rather than spending money to create more.

“I've been a big consumer of medical services up here and I'm very happy with the situation...and as a family, we're very pleased with what we have.”

“Specialists that you need to access aren't always available here. Sometimes you do need to go elsewhere for care.”

- ➔ **Private insurance costs were discussed as being extremely high in Summit County.** While this thought isn't out of the ordinary for many people around the country, several group participants noted how it would be almost prohibitive for them to purchase insurance if they weren't offered it through their employer. Many thought that this is a very big problem in Summit County due to its "transient" population (e.g., ski resort employees) that doesn't receive health benefits.
 - ⇒ High costs of healthcare have forced more people to think about whether or not they actually *need* to go to the doctor. Now, many people are researching their symptoms online more and only going to a doctor if they deem it necessary. While Public Health might not be able to help much with lowering insurance costs, it may be able to help educate people who are uninsured. A good example of this might be to help make people aware of when they should and shouldn't visit the emergency room.

- ➔ **There are also several non-monetary frustrations about the healthcare system.** Most notably, this includes having to try navigating through complex documents and processes. Many participants stressed that it's often difficult and confusing to figure out the type of care they need and are eligible for.
 - ⇒ With all of the complexities around accessing and paying for healthcare, it might be helpful for Public Health to provide some guidance to people on how to navigate the system. Many people don't do it enough to get a feel for what works and what doesn't, so any types of tips/tricks that they're offered could certainly save them some time and frustration upfront.

- ➔ **There's a perceived need for preventive options, but it's not an area that's very top-of-mind for most people.** Preventive care wasn't really brought up by either group in casual discussion. Rather, they had to be prompted by the moderator to talk about it. This could be an indication that participants felt other needs were more important.
 - ⇒ Even so, many people were drawn to the idea of hiring a full-time traveling nurse for the school district. Several others also mentioned a need for a county dietician, and a need for Public Health to work more closely with parents and educators about teaching children the importance preventive health habits.

- ➔ **In terms of allocating county funding, residents feel that public health is a relatively high priority but perhaps not more important than education.** Responses were somewhat mixed on this topic, but public health and education generally rose to the top out of all potential public service needs.
 - ⇒ There wasn't an overwhelming response that Summit County needs to spend significantly more on healthcare. As previously noted, residents are mostly satisfied with what they're currently being offered. They're open to fund additional services if they're deemed appropriate and financially feasible, but they seem to understand that the county has a variety of public health needs and a limited amount of funding.

“There's never going to be enough money for healthcare...(and) there's all these things that draw money away from something that's essential, which in my mind is a person's health or their education.”

- ➔ **Messages in the Summit Daily and as handouts in schools appear the best ways to reach the largest audiences.** Readership of the Summit Daily is very high, and participants often praised the school system for proactively giving parents important information.
 - ⇒ These two avenues might be the best ways to increase the county’s outreach efforts. There also may be an opportunity to bolster the Summit County website, given that many people already use the web to research health topics (e.g., WebMD.com).
- ➔ **There’s a high level of awareness of healthcare messages, but there doesn’t appear to be a high level of knowledge about programs and services.** Participants were able to recall seeing a variety of messages, and some had heard of several of Summit County’s health tools (e.g., SC ALERT, SummitCares.org, 211, and the website) but they weren’t able to talk much about them or explain exactly what they offer.
 - ⇒ Messages are being noticed, but many simply aren’t being absorbed. The exception to this is SC ALERT, as many in the groups were aware of this resource and could actually explain what it is. However this tool was communicated to the general public, that same method might be beneficial to push SummitCares.org, 211, and the Summit County website because all three could benefit from additional exposure.

BACKGROUND AND METHODOLOGY

Corona was retained by Summit County Public Health to conduct an assessment of public health needs. Corona conducted very similar research in Summit County in 2007 and largely repeated that process in 2012. Note that some of this year's research built upon processes and outcomes from previous research, but it was also updated to make sure new issues and needs facing the counties today were addressed.

Other research that's part of this health needs assessment includes: a review of existing research and other secondary data; a community survey of residents; an online questionnaire with stakeholders; and a retreat facilitation to go over all findings and recommendations with key stakeholders in Summit County.

TOPICS EXPLORED IN THE FOCUS GROUPS

All focus group participants previously completed a telephone survey about community health needs. During the focus groups, they were then able to build upon some of the survey findings and also explain why they feel the way they do about potential long-term strategies for healthcare in Summit County.

Participants spoke about how well their health needs are currently being met, and they also gave their thoughts about prioritizing health options for the future. Additionally, they discussed communication messages and modes that might be most effective in reaching the residents of Summit County.

PROJECT SCOPE

Two focus groups were conducted on June 13, 2012 between 6-10 pm. These groups took place at the Medical Office Building in Frisco, Colorado, and a total of 20 full-time Summit County residents were in attendance.

RECRUITING PROCESS

Everyone who completed the telephone survey about community health needs was eligible for these follow-up focus groups. Of those who chose to provide their name and phone number during the survey, Corona created a list and contacted potential focus group participants based a few basic criteria:

- ⇒ Must be a full-time resident of Summit County
- ⇒ Must not work for Summit County Public Health or in the market research industry
- ⇒ Must have completed the telephone survey (in its entirety) about community health needs

Additionally, both groups were recruited to include a mix of ages and genders.

Corona handled all aspects of the recruiting process, including creating the list of potential participants, calling them and screening them for the group, and then following up and providing them with all necessary information after they agreed to participate. Ultimately, recruiting was very successful with 9 participants in the first group and 11 in the second.

FOCUS GROUP PARTICIPANTS

Characteristics of the groups are summarized below, based on information that was collected during the recruiting process and introductory remarks during the group. The numbers in parentheses on the chart indicate the number of times a particular response occurred.

	Group 1 (6pm – 8pm)	Group 2 (8pm – 10pm)
Number of participants	9	11
Gender	Female (5) Male (4)	Female (6) Male (5)
Age	<35 (0) 35-49 (2) 50-64 (3) 65+ (4)	<35 (2) 35-49 (2) 50-64 (4) 65+ (3)

Additionally, groups contained a mix of working people, retirees, and students, as well as people who pay for their health costs individually and as a family. These criteria helped ensure that a wide variety of Summit County residents participated in the focus groups.

FOCUS GROUP MODERATION

Moderator: Leo Lewis, principal at Corona Insights, moderated both focus groups. Leo is a very experienced moderator and is also very familiar with previous work conducted with Summit County Public Health.

Moderator's Guide: The focus group moderator's guide was assembled by Corona Insights based on survey findings and based on input from Summit County Public Health. This guide was used as a standard but somewhat flexible guideline for discussion in that the moderator had the option to diverge from the guide if appropriate. The same guide was used during both groups, and a copy is provided in the [Appendix](#) of this report.

LOGISTICS

Focus Group Recording: Corona was responsible for setting up audio- and video-recording equipment in order to effectively capture participants' feedback during the group session. Tapes were then viewed to accurately capture verbatim comments from participants.

Snacks and Incentives: Each participant was given \$60 cash for participating in a focus group. Additionally, Summit County Public Health provided a light meal and beverages for those in attendance.

DETAILED RESEARCH FINDINGS

Specific focus group findings are detailed in this section, with direct comments noted in quotations wherever possible. Findings are reported by each major topic area addressed in the discussions, and generally follow the order of the moderator’s guide.

Topics covered during discussion are presented within this report in the following order:

- ➔ Healthcare Services Currently Meeting Needs
- ➔ Potential Improvements to Healthcare Services
- ➔ Perceived Importance of Improving Healthcare Services
- ➔ Healthcare Access and Insurance
- ➔ Healthcare Information and Communications

HEALTHCARE SERVICES CURRENTLY MEETING NEEDS

Participants were first asked about their perceptions about the quality and quantity of healthcare services available to them. Note that they weren’t prompted to only think of the positive aspects first, but several came up right away when asked to talk about the overall healthcare system in Summit County.

OVERALL CARE

Summit County residents are generally happy with the healthcare services offered to them. When thinking about the big picture, most participants stated that Summit County is fortunate to have all of the health options that it does. Several people compared the county to similar sized areas they’ve lived in, and they felt that Summit is ahead of the curve due to the St. Anthony Summit Medical Center and Community Care Clinic in Frisco and the various other clinics and rec centers in Breckenridge and Silverthorne.

- ⇒ “My wife and I have used the healthcare here a lot in the last five years. I think the networking is good. I don’t have any problems...I find it very good.”
- ⇒ “I’ve been a big consumer of medical services up here and I’m very happy with the situation. I’m now carrying a pacemaker with me and I get good care here...and as a family, we’re very pleased with what we have.”

Key Point: This is what’s most important – that people are pleased overall. Throughout the rest of this report, several specific areas are drawn out that are viewed as either positive or negative, but, when thinking about Summit County’s healthcare system as a whole, residents are mostly satisfied.

Several discussed positive experiences with general practitioners, and they noted how general primary care is one of Public Health’s biggest strengths. More *specific* areas that participants thought are also currently meeting needs are outlined on the following pages.

PHYSICAL THERAPY AND ORTHOPEDIC CARE

Residents feel that Summit County has top notch care related to sports- and recreation-related injuries. The county is somewhat unique in that many residents (both young and old) are very active year round. Since many of the popular activities in the area naturally lend themselves to injury, it's common for people there to need therapy and orthopedic services. Because of this, participants felt that many of the nation's top doctors in these fields want to work in Summit County.

The two comments below came from separate groups and both received a tremendous amount of agreement from other participants.

- ⇒ “In terms of physical therapy and sports medicine, this is the best place...It's tough to find any better anywhere.”
- ⇒ “I think orthopedic care here is literally the best in the country.”

QUALITY OF DOCTORS, FIRST RESPONDERS, AND PROFESSIONAL STAFF

Quality of care is perceived as very high. As explained in the previous point, there is a perception that top doctors want to live and work in Summit County. Residents also feel that the area attracts first-class physician assistants, nurses, and emergency personnel.

No one in the groups specifically mentioned a bad experience they've had with any type of medical professional. Rather, they often made glowing comments about the level of service they received. These caring, highly trained professionals seem to be a big reason why Summit County residents are generally happy with the overall healthcare system.

- ⇒ “My perception is that the doctors are excellent...”
- ⇒ “I've had to call 911 before. Emergency (services) are great, first responders are great, firefighters are great – all that stuff is great.”
- ⇒ “The emergency room was awesome...and I've had a friend here in the hospital for a week and she had superb care and pleasant surroundings so I'd say 'hooray' for our medical facilities.”

NETWORKING AND REFERRALS

There's a sense that Summit County doctors are well-connected to specialists around the state. Several participants explained instances in which they were referred outside of the county to receive appropriate care. These referrals were almost always described as seamless and positive experiences. People appreciated that Summit County doctors are not only aware of the top specialists in Colorado, but they're also willing and able to offer great referrals.

Later in this report, it will be discussed how some people feel that more specialty services are needed in the county. However, since it's not feasible to offer every type of care in a county of only 30,000 residents, it appears that residents at least thankful that good referrals exist.

OVERCOMING CHALLENGES

Two challenges somewhat unique to Summit County were brought up during both groups and, for the most part, participants felt that healthcare providers in the area do a good job addressing them both. These barriers include:

- ➔ *Cultural and language barriers.* It was brought up that Summit County residents come from a variety of cultures and speak a variety of languages – both of which create challenges when trying to reach them about healthcare. Participants noticed how many of the communications they see are also available in Spanish, Russian, and a variety of other languages.
- ➔ *A large transient population.* Both groups discussed this topic rather in-depth and mentioned how it's difficult to reach people who are only in the county on a seasonal basis (e.g., ski resort employees). This, they thought, makes it difficult to have messages sink in about the healthcare options available to them, but many thought that the effort is there via various communications efforts.
 - ⇒ “I think the services are there, but the challenge is: How do we communicate to such a transient population?”

Note that many also thought there's still some room for improvement in terms of communicating to this population and the population in general. This is addressed in the [Healthcare Information and Communications](#) section of this report.

PROGRESSING TOWARD THE FUTURE

Most agree that Summit County has made vast improvements to its healthcare system over the years. Many participants have lived in the county for decades and were able to compare what the healthcare system is like now compared to the past. While there are still several services that residents would like to see more of, they were happy to see the county making it easier for residents to receive care locally. Some even called Summit County a “hub” for healthcare in the central mountain region.

- ⇒ “The fact that it is a small county and there are so many services here makes it unique in comparison to some of the other counties (in Colorado). It's a desirable place to live for a lot of physicians...so we *do* have specialties that a lot of counties don't have.”
- ⇒ “(Healthcare in Summit County has) come a long ways and it's done a lot, but I still but I feel that certain aspects of specialized care could be addressed...spaces could be filled in up here, but it still works really well.”

POTENTIAL IMPROVEMENTS TO HEALTHCARE SERVICES

As noted by several caveats in the previous section, participants were also quick to point out areas they thought Summit County could still improve in.

This section is first outlined by focus group reactions to four topics that stood out on the community survey (mental health/substance abuse, tobacco, unintended pregnancy and obesity). Those four areas were chosen as the top priorities out of a list of ten possible choices. Focus group participants also frequently brought up needs related to both ends of the age spectrum (pediatric and geriatric care) and they came up with a variety of other potential priorities for Summit County Public Health's long-term strategic plan. Those areas are all discussed in-depth in this report after the four survey topics are addressed.

REACTIONS TO COMMUNITY SURVEY RESULTS

The areas in this section were listed by many residents as being some of the most important priorities for Summit County Public Health to focus on in the next five years or so. **They're particularly important for Public Health to address because they're all areas where insurance is often inadequate to help people receive treatment.** On the community survey, these areas rose to the top over other potential priorities such as clean water, clean air, safe food, oral health, injury prevention, and infectious disease prevention.

The common theme on the four priority area below is that many feel that they are problems with the county's younger population. Focus group participants – whom consisted mostly of people 30 years or older – continually brought up that many of the healthcare issues in Summit County relate to people in their younger years. This, along with several other findings, is explained more in each of the four areas.

Mental Health / Substance Abuse

Substance abuse appears to be more of a concern than mental health issues, but residents think they're both problems and that the two are often interrelated. This was by far the most commonly selected priority on the community survey (it received nearly double the responses than the next highest category). Focus group participants were also very eager to talk about this topic, and several agreed with the comments made below.

- ⇒ “Behavioral health is underinsured and very expensive, which makes it tough to access...My sense is that care providers for adults are broadly available, but they're just expensive. But it is virtually nonexistent for children.”
- ⇒ “What's often overlooked is that when people have mental health issues, they turn to self medication whether that's pot or alcohol.”

While some people thought that these are also state and national problems, many felt that there's a higher concentration in Summit County. They mentioned how there's a large population of young people in the area who are there to have fun (and also often have money and easy access to drugs and alcohol), so substance abuse is naturally higher there. Others stated how it's a broader problem – one that affects older people as well – and that more needs to be done to reach out to people who could use help.

Addressing these issues may be challenging given the profile of the community and the nature of the topic. Since some people thought that the area lends itself to substance abuse problems, they thought making this a priority might prove to be difficult. However, they still agreed that it's worth a shot.

- ⇒ “The fact that Breckenridge is friendly towards marijuana – or at least perceived that way – it creates problems (in terms of addressing substance abuse issues).”
- ⇒ “...we're a relatively small community. There's just not the same availability of treatment centers or therapists for people who feel like they're having issues, or also for when the justice system would like to require people to seek out that type of help.”
- ⇒ “Communicate that we have resources because I honestly don't know what they are. That's at least a start...If you're only here for a year or if you're just a ski employee, you might not know.”

SUGGESTIONS GIVEN FOR PUBLIC HEALTH: MENTAL HEALTH & SUBSTANCE ABUSE

Public awareness is always challenging with these types of topics, especially since many people deny that they have a problem. If this is included in the county's long-term plan, many felt that the impacts won't be seen right away but it's still worth it to promote the services currently available as well as look into new services to help people with these types of problems.

Tobacco

Tobacco issues are mostly viewed as problems among teens. During the focus groups, there wasn't much talk about adult tobacco problems. In fact, several were surprised to see that tobacco made the list of top priorities on the community survey.

Having noted that, participants acknowledged that they do see a number of underage kids using tobacco at schools, at the ski resorts, and around town.

- ⇒ “Just based on things I hear, it seems as though there's a rather loose thinking about serving underage people (alcohol) and allowing them to purchase tobacco products...It seems to be very prevalent here over other places I've been. It's a problem across the board, but I think it's an elevated problem in this area to some degree.”

Suggestions Given for Public Health: Tobacco

A few in the groups thought that Public Health doesn't need to spend money on tobacco awareness and prevention, given that there are several other health priorities and the federal government also does a large national campaign. Rather, the groups thought Public Health could help with tobacco *enforcement*.

- ⇒ “...I think (Public Health) could get more involved and get more aggressive in fighting this tobacco problem with teens and pre-teens.”

Suggestions included: helping enforce stricter enforcement of people selling tobacco to minors; reestablishing the DARE program in schools; having random drug/tobacco check in schools; encouraging parents to take more of an active role in both tobacco prevention and discipline; and establishing a program that allows teens and pre-teens the opportunity to build personal relationships with mentors who encourage them to make the right life choices.

Unintended Pregnancy

This potential priority is viewed as another somewhat global issue that mostly affects teenagers. Like with substance abuse and tobacco use, participants immediately thought of younger populations. One group also expressed their frustrations with this topic because they felt that their tax dollars are going to people who are not only sexually irresponsible, but also unable to pay for their pregnancy.

Suggestions Given for Public Health: Unintended Pregnancy

It was agreed that this is a rather touchy subject for Public Health to get involved in due to various cultural and political issues. Several recommended that condoms and counseling should be free and readily accessible for teens, but someone in each group then mentioned that those services *are* available already via the Community Care Clinic. There's also a pregnancy counseling group in the county that one participant said is sponsored by the Catholic Church. Since these services currently exist, recommendations again went back to just making sure that more people are aware of them.

Several others thought that it would be a good idea to hire a full-time nurse who could possibly rotate around the local schools. This nurse could also provide counseling in schools on substance and tobacco use, as well as on obesity – which is the next priority addressed in this report.

Obesity

“If you reduced obesity, you’d reduce so many other problems.” This was mentioned by one participant, and the notion received a great deal of agreement. This type of thinking was a theme in both groups, and they were fairly vocal about their frustrations with this topic, as well.

⇒ “...I’m tired of hearing people say that we live in Summit County and no one here is obese.”

Many thought that obesity is not only related to other health issues, but it’s also related to the economy. As one said, “There’s an economic component to this, too. I mean, what’s the cheapest calorie?” Using this logic, several thought that the economy has made the obesity epidemic worse because many people can only afford to eat low-quality meals.

Also note that like the previous types of health concerns discussed, this issue was related mostly back to teens and pre-teens. Nearly all suggestions given were related to helping kids because, as one person put it, “That’s where most people learn their habits.”

Suggestions Given for Public Health: Obesity

Other than suggesting a full-time school nurse again, participants thought that Public Health could do some lobbying to get more nutritious meals in schools. One group mentioned that the removal of soda machines from schools was a good step, but they also worried about kids’ eating habits outside of school. For this reason, several recommended that parents receive more information about why it’s important to educate their children about nutrition and to set a positive example. Perhaps some type of event with rewards or a point system would help encourage parents to get more involved.

Some also thought that Public Health could lobby to have physical education taught in schools five days a week. One also mentioned that a winter sports program was recently cut from his child’s school, and he’d like to see it implemented again.

OTHER TOP PRIORITIES

The following potential priorities were all discussed in-depth during the focus groups. Several times throughout the groups, participants were simply asked about what healthcare services are needed in the county and what should be made a priority. These are the areas that consistently rose to the top of their lists.

SPECIALTY CARE (OVERALL)

Nearly all recommendations from residents involve some form of specialty care service. As noted earlier, people appear to be very happy with the quality of their primary care providers. While some thought that it would be helpful to have a few more options to choose from in terms of general practitioners, and that it would be nice to have another one simply to alleviate waiting times, most participants thought that it’s more important to focus on adding quality and quantity of specialty services in the area.

⇒ “Specialists that you need to access aren’t always available...Sometimes you do need to go elsewhere for care.”

- ⇒ “I recognize some limitations but I’m not sure we can afford to strive to be like Denver...(At the same time) I’m wondering if there would be the availability to offer some services a few times per month rather than full-time or at zero like we have now.”

Key Point: Wherever possible, residents would like there to be specialty services made available locally – even if it’s just for a few days per month. This could come in the form of a traveling team of doctors coming into the area every once in a while, or by working more closely with nearby public health departments to pay for new specialty services that everyone in the central mountain region could use.

Traveling to Denver was viewed as a fairly big inconvenience, given that most people have to take an entire day off work for it. While some recognized that it’s probably not feasible for certain types of doctors to set up in the area, they hoped that Summit County Public Health could push to bring in more specialists at least on a part-time basis as long as they didn’t require a significant amount of equipment, support staff, or office space.

The most commonly mentioned specialty services are outlined below and on the following pages.

GERIATRIC SERVICES

“We have a need for treating the older folks...We’re getting older as a county and that need is just going to get greater.” When this was mentioned by one participant, the group strongly agreed. Another mentioned, “As an older person, the geriatric care here is nonexistent.” Geriatric care was perhaps the most frequently discussed topic when participants were asked to talk about the services needed in Summit County.

These types of services can be broken down into a few different areas, shown below.

- ➔ *Doctors and rehab facilities.* There’s a perception that not enough doctors are in Summit County who can treat the elderly. Some brought up specific health issues such as hip and knee surgeries, but others simply wanted more doctors who specialize in general geriatric care.
 - ⇒ “I realize we have to go to Denver to take care of the really hard surgeries, but there’s just a lot of physical therapy like after you have a knee replacement, and you have to drive all the way to Denver just to get that kind of rehab therapy...I’d like to see doctors encouraged to come here and have an office at least...”
- ➔ *Assisted living facilities.* This was brought up by a number of participants. These people wanted to stay in Summit County for as long as possible, but they felt that no good options exist locally. A good first step was viewed as building an early stage facility for people who still have plenty of years to live but just need a little help. An end goal was brought up as eventually having a late stage facility as well.
 - ⇒ “(In Summit County) there’s no assisted living, there’s no nursing homes, and there’s not really much rehab for an older person.”
 - ⇒ “I’m rapidly approaching 70 years old and I don’t see any senior care facilities up here. I would like to stay here!”

- ➔ *Home health companies.* One home health company was mentioned, but it didn't receive the best of reviews by the few people who brought it up. As one said, "My experience with (a) home health (company) wasn't that great."
- ➔ *Home health equipment.* One participant mentioned that it's rather difficult and expensive to purchase home health equipment if someone wants to try setting it up for a family member. This person wondered if Public Health could somehow help residents easily purchase items such as elevated toilets, hospital-style beds, and other similar pieces of equipment.

PEDIATRIC SERVICES

There's a perception that the amount of pediatric offerings are limited in Summit County. This was perhaps the second most frequently discussed topic when participants were asked what the county needs more of. This was also a topic of relatively low satisfaction on the community survey.

Several people expressed frustrations that they have to drive to Denver for much of their children's care, and they thought that this specialty might be something that's relatively easy to add more of in Summit County. The comments below were made by participants in different groups.

- ⇒ "The area I think that is lacking is maybe the pediatrician world. One doctor can't possibly service the whole community. If you want to go to that doctor, you can't get in, so you're going to Denver or Edwards."
- ⇒ "When you need specialized care for anything in pediatrics, you've got to go to Denver."

Key Point: Participants didn't discuss many problems they have with the healthcare system for adults, but they often discussed inadequacies in terms of care for children and seniors. Anything that Summit County Public Health can do to supplement care on both ends of the age spectrum would likely be strongly supported by residents.

LOW-COST OPTIONS

Healthcare options for the uninsured and underinsured are viewed as necessities in Summit County. Both groups were in agreement on this issue, and the community survey also showed that residents feel that low-cost options are needed.

In the focus groups, participants supported their claims by saying that insurance is difficult for many people to obtain in Summit County because they're either self-employed, seasonal employees, or they work for a small company that doesn't offer health insurance. Private insurance costs, according to participants, are also very high in the area. This will be addressed more in the [Healthcare Access and Insurance](#) section of this report, but is worth mentioning here as well because it was the main reason participants thought low-cost options are necessary.

Residents feel fortunate to have the Community Care Clinic, but they're not positive that it's being used to its potential. The groups consisted of strictly full-time residents, and they were all aware of the Community Care Clinic. However, they weren't entirely sure what services it offers, and they thought that many eligible people don't take advantage of it for one reason or another.

Participants felt that seasonal residents might have even less awareness of what the Clinic offers since they're only in the county for part of the year. Others felt that some people might be hesitant to use the Clinic if "they have too much pride" or if they're an undocumented worker.

- ⇒ "In regard to the Community Care Clinic, I don't think it's well known to a lot of those (transient) people...They simply don't know that they can walk in and get help."

Key Point: Participants didn't feel that the county needs to spend a lot of additional money on low-cost services. For the most part, they felt that the uninsured and underinsured populations are being offered quality services, but perhaps more communications are needed to encourage people to actually take advantage of them.

Even though general care was viewed as a great resource, it's also worth mentioning that two participants related back to a lack of specialty care. As one said, "I think the Community Care Clinic meets basic needs, but if somebody has a specialty situation or if something further needs done, then they're on their own to get that." Others agreed, but also recognized that Public Health has to make priorities and tradeoffs, and they felt that it might be more important to focus on specialty care options for the greater population first.

PREVENTIVE CARE

There's a perceived need for preventive options, but it's not an area that's very top-of-mind for most people. Preventive care wasn't really brought up by either group in casual discussion. Rather, they had to be prompted by the moderator to talk about it. This could be an indication that participants felt other needs were more important.

Once this topic was brought up, however, it was generally agreed that prevention is an important part of the overall healthcare system. Several recommendations from participants are listed below that they hoped Summit County Public Health could help subsidize or promote.

- ➔ *A full-time, traveling school nurse.* This was brought up when discussing childhood obesity, and a few mentioned it again when asked about preventive care, overall. Note that no one in the groups was aware that Summit County is the program coordinator for the six county Intermountain Nurse-Family Partnership.
 - ⇒ "I like the idea of a school nurse. I think that should come highly recommended by the community."
- ➔ *A county dietician.* A few brought this up as a way to have someone teach parents and kids the importance of eating healthy, and they perhaps could even have some input on what goes into school lunch menus.
- ➔ *Education to parents.* Some felt that it's not the school's responsibility or any other entity's responsibility to ensure that children are exercising, eating right, and getting regular checkups. Both groups were fairly vocal about how there needs to be more responsibility put back on parents.

In terms of how Public Health could help, some recommended that it could educate parents, tell them the importance of teaching preventive habits, and provide them with materials they can use to pass along the knowledge to their children.

- ➔ *Easier access to health screenings.* This idea was popular in the groups because some felt strongly that people need to be regularly screened so they can avoid potential emergency room visits down the road. As one said, “These need to be easy and affordable.”

The 9Health Fair was brought up several times, and participants thought it’d be great if Summit County could hold similar (but smaller) events on a more regular basis.

- ➔ *Promotion of 5Ks, recreational programs, summer camps, and physical fitness in general.* Several participants noted how there’s a large volunteer base to draw from in Summit County, and they thought that people would be more than willing to help Public Health put on more events. A few also mentioned this idea as a good way to offer physical fitness to low income residents.

OTHER POTENTIAL IMPROVEMENTS

While the areas listed earlier in this section were by far the most discussed, a handful of other “wish list” items were also mentioned. The following areas, for the most part, should be viewed as services that are nice to have, but not essential and certainly not at the top of the priority list.

Also note that these areas are all ones that most rural counties struggle with. Participants understood that it’s not feasible to offer every type of care in a county of only 30,000 people or so.

Other potential areas of improvement that were mentioned, but not discussed much in-depth, include services for: cancer; endocrinology; rheumatology; ophthalmology; neurology; emergency dentistry; ear, nose, and throat; allergies/asthma; occupational therapy; speech therapy (for kids and stroke victims); and internal medicine.

PERCEIVED IMPORTANCE OF IMPROVING HEALTHCARE SERVICES

Now that the perceived positives and negatives of Summit County’s healthcare system have been identified, it’s important to understand if residents think that Public Health actually needs to make improvements – or if they think the system is good enough as-is.

RELATIVE IMPORTANCE OF HEALTHCARE VERSUS OTHER PUBLIC HEALTH NEEDS

In terms of allocating county funding, residents feel that public health is a relatively high priority but perhaps not more important than education. Respondents’ opinions varied significantly regarding this topic, but public health and education generally rose to the top out of all potential public services needs. Of these two areas, some felt that health is a bigger priority and some felt that education is.

Key Point: The biggest takeaway here perhaps was that there wasn’t an overwhelming response that the county needs to spend significantly more on healthcare. As previously noted, residents are mostly satisfied with what they’re currently being offered. They’re open to fund

additional services if they're deemed appropriate and financially feasible, but they seem to understand that the county has a variety of public health needs and a limited amount of funding.

A few quotes to support their beliefs are below.

- ⇒ “I wouldn’t put (healthcare) at the top. Everyday needs are higher.”
- ⇒ “There’s never going to be enough money for healthcare...(and) there’s all these things that draw money away from something that’s essential, which in my mind is a person’s health or their education.”
- ⇒ “I certainly wouldn’t put (healthcare) at the top – maybe somewhere in the middle. I think that a lot of it can be served by the private sector (instead)...The government can make (healthcare) a priority in those areas that the private sector won’t touch.”

AVAILABILITY OF SERVICES OUTSIDE OF SUMMIT COUNTY

Having access to specialized healthcare in Denver (and other cities) allows Summit County residents to get by without all specialty options offered locally. While many people expressed how it’s somewhat inconvenient to travel to Denver for care, it’s only about an hour away and they’re able to get high quality care for nearly everything imaginable. This helps relieve some of the burden of Summit County Public Health to provide a great deal of specialty services.

Again, participants understood that Summit County is restricted in what it can offer simply because of its relatively small population. And, like their perceptions of the care in Summit County, they feel that they typically receive good care when they are referred out of the county.

- ⇒ “We found the Shaw radiology and oncology department (at the Shaw Regional Cancer Center in Edwards) to be excellent. That was all done with a referral from here (at St. Anthony in Frisco).”
- ⇒ “I’ve used the CU Anschutz facility (in Denver) for some cancer treatment and they did a wonderful job...and the follow-up care I receive here has always been terrific.”

HEALTHCARE ACCESS AND INSURANCE

Focus group participants were also asked to talk about factors related to healthcare that weren’t necessarily in the hands of Summit County Public Health. In this section, they discussed their ability to access healthcare and how economic factors such as insurance costs factor in.

PAYING FOR INSURANCE

Without being part of a large employer’s plan, or being on Medicare, many people feel that it’s difficult to afford high-quality health insurance. Both groups mentioned how a key to obtaining good insurance is to be employed by one of the county’s largest entities (e.g., Vail Resorts, the school district, or Summit County itself). As one said, “Staying employed is key.”

- ⇒ “I have Vail Resorts’ insurance and, let me tell you, I use it. Their out of pocket expense to cover me is outrageous annually. I’ll never quit!”

Key Point: Those who don’t work for a large employer and aren’t yet eligible for Medicare are many of the Summit County residents struggling to pay for quality health insurance. Public Health may desire to focus some efforts on helping educate these people about insurance and what their options are.

A few examples of this are below.

- ⇒ “We are self-insured and it’s crazy expensive.”
- ⇒ “It’s almost prohibitively expensive – I’m self-insured as well – and when I saw the numbers I thought the decimal was in the wrong place!”
- ⇒ “I don’t know if it’s the recession or having three kids and living here where it’s expensive...but you start to think, “Do I *really* need to go to the emergency room or could it wait until the next day (to see if it gets better by then)?”

Even with company policies, some people still can’t afford the monthly premiums. This sentiment was particularly stressed by a human resource director in one of the groups. His comment is below.

- ⇒ “I have to shop health insurance plans every year trying to get our employees a decent deal...We pay 50 percent of the premium and also for their dependents, and people still can’t afford it and they turn it down.... (Due to the economy) the company pays less for the premiums than in the past so employees have to pay more now. They’re in a world of hurt.”

OTHER FRUSTRATIONS ABOUT ACCESSING HEALTHCARE

Most of the common frustrations with accessing healthcare are out of the hands of Summit County Public Health. A few referred to the healthcare system, as a whole, as “broken.” They couldn’t understand why rates go up every year, and why there are so many inconveniences when trying to receive care.

While discussions often related back to money, some of the other most frequently discussed frustrations are listed below.

- ➔ *Not receiving insurance benefits for certain types of specialty care.* This was frustrating for some people because they pay into an insurance plan, but what they really need isn’t covered. One discussed acupuncture, and three others talked about mental health.
- ⇒ “I see a psychiatrist – I have OCD and ADHD – and I see her because I like the way she goes about treatment. Unfortunately, my plan doesn’t cover that, and, even if it did, I have a high deductible...I carry insurance mostly as like asset protection for like if I break a leg.”

- ➔ *Not being in-network.* Again, this was frustrating to some participants because they pay a monthly premium but they aren't always covered.
 - ⇒ "I've got Blue Cross Blue Shield and it's hated. A lot of companies will not take it so it's not in-network and then I pay more. When they pay it, it's amazing, but a lot of people say they don't deal with Blue Cross."
- ➔ *Having to navigate through customer service and complex documents.* Many thought that the process of using insurance is as easy as it could be. One also mentioned that she feels "helpless" when dealing with doctor's offices and insurance companies.
 - ⇒ "Sometimes for us it's just confusing to figure out what's part of our policy, like which physicians are in our network, which ones aren't, who's available, who's not...It takes more than one phone call, you can't look it up online easily, and the doctor's office doesn't ever know."
- ➔ *Having to make time in the day.* Some people can't afford the luxury of taking time off of work.
 - ⇒ "If you're making \$9 or \$10 an hour, are you really going to take a day off work to go to the doctor?"

Key Point: With all of the complexities around accessing and paying for healthcare, it might be helpful for Public Health to provide some guidance to people on how to navigate the system. Many people don't do it enough to get a feel for what works and what doesn't, so any types of tips/tricks that they're offered could certainly save them some time and frustration upfront.

HEALTHCARE INFORMATION AND COMMUNICATIONS

As the final section of discussion, participants talked about the types of information they receive about healthcare, how they currently get it, and how they'd prefer to get it in the future.

ARE MESSAGES ABOUT HEALTHCARE BEING NOTICED?

Messages are noticed, but they're perhaps not sinking in as much as they could. Participants were *aware* of a variety of healthcare communications *but they didn't know much about them*. As an example from earlier in discussion, everyone knew that the Community Care Clinic exists, but they weren't sure exactly what types of services it offers and what it takes to be eligible to receive care there.

In terms of healthcare education tools, participants also didn't have much knowledge beyond just hearing the name. Examples include:

- ➔ *SummitCares.Org.* About half of participants had heard of this resource, but only one or two could explain it well. After hearing more about it, people wondered why they didn't know what it offers to residents. They viewed this as a great resource, and one that's worth promoting more through the Summit County Public Health department. As one said, "That sounds like a great resource for a lot of people. We need to let the world know about it!"

- ➔ 211. This resource was even lesser known. While some residents are aware of this resource, no one in the focus groups could explain exactly what it is. Again, once it was explained to them, they were glad they learned about it and wondered why they didn't know more about it sooner.
- ➔ *The Summit County website.* Only a few participants had visited the Public Health section of the Summit County website. People knew it existed, but nothing had triggered them to visit it for health information.
- ➔ *SC ALERT.* Many in the groups were aware of this resource and could actually explain what it is. However this tool was communicated to the general public, that same method might be beneficial to push SummitCares.org, 211, and the Summit County website because all three appear to be in need of additional exposure.

PREFERRED METHODS OF COMMUNICATION

The following are areas which participants would like to receive information about services such as SummitCares.org, 211, and SC ALERT, in addition to general information about healthcare news and offerings.

- ➔ *Directly from doctors, if possible.* While this isn't always feasible, several brought up that it'd be nice if medical professionals communicated more with them directly because they are trusted professionals that they already have a relationship with. One mentioned how it would even be nice just to do quick video chats with her doctor.
 - ⇒ "I'm wondering if rather than trying to have a community message (from Public Health), if our primary care physicians and healthcare providers might take a little more aggressive approach toward educating their patients...like if they do more health screenings."
- ➔ *The Summit Daily.* This newspaper is a major source of local information, so it's likely one of the best ways for Public Health to reach the highest number of people.

The vast majority of focus group participants noted how they not only receive the paper, but they also actually read it on a regular basis. Several of them also mentioned how they recall stories and advertisements regarding public health (e.g., upcoming events, changes in key health personnel). Even though many thought that professional services are already well advertised in the Summit Daily, it was still recommended as a top option to communicate more through.

According to the Summit Daily's website,¹ the paper has a daily circulation of 12,000 throughout Breckenridge, Frisco, Silverthorne, Dillon, Keystone and Copper Mountain. Additionally, the website notes that 90% of Summit County reads the paper at least once a week and 69% of Summit County reads the paper every day.

- ➔ *The school district.* Several parents in the groups discussed how they receive handouts and alerts from the local schools. The school district was also applauded for its work in ensuring that children are properly immunized before they attend classes, and it was also mentioned that it does a good job actually offering some basic care.

¹ <http://www.summitdaily.com/article/9999999/MISC10/905299998> (Retrieved June 25, 2012)

- ⇒ “There are clinics in the schools – school-based healthcare – and that’s terrific. That’s not something in a lot of school districts. Eagle County doesn’t have that.”

While the methods of communication above might not reach everyone, they’re a good start. Many residents rely on the Summit Daily and the school district for information about public needs, so these are avenues that must be frequently used by Public Health. It’s apparent that messages will reach a large percentage of people through these modes of communication, so the challenge then becomes how to make the messages resonate with people and sink in.

FINAL NOTES RELATED TO INFORMATION AND COMMUNICATIONS

There may be an opportunity to increase traffic to Summit County’s website. WebMD.com was mentioned as a go-to health source for many people who want to gather information about a condition before deciding to go to a doctor. Since people are already using the web to learn more about health conditions, Public Health might be able to convince them to use its resources instead if it can prove that those resources are better or more reliable.

A few participants suggested putting a health video on the main page of the Summit County website that links visitors to the Public Health department’s page. Over half of participants had visited the County’s main page, but only a few had ever clicked through to find information on the Public Health site.

Lastly, others in the group thought that Public Health could get messages out through local access TV, via the radio (NPR was specifically mentioned), and/or through working more closely with other resident-facing organizations so that messages can spread quicker and have a better chance at sinking in because residents will see them at a variety of different places.

SPANISH-LANGUAGE FOCUS GROUPS

INTRODUCTION

Corona Insights is pleased to present this report of research findings for a focus group conducted in July, 2012, with full-time residents of Summit County who speak Spanish. This research was designed to assess feelings, perceptions, and knowledge of healthcare in the county to establish priorities for improving the availability of public health services in the future, and note that two English-speaking groups were also conducted in June, 2012.

FOCUS GROUP LOGISTICS

Summit County Public Health was solely responsible for recruiting participants into the Spanish-speaking group and then conducting the research. The discussions were then transcribed and provided to Corona for analysis.

TOPICS EXPLORED IN THE FOCUS GROUP

Previously, surveys were conducted with Spanish-speakers regarding their overall health situations and needs. During the focus group, participants were then able to build upon some of the survey findings and also explain why they feel the way they do about potential long-term strategies for healthcare in Summit County.

Participants spoke about how well their health needs are currently being met, and they also gave their thoughts about prioritizing health options for the future. Additionally, they discussed communication messages and modes that might be most effective in reaching the residents of Summit County.

MODERATOR'S GUIDE

The focus group moderator's guide was assembled by Corona Insights based on survey findings and based on input from Summit County Public Health. The same guide was used for both the English- and Spanish-speaking groups other than a few small adjustments to account for cultural differences.

SUMMARY OF KEY FINDINGS

This section includes findings from the Spanish-speaking group – with differences from the English-speaking groups noted wherever applicable.

HEALTHCARE SERVICES IN SUMMIT COUNTY

- ➔ Like those in the English-speaking groups, participants began their discussion by stating how they feel fortunate to live in a county with a variety of health services. However, while the English-speaking groups often praised Summit County's primary care, orthopedic surgery, and physical therapy, those areas were not brought up in this group.
- ➔ Compared to the population in general, Spanish-speaking residents appear to be more concerned with low-cost health options in the county. Only two participants in the group had health insurance, and affordable care was perhaps the most commonly discussed topic during this group.
- ➔ Some participants mentioned how they often just stay at home rather than visiting a doctor because of how cost prohibitive it is to them. The recession has forced many of them to place health care expenses near the bottom of their priority lists.
- ➔ Also in regard to low-cost options, some participants felt that the majority of specialists in the county don't offer any type of discounted program (though they mentioned that the Community Care Clinic and St. Anthony's provide some discounts for more general services). They viewed specialty care as very expensive and often unattainable.
- ➔ Some mentioned how they try to travel to Grand Junction for health services because of the low-cost options. However, many in the group don't have a reliable form of transportation so it's difficult for them to travel that far for care. Thus, they'd appreciate having more options available closer to home. Note that English-speaking group also discussed this but said they currently travel mostly to Denver, Vail, or Edwards.

POTENTIAL IMPROVEMENTS TO HEALTHCARE SERVICES

- ➔ If services are to be added in the county, it appears that this population would be a strong supporter of anything related to low-cost options. This includes options for those without insurance and also options to keep deductibles and co-pays lower for those who have it.
- ➔ There doesn't appear to be much awareness of programs related to tobacco, unintended pregnancies, obesity, and mental health (groups were asked about these areas since they were listed as priorities on the community survey). It was common for participants to state that they didn't know where to go or what kinds of options are available in Summit County.
- ➔ This group worried about drug and alcohol issues, as they felt there is a significant amount of use and addiction but not enough services and education around them.
- ➔ Throughout the group, participants also mentioned a need for additional pediatricians, dermatologists, and oncologists. These three areas were also brought up in the English-speaking groups.

PERCEIVED IMPORTANCE OF IMPROVING HEALTHCARE SERVICES

- Participants, for the most part, felt that health services have the same priority level as other public services because they're all important to the community. This was more or less consistent with the English-speaking groups.
- Rather than improving or adding services, some felt that the community simply needs to know more about what's currently available to them. Several reported living in the county for multiple years before hearing about the Community Care Clinic, preventative health services, and other low-cost options available to them. Thus, they wanted a wider mass media distribution of information.

INFORMATION AND COMMUNICATIONS

- None of the participants were aware of SC ALERT, 211, or SummitCares.org. Several in the English-speaking groups had at least a small level of awareness of these services.
- Increasing public awareness appears to be a desired priority for many Spanish-speaking residents. As examples, some said that the County should promote programs such as Latinas en Movimiento, Por Tu Familia, prenatal care groups, and the “Mamacitas” group. Note that these programs were all brought up by participants as ones they're currently aware of and use.
- Promotion, they thought, should come mostly by way of radio campaigns on the Latino station and also in the Spanish section of the Summit Daily newspaper. The paper, in particular, was frequently discussed in the English-speaking groups, as well. Others suggested that the County create an email list for people who are interested in getting information about programs taking place in the community. Others yet mentioned handing out information at churches, laundry facilities, schools, thrift stores, supermarkets, local Mexican stores, and various non-profit organizations in the area.
- In terms of what they're interested in hearing about, women's health was perhaps the most frequently discussed. A few also mentioned family counseling, nutrition, sexual health, and mental health, while others simply said they're interested in hearing more about all topics related to health.

IN CONCLUSION

During this focus group, Spanish-speaking residents continuously brought up two topic areas: low-cost health options and increasing public awareness efforts. Even though they agreed that Summit County is fortunate to have what it does for health care, these areas may be the most important to address for this population.

KEY INFORMANT SURVEYS

INTRODUCTION

Corona Insights is pleased to present this report to Summit County on the results of surveys conducted with a small group of key informants in the County in August 2012. This survey was intended to be a final component in the research process that would allow those who are intimately connected with the health care needs of Summit County residents so that these individuals could add an “expert opinion” to the body of knowledge gathered through the other research tasks in the needs assessment.

REPORT LAYOUT

This report is divided up into a number of major sections, which include the following:

- ➔ **Summary of Key Findings** – This section contains a brief overview of the key findings and themes of the research.
- ➔ **Background and Methodology** – This section provides a detailed description of the approach used for this project in terms of goals, methodology, and demographic characteristics of respondents.
- ➔ **Detailed Research Findings** – This section contains findings of each of the survey’s main questions individually.
- ➔ **Appendix A: Detailed Analysis Tables** – In this section, tabulations are provided of each survey question individually. In addition, this appendix contains verbatim responses to the survey’s open-ended questions.
- ➔ **Appendix B: Survey Instrument** – This section contains the survey instrument used for this project.

SUMMARY OF KEY FINDINGS

RATINGS OF HEALTH CARE ASPECTS

- ➔ Informants generally felt that most aspects of health care in Summit County were adequate. They generally seemed to feel that aspects such as emergency care, dental care services, alternative health care options, and health care options for routine illnesses were, overall, very good. On the other hand, informants seemed to believe that there is room for improvement in the availability and quality of specialized care, pediatric care services, and treatment programs for drug/alcohol abuse. ([Exhibit 1](#))
- ➔ Generally, informants seemed to believe that Summit County's services do a good job of meeting the needs of adults and young adults in the county. In addition, most felt that the County's services for visitors were excellent. However, ratings of the County's ability to meet the health care needs of many other subgroups of the population, such as seniors, school children, low-income residents, and non-English-speaking residents, were considerably lower. Furthermore, services for infants and toddlers could, perhaps, use the most improvement; over half of informants rated the County's services for this age group as being "poor." ([Exhibit 2](#))

ACCESS TO HEALTH CARE

- ➔ The costs of obtaining care are seen as being a major barrier for obtaining health care in Summit County. Though this situation is not unique to the County, it is clear that informants believe that many residents do not have health insurance, making the cost of obtaining care prohibitive. In addition, some informants mentioned the lack of specialty care providers as a major barrier to obtaining care in Summit County.
- ➔ Informants feel that the County needs a wide variety of specialty care services. One respondent simply said that "all internal medicine specialties" were needed, while others specifically mentioned specialties such as surgery, pediatrics, oncology, and cardiology as being especially needed in the County.
- ➔ Informants generally believed that the best ways to reducing the inadequacies of health care for specific groups of the population would require reducing costs and simplifying the process of navigating the health care system. For example, one respondent suggested that the Community Care Clinic be expanded to provide more services, while others suggested that increased partnerships between providers would be helpful so that residents could be more easily directed to the most appropriate provider for a specific issue.

PRIORITIES

- ➔ Aside from the general improvements discussed above (reducing costs, improving specialty care, and simplifying the navigation of the health

care system), informants were asked to rank the “10 winnable battles” in terms of their relative priority for Summit County. Mental health and substance abuse was identified as a top priority by three in four respondents, indicating that there is a strong perception that this area still needs improvement in Summit County. In addition, obesity was identified as a top priority by a similar proportion of respondents, indicating that this area could potentially be an area of focus for the County in the coming years. Other areas that received high rankings (but much lower than the two mentioned previously) were tobacco, injury prevention, oral health, and infectious disease prevention. ([Exhibit 3](#))

- ➔ Informants generally agreed with the public that mental health and substance abuse should be a priority for the County in the coming years. However, some did not agree that tobacco or unintended pregnancy should be priorities. In the case of tobacco, some felt that tobacco has been targeted by numerous local, regional, and national efforts and that additional effort would not likely have a significant impact. In the case of unintended pregnancy, those who felt it should not be a top priority tended to believe that it simply wasn’t a large issue in Summit County and that simple steps to promote the use of birth control would be sufficient to address this need. ([Exhibit 4](#))

IN CONCLUSION

Generally speaking, key informants in Summit County seemed to agree with the public that services for most routine illnesses and for most adults were adequate in Summit County. However, informants identified a variety of areas for improvement – most notably:

- > Services for infants and toddlers
- > Specialty care services
- > Cost of services
- > Ease of navigating the health care system
- > Mental health and substance abuse services
- > Efforts to reduce obesity

By focusing on making services easy to access and affordable, many of the inadequacies that exist would be improved. However, there are still clearly needs for improving services that are aimed at specific needs rather than general care, such as pediatric care and other specialty care services.

BACKGROUND AND METHODOLOGY

SURVEY INSTRUMENT

The survey instrument for this project was designed via a collaboration of key staff from Corona Insights and Summit County. Concepts and questions were derived from the public survey and the 2006 interviews that were conducted with this audience. Based on this background information, Corona prepared an initial draft of the survey instrument, which was then revised collaboratively until a final version was agreed upon.

SAMPLING METHOD AND SURVEY MODE

Summit County provided e-mail contact information for a variety of key informants in the area, including health care providers, administrators, and community leaders. Using this list, Corona sent e-mail invitations to each potential respondent to inform them of the survey and request their participation. All surveys were conducted between August 9 and August 16, 2012.

SAMPLE SIZE

This survey was qualitative in nature, so using measures such as margin of error are not relevant. However, 35 invitations were sent, and 14 responses were received, representing a response rate of 40 percent.

RESPONDENT CHARACTERISTICS

The following table summarizes the general profile of survey respondents. These characteristics should be considered as context and background when examining findings herein.

Demographic Characteristic	Percent of Respondents	Demographic Characteristic	Percent of Respondents	Demographic Characteristic	Percent of Respondents
Lived in Summit County for...		Worked in current position for...		Job Roles	
Less than 5 years	-	Less than 5 years	4	Administration	7
5-9 years	5	5-9 years	4	Provider	4
10-14 years	3	10-14 years	1	Unknown	3
15-19 years	-	15-19 years	-		
20 years or more	3	20 years or more	2		
Unknown	3	Unknown	3		

DETAILED RESEARCH FINDINGS

In the following pages, we present the results of each of the questions asked on the survey along with a general discussion of the implications of each question.

RATINGS OF COUNTY HEALTH CARE ASPECTS

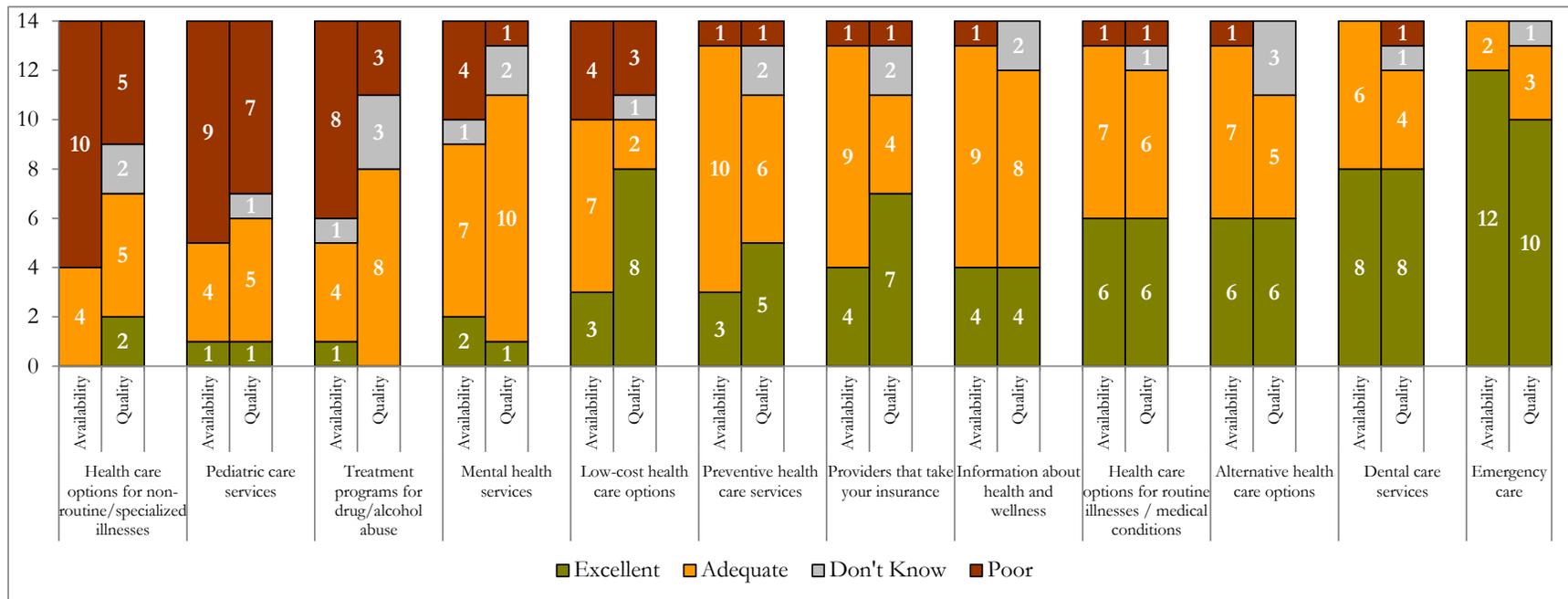
AVAILABILITY AND QUALITY OF BASIC HEALTH CARE SERVICES

Generally, informants felt that the availability and quality of emergency care, dental care services, alternative health care options, and routine health care were at least “adequate” in Summit County. However, informants seemed to feel that there was a large lack in the availability of specialized care options, pediatric care services, and treatment programs for drug and alcohol abuse. Similarly, informants seemed to feel that the availability of mental health services and low-cost health care options could be improved in the County as well.

It is interesting to note that the primary concern with many of these areas is simply the lack of availability rather than issues with quality. For example, over half of informants felt that the quality of low-cost health care options was “excellent,” but very few felt that the availability of these services was excellent.

Exhibit 1

Compared to other communities you’re familiar with, how would you rate the following aspects of health care in Summit County?

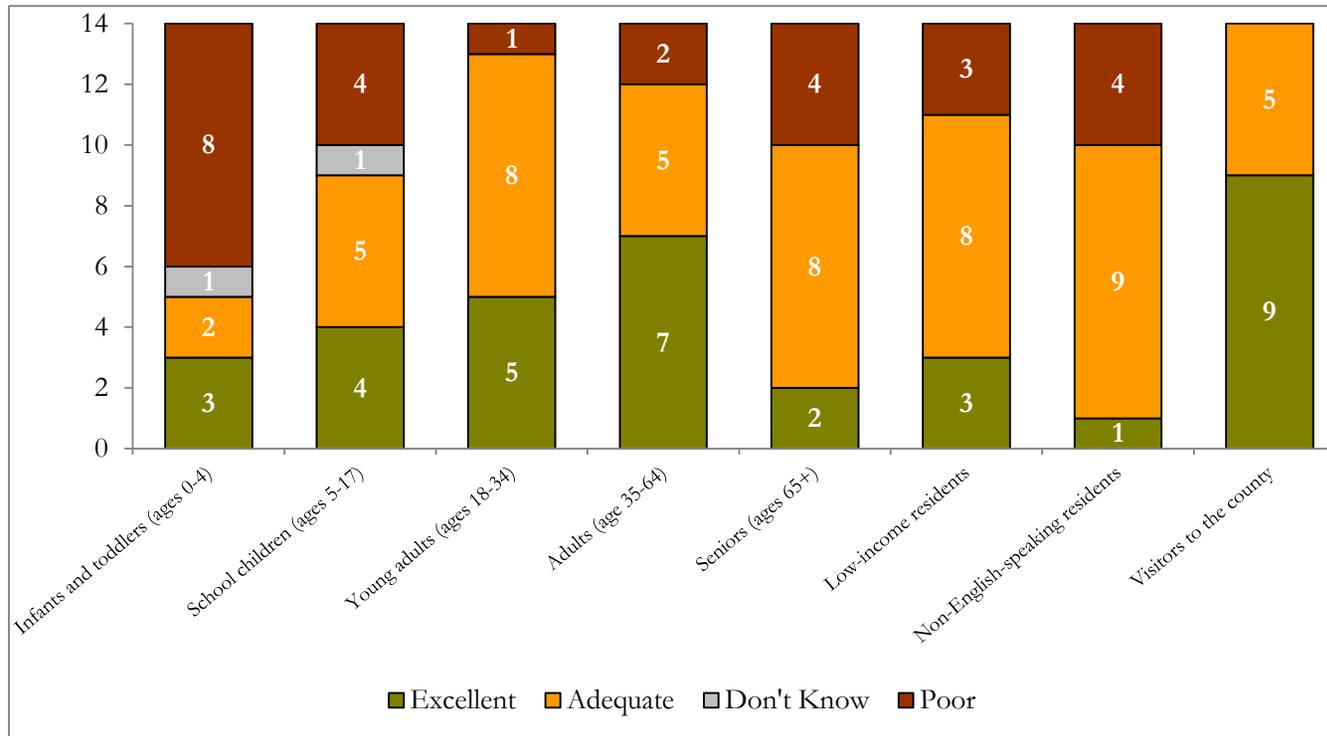


RATINGS OF SUMMIT COUNTY'S HEALTH SERVICES FOR KEY DEMOGRAPHIC GROUPS

Informants generally seemed to feel like health care services were doing an adequate job of meeting the needs of the primary segments of the population. However, over half felt there was a strong need for improving services for infants and toddlers. Similarly, there were a number of respondents who also felt that the County's services were poor for school children and seniors.

In terms of specific demographic groups, services for low-income residents and for non-English-speaking residents were also identified by some respondents as areas for potential improvement. On the other hand, most informants seemed to feel that the County does a good job of meeting the needs of visitors.

Exhibit 2
How would you rate Summit County's health care system at meeting the needs of each of the following groups?



HEALTH CARE ACCESS

BARRIERS TO OBTAINING CARE

When asked to identify some of the most major barriers to obtaining health care in Summit County, the most common response by far was that many members of the public do not have health insurance. Similarly, many felt that the cost of obtaining care was a major barrier as well. Aside from cost-related issues, however, other informants mentioned a lack of service providers for specialty illnesses and a general difficulty in retaining specialty care providers in the area.

NEEDED SPECIALITY SERVICES

It is clear that there are a very wide variety of specialty services that informants feel are needed in Summit County. One respondent simply said that “all internal medicine specialties” were needed, while others focused on some specific specialties that were lacking. Due to the relatively small sample size, it is difficult to identify any strong trends in terms of needed specialties, but surgery, pediatrics, oncology, and cardiology were all mentioned by a number of respondents.

WAYS TO ELIMINATE HEALTH CARE INADEQUACIES

When asked how Summit County could help to eliminate health care inadequacies between different groups of people, many focused on simply finding ways to make health care more affordable. Some mentioned expanding the Community Care Clinic’s service to be more all-encompassing as a possible solution, while others simply felt that more cooperation between health care entities throughout the county would help to provide better services for the community. Others felt that simply educating the public on the resources available in the county would be a positive first step that would eliminate issues. Finally, one respondent mentioned that investigating telemedicine services as a way of providing services that would otherwise be unavailable in Summit County.

TOP PRIORITIES

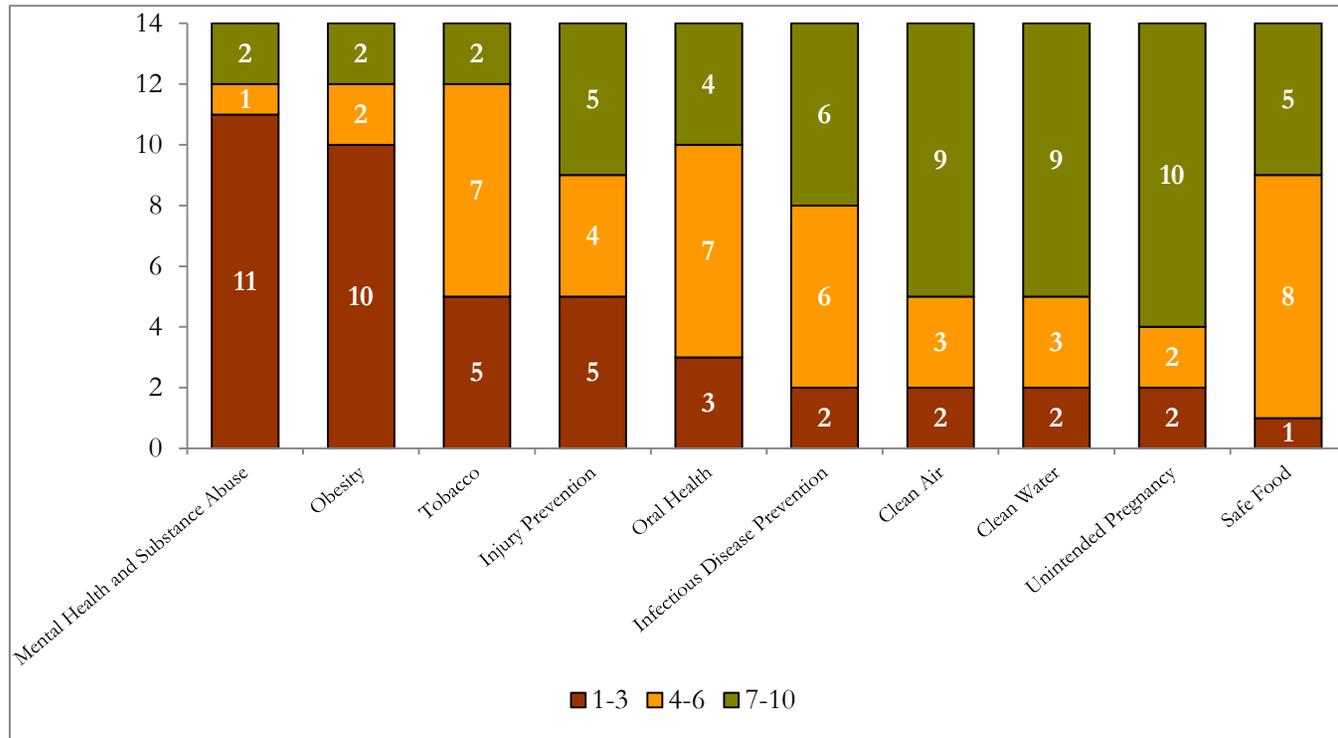
When asked to identify their own top priorities for improving health care in Summit County, respondents had a very wide variety of suggestions. Many focused on the issues identified above, such as reducing costs, increasing the percentage of residents who were insured, and bringing in more specialty providers for services such as pediatrics and cardiovascular care. Others focused on improving the system of helping residents find health care in the first place and direct them to appropriate (and affordable) resources in the County and beyond.

PRIORITIES

RANKING OF POSSIBLE PRIORITIES

Mental health and obesity were both identified as major priority areas for improvement in the next five years. As was seen among respondents to the public survey, a large portion of respondents said that mental health and substance abuse should be one of the top three priorities for the County in the coming years, and obesity was close behind. Other areas, such as tobacco and injury prevention, were identified as top priorities by a small portion of respondents, but these were a priority for a far smaller portion of respondents.

Exhibit 3
Please prioritize this list based on your own perspective with “1” meaning the area that should be the highest priority and “10” being the area that should be the lowest priority.



REACTIONS TO PUBLIC PRIORITIES

Not surprisingly given the results of *Exhibit 3* above, a vast majority of respondents agreed that **mental health and substance** abuse should be a top priority for Summit County in the next five years. Those who agreed that this should be a top priority generally seemed to feel that Summit County has high rates of depression and suicide and that there are not currently enough services to address the wide range of people who have such issues.

On the other hand, one respondent suggested that this should not be a priority since it is targeted at a very small percentage of the population.

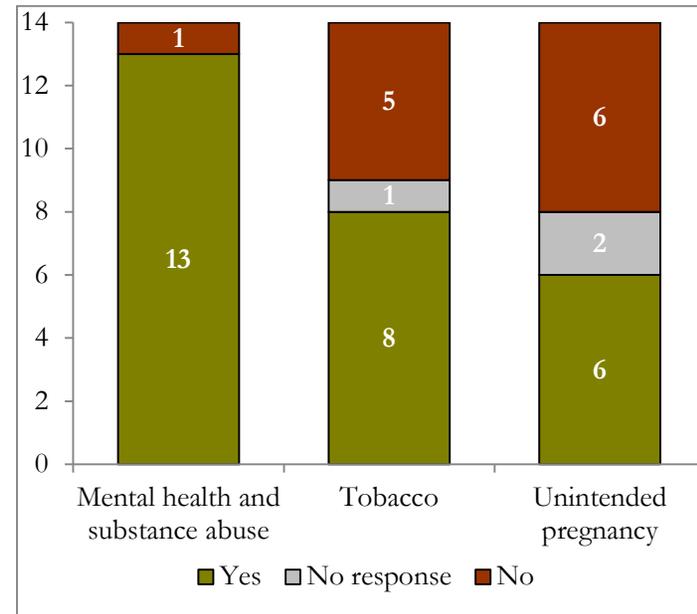
Overall, more than half of respondents agreed that **tobacco** should be a top priority for Summit County. Among those who agreed that it should be a priority, most pointed to tobacco’s harmful effects as their reasoning. These respondents seemed to feel that tobacco causes a number of other illnesses and that eliminating tobacco would cause overall improvements in health.

Conversely, a number of respondents felt that Tobacco should *not* be a top priority. These informants varied in their reasons, but some felt that there are a number of programs in place locally, regionally, and nationally that are aimed at reducing tobacco use. Because of this, some felt that the County wouldn’t likely be able to make a major impact.

Finally, informants were divided about whether **unintended pregnancy** should be a top priority. Only four of the survey’s fourteen respondents identified unintended pregnancy as one of their top six priorities, but half of them did agree with the public in this follow-up question. Among those who did agree that it should be a top priority, most simply felt that the problem was fairly easily preventable and that small steps could be taken to make an impact. Some also pointed out that unintended pregnancy has long-term consequences not only for the mother and father, but also for the child as well.

Among those who did not feel that unintended pregnancy should be a priority, some simply felt that it was not a major issue in Summit County specifically. These respondents seemed to feel that simply teaching the public more about birth control and making it available was sufficient.

Exhibit 4
Among respondents to the public survey, _____ was identified as a top priority by roughly one-third of respondents. Do you agree with this?



APPENDIX A: DETAILED ANALYSIS TABLES

PUBLIC SURVEY

OVERVIEW

The following pages contain detailed analysis tables for each of the questions asked on the survey. For each question, tables show the overall results of the survey, and these results are broken down by three categories. Those categories are gender, age, and how respondents answered questions about their personal health habits. Respondents who answered 'yes' to at least one of the personal health habits question are listed in the group having 'unhealthy habits' and those who did not answer 'yes' to any of those questions are in the group having 'healthy habits.' These analyses are useful in not only presenting the tabulations of the results, but also drawing comparisons about how different groups assess the health care system in Summit County.

INTERPRETATION

- In each table, the row heading contains all of the answers given by respondents to the question. The column heading contains each of the various subpopulations being examined (e.g. age, gender) broken out by survey wave. Therefore, the distribution of answers to each question is shown in each vertical column.
- Each analysis cell contains the weighted percentage of respondents who gave each answer.

HEALTH CARE ASPECTS

HOW WOULD YOU RATE YOUR QUALITY OF LIFE IN SUMMIT COUNTY?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
How would you rate your quality of life in Summit County?										
Very Good	66%	68%	63%	66%	60%	61%	67%	87%	83%	60%
Good	31%	30%	34%	34%	33%	38%	30%	13%	15%	38%
Fair	2%	2%	3%	-	7%	1%	4%	-	1%	3%
Bad	-	-	-	-	-	-	-	-	-	-
Very Bad	-	-	-	-	-	-	-	-	-	-
Don't Know	-	-	-	-	-	-	-	-	-	-

COMPARED TO OTHER COMMUNITIES YOU'RE FAMILIAR WITH, HOW WOULD YOU RATE THE FOLLOWING ASPECTS OF HEALTH CARE IN SUMMIT COUNTY?

AVAILABILITY

Alternative health care options

	Total	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Alternative health care options										
Excellent	28%	26%	31%	35%	21%	25%	33%	31%	37%	24%
Adequate	46%	49%	43%	40%	64%	46%	44%	38%	44%	48%
Poor	10%	4%	20%	19%	9%	8%	-	5%	5%	12%
Don't Know	15%	21%	6%	6%	7%	21%	22%	26%	14%	16%

Health care options for non-routine/specialized illnesses

	Total	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Health care options for non-routine/specialized illnesses										
Excellent	15%	13%	19%	24%	16%	11%	7%	15%	21%	13%
Adequate	45%	49%	39%	34%	50%	43%	52%	59%	46%	45%
Poor	26%	24%	29%	26%	26%	33%	19%	13%	18%	29%
Don't Know	14%	15%	13%	16%	9%	13%	22%	13%	15%	13%

Health care options for routine illnesses / medical conditions

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Health care options for routine illnesses / medical conditions										
Excellent	42%	42%	42%	56%	24%	38%	48%	49%	49%	39%
Adequate	47%	50%	43%	34%	60%	51%	41%	49%	41%	50%
Poor	9%	6%	15%	10%	16%	8%	7%	-	9%	9%
Don't Know	1%	2%	-	-	-	3%	4%	3%	1%	2%

Information about health and wellness

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Information about health and wellness										
Excellent	30%	27%	35%	40%	26%	25%	33%	31%	26%	32%
Adequate	57%	59%	53%	54%	52%	64%	48%	59%	62%	55%
Poor	9%	9%	10%	6%	22%	5%	11%	-	10%	9%
Don't Know	4%	5%	2%	-	-	5%	7%	10%	3%	4%

Low-cost health care options

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Low-cost health care options										
Excellent	17%	13%	22%	29%	12%	9%	7%	23%	12%	19%
Adequate	44%	40%	50%	47%	53%	43%	26%	38%	49%	42%
Poor	27%	29%	22%	18%	29%	33%	41%	13%	23%	28%
Don't Know	13%	17%	6%	6%	5%	14%	26%	26%	17%	11%

Pediatric care services

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Pediatric care services										
Excellent	15%	12%	21%	19%	12%	20%	11%	8%	23%	12%
Adequate	30%	33%	25%	37%	43%	28%	26%	10%	37%	27%
Poor	14%	9%	23%	9%	28%	17%	4%	8%	12%	16%
Don't Know	40%	46%	31%	35%	17%	36%	59%	74%	28%	45%

Preventive health care services

	Total	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
Unweighted	273	111	162	20	40	58	74	78	85	188
Weighted	271	171	100	68	58	76	27	39	78	193
Preventive health care services										
Excellent	31%	26%	39%	32%	24%	29%	30%	44%	36%	29%
Adequate	51%	55%	45%	51%	59%	53%	52%	38%	51%	51%
Poor	7%	4%	11%	6%	10%	7%	7%	3%	4%	8%
Don't Know	11%	15%	5%	10%	7%	12%	11%	15%	9%	12%

Providers that take your insurance

	Total	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
Unweighted	273	111	162	20	40	58	74	78	85	188
Weighted	271	171	100	68	58	76	27	39	78	193
Providers that take your insurance										
Excellent	35%	34%	36%	34%	31%	30%	41%	49%	33%	35%
Adequate	47%	49%	45%	35%	50%	54%	52%	46%	54%	45%
Poor	11%	10%	13%	21%	12%	11%	4%	-	6%	13%
Don't Know	7%	8%	6%	10%	7%	5%	4%	5%	6%	7%

QUALITY

Alternative health care options

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
Base										
Unweighted	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
Weighted	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Alternative health care options										
Excellent	<i>21%</i>	18%	28%	19%	17%	25%	30%	21%	21%	22%
Adequate	<i>45%</i>	47%	41%	38%	55%	43%	48%	46%	54%	41%
Poor	<i>10%</i>	6%	18%	15%	12%	9%	-	8%	6%	12%
Don't Know	<i>23%</i>	29%	13%	28%	16%	22%	22%	26%	19%	25%

Health care options for non-routine/specialized illnesses

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
Base										
Unweighted	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
Weighted	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Health care options for non-routine/specialized illnesses										
Excellent	<i>22%</i>	21%	23%	34%	14%	13%	19%	33%	31%	18%
Adequate	<i>39%</i>	41%	37%	19%	47%	57%	30%	41%	38%	40%
Poor	<i>23%</i>	23%	24%	32%	21%	20%	30%	10%	13%	27%
Don't Know	<i>15%</i>	15%	16%	15%	19%	11%	22%	15%	18%	15%

Health care options for routine illnesses / medical conditions

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Health care options for routine illnesses / medical conditions										
Excellent	38%	39%	37%	51%	28%	26%	56%	46%	47%	35%
Adequate	53%	53%	53%	43%	59%	64%	33%	51%	45%	56%
Poor	5%	3%	8%	6%	7%	5%	4%	-	4%	5%
Don't Know	4%	5%	2%	-	7%	4%	7%	3%	4%	4%

Information about health and wellness

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Information about health and wellness										
Excellent	34%	30%	42%	38%	28%	33%	44%	33%	32%	35%
Adequate	53%	57%	46%	51%	52%	55%	37%	62%	62%	49%
Poor	9%	8%	11%	10%	14%	8%	7%	3%	5%	10%
Don't Know	4%	6%	1%	-	7%	4%	11%	3%	1%	5%

Low-cost health care options

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Low-cost health care options										
Excellent	16%	13%	21%	24%	10%	12%	15%	23%	13%	18%
Adequate	35%	32%	42%	43%	40%	34%	26%	26%	35%	36%
Poor	26%	25%	28%	16%	33%	32%	30%	15%	23%	27%
Don't Know	23%	30%	9%	18%	17%	22%	30%	36%	29%	20%

Pediatric care services

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Pediatric care services										
Excellent	15%	11%	23%	13%	16%	22%	7%	10%	22%	12%
Adequate	37%	35%	39%	50%	57%	32%	19%	8%	32%	38%
Poor	8%	4%	14%	4%	10%	12%	4%	5%	9%	7%
Don't Know	41%	50%	24%	32%	17%	34%	70%	77%	37%	42%

Preventive health care services

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
<i>Weighted</i>	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Preventive health care services										
Excellent	30%	23%	40%	37%	26%	28%	19%	33%	29%	30%
Adequate	55%	61%	46%	51%	55%	59%	63%	51%	56%	55%
Poor	7%	4%	11%	6%	12%	8%	-	3%	5%	7%
Don't Know	8%	12%	3%	6%	7%	5%	19%	13%	9%	8%

Providers that take your insurance

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
<i>Weighted</i>	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Providers that take your insurance										
Excellent	34%	32%	36%	34%	34%	28%	33%	46%	36%	33%
Adequate	46%	43%	50%	38%	48%	49%	52%	44%	53%	43%
Poor	11%	12%	11%	16%	10%	16%	4%	3%	6%	13%
Don't Know	9%	13%	3%	12%	7%	8%	11%	8%	5%	11%

HEALTH CARE ACCESS

HOW WOULD YOU RATE YOUR AWARENESS OF THE LOCAL HEALTH CARE RESOURCES AVAILABLE IN SUMMIT COUNTY?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
How would you rate your awareness of the local health car...										
Very High	24%	18%	35%	28%	17%	24%	22%	28%	26%	24%
High	27%	26%	29%	25%	33%	20%	26%	38%	23%	28%
Moderate	40%	47%	29%	35%	45%	46%	37%	33%	49%	37%
Low	6%	6%	5%	6%	5%	8%	7%	-	1%	7%
Very Low	3%	4%	2%	6%	-	3%	7%	-	1%	4%

WHICH OF THE FOLLOWING DESCRIBE YOUR CURRENT HEALTH INSURANCE FOR YOU AND YOUR FAMILY?

	Total	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Which of the following describe your current health insur...										
No Insurance (you pay cash)	16%	19%	11%	32%	12%	13%	11%	-	4%	21%
Health Insurance (through employer)	44%	39%	53%	40%	52%	55%	59%	10%	54%	40%
Health Insurance (self-insured)	25%	21%	32%	28%	33%	26%	22%	8%	27%	24%
Medicaid	1%	1%	3%	-	3%	1%	-	3%	-	2%
Medicare	10%	16%	-	-	-	-	-	69%	13%	9%
Medicare Supplement	7%	11%	-	-	-	-	-	49%	8%	7%
Veteran's Benefits	2%	3%	-	-	-	-	4%	10%	4%	1%
CHP+	1%	-	2%	-	2%	1%	-	-	-	1%
Other	2%	2%	1%	-	-	4%	4%	3%	1%	2%

OTHER (WHAT KIND OF INSURANCE?)

- | | |
|--|---|
| <ul style="list-style-type: none"> ⇒ CELTIC INSURANCE ⇒ CHILD LIVING IN THE HOME WITHOUT INSURANCE. ⇒ COVER COLORADO STATE INSURANCE. ⇒ I DON'T KNOW. ⇒ INSURANCE DOESN'T COVER MY HUSBAND. ITS TOO EXPENSIVE TO ADD HIM. | <ul style="list-style-type: none"> ⇒ INSURANCE THROUGH MY FORMER PHYSICIAN WITH THE FEDERAL GOVERNMENT. ⇒ INSURED THROUGH RETIREMENT PLAN FROM PRIOR EMPLOYER. ⇒ TRICARE |
|--|---|

WHICH OF THE FOLLOWING STATEMENTS IS TRUE ABOUT YOUR EMPLOYER'S HEALTH COVERAGE?

	Total	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	22	14	8	6	4	6	4	-	4	18
<i>Weighted</i>	44	33	11	22	7	10	3	-	3	41
Which of the following statements is true about your empl...										
Employer offers it to some employees, but you're not eligible.	27%	24%	36%	32%	14%	40%	-	-	33%	27%
Employer offers it at a shared cost, but it's too expensive for you.	-	-	-	-	-	-	-	-	-	-
Employer doesn't offer it to any employees.	41%	42%	36%	68%	29%	10%	-	-	-	44%
You're self-employed.	18%	18%	18%	-	29%	30%	67%	-	33%	17%
You're not working right now.	14%	15%	9%	-	29%	20%	33%	-	33%	12%

IS YOUR HEALTH INSURANCE ADEQUATE FOR YOUR FAMILY'S NEEDS?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	<i>251</i>	<i>97</i>	<i>154</i>	<i>14</i>	<i>36</i>	<i>52</i>	<i>70</i>	<i>78</i>	<i>81</i>	<i>170</i>
<i>Weighted</i>	<i>227</i>	<i>138</i>	<i>89</i>	<i>46</i>	<i>51</i>	<i>66</i>	<i>24</i>	<i>39</i>	<i>75</i>	<i>152</i>
Is your health insurance adequate for your family's needs?										
Yes	86%	89%	81%	93%	84%	76%	79%	100%	95%	82%
No	14%	11%	18%	7%	16%	23%	21%	-	5%	18%
Don't Know	0%	-	1%	-	-	2%	-	-	-	1%

WHAT IS INADEQUATE ABOUT YOUR HEALTH INSURANCE?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	<i>36</i>	<i>10</i>	<i>26</i>	<i>1</i>	<i>6</i>	<i>12</i>	<i>12</i>	<i>5</i>	<i>6</i>	<i>30</i>
<i>Weighted</i>	<i>31</i>	<i>15</i>	<i>16</i>	<i>3</i>	<i>8</i>	<i>15</i>	<i>5</i>	<i>-</i>	<i>4</i>	<i>27</i>
What is inadequate about your health insurance?										
Co-pay is too high	3%	7%	-	-	-	-	20%	-	25%	-
Deductible is too high	55%	60%	50%	-	63%	60%	60%	-	75%	52%
Doesn't cover all members of my family	-	-	-	-	-	-	-	-	-	-
Doesn't cover alternative health services	-	-	-	-	-	-	-	-	-	-
Doesn't cover dental	3%	-	6%	-	13%	-	-	-	-	4%
Doesn't cover hearing	-	-	-	-	-	-	-	-	-	-
Doesn't cover mental health	-	-	-	-	-	-	-	-	-	-
Doesn't cover preventative services	-	-	-	-	-	-	-	-	-	-
Doesn't cover substance abuse	-	-	-	-	-	-	-	-	-	-
Doesn't cover vision	-	-	-	-	-	-	-	-	-	-
Excludes pre-existing conditions	13%	13%	13%	-	25%	13%	-	-	-	15%
Low total payment cap on treatments	-	-	-	-	-	-	-	-	-	-
Monthly premium is too high	26%	33%	19%	-	13%	27%	60%	-	25%	26%
Only covers major/catastrophic injuries/illnesses	16%	27%	6%	-	25%	20%	-	-	-	19%
Other	29%	20%	38%	100%	13%	13%	60%	-	50%	26%

OTHER (PLEASE SPECIFY)

- ⇒ I HAVE TO DRIVE TO DENVER TO GET HEALTH CARE SERVICES, WHICH IS ABOUT AN HOUR AND FORTY FIVE MINUTES AWAY.
- ⇒ IT DOES NOT COVER NECESSARY PROCEDURES. I HAVE TO FIGHT WITH THEM ALL THE TIME ON EVERYTHING.
- ⇒ IT DOESN'T PROVIDE DOCTORS THAT PROVIDE PREVENTATIVE CARE.
- ⇒ IT IS NOT ACCEPTED BY DOCTORS.

- ⇒ IT ONLY COVERS 80%.
- ⇒ NOT MANY PHYSICIANS TAKE IT.
- ⇒ OUT OF POCKET COST.
- ⇒ THE COST AND LACK OF FEATURES.
- ⇒ THE INSURANCE DOES NOT COVER PRESCRIPTIONS OR RELEASE IF CERTAIN PROCEDURES WILL BE COVERED.
- ⇒ WELLCARE COVERAGE

HEALTH CARE LOCATION AND INFORMATION

IS THE DOCTOR YOU TYPICALLY GO TO LOCATED IN SUMMIT COUNTY?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Is the doctor you typically go to located in Summit County?										
Yes	78%	75%	83%	75%	79%	83%	74%	74%	72%	80%
No	18%	19%	17%	25%	14%	12%	26%	21%	24%	16%
Don't go to doctor	3%	5%	-	-	7%	5%	-	3%	4%	3%
Don't know	0%	1%	-	-	-	-	-	3%	-	1%

THE LAST TIME YOU RECEIVED HEALTH CARE, DID YOU GO TO A PRIMARY CARE PROVIDER OR A SPECIALIST?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
The last time you received health care, did you go to a p...										
Primary care provider (family doctor)	72%	68%	78%	78%	76%	68%	63%	67%	68%	73%
Specialist (cardiologist, oncologist, etc...)	27%	30%	21%	22%	21%	30%	33%	33%	29%	26%
Don't know	1%	2%	1%	-	3%	1%	4%	-	3%	1%

WHERE DID YOU GO TO RECEIVE THAT CARE?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Where did you go to receive that care?										
Low-cost clinic	10%	9%	10%	15%	19%	7%	-	-	8%	10%
Family doctor's office	68%	65%	73%	69%	66%	66%	74%	67%	72%	66%
Emergency room	2%	3%	1%	-	5%	-	-	8%	3%	2%
Hospital	8%	11%	3%	6%	-	14%	7%	10%	4%	9%
Alternative health provider	5%	6%	4%	6%	9%	4%	4%	3%	5%	5%
Other	6%	6%	6%	-	2%	9%	15%	10%	8%	5%
Don't know	1%	1%	3%	4%	-	-	-	3%	1%	2%

OTHER (PLEASE SPECIFY)

- ⇒ ADVANCED DERMATOLOGY
- ⇒ BLOOD SPECIALIST
- ⇒ CALIFORNIA
- ⇒ CARDIOLOGIST (2)
- ⇒ CLINIC
- ⇒ DENVER (3)
- ⇒ FAMILY SPECIALIST
- ⇒ GROUP OFFICE, BOTH SPECIALISTS AND GENERAL PRACTITIONER.
- ⇒ GYNECOLOGIST

- ⇒ INTERNIST OFFICE IN HOSPITAL
- ⇒ LARGE MEDICAL DOCTORS OFFICE CENTER
- ⇒ MY PHYSICIAN CAME TO MY HOME.
- ⇒ ORTHOPEDIC OFFICE
- ⇒ ORTHOPEDIC SPECIALIST
- ⇒ ORTHOPEDIC SURGEONS OFFICE
- ⇒ PUBLIC HEALTH NURSE
- ⇒ SPECIALIST (7)
- ⇒ SPECIALIST IN EDWARDS
- ⇒ SURGERY CENTER

DID YOU RECEIVE THIS CARE IN SUMMIT COUNTY OR OUT OF SUMMIT COUNTY?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Did you receive this care in Summit County or out of Summ...										
In Summit County	82%	80%	86%	90%	76%	87%	70%	79%	74%	85%
Out of Summit County	18%	20%	14%	10%	24%	13%	30%	21%	26%	15%
Don't know	-	-	-	-	-	-	-	-	-	-

IS TRANSPORTATION AN OBSTACLE TO GETTING HEALTH CARE FOR YOU?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Is transportation an obstacle to getting health care for ...										
Yes	7%	4%	14%	13%	7%	7%	-	5%	5%	8%
No	93%	96%	86%	87%	93%	93%	100%	95%	95%	92%

ADEQUACY OF SERVICES PROVIDED IN SUMMIT COUNTY

ARE YOU SATISFIED WITH THE QUALITY OF THE FOLLOWING HEALTH CARE SERVICES THAT YOU HAVE RECEIVED OR CAN RECEIVE IN SUMMIT COUNTY?

Alternative health care options

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Alternative health care options										
Yes	51%	44%	62%	49%	71%	47%	41%	44%	62%	47%
No	8%	6%	12%	10%	9%	11%	-	5%	5%	10%
Don't Know	41%	49%	26%	41%	21%	42%	59%	51%	33%	44%

Dentists

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Dentists										
Yes	79%	77%	82%	62%	81%	87%	81%	87%	85%	76%
No	8%	6%	13%	15%	9%	4%	7%	5%	3%	11%
Don't Know	13%	18%	5%	24%	10%	9%	11%	8%	13%	13%

Drug/alcohol treatment programs

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Drug/alcohol treatment programs										
Yes	20%	17%	25%	22%	19%	20%	19%	21%	15%	22%
No	10%	9%	11%	10%	10%	8%	15%	8%	13%	8%
Don't Know	70%	74%	64%	68%	71%	72%	67%	72%	72%	70%

Emergency room services

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Emergency room services										
Yes	76%	79%	70%	75%	59%	82%	89%	82%	78%	75%
No	3%	1%	5%	-	7%	1%	4%	3%	1%	3%
Don't Know	22%	20%	25%	25%	34%	17%	7%	15%	21%	22%

Family medicine physician

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Family medicine physician										
Yes	79%	80%	77%	71%	78%	80%	85%	87%	88%	75%
No	8%	4%	14%	9%	3%	9%	11%	5%	6%	8%
Don't Know	14%	16%	9%	21%	19%	11%	4%	8%	5%	17%

Health service information sources

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Health service information sources										
Yes	62%	64%	60%	69%	53%	64%	59%	62%	62%	63%
No	10%	8%	15%	10%	14%	8%	15%	8%	5%	12%
Don't Know	27%	29%	25%	21%	33%	28%	26%	31%	33%	25%

Hospitals

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Hospitals										
Yes	87%	89%	84%	96%	79%	89%	89%	82%	90%	87%
No	4%	2%	7%	-	9%	5%	7%	-	3%	5%
Don't Know	8%	8%	9%	4%	12%	5%	4%	18%	8%	9%

Mental health services

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Mental health services										
Yes	30%	27%	34%	28%	26%	37%	22%	31%	29%	30%
No	10%	6%	16%	9%	16%	7%	11%	8%	9%	10%
Don't Know	61%	67%	50%	63%	59%	57%	67%	62%	62%	61%

Pediatric care services

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Pediatric care services										
Yes	35%	30%	43%	32%	55%	38%	19%	18%	40%	33%
No	11%	5%	22%	9%	17%	13%	4%	8%	13%	10%
Don't Know	54%	65%	35%	59%	28%	49%	78%	74%	47%	56%

Specialty physicians

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Specialty physicians										
Yes	56%	59%	51%	51%	59%	55%	52%	69%	62%	54%
No	22%	16%	32%	24%	17%	28%	26%	10%	17%	24%
Don't Know	22%	25%	17%	25%	24%	17%	22%	21%	22%	22%

Wellness programs

	<i>Total</i>	<i>Gender</i>		<i>Age Groups</i>					<i>Healthy Habits</i>	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	<i>Healthy Habits</i>	<i>Unhealthy habits</i>
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Wellness programs										
Yes	55%	49%	65%	51%	64%	55%	48%	54%	54%	55%
No	11%	12%	11%	12%	14%	7%	15%	13%	5%	14%
Don't Know	34%	39%	24%	37%	22%	38%	37%	33%	41%	31%

ARE YOU SATISFIED WITH THE NUMBER OF CHOICES THAT YOU HAVE IN SUMMIT COUNTY FOR THE FOLLOWING HEALTH CARE SERVICES?

Alternative health care options

	<i>Total</i>	<i>Gender</i>		<i>Age Groups</i>					<i>Healthy Habits</i>	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	<i>Healthy Habits</i>	<i>Unhealthy habits</i>
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Alternative health care options										
Yes	53%	54%	51%	51%	57%	55%	48%	51%	59%	51%
No	12%	6%	22%	19%	16%	11%	4%	-	9%	13%
Don't Know	35%	40%	27%	29%	28%	34%	48%	49%	32%	36%

Dentists

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Dentists										
Yes	89%	88%	90%	94%	83%	93%	81%	87%	92%	88%
No	4%	3%	7%	-	9%	4%	4%	5%	1%	6%
Don't Know	7%	9%	3%	6%	9%	3%	15%	8%	6%	7%

Drug/alcohol treatment programs

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Drug/alcohol treatment programs										
Yes	25%	22%	31%	38%	16%	26%	15%	23%	26%	25%
No	7%	5%	9%	-	10%	9%	11%	5%	6%	7%
Don't Know	68%	73%	60%	62%	74%	64%	74%	72%	68%	68%

Emergency room services

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Emergency room services										
Yes	85%	92%	71%	82%	79%	89%	89%	85%	79%	87%
No	8%	3%	17%	9%	16%	5%	4%	5%	12%	7%
Don't Know	7%	5%	12%	9%	5%	5%	7%	10%	9%	7%

Family medicine physician

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Family medicine physician										
Yes	73%	73%	73%	65%	66%	78%	81%	85%	88%	67%
No	17%	15%	21%	25%	19%	14%	11%	10%	10%	20%
Don't Know	10%	12%	6%	10%	16%	8%	7%	5%	1%	13%

Health service information sources

	Total	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
Unweighted	273	111	162	20	40	58	74	78	85	188
Weighted	271	171	100	68	58	76	27	39	78	193
Health service information sources										
Yes	56%	58%	53%	54%	50%	58%	56%	67%	56%	56%
No	13%	9%	20%	21%	19%	9%	11%	3%	9%	15%
Don't Know	30%	32%	27%	25%	31%	33%	33%	31%	35%	28%

Hospitals

	Total	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
Unweighted	273	111	162	20	40	58	74	78	85	188
Weighted	271	171	100	68	58	76	27	39	78	193
Hospitals										
Yes	85%	88%	80%	96%	69%	89%	85%	85%	86%	85%
No	9%	5%	16%	4%	24%	4%	7%	5%	8%	9%
Don't Know	6%	7%	4%	-	7%	7%	7%	10%	6%	6%

Mental health services

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Mental health services										
Yes	32%	27%	42%	43%	21%	33%	30%	36%	36%	31%
No	11%	8%	16%	6%	19%	12%	11%	8%	8%	12%
Don't Know	56%	65%	42%	51%	60%	55%	59%	56%	56%	56%

Pediatric care services

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Pediatric care services										
Yes	34%	33%	37%	40%	41%	39%	19%	18%	42%	31%
No	17%	8%	31%	13%	31%	18%	4%	8%	19%	16%
Don't Know	49%	59%	32%	47%	28%	42%	78%	74%	38%	53%

Specialty physicians

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
Unweighted	273	111	162	20	40	58	74	78	85	188
Weighted	271	171	100	68	58	76	27	39	78	193
Specialty physicians										
Yes	56%	63%	45%	63%	55%	54%	52%	54%	64%	53%
No	29%	22%	41%	18%	29%	36%	33%	28%	19%	33%
Don't Know	15%	16%	14%	19%	16%	11%	15%	18%	17%	15%

Wellness programs

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
Unweighted	273	111	162	20	40	58	74	78	85	188
Weighted	271	171	100	68	58	76	27	39	78	193
Wellness programs										
Yes	56%	56%	57%	54%	55%	59%	56%	59%	59%	55%
No	10%	6%	17%	10%	16%	9%	7%	5%	5%	12%
Don't Know	33%	37%	26%	35%	29%	32%	37%	36%	36%	32%

IF YOU NEEDED THE FOLLOWING SERVICES, WOULD YOU BE MOST LIKELY TO OBTAIN THEM INSIDE OR OUTSIDE OF SUMMIT COUNTY?

Alternative health care options

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
<i>Weighted</i>	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Alternative health care options										
Inside Summit County	65%	67%	62%	68%	69%	72%	59%	44%	67%	64%
Outside Summit County	17%	11%	29%	28%	16%	13%	11%	13%	17%	18%
Don't Know	18%	23%	9%	4%	16%	14%	30%	44%	17%	18%

Dentists

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
<i>Weighted</i>	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Dentists										
Inside Summit County	93%	93%	92%	100%	88%	97%	78%	90%	91%	93%
Outside Summit County	6%	5%	8%	-	12%	3%	15%	8%	8%	6%
Don't Know	1%	2%	-	-	-	-	7%	3%	1%	1%

Drug/alcohol treatment programs

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Drug/alcohol treatment programs										
Inside Summit County	49%	46%	54%	65%	41%	49%	44%	36%	46%	50%
Outside Summit County	17%	15%	20%	15%	21%	18%	19%	10%	13%	18%
Don't Know	34%	39%	26%	21%	38%	33%	37%	54%	41%	32%

Emergency room services

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Emergency room services										
Inside Summit County	94%	98%	88%	91%	93%	97%	93%	95%	99%	92%
Outside Summit County	4%	2%	8%	4%	5%	3%	4%	5%	-	6%
Don't Know	2%	1%	4%	4%	2%	-	4%	-	1%	2%

Family medicine physician

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Family medicine physician										
Inside Summit County	81%	78%	85%	74%	78%	88%	74%	90%	86%	79%
Outside Summit County	17%	18%	15%	26%	19%	9%	22%	8%	13%	19%
Don't Know	2%	4%	-	-	3%	3%	4%	3%	1%	3%

Health service information sources

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Health service information sources										
Inside Summit County	78%	74%	84%	78%	76%	82%	74%	77%	82%	76%
Outside Summit County	9%	8%	11%	6%	17%	7%	7%	10%	5%	11%
Don't Know	13%	18%	5%	16%	7%	12%	19%	13%	13%	13%

Hospitals

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Hospitals										
Inside Summit County	86%	91%	77%	87%	83%	87%	81%	90%	88%	85%
Outside Summit County	11%	6%	19%	13%	17%	5%	15%	8%	8%	12%
Don't Know	3%	2%	4%	-	-	8%	4%	3%	4%	3%

Mental health services

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Mental health services										
Inside Summit County	57%	54%	63%	65%	47%	70%	41%	49%	55%	58%
Outside Summit County	19%	17%	22%	25%	24%	11%	19%	15%	17%	20%
Don't Know	24%	29%	15%	10%	29%	20%	41%	36%	28%	22%

Pediatric care services

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Pediatric care services										
Inside Summit County	46%	42%	54%	56%	55%	49%	30%	26%	54%	44%
Outside Summit County	18%	16%	23%	25%	29%	14%	11%	5%	19%	18%
Don't Know	35%	42%	23%	19%	16%	37%	59%	69%	27%	38%

Specialty physicians

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Specialty physicians										
Inside Summit County	50%	56%	39%	57%	48%	51%	37%	44%	55%	48%
Outside Summit County	42%	35%	55%	43%	47%	37%	56%	36%	37%	44%
Don't Know	8%	9%	6%	-	5%	12%	7%	21%	8%	8%

Wellness programs

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Wellness programs										
Inside Summit County	77%	70%	88%	72%	76%	87%	67%	74%	78%	76%
Outside Summit County	7%	9%	4%	12%	12%	1%	7%	5%	3%	9%
Don't Know	16%	20%	8%	16%	12%	12%	26%	21%	19%	15%

DOES SUMMIT COUNTY DO ENOUGH TO PREVENT PROBLEMS IN THE FOLLOWING HEALTH-RELATED AREAS?

Clean air

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	<i>Healthy Habits</i>	<i>Unhealthy habits</i>
Base										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Clean air										
Yes	79%	80%	76%	87%	78%	78%	59%	85%	81%	78%
No	4%	4%	6%	4%	2%	5%	7%	3%	3%	5%
Don't know	17%	16%	18%	9%	21%	17%	33%	13%	17%	17%

Clean water

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	<i>Healthy Habits</i>	<i>Unhealthy habits</i>
Base										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Clean water										
Yes	82%	81%	82%	85%	79%	78%	78%	90%	76%	84%
No	5%	5%	5%	-	3%	8%	15%	3%	6%	5%
Don't know	13%	13%	13%	15%	17%	14%	7%	8%	18%	11%

Infectious Disease Prevention

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Infectious Disease Prevention										
Yes	40%	40%	41%	35%	43%	49%	19%	41%	38%	41%
No	6%	3%	12%	-	14%	8%	7%	3%	5%	7%
Don't know	54%	57%	47%	65%	43%	43%	74%	56%	56%	52%

Injury Prevention

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Injury Prevention										
Yes	67%	66%	68%	74%	62%	71%	56%	59%	73%	64%
No	10%	9%	13%	16%	14%	5%	7%	8%	6%	12%
Don't know	23%	25%	19%	10%	24%	24%	37%	33%	21%	24%

Mental Health and Substance Abuse

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Mental Health and Substance Abuse										
Yes	36%	34%	39%	49%	28%	37%	33%	26%	41%	34%
No	19%	18%	21%	16%	17%	20%	22%	21%	18%	19%
Don't know	45%	49%	40%	35%	55%	43%	44%	54%	41%	47%

Obesity

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Obesity										
Yes	48%	49%	47%	66%	47%	43%	26%	44%	45%	49%
No	19%	13%	28%	13%	14%	26%	19%	21%	12%	22%
Don't know	33%	38%	25%	21%	40%	30%	56%	36%	44%	29%

Oral Health

	Total	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
Unweighted	273	111	162	20	40	58	74	78	85	188
Weighted	271	171	100	68	58	76	27	39	78	193
Oral Health										
Yes	70%	64%	81%	76%	66%	74%	67%	62%	68%	71%
No	4%	2%	7%	-	7%	7%	-	5%	3%	5%
Don't know	26%	34%	12%	24%	28%	20%	33%	33%	29%	24%

Safe Food

	Total	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
Unweighted	273	111	162	20	40	58	74	78	85	188
Weighted	271	171	100	68	58	76	27	39	78	193
Safe Food										
Yes	64%	66%	60%	62%	71%	66%	52%	64%	54%	68%
No	5%	5%	6%	-	3%	8%	7%	8%	10%	3%
Don't know	31%	29%	34%	38%	26%	26%	41%	28%	36%	29%

Tobacco

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
<i>Weighted</i>	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Tobacco										
Yes	39%	38%	42%	44%	41%	39%	37%	31%	32%	42%
No	18%	15%	24%	24%	10%	17%	11%	28%	24%	16%
Don't know	42%	47%	34%	32%	48%	43%	52%	41%	44%	41%

Unintended Pregnancy

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
<i>Weighted</i>	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Unintended Pregnancy										
Yes	25%	22%	31%	29%	22%	32%	15%	18%	19%	27%
No	16%	13%	20%	21%	16%	16%	11%	10%	14%	17%
Don't know	59%	65%	49%	50%	62%	53%	74%	72%	67%	56%

WHICH OF THE AREAS I JUST READ DO YOU THINK SHOULD BE THE TOP 3 PRIORITY AREAS FOR SUMMIT COUNTY TO IMPROVE IN THE NEXT FIVE YEARS?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Which of the areas I just read do you think should be the...										
Clean air	18%	20%	15%	10%	17%	14%	30%	31%	19%	18%
Clean water	30%	30%	29%	13%	41%	17%	63%	38%	28%	30%
Infectious Disease Prevention	23%	23%	22%	26%	19%	20%	26%	23%	15%	25%
Injury Prevention	25%	27%	22%	37%	31%	17%	19%	18%	28%	24%
Mental Health and Substance Abuse	58%	54%	65%	66%	60%	63%	41%	46%	65%	55%
Obesity	29%	27%	33%	24%	31%	32%	19%	38%	33%	27%
Oral Health	2%	3%	1%	6%	-	1%	4%	-	1%	3%
Safe Food	15%	14%	16%	15%	21%	9%	15%	15%	12%	16%
Tobacco	35%	35%	35%	44%	31%	34%	33%	28%	33%	36%
Unintended Pregnancy	31%	29%	35%	34%	33%	38%	26%	18%	21%	36%

ARE THERE ANY OTHER HEALTH-RELATED AREAS THAT YOU THINK SHOULD BE A HIGH PRIORITY FOR SUMMIT COUNTY TO IMPROVE IN THE NEXT FIVE YEARS?

- ⇒ ACCESS TO AFFORDABLE CARE.
- ⇒ ACCESSIBILITY FOR THE PEOPLE WHO DO NOT QUALIFY FOR FREE OR SUBSIDIZED HEALTH CARE OR HAVE INADEQUATE INSURANCE.
- ⇒ ALTERNATIVE CARE OPTIONS SHOULD BE A PRIORITY.
- ⇒ ANY KIND OF SPECIALTY CARE.
- ⇒ ASSISTED LIVING COULD BE GREAT HERE.
- ⇒ AVAILABILITY OF PEDIATRIC AND SPECIALTY CARE. CHILD SEAT LAWS.
- ⇒ BETTER OPTIONS FOR HEALTH CARE. BETTER OPTIONS FOR OBGYN, THE OBGYNS AROUND HERE MOVE A LOT.
- ⇒ CAN'T THINK OF ANY.
- ⇒ CAN'T THINK OF ANYTHING.
- ⇒ CARDIOVASCULAR FITNESS. YOU ARE HERE AT 9,000 PLUS FEET AND WE SHOULD ENCOURAGE PEOPLE TO GET ON THAT BIKE PATH.
- ⇒ CHILD CARE OPTIONS.
- ⇒ CLEAN WATER AND HEALTHY FOOD SHOULD BE A PRIORITY. ALSO SUBSTANCE ABUSE.

- ⇒ COST EFFECTIVE SERVICES.
- ⇒ DIABETES AND CANCER AND ALLERGIES. PEOPLE GO OUT OF SUMMIT COUNTY TO SEE THESE DOCTORS. SPECIALTY DOCTORS SHOULD BE IN THE COUNTY.
- ⇒ DRUG AND ALCOHOL ABUSE CAN BE A PROBLEM UP HERE.
- ⇒ DRUG USE.
- ⇒ ECONOMICAL COSTS AND PROFESSIONAL SERVICE.
- ⇒ EDUCATING PEOPLE AS TO WHAT IS OUT THERE AND AVAILABLE TO THEM.
- ⇒ ELDER CARE AND AGING COMMUNITY CARE.
- ⇒ ELDERCARE.
- ⇒ ELDERLY CARE SHOULD BE AT THE TOP OF THE LIST.
- ⇒ EVERYONE NEEDS HEALTH CARE FOR PROTECTIVE MEASURES FOR THEIR HEALTH AND SURGERIES.
- ⇒ GERIATRIC CARE
- ⇒ GETTING SOME SPECIALISTS HERE.

- ⇒ HAZARDOUS DRIVERS ON THE ROAD DURING THE WINTER SEASON.
- ⇒ HEALTH INSURANCE SHOULD BE AT THE TOP OF THE LIST.
- ⇒ HEART DISEASE AND THE RIGHT KIND OF DOCTORS FOR IT. THERE SHOULD BE MORE DOCTORS UP HERE AND MORE DOCTORS TO TAKE CARE OF US.
- ⇒ I AM NOT SURE OF ANY.
- ⇒ I BELIEVE GERIATRIC CARE.
- ⇒ I BELIEVE THAT MORE PEOPLE CONTRACT AND HAVE A HIGH MS STATE AND I THINK THE PUBLIC SHOULD BE MADE MORE AWARE OF THIS.
- ⇒ I BELIEVE THAT SUMMIT COUNTY HAS AN EXCELLENT SYSTEM.
- ⇒ I BELIEVE THAT THE AGING POPULATION WILL NEED SPECIALIST TO ADDRESS THESE PROBLEMS. FOR EXAMPLE, MY HUSBAND HAD A HEART ATTACK AND WAS TAKEN TO DENVER; BUT HE NEEDED SOME ADDITIONAL CARDIAC REHAB AND WE DON'T HAVE ANYTHING LIKE THAT IN SUMMIT COUNTY. WE
- ⇒ I CAN NOT THINK OF ANYMORE AT THIS TIME.
- ⇒ I CAN NOT THINK OF ANYTHING ELSE. (2)
- ⇒ I CAN NOT THINK OF ANYTHING OFF HAND.
- ⇒ I CAN NOT THINK OF ANYTHING.

- ⇒ I CAN'T THINK OF A ANYTHING.
- ⇒ I CAN'T THINK OF ANY (9)
- ⇒ I CAN'T THINK OF ANY MORE AREAS.
- ⇒ I CAN'T THINK OF ANYTHING (7)
- ⇒ I CAN'T THINK OF ANYTHING, NO.
- ⇒ I CAN'T THINK OF ONE.
- ⇒ I DON'T HAVE ENOUGH EXPERIENCE TO GIVE YOU A JUDGMENT.
- ⇒ I DON'T KNOW OF ANY.
- ⇒ I DON'T KNOW OF ANYTHING THE COUNTY IS NOT DOING.
- ⇒ I DON'T KNOW. (2)
- ⇒ I DON'T REALLY HAVE A HIGH PRIORITY BUT PROBABLY MENTAL HEALTH.
- ⇒ I DON'T THINK IT THE TOTAL RESPONSIBILITY OF SUMMIT COUNTY, PRIVATE CITIZENS SHOULD BE MORE RESPONSIBLE.
- ⇒ I DON'T THINK IT CAN GET MUCH BETTER. I AM PRETTY HAPPY WITH EVERYTHING.
- ⇒ I DON'T THINK SO.
- ⇒ I DON'T THINK SUMMIT COUNTY HAS MUCH CONTROL OVER THE WAY WE BUY INSURANCE BUT THAT WOULD BE MY BIGGEST HEALTH

CONCERN. IF THERE WAS SOME KIND OF A GROUP PROGRAM THAT PEOPLE COULD JOIN TOGETHER TO GET A BREAK ON MONTHLY COSTS.

- ⇒ I DON'T THINK THAT THERE IS ENOUGH OF A POPULATION TO DRAW DOCTORS. THEY COULD BRING MORE PEDIATRICIANS AND DENTISTS OF HIGHER QUALITY.
- ⇒ I DON'T THINK THE CANCER TREATMENT IS PARTICULARLY GOOD HERE.
- ⇒ I DON'T THINK THERE ARE HEALTH ISSUE.
- ⇒ I GUESS CARE FOR THE ELDERLY. THERE IS NOT A NURSING HOME OR ANYTHING LIKE THAT HERE.
- ⇒ I GUESS JUST WATER AND OBESITY.
- ⇒ I HAVE BEEN HERE FOR 35 YEARS AND THEY HAVE IMPROVED A LOT, SO I THINK THEY ARE DOING GOOD.
- ⇒ I HAVE NO COMMENT OTHER THAN THE THREE THAT I ALREADY CHOSE.
- ⇒ I HAVE NO CONCERNS.
- ⇒ I HAVE NO IDEA.
- ⇒ I HAVE NO OPTION ON THAT AREA OF CONCERN.
- ⇒ I HAVE NO OPTION ON THE ISSUE.
- ⇒ I HAVE NO SUGGESTIONS.

- ⇒ I REALLY DON'T KNOW OF ANY.
- ⇒ I THINK ALCOHOLISM AWARENESS COULD BE IMPROVED.
- ⇒ I THINK GETTING RID OF THE MONOPOLY THAT HIGH COUNTRY HEALTHCARE HAS WOULD BE A GOOD AREA TO IMPROVE IN.
- ⇒ I THINK IMPROVING FITNESS. TO GET THE HEALTH WORD OUT TO PEOPLE OF NON-ENGLISH SPEAKING RESIDENCE. I WOULD LIKE MORE INFORMATION FOR PEOPLE WHO DO NOT VACCINATE THEIR CHILDREN AND WHY THIS IS VERY IMPORTANT TO DO.
- ⇒ I THINK IN THE WAY THAT DOCTORS CARE FOR THE ELDERLY. THEY DON'T PAY ENOUGH ATTENTION TO THE HEALTH CARE NEEDS OF THE ELDERLY. I THINK THEY SHOULD BE MORE PROACTIVE IN THE HEALTH CARE OF THE ELDERLY. THEY ARE HAPPY TO TAKE THE MONEY BUT DON'T SEEM TO B
- ⇒ I THINK INJURY PRESENTATION ESPECIALLY IN THE HISPANIC COMMUNITY.
- ⇒ I THINK IT SHOULD BE A HIGH PRIORITY IN WOMEN'S HEALTH.
- ⇒ I THINK PEDIATRIC SERVICES SHOULD BE IMPROVED.
- ⇒ I THINK RETIRED INDIVIDUALS AND THOSE IN ASSISTED LIVING SHOULD BE ADD TO THE LIST. THERE IS A HUGE COMMUNITY OF THOSE PEOPLE LIVING HERE.

- ⇒ I THINK SENIOR CITIZENS AND GERIATRIC CARE.
- ⇒ I THINK SERVICES FOR THE ELDERLY.
- ⇒ I THINK SUMMIT COUNTY NEEDS TO DO MORE TO ATTRACT SPECIALISTS TO COME TO SUMMIT COUNTY, AT LEAST PART TIME.
- ⇒ I THINK THAT IS A PERSONAL, NOT COUNTY CHOICE.
- ⇒ I THINK THAT SKIN CARE SHOULD BE A HIGH PRIORITY.
- ⇒ I THINK THAT SUMMIT COUNTY COULD IMPROVE THE ASSISTED LIVING OPTIONS.
- ⇒ I THINK THAT THE COUNTY COULD IMPROVE ON INFECTIOUS DISEASE PREVENTION AND TREATMENT.
- ⇒ I THINK THAT THE NEED FOR NURSING CARE IS SOMETHING THAT IS GOING TO HAPPEN.
- ⇒ I THINK THAT THEY NEED TO HAVE MORE EDUCATION FOR OBESITY, DRUGS AND ALCOHOL AND SAFE AND INFECTIOUS DISEASES.
- ⇒ I THINK THE COUNTY SHOULD DO MORE FOR THE AGING POPULATION.
- ⇒ I THINK THE COUNTY SHOULD DO MORE TO FIND AND KEEP FAMILY PRACTICE PHYSICIANS AND SPECIALISTS OTHER THAN ORTHOPEDIC PHYSICIANS.

- ⇒ I THINK THE ONES ON THE LIST ARE THE ONES I WOULD PICK.
- ⇒ I THINK THERE COULD BE MORE INFORMATION ABOUT DRUG ABUSE IN THE COUNTY.
- ⇒ I THINK THERE NEEDS TO MORE PEDIATRICIANS IN THE COUNTY.
- ⇒ I THINK THERE SHOULD BE MORE CARDIAC CARE.
- ⇒ I THINK THERE SHOULD BE MORE URGENT CARE FACILITIES.
- ⇒ I THINK THEY ARE DOING A GREAT JOB IN SUMMIT COUNTY.
- ⇒ I THINK THEY ARE DOING A PRETTY GOOD JOB.
- ⇒ I THINK THEY COULD IMPROVE ON A LOT OF THE AREAS OF INFORMATION BECAUSE SOMETHING COMES UP AND YOU DON'T SEE ANYTHING, THEN YOU FORGET.
- ⇒ I THINK THEY DO A GOOD JOB. I CAN'T IMAGINE ANYTHING.
- ⇒ I THINK THEY NEED MORE DOCTOR THAT WOULD ACCEPT LOW INCOME FAMILIES.
- ⇒ I THINK THEY NEED TO EXPAND THEIR SERVICES FOR MORE HEALTH NEEDS.
- ⇒ I THINK THEY SHOULD DO PRESCRIPTION DRUG ABUSE.

- ⇒ I THINK THEY SHOULD MORE ABOUT SUBSTANCE ABUSE AND EMERGENCY SERVICE.
- ⇒ I THINK THEY SHOULD WORK ON HEALTH CARE AFFORDABILITY AND HEALTH CARE OPTIONS FOR FAMILIES.
- ⇒ I THINK THEY SHOULD WORK ON HELPING PEOPLE QUIT SMOKING.
- ⇒ I THINK TRANSPORTATION TO THOSE WHO DON'T HAVE TRANSPORTATION TO THE FACILITIES AND I ALSO THINK PUBLIC HEALTH COULD BE IMPROVED.
- ⇒ I THINK UNWANTED PREGNANCY FOR THE HISPANIC POPULATION SHOULD BE BETTER CONTROLLED.
- ⇒ I THINK WE NEED MORE PEDIATRIC CARE SERVICES, MENTAL HEALTH SERVICES AND A WIDER SELECTION OF SPECIALTY SERVICES.
- ⇒ I THINK YOU HAVE PRETTY MUCH COVERED THEM, I CAN NOT THINK OF ANY.
- ⇒ I WANT AVAILABILITY OF LOW COST HEALTH CARE.
- ⇒ I WOULD JUST LIKE TO SEE ANOTHER CLINIC OR HOSPITAL HERE.
- ⇒ I WOULD LIKE TO MORE URGENT CARE FACILITIES.
- ⇒ I WOULD LIKE TO SEE FLUORIDE REMOVED FROM THE WATER.

- ⇒ I WOULD LIKE TO SEE MORE PROGRAMS FOR THE ELDERLY.
- ⇒ I WOULD LIKE TO SEE MORE SKI INJURY PREVENTION.
- ⇒ I WOULD LIKE TO SEE PEDIATRIC TRAUMA AND NEUROLOGISTS AVAILABLE. I HAVE BEEN REFERRED OUTSIDE THE COUNTY FOR THESE.
- ⇒ I WOULD LIKE TO SEE THE GENERAL CARE OF THE HOSPITAL IMPROVED. I HAD BAD EXPERIENCES THE LAST THREE TIMES I WAS THERE.
- ⇒ I WOULD LIKE TO SEE THE WAY PEOPLE ACCESS INSURANCE CHANGED. I WOULD ALSO LIKE TO SEE MORE SPECIALTY AND GENERAL CARE PROVIDERS, THERE SHOULD BE MORE OPTIONS.
- ⇒ I WOULD NOT KNOW.
- ⇒ I WOULD SAY CANCER AND DIALYSIS TREATMENTS.
- ⇒ I WOULD SAY HEALTH AWARENESS PROGRAMS.
- ⇒ I WOULD SAY INJURY PREVENTION SHOULD BE A PRIORITY AS WELL.
- ⇒ I WOULD SAY SUBSTANCE ABUSE AND DENTAL HEALTH.
- ⇒ I'M NOT SURE WHAT THE FOOD IN SCHOOLS LOOK LIKE BUT I THINK THAT SHOULD BE A MAIN PRIORITY.

- ⇒ IMPROVE THE OB/GYN OPTIONS FOR THESE PRACTICES BECAUSE WE DO NOT HAVE A LOT OF GOOD DOCTORS THAT FOCUS ON THOSE NEEDS. ALSO, BREAST CANCER DOCTORS THAT SPECIALIZE IN THAT AREA ARE VERY NEEDED TOO. SMALL BUSINESSES ARE HAVING A DIFFICULT TIME FINDING AFFOR
- ⇒ IN GENERAL I WOULD SAY OBESITY AND DIABETES SHOULD BE ADDRESSED.
- ⇒ JUST INJURY AND PREGNANCY.
- ⇒ LOW COST CARE FOR ALL.
- ⇒ LOW COST HEALTH CARE.
- ⇒ LOWERING PRICES AT THE HOSPITALS.
- ⇒ MENTAL HEALTH AND AGE RELATED MEMORY PROBLEMS.
- ⇒ MENTAL HEALTH. PROBABLY ASSISTANCE WITH INFANTS FOR SOME FAMILIES; EDUCATION, SUPPORT, NUTRITION.
- ⇒ MORE ACCESS TO PEDIATRIC SPECIALISTS AND MORE CHOICES IN PEDIATRICIANS.
- ⇒ MORE AFFORDABLE INSURANCE.
- ⇒ MORE AVAILABLE PEDIATRIC SERVICES.
- ⇒ MORE HEALTH INSURANCE OPTIONS FOR PEOPLE WHO CAN NOT AFFORD HEALTH INSURANCE.

- ⇒ MORE LOW COST HEALTH CARE CLINICS, PERHAPS ONE IN BRECKENRIDGE.
- ⇒ MORE SPECIALISTS. (2)
- ⇒ MORE SPECIALTY PHYSICIANS.
- ⇒ NEED TO INCREASE THE NUMBER OF FAMILY PRACTITIONER AND RETAIN THEM.
- ⇒ NO COMMENT.
- ⇒ NO I JUST THINK WE HAVE A LOT OF PEOPLE THAT DON'T HAVE INSURANCE. THE CLINIC HELPS BUT I THINK IT'S SOMETHING WE CAN WORK ON.
- ⇒ NO OTHER ISSUES.
- ⇒ NO, I CAN'T THINK OF ANYTHING. I'M PERFECTLY HAPPY WITH THE HEALTH SERVICE I RECEIVE NOW.
- ⇒ NO, I DON'T THINK SO. (3)
- ⇒ NO, I THINK WE ARE ONE OF THE BEST AREAS WE HAVE EVER LIVED IN.
- ⇒ NO, NOT AT THIS TIME. (7)
- ⇒ NO, NOT TO MY KNOWLEDGE.
- ⇒ NO, WE ARE FINE HERE.
- ⇒ NO.(29)
- ⇒ NONE AT ALL.

- ⇒ NONE AT THIS TIME.
- ⇒ NONE AT THIS TIME.
- ⇒ NONE I CAN THINK OF.
- ⇒ NONE THAT I CAN THINK OF.(3)
- ⇒ NONE THAT I CAN THINK.
- ⇒ NONE. (10)
- ⇒ NOT ENOUGH PEOPLE CAN AFFORD HEALTH INSURANCE SO I THINK THEY SHOULD PROVIDE MORE LOW COST HEALTH ASSISTANCE.
- ⇒ NOT REALLY, NO.
- ⇒ NOT THAT I CAN THINK OF AT THIS TIME. (2)
- ⇒ NOT THAT I CAN THINK OF.(11)
- ⇒ NOTHING COMES TO MIND.
- ⇒ NOTHING THAT I KNOW.
- ⇒ NOTHING.(2)
- ⇒ OBESITY, I THINK EDUCATION FOR CHILDREN.
- ⇒ OTHER THAN MENTAL HEALTH THERE ARE NO ADDITIONAL HEALTH-RELATED AREAS THAT NEED MORE ATTENTION. I AM IN FAVOR OF THE USE OF MEDICAL MARIJUANA AND WOULD LIKE MORE PROGRAMS THAT HELP AID IN THE PROPER USAGE OF THIS TYPE OF TREATMENT PROGRAMS. NOTHING ELSE

- ⇒ PEDIATRIC CARE SHOULD HAVE A HIGH PRIORITY.
- ⇒ PEDIATRIC DENTISTRY.
- ⇒ PERHAPS HEALTH CARE FOR OLDER PEOPLE; THAT IS AN AREA THAT WE ARE LESS ADVANCED THAN OTHER AREAS.
- ⇒ PRICE OF CARE.
- ⇒ PROBABLY WELLNESS, THEY NEED TO EDUCATE PEOPLE ABOUT NUTRITION.
- ⇒ SENIOR HEALTH FOR SENIORS.
- ⇒ SERVICES FOR SENIOR CITIZENS
- ⇒ SPECIALTY MEDICINE.
- ⇒ SPECIALTY, LOW -INCOME HEALTH COAST, SENIOR SERVICES
- ⇒ SUMMIT COUNTY NEEDS MORE SPECIALIST.
- ⇒ THE AVAILABILITY OF PEDIATRIC DOCTORS.
- ⇒ THE AVAILABILITY OF SPECIALTY MEDICINE CARE AND MORE WELLNESS PROGRAMS.
- ⇒ THE BIGGEST ISSUE IS THE COST IN HEALTH CARE IN GENERAL.
- ⇒ THE CHARGES FOR AMBULANCE IN THE COUNTY.
- ⇒ THE COST OF HEALTH INSURANCE ALL TOGETHER NEEDS TO IMPROVE.

- ⇒ THERE ARE NOT ENOUGH CHOICES FOR OPHTHALMOLOGISTS.
- ⇒ THERE SHOULD BE A HIGH PRIORITY ON END OF LIFE ISSUES, ASSISTED LIVING AND NURSING HOME ASSISTANCE.
- ⇒ THERE SHOULD BE MORE INTERNAL MEDICINE DOCTORS, PAIN MANAGEMENT DOCTORS, AND DENTISTS.
- ⇒ THEY ARE DOING OKAY.
- ⇒ THEY DO A GOOD JOB.
- ⇒ THEY NEED MORE SPECIALTIES.
- ⇒ THEY NEED TO BRING IN MORE DOCTORS AND THEY NEED TO GET RID OF THE HEALTH INSURANCE COMPANIES.
- ⇒ THEY NEED TO GET SOMEONE THAT IS FAMILIAR WITH THYROID DISEASE UP HERE.
- ⇒ THEY NEED TO HAVE A BETTER SELECTION OF SPECIALISTS.
- ⇒ THEY NEED TO WORK ON THE INFECTIOUS DISEASE AWARENESS.
- ⇒ TO GET MORE GENERAL PRACTITIONER IN THE AREA.
- ⇒ TRYING TO KEEP HIGH QUALITY INDEPENDENT PRACTITIONERS IN SUMMIT COUNTY.

- ⇒ UNAWARE OF ANY OTHER HEALTH-RELATED AREAS TO IMPROVE ON.
- ⇒ WE CAN IMPROVE IN CONCUSSION EDUCATION AND PREVENTION. MANDATING TRAINING FOR ALL COACHES AT ALL AGE LEVELS AND EDUCATING PARENTS AS WELL AS CHILDREN ON CONCUSSION EDUCATION AND PREVENTION. EDUCATE KIDS MORE ON ENERGY DRINKS AND HEALTHY DIETS. FOOD AND N
- ⇒ WE DO NOT HAVE ENOUGH ADA COMPLIANT FACILITIES FOR PEOPLE WITH DISABILITIES.
- ⇒ WE NEED A HEALTH CARE SYSTEM.
- ⇒ WE NEED COVERAGE IN LOCAL HOSPITALS AND SHOULDN'T HAVE TO DRIVE TO DENVER TO GET TO AN EMERGENCY ROOM. MY HUSBAND WENT TO THE EMERGENCY ROOM WITH A STROKE. THEY GAVE HIM A PERCOCET AND SENT HOME. THEY TOLD HIM HE HAD AN EAR INFECTION.
- ⇒ WE NEED MORE SPECIALIST IN SUMMIT COUNTY.
- ⇒ WOMEN'S HEALTH, SPECIFICALLY MENOPAUSAL.
- ⇒ YEAH, GERIATRICS.
- ⇒ YES IN BUILDING CODES TO ADDRESS RADON IN CONSTRUCTION NEW AND EXISTING BUILDINGS.
- ⇒ YES, ALTERNATIVE MEDICINE. THE AVAILABILITY SHOULD BE BETTER.

- ⇒ YES, BETTER JOB OF EDUCATING MINORS ON ALCOHOL AND SUBSTANCE ABUSE. ALSO ENFORCEMENT OF PROGRAMS.
- ⇒ YES, I DO THINK THEY NEED MORE SPECIALIZED PHYSICIAN CARE HERE.
- ⇒ YES, REDUCE THE COST OF EMERGENCY ROOM VISITS, AMBULANCE RIDES AND HOSPITAL STAY.
- ⇒ YES, THE CHOICES OF PEDIATRICIANS.

- ⇒ YES, THE HEALTH CARE CLINICS.
- ⇒ YES, THEY NEED TO ADDRESS THE AGING POPULATIONS; SERVICES FOR THEM OR SHORT-TERM AND LONG TERM FACILITIES.
- ⇒ YES, WE DON'T HAVE A CARDIAC UNIT.
- ⇒ YES. MORE SPECIALISTS. EAR, NOSE, AND THROAT, GASTROINTESTINAL, NEUROSURGEONS.
- ⇒ YOU CAN ALWAYS IMPROVE ON EVERYTHING.

PERSONAL HEALTH RISKS

I'M GOING TO READ A LIST OF ITEMS ABOUT YOUR PERSONAL HEALTH. FOR EACH ONE, PLEASE TELL ME WHETHER OR NOT IT APPLIES TO YOU BY ANSWERING YES OR NO.

Don't wash hands regularly

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Don't wash hands regularly										
Yes	9%	10%	7%	10%	7%	11%	4%	10%	-	12%
No	91%	89%	93%	90%	93%	89%	96%	87%	100%	87%
Don't know	0%	1%	-	-	-	-	-	3%	-	1%

Don't vaccinate children

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Don't vaccinate children										
Yes	7%	9%	3%	-	10%	12%	11%	-	-	9%
No	77%	71%	86%	78%	86%	72%	81%	67%	100%	67%
Don't know	17%	20%	11%	22%	3%	16%	7%	33%	-	23%

Don't receive regular preventative screenings

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Don't receive regular preventative screenings										
Yes	24%	32%	10%	28%	31%	25%	26%	5%	-	34%
No	76%	68%	89%	72%	67%	75%	74%	95%	100%	66%
Don't know	0%	-	1%	-	2%	-	-	-	-	1%

Don't wear a helmet

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Don't wear a helmet										
Yes	18%	22%	11%	26%	9%	18%	19%	15%	-	25%
No	79%	77%	82%	65%	90%	82%	78%	82%	100%	70%
Don't know	3%	1%	7%	9%	2%	-	4%	3%	-	5%

Don't wear seat belt

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
<i>Weighted</i>	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Don't wear seat belt										
Yes	12%	16%	5%	22%	3%	16%	4%	5%	-	17%
No	86%	81%	95%	78%	93%	82%	96%	92%	100%	81%
Don't know	2%	3%	-	-	3%	3%	-	3%	-	3%

Drinking and driving

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
<i>Weighted</i>	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Drinking and driving										
Yes	1%	2%	-	-	7%	-	-	-	-	2%
No	98%	96%	100%	100%	93%	97%	100%	100%	100%	97%
Don't know	1%	1%	-	-	-	3%	-	-	-	1%

Drug or alcohol abuse

	<i>Total</i>	<i>Gender</i>		<i>Age Groups</i>					<i>Healthy Habits</i>	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	<i>Healthy Habits</i>	<i>Unhealthy habits</i>
<i>Base</i>										
<i>Unweighted</i>	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
<i>Weighted</i>	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Drug or alcohol abuse										
Yes	8%	10%	4%	16%	7%	4%	4%	5%	-	11%
No	92%	89%	96%	84%	93%	96%	93%	95%	100%	89%
Don't know	0%	1%	-	-	-	-	4%	-	-	1%

Symptoms of depression or anxiety

	<i>Total</i>	<i>Gender</i>		<i>Age Groups</i>					<i>Healthy Habits</i>	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	<i>Healthy Habits</i>	<i>Unhealthy habits</i>
<i>Base</i>										
<i>Unweighted</i>	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
<i>Weighted</i>	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Symptoms of depression or anxiety										
Yes	18%	14%	24%	25%	22%	16%	15%	5%	-	25%
No	82%	85%	76%	75%	78%	84%	85%	92%	100%	75%
Don't know	0%	1%	-	-	-	-	-	3%	-	1%

Not enough exercise

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Not enough exercise										
Yes	21%	22%	20%	21%	19%	22%	19%	28%	-	30%
No	78%	78%	78%	79%	79%	76%	81%	72%	100%	69%
Don't know	1%	-	2%	-	2%	1%	-	-	-	1%

Overweight

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Overweight										
Yes	13%	12%	15%	9%	16%	11%	26%	15%	-	19%
No	86%	87%	83%	91%	83%	88%	74%	82%	100%	80%
Don't know	1%	1%	2%	-	2%	1%	-	3%	-	2%

Unhealthy eating habits

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Unhealthy eating habits										
Yes	19%	22%	14%	31%	12%	21%	-	18%	-	26%
No	79%	75%	86%	69%	84%	76%	96%	79%	100%	70%
Don't know	2%	4%	-	-	3%	3%	4%	3%	-	3%

Poor oral health

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Poor oral health										
Yes	9%	11%	6%	10%	19%	5%	4%	3%	-	12%
No	90%	88%	94%	90%	78%	95%	96%	95%	100%	86%
Don't know	1%	2%	-	-	3%	-	-	3%	-	2%

Tobacco use

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Tobacco use										
Yes	15%	18%	10%	22%	16%	16%	15%	-	-	21%
No	85%	82%	90%	78%	84%	84%	85%	100%	100%	79%
Don't know	-	-	-	-	-	-	-	-	-	-

Unsafe sex

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Unsafe sex										
Yes	4%	6%	-	6%	3%	3%	7%	-	-	5%
No	96%	94%	100%	94%	97%	97%	93%	100%	100%	95%
Don't know	-	-	-	-	-	-	-	-	-	-

HOW PREPARED DO YOU THINK SUMMIT COUNTY IS TO RESPOND TO A POTENTIAL EMERGENCY SITUATION, SUCH AS A WILDFIRE OR OTHER NATURAL DISASTER?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	<i>Healthy Habits</i>	<i>Unhealthy habits</i>
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
How prepared do you think Summit County is to respond to ...										
Very prepared	37%	44%	23%	43%	40%	20%	33%	59%	35%	37%
Somewhat prepared	55%	49%	64%	57%	48%	64%	56%	36%	58%	53%
Not at all prepared	5%	4%	8%	-	3%	13%	7%	-	6%	5%
Don't know	4%	3%	5%	-	9%	3%	4%	5%	1%	5%

PRIOR TO THIS SURVEY, HAD YOU HEARD OF THE EMERGENCY ALERT SYSTEM, SC ALERT?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	<i>Healthy Habits</i>	<i>Unhealthy habits</i>
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Prior to this survey, had you heard of the emergency aler...										
Yes	72%	70%	74%	65%	67%	84%	59%	74%	72%	72%
No	27%	29%	25%	35%	33%	14%	37%	23%	26%	28%
Don't know	1%	1%	1%	-	-	1%	4%	3%	3%	1%

ARE YOU CURRENTLY REGISTERED FOR SC ALERT?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	<i>Healthy Habits</i>	<i>Unhealthy habits</i>
Base										
<i>Unweighted</i>	<i>202</i>	<i>78</i>	<i>124</i>	<i>13</i>	<i>28</i>	<i>48</i>	<i>56</i>	<i>55</i>	<i>66</i>	<i>136</i>
<i>Weighted</i>	<i>194</i>	<i>120</i>	<i>74</i>	<i>44</i>	<i>39</i>	<i>64</i>	<i>16</i>	<i>29</i>	<i>56</i>	<i>138</i>
Are you currently registered for SC Alert?										
Yes	58%	58%	57%	57%	72%	59%	25%	52%	59%	57%
No	30%	31%	30%	30%	26%	30%	50%	31%	30%	30%
Don't know	12%	11%	14%	14%	3%	11%	25%	17%	11%	12%

DEMOGRAPHICS

WHAT IS YOUR ZIP CODE?

Zip Code	Percent of Respondents
80424	30%
80435	29%
80443	12%
80497	2%
80498	23%
81620	1%

WHAT IS YOUR GENDER?

	Total	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
Base										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Gender										
Male	63%	100%	-	47%	62%	47%	100%	100%	55%	66%
Female	37%	-	100%	53%	38%	53%	-	-	45%	34%

IN WHAT YEAR WERE YOU BORN? (CONVERTED TO AGE)

	<i>Total</i>	Gender		Age Groups					Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy Habits
<i>Base</i>										
<i>Unweighted</i>	270	110	160	20	40	58	74	78	83	187
<i>Weighted</i>	268	170	98	68	58	76	27	39	76	192
Age Groups										
18-34	25%	19%	37%	100%	-	-	-	-	26%	25%
35-44	22%	21%	22%	-	100%	-	-	-	20%	22%
45-54	28%	21%	41%	-	-	100%	-	-	29%	28%
55-64	10%	16%	-	-	-	-	100%	-	9%	10%
65+	15%	23%	-	-	-	-	-	100%	16%	14%

INCLUDING YOURSELF, HOW MANY ADULTS AND CHILDREN LIVE IN YOUR HOUSEHOLD?

Adults	Percent of Respondents
1	24%
2	64%
3	9%
4	2%
5	1%
Children	
0	72%
1	13%
2	12%
3	2%
4	1%

WHAT IS YOUR CURRENT MARITAL STATUS?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
What is your current marital status?										
Married	60%	53%	73%	26%	74%	74%	56%	72%	71%	56%
Divorced	5%	8%	1%	-	5%	3%	15%	13%	5%	5%
Separated	-	-	-	-	-	-	-	-	-	-
Widowed	1%	2%	-	-	-	-	7%	5%	1%	2%
Living with a partner	1%	1%	1%	-	-	4%	-	-	-	2%
Single	32%	36%	25%	74%	21%	20%	22%	10%	23%	36%
Refused	-	-	-	-	-	-	-	-	-	-

WHICH RACIAL OR ETHNIC GROUP BEST DESCRIBES YOU?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		<i>Male</i>	<i>Female</i>	<i>18-34</i>	<i>35-44</i>	<i>45-54</i>	<i>55-64</i>	<i>65+</i>	<i>Healthy Habits</i>	<i>Unhealthy habits</i>
<i>Base</i>										
<i>Unweighted</i>	<i>273</i>	<i>111</i>	<i>162</i>	<i>20</i>	<i>40</i>	<i>58</i>	<i>74</i>	<i>78</i>	<i>85</i>	<i>188</i>
<i>Weighted</i>	<i>271</i>	<i>171</i>	<i>100</i>	<i>68</i>	<i>58</i>	<i>76</i>	<i>27</i>	<i>39</i>	<i>78</i>	<i>193</i>
Which racial or ethnic group best describes you?										
African American / Black	<i>1%</i>	-	4%	4%	-	1%	-	-	1%	2%
Asian / Asian American	-	-	-	-	-	-	-	-	-	-
Hispanic / Latino	<i>2%</i>	-	5%	4%	3%	-	-	-	4%	1%
Native American	<i>0%</i>	-	1%	-	2%	-	-	-	-	1%
White	<i>94%</i>	99%	87%	91%	95%	96%	96%	97%	90%	96%
Multi-racial	-	-	-	-	-	-	-	-	-	-
Other	-	-	-	-	-	-	-	-	-	-
Refused	<i>2%</i>	1%	3%	-	-	3%	4%	3%	5%	1%

WHICH CATEGORY INCLUDES YOUR ANNUAL HOUSEHOLD INCOME?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Which category includes your annual household income?										
\$0 to \$29,999	14%	12%	16%	35%	5%	12%	-	3%	13%	14%
\$30,000 to \$49,999	17%	16%	19%	25%	29%	12%	4%	5%	5%	22%
\$50,000 to \$74,999	16%	18%	14%	21%	14%	13%	26%	13%	18%	16%
\$75,000 to \$99,999	15%	14%	17%	9%	10%	18%	11%	28%	18%	14%
\$100,000 to \$199,999	15%	12%	19%	10%	17%	18%	15%	13%	18%	13%
\$200,000 or more	8%	11%	5%	-	14%	9%	15%	10%	8%	9%
Refused	15%	18%	10%	-	10%	17%	30%	28%	21%	12%

ARE YOU A VETERAN OR ACTIVE MILITARY?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Are you a veteran or active military?										
Yes, veteran	11%	18%	1%	-	5%	3%	26%	46%	13%	11%
Yes, active	3%	4%	1%	6%	5%	-	-	3%	6%	2%
No	86%	78%	98%	94%	90%	97%	74%	51%	81%	88%
Refused	-	-	-	-	-	-	-	-	-	-

ARE YOU CURRENTLY EMPLOYED?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	273	111	162	20	40	58	74	78	85	188
<i>Weighted</i>	271	171	100	68	58	76	27	39	78	193
Are you currently employed?										
Yes	73%	67%	85%	85%	79%	84%	81%	21%	78%	72%
No	26%	33%	15%	15%	21%	16%	19%	77%	22%	28%
Refused	0%	1%	-	-	-	-	-	3%	-	1%

ARE YOU EMPLOYED FULL-TIME OR PART-TIME?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	169	65	104	17	32	50	57	12	51	118
<i>Weighted</i>	199	114	85	58	46	64	22	8	61	138
Are you employed full-time or part-time?										
Full-time	84%	87%	81%	83%	89%	89%	73%	63%	82%	86%
Part-time	15%	12%	19%	17%	11%	11%	23%	38%	16%	14%
Refused	-	-	-	-	-	-	-	-	-	-
Other	1%	1%	-	-	-	-	5%	-	2%	-

OTHER

⇒ SEASONAL

WHICH IS YOUR CURRENT JOB STATUS?

	<i>Total</i>	Gender		Age Groups					Healthy Habits	
		Male	Female	18-34	35-44	45-54	55-64	65+	Healthy Habits	Unhealthy habits
<i>Base</i>										
<i>Unweighted</i>	103	45	58	3	8	8	17	65	34	69
<i>Weighted</i>	71	56	15	10	12	12	5	30	17	54
Which is your current job status?										
Retired	54%	63%	20%	-	17%	25%	40%	100%	82%	44%
Homemaker	15%	4%	60%	60%	25%	17%	-	-	6%	19%
Student	-	-	-	-	-	-	-	-	-	-
Unemployed but looking for work	20%	21%	13%	-	58%	42%	40%	-	6%	24%
Unemployed and not looking for work	8%	11%	-	40%	-	17%	-	-	-	11%
Refused	1%	2%	-	-	-	-	20%	-	-	2%
Other	1%	-	7%	-	-	-	-	-	6%	-

OTHER

- ⇒ I'M TRYING TO START A CONSULTING BUSINESS
- ⇒ I AM A SEASONAL WORKER

SPANISH-LANGUAGE SURVEYS

OVERVIEW

The following pages contain detailed analysis tables for each of the questions asked on the survey. In each table, the row heading contains all of the answers given by respondents to the question. The column heading contains each of the various subpopulations being examined (e.g. telephone vs. paper surveys). The distribution of answers to each question is shown in each vertical column. Each analysis cell contains the percentage of respondents who gave each answer.

HEALTH CARE ASPECTS

HOW WOULD YOU RATE YOUR QUALITY OF LIFE IN SUMMIT COUNTY?

	Survey Version	
	Pub Telephone	Sp Paper
Base		
Unweighted	273	74
Weighted	271	74
How would you rate your quality of life in Summit County?		
Very Good	66%	24%
Good	31%	50%
Fair	2%	23%
Bad	-	1%
Very Bad	-	1%
Don't Know	-	-

COMPARED TO OTHER COMMUNITIES YOU'RE FAMILIAR WITH, HOW WOULD YOU RATE THE FOLLOWING ASPECTS OF HEALTH CARE IN SUMMIT COUNTY?

AVAILABILITY

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	77
<i>Weighted</i>	271	77
Alternative health care options		
Excellent	28%	42%
Adequate	46%	43%
Poor	10%	10%
Don't Know	15%	5%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	75
<i>Weighted</i>	271	75
Health care options for non-routine/specialized illnesses		
Excellent	15%	31%
Adequate	45%	51%
Poor	26%	12%
Don't Know	14%	7%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Health care options for routine illnesses / medical conditions		
Excellent	42%	35%
Adequate	47%	55%
Poor	9%	5%
Don't Know	1%	4%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Information about health and wellness		
Excellent	30%	42%
Adequate	57%	46%
Poor	9%	9%
Don't Know	4%	3%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	75
<i>Weighted</i>	271	75
Low-cost health care options		
Excellent	17%	35%
Adequate	44%	40%
Poor	27%	21%
Don't Know	13%	4%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	19
<i>Weighted</i>	271	19
Pediatric care services		
Excellent	15%	16%
Adequate	30%	32%
Poor	14%	37%
Don't Know	40%	16%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	72
<i>Weighted</i>	271	72
Preventive health care services		
Excellent	31%	39%
Adequate	51%	43%
Poor	7%	8%
Don't Know	11%	10%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Providers that take your insurance		
Excellent	35%	31%
Adequate	47%	45%
Poor	11%	12%
Don't Know	7%	12%

QUALITY

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	75
<i>Weighted</i>	271	75
Alternative health care options		
Excellent	21%	36%
Adequate	45%	48%
Poor	10%	11%
Don't Know	23%	5%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Health care options for non-routine/specialized illnesses		
Excellent	22%	30%
Adequate	39%	47%
Poor	23%	15%
Don't Know	15%	8%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	72
<i>Weighted</i>	271	72
Health care options for routine illnesses / medical conditions		
Excellent	38%	35%
Adequate	53%	51%
Poor	5%	8%
Don't Know	4%	6%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Information about health and wellness		
Excellent	34%	39%
Adequate	53%	50%
Poor	9%	7%
Don't Know	4%	4%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	72
<i>Weighted</i>	271	72
Low-cost health care options		
Excellent	16%	33%
Adequate	35%	40%
Poor	26%	21%
Don't Know	23%	6%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	18
<i>Weighted</i>	271	18
Pediatric care services		
Excellent	15%	17%
Adequate	37%	33%
Poor	8%	39%
Don't Know	41%	11%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	72
<i>Weighted</i>	271	72
Preventive health care services		
Excellent	30%	39%
Adequate	55%	38%
Poor	7%	11%
Don't Know	8%	13%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	70
<i>Weighted</i>	271	70
Providers that take your insurance		
Excellent	34%	34%
Adequate	46%	44%
Poor	11%	10%
Don't Know	9%	11%

HEALTH CARE ACCESS

HOW WOULD YOU RATE YOUR AWARENESS OF THE LOCAL HEALTH CARE RESOURCES AVAILABLE IN SUMMIT COUNTY?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
How would you rate your awareness of the local health car...		
Very High	24%	18%
High	27%	28%
Moderate	40%	43%
Low	6%	7%
Very Low	3%	4%

WHICH OF THE FOLLOWING DESCRIBE YOUR CURRENT HEALTH INSURANCE FOR YOU AND YOUR FAMILY?

	Survey Version	
	Pub Telephone	Sp Paper
Base		
Unweighted	273	77
Weighted	271	77
Which of the following describe your current health insur...		
No Insurance (you pay cash)	16%	65%
Health Insurance (through employer)	44%	10%
Health Insurance (self-insured)	25%	1%
Medicaid	1%	26%
Medicare	10%	6%
Medicare Supplement	7%	1%
Veteran's Benefits	2%	-
CHP+	1%	12%
Other	2%	1%

OTHER (WHAT KIND OF INSURANCE?)

- ⇒ CLINICA COMUNITARIO
- ⇒ MI ESPOSO YO NO TENEMOS SOLO LOS NINOS
- ⇒ NENG UNO
- ⇒ NINGUNO
- ⇒ NO TENGO UNGUNO
- ⇒ SIGNA

WHICH OF THE FOLLOWING STATEMENTS IS TRUE ABOUT YOUR EMPLOYER'S HEALTH COVERAGE?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	22	58
<i>Weighted</i>	44	58
Which of the following statements is true about your empl...		
Employer offers it to some employees, but you're not eligible.	27%	12%
Employer offers it at a shared cost, but it's too expensive for you.	-	22%
Employer doesn't offer it to any employees.	41%	24%
You're self-employed.	18%	10%
You're not working right now.	14%	31%

IS YOUR HEALTH INSURANCE ADEQUATE FOR YOUR FAMILY'S NEEDS?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	251	60
<i>Weighted</i>	227	60
Is your health insurance adequate for your family's needs?		
Yes	86%	28%
No	14%	52%
Don't Know	0%	20%

WHAT IS INADEQUATE ABOUT YOUR HEALTH INSURANCE?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	<i>36</i>	<i>44</i>
<i>Weighted</i>	<i>31</i>	<i>44</i>
What is inadequate about your health insurance?		
Co-pay is too high	3%	43%
Deductible is too high	55%	23%
Doesn't cover all members of my family	-	43%
Doesn't cover alternative health services	-	20%
Doesn't cover dental	3%	25%
Doesn't cover hearing	-	18%
Doesn't cover mental health	-	20%
Doesn't cover preventative services	-	18%
Doesn't cover substance abuse	-	14%
Doesn't cover vision	-	20%
Excludes pre-existing conditions	13%	14%
Low total payment cap on treatments	-	18%
Monthly premium is too high	26%	14%
Only covers major/catastrophic injuries/illnesses	16%	11%
Other	29%	14%

OTHER (PLEASE SPECIFY)

- ⇒ I DONT HAVE AJOB
- ⇒ LOS SEGROS SON DEMASIADO CAROS
- ⇒ NO CUBRE NINGUNO
- ⇒ NO TENGO
- ⇒ NO TENGO
- ⇒ NO TENGO
- ⇒ NO TENGO SEGURO
- ⇒ NO TENGO SEGURO HUENO

HEALTH CARE LOCATION AND INFORMATION

IS THE DOCTOR YOU TYPICALLY GO TO LOCATED IN SUMMIT COUNTY?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	76
<i>Weighted</i>	271	76
Is the doctor you typically go to located in Summit County?		
Yes	78%	78%
No	18%	4%
Don't go to doctor	3%	9%
Don't know	0%	9%

THE LAST TIME YOU RECEIVED HEALTH CARE, DID YOU GO TO A PRIMARY CARE PROVIDER OR A SPECIALIST?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	71
<i>Weighted</i>	271	71
The last time you received health care, did you go to a p...		
Primary care provider (family doctor)	72%	73%
Specialist (cardiologist, oncologist, etc...)	27%	11%
Don't know	1%	15%

WHERE DID YOU GO TO RECEIVE THAT CARE?

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	69
<i>Weighted</i>	271	69
Where did you go to receive that care?		
Low-cost clinic	10%	80%
Family doctor's office	68%	9%
Emergency room	2%	1%
Hospital	8%	-
Alternative health provider	5%	1%
Other	6%	1%
Don't know	1%	7%

OTHER (PLEASE SPECIFY)

⇒ GINEOLOGOS

⇒ NO E RES V DO

DID YOU RECEIVE THIS CARE IN SUMMIT COUNTY OR OUT OF SUMMIT COUNTY?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	70
<i>Weighted</i>	271	70
Did you receive this care in Summit County or out of Summ...		
In Summit County	82%	81%
Out of Summit County	18%	9%
Don't know	-	10%

IS TRANSPORTATION AN OBSTACLE TO GETTING HEALTH CARE FOR YOU?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Is transportation an obstacle to getting health care for ...		
Yes	7%	30%
No	93%	70%

ADEQUACY OF SERVICES PROVIDED IN SUMMIT COUNTY

ARE YOU SATISFIED WITH THE QUALITY OF THE FOLLOWING HEALTH CARE SERVICES THAT YOU HAVE RECEIVED OR CAN RECEIVE IN SUMMIT COUNTY?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	76
<i>Weighted</i>	271	76
Alternative health care options		
Yes	51%	64%
No	8%	18%
Don't Know	41%	17%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Dentists		
Yes	79%	68%
No	8%	20%
Don't Know	13%	12%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	72
<i>Weighted</i>	271	72
Drug/alcohol treatment programs		
Yes	20%	46%
No	10%	17%
Don't Know	70%	38%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	72
<i>Weighted</i>	271	72
Emergency room services		
Yes	76%	57%
No	3%	24%
Don't Know	22%	19%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	71
<i>Weighted</i>	271	71
Family medicine physician		
Yes	79%	65%
No	8%	20%
Don't Know	14%	15%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Health service information sources		
Yes	62%	74%
No	10%	14%
Don't Know	27%	12%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Hospitals		
Yes	87%	59%
No	4%	23%
Don't Know	8%	18%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	73
<i>Weighted</i>	271	73
Mental health services		
Yes	30%	44%
No	10%	23%
Don't Know	61%	33%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	73
<i>Weighted</i>	271	73
Pediatric care services		
Yes	35%	56%
No	11%	21%
Don't Know	54%	23%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Specialty physicians		
Yes	56%	47%
No	22%	20%
Don't Know	22%	32%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Wellness programs		
Yes	55%	61%
No	11%	16%
Don't Know	34%	23%

ARE YOU SATISFIED WITH THE NUMBER OF CHOICES THAT YOU HAVE IN SUMMIT COUNTY FOR THE FOLLOWING HEALTH CARE SERVICES?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	71
<i>Weighted</i>	271	71
Alternative health care options		
Yes	53%	65%
No	12%	14%
Don't Know	35%	21%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Dentists		
Yes	89%	73%
No	4%	16%
Don't Know	7%	11%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	69
<i>Weighted</i>	271	69
Drug/alcohol treatment programs		
Yes	25%	48%
No	7%	20%
Don't Know	68%	32%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	68
<i>Weighted</i>	271	68
Emergency room services		
Yes	85%	62%
No	8%	22%
Don't Know	7%	16%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	72
<i>Weighted</i>	271	72
Family medicine physician		
Yes	73%	69%
No	17%	17%
Don't Know	10%	14%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	71
<i>Weighted</i>	271	71
Health service information sources		
Yes	56%	72%
No	13%	13%
Don't Know	30%	15%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	72
<i>Weighted</i>	271	72
Hospitals		
Yes	85%	72%
No	9%	15%
Don't Know	6%	13%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	70
<i>Weighted</i>	271	70
Mental health services		
Yes	32%	46%
No	11%	19%
Don't Know	56%	36%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	71
<i>Weighted</i>	271	71
Pediatric care services		
Yes	34%	65%
No	17%	17%
Don't Know	49%	18%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	71
<i>Weighted</i>	271	71
Specialty physicians		
Yes	56%	58%
No	29%	17%
Don't Know	15%	25%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	73
<i>Weighted</i>	271	73
Wellness programs		
Yes	56%	71%
No	10%	11%
Don't Know	33%	18%

IF YOU NEEDED THE FOLLOWING SERVICES, WOULD YOU BE MOST LIKELY TO OBTAIN THEM INSIDE OR OUTSIDE OF SUMMIT COUNTY?

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	67
<i>Weighted</i>	271	67
Alternative health care options		
Inside Summit County	65%	79%
Outside Summit County	17%	4%
Don't Know	18%	16%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	71
<i>Weighted</i>	271	71
Dentists		
Inside Summit County	93%	83%
Outside Summit County	6%	10%
Don't Know	1%	7%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	65
<i>Weighted</i>	271	65
Drug/alcohol treatment programs		
Inside Summit County	49%	65%
Outside Summit County	17%	14%
Don't Know	34%	22%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	70
<i>Weighted</i>	271	70
Emergency room services		
Inside Summit County	94%	81%
Outside Summit County	4%	7%
Don't Know	2%	11%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	67
<i>Weighted</i>	271	67
Family medicine physician		
Inside Summit County	81%	87%
Outside Summit County	17%	7%
Don't Know	2%	6%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	70
<i>Weighted</i>	271	70
Health service information sources		
Inside Summit County	78%	87%
Outside Summit County	9%	3%
Don't Know	13%	10%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	69
<i>Weighted</i>	271	69
Hospitals		
Inside Summit County	86%	80%
Outside Summit County	11%	10%
Don't Know	3%	10%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	68
<i>Weighted</i>	271	68
Mental health services		
Inside Summit County	57%	66%
Outside Summit County	19%	10%
Don't Know	24%	24%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	67
<i>Weighted</i>	271	67
Pediatric care services		
Inside Summit County	46%	78%
Outside Summit County	18%	10%
Don't Know	35%	12%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	69
<i>Weighted</i>	271	69
Specialty physicians		
Inside Summit County	50%	72%
Outside Summit County	42%	12%
Don't Know	8%	16%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	68
<i>Weighted</i>	271	68
Wellness programs		
Inside Summit County	77%	87%
Outside Summit County	7%	6%
Don't Know	16%	7%

DOES SUMMIT COUNTY DO ENOUGH TO PREVENT PROBLEMS IN THE FOLLOWING HEALTH-RELATED AREAS?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	75
<i>Weighted</i>	271	75
Clean air		
Yes	79%	83%
No	4%	3%
Don't know	17%	15%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	76
<i>Weighted</i>	271	76
Clean water		
Yes	82%	89%
No	5%	4%
Don't know	13%	7%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Infectious Disease Prevention		
Yes	40%	70%
No	6%	11%
Don't know	54%	19%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	72
<i>Weighted</i>	271	72
Injury Prevention		
Yes	67%	72%
No	10%	11%
Don't know	23%	17%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Mental Health and Substance Abuse		
Yes	36%	53%
No	19%	18%
Don't know	45%	30%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	71
<i>Weighted</i>	271	71
Obesity		
Yes	48%	59%
No	19%	15%
Don't know	33%	25%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	70
<i>Weighted</i>	271	70
Oral Health		
Yes	70%	64%
No	4%	11%
Don't know	26%	24%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	73
<i>Weighted</i>	271	73
Safe Food		
Yes	64%	73%
No	5%	8%
Don't know	31%	19%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	74
<i>Weighted</i>	271	74
Tobacco		
Yes	39%	53%
No	18%	18%
Don't know	42%	30%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	71
<i>Weighted</i>	271	71
Unintended Pregnancy		
Yes	25%	59%
No	16%	14%
Don't know	59%	27%

WHICH OF THE AREAS I JUST READ DO YOU THINK SHOULD BE THE TOP 3 PRIORITY AREAS FOR SUMMIT COUNTY TO IMPROVE IN THE NEXT FIVE YEARS?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	75
<i>Weighted</i>	271	75
Which of the areas I just read do you think should be the...		
Clean air	18%	44%
Clean water	30%	40%
Infectious Disease Prevention	23%	37%
Injury Prevention	25%	11%
Mental Health and Substance Abuse	58%	32%
Obesity	29%	48%
Oral Health	2%	11%
Safe Food	15%	32%
Tobacco	35%	20%
Unintended Pregnancy	31%	31%

ARE THERE ANY OTHER HEALTH-RELATED AREAS THAT YOU THINK SHOULD BE A HIGH PRIORITY FOR SUMMIT COUNTY TO IMPROVE IN THE NEXT FIVE YEARS?

- ⇒ ABUSO DE SUSTANCIAS PARA MENORES
- ⇒ AYUDA PARA LA SALUD DE NIÑOS
- ⇒ AYUDA PARA DIABÉTICOS
- ⇒ AYUDA PARA DIABÉTICOS
- ⇒ CLEAN WATER
- ⇒ DEREGULACIÓN. ATENCIÓN EN EL ABUSO DE MARIHUANA
- ⇒ I DON'T KNOW
- ⇒ I DON'T KNOW
- ⇒ JUNTAS PARA ALCOHÓLICOS ANÓNIMOS
- ⇒ MÁS ACCESO A CLÍNICAS DE BAJO COSTO. SEGUROS MEJORES Y MUCHO MÁS ECONÓMICOS.
- ⇒ MÁS INFORMACIONES EN LAS ESCUELAS SOBRE ENFERMEDADES VENEREAS. STDs
- ⇒ MÁS INFORMACIÓN ALIMENTICIA PARA REDUCIR LA OBESIDAD
- ⇒ NADA POR EL MOMENTO
- ⇒ NO
- ⇒ NO
- ⇒ NO
- ⇒ NO
- ⇒ NO LO SE
- ⇒ NO SE CREE QUE CON ESDS LAS MÁS IMPORTANTES
- ⇒ OBESIDAD, SALUD ORAL, COMIDA SEGURA
- ⇒ OTRAS OPCIONES DE SERVICIOS DE PEDIATRÍA
- ⇒ PARA LAS PERSONAS MAYORES DE 65 AÑOS
- ⇒ PEDIATRÍA
- ⇒ PEDIATRÍA
- ⇒ SALUD OCULAR
- ⇒ SI AYUDA PARA LA COMUNIDAD LATINA.
- ⇒ SI COMO PREVENIR EL CÁNCER, EL DE ALZHEIMER, LA DEMENTIA
- ⇒ YES

PERSONAL HEALTH RISKS

I'M GOING TO READ A LIST OF ITEMS ABOUT YOUR PERSONAL HEALTH. FOR EACH ONE, PLEASE TELL ME WHETHER OR NOT IT APPLIES TO YOU BY ANSWERING YES OR NO.

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	70
<i>Weighted</i>	271	70
Don't wash hands regularly		
Yes	9%	90%
No	91%	10%
Don't know	0%	-

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	68
<i>Weighted</i>	271	68
Don't vaccinate children		
Yes	7%	81%
No	77%	10%
Don't know	17%	9%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	66
<i>Weighted</i>	271	66
Don't receive regular preventative screenings		
Yes	24%	68%
No	76%	30%
Don't know	0%	2%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	65
<i>Weighted</i>	271	65
Don't wear a helmet		
Yes	18%	55%
No	79%	42%
Don't know	3%	3%

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	67
<i>Weighted</i>	271	67
Don't wear seat belt		
Yes	12%	88%
No	86%	12%
Don't know	2%	-

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	69
<i>Weighted</i>	271	69
Drinking and driving		
Yes	1%	20%
No	98%	78%
Don't know	1%	1%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	70
<i>Weighted</i>	271	70
Drug or alcohol abuse		
Yes	8%	13%
No	92%	84%
Don't know	0%	3%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	64
<i>Weighted</i>	271	64
Symptoms of depression or anxiety		
Yes	18%	31%
No	82%	63%
Don't know	0%	6%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	70
<i>Weighted</i>	271	70
Not enough exercise		
Yes	21%	56%
No	78%	40%
Don't know	1%	4%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	69
<i>Weighted</i>	271	69
Overweight		
Yes	13%	41%
No	86%	57%
Don't know	1%	3%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	69
<i>Weighted</i>	271	69
Unhealthy eating habits		
Yes	19%	59%
No	79%	30%
Don't know	2%	10%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	67
<i>Weighted</i>	271	67
Poor oral health		
Yes	9%	34%
No	90%	55%
Don't know	1%	10%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	73
<i>Weighted</i>	271	73
Tobacco use		
Yes	15%	14%
No	85%	85%
Don't know	-	1%

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	273	67
<i>Weighted</i>	271	67
Unsafe sex		
Yes	4%	19%
No	96%	78%
Don't know	-	3%

HOW PREPARED DO YOU THINK SUMMIT COUNTY IS TO RESPOND TO A POTENTIAL EMERGENCY SITUATION, SUCH AS A WILDFIRE OR OTHER NATURAL DISASTER?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	71
<i>Weighted</i>	271	71
How prepared do you think Summit County is to respond to ...		
Very prepared	37%	39%
Somewhat prepared	55%	25%
Not at all prepared	5%	13%
Don't know	4%	23%

PRIOR TO THIS SURVEY, HAD YOU HEARD OF THE EMERGENCY ALERT SYSTEM, SC ALERT?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	72
<i>Weighted</i>	271	72
Prior to this survey, had you heard of the emergency aler...		
Yes	72%	44%
No	27%	49%
Don't know	1%	7%

ARE YOU CURRENTLY REGISTERED FOR SC ALERT?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	202	72
<i>Weighted</i>	194	72
Are you currently registered for SC Alert?		
Yes	58%	28%
No	30%	57%
Don't know	12%	15%

DEMOGRAPHICS

WHAT IS YOUR ZIP CODE?

Zip Code	Percent of Respondents
80435	33%
80498	18%
80497	10%
80424	6%
80443	5%
Other/No Response	27%

WHAT IS YOUR GENDER?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	75
<i>Weighted</i>	271	75
Gender		
Male	63%	24%
Female	37%	76%

IN WHAT YEAR WERE YOU BORN? (CONVERTED TO AGE)

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	270	71
<i>Weighted</i>	268	71
Age Groups		
18-34	25%	45%
35-44	22%	32%
45-54	28%	11%
55-64	10%	10%
65+	15%	1%

INCLUDING YOURSELF, HOW MANY ADULTS AND CHILDREN LIVE IN YOUR HOUSEHOLD?

Adults	Percent of Respondents
1	14%
2	52%
3	14%
4	14%
5 or more	7%
Children	
0	19%
1	19%
2	39%
3	15%
4 or more	8%

WHAT IS YOUR CURRENT MARITAL STATUS?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	70
<i>Weighted</i>	271	70
What is your current marital status?		
Married	60%	53%
Divorced	5%	7%
Separated	-	20%
Widowed	1%	4%
Living with a partner	1%	16%
Single	32%	-
Refused	-	-

WHICH RACIAL OR ETHNIC GROUP BEST DESCRIBES YOU?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	75
<i>Weighted</i>	271	75
Which racial or ethnic group best describes you?		
African American / Black	1%	1%
Asian / Asian American	-	-
Hispanic / Latino	2%	97%
Native American	0%	-
White	94%	1%
Multi-racial	-	-
Other	-	-
Refused	2%	-

WHICH CATEGORY INCLUDES YOUR ANNUAL HOUSEHOLD INCOME?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	69
<i>Weighted</i>	271	69
Which category includes your annual household income?		
\$0 to \$29,999	14%	80%
\$30,000 to \$49,999	17%	16%
\$50,000 to \$74,999	16%	3%
\$75,000 to \$99,999	15%	1%
\$100,000 to \$199,999	15%	-
\$200,000 or more	8%	-
Refused	15%	-

ARE YOU A VETERAN OR ACTIVE MILITARY?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	72
<i>Weighted</i>	271	72
Are you a veteran or active military?		
Yes, veteran	11%	-
Yes, active	3%	1%
No	86%	99%
Refused	-	-

ARE YOU CURRENTLY EMPLOYED?

	Survey Version	
	Pub Telephone	Sp Paper
<i>Base</i>		
<i>Unweighted</i>	273	73
<i>Weighted</i>	271	73
Are you currently employed?		
Yes	73%	53%
No	26%	47%
Refused	0%	-

ARE YOU EMPLOYED FULL-TIME OR PART-TIME?

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	169	48
<i>Weighted</i>	199	48
Are you employed full-time or part-time?		
Full-time	84%	54%
Part-time	15%	38%
Refused	-	6%
Other	1%	2%

WHICH IS YOUR CURRENT JOB STATUS?

	Survey Version	
	Pub Telephone	Sp Paper
Base		
<i>Unweighted</i>	103	40
<i>Weighted</i>	71	40
Which is your current job status?		
Retired	54%	-
Homemaker	15%	63%
Student	-	3%
Unemployed but looking for work	20%	30%
Unemployed and not looking for work	8%	-
Refused	1%	5%
Other	1%	-

KEY INFORMANT SURVEYS

The following pages contain detailed analysis tables for each of the questions asked on the survey, as well as verbatim responses to the survey's open-ended questions. Note that all verbatim responses have been reported with no changes to grammar or content.

INTERPRETATION

- For the four “grid” questions included in the survey, the column heading contains all of the answers given by respondents to the question. The row heading contains each of the various sub-questions asked. Therefore, the distribution of answers to each question is shown in each horizontal row.
- For the remaining questions, only a single column of results is provided. In this case, the row headings include the answers given by respondents to the question.
- Each analysis cell contains both the raw number of respondents who gave each answer, as well as the percentage of respondents who gave each answer.

HEALTH CARE RATINGS

COMPARED TO OTHER COMMUNITIES YOU'RE FAMILIAR WITH, HOW WOULD YOU RATE THE FOLLOWING ASPECTS OF HEALTH CARE IN SUMMIT COUNTY?

AVAILABILITY

	Total				
		Excellent	Adequate	Poor	Don't Know
<i>Base</i>	168	50	76	40	2
alternative health care options	14 8%	6 12%	7 9%	1 3%	- -
health care options for non-routine/specialized illnesses	14 8%	- -	4 5%	10 25%	- -
health care options for routine illnesses / medical conditions	14 8%	6 12%	7 9%	1 3%	- -
information about health and wellness	14 8%	4 8%	9 12%	1 3%	- -
low-cost health care options	14 8%	3 6%	7 9%	4 10%	- -
pediatric care services	14 8%	1 2%	4 5%	9 23%	- -
preventive health care services	14 8%	3 6%	10 13%	1 3%	- -
mental health services	14 8%	2 4%	7 9%	4 10%	1 50%
treatment programs for drug/alcohol abuse	14 8%	1 2%	4 5%	8 20%	1 50%
providers that take your insurance	14 8%	4 8%	9 12%	1 3%	- -
emergency care	14 8%	12 24%	2 3%	- -	- -
dental care services	14 8%	8 16%	6 8%	- -	- -

QUALITY

	<i>Total</i>				
		<i>Excellent</i>	<i>Adequate</i>	<i>Poor</i>	<i>Don't Know</i>
<i>Base</i>	168	58	66	23	21
alternative health care options	14 8%	6 10%	5 8%	- -	3 14%
health care options for non-routine/specialized illnesses	14 8%	2 3%	5 8%	5 22%	2 10%
health care options for routine illnesses / medical conditions	14 8%	6 10%	6 9%	1 4%	1 5%
information about health and wellness	14 8%	4 7%	8 12%	- -	2 10%
low-cost health care options	14 8%	8 14%	2 3%	3 13%	1 5%
pediatric care services	14 8%	1 2%	5 8%	7 30%	1 5%
preventive health care services	14 8%	5 9%	6 9%	1 4%	2 10%
mental health services	14 8%	1 2%	10 15%	1 4%	2 10%
treatment programs for drug/alcohol abuse	14 8%	- -	8 12%	3 13%	3 14%
providers that take your insurance	14 8%	7 12%	4 6%	1 4%	2 10%
emergency care	14 8%	10 17%	3 5%	- -	1 5%
dental care services	14 8%	8 14%	4 6%	1 4%	1 5%

HOW WOULD YOU RATE SUMMIT COUNTY'S HEALTH CARE SYSTEM AT MEETING THE NEEDS OF EACH OF THE FOLLOWING GROUPS?

	<i>Total</i>	Excellent	Adequate	Poor	Don't Know
<i>Base</i>	<i>112</i>	<i>34</i>	<i>50</i>	<i>26</i>	<i>2</i>
Infants and toddlers (ages 0-4)	<i>14</i> <i>13%</i>	3 9%	2 4%	8 31%	1 50%
School children (ages 5-17)	<i>14</i> <i>13%</i>	4 12%	5 10%	4 15%	1 50%
Young adults (ages 18-34)	<i>14</i> <i>13%</i>	5 15%	8 16%	1 4%	- -
Adults (age 35-64)	<i>14</i> <i>13%</i>	7 21%	5 10%	2 8%	- -
Seniors (ages 65+)	<i>14</i> <i>13%</i>	2 6%	8 16%	4 15%	- -
Low-income residents	<i>14</i> <i>13%</i>	3 9%	8 16%	3 12%	- -
Non-English-speaking residents	<i>14</i> <i>13%</i>	1 3%	9 18%	4 15%	- -
Visitors to the county	<i>14</i> <i>13%</i>	9 26%	5 10%	- -	- -

HEALTH CARE ACCESS

IN YOUR OPINION, WHAT ARE SOME OF THE MOST PREVALENT BARRIERS TO OBTAINING HEALTH CARE IN SUMMIT COUNTY?

- > affordable cardio assessment
- > Cost, Awareness,
- > Costs. Many patients have very high deductables and refuse appropriate tests.
- > financial, small community, distance from Denver, transportation to Denver appts if non senior without caregiver,
- > Healthcare providers being able to stay in Summit County and make a living for their family.
- > In-network vs. out of network providers
- > lack of health insurance, cost of care at private providers and hospital, language barriers, support and education groups for specific health issues (nutrition, chronic illnesses, mental health, grief and loss)
- > Lack of insurance, poverty, not enough specialty care/surgical services for people without insurance.
- > lack of internal medicine and pediatrics
- > Language spoken, insurance (underinsured)
- > Loss of only Internal Medicine physician
- > poverty, literacy, cultural sensitivity, cost, lack of insurance, inadequate numbers of medical/clinical personnel in many areas
- > Uninformed consumers.

WHAT TYPES OF MEDICAL TREATMENTS, SURGERIES OR SPECIALTY AREAS ARE SUMMIT COUNTY RESIDENTS LEAVING SUMMIT COUNTY TO RECEIVE?

- > all internal medicine specialties.
- > cancer
- > cancer care, geriatric services, rehab services, hospice care, neurosurgery and most specialty surgery, some elective orthopedic surgery, pediatric care, robotic surgery, radiation and chemotherapy,
- > ENT, hip replacement, cardiac intervention
- > Gastro, neuro, senior citizen care, most specialties other than ortho
- > Heart surgery, neurology consults, GI consults, Endocrine consults, Nephrology, Ophthalmology, ENT
- > heart, brain, some total joints,
- > internist, pediatric care, mental health and substance abuse treatment and follow up, cancer treatment, skilled nursing, assisted living, respite
- > Mammograms, heart tests, invasive exams - procedures that can be conducted in provider offices/facilities on the front range that require a much more costly visit to the local hospital or surgery center in Summit County.
- > Mohs surgeries, internal medicine, GI issues
- > Oncology diagnosis and treatment, urology, diagnostic imaging due to cost
- > Oncology, Total Hip Replacements and Hip/Orthopaedic needs, Pediatric care, Neurology, Neuropsychologists, TBI specialists, and cheaper care/more economical care in Denver overall.
- > Pediatric Care, specialty care
- > Pediatrics, geriatrics, in patient mental health and substance abuse

IN YOUR OPINION, WHAT CAN BE DONE TO ELIMINATE THE HEALTH CARE INADEQUACIES THAT EXIST BETWEEN DIFFERENT GROUPS IN SUMMIT COUNTY?

- > Better education of the resources available in Summit County and use of less expensive alternatives outside of the County for non-emergency procedures.
- > Better insurance system and solution to immigration problem
- > Better relationships between providers, access to more specialty care, more insurance options for employers
- > community care clinic expansion as a FQHC-LA, attract one or more pediatrician, one or more internist/geriatrician, establish senior living options, eliminate cultural/language barriers especially for undocumented
- > Equal access to specialty services (very unlikely, however, more specialists willing to practice in the community (internists, pediatricians, neurologists, etc.)
- > Health Exchanges
- > Long term: employ new, low-cost, POC assessment technologies.
- > Medical services clearing house which reaches out to the community with open houses, social media, etc.
- > More partnerships
- > not sure what you are referring to, but competition in healthcare is counterproductive.
- > recruit internal medicine and pediatrics physicians to the county
- > Telemedicine consults could help. Reimbursements to specialists are no longer adequate to encourage physicians to travel to Summit County for clinics. Overhead is too high.
- > Work together to serve our community as a whole.
- > Work together to support the system and the patient needs. Develop county wide sliding scale,

IF YOU WERE IN CHARGE OF IMPROVING THE OVERALL HEALTH OF SUMMIT COUNTY RESIDENTS, WHAT WOULD BE YOUR TOP PRIORITY AND WHY?

- > Access to specialty services/surgical services for low income, uninsured or underinsured residents. More pediatric services for the entire community. Long term care options for seniors and chronically ill people.
- > Better Pediatric Care and options for pediatric care
- > cardiovascular awareness - number one killer and disabler
- > Develop care navigator system so people can get help with insurance questions, how to get the services needed.
- > expansion of the community care clinic to accept all Medicare, Medicaid, and privately insured patients into the integrated medical home model
- > Increased attention to health and wellness.
- > Injury prevention, major cause of hospital admission
- > Insurance/cost
- > More multi-lingual providers
- > Move from sick care system to healthcare system via partnerships that protect patients' medical home without an expectation that they change providers in order to participate in certain programs.
- > Nutritional counseling, mental health and substance abuse counseling.
- > same as prior
- > Unrealistically, implement a single payor system. Realistically, force the ski resorts to implement skier safety training in hopes of reducing the number of injuries but that will never happen, mostly because it's happening to non residents.
- > We need a much better insurance system that incentivises routine health checks and lowers the deductibles that are a barrier to patients access to needed care.

PRIORITIES

PLEASE PRIORITIZE THIS LIST BASED ON YOUR OWN PERSPECTIVE WITH "1" MEANING THE AREA THAT SHOULD BE THE HIGHEST PRIORITY AND "10" BEING THE AREA THAT SHOULD BE THE LOWEST PRIORITY.

	<i>Total</i>	1	2	3	4	5	6	7	8	9	10
<i>Base</i>	140	17	13	13	13	15	15	14	13	13	14
Clean Air	14 10%	1 6%	- -	1 8%	1 8%	2 13%	- -	- -	2 15%	3 23%	4 29%
Clean Water	14 10%	1 6%	1 8%	- -	2 15%	1 7%	- -	1 7%	2 15%	5 38%	1 7%
Infectious Disease Prevention	14 10%	1 6%	1 8%	- -	- -	5 33%	1 7%	2 14%	3 23%	1 8%	- -
Injury Prevention	14 10%	3 18%	1 8%	1 8%	1 8%	1 7%	2 13%	- -	1 8%	2 15%	2 14%
Mental Health and Substance Abuse	14 10%	5 29%	3 23%	3 23%	- -	1 7%	- -	2 14%	- -	- -	- -
Obesity	14 10%	3 18%	5 38%	2 15%	1 8%	- -	1 7%	1 7%	1 8%	- -	- -
Oral Health	14 10%	- -	- -	3 23%	3 23%	1 7%	3 20%	2 14%	- -	- -	2 14%
Safe Food	14 10%	- -	1 8%	- -	2 15%	3 20%	3 20%	2 14%	1 8%	1 8%	1 7%
Tobacco	14 10%	3 18%	1 8%	1 8%	3 23%	- -	4 27%	- -	- -	1 8%	1 7%
Unintended Pregnancy	14 10%	- -	- -	2 15%	- -	1 7%	1 7%	4 29%	3 23%	- -	3 21%

ARE THERE ANY OTHER HEALTH-RELATED AREAS THAT YOU THINK SHOULD BE A HIGH PRIORITY FOR SUMMIT COUNTY TO IMPROVE IN THE NEXT FIVE YEARS?

- > Altitude related illnesses
- > cardiovascular #1
- > Costs of service especially in the hospital, outpatient diagnostics and emergency room
- > Injury Prevention and Mental Health/Substance Abuse
- > Obesity means improving exercise and nutrition to me. Improving these 2 things will help with many chronic illnesses and may be the most important public health issue.
- > community sustainable agriculture, licensing of tobacco retailers, control recreational use of drugs, including pot
- > Traumatic Brain Injury
- > We need to support an assisted living facility to avoid losing residents to the front range.

AMONG RESPONDENTS TO THE PUBLIC SURVEY, MENTAL HEALTH AND SUBSTANCE ABUSE WERE IDENTIFIED AS TOP PRIORITIES BY OVER HALF OF RESPONDENTS. DO YOU AGREE WITH THIS?

<i>Base</i>	<i>14</i>
Among respondents to the public survey, mental health and...	
Yes	13 93%
No	1 7%

WHY?

- > Because of the drain on public resources and the impact on residents well being.
- > Could be 1 or 2.
- > Has a significant impact on family, friends and productivity of many people that interact with abusers.
- > High altitude communities have the highest suicide rates and substance abuse is also high
- > In our area it is hard to make a living during "mud season" and this is when we see more mental health and substance abuse.
- > It's a large need and effects many other areas of a person's life.
- > summit county has a disproportionate percentage of people with addiction issues.
- > Survey results from high school students show high number of kids thinking about suicide and being depressed. High cost of living, resort enviroment, access to drugs is easier than alcohol equal problems with depression and substance abuse
- > this is a significant concern, high levels of stress in our society associated with self medication with drugs, alcohol, tobacco
- > This is a significant issue for people in our community and there are not enough services for all levels of issues, particularly psychiatry and intensive drug and alcohol treatment.

WHY NOT?

- > small percent of population

AMONG RESPONDENTS TO THE PUBLIC SURVEY, TOBACCO WAS IDENTIFIED AS A TOP PRIORITY BY ROUGHLY ONE-THIRD OF RESPONDENTS. DO YOU AGREE WITH THIS?

Base	13
Among respondents to the public survey, tobacco was ident...	
Yes	8 62%
No	5 38%

WHY?

- > It should be a banned drug. Illegal to use or be sold. It leads to serious health issues that others have to bear the burden of paying for the associated and avoidable treatments.
- > major contributor to many illnesses to user and others second hand
- > Still problem with high school and twenty somethings
- > this is the single greatest cause of mortality and morbidity in our society (the other two main causes are bad diet and sedetary life style)
- > tobacco is a top killer and, clearly preventable.
- > Tobacco is an ongoing problem and new products make it harder to know when underage kids are using tobacco (school, sports etc.) Nicotine is bad for the body.

WHY NOT?

- > The campaign about the dangers of tobacco use is widespread. The county has taken steps to protect people adequately from second hand smoke, individuals need to take personal responsibility for their decision to use tobacco and their poor health outcomes should not be a burden on the rest of society.
- > I don't think you are going to change this behavior. We have already gone to smoke free businesses and establishments.
- > Primary care providers are already addressing this regularly and programs are available - people have to want to make the change
- > I think that tobacco use is less prevalent than pot. I dont know the ratio.

AMONG RESPONDENTS TO THE PUBLIC SURVEY, UNINTENDED PREGNANCY WAS IDENTIFIED AS A TOP PRIORITY BY ROUGHLY ONE-THIRD OF RESPONDENTS. DO YOU AGREE WITH THIS?

<i>Base</i>	12
Among respondents to the public survey, unintended pregna...	
Yes	6 50%
No	6 50%

WHY?

- > has always been a problem and will always be a problem
- > poor education and availability of contraception are major concerns
- > sure, but I don't know the stats. people should have access to contraception and education on it
- > These situations affect not only the mother and father but oftentimes set up a difficult cycle for the newborn that may be born into poverty or a circumstance in which they are less likely to be successful.

WHY NOT?

- > I don't see this as a huge area of concern
- > Lets stop getting involved in other people's live with our narrow minded beliefs. Teach birthcontrol.
- > while unitended pregnancy is a problem (and especially to the individuals effected) it is not so much in Summit CO. We have many opportunites for access to prevetion methods, and for education.

RESPONDENT CHARACTERISTICS

HOW LONG HAVE YOU LIVED IN SUMMIT COUNTY?

<i>Base</i>	<i>11</i>
How long have you lived in Summit County (years)?	
Less than 5 years	- -
5-9 years	5 45%
10-14 years	3 27%
15-19 years	- -
20 years or more	3 27%

HOW LONG HAVE YOU WORKED IN YOUR CURRENT POSITION?

<i>Base</i>	<i>11</i>
How long have you worked in your current position (years)?	
Less than 5 years	4 36%
5-9 years	4 36%
10-14 years	1 9%
15-19 years	- -
20 years or more	2 18%

WHAT IS YOUR ROLE IN YOUR CURRENT POSITION?

- > CEO
- > Dentist
- > Direct patient care in acute care setting
- > Director Health and Human Service
- > director of hosp, ccc
- > Executive Director
- > manager
- > manager
- > physician
- > physician
- > President/CEO

HOW IS YOUR CURRENT ROLE RELATED TO HEALTH CARE IN SUMMIT COUNTY?

- > as a retired doc and deeply involved with hosp, ccc, public health, health policy, I am much involved in trying to work with others to find solutions to our problems.
- > CEO of county's largest primary care group
- > consumer, administrator
- > Dentist
- > Direct patient care
- > Funder of health care programs
- > Hospital Administrator
- > I am an MD
- > physician caring for patients
- > Provider
- > volunteer
- > Work with many organizations to assure access to health care, promote healthy life styles and protect the public health of the community

DO YOU HAVE ANY OTHER COMMENTS ABOUT HEALTH CARE PRIORITIES IN SUMMIT COUNTY?

- > Excellent survey format... thank you
- > injury prevention is important in Summit County due to skiing, biking, etc.
- > The county needs to support its residents by donating land to build an assisted living facility here in Summit County.
- > There is potential for significant care to the health care system in the next few years. Strong leadership and a shared vision for the community will be very important. Grass root solutions will be the most effective for the people in the community.
- > Would be nice if there were more options for drug and alcohol rehabilitation that is needed in our area or access for patients without resources.

APPENDIX B: RESEARCH INSTRUMENTS

PUBLIC SURVEY

SECTION 1: FILTER QUESTIONS/BACKGROUND

Good evening. My name is _____ and I'm calling on behalf of Summit County Public Health, and we would appreciate your help. We are conducting a survey of community health needs in Summit County that will take about 10 to 12 minutes. Your responses to the questions will be anonymous and will help Summit County gain valuable resident insights into the community's feelings and perceptions about health care in Summit County. May we begin the survey?

Great. I first need to ask a few questions to confirm that you're eligible for the survey

1. As a first question, are you 18 years old or older?

- Yes
- No [ASK FOR SOMEONE WHO IS 18 OR OLDER. IF NOT AVAILABLE, TERMINATE]

2. Which of the following best describes you?

- Full time Summit County resident
- Seasonal Summit County resident
- Second Home owner in Summit County – Not full time resident
- Other resident (*What kind?* _____)
- I live outside of Summit County [ABORT SURVEY]

Great, you're eligible for the survey. I'd like to start with the general survey.

[NOTE TO INTERVIEWERS: READ RESPONSES UNLESS SPECIFIED.
DO NOT READ "DON'T KNOW" OR "REFUSED" RESPONSES]

SECTION 2: HEALTH CARE ASPECTS

3. How would you rate your quality of life in Summit County?

- Very Good
- Good
- Fair
- Bad
- Very Bad
- Don't Know

4. Compared to other communities you're familiar with, how would you rate the following aspects of health care in Summit County? We'll ask first about the availability of several aspects, and then we'll ask about the quality of those same health care aspects. Please indicate whether each aspect in Summit County is excellent, adequate, or poor.

	Excellent	Adequate	Poor	Don't Know
Availability of... [RANDOM ORDER]				
alternative health care options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
health care options for non-routine/specialized illnesses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
health care options for routine illnesses / medical conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
information about health and wellness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
low-cost health care options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
pediatric care services				
preventive health care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
providers that take your insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of... [REPEAT ABOVE ORDER]				
alternative health care options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
health care options for non-routine/specialized illnesses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
health care options for routine illnesses / medical conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
information about health and wellness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
low-cost health care options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
pediatric care services				
preventive health care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
providers that take your insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 3: HEALTH CARE ACCESS

5. How would you rate your awareness of the local health care resources available in Summit County?

- Very High
- High
- Moderate
- Low
- Very Low

6. Which of the following describe your current health insurance for you and your family?

[MULTIPLE RESPONSE]

- No Insurance (you pay cash)
- Health Insurance (through employer)
- Health Insurance (self-insured)
- Medicaid
- Medicare
- Medicare Supplement
- Veteran's Benefits
- CHP+ ["CHILD HEALTH PLAN PLUS" IF NEEDED FOR CLARIFICATION]
- Other (*What kind of insurance?* _____)

7. [IF Q6 = NONE] Which of the following statements is true about your employer's health coverage?

- Employer offers it to some employees, but you're not eligible.
- Employer offers it at a shared cost, but it's too expensive for you.
- Employer doesn't offer it to any employees.
- You're self-employed.
- You're not working right now.

8. [IF Q6 ≠ NONE] Is your health insurance adequate for your family's needs?

- Yes
- No
- Don't Know

9. [IF Q8 = NO] What is inadequate about your health insurance? You can list all problems with it. [DO NOT READ CATEGORIES.]

- | | |
|--|--|
| <input type="checkbox"/> Co-pay is too high | <input type="checkbox"/> Doesn't cover substance abuse |
| <input type="checkbox"/> Deductible is too high | <input type="checkbox"/> Doesn't cover vision |
| <input type="checkbox"/> Doesn't cover all members of my family | <input type="checkbox"/> Excludes pre-existing conditions |
| <input type="checkbox"/> Doesn't cover alternative health services | <input type="checkbox"/> Low total payment cap on treatments |
| <input type="checkbox"/> Doesn't cover dental | <input type="checkbox"/> Monthly premium is too high |
| <input type="checkbox"/> Doesn't cover hearing | <input type="checkbox"/> Only covers major/catastrophic injuries/illnesses |
| <input type="checkbox"/> Doesn't cover mental health | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Doesn't cover preventative services | |

SECTION 4: HEALTH CARE LOCATION AND INFORMATION

10. Is the doctor you typically go to located in Summit County?
- Yes
 - No
 - Don't go to doctor
 - Don't know
11. The last time you received health care, did you go to a primary care provider or a specialist?
- Primary care provider (family doctor)
 - Specialist (cardiologist, oncologist, etc...)
 - Don't know
12. Where did you go to receive that care?
- Low-cost clinic
 - Family doctor's office
 - Emergency room
 - Hospital
 - Alternative health provider
 - Other _____
 - Don't know
13. Did you receive this care in Summit County or out of Summit County?
- In Summit County
 - Out of Summit County
 - Don't know
14. Is transportation an obstacle to getting health care for you?
- Yes
 - No

SECTION 5: ADEQUACY OF SERVICES PROVIDED IN SUMMIT COUNTY

The next three groups of questions are going to ask you about a number of health care services in Summit County. The first question will ask about the quality of these health care services, the second question will ask about the number of choices you have for these health services and the third question will ask whether you would obtain these services inside or outside of Summit County.

15. Are you satisfied with the **QUALITY** of the following health care services that you have received or can receive in Summit County? Please answer yes, no or don't know for each service.

[RANDOM ORDER]

	Yes	No	Don't Know
Alternative health care options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dentists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug/alcohol treatment programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency room services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family medicine physician	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health service information sources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospitals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pediatric care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specialty physicians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wellness programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16. Are you satisfied with the **NUMBER OF CHOICES** that you have in Summit County for the following health care services? Please answer yes, no or don't know for each service. **[REPEAT ABOVE ORDER]**

	Yes	No	Don't Know
Alternative health care options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dentists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug/alcohol treatment programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency room services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family medicine physician	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health service information sources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospitals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pediatric care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specialty physicians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wellness programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. If you needed the following services, would you be most likely to obtain them inside or outside of Summit County? **[REPEAT ABOVE ORDER]**

	Inside Summit County	Outside Summit County	Don't Know
Alternative health care options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dentists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug/alcohol treatment programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency room services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family medicine physician	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health service information sources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospitals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pediatric care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specialty physicians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wellness programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. Does Summit County do enough to prevent problems in the following health-related areas? Please answer yes, no or don't know for each area. [RANDOM ORDER]

	Yes	No	Don't Know
Clean air	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clean water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infectious Disease Prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Injury Prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health and Substance Abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obesity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safe Food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tobacco	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unintended Pregnancy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Which of the areas I just read do you think should be the Top 3 priority areas for Summit County to improve in the next five years? [REPEAT LIST AS NECESSARY. CHECK UP TO THREE.]

- Clean air
- Clean water
- Infectious Disease Prevention
- Injury Prevention
- Mental Health and Substance Abuse
- Obesity
- Oral Health
- Safe Food
- Tobacco
- Unintended Pregnancy

20. Are there any other health-related areas that you think should be a high priority for Summit County to improve in the next five years?

SECTION 6: PERSONAL HEALTH RISKS

21. I'm going to read a list of items about your personal health. For each one, please tell me whether or not it applies to you by answering yes or no. **[RANDOM ORDER]**

	Yes	No	Don't Know
Don't wash hands regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Don't vaccinate children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Don't receive regular preventative screenings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Don't wear a helmet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Don't wear seat belt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drinking and driving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug or alcohol abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Symptoms of depression or anxiety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not enough exercise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overweight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unhealthy eating habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poor oral health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tobacco use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsafe sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. How prepared do you think Summit County is to respond to a potential emergency situation, such as a wildfire or other natural disaster?

- Very prepared
- Somewhat prepared
- Not at all prepared
- Don't know

23. Prior to this survey, had you heard of the emergency alert system, SC Alert?

- Yes
- No
- Don't know

24. **[IF Q24 = YES]** Are you currently registered for SC Alert?

- Yes
- No
- Don't know

SECTION 7: DEMOGRAPHICS

These final questions are for categorization purposes only. This information is anonymous and will only be used in combination with other respondents.

25. What is your ZIP code? _____

26. What is your gender? [IF NOT OBVIOUS]

- Male
- Female

27. In what year were you born? _____

28. Including yourself, how many adults and children live in your household?

_____ adults
_____ children

29. What is your current marital status? [DO NOT READ CATEGORIES]

- Single
- Married
- Divorced
- Separated
- Widowed
- Living with a partner

30. Which racial or ethnic group best describes you? You can provide more than one if you like.
[DO NOT READ CATEGORIES]

- African American / Black
- Asian / Asian American
- Hispanic / Latino
- Native American
- White
- Multi-racial
- Other _____

31. Which category includes your annual household income?

- \$0 to \$29,999
- \$30,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 to \$199,999
- \$200,000 or more

32. Are you a veteran or active military?

- Yes, veteran
- Yes, active

No

33. Are you currently employed?

Yes

No

34. **[IF Q33= YES]** Are you employed full-time or part-time?

Full-time

Part-time

Other _____

35. **[IF Q33 = NO]** Which is your current job status? **[DO NOT READ CATEGORIES]**

Retired

Homemaker

Student

Unemployed but looking for work

Unemployed and not looking for work

Other _____

SECTION 8: CLOSING

36. Would you be willing to participate in a two-hour focus group where you would be paid \$60 to provide more in-depth opinions about topics addressed in this survey? If so, please give us your name and a telephone number where you can be reached. Participation is not guaranteed, but participants who register and attend will be offered the payment for their time. Please note that if you provide your contact information here, your survey responses remain confidential.

Name: _____

Phone: _____

Thank you very much for participating in this survey.

SPANISH-LANGUAGE SURVEY

SECCIÓN 1: ANTECEDENTES

El propósito de esta encuesta es evaluar las necesidades de salud en el Condado de Summit. Sus respuestas son anónimas y ayudará al Condado de Summit a obtener conocimientos valiosos sobre las percepciones y sentimientos de nuestra comunidad sobre el cuidado de la salud en el Condado de Summit.

1. ¿Tiene usted 18 años de edad o más?

- Sí
- No (*Gracias, pero sólo deseamos respuestas de personas que tienen 18 años o más*)

2. ¿Cuáles de las siguientes opciones lo describe a usted?

- Vivo en el Condado Summit todo el año
- Vivo en el Condado Summit según la estación
- Tengo una segunda casa en el Condado de Summit – no vivo aquí todo el año
- Otro tipo de residente (*¿Qué tipo? _____*)
- Vivo fuera del Condado Summit (*Gracias, pero sólo deseamos respuestas de personas que viven en el Condado Summit*)

SECCIÓN 2: ASPECTOS SOBRE EL CUIDADO DE LA SALUD

3. ¿Cómo evaluaría su calidad de vida en el Condado de Summit?

- Buenísima
- Buena
- Más o menos
- Mal
- Muy mala
- No sé

4. En comparación a otras comunidades que conoce, cómo evaluaría los siguientes aspectos sobre el cuidado de la salud en el Condado de Summit?

	Excelente	Adecuado	Pobre	No sé
Existencias de...				
opciones alternativas sobre el cuidado de salud	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
opciones para enfermedades que no son de rutina/enfermedades especializadas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

opciones de cuidado de salud para enfermedades que son de rutina/condiciones médicas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
información de salud y bienestar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
opciones de servicios de salud a bajo costo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
servicios de pediatría				
servicios de prevención	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
doctores que aceptan su seguro médico	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Calidad de...				
opciones alternativas para cuidado de la salud	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
opciones de cuidado de salud para enfermedades que no son de rutina/enfermedades especializadas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
opciones de cuidado de salud para enfermedades que son de rutina/condiciones médicas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
información de salud y bienestar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
opciones de cuidados de la salud a bajo costo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
servicios de pediatría				
servicios de prevención	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
doctores que aceptan su seguro médico	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECCIÓN 3: ACCESO AL CUIDADO DE LA SALUD

5. ¿Cómo evaluaría su conocimiento en cuanto a los recursos locales de cuidado de la salud disponibles en el Condado de Summit?

- Muy alto
- Alto
- Moderado
- Bajo
- Muy Bajo

6. ¿Cuáles de los siguientes describe su seguro médico actual para usted y su familia? Por favor escoja todos los que apliquen.

- No tengo seguro médico (pago en efectivo)
- Seguro médico (por medio de mi trabajo)
- Seguro médico (compro mi propio seguro)
- Medicaid
- Medicare
- Medicare Adicional
- Beneficios de veteranos
- CHP+

Otro (*¿Qué tipo de seguro?* _____)

7. Si **NO TIENE** seguro médico, ¿cuál de las siguientes frases es correcta acerca de la cobertura de salud de su empleador?

- Empleador ofrece seguro médico a algunos de los empleados, pero usted no es elegible.
- Empleador ofrece seguro médico con el gasto compartido, pero usted no puede pagar porque es muy caro.
- Empleador no ofrece seguro médico a ninguno de sus empleados.
- Usted tiene negocio propio.
- Usted no trabaja en este momento.

8. Si usted **TIENE** seguro médico, ¿es su seguro adecuado para su familia y usted?

- Sí
- No
- No sé

9. Si su respuesta a la pregunta anterior fue “no”, ¿porque su seguro médico no es adecuado?
Escoja todos que apliquen.

- | | |
|--|--|
| <input type="checkbox"/> Co-Pago es muy alto | <input type="checkbox"/> No cubre servicios de prevención |
| <input type="checkbox"/> El deducible es muy caro | <input type="checkbox"/> No cubre servicios de adicción a sustancias |
| <input type="checkbox"/> No cubre todos los miembros de mi familia | <input type="checkbox"/> No cubre servicios de visión |
| <input type="checkbox"/> No cubre servicios alternativos | <input type="checkbox"/> Excluye condiciones pre-existentes |
| <input type="checkbox"/> No cubre servicios dentales | <input type="checkbox"/> Límite bajo de pagos para tratamiento |
| <input type="checkbox"/> No cubre servicios auditivos | <input type="checkbox"/> Pago mensual es muy alto |
| <input type="checkbox"/> No cubre servicios de salud mental | <input type="checkbox"/> Sólo cubre enfermedades catastróficas |
| | <input type="checkbox"/> Otro _____ |

SECCION 4: INFORMACIÓN Y UBICACIÓN DE CUIDADO DE LA SALUD

10. ¿El doctor que usa normalmente está en el Condado de Summit?

- Sí
- No
- No visito el doctor
- No sé

11. ¿La última vez que visitó el doctor, fue al proveedor de atención general, o a un especialista?

- Proveedor de atención general (Doctor de familia)
- Especialista (cardiólogo, oncólogo, etc...)
- No sé

12. ¿Dónde recibió esta atención?

- Clínica de bajo costo
- Oficina de Proveedor de atención general

- Sala de emergencia
- Hospital
- Proveedor de servicios alternativos
- Otro _____
- No sé

13. ¿Recibió estos servicios en el Condado de Summit o fuera del Condado Summit?

- En el Condado de Summit
- Fuera del Condado de Summit
- No sé

14. ¿Es el transporte un obstáculo para usted para acceder a los servicios que usted necesita?

- Sí
- No

SECCIÓN 5: EFICACIA DE LOS SERVICIOS DADOS EN EL CONDADO DE SUMMIT

Los próximos tres grupos de preguntas se refieren a un número de servicios de cuidado en el Condado de Summit. El primer grupo se refiere a la calidad que tienen estos servicios, el segundo grupo se refiere a las diferentes opciones que tienen estos servicios, y el tercer grupo se refiere a si estos servicios se pueden obtener dentro o fuera del Condado de Summit.

15. ¿Está satisfecho con la CALIDAD de los siguientes servicios de cuidado de la salud que ha recibido o puede recibir en el Condado Summit? Por favor marque una respuesta para cada servicio.

	Sí	No	No sé
Opciones alternativas de salud	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dentistas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programas de tratamiento para adicción a alcohol o drogas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Servicios en la sala de emergencias	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doctor de familia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Información de servicios de salud	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospitales	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Servicios de salud mental	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Servicios de pediatría	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Especialistas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programas de bienestar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16. ¿Estás satisfecho con el NÚMERO DE OPCIONES que tiene usted en el Condado de Summit para los siguientes servicios de salud? Por favor marque una respuesta para cada servicio.

	Sí	No	No sé
Opciones alternativas de salud	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dentistas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programas de tratamiento para adicción a alcohol o drogas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Servicios en la sala de emergencia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doctor de familia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Información de servicios de salud	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospitales	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Servicios de salud mental	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Servicios de pediatría	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Especialistas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programas de bienestar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Si pudiese acceder a los siguientes servicios, elegiría usted acceder los servicios dentro o fuera del Condado de Summit? Por favor marque una respuesta para cada servicio.

	Dentro Summit	Fuera de Summit	No sé
Opciones alternativas de salud	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dentistas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programas de tratamiento para adicción a alcohol o drogas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Servicios en la sala de emergencias	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doctor de familia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Información de servicios de salud	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospitales	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Servicios de salud mental	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Servicios de pediatría	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Especialistas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Programas de bienestar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. ¿Díganos si el Condado de Summit hace suficiente para prevenir problemas relacionados con las siguientes áreas de salud? Por favor marque una respuesta para cada área.

	Sí	No	No sé
Aire limpio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agua limpia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevención de enfermedades infecciosas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevención de heridas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Salud mental o abuso de sustancias	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obesidad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Salud oral	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comida segura	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tabaco	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Embarazos no planeados	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. ¿Cuáles de estas opciones anteriores cree usted que deben ser las tres áreas de prioridad para mejorar en los próximos cinco años en el Condado de Summit? Escoja máximo tres.

- Aire limpio
- Agua limpia
- Prevención de enfermedades infecciosas
- Prevención de heridas
- Salud mental o abuso de sustancias
- Obesidad
- Salud oral
- Comida segura
- Tabaco
- Embarazos no planeados

20. ¿Hay otras áreas en la salud que cree que debería ser una prioridad para mejorar en los próximos cinco años en el Condado de Summit?

SECCIÓN 6: RIESGOS DE LA SALUD PERSONAL

21. A continuación encontrará una lista de artículos relacionados a su salud personal. Marque cada una si aplica a usted respondiendo “Sí” o “No”.

	Sí	No	No sé
No se lava las manos normalmente	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No vacuna a los niños	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No recibe sus exámenes regulares preventivos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No usa casco	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No usa cinturón de seguridad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conduce cuando bebe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Usa alcohol o drogas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tiene síntomas de depresión o ansiedad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No hace suficiente ejercicio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tiene sobrepeso	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No come saludable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Problemas con su salud oral	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Usa tabaco	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexo sin protección	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. ¿Qué tan preparado cree usted que está el Condado de Summit para responder a una emergencia grande como un fuego arrasador u otro desastre natural?

- Muy preparado
- Un poco preparado
- No preparado
- No sé

23. ¿Antes de esta encuesta, ha escuchado del sistema de alerta de emergencias, “SC Alert”?

- Sí
- No
- No sé

24. ¿Está usted registrado en este momento para “SC Alert”?

- Sí
- No
- No sé

SECCIÓN 7: DATOS DEMOGRÁFICOS

Estas preguntas finales son para fines de clasificación solamente. Esta información es anónima y solo será usada en combinación con otras personas que responden.

25. ¿Cuál es su código postal? _____

26. ¿Cuál es su género?

- Masculino
- Femenino

27. ¿En que año nació? _____

28. Incluyéndose a sí mismo, ¿Cuántos adultos y niños viven en su hogar?

____ Adultos
____ Niños

29. ¿Cuál es su estado civil actual?

- Casado
- Divorciado
- Separado
- Viudo
- Viviendo con su pareja

30. ¿Cuál grupo étnico o racial lo describe mejor a usted? Usted puede escoger más de uno si usted desea.

- Africano Americano / Negro
- Asiático / Asiático Americano
- Hispano / Latino
- Nativo Americano
- Blanco
- Multi-racial
- Otro: _____

31. ¿Qué categoría incluye su ingreso anual de su hogar?

- \$0 a \$29,999
- \$30,000 a \$49,999
- \$50,000 a \$74,999
- \$75,000 a \$99,999
- \$100,000 a \$199,999
- \$200,000 o más

32. ¿Es usted veterano o militar activo?

- Sí, veterano
- Sí, activo
- No

33. ¿Tiene trabajo actualmente?

- Sí
- No

34. ¿Si está empleado, es su empleo de tiempo completo o medio tiempo?

- Tiempo completo
- Medio tiempo
- Otro _____

35. Si usted **NO** está actualmente empleado, ¿Cuál es su estatus de trabajo actual?

- Retirado
- Ama de casa
- Estudiante
- Desempleado pero buscando trabajo
- Desempleado pero No buscando trabajo
- Otro _____

SECCIÓN 8: CIERRE

36. ¿Estaría usted dispuesto a participar en un grupo de enfoque el cual tendría una duración de dos horas donde le pagarían \$60 para dar opiniones más profundas acerca de los temas dirigidos en esta encuesta? Si está de acuerdo, por favor escriba su nombre y número de teléfono donde puede ser localizado. La participación no es garantizada, pero los participantes que se registren y atiendan se les ofrecerá el pago por su tiempo. Por favor tenga en cuenta que si usted da su información de contrato aquí, las respuestas de su encuesta permanecerán confidenciales.

Nombre: _____

Teléfono: _____

Muchas gracias por su participación en esta encuesta.

PUBLIC FOCUS GROUP

WELCOME & BACKGROUND (1 MINUTE)

Welcome. Thank you for making time to be here today. My name is _____ and I am with Corona Insights, a local market and demographic research firm. Our firm has been hired by Summit County Public Health to gather opinions about health care here in Summit County.

Before we get started, I'll give you an introduction about what we're going to do tonight and the reasons that we're doing it.

Summit County Public Health is interested in hearing from citizens like yourselves to assess your feelings, perceptions and knowledge of health care in Summit County. This focus group is part of a health needs assessment being conducted in Summit County to determine the current and future health needs of residents here. The feedback we get to night will be combined with other research including the survey that you responded to in order to create a long-term strategy for health care in Summit County.

LOGISTICS (1 MINUTE)

So that's the big picture. Now let's talk about how this process will work. We'll be here for about two hours. Please help yourself to refreshments if you haven't done so already. If you want to get up to get more to eat or drink, or go to the bathroom, feel free to do so. We do have people observing to take notes, and we are also audio taping and videotaping the session for reporting purposes. Your comments will be summarized and reported anonymously, though, and we won't ever identify you personally as a participant. Finally, we promised to pay you \$60 for participating today, and you will be paid at the end of the session.

GROUND RULES (2 MINUTES)

Have any of you have participated in a focus group before?

The rules are simple: I'll bring up a topic, and I want to get your thoughts and opinions. Sometimes I'll ask a question and we'll just go around the table and get everyone's thoughts, and other times I'll just wait for anyone to answer. Feel free to respond to something that someone else says, and feel free to disagree, but please show respect for others even if you disagree with their opinions. There are no wrong answers. At certain points during our discussion I may poll the group to determine how many of you agree or disagree about a certain issue. This will be done to summarize opinions for reporting back to the client.

Keep in mind that we want everyone to participate. If you're not talking, I'll eventually notice and ask you for your opinions. On the other hand, if you're the only one talking, please recognize that and give others a chance to participate.

Finally, I may politely interrupt if you're talking about something that strays off our topics. No disrespect is intended if I do this, but we have a lot to accomplish tonight so we need to stay focused so we can make sure that we don't need to keep you beyond our scheduled two hours.

INTRODUCTIONS (10 MINUTES)

First, let's briefly introduce ourselves, using a "one minute biography." In one minute or less, tell us the important facts about yourself: your first name, family status, and what you do for a living or where you go to school. You can also tell us how long you've been a resident of Summit County and what you like best about living here.

BACKGROUND – HEALTHCARE SERVICES IN SUMMIT COUNTY (25 MINUTES)

We'll begin by asking some general questions about healthcare services in Summit County.

1. How would you describe the overall healthcare services and system in Summit County?
 - ⇒ Is there anything particularly unique about Summit County in this respect? [Moderator: listen for how this may impact quality or quantity of services]
2. How well do current services in the county meet county residents' needs? Why do you say this?
 - ⇒ How did you become aware of this?
3. How well do current services in the county meet *your* or *your household's* needs? Why do you say this?
 - ⇒ How did you become aware of this?
4. What area of health-related services could be improved the most in Summit County? Please explain.
5. What priority are health-related services versus other public service needs in the county? Please explain. [Moderator: after initial responses, it may be helpful to provide some other areas for comparison and contrast. e.g. K-12 education, public safety, transportation, economic development, etc.]

HEALTHCARE ACCESS AND INSURANCE (15 MINUTES)

Now we'd like to assess how you perceive your own/your household's ability to access healthcare.

6. When you/your household members need healthcare, do you feel it is generally available in Summit County? Please explain.
 - ⇒ Do you feel you have a potential "network" or team of providers in Summit County?
 - ⇒ [Moderator: ask if this doesn't naturally come up in conversation] If healthcare is not available in Summit County, where would you go?
 - > Are there any challenges for you to leave the county for healthcare? Please explain.

7. Do you feel your health insurance plan limits your access to healthcare in any way, whether it's access to healthcare here in Summit County or outside of the county?
 - ⇒ What other challenges exist with your health insurance? [Moderator: 29% answered "other" in survey. Probe for this, and also listen for high deductible/high monthly premium, etc.]
 - ⇒ Do you expect any major changes with your health insurance that will impact you financially, either positive or negative?
8. Has the latest recession affected you in terms of having to prioritize health insurance versus other household expenditures? Please explain.
9. Are low-cost healthcare options needed in Summit County? [Moderator: ~26% of survey respondents rated both the availability and quality of these as "poor". Probe here.]
 - ⇒ Are these good quality healthcare options? Please explain.

SPECIFIC HEALTH ISSUES, RESOURCES, AND SERVICES (40 MINUTES)

Now let's have a discussion about some more specific public health issues and the availability of services for these.

10. What do you think should be the top public health priority areas for Summit County to concentrate on in the next five years? Please explain.
11. On the telephone survey that you participated in, we gave a list and asked respondents for the top priority areas. We'd like to understand a little more about why each of these rose to the top of the list. We'll discuss the top 4, in no particular order. [Moderator: For each- tobacco, unintended pregnancy, obesity, and mental health/substance abuse- ask the following]
 - ⇒ Why do you think this is an important issue in Summit County?
 - ⇒ What resources are available right now to assist with this health issue?
 - ⇒ What else can be done by Summit County to help with prevention of this problem?
12. Are there any preventive health practices that the County health department should assist individuals with?
 - ⇒ Which ones?
 - > [If not mentioned, address regular preventive screenings, not enough exercise, unhealthy eating habits, not wearing a helmet, etc. Address these one at a time.]
 - ⇒ How should the County play a role in this preventive practice? [Moderator: listen for wellness programs- this came up as a little bit of a weakness on the survey]
 - > What would make for a quality wellness program that is delivered by the County?

13. What specific types of healthcare providers need to be addressed to improve healthcare delivery services in Summit County? Please explain. [Moderator: Address the specialty physician gap issue here, but also listen for family physicians and pediatrics]

⇒ Does Summit County need more of this type of healthcare provider? Why do you say this?

INFORMATION AND COMMUNICATIONS (20 MINUTES)

At this point in discussion, we'd like to talk with you about information need and possible communications from the County that will be effective.

14. What kind of health-related information do you regularly keep up with? [Moderator: listen for specific examples]

⇒ What is the most common source for this type of information? [Moderator: probe about why they choose certain sources]

15. Are you currently aware of any Summit County health resources or programs related to health?

⇒ If so, which ones come to mind?

⇒ What do you know about this health resource or program?

⇒ [After unaided comments ask particularly about each of the following if they haven't already been discussed: SC Alert; 211; the County's website; and SummitCares.org]

16. What kind of health-related information would you like to receive from Summit County?

⇒ If the County was communicating about the top health issues [insert example] like those we discussed earlier, what type of information would be most helpful?

⇒ If the County was communicating about services provided such as those discussed earlier [insert example], what type of information would be most helpful?

17. Let's talk a little more about your preferred ways to consume health-related information such as the type of information just discussed?

⇒ Think about *how* you would most prefer to receive this information. i.e. through what means? [Moderator: listen for online vs. traditional channels] Please explain.

⇒ [Discuss word of mouth, newspaper and radio. Have participants discuss examples, etc.]

CONCLUSION

Thank you very much for your time! This information will be very useful to the County as it considers how to best continue to serve and communicate to folks like you. Now, we've promised you a payment...

SPANISH-LANGUAGE FOCUS GROUPS

ANTECEDENTES - SERVICIOS DE SALUD DEL CONDADO DE SUMMIT (25 MINUTOS)

Vamos a comenzar a hacer algunas preguntas generales acerca de los servicios de salud en el Condado de Summit.

1. ¿Cómo describiría usted los servicios de salud en general y del sistema en el Condado de Summit? ¿Cree que hay algo único en todo el Condado de Summit en este sentido?

2. ¿Considera usted si los servicios prestados actualmente satisfacen las necesidades de los residentes del condado? ¿Por qué?

La eficacia de estos servicios responden a las necesidades de los residentes hispanos en particular?

3. ¿Cree usted que los servicios prestados actualmente en el condado satisfacen sus necesidades o las de su familia? ¿Por qué?

¿Cómo se enteró usted de estos?

4. ¿Qué área de la salud relacionada con los servicios se podría mejorar para los residentes hispanos en el Condado de Summit? Por favor, explique.

5. ¿Qué prioridad tienen los servicios relacionados con la salud versus otras necesidades de servicio público en el condado? Por favor, explique. [Moderador: después de las respuestas iniciales, puede ser útil proporcionar algunas otras áreas para comparar y contrastar, por ejemplo Educación K-12, la seguridad pública, transporte, desarrollo económico, etc.]

SALUD Y SEGURO DE ACCESO (15 MINUTOS)

Ahora nos gustaría evaluar si su unidad familiar tiene acceso fácil a servicios médicos.

6. Cuando usted o los miembros de su familia necesitan atención médica, ¿cree usted que está generalmente disponible en el Condado de Summit? Por favor, explique.

¿Siente usted que tiene un potencial de "red" o un equipo de proveedores en el Condado de Summit?

[Moderador: preguntar si no ocurre, naturalmente, surge en la conversación] Si los servicios de salud no están disponibles en el Condado de Summit, ¿a dónde iría?

i. ¿Existen dificultades para que usted pueda salir de la provincia para la asistencia médica? Por favor, explique.

7. ¿Cuántos de ustedes tienen seguro de salud?

¿Cuáles son algunas de las razones que hacen difícil obtener un seguro de salud en el Condado de Summit?

8. Para aquellos que tienen seguro médico, ¿cree que su plan de seguro médico limita su acceso a la salud de cualquier manera, si se trata de acceso a la salud aquí en el Condado de Summit o fuera del condado?

¿Qué otros retos existen con su seguro de salud? [Moderador: el 29% respondió "otro" en la encuesta. Investigar esto, y también escuchar deducible alto / alta cuota mensual, etc.]

¿Espera usted algún cambio importante con su seguro de salud que le impacte económicamente, ya sea positivo o negativo?

9. ¿La última recesión le ha afectado en términos de tener que dar prioridad a seguro de salud en comparación con otros gastos del hogar? Por favor, explique.

10. ¿Considera usted que se necesitan más opciones de bajo costo de atención médica en el Condado de Summit?

¿Cree usted que las opciones de bajo costo de cuidados médicos son necesarias en el Condado? Por favor, explique. ¿Cree usted que la mayoría de la gente sabe acerca de estas opciones?

11. Cree usted que el transporte es un problema para acceder a servicios de salud en el Condado de Summit? ¿Es más un problema para los residentes hispanos?

PROBLEMAS ESPECIFICOS DE SALUD, RECURSOS Y SERVICIOS (40 MINUTOS)

Ahora vamos a tener una discusión sobre algunos problemas de salud más específicos públicos y la disponibilidad de los servicios de éstos.

12. ¿Cuáles cree que deberían ser las principales prioridades de la salud en el que el Condado de Summit debería concentrarse en los próximos cinco años? Por favor, explique.

13. En la encuesta telefónica que se llevó a cabo con el público en general, se nos dio una lista y se le pidió a los encuestados sobre las áreas de mayor prioridad. Nos gustaría entender un poco más acerca de por qué cada uno de ellos es prioridad en la lista. Hablaremos de los 4 primeros, en ningún orden en particular.

[Moderador: el tabaco, el embarazo no deseado, la obesidad y salud mental / abuso de sustancias]

¿Por qué crees que estos temas son importantes en el Condado de Summit?

¿Qué recursos están disponibles ahora mismo para ayudar con este problema de salud?

¿Qué más se puede hacer por el Condado de Summit para ayudar con la prevención de este problema?

14. ¿Hay prácticas de salud preventivas que el departamento de salud debe ayudar a las personas con?

¿Cuáles?

i. [Si no se menciona, frente a evaluaciones regulares de prevención, no hacer suficiente ejercicio, hábitos alimenticios poco saludables, no usar casco, etc. Abórdelas una a la vez.]

¿Cómo debería el Condado de desempeñar un papel en esta práctica preventiva? [Moderador: escuchar los programas de bienestar-esto surgió con un poco de debilidad en la encuesta]

i. ¿Qué haría para un programa de bienestar de calidad que se entrega por el condado?

15. ¿Qué tipos específicos de los proveedores de salud deben ser abordados para mejorar la prestación de servicios de salud en el Condado de Summit? Por favor, explique. [Moderador: Dirigirse al asunto de la brecha que hay entre el médico especialista, pero también escuchar a los médicos de familia y pediatría] ¿Cree usted que el Condado de Summit necesita más de este tipo de profesionales de la salud? ¿Por qué dice esto?

LA INFORMACIÓN Y LAS COMUNICACIONES (20 MINUTOS)

En este punto de la discusión, nos gustaría hablar con usted acerca de la necesidad de información y las comunicaciones posibles desde el condado de que sea eficaz.

16. ¿Qué tipo de información relacionada con la salud suele usted estar al tanto? [Moderador: escuchar ejemplos específicos]

¿Cuál es la fuente más común para este tipo de información? [Moderador: investigar por qué eligen ciertas fuentes]

17. ¿Está usted al tanto de todos los recursos de salud del Condado de Summit o programas relacionados con la salud? Si es así, ¿cuáles vienen a la mente?

¿Qué sabe usted acerca de este recurso de salud o programa?

[Después de los comentarios sin ayuda preguntarle todo acerca de cada uno de los siguientes si no ya se han comentado: SC Alert, 211; página web del Condado, y SummitCares.org]

18. ¿Qué tipo de información relacionada con la salud le gustaría recibir del Condado de Summit?

Si el Condado pudiese compartir información sobre los problemas principales de salud como las que hemos comentado anteriormente, ¿qué tipo de información sería más útil?

Si el Condado pudiese compartir información acerca de los servicios prestados, tales como las descritas anteriormente [ejemplo de inserción], ¿qué tipo de información sería más útil?

19. ¿Vamos a hablar un poco más acerca de sus formas preferidas para obtener información relacionada con la salud tales como el tipo de información que acabamos de discutir?

¿Piense en cómo sería la mejor manera de recibir esta información. Es decir, a través de qué medios?

[Moderador: escuchar canales en línea vs tradicionales] Por favor, explique.

[Pasando la voz, el periódico y la radio. Pida a los participantes analizar ejemplos, etc.]

NEEDS ASSESSMENT KEY STAKEHOLDER SURVEY

SUMMIT COUNTY PUBLIC HEALTH

INTRODUCTION

Thank you for participating in this survey. This survey is meant to provide additional background and context for the input gathered from the general public on health care needs and priorities in Summit County in order to provide a solid foundation for setting priorities for addressing health care needs in Summit County in the coming years.

This survey should take approximately 10 minutes to complete. Feel free to use the “save” button below if you would like to save your work at a later time. Please press the “next” button below to begin.

SECTION 1: HEALTH CARE RATINGS

1. Compared to other communities you’re familiar with, how would you rate the following aspects of health care in Summit County?

	Excellent	Adequate	Poor	Don't Know
Availability of... [RANDOM ORDER]				
alternative health care options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
health care options for non-routine/specialized illnesses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
health care options for routine illnesses / medical conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
information about health and wellness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
low-cost health care options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
pediatric care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
preventive health care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
treatment programs for drug/alcohol abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
providers that take your insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
emergency care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dental care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of... [REPEAT ABOVE ORDER]				
alternative health care options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

health care options for non-routine/specialized illnesses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
health care options for routine illnesses / medical conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
information about health and wellness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
low-cost health care options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
pediatric care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
preventive health care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
treatment programs for drug/alcohol abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
providers that take your insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
emergency care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dental care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. How would you rate Summit County’s health care system at meeting the needs of each of the following groups?

	Excellent	Adequate	Poor	Don’t Know
Infants and toddlers (ages 0-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School children (ages 5-17)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Young adults (ages 18-34)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adults (age 35-64)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seniors (ages 65+)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Low-income residents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-English-speaking residents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visitors to the county	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 2: HEALTHCARE ACCESS

3. In your opinion, what are some of the most prevalent barriers to obtaining health care in Summit County?

4. What types of medical treatments, surgeries or specialty areas are Summit County Residents leaving Summit County to receive?

5. In your opinion, what can be done to eliminate the health care inadequacies that exist between different groups in Summit County?

6. If you were in charge of improving the overall health of Summit County residents, what would be your top priority and why?

SECTION 3: PRIORITIES

7. The following is a list of “10 Winnable Battles” established by the Colorado Department of Public Health and Environment. These are areas public health and environmental priorities with large-scale impact on health and the environment, and with known, effective strategies to address them. Please prioritize this list based on your own perspective with “1” meaning the area that should be the highest priority and “10” being the area that should be the lowest priority.

- _____ Clean air
- _____ Clean water
- _____ Infectious Disease Prevention
- _____ Injury Prevention
- _____ Mental Health and Substance Abuse
- _____ Obesity
- _____ Oral Health
- _____ Safe Food
- _____ Tobacco
- _____ Unintended Pregnancy

8. Are there any other health-related areas that you think should be a high priority for Summit County to improve in the next five years?

9. Among respondents to the public survey, mental health and substance abuse were identified as top priorities by over half of respondents. Do you agree with this?

- Yes
- No

Why (or why not)?

10. Among respondents to the public survey, tobacco was identified as a top priority by roughly one-third of respondents. Do you agree with this?

- Yes
- No

Why (or why not)?

11. Among respondents to the public survey, unintended pregnancy was identified as a top priority by roughly one-third of respondents. Do you agree with this?

- Yes
- No

Why (or why not)?

SECTION 4: ABOUT YOU

This final section is to help us understand the context of the answers you provided in this survey.

12. How long have you lived in Summit County? _____ years

13. How long have you worked in your current position? _____ years

14. What is your role in your current position? _____

15. How is your current role related to health care in Summit County? _____

16. Do you have any other comments about health care priorities in Summit County?

Thank you very much for participating in this survey.