Public Health Needs Assessment
Executive Summary
Summit County Public Health
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INTRODUCTION

In 2012 Corona Insights was retained by Summit County Public Health to conduct a community health needs assessment for Summit County, Colorado. The following executive summary provides an overview of the study methodology and a summary of various priority areas that Summit County may wish to address in the coming years based on a combination of the study team’s conclusions and the insights from key experts in Summit County. A separate full report contains the full findings of the health needs assessment.

The full analysis was based on four specific components, which include:

- A review of existing research already completed in the community
- Surveys of the public:
  - A telephone survey with English-speaking residents
  - An informal intercept survey of Spanish-speaking residents
- Focus groups with the public:
  - Two focus groups with English-speaking residents
  - One informal focus group with Spanish-speaking residents
- An online survey of selected key informants in the area to gauge reaction to some of the key findings of the other research tasks

Each of these components can be viewed in the full report as a stand-alone document, but key findings from all components have been combined in this executive summary to form a complete and comprehensive summary of identified key issues.
A brief discussion of the various methodologies used for this study is provided below. Please see the full report for additional detail on the approaches used for each of these tasks.

REVIEW OF SECONDARY DATA

As part of the study, the research team gathered and summarized data from a number of existing research reports that describe specific populations and/or health issues in the county. These summaries are provided in the full report.

PUBLIC SURVEYS

After gaining a basic understanding of some of the key issues facing Summit County through the secondary research review, Corona next conducted surveys with the general public in order to better understand public perceptions about the availability and quality of health care in the county. In addition, this survey sought to better understand public opinions about what some of the major priority areas for health care are for the county.

ENGLISH-LANGUAGE TELEPHONE SURVEYS

In order to reach the majority of the population, telephone surveys were conducted with 270 residents of the county in May of 2012. Residents were called from a list of randomly-generated telephone numbers and asked to participate.

SPANISH-LANGUAGE INTERCEPT SURVEYS

While the English-language telephone survey yielded a great deal of insight into the opinions of the English-speaking public in Summit County, the study team felt that it would be useful to also understand the needs of Spanish speakers in the county specifically. These individuals were generally not included in the telephone survey for a variety of reasons, and this population was believed to have significant issues obtaining quality health care.

This survey was conducted in-person at a variety of locations in Summit County by various service providers in the community. Surveyors targeted locations frequented by Spanish speakers, 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 in late May and early June of 2012, and a total of 78 surveys were completed.

PUBLIC FOCUS GROUPS

While the surveys did a very effective job of helping to understand how members of the public feel about health care in Summit County, surveys do not typically uncover a great amount of detail about why they feel that way. For this reason, the surveys were followed by focus groups to discuss the major topics in detail.
ENGLISH-LANGUAGE FOCUS GROUP

Participants for the English-language focus groups were drawn from pre-screened survey respondents (who were asked during the survey if they were interested in participating in a focus group), and both focus groups were held on-site at the Medical Office Building in Frisco, Colorado.

In total, 20 people participated in the two groups, which were held in mid-June of 2012.

SPANISH-LANGUAGE FOCUS GROUP

Similar to the situation observed with the public surveys, the study team felt that it would be beneficial to conduct a focus group specifically with Spanish speakers in order to understand how the issues that group faces differ from the issues facing the general public. For this reason, one focus group was conducted by Summit County staff with Spanish speakers that asked participants to react to some of the issues uncovered in the survey. This focus group was conducted in mid-July of 2012.

KEY INFORMANT SURVEY

Based on the findings of the secondary data review and public research, a brief online survey was conducted with a small number of key community informants in order to gather their feedback about whether the issues identified by the public were reasonable and accurate. A list of potential respondents was provided by Summit County Public Health, and Corona sent e-mail invitations to each of these informants to invite them to participate. In total, 14 responses were received in mid-August of 2012.

PRELIMINARY PRIORITIZATION

At the conclusion of all of the above research, the Corona Insights research team met with the Summit County needs assessment steering committee to discuss the results and identify preliminary priorities to be addressed by Summit County in the coming years. This joint group considered not only the 2012 research, but also the findings of the 2008 Needs Assessment and the inside knowledge of a variety of experts in the area to determine priorities that were not only top-of-mind priorities, but also could potentially be addressed to make a tangible impact in the lives of Summit County residents.
POTENTIAL KEY PRIORITIES

OVERVIEW

Based on a combination of the results of the research and the expertise of members of the Summit County steering committee, the following list provides an overview of the various priorities that Summit County may wish to address in the coming years. This list of individual priority areas is grouped into four themes that reflect the various stages of the health care process, beginning with personal responsibility and then progressing through awareness, access, and use of the health system, respectively.

.Priority Theme: Embrace personal responsibility for health
  - Obesity
  - Nutrition and Healthy Lifestyles
  - Injury Prevention
  - Tobacco

.Priority Theme: Increase information and understanding of how to obtain care
  - Health Navigation
  - Mental Health and Substance Abuse
  - Preventive Care

.Priority Theme: Increase overall access to care (insurance and coverage)
  - Low-Cost Care
  - Barriers for the Underserved

.Priority Theme: Increase/expand care services
  - Specialty Care
  - Services for Children
  - Senior Needs

The specific areas within each theme were classified in terms of their predominant action theme. For example, the prevention and treatment of obesity encompasses all four themes: personal responsibility, awareness, access, and services. The main thrust was deemed to be in the area of personal responsibility, but it is recognized that obesity can also be addressed within initiatives among the other three themes as well.

This executive summary examines each of these possible priority areas in detail and includes key findings from the research that support the inclusion of each topic as a potential priority.
COLORADO’S 10 WINNABLE BATTLES

As background for these priorities, it should be noted that many of these possible priorities were derived from the list of 10 Winnable Battles compiled by the Colorado Department of Public Health and Environment. More specifically, the 10 Winnable Battles identified by the CDPHE include the following:

- Clean Air
- Clean Water
- Infectious Disease Prevention
- Injury Prevention
- Mental Health and Substance Abuse
- Obesity
- Oral Health
- Safe Food
- Tobacco
- Unintended Pregnancies
PRIORITY THEME: EMBRACE PERSONAL RESPONSIBILITY FOR HEALTH

One of the best ways to decrease overall health issues among the population is simply to prevent such issues from occurring in the first place. This first major category of priorities, therefore, focuses on areas where Summit County could encourage residents to take more personal responsibility for their health, possibly preventing more major issues.

OBESITY

Though Summit County is a reasonably healthy county in comparison to other areas of Colorado, the obesity epidemic continues to worsen across the country. Among key informants, obesity was only second to mental health and substance abuse in terms of priorities, and this area was also commonly mentioned by the public as an area for improvement. As one of the CDPHE's 10 Winnable Battles, this is an area where public health systems can make an impact.

Research findings that support this as a key need include:

SECONDARY DATA FINDINGS

➢ A total of 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.

➢ Obesity impacts far more than an individual’s general quality of life. Obesity increases the likelihood of various diseases, including heart disease, type 2 diabetes, certain types of cancer, osteoarthritis, asthma, and more. By improving obesity rates, many other issues in the county will naturally improve as well.

SURVEY FINDINGS

➢ One in five survey respondents felt that Summit County doesn’t currently do enough to prevent obesity issues, and nearly one-third of respondents said that obesity should be a Top 3 priority for the county to improve in the coming years.

➢ Obesity was an even higher priority among Spanish-language survey respondents (and was the top priority overall for this group). In total, roughly half of Spanish-language survey respondents said that obesity should be a Top 3 priority.

FOCUS GROUP FINDINGS

➢ As one participant said, “If you reduced obesity, you’d reduce so many other problems.” The notion received a great deal of agreement from other participants. This type of thinking was a theme in all 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.
KEY INFORMANT FINDINGS

- Ten out of the fourteen key informants who replied to the survey felt that obesity should be among the Top 3 priorities for Summit County in the coming years. In addition, one respondent further clarified:

  “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.”

NUTRITION AND HEALTHY LIFESTYLES

While it is clearly related to obesity, promoting nutrition and healthy lifestyles is a worthwhile priority among the entire population. Lack of exercise was one of the most commonly-reported negative behaviors among survey respondents. Combined with the fact that nutrition and exercise are both strong drivers of overall health, promoting nutrition and exercise could potentially have a major impact in helping residents lead more healthy lifestyles. This area could possibly be an especially important focus area for Summit County’s Spanish-speaking population, among whom lack of exercise and unhealthy eating habits were both self-reported to be disproportionately high.

Research findings that support this as a key need include:

SECONDARY DATA FINDINGS

- 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. Nonetheless, obesity rates indicate that improvement in this area can have an impact.

- Like the rest of the state, a significant portion of Summit County’s population (14 percent) is Hispanic, though this figure is considerably lower than the statewide incidence (21 percent). This percentage is even higher among children; roughly one-third of students in Summit County schools are Hispanic, so preventative measures in this population can have a disproportionate payoff in the future.

SURVEY FINDINGS

- A lack of exercise was the second-most-common unhealthy behavior reported in the English-language surveys, followed closely by unhealthy eating habits.

- Spanish-language survey respondents were considerably more likely to report having almost all of the “unhealthy behaviors” tested in the survey compared to their English-language 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), but this would nonetheless seem to indicate that Spanish-speakers may be a good target audience to improve unhealthy behaviors in the future.

KEY INFORMANT FINDINGS

- 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.

INJURY PREVENTION

Though it was not a top-of-mind priority for Summit County among the research with the public, it is important to note that the high level of outdoor activities in the county naturally causes a disproportionately high number of injuries among both residents and visitors to the area. Combined with the fact that Centura Health has made injury prevention one of its areas of focus for its three-year strategic plan, injury prevention is likely a good candidate to be included in the county’s set of priorities as well.

Research findings that support this as a key need include:

SECONDARY DATA FINDINGS

➔ 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.

SURVEY FINDINGS

➔ Among survey respondents, injury prevention was seen as a moderate priority. It was ranked in the top three priorities by one-fourth of respondents – ahead of oral health, safe food, clean air, and infectious disease prevention but behind mental health/substance abuse, tobacco, unintended pregnancy, clean water, and obesity.

FOCUS GROUP FINDINGS

➔ 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.

➔ "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."

➔ Despite the above, it should be noted that residents’ satisfaction was primarily due to injury treatment rather than injury prevention. In the focus groups, injury prevention was generally not a commonly-viewed priority, but this could simply be due to the fact that it was not specifically targeted as a point for discussion in the groups.

KEY INFORMANT FINDINGS

➔ Among key informants, 5 out of 12 identified injury prevention as one of their Top 3 priorities – putting it just behind mental health/substance abuse, obesity, and tobacco in terms of key informants’ perceived priorities.
TOBACCO

Similar to the trend seen for obesity, Summit County ranks fairly well in terms of having low tobacco usage among Colorado counties. Even so, tobacco usage rates in Colorado have remained relatively flat over the past decade. Like obesity, tobacco usage is linked to a wide variety of other health issues, so this may be a high priority regardless of Summit County's current ranking. Though tobacco use among adults is often difficult to influence, there is significant opportunity for Summit County to reduce tobacco use among youth. As one of the CDPHE’s 10 Winnable Battles, this is an area that public health systems can make an impact.

Research findings that support this as a key need include:

SECONDARY DATA FINDINGS

➤ 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.

➤ A 2008 study by the Summit Prevention Alliance found that almost 30 percent of high school students in the region had smoked more than 100 cigarettes in their lifetimes.

➤ Summit County residents smoke significantly less than Colorado residents statewide. Among Colorado counties, 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. However, this still means that nearly 1 in 8 residents are using tobacco, which is worthy of continued emphasis.

➤ 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.

SURVEY FINDINGS

➤ Among English-language survey respondents, one in five said that they did not feel that Summit County was doing enough to prevent problems with regard to tobacco. In addition, tobacco was identified by English-language respondents as the second-highest priority area of the 10 Winnable Battles addressed in the survey – one-third of respondents said that tobacco should be a Top 3 priority.

FOCUS GROUP FINDINGS

➤ 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.”
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.

KEY INFORMANT FINDINGS

Tobacco was the third-highest ranked priority among key informants among the list of 10 Winnable Battles tested in the survey. While it was generally ranked much lower than mental health and substance abuse or obesity, five of the fourteen respondents ranked it in their Top 3 priorities, and only two of the fourteen ranked it in their bottom priorities.

When specifically asked if they agreed with the public that tobacco should be a priority, 8 of the 14 survey respondents agreed, while five disagreed (and one neglected to respond). 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. Those who felt that Tobacco should not be a top priority 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.
PRIORITY THEME: INCREASE INFORMATION AND UNDERSTANDING OF HOW TO OBTAIN CARE

No matter how much effort goes into encouraging the public to take personal responsibility for their health, people will still need to find care at some point. However, finding care can sometimes be difficult, especially among many of Summit County’s traditionally underserved populations. Therefore, finding ways to help individuals find the care they need can have an impact.

HEALTH NAVIGATION

While awareness of resources is moderately high in the general population, there are niche populations that have less knowledge, such as Spanish speakers and perhaps transient or low-income households. Developing a “system map” could allow those populations to more easily gain access to care and to appropriate providers.

Research findings that support this as a key need include:

SURVEY FINDINGS

⇒ Among English-language survey respondents, most respondents had at least a “moderate” understanding of local health care resources in Summit County. However, men had less of an understanding than women, and seniors had a better understanding than other age groups.

⇒ Among Spanish-language survey respondents, awareness of local health care resources was somewhat lower than was seen among the general population. As mentioned previously, this population is less likely to have insurance and more likely to have a transportation barrier to receiving care, so having a set of guidelines that help such individuals determine the best course of action for their situation would likely be helpful.

FOCUS GROUP FINDINGS

⇒ Many focus group participants felt that it was frustrating to have 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. Some specific frustrations mentioned by focus group participants included:

⇒ Not being in-network. 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 not 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.”
MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES

All groups asked in the study – key informants and the general public of both languages – cited substance abuse as a top priority. Key informants and the general public also mentioned mental health as a top priority. This is clearly a highly visible issue of concern in the community. As one of the CDPHE’s 10 Winnable Battles, this is an area that public health systems can make an impact.

Research findings that support this as a key need include:

SECONDARY DATA FINDINGS

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. Even so, most people with mental disorders often 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. As a historically under-funded component of health care, this is an area where public health can likely make an impact.

SURVEY FINDINGS

One in five English-language survey respondents said that Summit County is not doing enough to prevent problems with mental health and substance abuse issues, and over half (58 percent) selected mental health and substance abuse as one of their Top 3 priorities for improvement in the county.

FOCUS GROUP FINDINGS

➔ Participants seemed to feel that mental health and substance abuse is an issue not only because it is an area of general concern, but also because it is an area where insurance is often inadequate to help people receive treatment.

➔ 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. 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 community’s nature 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.”

**KEY INFORMANT FINDINGS**

⇒ Mental health and substance abuse was identified as a Top 3 priority for improvement by three in four informants, indicating that there is a strong perception that this area still needs improvement in Summit County.

⇒ When specifically asked if they agreed with the result of the public surveys that indicated that mental health and substance abuse should be a priority for the county, only one informant disagreed (citing the fact that this issue only affects a very small percentage of the population). 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.

**PREVENTIVE CARE**

Preventive care was not a top-of-mind issue for residents, but ignoring it was the most commonly reported unhealthy behavior. Expanding awareness of the health care continuum could promote overall community health as well as providing the public with a greater understanding of the value they receive from the public health system.

Research findings that support this as a key need include:

**SECONDARY DATA FINDINGS**

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 study. However, Summit County had lower rates of pneumonia vaccinations and flu vaccinations for adults 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. Similarly, many preventive behaviors, such as birth control usage and HIV screenings, were less common in Summit County compared to the state as a whole. However, it should be noted that Summit County Public Health reports that 95 percent of children entering school are up to date on their immunizations.

**SURVEY FINDINGS**

Survey respondents generally felt that the quality and availability of preventive health care services were at least adequate in Summit County, and one-third of respondents felt that the availability and quality of such services was excellent. Despite this, one in four respondents to the English-language survey said that they don’t receive regular preventive screenings, and seven percent said that they don’t vaccinate their children.
Even more significantly, two-thirds of Spanish-language survey respondents said that they do not receive regular screenings, and four in five said that they do not vaccinate their children.

**FOCUS GROUP FINDINGS**

Focus group participants generally felt that there was a need for preventive options, but it’s not an area that’s very top-of-mind for most people. 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 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.”

- **Education of 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.
PRIORITY THEME: INCREASE OVERALL ACCESS TO CARE (INSURANCE AND COVERAGE)

Even if Summit County improves overall awareness of the health care landscape, many individuals may still have difficulty actually obtaining that care due to the cost and other barriers. For these reasons, a third category of focus is simply to improve overall access to care in Summit County.

LOW-COST CARE

In particular, this relates to the Community Care Clinic, though other options would be desirable as well. Ongoing increases in the overall cost of health care, coupled with rising costs of living, have made it difficult for those with limited financial resources to obtain needed health care. All populations in the study cited a concern about low-income access to health care, and the Community Care Clinic was seen as the flagship vehicle for delivering those services.

Research findings that support this as a key need include:

SECONDARY DATA FINDINGS

➢ Estimates of the percentage of Summit County residents who are uninsured generally range from approximately 17 to 21 percent, which is very slightly higher than the rates observed for Colorado as a whole (15-16 percent). In addition, Summit County has slightly lower participation rates in Medicaid programs.

➢ According to 2011 estimates by the U.S. Census Bureau, 13 percent of Summit County residents live in poverty. This is slightly lower than the statewide average of 14 percent. Nonetheless, this means that roughly one in eight residents of Summit County have income levels that are below what is generally considered to be a sustainable wage.

➢ 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.

SURVEY FINDINGS

➢ A majority of Summit County residents have insurance through their employer. However, 14 percent of English-language survey respondents said that their insurance is inadequate for their needs. Among these individuals, over half said that their deductible was too high, and many said that their monthly premiums were too high.

➢ Respondents to the Spanish-language survey were significantly more likely to be uninsured, and over half of those who were insured said that their insurance was inadequate for their needs.

FOCUS GROUP FINDINGS

➢ Among focus group participants, nearly all seemed to be strong supporters of anything related to low-cost health care options. This includes options for those without insurance and also options to keep deductibles and co-pays lower for those who have it.
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 government). 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!”

“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 focus group participant who happened to work as a human resource director. 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.”

Health care options for the uninsured and underinsured are viewed as necessities in Summit County. 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.

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.”

Due to the high costs of care, 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 INFORMANT FINDINGS

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.

**BARRIERS FOR THE UNDERSERVED**

In addition to low-cost options in general, the research revealed that Spanish-speaking residents in particular often have a wide variety of barriers preventing them from obtaining care. For this reason, focusing on these barriers for the underserved can potentially make an impact in Summit county as well. Though most of the findings below focus on the Spanish-speaking population, these same issues may also be experienced by other underserved populations in Summit County as well.

Research findings that support this as a key need include:

**SECONDARY DATA FINDINGS**

- Both in Summit County and in Colorado as a whole, Hispanic individuals are considerably less likely to have insurance than non-Hispanics.

**SURVEY FINDINGS**

- Roughly two-thirds of Spanish-language survey respondents had no health insurance compared to 16 percent of the general population. 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.

- 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 English-language survey respondents.

**FOCUS GROUP FINDINGS**

- Some Spanish-language participants mentioned how they often just stay at home rather than visiting a doctor because of how cost prohibitive it is to them (which in turn can affect their earnings ability). 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 available there. 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 groups also discussed this but said they currently travel mostly to Denver, Vail, or Edwards.

- 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.

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.

KEY INFORMANT FINDINGS

Only one of the 14 key informants felt that the county was doing an “excellent” job of meeting the needs of the county’s non-English-speaking population, while four said that the county was doing a “poor” job of meeting this population’s needs.
PRIORITY THEME: INCREASE/EXPAND CARE SERVICES

Though the previous priority categories (encouraging personal responsibility, raising awareness of how to obtain care, and increasing access to care) can all be effective at reducing the need for additional types of services, there are still some services that the research revealed to be in need that would help improve the overall care landscape in Summit County.

SPECIALITY CARE

Residents recognize that the county is relatively small in population, and that a certain scale is required to support specialty care. Even so, many residents (especially those who are uninsured or underinsured) find it very difficult to obtain specialty care when living in Summit County. To the extent that it is feasible, the county could consider regional solutions or other options, such as telemedicine, to develop capacity in certain areas. Based on the research, pediatrics is widely recognized as an area of particular need, and may be a top priority. Other areas mentioned by constituency groups include surgery, oncology, cardiology, geriatric care, mental health, substance abuse, and dermatology.

Research findings that support this as a key need include:

SURVEY FINDINGS

⇒ 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.

⇒ When asked about whether or not they would obtain specific health care services in Summit County, respondents were most likely to say they would choose local emergency room services, dentists, and hospitals. Consistent with other satisfaction measures, they were most likely to leave Summit County to see specialty physicians.

FOCUS GROUP FINDINGS

⇒ Nearly all recommendations from residents involve some form of specialty care service. 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.”

⇒ 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 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.
As mentioned earlier, some Spanish-speaking focus group 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.

**KEY INFORMANT FINDINGS**

Aside from cost-related issues, other informants mentioned a lack of service providers for specialty illnesses and a general difficulty in retaining specialty care providers in the area as a major barrier to obtaining care in Summit County.

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.

**SERVICES FOR CHILDREN**

While this was not commonly identified as a priority area for public survey respondents, it’s likely because many residents don’t have children and thus don’t see that part of the system. Key informants and focus group participants frequently cited this group, particularly infants and toddlers, as the most underserved sub-segment of the population.

Research findings that support this as a key need include:

**FOCUS GROUP FINDINGS**

There is a perception that the amount of pediatric offerings is 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.”

The need for improved pediatric care was also identified among Spanish-language focus group participants. This was mentioned frequently throughout the group.

**KEY INFORMANT FINDINGS**

Generally, informants seemed to believe that Summit County’s health care system does a good job of meeting the needs of adults and young adults in the county. However, ratings of the county’s ability to meet the health care needs of many other subgroups of the population, including school aged children, 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.”

In addition to these rankings, a number of key informants specifically mentioned pediatrics as a top priority area for Summit County to improve in coming years.

SENIOR NEEDS

The senior population is growing quickly, and is going to place more, and different, demands on the health care system over time. Identifying the demands that will be met by the private sector and which will require public intervention will be valuable. A long-term plan for this population is imperative.

Research findings that support this as a key need include:

SECONDARY DATA FINDINGS

In 2010, 8 percent of Summit County residents were age 65 or older. Despite this 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. Bureau of the Census, the number of seniors in Summit County is expected to increase by over 250 percent between 2010 and 2030.

FOCUS GROUP FINDINGS

Geriatric care was perhaps the most frequently discussed topic when participants were asked to talk about the services needed in Summit County. As one participant explained, “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.” 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/specialty issues such as hip and knee surgeries, but others simply wanted more doctors who specialize in general geriatric care. However, it should be noted that there are, in fact, a variety of rehabilitation facilities in the area, possibly indicating that this perception was caused primarily by a lack of awareness rather than by an actual lack of availability of such facilities.

Aging in place. 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.

KEY INFORMANT FINDINGS

When asked how well Summit County’s health care system meets the needs of various segments of the population, 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, many felt that the county was doing a “poor” or “adequate” job of meeting the needs of seniors in the Summit County. In addition, some informants specifically mentioned long-term care options for seniors when asked to name their top priorities for the county in coming years.