

**Polk County Family & Community Outreach  
Falls City Area Health Access and Barriers Survey**



**Survey October 2022-December 2022  
Report March 2023**

*Funded Through a Grant from  
The Willamette Health Council  
Salem, Oregon*

# **Polk County Family & Community Outreach Falls City Area Health Benefits and Barriers Survey February 2023**

## **Overview**

Polk County's Family & Community Outreach (FCO) Department received a grant of \$24,500 from the Willamette Health Council to survey Falls City area residents about their health and wellness needs and barriers. The voluntary survey of residents was provided both on-line and in paper form. The survey was initiated on October 17 and concluded on December 17, 2022. Falls City was selected because it is rural with no physical healthcare or dental services providers located within the zip code area. There are also no local mental health providers except for one school-based mental health employee and limited Polk County Behavioral Health service in a rented location one day per week and in the school one day per week.

Outreach to the community regarding this survey was done via various on-line, mail and in-person actions. These and other actions related to the project are identified in the *Task and Timelines* list in the Appendix. Residents identified social media, mail, and through-the-school as the three most common ways they learned about the survey. An incentive gift card was provided to each household completing a survey.

The project was designed and directed by a workgroup of Polk County FCO employees, two OHSU School of Nursing interns and a project manager (consultant). The workgroup met regularly to keep the process moving and adapt as needed. The workgroup is identified on the *Task and Timelines* pages 28-30 in the Appendix.

The Falls City boundary includes some Dallas addresses, and given the rural nature of the surrounding area, the survey outreach was mailed to a total of 840 residences which extended for a four-mile radius beyond the city limits of Falls City. The survey consisted of 65 demographic, health, wellness, barriers, and technology questions. 240 respondents in the Falls City and adjacent area completed the survey. This response represents 782 residents (554 adults and 228 children). Analysis showed the returns represented 40% of the U.S. mail addresses in Falls City and over 70% of the area's total population.

After completion of the survey, the data sets were analyzed using disaggregation factors and correlation factors. The Survey Process, Demographics, and Data Graphs are presented on pages 2 through 14. Key Findings, Outreach Information, Summary and Recommendations are presented on pages 15 through 18. Additional data charts are in the Appendix.

## **Planning and Process to Initiate and Complete the Falls City Area Health Survey**

In early June 2022, Brent DeMoe, Director of Family & Community Outreach (FCO) Department and Dave Guile, Sounds of Silence, Inc. met and discussed the need to gather healthcare information and technology access in Falls City, a rural area of Polk County, Oregon. Sounds of Silence (SOS Inc.) has consulted with Polk County on several other projects over the past 12 years. SOS Inc. also conducted the feasibility study for the Monmouth-Independence School-Based Health Center which was successfully implemented in 2015. After reviewing the Willamette Health Council's Community Impact Funding Opportunities information, FCO decided to apply for a mini grant to fund a health access and barriers survey for the Falls City area. Polk County was notified on August 17 that the grant request had been approved. The application had two main goals:

1. To determine the family and community healthcare utilization and needs/barriers
2. To identify potential avenues and the necessary resources to meet those needs, including the viability of telemedicine and mobile health options.

Once the grant funding was in place, a workgroup consisting of Family & Community Outreach employees, two OHSU School of Nursing interns, and Brent and Dave convened. The workgroup membership is shown on the *Task and Timelines* spreadsheet in the Appendix. The next steps were to 1) identify the information needed, 2) plan outreach strategies and 3) communicate with community leaders. These steps were completed by the workgroup in September and October 2022. At the same time, the survey was developed and reviewed. The workgroup decided to wait on any focus group meetings until it saw the initial survey responses. If the response rate was reasonable, doing focus groups might not be necessary.

Utilizing an incentive program was one key to getting a solid survey return rate. The workgroup agreed to provide a \$25 gift card (limited to 1 per household) for people that completed the survey. Additionally, survey respondents would be entered in a drawing for gift baskets valued at approximately \$400.

Outreach and communication strategies began in early October. Amber Kramer oversaw the survey formatting and managed all survey activities. The survey was completed and went live on-line on October 17. It stayed active until December 16. During the last two weeks of the survey period after a reminder mailing, the workgroup offered a paper copy of the survey, and 14 additional surveys were submitted. Every two weeks during the survey period, the workgroup met to examine data collected and discussed any additional outreach efforts needed or concerns raised.

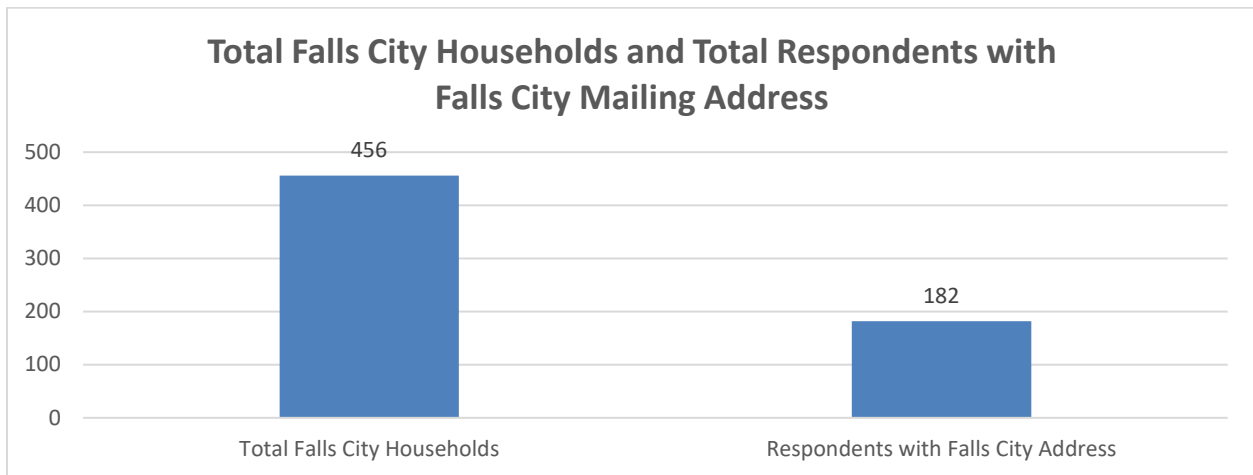
## **Survey**

The survey consisted of 15 demographic questions, 9 healthcare questions (multiple choice – 91 data points), a resources-needed question and a comments section. The survey was originally offered only on-line. By November 12, there were over 140 responses and just over 200 by December 2. It was decided there was not a need for focus groups or individual interviews, but there was a concern that people without technology access might not be represented. A paper survey was prepared and was available from December 9-16. During this period 14 surveys were collected. After eliminating duplicate surveys from the same household/same family there were 240 unduplicated surveys collected representing 224 distinct household addresses. 182 of the surveys came from households with a Falls City mailing address. The remainder came from proximity areas within the four-mile radius of the city boundary. There were 16 respondents who represented different families, but at the same address as another respondent. We counted these respondents as their own household.

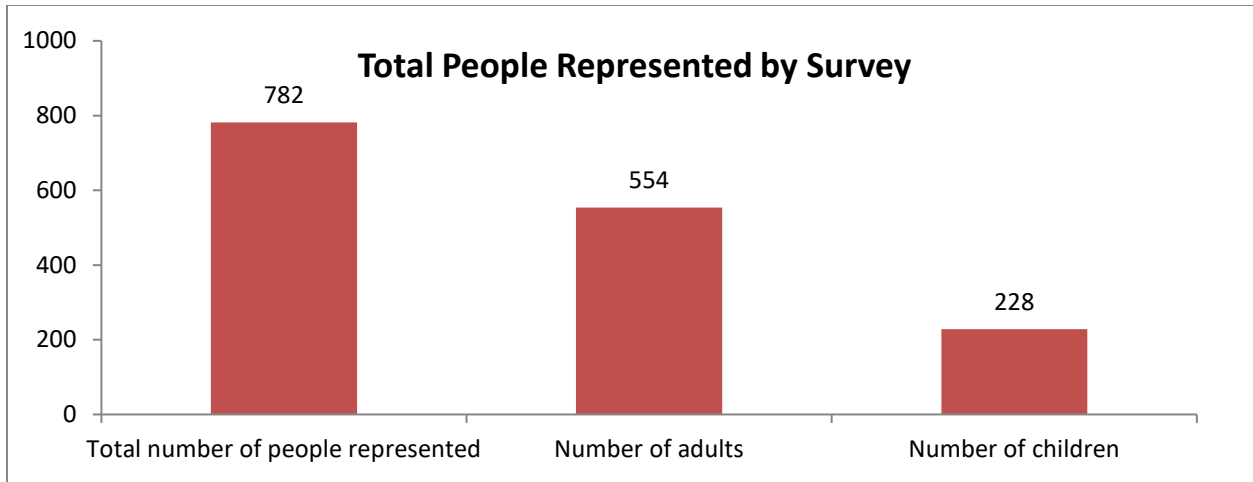
Principal data graphs and demographics follow here. Some of the additional data is shown in the Appendix.

## **Data and Graphs**

40% of survey respondents had a Falls City mailing address which represents 591 people.



With the adjacent area (4-mile radius from city boundary) included, the survey responses represent 782 people and 240 households.



### **Respondent Demographics**

#### **240 Respondents with 224 Distinct Addresses**

182 Respondents with Falls City Address (240 Respondents within a 4-mile radius of Falls City)  
 45 with a Dallas Address (all within 4-mile radius of Falls City)  
 10 with a Monmouth Address, 1 Newberg Address, 1 Halsey Address, 1 Homeless

#### **Households with Children**

103 Respondents had children in the household (43% of all respondents)

#### **Race or Culture Self Identification**

221 White (92.5%)  
 10 Indian or Native Alaskan  
 5 Hispanic or Latino  
 1 Native Hawaiian or Pacific Islander  
 1 Mixed  
 1 European  
 1 Ashkenazi

#### **Gender Identification**

167 female (70%)    72 male    1 non-binary

#### **Age Range of Respondents**

Ages 18-30: 12 (5%)    Ages 31-45: 85 (36%)    Ages 46-64: 86 (36%)    Ages 65+: 57 (24%)

#### **Receive Healthcare in the Same City where Employed (130 working outside home)**

Dental Care: 14 (11%)    Regular Doctor: 12 (9%)

#### **Internet Access**

89.2% have Internet (73% cable/fiber, 9% satellite, 12% cell, 6% unsure)  
 10.8 % did not answer or do not have Internet

### How Long Have Lived in Falls City Area

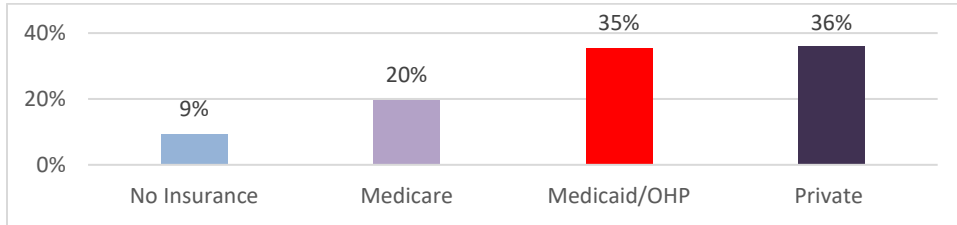
Average - 13.98 years (range 3 months to 73 years)

### Employment

Full-time Employed: 98 (40%)      Part-time Employed: 36 (15%)

Unemployed/retired: 106 (45%)

### Percent of Respondents by Insurance Type



### Respondent Demographics – December 2022 Compared With 2020 Census Data

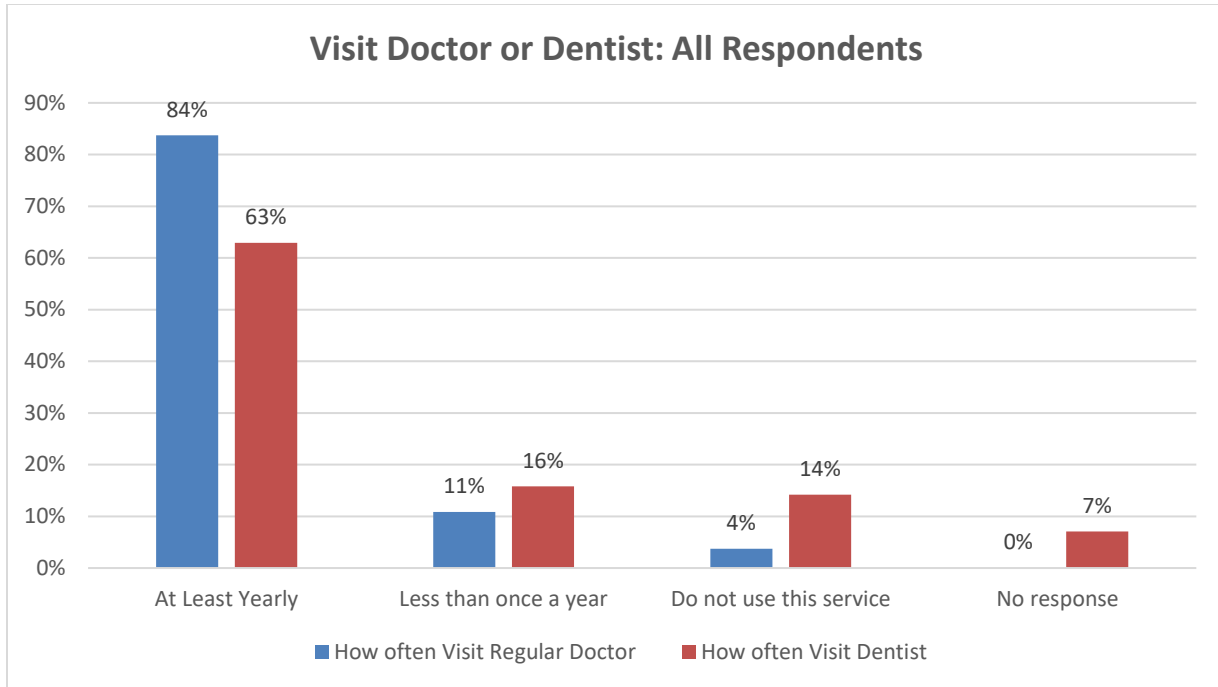
#### 240 Total Respondents Representing 782 Residents

	2020 Census	2022 Health Access Survey: All Respondents	2022 Health Access Survey: Falls City Address Only
Total Population	1051	782	591
Adults	831	554	423
Children	220	228	168

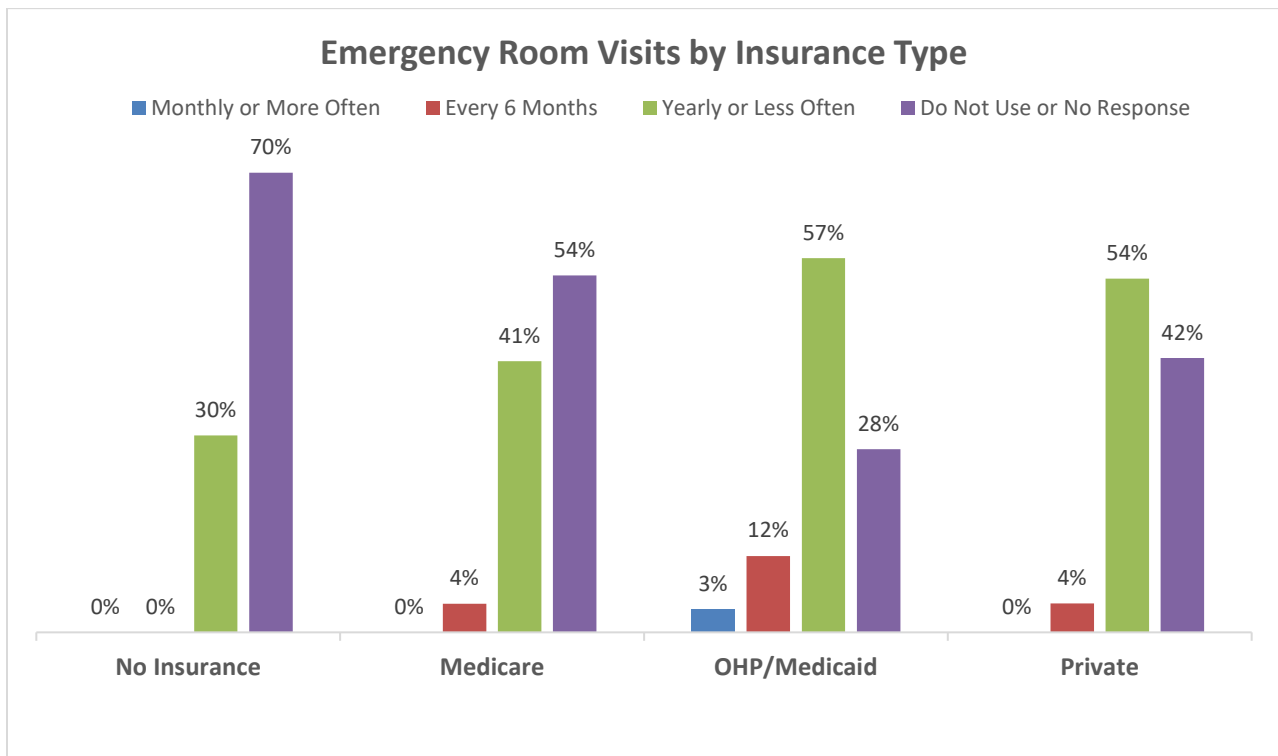
#### Race or Culture Self Identification

	2020 Census Numbers	% of Census Total	2022 Survey Respondents	% of Respondents Total
White	880	83.7%	221	92.1%
American Indian/Alaskan Native	21	2.0%	10	4.2%
Asian	5	0.4%	0	0
Black or African American	1	0.1%	0	0
Native Hawaiian/Pacific Islander	1	0.1%	1	0.4%
Hispanic/Latino	47	4.5%	5	2.1%
Two or more or other	96	9.1%	3	1.3%
<b>Total</b>	1051		240	

**Regularly Visit Doctor and Dentist – Full Details in Appendix**

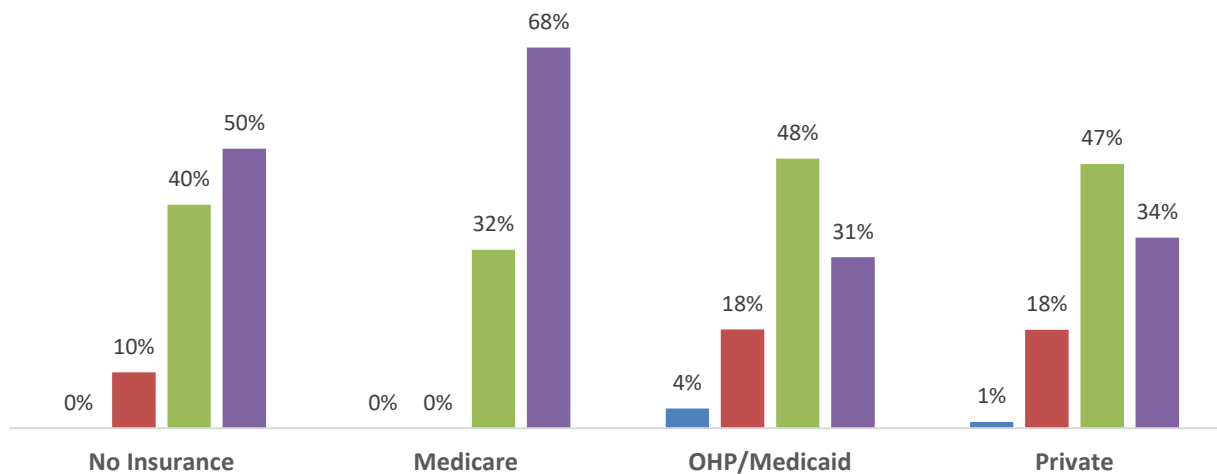


**Emergency Room and Urgent Care Visits by Insurance Type**

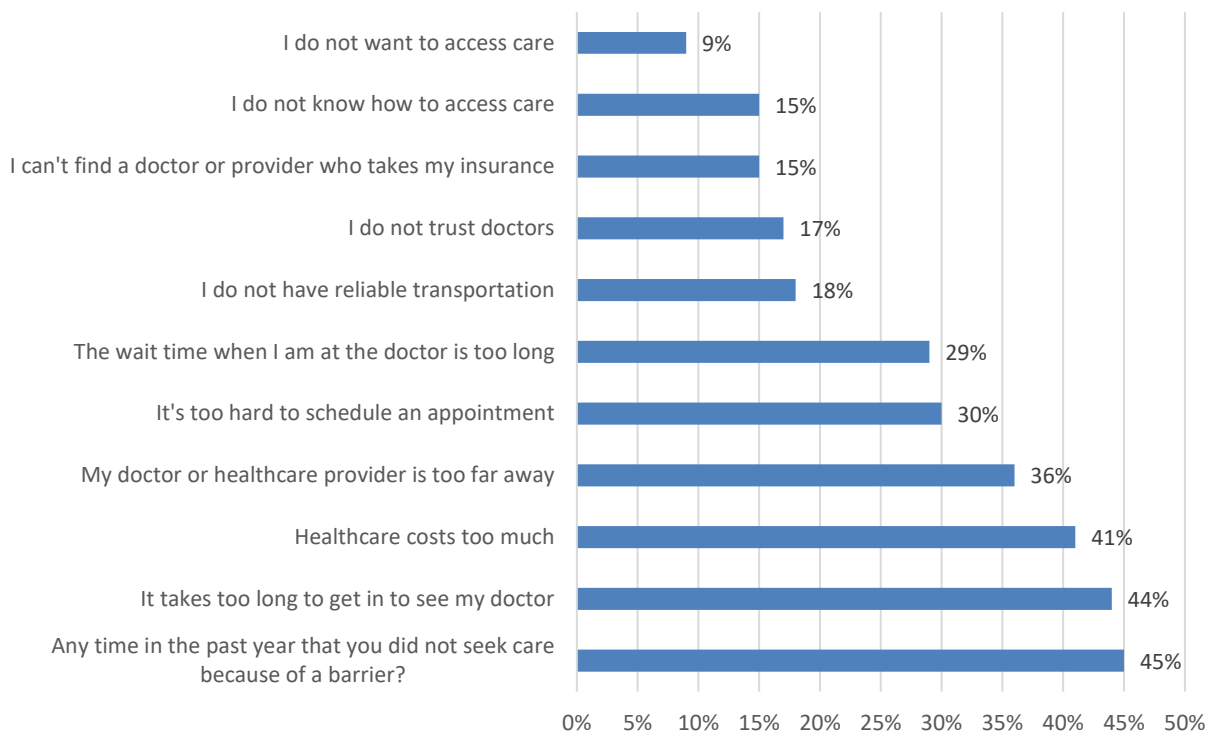


### Urgent Care Visits by Insurance Type

■ Monthly or More Often   ■ Every 6 Months   ■ Yearly or Less Often   ■ Do Not Use or No Response

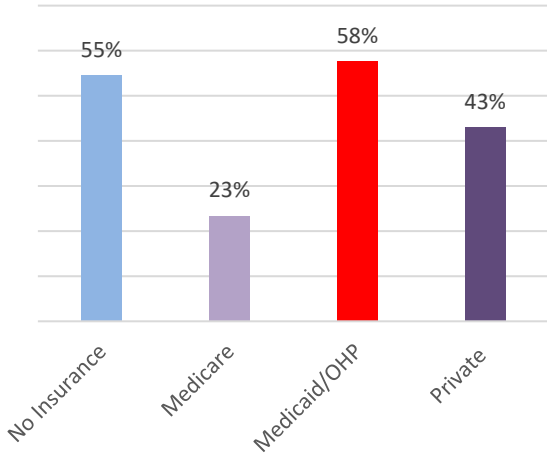


### Barriers Percent Yes: All Respondents

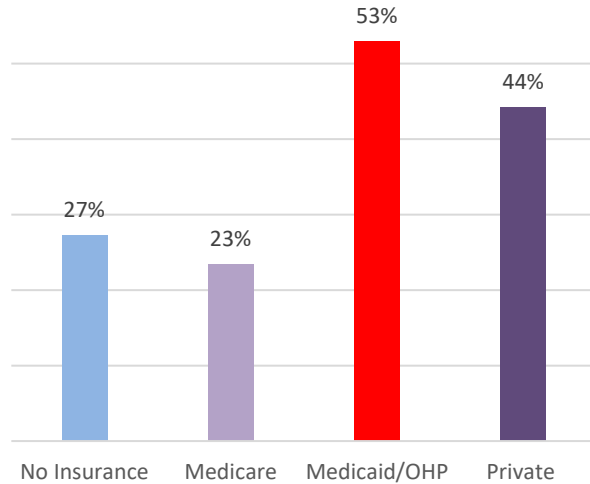




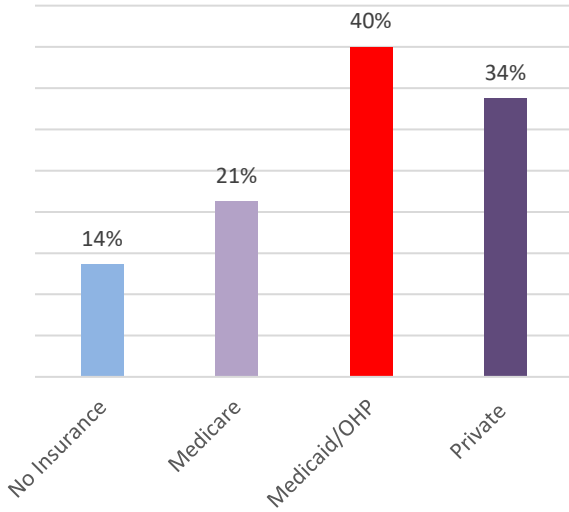
**Percent by Insurance Type:  
Did Not Seek Care at Least  
Once in the Past Year  
Because of a Barrier**



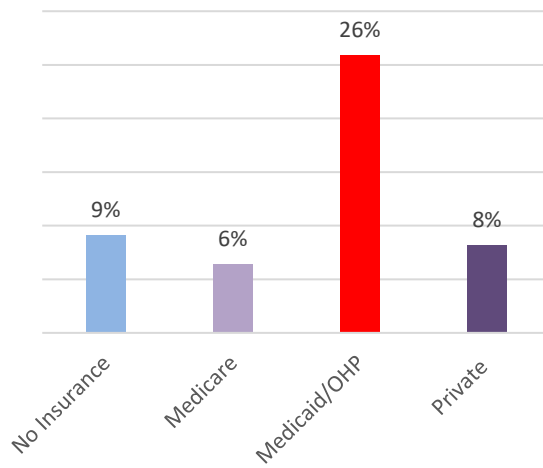
**Percent by Insurance Type:  
Takes Too Long to Get In to See  
My Doctor**



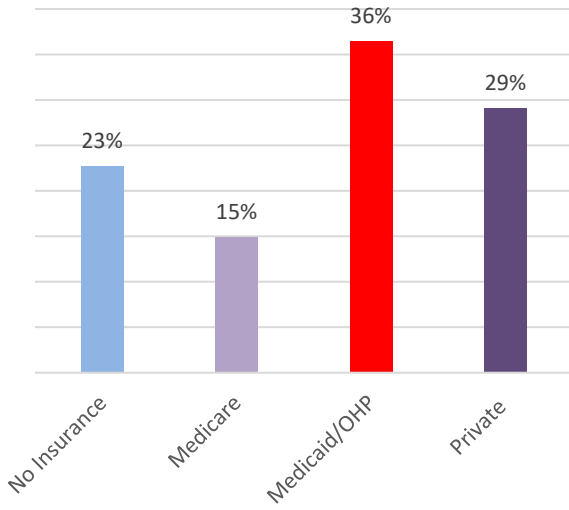
**Percent by Insurance Type:  
Doctor is Too Far Away**



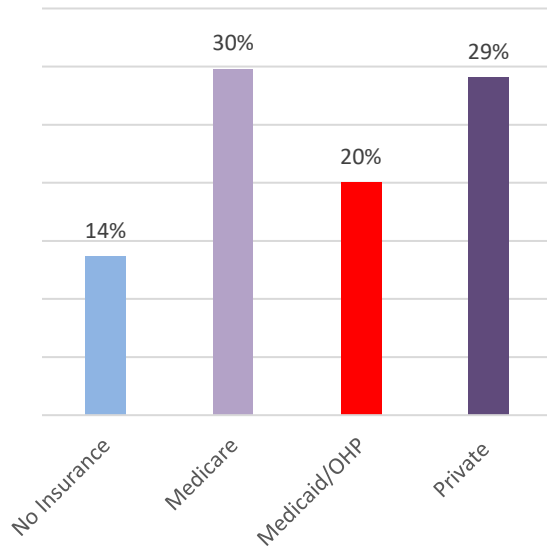
**Percent by Insurance Type:  
Find a Doctor to Take My  
Insurance**



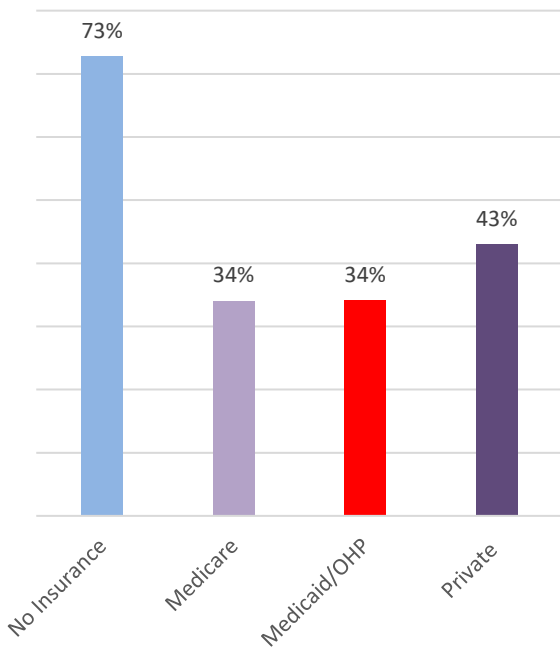
**Percent by Insurance Type:  
*Too Hard to Schedule  
Appointment***



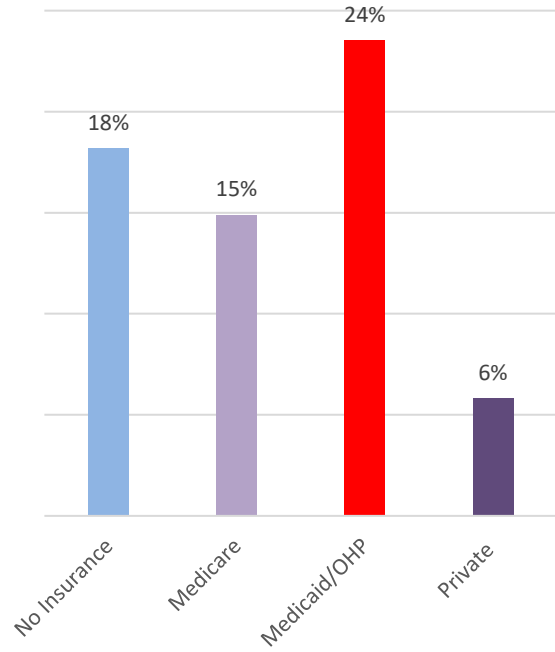
**Percent by Insurance Type:  
*Reporting No Barriers***



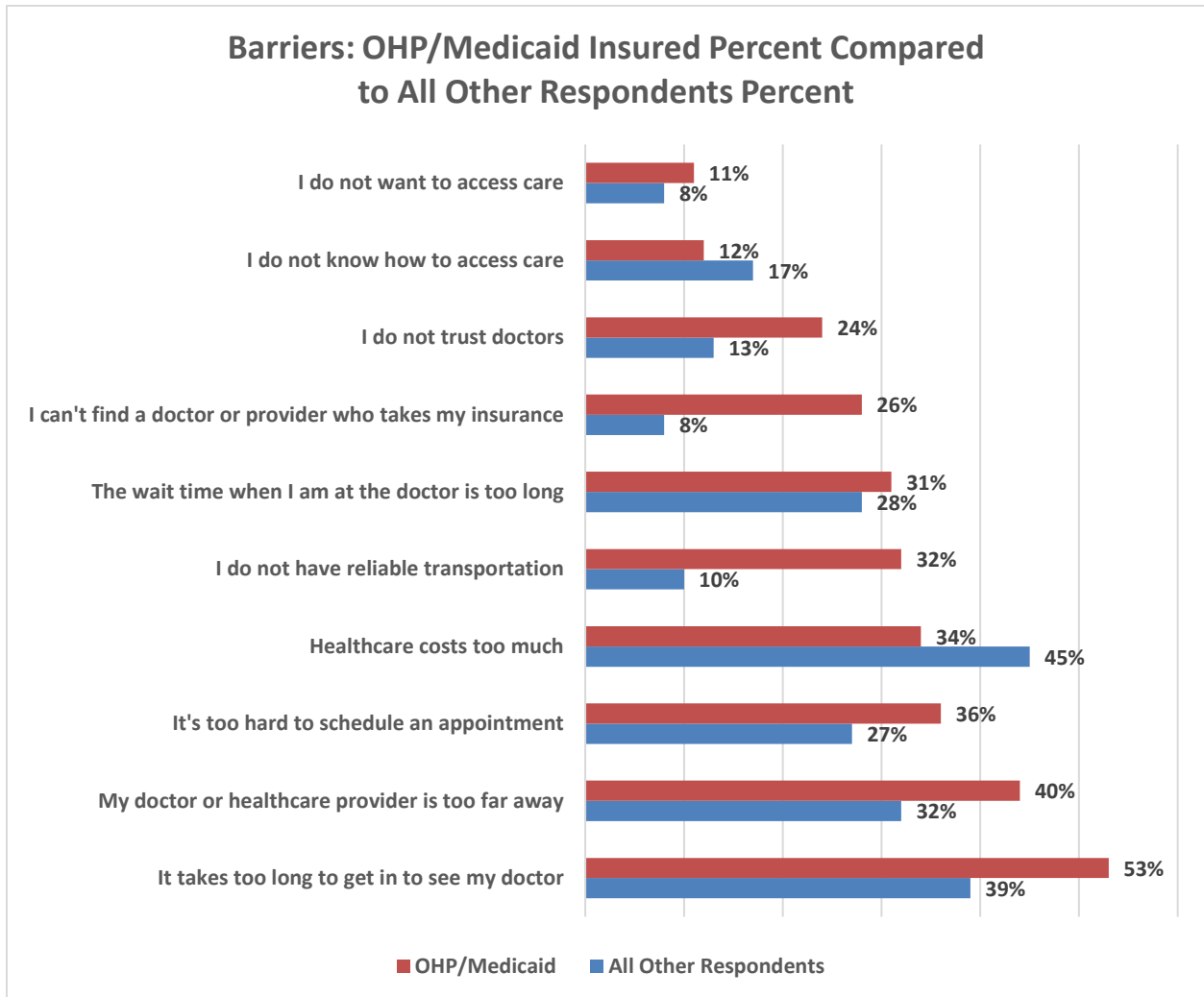
**Percent by Insurance Type:  
*Healthcare Costs Too Much***



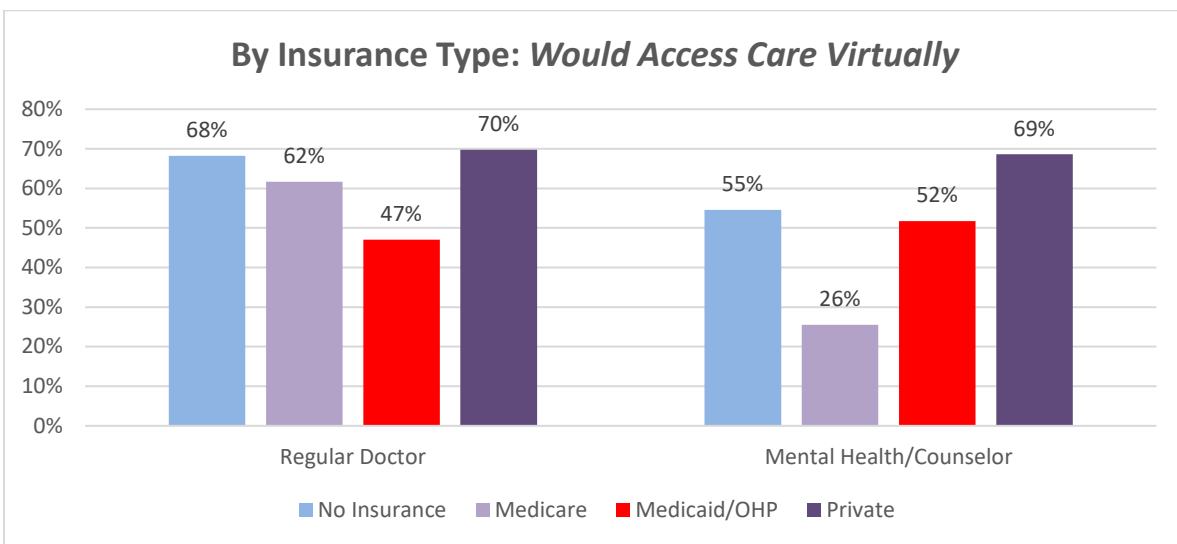
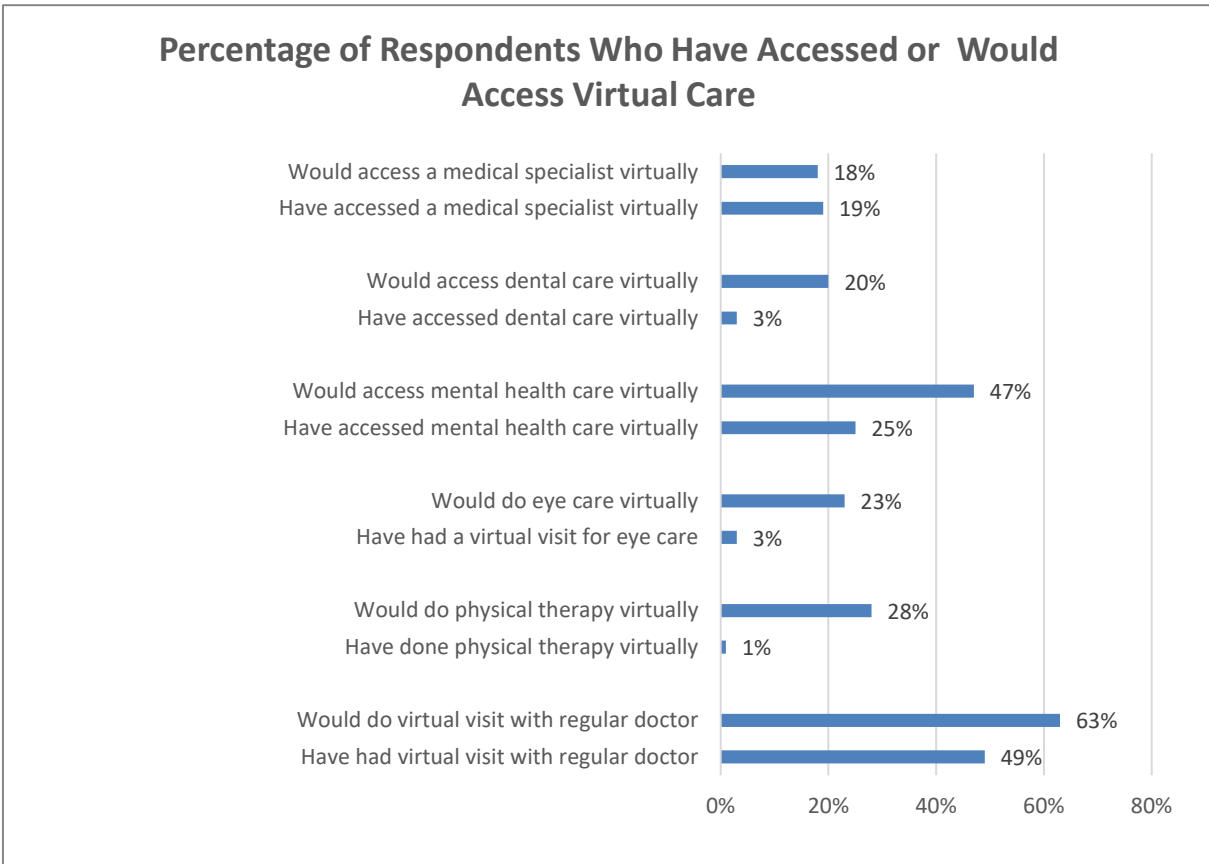
**Percent by Insurance Type:  
*I Do Not Trust Doctors***



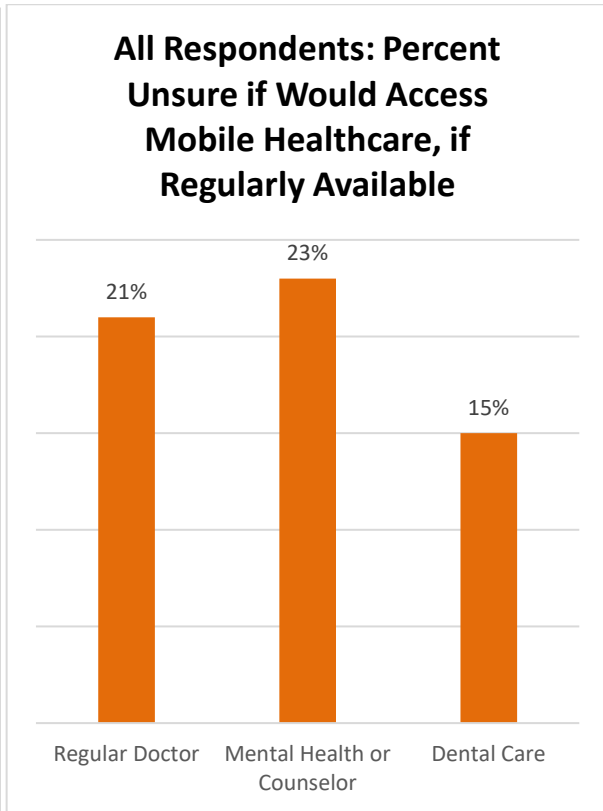
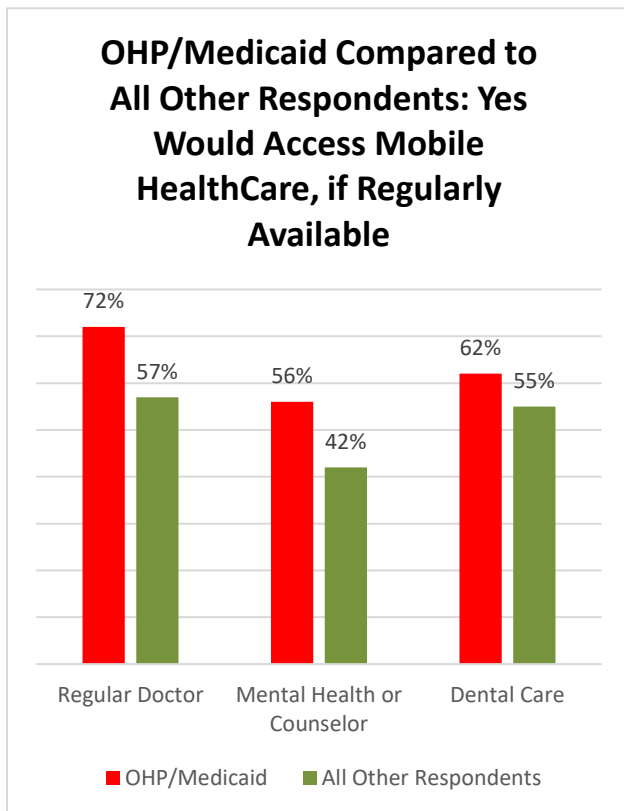
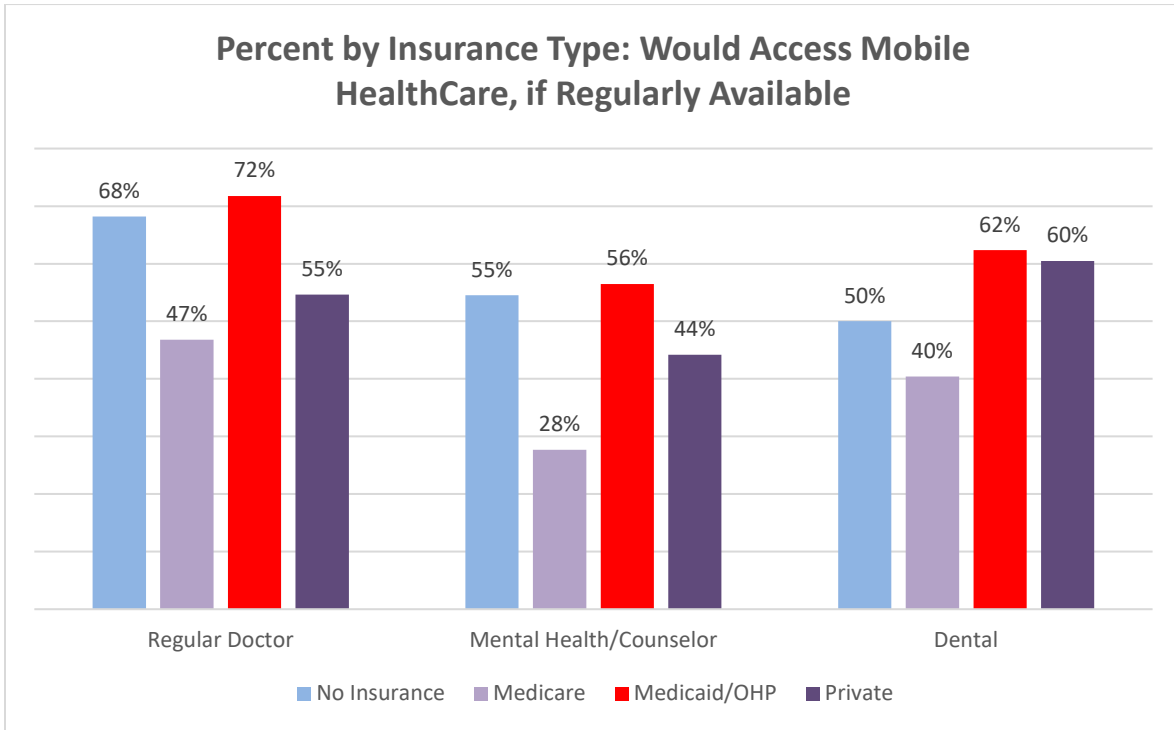
## Barriers to Accessing Health Care: OHP/Medicaid Compared to All Other Respondents



## Virtual Access to Care



## Mobile Access to Care



**All Respondents Compared to Respondents with Children:  
Virtual and Mobile Healthcare**

	<b>All Respondents: Have you ever accessed Regular Doctor (virtual visit)</b>	<b>Respondents with Children: Have you ever accessed Regular Doctor (virtual visit)</b>		<b>All Respondents: Have you ever accessed Mental Health Counselor or Therapist (virtual visit)</b>	<b>Respondents with Children: Have you ever accessed Mental Health Counselor or Therapist (virtual visit)</b>
<b>Yes</b>	<b>118</b>	<b>61</b>		<b>60</b>	<b>23</b>
<b>Percent: Yes</b>	<b>49%</b>	<b>59%</b>		<b>25%</b>	<b>22%</b>
<b>Number: Unsure</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>
<b>Number: No</b>	<b>122</b>	<b>42</b>		<b>180</b>	<b>80</b>
<b>Percent: No</b>	<b>51%</b>	<b>41%</b>		<b>75%</b>	<b>78%</b>

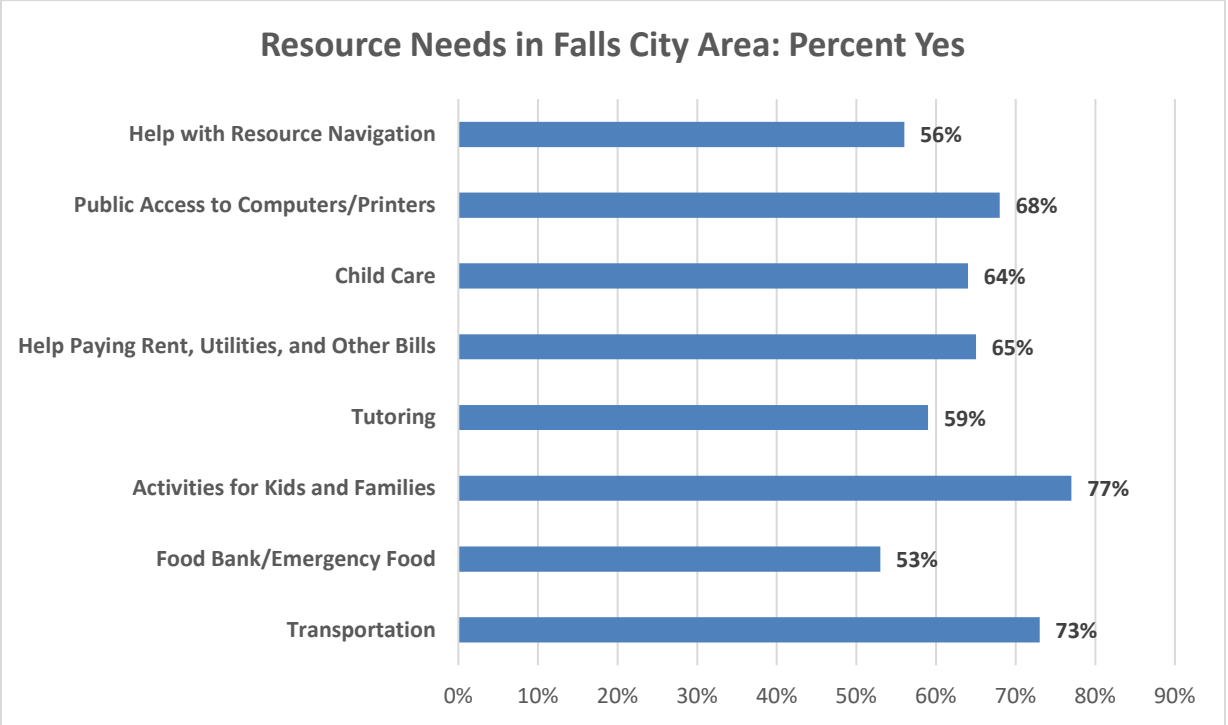
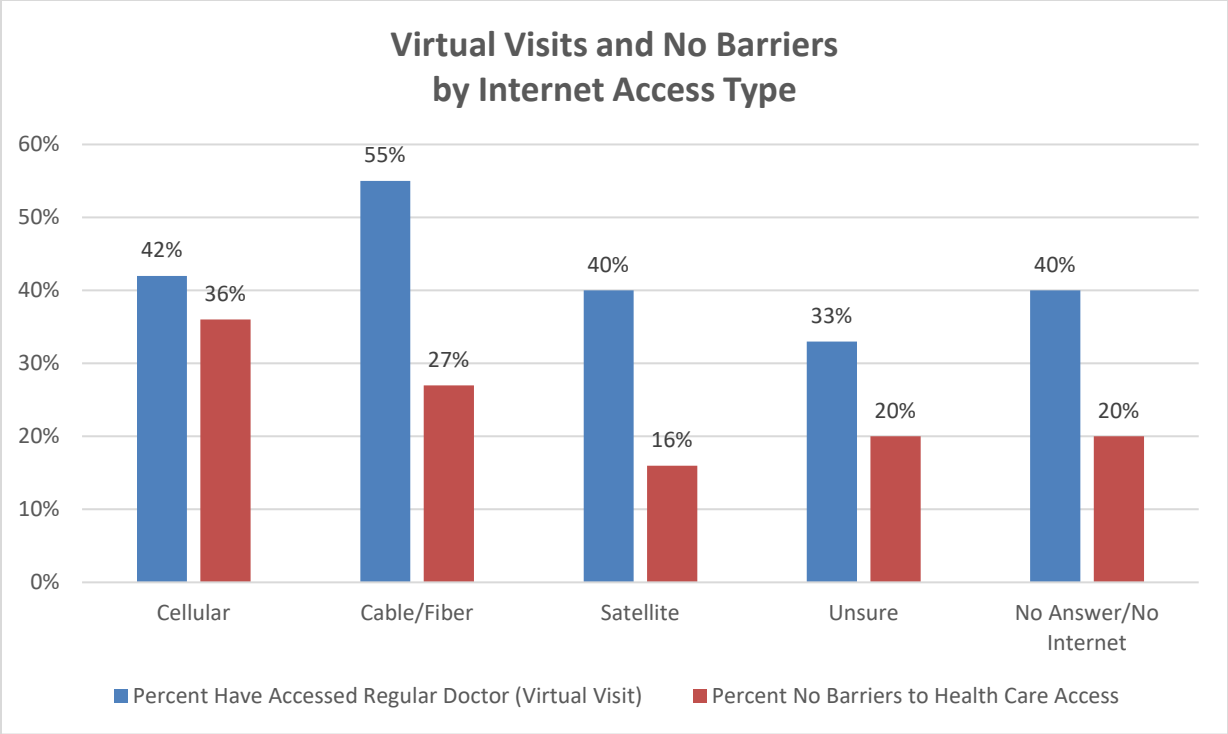
**Notes:** 10% difference for regular doctor (virtual) visits for respondents with children  
No significant difference for mental health (virtual)

**Would access mobile health services if it was available on a regular basis for:**

	<b>Regular Doctor: All Respondents</b>	<b>Regular Doctor: Respondents with Children</b>		<b>Mental Health Counselor: All Respondents</b>	<b>Mental Health Counselor: Respondents with Children</b>
<b>Number: Yes</b>	<b>148</b>	<b>73</b>		<b>113</b>	<b>51</b>
<b>Percent: Yes</b>	<b>62%</b>	<b>71%</b>		<b>47%</b>	<b>50%</b>
<b>Percent: Unsure</b>	<b>21%</b>	<b>15%</b>		<b>24%</b>	<b>22%</b>
<b>Percent: No</b>	<b>17%</b>	<b>14%</b>		<b>29%</b>	<b>28%</b>

	<b>Immunizations for Kids: All Respondents</b>	<b>Immunizations for Kids: Respondents with Children</b>		<b>Well Child Visits: All Respondents</b>	<b>Well Child Visits: Respondents with Children</b>
<b>Number: Yes</b>	<b>98</b>	<b>58</b>		<b>108</b>	<b>64</b>
<b>Percent: Yes</b>	<b>41%</b>	<b>56%</b>		<b>45%</b>	<b>62%</b>
<b>Percent: Unsure</b>	<b>23%</b>	<b>17%</b>		<b>20%</b>	<b>13%</b>
<b>Percent: No</b>	<b>37%</b>	<b>27%</b>		<b>35%</b>	<b>25%</b>

**Notes:** All Respondents = 240 and Respondents with Children =103



## Falls City Area Health Survey

### Respondent Closing Comments/Suggestions

(Note: similar comments have been combined into like categories)

Comment or Suggestion	Number
Need a local clinic, general practitioner, nurse or clinic	17
Need transportation help (or gas card) to get to healthcare provider	9
Need urgent care located in Falls City	5
Need mobile services for imaging, lab work, or vaccinations, well-child	5
Need dental services	5
Need vision coverage or help with glasses and exams	4
Need local pharmacy or pharmacy delivery	3
Need better treatment for addictions	2
Need help finding doctor and getting a timely appointment	2
Need more healthcare fairs to get vaccinations and well-child checks	2
Too far to get to specialist (i.e. OHSU)	2
Need school-based health center (open to community too)	1
Provide local yearly adult check-ups	1
Need local psychologist	1
Need better local cell network	1
Need better healthcare access for elderly	1
Need better options for healthy/quality foods	1
Need insurance companies to allow access to doctors that are closer	1



## **Key Findings**

### **Demographics**

1. 40% of Falls City households returned a survey representing 782 people
2. Almost 90% of households have Internet access
3. 8% of respondents identified as uninsured

### **Access/Barriers**

1. 84% of respondents indicate they see a regular doctor at least yearly
2. 63% of respondents indicate they see a dentist at least yearly
3. 41% of respondents reported “healthcare costs too much”
4. 44% of respondents reported “it takes too long to get in to see my doctor”
5. 45% of all respondents and 58% of OHP/Medicaid respondents reported they did not seek care at least once during the past year due to one or more listed barriers.

### **Virtual/Mobile**

1. 49% of respondents reported having had a virtual doctor visit and 63% indicated they would consider utilizing virtual healthcare in the future
2. 25% of respondents reported accessing mental health or counseling virtually
3. 62% of respondents indicated they would utilize mobile health care to see a regular doctor
4. Respondents with children had a 59% rate of virtual visits with doctors compared to the general survey rate of 49%

## **Outreach Success**

In addition to providing a \$25 gift card, the high rate of survey response may be linked to the variety of outreach efforts. Using the water bill/regular mail received the highest response. Workgroup members attended ten community events and distributed information. The survey was provided electronically, in-person, and on paper. When residents were asked how they found out about the survey the data showed the following response numbers:

### **How Respondents Learned About Survey**

Mail/Water Bill: 74	Social Media: 51	School: 42
Community Event: 37	Family or Friend: 17	Flyer: 6
Restaurant: 5	Email/Text: 3	Resource Center: 2
FCO Website: 3	Meeting: 2	

### **Gift Card Distribution and Drawings**

A gift card option was selected by each respondent. Options included WalMart, Winco, Safeway or a local restaurant. Ninety-six respondents chose WalMart cards, 83 picked local restaurant cards, 33 chose Winco cards and 25 selected Safeway cards. All gift cards were mailed between December and February. The drawing for the ten gift baskets (valued at \$400 each) was done on January 30, 2023 and the winners were notified. The cost of incentives amounted to \$9700.

### **Reporting to Funders, Community, Supporters and Leaders**

A draft final report and all data was reviewed by the workgroup on February 13. A meeting with key members of the Willamette Health Council was also held on February 17. The final report is planned for publication distribution by March 22 with formal announcements to key stakeholders including a mailing to all Falls City area residents in early April.

### **Summary**

The data collected illustrates the health access and barriers diversity in the Falls City area and all parts of rural Polk County. The diversity shown is of circumstance and belief rather than demographics of age, gender, or race. Data on barriers such as not trusting doctors, time to get an appointment and finding a provider to accept insurance crossed typical demographic diversity categories. Issues including lack of transportation, healthcare cost, and wait times at an appointment were also identified as barriers for over 20% of survey respondents.

The data also provided no single methodology to address the health needs in the Falls City area. Some respondents wanted to have a local practitioner, while others identified mobile healthcare or virtual healthcare as options. It would be possible to address a subset solution from within the data, such as those without transportation, but no single subset represents even 40% of the rural population. Therefore, no single intervention will be the solo *right answer*. Mobile, event-based, and virtual access all had good levels of support with mobile health services having been identified as the most favorable.

What is likely needed to improve healthcare access in rural Polk County is a collection of outreach, education and hybrid-services that can be leveraged-up. This approach would require collaboration of Polk County departments such as Behavioral Health, Public Health, and Family & Community Outreach in concert with healthcare providers such as West Valley Hospital, NW Human Services, Salem Health, non-profits, private practitioners, insurers, and health oversight organizations such as the Willamette Health Council. Reconvening the interested parties who have met regarding healthcare would be beneficial to this effort. The local school district, key community groups, faith-based groups and local leaders will also be needed to move-the-needle on healthcare access and outcomes via an outreach, education, and hybrid-services model.

## **Recommendations**

1. Convene a steering committee of key healthcare, agency, and community leaders to define the specific health outcomes to be addressed in rural Polk County and benchmark goals for each outcome.
2. Establish and publicize a *Health and Wellness Connection* website which will host a listing of community and county resources as well as training modules to help residents attain the technology skills needed to learn about and/or participate in these virtual, mobile or event-based opportunities:
  - a. physician visits
  - b. well-child, well-adults, and vaccination events
  - c. physical therapy sessions
  - d. mental health consultations
  - e. drug/alcohol/suicide prevention activities
  - f. personal training sessions for strength and conditioning
  - g. dental consultations
  - h. exercise classes
  - i. nutrition and diet programs
  - j. personal wellness coaching
3. Examine the feasibility of establishing a physical location in Falls City that could serve as a mobile-care docking station as well as a virtual and in-person care point. This would need to include public access to technologies and tools (i.e. blood pressure stations) and private virtual conference rooms.
4. Implement and publicize event-based opportunities in Falls City for vaccines, well-child, and well-adult check-ups.
5. Identify and apply for grants or other funding to improve strategies and use of technology for households in rural areas modeled after John Hopkins Hospital-At-Home program for patients with chronic/acute illnesses.

Winston Churchill once said, ***“Healthy citizens are the greatest asset any country can have.”*** A collaborative effort to improve health outcomes in a rural area is certainly a noble undertaking and can reap huge rewards both for the current residents and future generations.

## **Appendix**

### **Summary Charts and Survey Questions**

#### **Demographic Data Provided Previously on Pages 3-5 of Report**

<b>Health Insurance Type and Frequency of Healthcare Visits</b>	<b>20</b>
<b>Emergency Room and Urgent Care by Insurance Type</b>	<b>21</b>
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<b>Barriers to Accessing Healthcare</b>	<b>23</b>
<b>Did Not Seek Care Due to Barrier and by Age Group</b>	<b>23</b>
<b>Internet Access Type and Doctor/Dentist Virtual Care</b>	<b>24</b>
<b>Internet Access by Age Group and No Barriers to Care</b>	<b>24</b>
<b>Preference for Mobile Health Care, if Offered</b>	<b>25</b>
<b>Respondents with Children Preference for Virtual/Mobile Care</b>	<b>26</b>
<b>Resources Needed in Falls City</b>	<b>27</b>
<b>Project Time and Tasks Spreadsheet</b>	<b>28-30</b>

## Respondent Health Insurance and Medical Visits

240 Respondents Representing 224 Distinct Households

### Health Insurance Type

Private Insurance: 86 (36%)

Medicare: 47 (20%)

Medicaid/ Oregon Health Plan: 85 (35%)

Uninsured: 20 (8%)

### Provider Visits In Person (# and % of responses)

	How often Visit Regular Doctor	How often Visit Dentist	How often see Eye Doctor	How often see Mental Health Counselor or Therapist	How often see Addictions Counselor or Therapist	How often visit Physical Therapist
More than monthly	7 (3%)	0	0	20 (8%)	0	12 (5%)
Monthly	22 (9%)	9 (4%)	3 (1%)	12 (5%)	5 (2%)	7 (3%)
Every 6 months	96 (40%)	89 (37%)	11 (5%)	5 (2%)	1 (>1%)	2 (1%)
Yearly	76 (32%)	53 (22%)	105 (44%)	4 (2%)	0	5 (2%)
Less than once a year	26 (11%)	38 (16%)	53 (22%)	17 (7%)	7 (3%)	19 (8%)
Do not use this service	9 (4%)	34 (14%)	58 (24%)	163 (68%)	205 (85%)	174 (73%)
No response	4 (2%)	17 (7%)	10 (4%)	19 (8%)	22 (9%)	21 (9%)

	Urgent Care Visits	Emergency Room Visits
More than monthly	1 (>1%)	0
Monthly	3 (1%)	3 (1%)
Every 6 months	33 (14%)	16 (7%)
Yearly	34 (14%)	30 (13%)
Less than once a year	69 (29%)	88 (37%)
Do not use this service	80 (33%)	84 (35%)
No response	20 (8%)	19 (8%)

**Emergency Room and Urgent Care Visits  
for OHP Insured and No Insurance Versus Total Responses**

	<b>Emergency Room Visits (OHP)</b>	<b>Emergency Room Visits (No Insurance)</b>	<b>Emergency Room Visits (All)</b>
<b>More than monthly</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Monthly</b>	<b>3 (4%)</b>	<b>0</b>	<b>3 (1%)</b>
<b>Every 6 months</b>	<b>10 (12%)</b>	<b>0</b>	<b>16 (7%)</b>
<b>Yearly</b>	<b>15 (18%)</b>	<b>2 (10%)</b>	<b>30 (13%)</b>
<b>Less than once a year</b>	<b>32 (38%)</b>	<b>4 (20%)</b>	<b>88 (37%)</b>
<b>Do not use this service</b>	<b>24 (28%)</b>	<b>10 (50%)</b>	<b>84 (35%)</b>
<b>No response</b>	<b>1 (&gt;1%)</b>	<b>4 (20%)</b>	<b>16 (7%)</b>

	<b>Urgent Care Visits (OHP)</b>	<b>Urgent Care Visits (No Insurance)</b>	<b>Urgent Care Visits (All)</b>
<b>More than monthly</b>	<b>1 (1%)</b>	<b>0</b>	<b>1 (&lt;1%)</b>
<b>Monthly</b>	<b>2 (2%)</b>	<b>0</b>	<b>3 (1%)</b>
<b>Every 6 months</b>	<b>15 (18%)</b>	<b>2 (10%)</b>	<b>33 (14%)</b>
<b>Yearly</b>	<b>16 (19%)</b>	<b>3 (15%)</b>	<b>34 (14%)</b>
<b>Less than once a year</b>	<b>25 (29%)</b>	<b>5 (25%)</b>	<b>69 (29%)</b>
<b>Do not use this service</b>	<b>24 (28%)</b>	<b>7 (35%)</b>	<b>80 (33%)</b>
<b>No response</b>	<b>2 (2%)</b>	<b>3 (15%)</b>	<b>17 (7%)</b>

**All Respondents: Virtual Healthcare **Have** Accessed and **Would** Access**

	Have you ever accessed Regular Doctor (virtual visit)	Would you ever access Regular Doctor (virtual visit)	Have you ever accessed Physical Therapy (virtual visit)	Would you ever access Physical Therapy (virtual visit)
<b>Yes</b>	118	152	3	68
<b>Percent Yes</b>	49%	63%	1%	28%
<b>Unsure</b>	0	47	0	60
<b>No</b>	122	41	237	112
<b>Percent No</b>	51%	17%	99%	47%

	Have you ever accessed Eye Doctor (virtual visit)	Would you ever access Eye Doctor (virtual visit)	Have you ever accessed Mental Health Counselor or Therapist (virtual visit)	Would you ever access Mental Health Counselor or Therapist (virtual visit)
<b>Yes</b>	8	54	60	113
<b>Percent Yes</b>	3%	23%	25%	47%
<b>Unsure</b>	0	53	0	57
<b>No</b>	232	133	180	70
<b>Percent No</b>	97%	55%	75%	29%

	Have you ever accessed Counselor or Therapist (virtual visit)	Would you ever access Addictions Counselor or Therapist (virtual visit)	Have you ever accessed Dental Care (virtual visit)	Would you ever access Dental Care (virtual visit)
<b>Yes</b>	11	75	7	48
<b>Percent Yes</b>	5%	31%	3%	20%
<b>Unsure</b>	0	60	0	55
<b>No</b>	229	105	233	137
<b>Percent No</b>	95%	44%	97%	57%

	Have you ever accessed Specialist (virtual visit)	Would you ever access Specialist (virtual visit)
<b>Yes</b>	45	43
<b>Percent Yes</b>	19%	18%
<b>Unsure</b>	0	17
<b>No</b>	195	180
<b>Percent No</b>	81%	75%

**All Respondents: Are any of the following a barrier for you to accessing health care in person?**

	My doctor or healthcare provider is too far away	I do not have reliable transportation	Healthcare costs too much	I can't find a doctor or provider who takes my insurance	I do not know how to access care	I do not trust doctors
<b>Total Response</b>	<b>240</b>	<b>240</b>	<b>240</b>	<b>240</b>	<b>240</b>	<b>240</b>
<b>Number Yes</b>	<b>86</b>	<b>42</b>	<b>98</b>	<b>37</b>	<b>36</b>	<b>40</b>
<b>Percent Yes</b>	<b>36%</b>	<b>18%</b>	<b>41%</b>	<b>15%</b>	<b>15%</b>	<b>17%</b>

	I do not want to access care	It's too hard to schedule an appointment	It takes too long to get in to see my doctor	The wait time when I am at the doctor is too long	I do not have any barriers	Any time in the past year that you did not seek care because of a barrier?
<b>Total Response</b>	<b>240</b>	<b>240</b>	<b>240</b>	<b>240</b>	<b>240</b>	<b>240</b>
<b>Number Yes</b>	<b>21</b>	<b>72</b>	<b>105</b>	<b>69</b>	<b>58</b>	<b>109</b>
<b>Percent Yes</b>	<b>9%</b>	<b>30%</b>	<b>44%</b>	<b>29%</b>	<b>24%</b>	<b>45%</b>

**Any time in the past year that you did not seek care because of a barrier - by age group.**

	Age 18-30	Age 31-45	Age 46-64	Age 65 +
<b>Total Response</b>	<b>57</b>	<b>85</b>	<b>67</b>	<b>31</b>
<b>Number Yes</b>	<b>15</b>	<b>41</b>	<b>39</b>	<b>14</b>
<b>Percent Yes</b>	<b>26%</b>	<b>48%</b>	<b>58%</b>	<b>45%</b>

**Notes:** 9 of 40 respondents (23%) who indicated they do not trust doctors also indicated they would not try virtual health care. These 9 represent 21% of all respondents indicating they would not try virtual health care.

Of 58 respondents reporting they do not have any barriers, 21 (36%) were not employed.

Of the 58 respondents reporting they do not have any barriers, 56 (97%) have insurance.

12 survey respondents did not answer the *do not have barriers* question.

The age group 46 to 64 years had the highest percentage of not seeking care because of a barrier.



**All Respondents: Type of Internet Access: Virtual Care, No Barriers**

Type of Internet Access	Number of Respondents	Number Have Accessed Regular Doctor (Virtual Visit)	Percent Have Accessed Regular Doctor (Virtual Visit)
Cellular	26	11	42%
Cable/Fiber	157	87	55%
Satellite	20	8	40%
Unsure	12	4	33%
No Answer/No Internet	25	10	40%

Type of Internet Access	Number of Respondents	No Response to No Barrier Question	No Barriers to Health Care Access	Percent No Barriers to Health Care Access
Cellular	26	1	9	36%
Cable/Fiber	157	8	40	27%
Satellite	20	1	3	16%
Unsure	12	2	2	20%
No Answer/No Internet	25	0	5	20%

	Number of Cellular Internet Users	Percent of Cellular Internet Users
Ages 18-30	4	15%
Ages 31-45	6	23%
Ages 46-64	9	35%
Ages 65 +	7	27%

**Notes:**

- Cable/Fiber had higher rate of virtual doctor visits**
- Cellular users had a higher rate of no barriers to health care access**
- The age group of 46-64 had the highest rate of Internet access via cellular**

**All Respondents: Would you ever access any of the following types of mobile health care if it was available on a regular basis in your community?**

	Regular Doctor	Physical Therapy	Eye Doctor	Mental Health Counselor or Therapist	Addictions Counselor or Therapist	Dental Care
<b>Number Yes</b>	<b>148</b>	<b>133</b>	<b>144</b>	<b>113</b>	<b>83</b>	<b>140</b>
<b>Percent Yes</b>	<b>62%</b>	<b>55%</b>	<b>60%</b>	<b>47%</b>	<b>35%</b>	<b>58%</b>
Number Unsure	51	51	39	57	56	37
Number No	41	56	57	70	101	63

	Specialist (Orthopedic, Cardiologist, etc.)	Immunizations for Kids	Well Child Visits	Flu Shots	COVID Related Needs
<b>Number Yes</b>	<b>120</b>	<b>98</b>	<b>108</b>	<b>142</b>	<b>141</b>
<b>Percent Yes</b>	<b>50%</b>	<b>41%</b>	<b>45%</b>	<b>59%</b>	<b>59%</b>
Number Unsure	52	54	47	30	52
Number No	68	88	85	68	57

**All Respondents Compared to Respondents with Children:  
Virtual and Mobile Healthcare**

	<b>All Respondents: Have you ever accessed Regular Doctor (virtual visit)</b>	<b>Respondents with Children: Have you ever accessed Regular Doctor (virtual visit)</b>		<b>All Respondents: Have you ever accessed Mental Health Counselor or Therapist (virtual visit)</b>	<b>Respondents with Children: Have you ever accessed Mental Health Counselor or Therapist (virtual visit)</b>
<b>Yes</b>	<b>118</b>	<b>61</b>		<b>60</b>	<b>23</b>
<b>Percent Yes</b>	<b>49%</b>	<b>59%</b>		<b>25%</b>	<b>22%</b>
<b>Unsure</b>	<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>
<b>No</b>	<b>122</b>	<b>42</b>		<b>180</b>	<b>80</b>
<b>Percent No</b>	<b>51%</b>	<b>41%</b>		<b>75%</b>	<b>78%</b>

**Notes:** 10% difference for regular doctor (virtual) visits for respondents with children  
No significant difference for mental health (virtual)

**Would access mobile health services if it was available on a regular basis for:**

	<b>Regular Doctor: All Respondents</b>	<b>Regular Doctor: Respondents with Children</b>		<b>Mental Health Counselor: All Respondents</b>	<b>Mental Health Counselor: Respondents with Children</b>
<b>Number Yes</b>	<b>148</b>	<b>73</b>		<b>113</b>	<b>51</b>
<b>Percent Yes</b>	<b>62%</b>	<b>71%</b>		<b>47%</b>	<b>50%</b>
<b>Number Unsure</b>	<b>51</b>	<b>16</b>		<b>57</b>	<b>23</b>
<b>Number No</b>	<b>41</b>	<b>14</b>		<b>70</b>	<b>29</b>

	<b>Immunizations for Kids: All Respondents</b>	<b>Immunizations for Kids: Respondents with Children</b>		<b>Well Child Visits: All Respondents</b>	<b>Well Child Visits: Respondents with Children</b>
<b>Number Yes</b>	<b>98</b>	<b>58</b>		<b>108</b>	<b>64</b>
<b>Percent Yes</b>	<b>41%</b>	<b>56%</b>		<b>45%</b>	<b>62%</b>
<b>Number Unsure</b>	<b>54</b>	<b>18</b>		<b>47</b>	<b>13</b>
<b>Number No</b>	<b>88</b>	<b>27</b>		<b>85</b>	<b>26</b>

**Notes:** All Respondents = 240 and Respondents with Children =103  
Respondents with children rated mobile health higher than all respondents

**All Respondents: Is there a need for more of the following resources in Falls City?**

	Transportation	Food Bank/Emergency Food	Activities for Kids and Families	Tutoring
<b>Number Yes</b>	<b>175</b>	<b>128</b>	<b>184</b>	<b>141</b>
<b>Percent Yes</b>	<b>73%</b>	<b>53%</b>	<b>77%</b>	<b>59%</b>
<b>Number Unsure</b>	<b>44</b>	<b>58</b>	<b>36</b>	<b>70</b>
<b>Number No</b>	<b>18</b>	<b>48</b>	<b>15</b>	<b>23</b>
<b>Unanswered</b>	<b>3</b>	<b>6</b>	<b>5</b>	<b>6</b>

	Help paying rent, utilities, and other bills	Child Care	Public Access to Computers/Printers	Help with Resource Navigation
<b>Number Yes</b>	<b>155</b>	<b>154</b>	<b>164</b>	<b>135</b>
<b>Percent Yes</b>	<b>65%</b>	<b>64%</b>	<b>68%</b>	<b>56%</b>
<b>Number Unsure</b>	<b>59</b>	<b>59</b>	<b>53</b>	<b>51</b>
<b>Number No</b>	<b>23</b>	<b>23</b>	<b>20</b>	<b>51</b>
<b>Unanswered</b>	<b>3</b>	<b>4</b>	<b>3</b>	<b>3</b>

**Notes: Each identified resource received over 50% affirmation of that need**

## Healthcare Barriers and Access Workgroup Time and Tasks

	<b>Action</b>	<b>Who</b>	<b>Date</b>	<b>Status</b>
1	Initial consultation with FCO Director	Brent, Dave	May 19	Complete
2	Develop project outline and tasks	Dave	May 21	Complete
3	Develop project budget	Dave	May 21	Complete
4	Review timelines and develop preliminary roster of workgroup members	Brent, Dave	May 23	Complete
5	Recruit study workgroup members	Brent	June	Complete
6	Inform County Commissioners of study	Brent	June	Complete
7	Research health services models for rural communities.	Dave	Oct./Nov.	Complete
8	Train workgroup in survey ethics/dynamics	Dave	Oct. 4	Complete
9	Revise on-line survey based on team input (finalize by Oct. 18)	Amber	Oct. 4-17	Complete
10	Develop draft community survey questions	Amber/Workgroup	Aug./Sept	Complete
11	Create introductory Feasibility Study e-mail (to be sent by Brent to various parties)	Dave	Oct. 5	Complete
12	Develop informational flyer (poster) 1 page, rack cards and lawn signs as introductory message about study process. Use QR code	Anna, Arele with Workgroup input	Oct.	Complete
13	Identify key stakeholders, businesses, churches etc.	Brent, Workgroup	Oct. 4	Complete
13b	<b>Contact and Outreach</b>			
b1	Falls City for water bill inclusion, FB page and website	Brent/Jeremy Teal	Oct/Nov	Complete
b2	School District for messages to all families (remind)	Brent/Dana/Alea	Oct-Dec	Complete
b3	Presence or Info at School and FC Events: Volleyball (10.20), Homecoming (10.28), Parent Conferences (11.21-22). Friday food events. Community Dinner (11.18.22)	Alea, Arele, Anna	Oct/Nov.	Complete
b4	High School Principal (Mike Kidd)	Brent/Dana	Oct	Complete
b5	Contact Churches - United Methodist, Mt. Gospel	Anna	Oct. 19	Complete
b6	Fire Chief (including Thanksgiving weekend breakfast)	Anna	Oct/Nov.	Complete
b7	Frinks General Store	Anna	Oct	Complete
b8	Post Office display (Poster)	Anna	Oct	Complete
b9	Reminder post card to all FC addresses (3 mi. radius)	Brent	Nov. 30	Complete
b10	Press Release/e-mail to partners with survey link	Brent	Oct. 18	Complete

b11	Post survey info on County or FCO website	Brent	Oct. 19	Complete
b12	Lawn signs on FC main street	Anna	Nov	Complete
b13	Table tents for Boondocks and Bread Board	Anna	Nov	Complete
b14	Walk-ins training for front desk staff	Stephanie	Oct	Complete
	<b>Data Collection and Communication</b>			
14	Workgroup Project Status Meeting	Workgroup	Oct. 17	Complete
15	Initiate Survey (On-Line)	Amber/Brent	Oct. 18	Complete
16	Provide monthly updates to FC SI Team and bi-monthly to Work Group	Amber	Monthly	Complete
17	Present project overview to all FCO staff	Brent, Workgroup	Oct	Complete
18	Research possible types rural health services	Dave	Oct/Dec	Complete
19	Research prevention actions possibilities and what other rural communities are doing	Annie/Abby	Nov./Jan	Complete
20	Determine suicide prevention role within various health services models	Abby	on-going	Complete
21	Workgroup Status Meeting	Brent/Workgroup	Nov. 2	Complete
22	Community Walk-About & Outreach Review	Brent/Dave	Nov. 17	Complete
23	Develop and provide paper survey	Amber	Nov.	Complete
24	Mid-Survey update for funders, community, etc	Brent, Dave, Anna, Arele, Amber	Nov. 28-30	Complete
25	Gather baseline data of families served from Polk County Public and Behavioral Health	Brent	Oct./Nov.	Complete
26	GIS Mapping of respondent addresses to determine any geographic areas with # below average responses	Brent/IT	Nov.	Complete
27	Enter paper survey data	Amber	Nov.-Dec	Complete
28	Send out gift card incentives	Amber	Nov-Jan	Complete
29	Review progress with County Commissioners	Brent	Monthly	Complete
30	Workgroup status meeting	Brent/Workgroup	Nov. 30	Complete
31	Correlation factors and data consolidation	Brent, Dave /IT	Dec.-Feb.	Complete
32	GIS Mapping of respondents and listing of property value for comparison of response rates	Brent, Dave/IT	Dec. - Jan.	Delayed
33	Mail survey reminder card to FC addresses	Abby, Amber	Dec. 5-9	Complete
34	Mail survey card to 97344 zip address external to FC	Abby, Amber	Dec. 5-9	Complete
35	Workgroup - survey status and initial data review	Brent/Workgroup	Dec. 13	Complete
36	Collect signs, posters, table tents, rack cards	Anna	Dec. 13-16	Complete
37	Post closing survey on FC school district pages	Dana	Dec. 15-16	Complete
38	Post survey-closing message on website, FB, SI, etc	Amber, Abby	Dec. 15-16	Complete

39	Close survey	Amber	Dec. 16	Complete
40	Conduct drawing for \$400 incentives	Amber	Jan. 31	Complete
41	Send <i>Thank You</i> message to key supporters	Assign	Jan. /Feb.	Complete
<b>Reporting and Follow-Up</b>				
42	Draft report	Dave	Jan	Complete
43	Workgroup review of process and lessons learned	Workgroup	Jan. 10	Complete
44	Workgroup review of draft final report	Dave, Workgroup	Feb. 13	Complete
45	Required Progress Reports to Willamette Health Council (mid-term progress report 11.17.22)	Brent/Dave	Feb. 17	Complete
46	Review final report/determine next steps	Brent/Workgroup	Mar. 1	Complete
47	Inform various audiences as needed	Brent, Workgroup	Mar./Apr.	Scheduled
48	Research and identify potential medical partners	Workgroup	Mar./Apr.	If needed
49	Research and identify any potential FC location(s) for on-site services or mobile services (if applicable)	Brent/Dave	Mar./Apr.	If needed
50	Implement recommendations as appropriate	TBD	TBD	

**Work Group**

Amber Kramer, Abby Warren, Annie Buse	Polk County Family & Community Outreach
Dana Goodell, Alea Littleton	School-Based Mental Health
Anna Burgess, Arele Nunez-Sanudo	OHSU School of Nursing Interns
Brent DeMoe, FCO Director and Dave Guile, Sounds of Silence Inc. Consultant	