



2020-2022 COMMUNITY HEALTH NEEDS ASSESSMENT

APPENDIX E: COMMUNITY WELLNESS ASSESSMENT & QUALITY OF LIFE SURVEY



Community Wellness Assessment

Thank you for taking the time to complete a short (5 minute or less) survey to help assess the health related needs in the community you live in. The survey is divided into two parts: Community Need and Quality of Life. Please take both parts of the survey as your opinions are valued and will help us identify health needs in your community. Our goal is to help provide healthier tomorrows throughout our region.

1) Your Contact Information:

We are asking for your contact information only to assure completeness of your survey responses. Your name will not be used in any publication or public presentation of the survey results.

Name: _____

The county you work in: _____

Your position title: _____

City/Town: _____

Email: _____

The county you live in: _____

2) What are the three (3) most important health problems in your community?

- | | |
|--|---|
| <input type="checkbox"/> Adult Obesity | <input type="checkbox"/> HIV/AIDS |
| <input type="checkbox"/> Alcohol Use | <input type="checkbox"/> Infecious Diseases |
| <input type="checkbox"/> Alzheimer's Disease | <input type="checkbox"/> Intellectual/Developmental Disabilities |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Mental Illness (depression, schizophrenia) |
| <input type="checkbox"/> Arthritis | <input type="checkbox"/> Prenatal & Pregnancy Care |
| <input type="checkbox"/> Autism | <input type="checkbox"/> Respiratory Diseases (other than asthma) |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Sexually Transmitted Diseases |
| <input type="checkbox"/> Childhood Obesity | <input type="checkbox"/> Substance Abuse-Illegal Drugs (meth, cocaine, marijuana) |
| <input type="checkbox"/> Dental Care/Oral Health | <input type="checkbox"/> Substance Abuse-Prescription Drugs |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Teen Pregnancy |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Tobacco Use |
| <input type="checkbox"/> Heart Disease & Stroke | <input type="checkbox"/> Other |

Please use this space to add any additional health problems you did not see on the list. Also use this space to elaborate on any of your answers above.

3) In terms of AVAILABILITY, which community health services need strengthening?

Please check the TOP three (3) services which you think needs strengthening in terms of AVAILABILITY (services that are present and ready to use).

- | | |
|---|--|
| <input type="checkbox"/> Aging Services | <input type="checkbox"/> Hospital Services |
| <input type="checkbox"/> Chronic Pain Management | <input type="checkbox"/> Maternal, Infant & Child Health |
| <input type="checkbox"/> Dental Care/Oral Health | <input type="checkbox"/> Mental Illness |
| <input type="checkbox"/> Developmental Disabilities | <input type="checkbox"/> Patient Self-Management (nutrition, exercise, taking medications) |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Pharmacy Services |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Primary Health Care |
| <input type="checkbox"/> Early Detection & Screening | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Environmental Health | <input type="checkbox"/> School Health |
| <input type="checkbox"/> Food Safety Nets/Basic Needs | <input type="checkbox"/> Social Services |
| <input type="checkbox"/> Heart Disease & Stroke | <input type="checkbox"/> Specialty Medical Care (cardiologist, oncologist, etc) |
| <input type="checkbox"/> Health Care Coverage | <input type="checkbox"/> Substance Abuse Treatment (alcohol, illegal & prescription drugs) |
| <input type="checkbox"/> Health Education | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Home Health | <input type="checkbox"/> Other |
| <input type="checkbox"/> Hospice | |

Please use this space to add any additional health problems you did not see on the list. Also use this space to elaborate on any of your answers above.

4) In terms of ACCESS, which community health services need strengthening?

Please check the TOP three (3) services which you think needs strengthening in terms of ACCESS (can you get to them).

- | | |
|---|--|
| <input type="checkbox"/> Aging Services | <input type="checkbox"/> Hospital Services |
| <input type="checkbox"/> Chronic Pain Management | <input type="checkbox"/> Maternal, Infant & Child Health |
| <input type="checkbox"/> Dental Care/Oral Health | <input type="checkbox"/> Mental Illness |
| <input type="checkbox"/> Developmental Disabilities | <input type="checkbox"/> Patient Self-Management (nutrition, exercise, taking medications) |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Pharmacy Services |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Primary Health Care |
| <input type="checkbox"/> Early Detection & Screening | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Environmental Health | <input type="checkbox"/> School Health |
| <input type="checkbox"/> Food Safety Nets/Basic Needs | <input type="checkbox"/> Social Services |
| <input type="checkbox"/> Heart Disease & Stroke | <input type="checkbox"/> Specialty Medical Care (cardiologist, oncologist, etc) |
| <input type="checkbox"/> Health Care Coverage | <input type="checkbox"/> Substance Abuse Treatment (alcohol, illegal & prescription drugs) |
| <input type="checkbox"/> Health Education | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Home Health | <input type="checkbox"/> Other |
| <input type="checkbox"/> Hospice | |

Please use this space to add any additional health problems you did not see on the list. Also use this space to elaborate on any of your answers above.

5) In terms of QUALITY, which community health services need strengthening?

Please check the TOP three (3) services which you think needs strengthening in terms of QUALITY(how good are the services).

- | | |
|---|--|
| <input type="checkbox"/> Aging Services | <input type="checkbox"/> Hospital Services |
| <input type="checkbox"/> Chronic Pain Management | <input type="checkbox"/> Maternal, Infant & Child Health |
| <input type="checkbox"/> Dental Care/Oral Health | <input type="checkbox"/> Mental Illness |
| <input type="checkbox"/> Developmental Disabilities | <input type="checkbox"/> Patient Self-Management (nutrition, exercise, taking medications) |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Pharmacy Services |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Primary Health Care |
| <input type="checkbox"/> Early Detection & Screening | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Environmental Health | <input type="checkbox"/> School Health |
| <input type="checkbox"/> Food Safety Nets/Basic Needs | <input type="checkbox"/> Social Services |
| <input type="checkbox"/> Heart Disease & Stroke | <input type="checkbox"/> Specialty Medical Care (cardiologist, oncologist, etc) |
| <input type="checkbox"/> Health Care Coverage | <input type="checkbox"/> Substance Abuse Treatment (alcohol, illegal & prescription drugs) |
| <input type="checkbox"/> Health Education | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Home Health | <input type="checkbox"/> Other |
| <input type="checkbox"/> Hospice | |

Please use this space to add any additional health problems you did not see on the list. Also use this space to elaborate on any of your answers above.

6) Please check the top three (3) areas you feel are most important in making the residents of your community healthier.

- Improve access to health care
- Educate residents regarding health care issues and services
- Improve nutrition and eating habits
- Increase participation in physical activities and exercise programs
- Improve air quality, including more smoke free public areas
- Improve water quality
- Other

Please use the space below to share any additional ideas or suggestions which could help the Gateway Wellness Coalition.



Quality of Life Survey

Answer each question below and rank your opinion on a scale of 1 to 5	Least Positive			Most Positive	
1) Are you satisfied with the quality of life in your county?	1	2	3	4	5
2) Are you satisfied with the health care system in your county?	1	2	3	4	5
3) Is your county a good place to raise kids?	1	2	3	4	5
4) Is your county a good place to grow old?	1	2	3	4	5
5) Is there economic opportunity in your county?	1	2	3	4	5
6) Is your county a safe place to live?	1	2	3	4	5
7) Are there networks of support for individuals and families during times of stress and need?	1	2	3	4	5
8) Do all individuals and groups have the opportunity to contribute to and participate in the community's quality of life?	1	2	3	4	5
9) Do all individuals believe that they can make your county a better place to live?	1	2	3	4	5
10) Is there an active sense of responsibility among residents of your county to make it a better place to live?	1	2	3	4	5
11) Is there a sense of pride among residents of your county for their community?	1	2	3	4	5
12) Are community resources available to meet the overall needs of individuals and families in your county?	1	2	3	4	5

Gateway Wellness Coalition (GWC)
Assessing our communities for a healthier tomorrow

St. Claire Regional Medical Center (SCR), Morehead State University (MSU) and the Gateway District Health Department (GDHD) joined together to form the "Gateway Wellness Coalition". The GWC coalition is conducting extensive community health need assessments in 4 of the Gateway area counties (Bath, Menifee, Morgan & Rowan). The goal for the assessments is to help identify the most crucial health needs and concerns in our region so we can work together to develop a plan of action to address the identified health priorities.
http://www.st-claire.org/gateway_wellness_coalition.aspx