

# Teller County

## 2022 Community Health Assessment





# Teller County 2022 Community Health Assessment

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Greetings Fellow Teller County Residents, Leaders and Community Partners,

Teller County Public Health and Environment (TCPHE) is pleased to present the 2022 Community Health Assessment (CHA) and 2023-2028 Community Health Improvement Plan for Teller County. As required by Colorado's Public Health Improvement Act of 2008, local public health agencies (LPHA's) are to complete a CHA every five years. For our third Community Health Needs Assessment we built upon the relationships established in previous assessments. We again partnered with the Colorado School of Public Health (CSPH). With grant funding secured, we were able to expand our partner base to include OMNI Institute (OMNI), a nonprofit social science consultancy. This collaborative report provides a summary of the health and wellness landscape of our county, prioritizing the top health concerns that were derived from the comprehensive assessment to improve the health and wellness of our community.



The CHA report builds the foundation for TCPHE to implement improvement plans for the next five years, 2023-2028. It is with great optimism that you will find this information also provides a valuable summary of the health status in Teller County. We hope that it provides a better understanding of a healthy community and the role we all play in supporting health and wellness. Please join us in *protecting your health and embracing your future*. TCPHE will continue its mission, *to prevent disease and to protect and promote the health and environment of Teller County residents by assuring quality health programs and services*. We look forward to the support and engagement of numerous community members, community and county leaders, stakeholders and partner organizations, to address the priorities identified in the report as we continue with our vision; to promote *Healthy Mountain Living!*

Acknowledgements:

Teller County Public Health and Environment (TCPHE) would like to thank our community partners and residents for participating in our focus groups and community wide survey. We also would like to thank the Colorado School of Public Health students, Amelia Cavazos, Courtney Fullwood, Krishangi Pokhrel, Cassidy Walter and Brian Whaley as well as their faculty advisors Dr. Virginia Visconti and Alison Grace Bui for their hard work and dedication and contributions towards the 2022 Teller County Community Health Assessment. A special thanks to our partners with OMNI, Dr. Katie Gelman, Dr. Ana Nunes, Sam Baron and Ivonne Parra as well for their professionalism and commitment to the development of our 2022 Teller County Community Health Assessment.

We would like to recognize the Teller County Administrator, Ross Herzog, and the Teller County Board of County Commissioners, Bob Campbell, Eric Stone and Dan Williams for their consistent support and leadership. Lastly, we want to express our most genuine gratitude for Martha Hubbard's mentorship and leadership, but mostly the kindness she has shown not just to us, but to our community.

Our sincerest appreciation, from the Teller County Public Health and Environment Team,

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# Introduction

Every five years, all public health agencies in Colorado are required to follow the Colorado Health Assessment and Planning System (CHAPS) process to create a public health improvement plan for submission to the Office of Public Health Practice, Planning, and Local Partnerships. Teller County Public Health and Environment (TCPHE) collaborated with the Colorado School of Public Health (CSPH) to review and report on secondary data sources to assist in the identification of public health issues of greatest concern in Teller County. TCPHE contracted with OMNI Institute (OMNI) to build upon this collaboration, including through the collection of community survey and focus group data. OMNI used the data provided by the CSPH to inform the community health needs assessment process that took place between February and September of 2022. This report details the health assessment process; data from a community survey, and community focus groups that included a youth and healthcare provider focus group.

## Methods

The community health assessment relied on data from several sources. This section of the report details methods used for data collection and identification of the priority health areas TCPHE will focus their attention for the next five years.



### Secondary Data Review

TCPHE partnered with CSPH to summarize available secondary data for Teller County on various health topics (e.g., chronic disease, substance use, mental health, injury prevention, sexual health, housing, healthy eating/active living, environmental health, etc.). Data were pulled from a number of secondary data sources, including Healthy Kids Colorado Survey, Colorado Department of Public Health and Environment (CDPHE) Colorado Health Indicators, U.S. Census, Colorado Office of Early Childhood, and CDC's BRFSS dashboard. The findings from the review were ultimately organized into a final report prepared by CSPH that may be found in Appendix A. OMNI conducted a supplemental secondary data review. Those supplemental findings are included in Appendix B.



### Community Survey

Informed by a facilitated conversation with TCPHE leadership and staff and the secondary data analysis, OMNI developed a community survey to better understand the pressing health issues as experienced by residents of Teller County. The survey was comprised of primarily closed-ended questions within each area of focus, as well as some open-ended questions to gain more nuanced insight into community members' perspectives on community health needs. A full copy of the survey is available upon request from TCPHE.

The survey was made available in an online format on the SurveyMonkey survey platform in both English and Spanish. The survey was distributed to the community via the TCPHE website, and flyers with the online survey link were distributed in public locations. TCPHE also used paper versions of the survey to collect responses from residents at the local farmer's market and local libraries. Participants were offered a \$10 gift card to participate in the survey. Ultimately, **290 community members** participated in the survey. Detailed demographic information regarding survey respondents may be found in Appendix C.



## Focus Groups

Four community focus groups were conducted by OMNI to gain a qualitative understanding of how health focus areas addressed in the survey impact the community. Two of the four focus groups were open to community members and conducted in-person with one taking place in Cripple Creek and the other in Woodland Park. The other two focus groups were conducted virtually and included one with healthcare professionals and the other with youth. In total, **27 community members** participated in the focus groups. Data and themes from the focus groups are integrated into this report



## Prioritization Meeting

OMNI facilitated a discussion with TCPHE leadership and key staff to review the findings from the quantitative and qualitative data collection efforts, to identify the health areas of greatest concern, and prioritize the health areas TCPHE is best situated to affect meaningful progress over the next five years.

# Priorities Overview

*The following provides details regarding the findings from the community survey, focus groups, and discussions with TCPHE. Findings from the resident health survey are presented in dark blue, and focus group themes or findings are presented in teal. Where appropriate, details from the secondary data review are incorporated and cited in the report. All secondary data findings may be found in Appendix A and B.*



**87%** of survey respondents reported that as whole, the health of Teller County was 'somewhat healthy', 'healthy', or 'very healthy'. Only 7% reported the county was unhealthy or very unhealthy (n=290).

## Top Ten Health Issues /Social Determinants of Health of Concern to Teller Residents

We presented survey respondents with a list of health areas and asked respondents to select the three health areas that need the most improvement in Teller County. The top three concerns identified were the need for more general health providers, affordable housing options, and mental health treatment options (e.g., counseling, support groups). The following reflects the top ten health areas identified by the community members.

|   |   |
|---|---|
|  More <b>general health care providers</b> (38%)   |  <b>Higher paying employment opportunities</b> (18%)     |
|  More <b>affordable housing</b> options (38%)      |  <b>Safer roads and drivers</b> (16%)                    |
|  More <b>mental health treatment options</b> (32%) |  <b>Positive teen activities</b> (13%)                   |
|  More <b>specialty care providers</b> (28%)        |  More and improved <b>aging adult care</b> options (13%) |
|  More <b>affordable health services</b> (21%)      |  Access to <b>healthy food</b> choices (12%)             |

Using these findings along with themes that emerged from the focus groups, TCPHE leadership and staff identified the following three most actionable priorities to focus efforts over the next five years.

1.  Mental health
2.  Substance Us
3.  Food access
4.  Provider availability

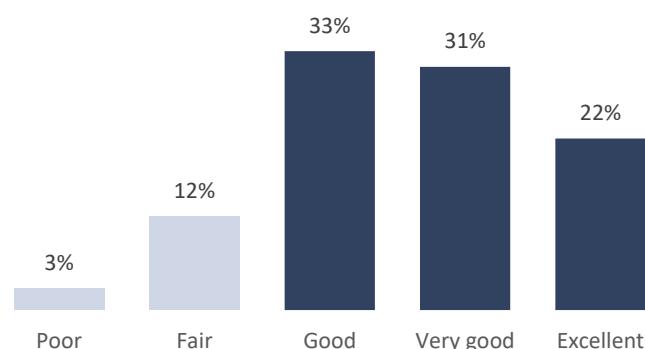
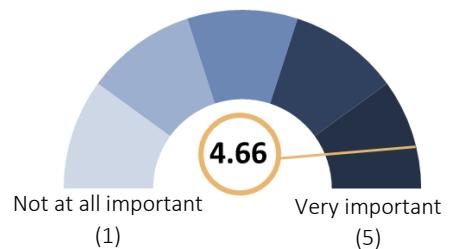
The following report provides details regarding each of these three health areas, as well as these additional areas of concern identified through the assessment process:



## Mental Health Care

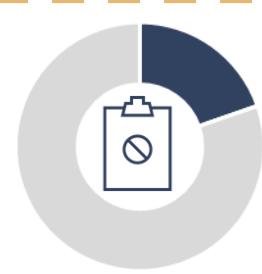
Respondents rated improving mental health care availability and accessibility a 4.66 out of 5. Of survey respondents, 91% said it was 'somewhat important' or 'very important' for TCPHE to focus on improving mental health.

85% said their mental health was either 'good', 'very good', or 'excellent' and 15% said that their mental health was either 'poor' or 'fair'.



**29%**

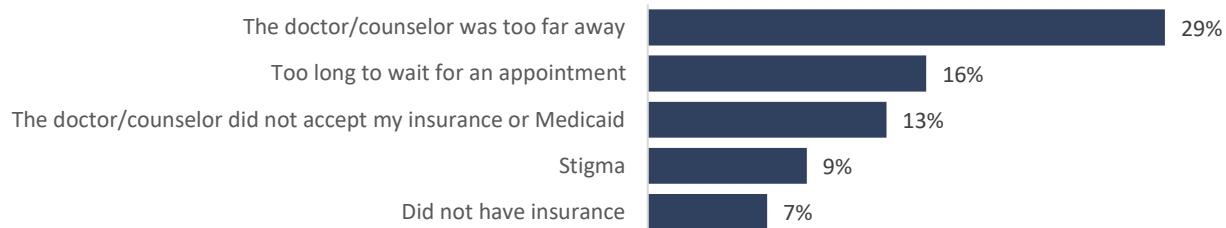
said they or a loved one have **received mental health care** in Teller County.



**20%**

said there was a time in the past 12 months when they or a loved one **needed mental health care but did not get the care they needed**.

Distance to treatment, waiting periods, issues with insurance, and stigma were the primary reasons individuals did not receive the mental health care they needed.



The suicide rate in Teller County (39.6/100,000) is higher than that of Colorado (21.4/100,000). High suicide rates may be attributed to people not accessing the help they need. Age-adjusted rates of intentional self-harm injuries were also higher in Teller County compared to the state (232.3 vs. 143.3).<sup>1</sup>

*"There are a lot of resources, but it's getting it out there to the people, so they understand. I know a lot of people, just in my caseload, that could really benefit from checking in with [their] mental health, or they're having problems with the kids, or they're getting older, and they need to adjust."*

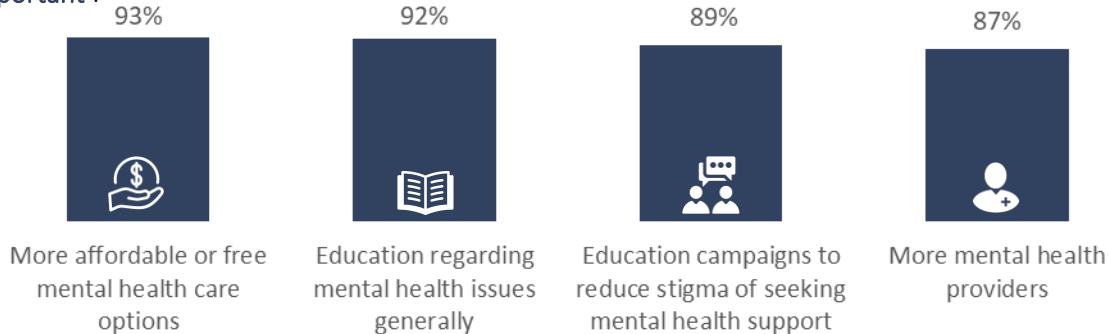
—Focus group participant



**There is a shortage of mental health and behavioral services and staff in Teller County.** Focus group participants discussed a low awareness of mental health services and resources (e.g., health insurance coverage) and noted the following mental health resources as lacking in the county:

- Geriatric psychiatry services that focus on syndromes of later life
- Mental health therapists that practice gender-affirming counseling for transgender, non-binary individuals
- Mental health therapists that practice trauma-informed PTSD counseling for military veterans

Survey respondents indicated the **importance of improving the accessibility of mental health services and increasing education efforts regarding mental health issues and reducing stigma**. The following reflects the proportion of surveyed Teller residents who believe these issues are 'somewhat important' or 'very important'.



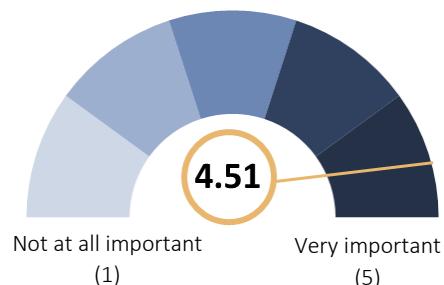
<sup>1</sup> CDPHE Injury Indicators Dashboard, 2018-2020 <https://cohealthviz.dphe.state.co.us/>

Collaboration between mental health care providers and TCPHE to share awareness of mental health topics and how they can support TCPHE in outreach to connect residents to services was discussed by focus group participants.

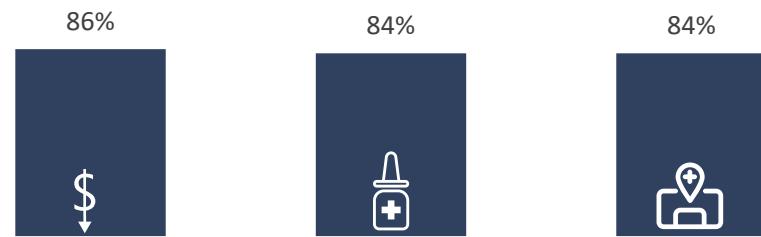
## Substance Use

Although survey participants did not identify substance use as one of the top ten health areas for TCPHE to focus, respondents rated the importance of improving substance use-related issues 4.51 out of 5. **85%** said it was 'somewhat important' or 'very important' for TCPHE to focus on addressing substance use issues and needs.

In 2020, Teller County had an average annual age-adjusted rate of opioid (prescription or heroin) overdose deaths per 100,000 of 21.1, which was higher than the Colorado average of 16.2. Relatedly, the average age-adjusted rate of ED visits for overdose involving any opioid per 100,000 residents in Teller County in 2020 (47.2) was similar to the Colorado rate (46.3). The Average annual age-adjusted rate of drug overdose deaths per 100,000 associated with methamphetamine use from 2019-2020 was higher in Teller County (12.6) than Colorado (7.3).<sup>2</sup>



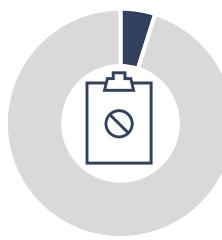
We asked survey respondents to rate how important it is for TCPHE to focus on certain substance use related needs/issues in the next five years. A majority of respondents indicated they believe the following efforts to address substance use are 'somewhat important' or 'very important'.



More affordable or free substance use treatment options      More overdose prevention efforts (naloxone, fentanyl test strips)      More substance use disorder treatment facilities and providers



**6%**  
said they or a loved one have received **substance use disorder treatment** in Teller County.

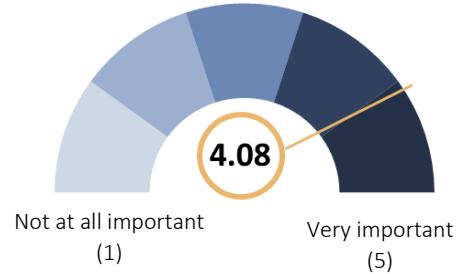


**5%**  
said there was a time in the past 12 months when they or a loved one **did not get the substance use disorder treatment they needed**.

<sup>2</sup> CDPHE Drug Overdose Dashboard: [https://cohealthviz.dphe.state.co.us/t/PSDVIP-MHPPUBLIC/views/DrugOverdoseDashboard/PoisoningDeathAdjustedRates?iframeSizedToWindow=true&%3Aembed=y&%3AshowAppBanner=false&%3Adisplay\\_count=no&%3AshowVizHome=no&%3Aorigin=viz\\_share\\_link](https://cohealthviz.dphe.state.co.us/t/PSDVIP-MHPPUBLIC/views/DrugOverdoseDashboard/PoisoningDeathAdjustedRates?iframeSizedToWindow=true&%3Aembed=y&%3AshowAppBanner=false&%3Adisplay_count=no&%3AshowVizHome=no&%3Aorigin=viz_share_link)

# Food Access

Respondents rated improving food access a 4.08 out of 5. Of survey respondents, **72%** said it was 'somewhat important' or 'very important' for TCPHE to focus on improving food access.



**79%** said that it was 'somewhat important' or 'very important' to have more food *assistance programs*.



**85%** said that it was 'somewhat important' or 'very important' to have more food assistance programs for *kids*.



**86%** said that it was 'somewhat important' or 'very important' to have more *information* on food assistance programs.



**11%** said they have 'sometimes', 'often', or 'very often' worried that their family's food would run out before they got money to buy more.

The findings from the community survey are consistent with 2019 U.S. Census data that a greater percentage of Teller County residents, 8.4%, live below the poverty line than the Colorado average of 7.4%.<sup>3</sup> Of survey respondents who said they did not receive SNAP benefits, **11%** said they were unsure if they would qualify.



Focus group participants shared there are food markets and food bank options available within the county across different entities such as the Senior Coalition, Aspen Mine Center, or community churches. However, community members are not aware of where to locate these options or may not have the transportation to access food markets or food banks. One participant shared there is a high need for volunteers to support the growing supply of food donated to pantries and to support distribution efforts.

<sup>3</sup> 18. United States Census, American Community Survey

[https://data.census.gov/cedsci/table?q=SNAP&g=0400000US08\\_0500000US08119&tid=ACSST5Y2019.S2201](https://data.census.gov/cedsci/table?q=SNAP&g=0400000US08_0500000US08119&tid=ACSST5Y2019.S2201)



Focus group participants shared due to the rising costs of groceries, working families are purchasing food at convenience stores or cafes for affordable options. Youth also shared this is a convenient option for their parents who work long hours.



Youth focus group participants shared the difficulty of accessing food outside the home when parents/guardians are not available to prepare meals, especially in Cripple Creek where there are few restaurants outside of casinos.

“Well, I think there's a lot of people that are going hungry in Teller County. I saw that firsthand doing home care as a nurse. I spent a lot of my paycheck on food for people. [...] it was hard to handle, I couldn't believe it.” – Focus group participant

## Health Care Accessibility

### General Health Care

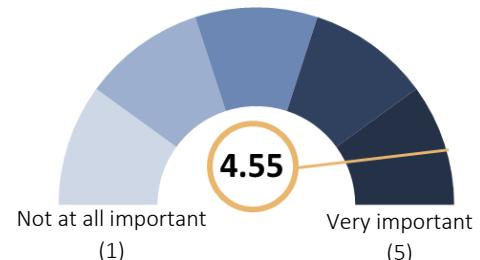
Respondents rated improving health care availability and accessibility a 4.55 out of 5. Of survey respondents, **91%** said it was **'somewhat important'** or **'very important'** for TCPHE to focus on **improving the availability and accessibility of health care providers** (primary care physicians, dentists, etc.). More than **92%** said having **more primary care options** was **'somewhat important'** or **'very important.'**



Focus group participants echoed themes identified by the community survey and expressed that it is difficult to receive the care they need. One concern is the lack of providers in the county and the fact that the providers that are in the county often have limited office-hours and locations. The lack of an urgent care in Teller County forces residents to either forgo care or go to the emergency room and face long wait times and high costs. The limited availability of appropriate healthcare providers has led people to leave the county to get care, often finding the closest providers in Colorado Springs.

Healthcare providers who participated in the focus group discussed disparities between the northern and southern parts of the county. The more isolated communities in the southern Teller County do not have the ability to access the same medical treatment options available in the northern part of the county.

In the most recent data from 2019, there were 12 primary care



“There's no intermediate healthcare opportunity around here besides inundating the hospital with services that maybe could be dealt with outside.”

–Focus group participant

“But [the southern part of the county] is still a medical desert and has nowhere near the support and services it needs on the medical side or on the behavioral health side.”

–Focus group participant

physicians, with a patient to clinician ratio of 2,120:1, which was higher than the state average of 1,202:1. The patient to clinician ratio has been trending upward since 2010 (1379:1).<sup>4</sup>

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Of respondents, **34%** said there was a time in the last 12 months when **they or a loved one didn't get the medical care they needed.**

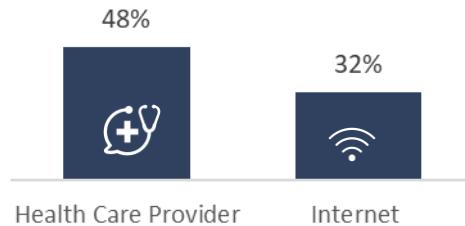


#### Top 3 reasons people didn't receive the medical care they needed:

1. The wait time to receive an appointment was too long
2. The distance to the doctor/counselor was too far for them
3. They lacked medical insurance



The vast majority of respondents received most of their health-related information **from health care providers and the internet.**



Telehealth grew in availability and usage during the COVID-19 pandemic. A majority of respondents indicated telehealth options and telehealth support are important for Teller County residents.



**77%**

indicated **having telehealth options was 'somewhat important' or 'very important'.**



**82%**

think it's **'somewhat important' or 'very important'** to have more **telehealth support (improved internet, tech support, etc).**

## Specialty Care



The lack of specialty care was an important theme for participants in all of our focus groups, with special note that the oldest and youngest populations are most affected. It was noted that few pediatricians existed in Teller County. Providers described the lack of obstetrics care

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<sup>4</sup> County Health Rankings & Roadmaps, 2022 Measures. <https://www.countyhealthrankings.org/2022-measures>

and the growing number of mothers having to give birth in local hospitals without specialized birthing wings. It is common for residents of Teller County to seek specialists outside of the county, often in Colorado Springs. A lack of accessible dental care was also mentioned in the focus groups.

Data from 2020 shows that there were 13 dentists in the county, with a population to dentist ratio of 1,960:1, which was also higher than the state average of 1,208:1. This ratio was lower than 2010 (2605:1) but higher than the lowest point in 2015 (1795:1).<sup>5</sup>

## Affordability



Over 20% of survey participants noted affordable health services as one of the health areas that need the most improvement in Teller County. Focus group participants, including health care providers, also discussed the high cost of care as a major health care concern and connected the issue to patients not having insurance. **Participants discussed the fact that residents are not able to afford medical insurance, and providers cannot afford to take Medicare/Medicaid patients.**

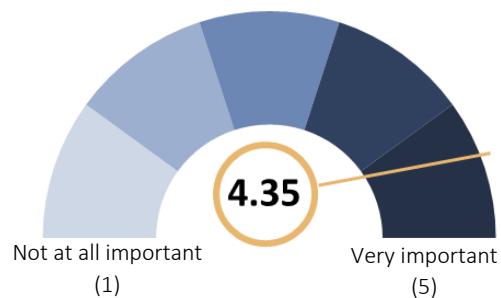
Lack of insurance was one of the top three reasons why respondents had to forgo needed medical care. Over **86%** of respondents said it is 'somewhat important' or 'very important' to have support and education for health insurance enrollment and benefits.

“I think part of it is not only having providers here across all the spectrums, but the affordability component, because I know I'm in a very tight timeframe right now where I'm getting Medicaid, but other than that, I have no insurance. Just being able to not only access the care, but access it affordably, I think is a barrier for a large percentage of our people up here.”

-Focus group participant

## Housing

Respondents ranked improving affordable housing availability and accessibility as a top priority with a rating 4.35 out of 5. Of survey respondents, **78%** said it was 'somewhat important' or 'very important' for TCPHE to focus on **improving the access of affordable housing**. Despite these concerns, 88% of survey respondents said they own their own home.



<sup>5</sup> County Health Rankings & Roadmaps, 2022 Measures. <https://www.countyhealthrankings.org/2022-measures>



Participants in the health care provider focus group discussed how the effects of housing affordability play a role in the shortage of providers. Housing prices affect who can afford to live and therefore work in the county. **A lack of affordable housing limits the pool of healthcare providers** and services available in the county.



Another housing-related issue discussed by focus group participants was the difficulty of communicating with and providing services to Teller residents who live in more remote areas or off the grid, either by choice, or because they can't afford housing in more populated areas.

“A lot of the people that live up here can't actually .... afford to purchase a home up here, and renting is a very chaotic thing where the availability of affordable housing for people who live and work up here is just very difficult “

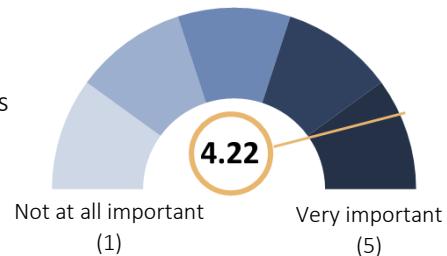
– Focus group participant  
(edited for clarity)

“The workforce problem...a significant portion [of] that is caused by the lack of housing and a lack of transportation. These folks can't get to these jobs, and they can't afford to live up here.”

– Focus group participant

## Child Care

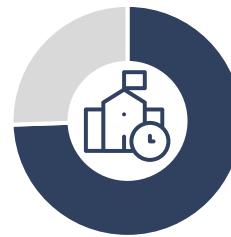
Respondents rated improving child care availability and accessibility a 4.22 out of 5. Of survey respondents, **69%** said it was 'somewhat important' or 'very important' for TCPHE to focus on improving child care.



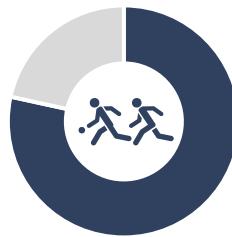
**70%**  
said having more child care tuition assistance was 'somewhat important' or 'very important'.



**71%**  
said having more child care availability was 'somewhat important' or 'very important'.



**75%**  
said having more afterschool program availability was 'somewhat important' or 'very important'.



**78%**  
said having more youth extra-curricular program availability was 'somewhat important' or 'very important'.

Focus group participants shared challenges, and barriers community members encounter due to the shortage of child care options for school-age children



There is a lack of child care for children with intellectual and/or developmental disabilities (IDD); most centers are exclusively early education centers resulting in a shortage of care for older children. Families seek IDD-friendly child care centers and after-school programs outside the county to meet their child's needs.



People and families travel to nearby cities to access child care or co-op child care through personal networks. A few focus group participants shared being weary of co-op options as they would prefer established and accredited child care centers. Working parents choose to save on traveling to nearby counties for child care by working remotely and balancing the child care themselves.

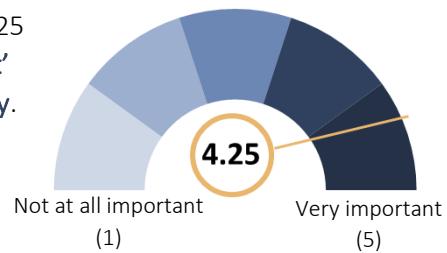


There is a shortage of funding and support for child care initiatives and subsidies to open and maintain child care centers. A few focus group participants shared it is challenging to propose child care initiatives within the county due to state laws and regulations, and there is limited capacity to staff centers. It is also challenging to garner interest or support from non-religious entities to fund child care centers.

## Economic Mobility

Respondents rated improving economic mobility and living wages a 4.25 out of 5. Of survey respondents, 77% said it was 'somewhat important' or 'very important' for TCPHE to focus on improving economic mobility.

The high cost of living in Teller County was identified as a barrier to people moving to and staying in Teller County. The median household income in Teller County is \$61,463, which is less than the Colorado average (\$75,231).<sup>6</sup> When asked "in general, do you feel you have enough money to meet your needs," 44% of survey participants responded 'not at all' or 'moderately.'



**84%**

said it was 'somewhat important' or 'very important' that there be more jobs with higher pay and better benefits.



**82%**

said it was 'somewhat important' or 'very important' that there be more training for the types of jobs available in the area.

<sup>6</sup> U.S. Census, 2020 <https://www.census.gov/>



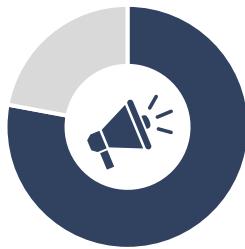
**82%**

said it was 'somewhat important' or 'very important' that there be more affordable transportation options to and from a job.



**72%**

said it was 'somewhat important' or 'very important' that there be more jobs that don't require advanced skills and trainings.



**78%**

said it was 'somewhat important' or 'very important' for Teller County to better advertise available employment resources.

These folks can't get to these jobs, and they can't afford to live up here, myself included. I would love to live in this county, I can't afford to live up here."

– Health provider working in Teller



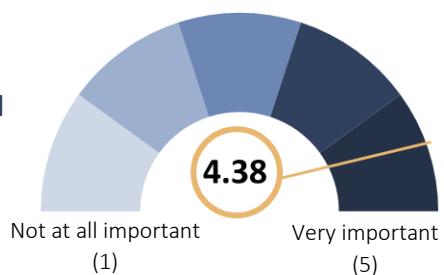
Focus group participants discussed how the high cost of living is affecting all aspects of health and wellness including:

- Affordability of services and medications
- Availability of healthy food options
- The inability of providers to afford to live and work in the county, especially secure affordable housing in the area

## Aging Adult Care

Respondents rated improving age-related issues and needs a 4.38 out of 5. **84%** indicated it was 'somewhat important' or 'very important' for TCPHE to focus on addressing age-related issues and needs.

Between 2016 and 2018, 11.1% of Teller County adults ages 65+ reported experiencing a fall that resulted in injury within the previous year. This was slightly higher than the state average of 10.1%.<sup>7</sup>



<sup>7</sup> CDPHE VISION Dashboard <https://cohealthviz.dphe.state.co.us>



**30%**

said Teller County does **NOT** have resources and facilities to meet the long-term care needs of aging residents.



**65%**

had someone **older** than 60 living in their home.

“I think it is our pediatric and geriatric populations that are the most underserved, and especially...as our demographics have changed here in Teller over the last 5/10 years as we've become a more aged population.”

—Focus group Participant



**5%** had someone in their home, regardless of age, **not able to perform everyday activities** such as walking, bathing, or getting in and out of bed without help.



Healthcare professionals shared seniors have challenges accessing support services like transportation. Though there are transportation providers through Medicaid or other agencies, it is challenging for seniors to get to appointments after-hours or to run errands.



Healthcare professionals also shared that their geriatric patients may benefit from healthcare literacy classes to support their understanding of accessing their medical insurance benefits. A collaboration with the Teller Senior Coalition or Aspen Mine Center can support these efforts of sharing healthcare-related information.

## Public Health Communications/ Emergency Preparedness

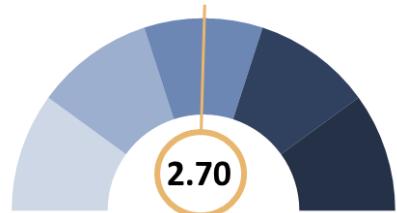
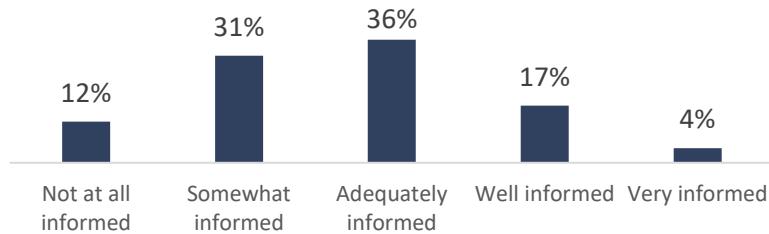
TCPHE understands the importance of communicating with Teller County residents in an emergency. The community survey included items to gauge how well community members feel they are informed about public health issues in their community, and what are the best ways to reach residents during an emergency.



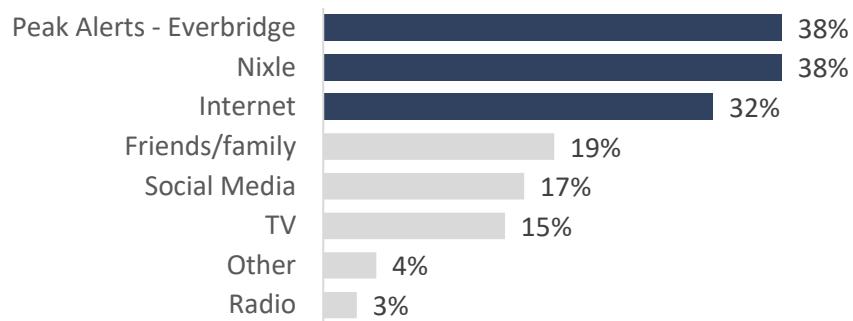
**91%**

said improving emergency preparedness and communications was **'somewhat important'** or **'very important'**.

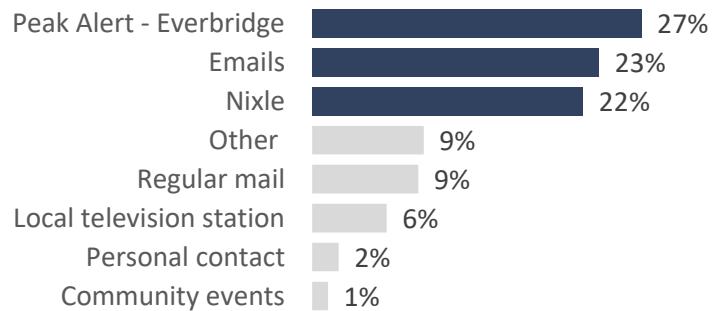
On a scale of one to five, respondents rated **feeling informed of Teller County Public Health and Environment communications** a 2.7.



We asked respondents the three main **ways that you receive information/notification for disasters, emergencies (wildfires), severe weather, pandemics, etc.**? The top responses were Peak Alerts – Everbridge, Nixle, and the internet.



Respondents said the **best ways** for Teller County Public Health and Environment to **deliver information** to residents are **Peak Alert – Everbridge, emails, and Nixle.\***



\*Peak Alerts is the Emergency Notifications System. Since the survey collection, Nixle is no longer in use in the county.

# Challenges and Potential Strategies

## ! General Challenges in the County

Among the focus groups, there were general challenges and barriers shared that affected the community's access to services within the community, affecting their needs in a range of content areas such as food access, child care, mental health, etc. Here are some of the challenges shared:

- **Low awareness of the resources that exist in the community:** community members are unable to locate programs or services that provide resources in the county.
- **Need for strengthened collaboration across service providers:** community members expressed there are organizations providing similar resources and collaboration may support resource and capacity issues.
- **Lack of marketing and communications regarding resources through media outlets (e.g., newspaper, website, radio):** community members expressed they would like to see more streamlined communications of resources in the county to ensure they are aware of where to access the latest resources and services.
- **Long-term residents want to connect with newer residents and youth in the community:** community members want to engage youth in community policy advocacy efforts (e.g., county commissioner meetings) to support the future of the county as well as engage youth in volunteerism.
- **Youth indicated not feeling safe to express their gender identities to adults in the county:** youth shared this may impact their community engagement as they navigate views and beliefs different than theirs.
- **A need for community-building with residents and partners in the county:** community members want to see more community building activities within the county whether that is through community events or policy advocacy efforts.

Community members reflected on a number of potential opportunities to address the identified challenges. The following are specific strategies recommended by community members for Teller County Public Health and Environment to address the challenges and barriers expressed in the community.



## Potential Strategies to Combat General Challenges

**Create community-building opportunities to bridge the gap between generations within the county.** One approach is to provide opportunities for youth and young adults to engage in and provide their input for new health related initiatives that will directly impact Teller County youth.

**Build TCPHE presence at community events.** Community members appreciated the outreach efforts of TCPHE at the start of the COVID-19 pandemic; TCPHE effectively worked with community leaders and organizations to disseminate information about upcoming vaccine clinics. Community members learned about non-pandemic specific TCPHE services as a result of these pandemic-related activities. Community members expressed an interest in seeing TCPHE at more community events to support the community's understanding of the public health department's services. A designated community outreach role to facilitate these connections was suggested.

**Initiate a collaborative approach among agencies and organizations to establish a community services and resources referral hub.** A centralized resource to assist community members access available services. Existence of such a hub could be shared through different media outlets (e.g., websites, newspapers, social media). Establishment of a standardized referral system among agencies and organizations would also support the referral of community members to the specific service(s) that best addresses their needs.

**Develop new, tailored programs or services for the community.** Examples of programs include the following:

- family-friendly recreational services
- transition services for military families
- mobile health services
- co-op programs (e.g., child care)

These programs can support the needs of different sub-populations in the county and draw in readily available services. Maintaining a TCPHE presence at county-commission or agency stakeholder meetings (e.g., urban planning, school district, etc.) can help incorporate the public health voice into decision-making.

## Recommendations

Recommendations outlined below have been informed by our analysis of secondary data sources, a community survey administered to Teller County residents, focus groups with Teller County community members and healthcare providers, and discussions with TCPHE leadership and staff.

### Health Priorities

The three priorities that emerged from the community health assessment process are:

1. Mental health
2. Food access
3. Access to health care



**Mental Health:** Improvements to the mental health system in Teller County, including availability and accessibility, was identified as a key priority for Teller County. Teller County has a suicide rate higher than the Colorado rate, and many community members indicated they or a loved one did not access the mental health care they needed due to distance to treatment, waiting periods, issues with insurance, and stigma. Teller community members believe stigma-reduction media campaigns could help address Teller County's high suicide rate, and encourage community members to seek out mental health services when they need them. Collaboration between mental health providers and TCPHE to support connecting residents to services was identified as a strategy to address the mental health needs of the county.

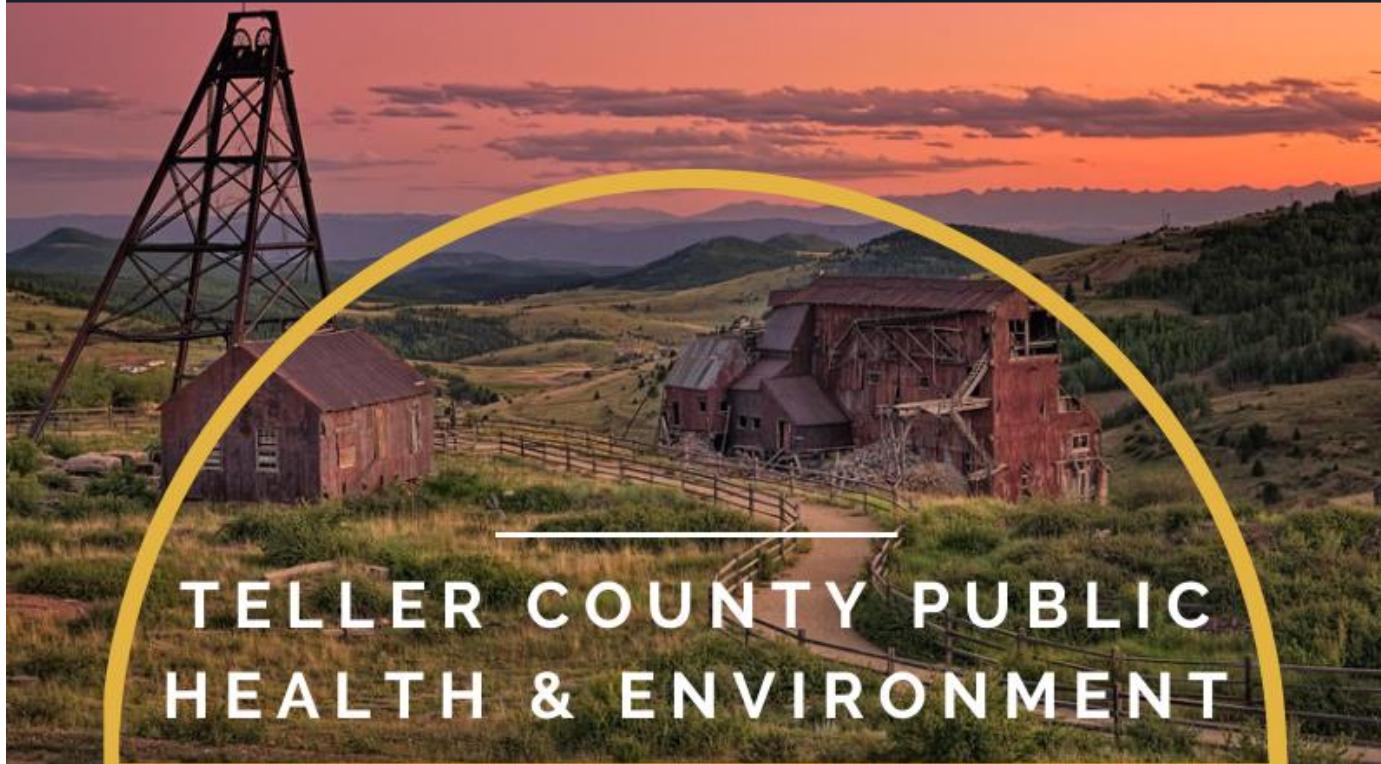


**Food access:** Improvement to food access was identified as a key priority. Food assistance programs exist in the county, but many residents are not aware of the programs or have difficulties accessing the programs. Increased outreach efforts to educate the community about these resources and identifying and addressing access issues (e.g., transportation) are needed to prevent Teller County families from going hungry.



**Health care provider availability:** Improvements to health care provider availability and accessibility was identified as a key priority. Community survey respondents indicated a need for health care providers (e.g., primary care physicians, dentists, etc.) as they often either do not get the care they need or must go outside of the county to access general health care and immediate care due to the limited availability. Community members discussed the need for providers specifically in the southern part of the county, and the need for transportation options for older residents and people with mobility issues to reach providers. The high cost of living and working in Teller County is an important but difficult challenge to overcome in bringing more providers to the county.

# Appendix A: CSPH Data Review



## TELLER COUNTY PUBLIC HEALTH & ENVIRONMENT

### COMMUNITY HEALTH ASSESSMENT

2022

PREPARED BY



colorado school of  
**public health**

*Photo Location: Victor, Colorado  
Photo Source: Flickr.com*

# Authors

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## Student Assessment Team

Amelia Cavazos, Courtney Fullwood, Krishangi Pokhrel, Cassidy Walter and Brian Whaley

## Faculty

Virginia Visconti, PhD, MAT and Alison Grace Bui, MPH

## Teller County Public Health and Environment Partners

Karissa Larson, RN, MSN, Michelle Wolff, MSN, WHNP-BC, and Martha Hubbard, RN, BSN





## Executive Summary

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### Introduction to Teller County

Teller County sits geographically in the center of Colorado. As of 2020, the total population of the county is 24,710. The county has many outdoor recreational activities including kayaking, hiking, rock climbing, and camping. The county has five municipalities: Woodland Park, Cripple Creek, Victor, Divide, and Florissant. Woodland Park, often referred to as a bedroom community or commuter town, is where most residents live. Cripple Creek and Victor, which are on the south end of the county, are supported by the gaming and mining industry. The Teller County Public Health and Environment (TCPHE) currently employs 14 individuals and other contracted partners to provide health services.

### Purpose

The community health assessment (CHA) aims to determine the top health concerns identified by community members. Furthermore, the health assessment identifies the strengths and assets within Teller County. TCPHE will use the findings of the CHA to develop a public health improvement plan that includes priority areas and strategies to improve the quality of service and population health.

### Partnership

The Student Assessment Team (SAT) and the faculty from the Colorado School of Public Health (ColoradoSPH) collaborated with TCPHE to examine existing quantitative health indicators and create and pilot a community survey, covering the following domains: mental and environmental health, emergency preparedness, and communication.

1. **SAT:** Amelia Cavazos, Courtney Fullwood, Krishangi Pokhrel, Cassidy Walter, Brian Whaley
2. **Faculty:** Virginia Visconti, MAT, PhD, Alison Grace Bui, MPH
3. **TCPHE:** Michelle Wolff, MSN, WHNP-BC, Karissa Larson, RN, MSN, Martha Hubbard, RN, BSN

### Methods: Data Collection & Analysis

The SAT utilized the Bay Area Regional Health Inequities Initiative (BARHII) Model to guide the collection of primary qualitative and secondary quantitative data, which sought to consider and potentially quantify the impact of health inequity on health outcomes in Teller County. Primary qualitative data was collected during an observational tour and site visit of Teller County, led by TCPHE on March 1st, 2022. Secondary quantitative data were collected and organized using public sources and databases, such as the US Census Bureau, Colorado Health Information Dataset (CoHID), Healthy Kids Colorado Survey (HKCS), Colorado Health Institute (CHI), Behavioral Risk Factor Surveillance System (BRFSS), and local sources, including the Teller County Coroner's Office and the Cripple Creek/Victor High School.

For data triangulation and analysis, the SAT utilized the BARHII Model to guide comparative analysis of local and state indicators, complemented by emergent themes from the observational tour and site visit of Teller County. Together, these findings, supported by the results of the 2017 Teller County Community Health Survey, guided the formulation of questions and development of the pilot survey.

### **Survey Development and Pilot Testing**

The SAT team drafted questions for the 2022 Community Survey using the 2017 TCPHE Community Survey as a starting point. During weekly meetings, TCPHE identified several topics that they would like to collect more information on from community members, including top mental and environmental health concerns, what barriers exist that prevent community members from accessing healthcare and other resources, and how community members view the overall health status of Teller County. Findings from the secondary data collection provided additional rationale for several of the survey questions. The pilot survey went through multiple rounds of revisions before being distributed to community members through two of TCPHE's LISTSERVS. Community members had from April 7 to April 21, 2022, to complete the survey.

The pilot survey results were exported and analyzed by the SAT team. Percentages that showed the completion rate were calculated for all closed- and open-ended questions to determine which questions received more or fewer responses than others. All of the participants' responses to short-answer questions were read through to see if they aligned with what the corresponding survey question asked. Any questions with a lower completion rate or flagged responses were discussed by the SAT team before making a decision on whether revisions were needed.

### **Key Findings**

The comparative analysis of local and state indicators, collected from secondary quantitative data sources, revealed the disproportionate burden of suicide and radon exposure in Teller County. Teller County has a higher percentage of radon tests above the action (4pCi/L) compared to Colorado which is a huge concern because of the potential health risks as a result of exposure to radon. The suicide rate in Teller County (39.6%) is significantly higher than the rate for the entire state (21.6%). This may be

attributed to the geographical isolation of the county, as well as residents' access to mental health services.

The pilot survey had 46 responses from community members in Teller County, and the average completion rate for both quantitative and qualitative questions was greater than 80%. This level of engagement was encouraging considering the number of questions and different topics community members were asked to respond to and the average length of time it took participants to complete the survey (19 minutes). Participants between the ages of 55 to 74 made up half the pilot group, and a majority of respondents identified as female. The pilot group had a low representation of community members who identify with historically marginalized races and a lack of diversity in occupations.

## **Key Recommendations**

The SAT recommended that TCPHE do the following to ensure that their community survey yields the best results to inform their next community health improvement plan:

### *Further Analyze the Pilot Survey Results*

The pilot group consisted majorly of community members working in the government and healthcare sector who may also have some experience working directly with TCPHE. This group provided valuable information that may be used to guide strategic planning efforts and action among community partners and stakeholders.

### *Develop Equitable Survey Distribution Plan*

TCPHE should develop a survey distribution plan that uses several methods and channels to ensure that it reaches ALL community members. Teller County is a more rural county, and many residents have poor internet, so it is crucial for TCPHE to distribute the survey using different methods to not only increase participation, but also obtain results from diverse voices that were not captured in the pilot survey. Some examples of how this can be achieved include the following: 1) offering the survey in several languages, 2) sharing the survey through the LISTSERVs of local community organizations, resource centers, and small businesses, and 3) creating a QR code that links to the survey that can be posted in various locations.

### *Conduct a Second Pilot Survey*

The pilot survey results may not accurately predict how community members will respond to the final survey because there was a lack of diversity in the sample. Distributing the survey to a second pilot group comprising community members who were not represented during the pilot may provide more insight on potential changes that need to be made to the survey.

### *Comparative Analysis of School District Data*

In order to conduct sound comparative analyses of the municipalities within Teller County, TCPHE should compare the Woodland Park and Cripple Creek-Victor school district datasets. Unfortunately, the SAT was unable to include these results in the health assessment due to time constraints.

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# Acknowledgements

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The students and faculty from the Colorado School of Public Health (ColoradoSPH) would like to graciously thank Teller County Public Health and Environment (TCPHE) for the opportunity to collaborate on the execution of this community health assessment. TCPHE Director Michelle Wolf, MSN, WHNP-BC, Community Health Assessment Project Coordinator Karissa Larson, RN, MSN, and CHAPS Project Coordinator Martha Hubbard, RN, BSN, contributed their valuable time and efforts towards guiding the focus of this project, having personally led the student assessment team on a tour of Teller County. Additionally, they assisted with the development of the community survey, identified key informants for the survey pilot, and provided the student assessment team with continuous feedback throughout the duration of the pilot testing period. Their extensive knowledge of Teller County and strong relationships with community members was vital to the completion of the ColoradoSPH team and the TCPHE health assessment.

The students would also like to thank Virginia Visconti, MAT, PhD, their faculty advisor and liaison at the ColoradoSPH, for her mentorship and guidance throughout the duration of this project. Her expertise and counsel were invaluable in this work. They would also like to extend their thanks to Alison Grace Bui, MPH at the Colorado Department of Public Health and Environment for sharing her expertise and assisting with the quantitative data mining process.

The student team, Virginia Visconti, and TCPHE would like to extend their gratitude and thanks to the various community organizations and residents of Teller County for their participation in this health assessment. Without their contributions, this work would not have been possible.

# Important Acronyms

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| Acronym     | Definition   |
|-------------|--|
| BARHII      | Bay Area Regional Health Inequities Initiative       |
| CHA         | Community Health Assessment                          |
| TCPHE       | Teller County Public Health and Environment          |
| ColoradoSPH | Colorado School of Public Health                     |
| SAT         | Student Assessment Team                              |
| SOW         | Scope of Work  |
| CHIP        | Community Health Improvement Plan                    |
| CoHID       | The Colorado Health Information Dataset              |
| CDPHE       | Colorado Department of Public Health and Environment |

# Background

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## Summary of the Scope of Work

The scope of work (SOW) organizes and identifies the CHA project needs and explains how the CHA's goals will be met. This document outlines the work performed during the project including details on the specific tasks and deliverables within a timeline.

## Project Description

The purpose of this assessment is to describe Teller County's population demographics, health and environmental issues, and any existing health inequalities. This assessment analyzes quantitative health status indicators. It also includes the development and piloting of a community survey designed to gather input on the county's primary health concerns and assets. Table 1 depicts the top health concerns that were identified in the 2017 Teller County CHA based on a survey distributed to residents. Figure 1 presents the strengths and assets identified in 2017 CHA. The key questions the 2022 CHA aims to address is presented in table 2.

| Top Health Concerns (Teller County CHA 2017) |
|--|
| Behavioral and Mental Health                 |
| Substance Use and Abuse                      |
| Access to Care                               |

Injuries and Violence

**Table 1.** Top health  
concerns identified in

Teller County 2017 CHA

**Figure 1.** Top strengths and assets identified in Teller County 2017 CHA



**Table 2.** Key questions that will be addressed by the 2022 Community Health Assessment

| Key Questions 2022 CHA   |
|--|
| What is the community's perception of their general health, wellness and environment?      |
| What are the health and/or environmental issues the community is facing?                   |
| What are the barriers the community has/views in terms to healthcare access and resources? |
| What is the health status of the community?  |

### Project Goals

The goal of this assessment is to describe Teller County's population demographics, health and environmental issues, and any existing health inequalities. Additionally, the assessment identifies the strengths and assets within Teller County. The project is expected to produce an equitable and comprehensive community assessment of Teller County's health and environmental status. The 2022

report is a continuation of the work done with the previous community health assessment with a more specific focus on the status of Teller County's behavioral and mental health, communications and resources, COVID-19 response, emergency preparedness, and environmental health. Table 3 presents the timeline for the 2022 CHA.

### Project Timeline

**Table 3.** Project Timeline for 2022 Community Health Assessment

| Task   | Responsible Party | Deadline(s)                  |
|--|-------------------|------------------------------|
| Updated Scope of Work for Team Project   | SAT               | March 11, 2022               |
| Detailed Outline for Team Project Report                                       | SAT               | March 16, 2022               |
| Student Team drafts survey and shares with TCPH Community Partner for feedback | SAT               | March 16, 2022               |
| TCPH Community Partner shares feedback with students                           | TCPHE             | March 23, 2022               |
| Final Scope of Work for Team Project   | SAT               | March 30, 2022               |
| Student Team incorporates TCPH Community Partner's feedback                    | SAT               | March 30, 2022               |
| Peer Editing of Near Final Team Project Report                                 | SAT               | April 13<br>& April 20, 2022 |
| Student Team pilots survey using Qualtrics                                     | SAT               | March 31 -<br>April 21, 2022 |
| Revised Near Final Team Project Report Submitted to Instructor                 | SAT               | April 27,<br>2022            |

|   |                       |                         |
|---|-----------------------|-------------------------|
| Student Team reviews pilot survey responses and, based on those responses, revises and finalizes the survey   | SAT                   | April 22 - May 10, 2022 |
| Final Team Project Presentation & Report  | SAT                   | May 11, 2022            |
| Last Revisions to Team Project Final Report   | SAT                   | May 20, 2022            |
| Virginia Visconti will share the final version of the CHA report (with the final version of the survey included as an appendix) with the TCPH Community Partner after final grades for the course are submitted | Dr. Virginia Visconti | May 25, 2022            |

For the complete Scope of Work, see Appendix A.

## **Background/Context of the Community Health Assessment**

### **Summary of the 2017 CHA**

The Colorado Public Health Reauthorization Act, SB 08-194 requires public health agencies in Colorado to conduct a CHA assessment every five years. Public health agencies will use the CHA findings to develop a public health plan identifying priority areas and ways of enhancing the quality of service.

In 2017, Teller County Public Health and Environment (TCPHE) and a student team from the ColoradoSPH collaborated on a community health assessment (CHA) aimed at identifying the top health concerns, strengths, and assets within Teller County. The results of this CHA informed TCPHE's 2017-2021 Community Health Improvement Plan (CHIP). The 2017 CHA assessment team found behavioral and mental health, substance use and abuse, access to care, and injuries and violence to be the top four health concerns in the county. Less pressing health concerns were also identified, including senior health, chronic disease, access to food, smoking, and oral health. In addition, several community strengths and assets were identified by Teller County community members. Some of these include the community itself in terms of its members' generosity, strength, kindness, and community engagement. Community

members also listed Teller County's natural environment as a strength because of the abundance of different parks, numerous trails for hiking and biking, and low pollution levels. Several local resource centers and programs, along with agency collaborations, were reported as community assets.

TCPHE focused on addressing the top health concerns and building on existing community strengths and assets outlined in the 2017

report over the last several years.

### Community Description

Teller County is one of 64 counties in Colorado and sits geographically in the center of the state. The county's population is at 24,710 per the latest 2020 census data. The county has five municipalities: Woodland Park, Cripple Creek, and Victor are incorporated, and Divide and Florissant are unincorporated.

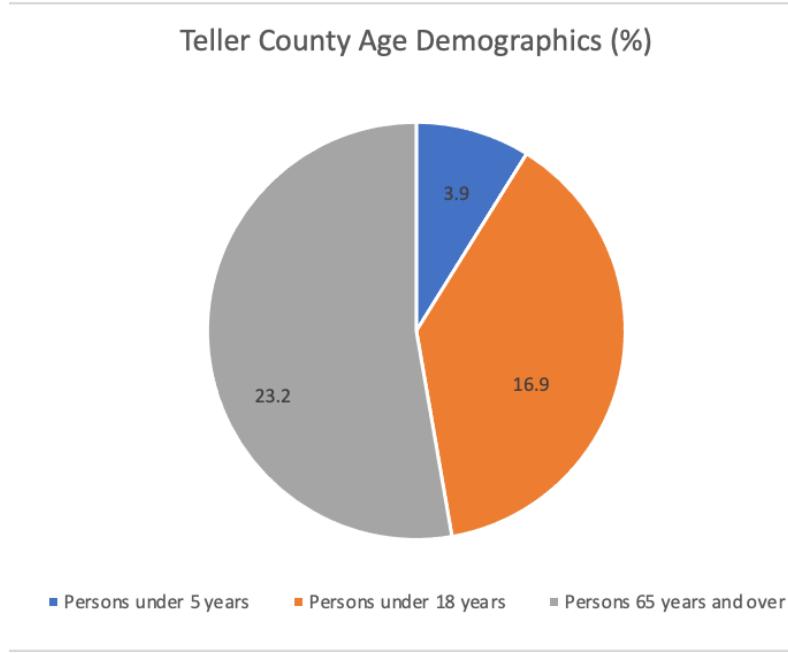


On the north end of the county sits Woodland Park. Woodland Park, often referred to as a bedroom community or commuter town, is where most of the residents live but do not work. This observation is supported by the mean commute time of 32.9 minutes for residents, who are most likely traveling to Colorado Springs.

On the south end of the county are Cripple Creek and Victor, which are supported by the gaming and mining industries. As the latest census data confirm, the county continues to serve an aging population, with a median age of 50 years compared to a statewide mean of 37.1 years, and 21% of Teller County residents are over the age of 65 compared to 14.7% in the state. The Teller County

Commissioners serve as the Board of Health. The health department is growing to meet the demands of the COVID-19 pandemic and now employs 14 individuals along with many others contracted for pandemic-related services.

The next section will provide an overview of the demographic such as age distribution, racial distribution, and income and poverty level in Teller County.



Bureau, 2020

**Figure 2. Age Distribution**

The age distribution in Teller County is significantly different from Colorado, and the majority of the population in the county fall in the age group of 65 and older. In Teller County, the overall population of people over 65 years is 23.2%, compared to Colorado at 14.6 %, respectively.

*Data retrieved from US Census*

**Table 4.** Racial and Ethnic Distribution of Teller County

| Race/Ethnicity                 | % of Total Population |
|--------------------------------|-----------------------|
| White                          | 93.8 %                |
| Hispanic or Latino             | 7.1 %                 |
| Black or African American      | 1.0 %                 |
| American Indian/Alaskan Native | 1.4 %                 |

|   |       |
|---|-------|
| Asian                                     | 1.1 % |
| Native Hawaiian or Other Pacific Islander | 0.1 % |

*Data retrieved from US Census Bureau, 2020*

According to the U.S Census Bureau, the racial and ethnic distribution of Colorado and Teller County are similar, with the majority of the population identifying as Non-Hispanic White. In Teller County, 93.8% of the population identifies as Non-Hispanic White compared to 89.9% in Colorado. Hispanic and Latino account for the second-highest population in Colorado and Teller County at 21.8% and 7.1%, respectively.

**Table 5.** Income and Poverty Distribution

| Income and Poverty in 2020                     | Dollar Amount/Percentage |
|--|--------------------------|
| Median household income, 2016-2020             | \$61,463                 |
| Per capita income in past 12 months, 2016-2020 | \$34,541                 |
| Persons in poverty, percent                    | 7.3 %                    |

*Data retrieved from US Census Bureau, 2020*

Income is often used as a measure of the well-being and health outcomes of the population. The median household income in Teller County is \$61,463, which is less than Colorado, at \$75,231. In Teller County, 7.3% of the population lives under the federal poverty line compared to 9% in the state.

## Partner Roles

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Each member of the community-campus partnership had specific roles in the 2022 CHA process. Each week, members of the SAT, TCPHE, and ColoradoSPH course instructor met for check-in meetings to establish deliverables and responsibilities.

**Table 6.** Partner Roles and Responsibilities

| Name                         | Roles and Responsibilities   |
|------------------------------|--|
| Karissa Larson, RN, MSN      | Teller County Public Health and Environment CHA Manager (Community Partner)    |
| Michelle Wolff, MSN, WHNP-BC | Teller County Public Health and Environment Director (Community Partner)       |
| Martha Hubbard, RN, BSN      | Teller County Public Health and Environment Representative (Community Partner) |
| Amelia Cavazos               | Lead Liaison and Report Editing (SAT)  |
| Courtney Fullwood            | Data Visualization & Data Analysis Co-Lead (SAT)                               |
| Krishangi Pokhrel            | Secondary Liaison and Report Editing (SAT)                                     |
| Cassidy Walter               | Survey Development/Piloting & Report Editor (SAT)                              |
| Brian Whaley                 | Data Generation & Data Analysis Co-Lead (SAT)                                  |
| Virginia Visconti, MAT, PhD  | Course Instructor (ColoradoSPH)  |

|                       |                             |
|-----------------------|-----------------------------|
| Alison Grace Bui, MPH | Course Coach (Colorado SPH) |
|-----------------------|-----------------------------|

## Methods of Data Collection

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The purpose of this assessment was to describe Teller County's population demographics, health and environmental issues, and identify any existing health inequalities that impact residents and community members. The project was expected to produce an equitable and comprehensive community assessment of Teller County's health and environmental status via the collection of secondary quantitative data from public databases and primary qualitative data from an observational tour and site visit. The results of Teller County's Community Health Survey from 2017 also reported previous health concerns that influenced the SAT's data collection.

### Secondary Quantitative Data

Primarily, the SAT collected secondary quantitative data for Teller County and the state of Colorado from the Colorado Health Information Dataset (CoHID), publicly available through the Colorado Department of Public Health and Environment (CDPHE). Additional sources included the US Census Bureau's American Community Survey (ACS), Healthy Kids Colorado Survey (HKCS), Behavioral Risk Factor Surveillance System (BRFSS), and local sources such as the Coroner's Office Annual Report and the Cripple Creek-Victor High School. Included in these quantitative data points were key indicators measuring the socio-demographic characteristics and the health status of the county, designed to answer the following assessment questions:

- What are the key health concerns for Teller County?
- What are the strengths and assets of Teller County that could be used to improve the health of the population?

### Primary Qualitative Data

On March 1st, 2022, the SAT collected primary qualitative data during an observational bus tour and site visit, conducted by TCPHE, with the purpose of providing valuable real-world context for the community health assessment. The SAT visited the municipalities of Cripple Creek, Divide, and Woodland Park to visit local businesses and community resource centers, such as the Gold Bump Bakery, Aspen Mine Center, and Community Partnership FRC. The SAT also observed the large presence of the mining and gaming industries in Teller County, with Bronco Billy's Casino and the Cresson Mine serving as the county's largest employers. Additionally, the isolated geographic nature and rural built environment of Teller County, corroborated by TCPHE, revealed issues with housing and transportation for residents of Victor and Cripple Creek, the more isolated and underserved municipalities when compared to Woodland Park.

### **Community Survey**

The survey developed by the SAT will be used to gather both quantitative and qualitative data during subsequent phases of the 2022 CHA. The detailed development of the community survey, guided by the secondary quantitative and primary observational data, is described in the subsequent sections entitled "Survey Development" and "Survey Piloting and Revision."

## **Methods of Data Analysis**

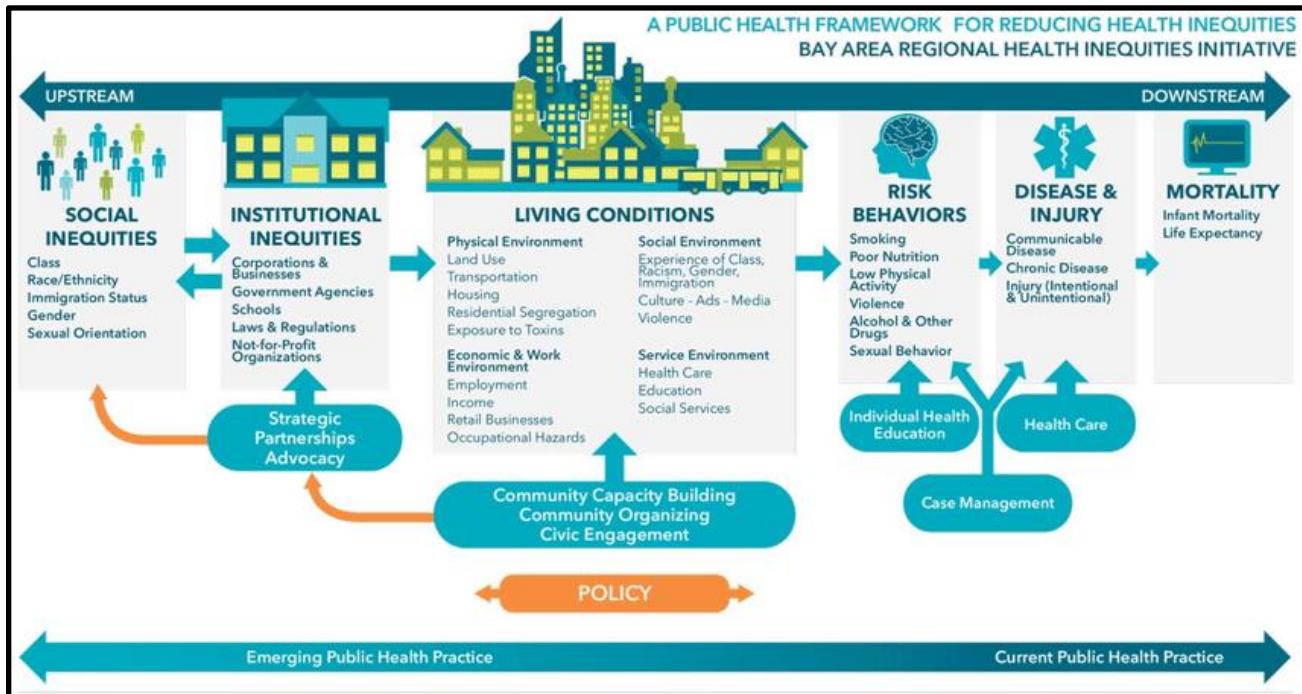
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The secondary data points, specifically the indicators for community health, collected from the above publicly available sources for Teller County were compared to state-level data to assess the overall health of the county. Any glaring differences in an indicator of health between Teller County and Colorado, in addition to certain indicators of interest to Teller County Public Health and Environment (TCPHE), influenced their inclusion as a potential "health concern" in the development of the community survey.



# BARHII Model

Figure 3. BARHII Model



Additionally, the table below summarizes the various data sources triangulated for each health topic of interest within the BARHII Framework.

Table 7. BARHII data source triangulation

| Topic                    | Secondary Quantitative Data | Field Observations |
|--------------------------|-----------------------------|--------------------|
| Social Inequities        | X                           |                    |
| Institutional Inequities | X                           | X                  |
| Living Conditions        | X                           | X                  |
| Risk Behaviors           | X                           |                    |
| Disease & Injury         | X                           | X                  |
| Mortality                | X                           |                    |

The SAT applied the BARHII model to the key findings to better understand how social and institutional equities, living conditions and risk behaviors may affect the health outcomes amongst all residents of Teller County. The collection and aggregation of secondary quantitative data were guided by the Bay Area Regional Health Inequities Initiative (BARHII) Framework, which considers the potential impact of “upstream” social, environmental, and institutional inequities on “downstream” health outcomes among community members. The Colorado Department of Public Health and Environment (CDPHE) has adopted this model for statewide implementation, which allows the focus of “attention on measures which have not characteristically been within the scope of public health department epidemiology” (BARHII, 2020). The health indicators detailed below summarize the current state of health in Teller County, compared to Colorado state-level data, for the purpose of the 2022 Community Health Survey design. These indicators are mapped to the BARHII Framework connecting social inequalities and health.

**Social inequities:** According to the BARHII Model, social inequities are associated with race/ethnicity, among other factors including class, immigration status, gender, and sexual orientation, which are essential to consider when addressing community resources and needs. The findings (presented in the following section below) capture the lack of racial and ethnic diversity within Teller County, which has a majority white/Caucasian population.



**Living Conditions:** The BARHII model states that living conditions encompass the physical environment, economic opportunity, environmental health, public safety, and transportation. Teller County has 14.6% higher radon levels in comparison to the state of Colorado.



Radon in Teller County contributes to the environmental health for community members. Another noticeable difference is the median income for the state of Colorado is over \$15,000 more than Teller County. The tables in the *Findings* section below present a comparison of Teller County and the state of Colorado.

**Institutional Inequities:** According to the BARHII model, institutional inequities include corporations and businesses. Cripple Creek grossed over 134.7 million in 2018 and employed 1,643 in Teller County.



**Risk Behaviors:** According to the BARHII model, risk behaviors encompass substance abuse, disease, and injury. Compared to the state of Colorado, Teller County has higher rates for liquor store purchases, 18 and older cigarette smokers, and suicide rates.



## Survey Development

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The ColoradoSPH Student Assessment Team designed the community survey using Qualtrics. Please see the *Findings* sections below for further elaboration of these health indicators. Survey questions were drafted based on the results of data mining, field observations, the 2017 TCPHE Community Survey, and weekly discussions with TCPHE. The pilot survey consisted of 13 closed-ended and 10 open-ended questions and was broken down into several sections. These sections focused on community health, mental health, communication and resources, emergency preparedness, and environmental health. Respondents were also asked several demographic questions at the end of the survey. The survey consisted of a mix of 4 matrix, 2 polar (yes/no), 7 multiple-choice, and 10 short answer questions. Participants marked “yes” or “no” for a list of options when asked the following

questions: “Which of the following are health concerns in Teller County?,” “How do you receive information about community events and resources in Teller County?,” “How do you receive emergency notifications?,” and “What are the environmental concerns in Teller County?” Many of the short answer questions asked participants to share what they knew about various resources in Teller County, what prevents community members from accessing these services, and how they keep their families safe from environmental concerns. A full list of the community survey questions can be found in Appendix D.

The survey went through several rounds of revisions to incorporate feedback provided by the course instructor and TCPHE. Feedback from the course instructor was incorporated into the survey each time before the SAT shared the survey questions with TCPHE. A rationale or comment was provided for every survey question to help reviewers understand the importance of the survey question or why it was included (see Appendix C). Several questions were taken directly from the 2017 survey (e.g., demographics), while others were modified to better fit the needs and aims of the 2022 survey. Questions related to environmental health were drafted from one-on-one meetings with local environmental health experts and additional conversations with TCPHE. Additional questions were brainstormed during weekly meetings with TCPHE.

## **Survey Piloting and Revision**

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The community survey was piloted to ensure that the questions were clear and generated helpful responses for TCPHE to inform their next community health improvement plan (CHIP). TCPHE shared the pilot survey with partners, stakeholders, and community members from various organizations, occupations, and backgrounds on April 7, 2022, through two LISTSERVs (an application that distributes messages electronically according to a mailing list). The first LISTSERV group that responded to the pilot survey was the Teller Resource Group which serves all of Teller County including coalitions consisting of homeowner associations, fire service districts, and other leaders in the community. The other LISTSERV

was the Local Emergency Preparedness Coalition. Participants had two weeks to complete the online survey before it was closed on April 21, 2022.

The SAT then exported the survey results into an Excel spreadsheet,<sup>8</sup> cleaned up the data, and tracked the total number of responses and whether all the questions were answered by participants. An average completion rate was calculated in Excel for all participants and questions. This helped the SAT determine whether a question or the response option was unclear based on the number of responses out of the total number of participants, which was then calculated as a percentage. Each completion percentage was coded as either green, yellow, orange, or red to highlight different levels of engagement for the SAT team to discuss during the survey revision process. Short answer responses were analyzed to determine whether they matched the context of the corresponding survey question to ensure that the question is clear. All of these questions and the participants' responses were copied over into a second spreadsheet.<sup>9</sup> The SAT read through all of the responses and color-coded appropriate responses, meaning they matched the context of the question, green. If a response did not match the question or the response indicated that additional clarification was needed, then it was color-coded as bright yellow. These questions were then assessed by the SAT and the course instructor to determine whether the survey question needed minor edits to provide more clarity. For three of the matrix questions focused on communications and environmental health concerns, several participants shared an additional method or concern that was not listed using the “other” textbox. Two of the open-ended questions on the survey elicited responses from a few participants that suggested that additional clarification or direction may be needed. Overall, the high level of engagement with the survey and quality of the survey responses resulted in no changes being made to the pilot survey. Additional results of the quantitative data and pilot survey analyses can be found in Appendix E and the *Findings* section below.

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<sup>8</sup> A spreadsheet containing the raw data from the pilot survey was provided as a separate deliverable.

<sup>9</sup> A spreadsheet containing the data analyses on the pilot survey was provided as a separate deliverable.

# Findings

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## Comparative Analysis of Secondary Quantitative Data

The secondary quantitative data were comparatively analyzed for discrepancies between local and state indicators, highlighted within each table according to the color-coded key below. The summary tables below are organized to match the subcategories of the BARHII Model, including social and institutional inequities, living conditions, risk behaviors, disease and injury, and mortality.

Red = Concern      Green = Favorable

Table 8: Social Inequities

| Indicator  | Year | Teller County | Colorado  |
|--|------|---------------|-----------|
| Population <sup>7</sup>  | 2020 | 24,710        | 5,773,714 |
| Percent of population identify as White/Caucasian <sup>4</sup>               | 2020 | 93.8%         | 86.9%     |
| Percent of population identify as Black or African American <sup>4</sup>     | 2020 | 1%            | 4.6%      |
| Percent of population identify as American Indian/Alaska Native <sup>4</sup> | 2020 | 1.4%          | 1.6%      |
| Percent of population identify as Asian/Pacific Islander <sup>4</sup>        | 2020 | 1.2%          | 3.7%      |
| Percent of population identify as Hispanic/Latino <sup>4</sup>               | 2020 | 7.1%          | 21.8%     |

**Data Retrieved From:** <sup>4</sup> COPPR, 2017 <sup>7</sup> US Census Bureau, 2022

**Table 9: Living Conditions**

| Indicator   | Year      | Teller County | Colorado |
|---|-----------|---------------|----------|
| Total employer establishments <sup>7</sup>  | 2019      | 777           | 174,258  |
| Total employment, percent change <sup>7</sup>   | 2018-2019 | 3.5%          | 2%       |
| Percent of population aged 25+ years that completed high school graduation GED or alternative <sup>1</sup>  | 2015-2019 | 23.2%         | 21.4%    |
| Percent of population aged 25+ years that completed an associate or bachelor's degree <sup>1</sup>  | 2015-2019 | 35.3%         | 34.1%    |
| Percent of population aged 25+ years that completed a master, professional school or doctorate's degree <sup>1</sup>  | 2015-2019 | 14.8%         | 15.3%    |
| <p>Total employment in Teller County has increased at a higher percent compared to the state, with businesses Peak Internet, Newmont Mining Corp, Pikes Peak Regional Hospital, and Bronco Billy's the dominant employers in the region. Teller County contains two school districts - Woodland Park and Cripple-Creek Victor, serving an estimated enrollment of just under 3,000 students. There are also numerous non-profit organizations in Teller County, two of which were highlighted on the community visit - the Aspen Mine Center and Community Partnership FRC.</p> |           |               |          |
| <p><b>Data Retrieved From:</b> <sup>1</sup> CDPHE &amp; US Census Bureau, 2022</p>  |           |               |          |

Table 10: Economic Opportunity

| Indicator  | Year      | Teller County | Colorado  |
|--|-----------|---------------|-----------|
| Median Household Income <sup>7</sup>   | 2020      | \$61,463      | \$75,231  |
| % of Population Below Poverty Level <sup>1</sup>   | 2020      | 7.3%          | 9.3%      |
| Median home value in US dollars for owner-occupied housing units, 2016-2020 <sup>7</sup>   | 2016-2020 | \$304,800     | \$369,900 |
| Percent of renter-occupied housing units with gross rent 50% or greater of household income in the past 12 months, 2011-2015 <sup>1</sup>  | 2011-2015 | 26.4          | 23.8      |
| Percent of total housing units built prior to 1960, 2011-2015 <sup>1</sup>   | 2011-2015 | 10.7          | 19.1      |
| Percent of households that received food stamps in the past 12 months with an adult 60+ years old <sup>1</sup>   | 2015-2019 | 50.4          | 35.1      |
| Percent of households that received food stamps in the past 12 months with children <18 years old <sup>1</sup>   | 2015-2019 | 19.8          | 30.6      |
| Teller County's socioeconomic status is favorable when compared to the Colorado state-wide statistics regarding income, housing, and poverty, however there are many Teller County residents aged >60 years that receive food stamps, compared to the state. |           |               |           |

**Data Retrieved From:** <sup>1</sup>CDPHE, 2022, <sup>6</sup>US Census Bureau, 2022

Table 11: Institutional Inequities

Gaming Industry

| Indicator   | Year | Cripple Creek<br>(Teller County) |
|---|------|----------------------------------|
| Adjusted Gross Proceeds<br>(millions)               | 2018 | \$134.7                          |
| Devices   | 2018 | 3,597                            |
| Employees   | 2018 | 1,643                            |
| Employed Residents                                  | 2018 | N/A                              |
| Gaming Taxes/Fees (millions)                        | 2018 | \$11.4                           |
| Casino Employment Impact (%<br>of Total Employment) | 2017 | 13.1%                            |

**Data Retrieved From:** <sup>12</sup>Colorado Department of Revenue (Gaming Division), <sup>9</sup>Summit Economics, 2018

Table 12: Environmental Health

| Indicator  | Year       | Teller County | Colorado |
|--|------------|---------------|----------|
| Percent of adults aged<br>18+ years who report<br>bottled water as their | 2011, 2014 | 18.2          | 17.6     |

|   |      |      |     |
|---|------|------|-----|
| primary home drinking water source, 2011, 2014 <sup>1</sup>   |      |      |     |
| Percent of adults aged 18+ years who report using a private well, 2011 <sup>1</sup>   | 2011 | 46.1 | 9.8 |
| This section of 2022 Teller County Community Health Assessment focuses on preventing human injury and illness as well as promoting human well-being by limiting exposures to hazardous physical, chemical, and biological agents in air, water, soil, food, and other environmental media that may affect health. |      |      |     |
| <i>Data Retrieved From:</i> <sup>1</sup> CDPHE, 2022  |      |      |     |

## Radon

| Indicator   | Year      | Teller County | Colorado |
|---|-----------|---------------|----------|
| % of tests above the radon action level (4 pCi/L) <sup>1</sup>  | 2011-2015 | 66.7%         | 52.1%    |
| Radon is a cancer-causing radioactive gas found in homes, the presence of which is tested for in Colorado. Teller County has a higher percentage of radon tests above the action level than the statewide percentage, hence the inclusion of a survey question regarding radon. |           |               |          |
| <i>Data Retrieved From:</i> <sup>1</sup> CDPHE, 2022  |           |               |          |

## Public Safety & Transportation

| Indicator   | Year | Teller County | Colorado |
|---|------|---------------|----------|
| Adult violent crime rate (per 100,000 population) | 2014 | 215.2         | 134      |

|  |           |       |       |
|--|-----------|-------|-------|
| 18+ years old) <sup>1</sup>  |           |       |       |
| Juvenile violent crime rate (per 100,000 population 10-17 years old) <sup>1</sup>  | 2014      | 135.7 | 102.3 |
| Percent of workers (age 16+ years) that commute to work by public transportation (excluding taxicabs), 2011-2015 <sup>1</sup>  | 2011-2015 | 0.4   | 3.2   |
| Mean travel time to work (minutes) <sup>5</sup>  | 2021      | 32.1  | 25.5  |
| Age-adjusted rate of motor vehicle accident injuries (per 100,000 population), 2013-2015 <sup>1</sup>  | 2013-2015 | 93.9  | 74.1  |
| <p>From the results of the 2017 Community Health Survey, Teller County residents ranked transportation as the seventh health concern. Additionally, the rates of violent crime in Teller County, higher than the statewide rates, reflects the degree to which the public may feel safe in their community. The 2022 Community Health Survey will incorporate questions to reflect the issues of public safety and transportation.</p> |           |       |       |
| <p><i>Data Retrieved From:</i> <sup>1</sup>CDPHE,2022 <sup>5</sup>IHME,2016</p>  |           |       |       |

### Access to Care

| Colorado Health Access Survey (CHAS)- 2021 | Health Statistics Region (HSR) 17 | Colorado |
|--|-----------------------------------|----------|
| Insured                                    | 92.1%                             | 93.4%    |
| Private Insurance                          | 49.8%                             | 56.4%    |
| Employer-Sponsored Insurance               | 43.3%                             | 49.8%    |
| Individual/Other Insurance                 | 6.5%                              | 6.6%     |

|  |       |       |
|--|-------|-------|
| Public Insurance   | 42.2% | 37.1% |
| Medicare   | 18.4% | 11.5% |
| Medicaid/Child Health Plan Plus (CHP+)   | 23.8% | 25.6% |
| Uninsured  | 7.9%  | 6.6%  |
| <b>Use of Healthcare Services</b>  |       |       |
| Had visit for checkup, examination, or other preventative care in past 12 months       | 68.2% | 67.2% |
| Visited a specialist in the past 12 months   | 45.3% | 41.9% |
| Has a usual source of care   | 81.4% | 85%   |
| First time using mental health or substance use services                               | 28.4% | 19.1% |
| <b>Barriers to Healthcare</b>  |       |       |
| Told by Doctor's office/clinic not accepting new patients                              | 10.8% | 8.4%  |
| Unable to find transportation to doctor's office or too far away                       | 1.8%  | 2.2%  |
| Unable to make an appointment due to work  | 9.7%  | 10.5% |
| Unable to schedule appointment due to <b>lack of childcare</b>                         | 12.3% | 5.6%  |
| Difficulty performing daily activities because of any <b>physical/mental emotional</b> | 17.9% | 13.7% |

| condition   |       |       |
|---|-------|-------|
| Mental Health Providers   | 560:1 | 270:1 |
| <b>Affordability</b>  |       |       |
| Did not fill a prescription in the past 12 months due to <b>cost</b>      | 6.9%  | 9.7%  |
| Did not visit a general doctor in the past 12 months due to <b>cost</b>   | 11.2% | 12.3% |
| Had a surprise medical bill   | 23.7% | 19.6% |
| <i>Data Retrieved From:</i> <sup>11</sup> Colorado Health Institute, 2021 |       |       |

**Table 13: General Health Status**

| General Health Status  | Data Year(s) | HSR 17: Teller County | Colorado |
|--|--------------|-----------------------|----------|
| Adults who reported that their general health was fair or poor           | 2021         | 16.4%                 | 12.6%    |
| <i>Data Retrieved From:</i> <sup>12</sup> Teller County Government, 2022 |              |                       |          |

**Table 14: Risk Behaviors**

**Substance Use**

| Indicator   | Year      | Teller County | Colorado |
|---|-----------|---------------|----------|
| Rate of liquor stores<br>(per 10,000<br>population) <sup>1</sup>  | 2015      | 3.8           | 2.4      |
| Percent of adults aged<br>18+ years who currently<br>smoke cigarettes <sup>1</sup>  | 2013-2015 | 20            | 16.3     |
| Percent of women who<br>smoked during the last<br>three months of<br>pregnancy <sup>1</sup>   | 2012-2014 | 24%           | 7.6%     |
| Percent of adults aged<br>18+ years who used<br>marijuana one or more<br>days during the past 30<br>days <sup>1</sup>   | 2014-2015 | 11.8          | 13.5     |
| Percent of adults aged<br>18+ years who reported<br>binge drinking in past<br>30 days <sup>1</sup>  | 2013-2015 | 15.1          | 17.9     |
| The information provided is the most recent data for Teller County, specifically addressing the residents' experience or thoughts about smoking (e.g., tobacco, marijuana). |           |               |          |
| <i>Data Retrieved From:</i> <sup>1</sup> CDPHE,2022   |           |               |          |

Table 15: Disease & Injury

**Suicide Morbidity**

| Indicator  | Year      | Teller County | Colorado |
|--|-----------|---------------|----------|
| Age-adjusted suicide rates per 100,000 population <sup>1</sup>   | 2018-2020 | 39.6          | 21.6     |
| Crude rate of ED visits mentioning intentional self-harm at acute care hospitals (per 100,000 residents) <sup>1</sup>        | 2016-2020 | 171.8         | 138.8    |
| Age-adjusted rate of ED visits mentioning intentional self-harm at acute care hospitals (per 100,000 residents) <sup>1</sup> | 2016-2020 | 210.5         | 141.8    |
| <i>Data Retrieved From:</i> <sup>1</sup> CDPHE,2022  |           |               |          |

Table 16. Food Security Indicators

| Indicator  | Data Year(s) | HSR 17: Teller County | Colorado |
|--|--------------|-----------------------|----------|
| Food Insecurity Rate   | 2019         | 9.60%                 | 9.80%    |
| Average Meal Cost  | 2019         | \$3.53                | \$3.35   |
| Above SNAP, Other Nutrition Programs threshold of 200% Poverty | 2019         | 43%                   | 39%      |
| Below SNAP, Other Nutrition Programs                           | 2019         | 57%                   | 61%      |

|   |  |  |  |
|---|--|--|--|
| threshold of 200%<br>Poverty  |  |  |  |
| <p><b><i>Data Retrieved From:</i></b> <sup>12</sup>Teller County Government, 2022</p> |  |  |  |

**Table 17: Maternal & Child Health**

| Indicator  | Data Year(s) | Teller County | Colorado |
|--|--------------|---------------|----------|
| Total Live Births  | 2020         | 170           | 61,496   |
| Low Birth Weight   | 2020         | 12.1%         | 9.3%     |
| Very Low Birth Weight  | 2020         | 2.4%          | 1.1%     |
| Preterm Births   | 2020         | 10%           | 9.1%     |
| Smoking During Pregnancy   | 2020         | 2.4%          | 4.7%     |
| Prenatal Care  | 2017-2020    | 74%           | 79.5%    |
| Child Abuse (Rate per 1,000)   | 2017-2019    | 9.17          | 9.46     |
| <i>Data Retrieved From:</i> <sup>12</sup> Teller County Government, 2022 |              |               |          |

**Table 18: Mortality**

**Leading Causes of Death per 100,000 (Age-adjusted)**

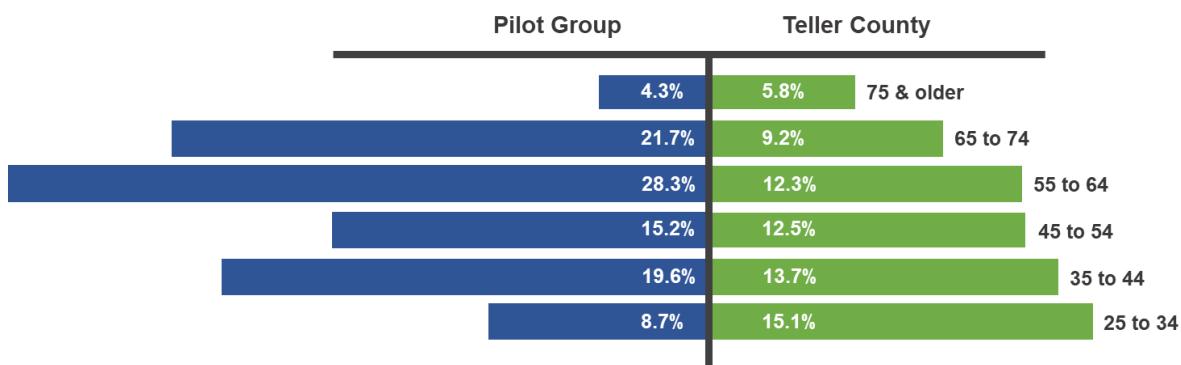
| Cause of Death                                      | Teller County | State  |
|---|---------------|--------|
| Malignant Neoplasms <sup>1</sup>                    | 103.55        | 125.12 |
| Heart Disease <sup>1</sup>                          | 92.28         | 124.75 |
| COVID-19 <sup>1</sup>                               | 17.77         | 67.84  |
| Unintentional Injuries <sup>1</sup>                 | 28.45         | 59.7   |
| Chronic Lower Respiratory Diseases <sup>1</sup>     | 36.15         | 38.5   |
| Cerebrovascular Diseases <sup>1</sup>               | 30.53         | 34.88  |
| Alzheimer's Disease <sup>1</sup>                    | 26.83         | 35.59  |
| Suicide <sup>1</sup>                                | 61.9          | 21.36  |
| Diabetes Mellitus <sup>1</sup>                      | 13.66         | 17.77  |
| Chronic Liver Disease & Cirrhosis <sup>1</sup>      | 23.87         | 17.66  |
| All Causes <sup>1</sup>                             | 555           | 738.74 |
| Drug-induced Deaths <sup>1</sup>                    | 23.2          | 25.5   |
| Alcohol-induced Deaths <sup>1</sup>                 | 18.2          | 24     |
| <i>Data Retrieved From: <sup>1</sup>CDPHE, 2020</i> |               |        |

The pilot survey had a total of 46 participants. An additional eight participants were not included in the analysis because all of their responses were blank. The total completion percentage for closed-ended questions was 88% and 82% for open-ended questions. It is important to note that those percentages include short responses, such as "no" or "not sure," that did not provide detailed information. The qualitative, open-ended questions associated with emergency preparedness, the county's response to the COVID-19 pandemic, and Teller County resources had less engagement from participants compared to other topics. Emergency preparedness and COVID-19 response may be topics that participants are less familiar with or have less expertise in, which may explain the lower number of responses. Two "other" text responses to the first question on the survey ("Which of the following are health concerns in Teller County?") suggested that the response options provided may provide limited feedback for action. More specifically, the participants identified more specific issues related to access to medical care (i.e., affordability and there not being enough Medicaid providers because they have all met their quotas). When asked about how they receive information about community events, Teller County resources, and emergency notifications, several participants shared another communication channel that was not listed on the pilot survey (e.g., Family Resource Center and Peak Alerts). A few additional environmental health concerns that were not listed as an option on the pilot survey were also shared by participants (e.g., air quality). This suggests that there are additional health concerns and communication channels that TCPHE may not be aware of. On average, the survey took approximately 19 minutes to complete which was expected since the survey consists of 23 questions.

**Figure 4.** Comparison of Pilot Age Group Percentages vs. Teller County

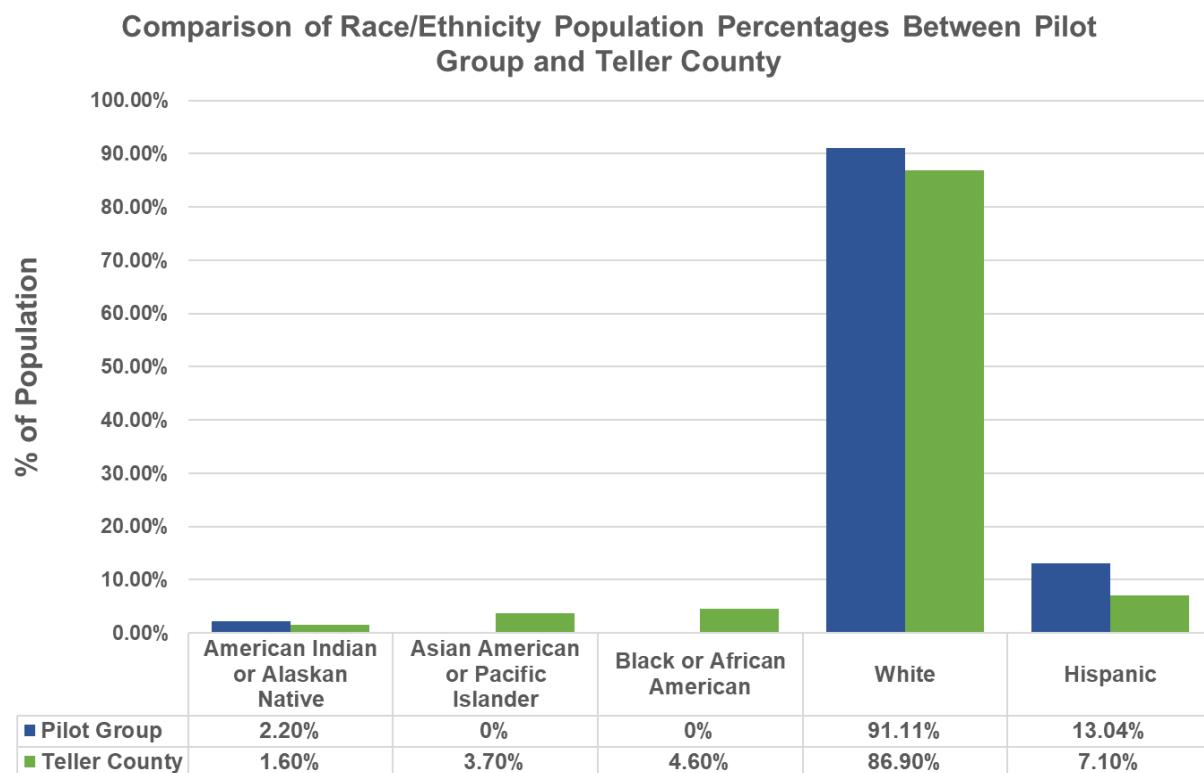
The age group with the greatest number of participants was 55 to 64, which aligns closely with the median age of the Teller County community. However, over half (54.3%) of the pilot group was 55 years and older compared to 41.1% of the entire county. Female participants made up more than two-thirds of the pilot group (68.9%) even though the sex distribution in

**Comparison of Age Group Percentages**



**Figure 5.** Comparison of Pilot Race/Ethnicity Population Percentages vs. Teller County

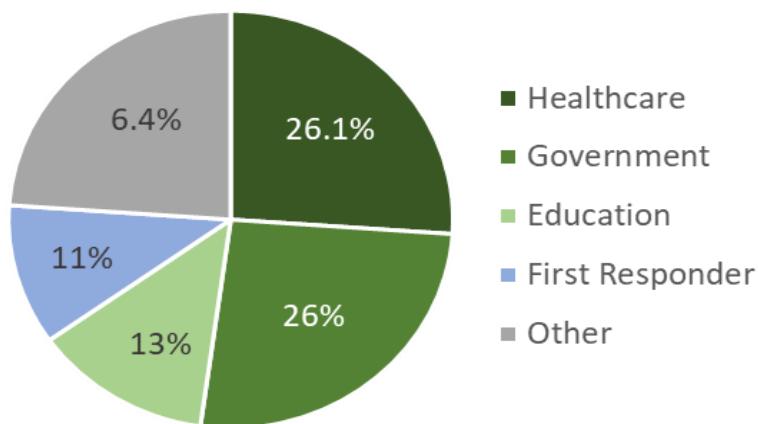
Teller County is about the same.<sup>1</sup> The population of Teller County is majority White/Caucasian (86.9%);



however, there is a proportion of community members who identify with historically marginalized races. There was no representation from community members who identify as Asian American/Pacific Islander or Black/African American. Approximately 13% of the participants identified as Hispanic, which is a good representation for this subpopulation who makes up 7% of Teller County. Almost all of the participants who identified as Hispanic work in the healthcare and government sectors, so the voices of Hispanic community members who work in other industries were not captured. The top two types of work that participants selected were government (26.1%) and healthcare (26.1%) followed by education and first responder (see Figure 7). While healthcare and social assistance is one of the major employing industries in Teller County, retail and construction closely follow (see Figure 8) which are underrepresented in the pilot group.<sup>8</sup>

**Figure 6.** Pilot Employment by Type of Work Percentage

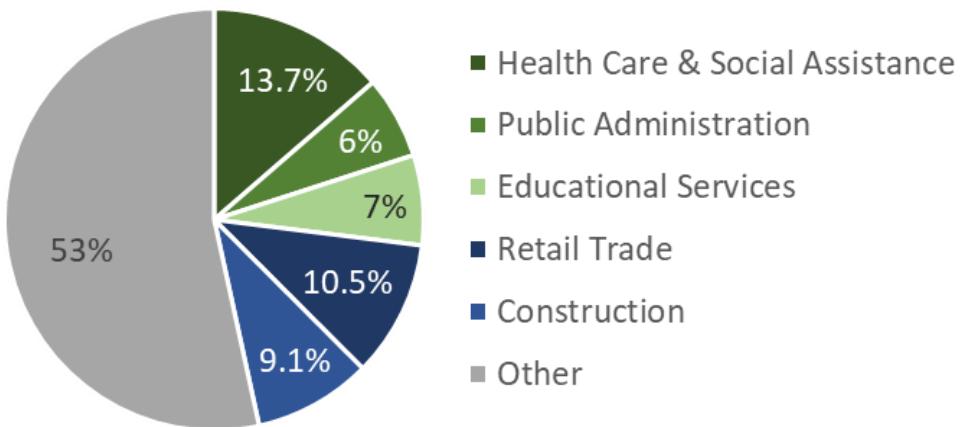
### Employment in Pilot Group by Type of Work



In addition, even though Teller County has a significant number of residents who are veterans, no one in the pilot group was associated with the military. It is possible that the results of the pilot group may not accurately predict engagement levels with other Teller County community residents when the final community survey is distributed because of the lack of representation from multiple groups.

**Figure 7.** Employment in Teller County by Industry

### Employment in Teller County by Industry



# Recommendations

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In an effort to provide research equity strategies for elevating voices of marginalized community members during the community health assessment process, the SAT has recommendations for the next phases of the current CHA in Teller County. These recommendations are based on several factors including the representation of responses in the pilot survey. In an effort to support the TCPHE's efforts to address health equity, the SAT recommends the following actions:

## **Further Analyze the Pilot Survey Results**

TCPHE should analyze the content of the pilot survey results and use the results to inform the next community health improvement plan. Participants provided valuable information that could be used to inform and strengthen community leadership, partnerships, communications, readiness, and preparedness. Data from the pilot survey should be taken into consideration separately from the final community survey that will be distributed in the near future. Assessing data from the pilot survey will ensure that other community voices are not overshadowed. The pilot survey responses may not be representative because the sample itself was not representative in terms of age, race/ethnicity, and employment sector. The pilot group consisted majorly of community members working in the government and healthcare sector who may also have some experience working directly with TCPHE. This group provided valuable information that may be used to guide strategic planning efforts and action among community partners and stakeholders. These data may be compared to the results of either a second pilot or the final community survey to see how engagement levels and the quality of responses differ depending on the demographics of participants. Significant differences may highlight the need for more targeted policies and strategic actions for different community members in the next community health improvement plan.

In addition, TCPHE should look at what participants shared in their text response under the “Other” response option for the survey questions on health concerns, communications, environmental health concerns, and type of work and consider adding those to the list of response options for the final community survey.

### **Conduct a Second Pilot Survey**

TCHPE should conduct a second pilot of the survey that is distributed to more community members who were not represented in the first pilot. These would be community members who:

- Fall between the ages of 18 and 34;
- Identify with a historically marginalized race; and/or
- Work in service/retail, construction, and other types of work.

Obtaining feedback from more community members of diverse ages, ethnicities/races, and workplaces offer more insight into the health status and experiences lived by all members of the community.

### **Comparative Analysis of School District Data**

In order to conduct sound comparative analyses of the municipalities within Teller County, TCPHE should compare the Woodland Park and Cripple Creek-Victor school district datasets. Unfortunately, the SAT was unable to include these results in the health assessment due to time constraints. The tables listed in Appendix B showcase the results of the Healthy Kids Colorado survey for Teller County (HSR17) and the Cripple Creek-Victor school district, but the results of the Healthy Kids Colorado survey for the Woodland Park school district were not included and the comparative analysis between school districts within Teller County could not be completed.

## **Equitably Distribute the Final Community Survey**

Since the pilot group does not fully represent the diversity of Teller County community residents, the SAT team recommends that TCPHE utilize some of the following strategies to broaden the distribution and accessibility of the community survey:

- Make the survey available in both English and Spanish;
- Share the survey through the LISTSERVs of community partners, organizations, and small businesses; and
- Create a QR code for the survey link and post it in community resource centers, grocery stores, and other popular locations.

Providing the survey in different languages will help ensure that it is more accessible to community members of varying backgrounds and ethnicities. Moreover, sharing the survey through multiple channels (e.g., LISTSERVs and a posted QR code) will increase the likelihood that community members see the survey and take the time to share their needs, thoughts and any other feedback.

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## Appendices

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### Appendix A. Scope of Work

Appendix B. Secondary Quantitative Data Tables

Appendix C. Pilot Survey Construction

Appendix D. Pilot/Final Survey

Appendix E. Pilot Survey Results

Appendix F. PowerPoint Presentation Slides

# Appendix A: Scope of Work

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## Scope of Work

### Teller County Public Health and Environment

#### 1. Project team Information:

*Please include the community partner's name and contact information as well as each student's name and contact information.*

| Name                                 | Email  |
|--------------------------------------|--|
| Karissa Larson, RN, MSN (TCPHE)      | <a href="mailto:LarsonK@co.teller.co.us">LarsonK@co.teller.co.us</a>                   |
| Michelle Wolff, MSN, WHNP-BC (TCPHE) | <a href="mailto:WolffA@co.teller.co.us">WolffA@co.teller.co.us</a>                     |
| Martha Hubbard, RN, BSN (TCPHE)      | <a href="mailto:HubbardM@co.teller.co.us">HubbardM@co.teller.co.us</a>                 |
| Amelia Cavazos                       | <a href="mailto:amelia.cavazos@cuanschutz.edu">amelia.cavazos@cuanschutz.edu</a>       |
| Courtney Fullwood                    | <a href="mailto:courtney.fullwood@cuanschutz.edu">courtney.fullwood@cuanschutz.edu</a> |
| Krishangi Pokhrel                    | <a href="mailto:krishangi.pokhrel@cuanschutz.edu">krishangi.pokhrel@cuanschutz.edu</a> |
| Cassidy Walter                       | <a href="mailto:cassidy.walter@cuanschutz.edu">cassidy.walter@cuanschutz.edu</a>       |
| Brian Whaley                         | <a href="mailto:brian.whaley@cuanschutz.edu">brian.whaley@cuanschutz.edu</a>           |

#### 2. Brief description of the community:

*Please refer to the original scope of work the community partner prepared.*

Teller County is one of 64 counties in Colorado that sits geographically in the center of the state. The county's population is 24,710 per the latest 2020 census data. The county has five cities; Woodland Park, Cripple Creek, and Victor are incorporated, and Divide and Florissant are not. On the north end of

the county sits Woodland Park. Woodland park is often referred to as a bedroom community or commuter town, where most of the residents live but do not work. This sentiment is supported by the mean commute time of 32.9 minutes for residents, who are most likely traveling to Colorado Springs. On the south end of the county, Cripple Creek and Victor are supported by the gaming and mining industries. As the latest census data will confirm, the county continues to serve an aging population, with a median age of 50 years compared to a statewide mean of 37.1 years, and 21% of Teller county residents aged > 65 compared to 14.7% in the state. Teller County Commissioners serve as the Board of Health. The health department is growing to meet the demands of the pandemic. The health department now employs 14 individuals with many others contracted for pandemic-related services.

### **3. Project description:**

*Please include the overarching questions the project is expected to address and the data collection methods to be used during the course of the project.*

The purpose of this assessment is to describe Teller County's population demographics, health and environmental issues, and any existing health inequalities. The project is expected to produce an equitable and comprehensive community assessment of Teller Country's health and environmental status. The data collection methods will consist of mining secondary data from various sources and databases, such as COHID. This data collection will inform the design and development of a community survey to be piloted by the ColoradoSPH student assessment team before final revisions are made and the finished product delivered at the end of the semester. Additionally, students assigned to this project will work with a Teller County Public Health and Environment representative and course instructors to revise the scope of work, as needed.

### **4. Project deliverables:**

*Please identify all of the deliverables that the team will create, along with their deadlines.*

The following table identifies the intended deliverables and appropriate deadlines for submission to Teller County Public Health and Environment and the Community Health Assessment course at the Colorado School of Public Health:

| Project Deliverable                    | Deadline       |
|--|----------------|
| Draft Survey - to be shared with TCPHE | March 16, 2022 |
| Revised Survey (Pre-Pilot)             | March 30, 2022 |
| Final Survey (Post-Pilot)              | May 25, 2022   |

|                  |              |
|------------------|--------------|
| Final CHA Report | May 25, 2022 |
|------------------|--------------|

\*The course instructor will share the final CHA report and survey with the TCPHE following the submission of final course grades on May 25, 2022.

### 5. Project team organization:

*Please include the roles and responsibilities of each member of the team as well as the community partner. Please also include the team's weekly check-in meeting schedule for the liaisons, community partner, and instructor.*

Weekly Check-In Meeting for Liaisons, Community Partner, and Instructor: Wednesdays, 10-11 am

| Name                         | Roles and Responsibilities   |
|------------------------------|--|
| Karissa Larson, RN, MSN      | Teller County Public Health and Environment CHA Manager (Community Partner)    |
| Michelle Wolff, MSN, WHNP-BC | Teller County Public Health and Environment Director (Community Partner)       |
| Martha Hubbard, RN, BSN      | Teller County Public Health and Environment Representative (Community Partner) |
| Amelia Cavazos               | Lead Liaison and Report Editing (SAT)  |
| Courtney Fullwood            | Data Visualization & Data Analysis Co-Lead (SAT)                               |
| Krishangi Pokhrel            | Secondary Liaison and Report Editing (SAT)                                     |
| Cassidy Walter               | Survey Development/Piloting & Report Editor (SAT)                              |
| Brian Whaley                 | Data Generation & Data Analysis Co-Lead (SAT)                                  |

### 6. Timeline:

*Please provide a detailed timeline that includes all tasks, responsible parties, and deadlines. A table with the following columns is recommended: task, person responsible, and deadline. The team's timeline should also include the following course related assignments and their deadlines: updated scope of work for team project, detailed team project report outline, final scope of work for team project, peer editing of*

*near final report, near final report for instructor, final team project report and presentation, and last revisions to final team project report.*

| Task  | Responsible Party           | Deadline(s)               |
|---|-----------------------------|---------------------------|
| Updated Scope of Work for Team Project  | ColoradoSPH Student Team    | March 11, 2022            |
| Detailed Outline for Team Project Report  | ColoradoSPH Student Team    | March 16, 2022            |
| Student Team drafts survey and shares with TCPH Community Partner for feedback                              | ColoradoSPH Student Team    | March 16, 2022            |
| TCPH Community Partner shares feedback with students  | Teller County Public Health | March 23, 2022            |
| Final Scope of Work for Team Project  | ColoradoSPH Student Team    | March 30, 2022            |
| Student Team incorporates TCPH Community Partner's feedback   | ColoradoSPH Student Team    | March 30, 2022            |
| Peer Editing of Near Final Team Project Report  | ColoradoSPH Student Team    | April 13 & April 20, 2022 |
| Student Team pilots survey using Qualtrics  | ColoradoSPH Student Team    | March 31 - April 21, 2022 |
| Revised Near Final Team Project Report Submitted to Instructor  | ColoradoSPH Student Team    | April 27, 2022            |
| Student Team reviews pilot survey responses and, based on those responses, revises and finalizes the survey | ColoradoSPH Student Team    | April 22 - May 10, 2022   |
| Final Team Project Presentation & Report  | ColoradoSPH Student Team    | May 11, 2022              |
| Last Revisions to Team Project Final Report   | ColoradoSPH Student Team    | May 20, 2022              |

|  |                       |              |
|--|-----------------------|--------------|
| Virginia will share the final version of the CHA report (with the final version of the survey included as an appendix) with the TCPH Community Partner after final grades for the course are submitted | Dr. Virginia Visconti | May 25, 2022 |
|--|-----------------------|--------------|

## Student Assessment Team Biographies



*Lead Liaison, Amelia Cavazos, MPH Candidate in Global Community & Behavioral Health*

Amelia is from Denver, Colorado, and is completing her last semester in the Master of Public Health graduate program at the Colorado School of Public Health, Anschutz Medical Campus. Amelia obtained her BA in Spanish Language and Literature at the University of Colorado Boulder. Amelia has worked with a wide range of populations including older adults as well as individuals and families experiencing homelessness. Amelia has a passion for health equity and exploring the social determinants of health among underserved populations. Amelia enjoys skiing and backpacking in the Rocky Mountains, sewing clothing, and is currently writing a cookbook.



*Data Visualization, Courtney Fullwood, MPH Candidate in Global Community & Behavioral Health*

Courtney is a second-year MPH student in the Global Community and Behavioral Health concentration. She received her BS in Public Health with a minor in Psychology from the University of North Carolina Charlotte. She has over 5 years of health education, most of which has been done at Cabarrus County in North Carolina but has also worked with Rocky Mountain Cancer Center and CU Boulder. Altogether, Courtney has been working within the health sector since 2010. Courtney's skills include active listening, organizational communication, and public speaking. She enjoys traveling, cooking, and playing with her dog Lilly.

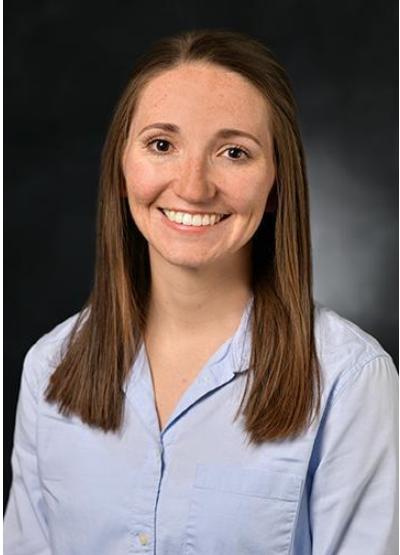


*Secondary Liaison, Krishangi Pokhrel, MPH Candidate in Global Community & Behavioral Health*

Krishangi is from Nashua, New Hampshire, where she graduated from Rivier University with a degree in public health. She is currently a first-year MPH student in the Community and Behavioral Health + Global Health program at the Colorado School of Public Health. Krishangi lived and worked in Nepal in 2018 in various sectors of public health, including reproductive health, nutrition, child protection, and research. In 2019, Krishangi joined the Peace Corps and served as a health volunteer in Botswana. Krishangi hopes to continue her work internationally, especially in developing nations. Krishangi enjoys

exploring the outdoors, cooking, reading books, hiking, and traveling in her free time.

*Report Writing & Editing, Cassidy Walter, MPH Candidate in Community & Behavioral Health*



Cassidy was born and raised in Spokane, WA. She graduated from Carroll College in Helena, MT with a B.A. in Health Sciences and Public Health. She then worked for the State of Montana for 2+ years as a Health Education Specialist before moving to Colorado to pursue her Master's in Public Health with a concentration in Community & Behavioral Health. She currently works as a coordinator for the Rocky Mountain Public Health Training Center to assist a national workgroup focused on updating a toolkit designed to help public health practitioners impact systems change. Cassidy has always been passionate about helping others reach their goals, both professionally and personally. In her free time, she loves to read, play cribbage, participate in recreational sports, and explore the outdoors.

*Data Generation, Brian Whaley, MPH Candidate in Global Community & Behavioral Health*



Brian is currently completing his final semester as a Global Community & Behavioral Health Candidate with the Colorado School of Public Health. A native of Kalamazoo, MI, Brian relocated to Colorado after serving as a Community Health Advisor with Peace Corps Benin, where he supported grassroots health education programs and technical training for health centers and community health workers in the Commune of Boukoumbe. Brian has also gained experience in Colorado's non-profit and public health sectors, as a Health & Outdoor Education with the Boys & Girls Clubs of Metro Denver and an Enteric Disease Interviewer with the Colorado Department of Public Health & Environment. In his spare time, Brian is a full-fledged outdoor enthusiast, musician, and birder, who enjoys exploring the Rocky Mountains with friends.

## Appendix B: Secondary Quantitative Data Tables

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### Mental Health

| Indicator   | Year      | Teller County | Colorado |
|---|-----------|---------------|----------|
| Percent of women who experienced 1 or more major life stress events 12 months before delivery <sup>1</sup>  | 2012-2014 | 80.3%         | 71.8%    |
| Age-adjusted rate of mental health diagnosed hospitalizations (per 100,000 population) <sup>1</sup>   | 2013-2015 | 2,207         | 2,833    |
| Percent of women who often or always felt down, depressed, sad, or hopeless since the new baby was born (Postpartum Depressive Symptoms) <sup>1</sup>                               | 2012-2014 | 17.6%         | 9.6%     |
| Average number of days in the past 30 days when their mental health was not good (adults aged 18+ years) <sup>1</sup>   | 2013-2015 | 4.5           | 3.3      |
| The 2022 Community Health Survey will include questions that gauge residents' knowledge of and access to mental health resources, per the recommendation of the community partners. |           |               |          |
| <i>Data Retrieved from:</i> <sup>1</sup> CDPHE, 2022  |           |               |          |

## COVID-19

| Indicator  | Year         | Teller County | Colorado  |
|--|--------------|---------------|-----------|
| Cases <sup>2</sup>   | 2020-Present | 4,747         | 1,327,685 |
| Deaths among cases <sup>2</sup>  | 2020-Present | 55            | 11,870    |
| Percent of deaths among cases <sup>2</sup>   | 2020-Present | 1.16%         | 0.89%     |
| Deaths due to COVID-19 <sup>2</sup>  | 2020-Present | 24            | 12,805    |
| The 2022 Community Health Survey will also assess the impact of the global COVID-19 pandemic by posing questions regarding the success and struggles of Teller County Public Health. |              |               |           |
| <i>Data Retrieved from:</i> <sup>2</sup> Colorado COVID-19,2022  |              |               |           |

## Drug Overdose

| Indicator   | Year         | Teller County | Colorado |
|---|--------------|---------------|----------|
| All drug overdose <sup>1</sup>  | 2019-present | 63.0          | 80.8     |
| Any opioid <sup>1</sup>   | 2019-Present | 23.6          | 18.8     |
| The 2022 Community Health Survey will also assess the percentage of hospitalizations due to drug overdose in Teller County Public Health. |              |               |          |
| <i>Data Retrieved from:</i> <sup>1</sup> CDPHE,2022   |              |               |          |

### Mortality

| Indicator  | Year      | Teller County              | Colorado |
|--|-----------|----------------------------|----------|
| Male life expectancy at birth <sup>1</sup>   | 2014      | 79.1                       | 78.2     |
| Female life expectancy at birth <sup>1</sup>   | 2014      | 82.6                       | 82.2     |
| Infant mortality rate (deaths per 1,000 live births) <sup>1</sup>                        | 2018      | LNE (Low number of events) | 4.7      |
| Count of suicides <sup>1,6</sup>   | 2018-2020 | 33                         | 3,871    |
| % of suicides via firearm <sup>1,6</sup>   | 2018-2020 | 66.7%                      | 50.5%    |
| <i>Data Retrieved from:</i> <sup>1</sup> CDPHE, 2022 <sup>6</sup> US Census Bureau, 2022 |           |                            |          |

## 2019 Healthy Kids Colorado Survey Results

| Indicator  | HSR 17 | Colorado |
|--|--------|----------|
| Among students who drank alcohol during the past 30 days, the percentage who had 3 or more drinks in a row within a couple hours <sup>1</sup>                        | 56.6   | 62.4     |
| Among students who drove a car or other vehicle during the past 30 days, the percentage who drove when they had been drinking alcohol one or more times <sup>1</sup> | 3.5    | 5.9      |
| Among students who used marijuana in past 30 days, the percentage that usually got it from an adult <sup>1</sup>   | 22.6   | 22.1     |
| Percentage of students who feel it would be sort of easy or very easy to get drugs like cocaine, LSD, or amphetamines if they wanted <sup>1</sup>                    | 13.8   | 17.8     |
| Among students who drove a car or other vehicle during the past 30 days, the percentage who drove when they had been using marijuana one or more times <sup>1</sup>  | 9.8    | 11.2     |
| Percentage of students who actually attempted suicide one or more times during the past 12 months <sup>1</sup>   | 10.1   | 7.6      |
| Percentage of students who ate breakfast on all of the past week <sup>1</sup>  | 29.0   | 32.5     |

|   |      |      |
|---|------|------|
| Percentage of students who have experienced problems with their mouth or teeth in the past year, not including braces or injuries <sup>1</sup>  | 32.9 | 26.7 |
| Among students who play video games, percentage who spend two or more hours per average school day playing video or computer games <sup>1</sup>   | 68.3 | 73.1 |
| Percentage of students who described their grades as mostly A's or B's over the past year <sup>1</sup>  | 70.6 | 74.7 |
| Percentage of students who drank alcohol or used drugs before the last time they had sexual intercourse, among students who had sexual intercourse during the past three months <sup>1</sup>                | 19.3 | 21.5 |
| Among students who use social media, percentage who check social media once or twice an hour or more <sup>1</sup>   | 62.4 | 67.2 |
| Among students who have used vapor products in the 30 days, the percentage that used products with pre-filled pods <sup>1</sup>   | 64.0 | 61.9 |
| Among students who dated or went out with someone during the past year, the percentage who had been physically hurt on purpose by someone they were dating or going out with one or more times <sup>1</sup> | 10.5 | 9.5  |
| Percentage of students who were obese (i.e., at or above the 95th percentile for body mass  | 9.8  | 9.7  |

|  |  |  |
|--|--|--|
| index, by age and gender) <sup>1</sup>               |  |  |
| <b>Data Retrieved from:</b> <sup>1</sup> CDPHE, 2022 |  |  |

### 2021 Healthy Kids Colorado Survey- Cripple Creek-Victor HS Results

| Indicator  | HKCS 17 |
|--|---------|
| Among students who drank alcohol during the past 30 days, the percentage who had 3 or more drinks in a row within a couple hours <sup>1</sup>                        | 13.9    |
| Among students who drove a car or other vehicle during the past 30 days, the percentage who drove when they had been drinking alcohol one or more times <sup>1</sup> | N/A     |
| Among students who used marijuana in past 30 days, the percentage that usually got it from an adult <sup>1</sup>   | N/A     |
| Percentage of students who feel it would be sort of easy or very easy to get drugs like cocaine, LSD, or amphetamines if they wanted <sup>1</sup>                    | 17.4    |
| Among students who drove a car or other vehicle during the past 30 days, the percentage who drove when they had been using marijuana one or more times <sup>1</sup>  | N/A     |
| Percentage of students who actually attempted suicide one or more times during the past 12 months <sup>1</sup>   | 10.8    |
| Percentage of students who ate breakfast on all of the past week <sup>1</sup>  | 17.1    |

|   |      |
|---|------|
| Percentage of students who have experienced problems with their mouth or teeth in the past year, not including braces or injuries <sup>1</sup>  | N/A  |
| Percentage of students who drank alcohol or used drugs before the last time they had sexual intercourse, among students who had sexual intercourse during the past three months <sup>1</sup>                | N/A  |
| Among students who have used vapor products in the 30 days, the percentage that used products with pre-filled pods <sup>1</sup>   | 38.4 |
| Among students who dated or went out with someone during the past year, the percentage who had been physically hurt on purpose by someone they were dating or going out with one or more times <sup>1</sup> | 9.5  |
| <i>Data Retrieved from:</i> <sup>1</sup> CDPHE, 2022  |      |

# Appendix C: Survey Construction

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## Community Survey Instrument

### Introduction

Thank you for participating and sharing your opinion in this Teller County Community Health Survey. Local public health agencies are required to conduct a Community Health Assessment every five years that is used to create a five-year Community Health Improvement Plan. We encourage community members to take some time to fill out our anonymous community-wide survey to help us identify priority health needs and to understand how to make Teller County a healthier place to thrive. The following survey was developed by the Colorado School of Public Health in partnership with Teller County Public Health and Environment. Your responses will be kept anonymous and will help guide future public health efforts. This is a short survey and should take only about 15-20 minutes to complete. As a community member, your knowledge and experiences are highly valuable.

### Consent

If you join the community health assessment, you will need to complete this online survey and submit it to the best of your ability. You have a choice about joining this community health assessment. You do not have to participate if you prefer not to. The data collected during this community health assessment will be used by Teller County Public Health and Environment to develop a health improvement plan aimed at the promotion of population health. Every effort will be made to protect your privacy and confidentiality by making all responses anonymous. By participating in this survey, you are agreeing to participate in this community health assessment.

| Question (23 total)  | Comments/Rationale   |
|--|--|
| <p>Health - The following questions ask about your opinion on Teller County's health status.</p>   |  |
| <p>1. Which of the following are health concerns in Teller County? (Please mark "yes" or "no")</p> <ul style="list-style-type: none"><li>Alcohol misuse</li><li>Crime rate</li><li>Substance misuse</li><li>Access to medical care</li><li>Availability of nutritious food</li></ul> | Question was extracted from previous TCPHE 2017 CHA survey |

|   |   |
|---|---|
| <ul style="list-style-type: none"> <li>● Access to dental care</li> <li>● Affordable housing</li> <li>● Transportation services</li> <li>● Mental health services</li> <li>● Recreation facilities</li> <li>● Substance abuse rehabilitation services</li> <li>● Tobacco use (e.g., cigarettes, cigars, chew, and vaping)</li> <li>● Other: _____</li> </ul>  |   |
| <p><b>Mental Health</b> - The following questions ask about mental health in Teller County. Mental health includes our emotional, psychological, and social well-being; it affects how we think, feel, and act.</p>   |   |
| 1. What mental health resources in Teller County do you know about?   | Look for a deficit in knowledge about specific resources, see what resources are used most often. |
| 2. What prevents people from accessing mental health resources in Teller County?  | Explore access to services and what are the potential barriers to resources                       |
| 3. What mental health resources, if any, are missing in Teller County?  | How can Teller County help? Is there a deficit in resources?                                      |
| <p><b>Communications and Resources</b> - The following questions ask about health and environmental communication and resources in Teller County. We want to better understand how health information is spread throughout the county, and what resources are used in Teller County.</p>  |   |
| 1. How do you receive information about community events and resources in Teller County?<br><br><ul style="list-style-type: none"> <li>- Faith-based organization</li> <li>- Doctor/health care provider</li> <li>- Email</li> <li>- Facebook or Twitter</li> <li>- Family or friends</li> <li>- Health department</li> <li>- Internet</li> <li>- Library</li> <li>- Newspaper/magazines</li> <li>- Radio</li> <li>- School or college</li> <li>- TV</li> <li>- Other: _____</li> </ul> | Tour; field observation   |

|  |  |
|--|--|
| <p>2. How do you receive emergency notifications?</p> <ul style="list-style-type: none"> <li>- Email</li> <li>- Facebook or Twitter</li> <li>- Family or friends</li> <li>- Health department</li> <li>- Internet</li> <li>- NIXLE Alerts</li> <li>- Radio</li> <li>- School or college</li> <li>- TV</li> <li>- Other: _____</li> </ul> | <p>Question created from drafted feedback received from TCPHE</p>                                    |
| <p>3. What Teller County resources would you like to see in your area?</p>   | <p>From tour; field observation - this may provide information of potential resources to provide</p> |
| <p><b>Emergency Preparedness</b> - The following questions ask about emergency preparedness in Teller County. Emergency preparedness involves taking steps to ensure your health and safety before, during, and after an emergency or natural disaster, such as during a pandemic, wildfire, or flood.</p>                               |  |
| <p>1. Have you taken steps to prepare for the types of emergencies and disasters that might occur in our community?</p> <ul style="list-style-type: none"> <li>- Yes</li> <li>- No</li> </ul>  | <p>Question was created based on weekly meeting discussion between SAT and TCPHE</p>                 |
| <p>2. What additional information could support your readiness?</p>  | <p>Question was created based on weekly meeting discussion between SAT and TCPHE</p>                 |
| <p>3. How was Teller County Public Health and Environment (TCPHE) successful in its response to the COVID-19 pandemic?</p>   | <p>Tour; field observation</p>   |
| <p>4. How can Teller County Public Health and Environment (TCPHE) improve its response to the next pandemic, emergency, wildfire, or natural disaster?</p>   | <p>Tour; field observation</p>   |
| <p><b>Environmental Health</b> - The following questions ask about environmental health in Teller County. The field of environmental health focuses on limiting exposures to pollution and chemicals in air, water, soil, food, and other environmental hazards that may affect health.</p>  |  |
| <p>1. What are the environmental concerns in Teller County?</p>  | <p>1v1 meeting with environmental health experts. Issues like climate change, recycling, waste</p>   |

|   |  |
|---|--|
| <ul style="list-style-type: none"> <li>● Animal diseases (e.g., rabies, plague, hantavirus)</li> <li>● Effects from mining</li> <li>● Fire mitigation</li> <li>● Hazardous waste spills</li> <li>● Improper sewage or trash disposal</li> <li>● Radon</li> <li>● Recycling</li> <li>● Septic systems</li> <li>● Well water</li> <li>● Other: _____</li> </ul> | disposal, etc. came up during the meeting  |
| <p><b>2. Zoonosis is a disease that can be transmitted to humans from animals. How do you protect your family and animals from being exposed to these diseases? (e.g., rabies and plague)</b></p>   | From TCPHE feedback  |
| <p><b>3. Radon is a cancer-causing radioactive gas often found in high levels in Teller County homes. No level of radon is considered safe. How do you limit your household's exposure?</b></p>   | Question created from feedback received during weekly meetings with TCPHE community partners. <ul style="list-style-type: none"> <li>- Radon level informational <a href="#">link</a>.</li> </ul>      |
| <a href="#">Next Page</a>   |  |
| <p><b>1. Do you have any other health and environmental concerns that we did not ask about that you would like to share?</b></p> <p>Yes: Insert comment</p> <p>No</p>   | Offers more detailed responses in case respondent has further ideas/opinions/etc.  |
| <p><b>2. Do you have any other thoughts about Teller County that you want to share?</b></p>   | This question offers community members the chance to share their thoughts on other issues in or strengths of Teller County that may not have been prompted or fit under any of the previous questions. |
| <a href="#">Next Page</a>   |  |
| <p><b>Background - The following questions are asked to gather demographic information. This will allow us to</b></p>   |  |

determine if different groups have had unique experiences in Teller County. It will also identify if there are any groups whose voices have not been captured in this survey.

|  |  |
|--|--|
| <p>1. What gender do you identify as?</p> <ul style="list-style-type: none"> <li>● Female</li> <li>● Male</li> <li>● Non-binary</li> <li>● Prefer not to say</li> <li>● Prefer to self-describe: _____</li> </ul>  | <p>Question was extracted from previous TCPHE 2017 CHA survey.</p> <ul style="list-style-type: none"> <li>- <a href="#">Resource</a> for gender-inclusive wording</li> </ul> |
| <p>2. What is your age? (Check the age range that applies best.)</p> <ul style="list-style-type: none"> <li>- 18 to 24</li> <li>- 25 to 34</li> <li>- 35 to 44</li> <li>- 45 to 54</li> <li>- 55 to 64</li> <li>- 65 to 74</li> <li>- 75 &amp; older</li> <li>- Prefer not to say</li> </ul>   | <p>Question was extracted from previous TCPHE 2017 CHA survey.</p>   |
| <p>3. Which of the following best describes your race? (Please check all that apply.)</p> <ul style="list-style-type: none"> <li>- American Indian or Alaskan Native</li> <li>- Asian</li> <li>- Black or African American</li> <li>- Native Hawaiian or Pacific Islander</li> <li>- White</li> <li>- Prefer not to say</li> <li>- Race not listed: _____</li> </ul> | <p>Question was extracted from previous TCPHE 2017 CHA survey.</p> <ul style="list-style-type: none"> <li>- <a href="#">US Census wording</a></li> </ul>                     |
| <p>4. Are you of Hispanic, Latino, or Spanish origin?</p> <ul style="list-style-type: none"> <li>- Yes</li> <li>- No</li> <li>- Prefer not to say</li> </ul>   | <p>It is best practice to distinguish race and ethnicity.</p>  |
| <p>4. Where is your home physically located? (Please select the zip code that best describes where your home is located.)</p> <ul style="list-style-type: none"> <li>- 80813</li> <li>- 80814</li> <li>- 80816</li> </ul>  | <p>Question was extracted from previous TCPHE 2017 CHA survey</p>  |

|   |  |
|---|--|
| <ul style="list-style-type: none"> <li>- 80819</li> <li>- 80829</li> <li>- 80860</li> <li>- 80863</li> <li>- 80866</li> <li>- Prefer not to say</li> <li>- Zip Code not listed: _____</li> </ul>  |  |
| <p><b>5. Do you work in Teller County?</b></p> <ul style="list-style-type: none"> <li>- Yes</li> <li>- No</li> <li>- Prefer not to say</li> </ul>   | Question was extracted from previous TCPHE 2017 CHA survey |
| <p><b>6. If applicable, which of the following best describes the type of work you do?</b></p> <ul style="list-style-type: none"> <li>- Computer Technology</li> <li>- Construction</li> <li>- Education</li> <li>- Gaming Industry</li> <li>- Government</li> <li>- Healthcare</li> <li>- Military (Active/Retired)</li> <li>- Mining Industry</li> <li>- Retired</li> <li>- Service (restaurant, retail, salon)</li> <li>- Small Business Owner</li> <li>- Student</li> <li>- Unemployed</li> <li>- Another type of work not listed: _____</li> </ul> | Question was extracted from previous TCPHE 2017 CHA survey |

Thank you for taking the time to complete this survey!

Your feedback will be shared by Teller County Public Health & Environment in their Community Health Assessment and Public Health Improvement Plan for 2023-2027.

# Appendix D: Pilot/Final Survey

There were no changes made to the pilot survey, therefore the final version of the survey is the same as the pilot attached below.

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## Teller County Community Health Pilot Survey

### Introduction

Thank you for participating and sharing your opinion in this Teller County Community Health Survey. Local public health agencies are required to conduct a Community Health Assessment every five years that is used to create a five-year Community Health Improvement Plan. We encourage community members to take some time to fill out our anonymous community-wide survey to help us identify priority health needs and to understand how to make Teller County a healthier place to thrive. The following survey was developed by the Colorado School of Public Health in partnership with Teller County Public Health and Environment. Your responses will be kept anonymous and will help guide future public health efforts. This is a short survey and should take only about 15-20 minutes to complete. As a community member, your knowledge and experiences are highly valuable.

### Consent

If you join the community health assessment, you will need to complete this online survey and submit it to the best of your ability. You have a choice about joining this community health assessment. You do not have to participate if you prefer not to. The data collected during this community health assessment will be used by Teller County Public Health and Environment to develop a health improvement plan aimed at the promotion of population health. Every effort will be made to protect your privacy and confidentiality by making all responses anonymous. By participating in this survey, you are agreeing to participate in this community health assessment.

### Health - The following questions ask about your opinion on Teller County's health status.

1. Which of the following are health concerns in Teller County? (Please mark "yes" or "no")

- Alcohol misuse
- Crime rate
- Substance misuse
- Access to medical care
- Availability of nutritious food
- Access to dental care
- Affordable housing

- Transportation services
- Mental health services
- Recreation facilities
- Substance abuse rehabilitation services
- Tobacco use (e.g., cigarettes, cigars, chew, and vaping)
- Other: \_\_\_\_\_

**Mental Health** - The following questions ask about mental health in Teller County. Mental health includes our emotional, psychological, and social well-being; it affects how we think, feel, and act.

1. What mental health resources in Teller County do you know about?
2. What prevents people from accessing mental health resources in Teller County?
3. What mental health resources, if any, are missing in Teller County?

**Communications and Resources** - The following questions ask about health and environmental communication and resources in Teller County. We want to better understand how health information is spread throughout the county, and what resources are used in Teller County.

1. How do you receive information about community events and resources in Teller County?

- Faith-based organization
- Doctor/health care provider
- Email
- Facebook or Twitter
- Family or friends
- Health department
- Internet
- Library
- Newspaper/magazines
- Radio
- School or college
- TV
- Other: \_\_\_\_\_

2. How do you receive emergency notifications?

- Email
- Facebook or Twitter
- Family or friends
- Health department

- Internet
- NIXLE Alerts
- Radio
- School or college
- TV
- Other: \_\_\_\_\_

3. What Teller County resources would you like to see in your area?

**Emergency Preparedness** - The following questions ask about emergency preparedness in Teller County. Emergency preparedness involves taking steps to ensure your health and safety before, during, and after an emergency or natural disaster, such as during a pandemic, wildfire, or flood.

1. Have you taken steps to prepare for the types of emergencies and disasters that might occur in our community?

- Yes
- No

2. What additional information could support your readiness?

3. How was Teller County Public Health and Environment (TCPHE) successful in its response to the COVID-19 pandemic?

4. How can Teller County Public Health and Environment (TCPHE) improve its response to the next pandemic, emergency, wildfire, or natural disaster?

**Environmental Health** - The following questions ask about environmental health in Teller County. The field of environmental health focuses on limiting exposures to pollution and chemicals in air, water, soil, food, and other environmental hazards that may affect health.

1. What are the environmental concerns in Teller County?

- Animal diseases (e.g., rabies, plague, hantavirus)
- Effects from mining
- Fire mitigation
- Hazardous waste spills
- Improper sewage or trash disposal
- Radon
- Recycling
- Septic systems

- Well water
- Other: \_\_\_\_\_

2. Zoonosis is a disease that can be transmitted to humans from animals. How do you protect your family and animals from being exposed to these diseases? (e.g., rabies and plague)

3. Radon is a cancer-causing radioactive gas often found in high levels in Teller County homes. No level of radon is considered safe. How do you limit your household's exposure?

(New Page)

1. Do you have any other health and environmental concerns that we did not ask about that you would like to share?

- Yes: Insert comment
- No

2. Do you have any other thoughts about Teller County that you want to share?

(New Page)

**Background** - The following questions are asked to gather demographic information. This will allow us to determine if different groups have had unique experiences in Teller County. It will also identify if there are any groups whose voices have not been captured in this survey.

1. What gender do you identify as?

- Female
- Male
- Non-binary
- Prefer not to say
- Prefer to self-describe: \_\_\_\_\_
- 

2. What is your age? (Check the age range that applies best.)

- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 & older
- Prefer not to say

3. Which of the following best describes your race? (Please check all that apply.)

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- White
- Prefer not to say
- Race not listed: \_\_\_\_\_

4. Are you of Hispanic, Latino, or Spanish origin?

- Yes
- No
- Prefer not to say

5. Where is your home physically located? (Please select the zip code that best describes where your home is located.)

- 80813
- 80814
- 80816
- 80819
- 80829
- 80860
- 80863
- 80866
- Prefer not to say
- Zip Code not listed: \_\_\_\_\_

5. Do you work in Teller County?

- Yes
- No
- Prefer not to say

6. If applicable, which of the following best describes the type of work you do?

- Computer Technology
- Construction
- Education
- Gaming Industry
- Government
- Healthcare
- Military (Active/Retired)
- Mining Industry
- Retired
- Service (restaurant, retail, salon)
- Small Business Owner
- Student

- Unemployed
- Another type of work not listed: \_\_\_\_\_

**Thank you for taking the time to complete this survey!**

Your feedback will be shared by Teller County Public Health & Environment in their Community Health Assessment and Public Health Improvement Plan for 2023-2027.

# Appendix E: Pilot Survey Results

Q1 - Which of the following are health concerns in Teller County?

(Please mark "yes" or "no")

45 Responses

| Field  | Yes | No | Total |
|--|-----|----|-------|
| Access to dental care                                    | 20  | 21 | 41    |
| Access to medical care                                   | 27  | 15 | 42    |
| Affordable housing                                       | 38  | 7  | 45    |
| Alcohol misuse   | 31  | 11 | 42    |
| Availability of nutritious foods                         | 14  | 24 | 38    |
| Crime rate   | 16  | 23 | 39    |
| Mental health services                                   | 35  | 10 | 45    |
| Recreation facilities                                    | 21  | 18 | 39    |
| Substance abuse rehabilitation services                  | 34  | 7  | 41    |
| Substance misuse   | 37  | 4  | 41    |
| Tobacco use (e.g., cigarettes, cigars, chew, and vaping) | 25  | 15 | 40    |
| Transportation services                                  | 34  | 8  | 42    |
| Other  | 1   | 2  | 3     |

Q1 - Other\_Text

2 Responses

Medicaid providers. At this time all the providers except one have met their quota and are not accepting

Medicaid. Many people that are on Medicaid can't go to Colorado Springs for medical providers because of transportation/financial barriers.

Unclear question - it may be available, but not affordable, I would also include the option of "don't know", otherwise the results will not accurately reflect what you are trying to achieve. This is the first question, and I probably would add that option for all

## Q2 - What mental health resources in Teller County do you know about?

44 Responses

Front Range Mental Health

Community of Caring in Cripple Creek

EAP through the County

None

community mental health center, private providers, in home therapist etc

fire and ems

most counseling and substance use/ abuse programs and partner agencies. The resources now being provided through the Teller County Mental health alliance will help greatly but we have a long way to go

1) Diverses runs an outpatient clinic in woodland park

2) UC Health has an embedded behavioral health provider in their medical group in Woodland Park

3) Peak Vista has a behavioral health provider at the safety net clinic in Divide

4) There are several agencies and private providers in the Woodland park and Divide area that offer services. These services can be found on the Ute Pass Regional Health Service District website.

5) Ute Pass Regional Health Service District offers crises services for behavioral health and substance use disorder crises 24 hours a day 7 days a week. These services can be accessed anywhere in Teller County just by calling 911. these services are offered regardless of the ability to pay and are provided using a trauma-informed approach.

8) Front Range Clinic is operating a drop-in clinic in Woodland Park and Cripple Creek every week offering Medication Assisted Treatment.

9) Darlin is offering prescriptive services for patients dealing with behavioral health crises.

10) One local provider out of Divide is offering animal therapy services.

11) The Schools are offering integrated counseling services and are doing preventative testing.

Four Feather, Crystal Creek, TRE, school counselors, Storehouse, AA, TESSA, Willow bends, CHOICES, Divirus,

We have a few mental health groups in Teller County. Need for some on a sliding scale or take Medicare for our Seniors.

Resources from Aspen mine

Aspen Mines Center Community Health Partnerships Multiple private practice clinicians in the area Aspen Mine Center. Ute Pass Regional Health Services Crisis Services.

Aspen Mine Center. Ute Pass Regional Health Services Crisis Services.

DHS, some community groups who address issues (grieving, suicide, and others I see on the Grapevine), Community Partnerships services for teens and families in distress, MAPS assessment through the ambulance service.

Individual, Family, First responder Counseling, suicide awareness and prevention, Behavioral health and Domestic Violence Help also narcotics and gamblers anonymous assistance

Diversis

Community Paramedic Program

DIVERSUS AND A WILLOW BENDS

Feelings of isolation and need for community events

Teller County Mental Health Alliance - Community Health Partnership - Ute Pass Ambulance - Mental Health Assessment reporting and Assistance. Diversus

Public Health Department

I know about the mobile mental health unit from the Ute Pass Ambulance District. I know about various therapists, through web searches.

Peak Vista, private practitioners

Just the ones that are offered through the EMS agency and Public Health

Diversus

|   |
|---|
| Family Care Center  |
| Aspen Pointe  |
| ER, private counselors, counselors and social workers in schools  |
| There are providers in Woodland Park as well and some availability in Cripple Creek on specified days.  |
| private practice LPCs diversus  |
| I don't know about any of them  |
| None  |
| None  |
| UPRHD community paramedic/MAP units Ute Pass support group  |
| Peak Vista BH Diversus when available   |
| Ute Pass EMS offers community paramedic program with specialists for Mental Health intervention. Also various psychology programs in Teller.  |
| Diversus  |
| None  |
| several.  |
| I have not inquired about mental health resources, but I think the Senior Coalition and maybe Daybreak offer some services. I also know there are resources or at least information through the County Health Department. |
| Public Health? DHS? Senior Coalition Aspen Mine   |
| MAPS  |
| In my role @ PPRH I know about most and am the President of the TCMHA.  |
| There are resources available thru the Aspen Mine but they don't take medicare so they are not accessible to everyone   |

**Q3 - What prevents people from accessing mental health resources in Teller County?**

|  |
|--|
| Not enough available resources.  |
| Transportation, cost   |
| Time and probably funds for many.  |
| Distance   |
| Transportation and availability of providers and insurance   |
| knowledge  |
| For many seniors it is the challenge of technology, stigma and the need for a navigator or advocate to assist them   |
| 1) The stigma associated with seeking care for behavioral health and substance use services. 2) Lack of reliable transportation.<br>3) A need for more progressive follow-up services. |
| Insurance, variety if it is not a good fit, cost, scheduling, stigma to get support.   |
| Sigma and cost   |
| Privacy  |
| Availability of appointments and scarcity of professionals to work with certain populations.   |
| The availability of mental health professionals. Many of my clients needing mental health services don't want telehealth, they want in person counseling.                              |
| embarrassment and probably timing - when people feel most desperate it's probably at night or after they've been drinking or using.  |
| Don't know where to find help or information   |
| Stigma; lack of providers; not sure where to turn  |
| accessability(if they don't have vehicles), cost   |
| Now knowing who to call  |

INSURANCE/MEDICAID

AVAILABILITY OF COUNSELORS/THERAPISTS

TRANSPORTATION/TECHNOLOGY

Transportation, information

Money. Payment for the services needed. Lack of specialists and expertise. Convenience. Societal shame. Lack of knowledge of where to get help.

Awareness of resources available??

Therapists are not taking new patients, due to having a full load already. Need more therapists with openings in Teller County.

Sigma, awareness of services

Stigma possibly, and not admitting there is a problem

knowledge of where to go, lack of transportation to the facility, and not wanting to acknowledge having a mental health issue.

Lack of money and they don't know about what is available.

Not knowing where to go

knowing it exists, \$

Uneducated about mental health.

cost lack of appointments available too few providers

Knowing who to call

Stigma.

Don't know

The drive down to the springs or Canyon city. Also, minimal public transport

They do not want to discuss their issues

|  |
|--|
| Timing, or unwillingness to seek help.   |
| Lack of primary care Knowledge of where to go Transportation   |
| Affordable options, stigma of mental health  |
| Transportation & internet service.   |
| 1) Lack of education around the how to obtain resources 2) Disregard for the Red Flag law (in case of domestic violence) 3) Embarrassment or denial for the need of assistance |
| Stereotypes Fear Lack of knowledge   |
| Stigma   |
| stigma, socioeconomic status, healthcare literacy  |
| insurance and accessibility  |

#### **Q4 - What mental health resources, if any, are missing in Teller County?**

41 Responses

|  |
|--|
| Teen counseling, AA or NA meetings/counseling, VA counseling...  |
| Mental Health Professionals  |
| I don't know   |
| Counseling   |
| Play therapist, sexual abuse victimization treatment, and trauma informed services   |
| N/A  |
| In-Patient substance use/treatment facilities. Providers for dual eligible (Medicaid/Medicare) especially seniors.             |
| 1) Inpatient ACU and CSU for adults and children.<br>2) Inpatient medical detox services<br>3) Gereartric psychiatric services |

|  |
|--|
| 4) Effective referral programs   |
| All. We need more of all mental health services00.0..0.0.00  |
| Grief groups   |
| More clinicians needed to work with children.  |
| Teenage specific in-person counseling. Availability of mental health professionals that accept Medicaid or provide services on a sliding scale.  |
| Relocation materials that emphasize that moving to a high-altitude may negatively affect conditions like depression, bipolar conditions...etc.   |
| I don't think there are any missing, you just have to know where to look   |
| Suicide prevention resource? Additional providers  |
| Mental Health Providers that take service low income patients. Online or phone services for patients that cannot get transportation to services. |
| NOT MISSING BUT DEFINITELY LIMITED   |
| Addiction-related counseling   |
| Free or low cost continual care both medicinal and therapy.  |
| Easy access.   |
| Nationally there is a shortage of psychiatrists with long wait times -- months and years. Here it is worse.                                      |
| Facility or practice devoted to mental health  |
| More therapists, taking new patients.  |
| Intensive outpatient/partial hospitalization. It is unrealistic for people to drive an hour each way, every day for these services.              |
| Unknown  |
| More facilities are needed so wait times are reduced.  |

|  |
|--|
| Resources aimed toward veterans  |
| I'm not well enough informed to give an answer - as much as anything because of my personal lack of knowledge of resources   |
| I'm not sure.  |
| Can't think of any.  |
| more providers who take a variety of insurance or work on a sliding scale  |
| Not sure   |
| Help for teens.  |
| Don't know   |
| substance abuse/ mental health center  |
| Psychiatric Social Workers   |
| N/A  |
| More options for patients Virtual mental house counseling  |
| Tessa & Diverse. No presences in Teller; (northern or southern )   |
| Without a proper understanding of what the resources exactly are available, I don't want to be too critical. My sense however, is that we do not have enough mental care workers to cover all the needs. |
| Unknown  |
| More options of a "walk in" type help with more information in the community.  |
| Pediatric Mental Health and More robust services for Veterans  |

**Q5 - How do you receive information about community events and resources in Teller County?**

45 Responses

| Field | Yes | No | Total |
|-------|-----|----|-------|
|       |     |    |       |

|                             |    |    |    |
|-----------------------------|----|----|----|
| Doctor/health care provider | 3  | 35 | 38 |
| Email                       | 35 | 9  | 44 |
| Facebook or Twitter         | 32 | 9  | 41 |
| Faith-based organization    | 12 | 25 | 37 |
| Family or friends           | 36 | 6  | 42 |
| Health department           | 30 | 11 | 41 |
| Internet                    | 38 | 3  | 41 |
| Library                     | 5  | 34 | 39 |
| Newspapers/magazines        | 28 | 11 | 39 |
| Radio                       | 6  | 31 | 37 |
| School or college           | 11 | 29 | 40 |
| TV                          | 14 | 24 | 38 |
| Other                       | 0  | 3  | 3  |

#### Q5 - Other\_Text

4 Responses

|                                    |
|------------------------------------|
| Farmers Market                     |
| Family Resource center             |
| Grapevine, TC resource group       |
| WOODLAND PARK GRAPEVINE NEWSLETTER |

#### Q6 - How do you receive emergency notifications?

44 Responses

| Field               | Yes | No | Total |
|---------------------|-----|----|-------|
| Email               | 32  | 10 | 42    |
| Facebook or Twitter | 25  | 13 | 38    |
| Family or friends   | 25  | 13 | 38    |
| Health department   | 17  | 20 | 37    |
| Internet            | 27  | 10 | 37    |
| NIXLE Alerts        | 37  | 5  | 42    |
| Radio               | 14  | 22 | 36    |
| School or college   | 7   | 28 | 35    |
| TV                  | 17  | 19 | 36    |
| Other               | 2   | 3  | 5     |

**Q6 - Other\_Text**

5 Responses

|                     |
|---------------------|
| FLASH ALERT         |
| 9-1-1 system        |
| Everbridge          |
| cell phone provider |
| Peak alert          |

**Q7 - What Teller County resources would you like to see in your area?**

29 Responses

More counseling opportunities...

Dental and eye care, mental health

Help find housing and/or support for buying a house.

More recreational opportunities for everyone child to adult age

more wildland trained people.

Housing, childcare

I would like to see a multidisciplinary task force that works as a collaborative partnership to address the needs of marginalized populations struggling to access the care and services they need. This would be a dynamic team that develops care plans and operationalizes the action plan that is developed for patients that are struggling within the traditional care models. This team would consist of members from, Teller County Public Health, Teller County DHS, UC Health, Teller County Mental Health Alliance, Aspen Mine Center, Ute Pass Regional Health Service District, and local law enforcement agencies. This team would review complicated cases across the continual social needs and seek collective creative solutions drawing on the knowledge skills and abilities of each team member. This team would use evidence-based practices to guide their efforts in an approach that is free from judgment and focuses on systemic causes and client empowerment.

mental health, support groups that are not faith based, other groups or supports that are not faith based.

More medical providers that accept medicaid. More in-person mental health services for teens.

Nxel is the best. It comes to my phone as a text. I get it for weather, road closures and amber alerts.

I think we have plenty if you know where to look for them

Increased mental health resources Substance abuse rehabilitation resource/counselling Recreation center

Better internet connections, high speed internet with larger data limitation. Two zoom calls use up the data bandwidth for a mont with satellite internet.

24 HOUR CHILDCARE

MORE HEALTH/DENTAL FACILITIES ACCEPTING MEDICAID PATIENTS

URGENT CARE

ANIMAL CLINICS WITH FREE SPAY, NEUTER, SHOTS

Home Therapies. Better Internet to access other options. Our population is too small to support specialists, we need to be able to access them through at home counseling, evaluation and care when hands on is not required.

|  |
|--|
| For hands on care perhaps a bus that covers a region is a manageable.                                  |
| Urgent care Youth programs   |
| I'm unsure.  |
| If it relates to emergencies, I cannot think of anything.  |
| more therapists with availability, children's therapists   |
| Nixle is great but many don't know about it. Also we have lots of folks that have issues with internet |
| Unsure   |
| Don't know   |
| N/A  |
| More options for primary care for underinsured or uninsured patients                                   |
| Assistance for those seeking housing, shelter  |
| child care.  |
| Some regular form of public transportation.  |
| Not sure what my options are.  |
| Improvement in access to care for pediatric mental services  |

**Q8 - Have you taken steps to prepare for the types of emergencies and disasters that might occur in our community? (Please use the text box if you wish to explain)**

45 Responses

| Field | Choice Count |
|-------|--------------|
| Yes   | 39           |
| No    | 6            |

|       |    |
|-------|----|
| Total | 25 |
|-------|----|

### Q8 - Yes\_Text

17 Responses

|   |
|---|
| emergency kit including medicines; fire mitigation  |
| Evacuation plan, list of items to take during a fire, fire mitigation on property   |
| Yes our organization has a disaster preparedness plan   |
| for myself personally, we know what to get and where to go  |
| Go box in case of fire  |
| wildfire  |
| Have a go kit in my home and vehicle for my family  |
| Fire  |
| Put together plan to evacuate if needed.  |
| Bugout bag, emergency supplies  |
| Wildland Fire   |
| Got my Important papers and things ready to go, have water stored, have dehydrated food for short term. I am ham operator for information |
| Fire Mitigation, Evac. Prep.  |
| Wildfire preparedness   |
| Extra food and water storage.   |
| Fire preparation  |
| fire mitigation   |

**Q8 - No\_Text**

1 Response

not yet

**Q9 - What additional information could support your readiness for emergencies and disasters?**

28 responses

Potential staging areas, resources available specifically to my facility, communication chain for events.

None

Perhaps compact evacuation kits could be given out to residents?

Neighborhood evacuation plans

N/A

Local tabletop exercises also I feel like the area could benefit from several active shooter drills.

If 24 were closed, how would we evacuate to the Springs?

I have maps and emergency money in my go bag. I have kits in my families vehicles as well in case they are not home and we already have places setup for our meetup spots in case we are evacuated from our home

Disaster preparedness classes? Or handbook? Or website?

lists of what to do to prepare - outdoors and readiness kits for homes

Example plans and procedures

Better information on the site of the crisis...we don't all know the Division name or a Mile Marker. Say more than less -- it is a small county... MM # \_\_\_\_ 2.4 miles south of Cripple Creek on 67 near \_\_\_\_ for example. Even yesterday when a fire broke out on CR 89 I got several calls from worried people asking if Cripple Creek was on fire -- was I in danger? Was it west or east of the City. Why no Nixle!?? Use a map! Use multiple descriptors. A couple years ago the first Nixle out of Woodland Park even got it wrong. Lives, animals and property are at stake. At first we paused...and then we had to rush home. It was across the road from our development. It would help traffic too.

Have kits and checklists online at all times for various emergencies. Educate the general public on how Teller County is prepared do handle emergencies and disasters.

|  |
|--|
| More info on fire danger/preparations. I'm not a Native and moved from high humidity so more information for newcomers who may be unfamiliar with dangers in our area.   |
| None, I have access through several modes for emergency preparedness   |
| Flyers or mailers to each citizen explaining the emergency notification system.  |
| It would be helpful to hear from a city or county agency exactly what to expect in an emergency or disaster like: what emergencies or disasters we might see, how will I be notified what to do, how can I be prepared in Teller County. |
| Unfortunately, I am of the mindset that I am prepared mentally. However, I do know that I am not prepared physically or mentally. Maybe some public/town meetings.   |
| Better cell phone coverage. It's not good in sw teller county during summer especially when bandwidth along US 24 gets saturated. Proposed tower on mt Pisgah should help  |
| Unsure   |
| Specific community wide information and actual drills - where to go to evacuate, to get help etc.  |
| Planned evacuation areas for evacuated citizens  |
| If pass is closed, detours and plan to extended time to get around issues  |
| N/A  |
| Evacuation routes marked or distributed to neighborhoods   |
| be as informative as possible.   |
| Outreach to the HOA's in Teller County and maybe attending a HOA board meeting or annual meeting.  |
| Areas with the highest likelihood for fires and natural disasters  |

**Q10 - How was Teller County Public Health and Environment (TCPHE) successful in our response to the COVID-19 pandemic?**

41 Responses

Numbers remained low, public was always informed.

|  |
|--|
| Great! TCPHE provide COVID shots and boosters as soon as they were available and continue to provide.  |
| Good information distributed on website and the availability of testing and vaccination was very good.   |
| Great ramp up of testing options and locations   |
| Provided community information, resources and testing and overall support  |
| very good.   |
| They were amazing at organizing testing centers, communication with the public and providing exceptional resource delivery   |
| The team was positive in their interactions and was quick to change and adapt when one effort did not work. The team also reached out to community partners to find creative ways to collaborate to increase access to care for the home-bound and others. |
| opening up to be seen, vaccinations,   |
| Very impressed with their response and continued support to the community.   |
| Availability of vaccines and up to date website.   |
| Providing Covid guidelines and vaccine pods.   |
| I think they made everyone aware of the situation and then updated frequently.   |
| My family received information at TellerCOVID.com regarding vaccinations and testing sites so we knew exactly where to go to retrieve the latest information and updates   |
| TCPHE response was swift and provided vaccines in a quick and efficient manner. Also provided much needed education to cases through CTCI.   |
| providing information, testing, and vaccines to the community  |
| Very successful  |
| TCPHE WAS INTEGRAL IN OUR SCHOOL DISTRICT'S RESPONSE TO COVID-19, OFFERING GUIDANCE, CLARIFICATION AND COLLABORATION   |
| By providing access to tests and shots. trusted source for statistics and data. I thought the EF8 would stand up sooner but it did not. As in the nation politics outranked science.   |

|  |
|--|
| Testing and vaccine sites. Posting information on Executive Orders from the State and how Teller County addressed those Orders.  |
| Offering a resting location.   |
| Accurate stats, testing site   |
| Very well done, and done professionally.   |
| Very well organized.   |
| Provided vaccines and kept us updated with statistics  |
| Excellent - available and informative  |
| The dashboard! Predictable testing site. Vaccines. Contact tracing and dates for quarantine and isolation.   |
| TCPHE was very responsive to the COVID-19 pandemic. I believe that all of the players involved worked pretty well together.  |
| I think good, good that we were over prepared but I'm not sure how the expenditures impacted other county needs  |
| Provided testing and information.  |
| Unfortunately, your response was not the problem - rather the unwillingness of too many of our population to act appropriately, whether it was getting vaccinated, wearing masks, social distancing and reporting cases. |
| Great information and testing centers.   |
| Good vaccine clinics, answering questions about COVID  |
| Did an amazing job with vaccination clinics and information dissemination.   |
| They provided vaccines, contact tracing, and worked tirelessly throughout the pandemic to make sure teller county was provided for to the fullest extent in regards to Covid   |
| Testing sites, vaccine clinics, information was readily available! Great job!  |
| good.  |
| Information was readily available as to who was eligible when and where to get a vaccination. It was well planned  |

and coordinated with the United Health Care at the Pikes Peak Hospital, along with regular clinics held at a local church. Countering disinformation and anti-vaccination sentiments still remain a problem.

Providing vaccines and boosters, sharing information/data, testing center

Improved greatly when Martha came on board. we were able to collaborate in a more effective manner when she arrived.

I think Teller County was very successful in the COVID situation.

**Q11 - How can Teller County Public Health and Environment (TCPHE) improve their response to the next pandemic, emergency, wildfire, or natural disaster?**

32 Responses

I think better prep information for businesses would help.

Continue the good work.

Perhaps help residents to sign up for nixle, etc

Continue to spread the word about automatic notification options.

Just continue to utilize resources in the community and not bring outside entities that do not reside in teller county

prepare and trainings

I really don't know how much more they could do with what they have. They did a great job

Continue to build on the relationships and practices that have been developed during the pandemic. It is hard to sustain a partnership that only functions during a crisis. If some of the collaborative partnerships developed during the crises could be leveraged to increase access to services for members of the community now and into the future. Then those practices would not be novel next time they are needed. These new best practices could just be expanded to address the growing need. Everyone would understand their role because it would be business as usual just on a larger scale. It is much easier to grow an operation scope than it is to recreate an operation where no one has done the skill before. For example. have the public health department work with local EMS agencies every year to deploy flu and pneumococcal vaccination to home-bound and high-risk populations. Make PODs a normal operation within the community every year as part of the flu response so people are familiar with their operations and partners develop meaningful relationships that can be built on. This approach will have real-time benefits and build a more robust service for the next pandemic even if it is a generation from now. The teams will have worked together and will understand each other's systems and approaches. To be more clear they will have developed a common culture around public needs.

more coordination with the community. this was done very well during COVID and could be continued for other disasters and emergencies.

Respect the choice of those who will never vaccinate. Have an alternative method because you don't know what underlying conditions that someone has that may cause counterindications with the vaccine.

Keep the community informed and provide information on the social media sites so people know the latest information being put out to the community

Planning!

Better communication. Everyone does not use facebook

BRIEF, CLEAR COMMUNICATION THAT ALL LEVELS OF INDIVIDUALS CAN UNDERSTAND AND DO

Only with strong collaboration and respect from the next OEM and the leaders of Teller County. And increased budget to attract quality skilled personnel.

Support OEM in their efforts. We only need one agency disbursing information.

Keep politics out of the equation. Let science determine the response.

More communication

Continued training across all the different agencies and repose capabilities

Not sure

I'm unsure.

I can't think of anything.

It's hard, some of us attend meetings at Sheriff office but the attendance is limited usually, somehow we need to contact more people, but there is a lot of apathy that even given an opportunity to learn will choose to ignore

Unsure

Other than the next pandemic - for the others perhaps community events with info. As far as a pandemic - I don't foresee any change in the divide that has caused it to become a political, rather than public health issue.

I think

|   |
|---|
| Work closer with OEM, law enforcement, Fire Dept. Help the PH staff to be more prepared in an emergency.  |
| Keep doing what you're doing!   |
| staffing  |
| Continue to regularly use NIXLE, which is a valuable tool for communication. In case of another pandemic, stay very public about options. Wildfire and other natural disasters, need serious community and county coordination, announcing plans through schools, churches, HOA contacts, papers, NIXLE and any other opportunity anyone can devise. Someone had suggested HAM radios; although I am not sure that is very viable in today's communication world. |
| Not sure  |
| Continue to be an active partner in the community and share information in real time.   |

#### Q12 - What are the environmental concerns in Teller County?

45 Responses

| Field   | Yes | No | Total |
|---|-----|----|-------|
| Animal disease (e.g., rabies, plague, hantavirus) | 20  | 22 | 42    |
| Effects from mining                               | 26  | 17 | 43    |
| Fire mitigation                                   | 44  | 1  | 45    |
| Hazardous waste spills                            | 18  | 22 | 40    |
| Improper sewage or trash disposal                 | 23  | 16 | 39    |
| Radon   | 28  | 14 | 42    |
| Recycling   | 28  | 13 | 41    |
| Septic systems                                    | 25  | 17 | 42    |
| Well water  | 28  | 14 | 42    |
| Other   | 3   | 3  | 6     |

**Q12 - Other\_Text**

5 Responses

|   |
|---|
| Wildlife conflict mitigation  |
| Homlessness impact on the environment                                     |
| Anything that concerns local residents                                    |
| Air quality outdoors - dust + and indoor ventilation improvements needed. |
| Again - no option for "don't know"  |

**Q13 - Zoonosis is a disease that can be transmitted to humans from animals. How do you protect your family and animals from being exposed to these diseases? (e.g., rabies and plague)**

42 Responses

|  |
|--|
| Maintain pets vaccinated.  |
| Our dogs are checked regularly by a vet and up to date on all their vaccines.  |
| Stay away from wild animals  |
| Keep animals leashed and/or in enclosed yard. Increased vigilance during dusk/dawn hours. Up to date vaccinations for pets |
| not sure   |
| we have a vet.   |
| Education about the disease, how it is spread. Teaching grandkids about these health hazards                               |
| Information and education.   |
| vaccinations   |
| Don't  |
| Vaccinate pets. Follow public health notifications.  |

|   |
|---|
| I wasn't aware of a plague spread by animals. Regarding rabies, staying away from animals acting uncharacteristically.  |
| We watch for animals our pets come in to contact with while out hiking or camping   |
| Vaccination of pets   |
| keep animals up to date on vaccines for rabies  |
| Vaccinate my animals with all vaccines recommended and available. Fenced in my yard. Keep an eye on the dogs when they are out in the yard to make sure they avoid wild animals.  |
| <b>RABIES SHOTS FOR PETS</b>  |
| <b>NO CONTACT WITH WILD ANIMALS</b>   |
| By being informed/educated to recognize signs and avoid higher-risk situations  |
| Called animal control for an unknown animal in yard.<br>Wear disposable gloves when baiting rat traps.<br>Never put food or food waste outside.<br>Use birdseed feeder only in winter when snow on the ground.<br>Keep crawl space clean, clear and well ventilated when need to be in there. |
| Keep vaccinations current and to interact with wildlife.  |
| Vaccinating livestock and pets  |
| Up to date on all recommended vaccines and preventative. Keep dog on leash  |
| I do not do anything other than awareness of potential problems   |
| Annual shots  |
| Stay away from animals  |
| Avoid physical contact with wild animals for myself, family and pets  |
| Vaccines. Preventative vet visits.  |
| I have not thought about this topic.  |

|  |
|--|
| avoid contact with wild animals, and only handle domestic animals that are known to be healthy         |
| Stay away from wild animals, keep our dogs away from them as well                                      |
| Unsure other than staying away from stray, wild animals.   |
| The only diseases I worry about personally are those carried by the over abundance of deer everywhere. |
| I guess I don't  |
| Know what to look for. Education for family, friends. Hiking trails, ranches                           |
| No animals around us.  |
| Hand washing Being able to identify abnormal behavior in animals Keeping pets vaccinated               |
| Vaccines for animals, watching animals while they are outside.   |
| ??   |
| Annual vaccinations and watch for alerts about outbreaks.  |
| Biosecurity, fencing, rabies vaccines for dogs   |
| Education and reinforcement of safety practices.   |
| I vaccinate my animals and keep the rodent population down   |

**Q14 - Radon is a cancer-causing radioactive gas often found in high levels in Teller County homes. No level of radon is considered safe. How do you limit your household's exposure?**

39 Responses

|  |
|--|
| Unsure   |
| Installed a radon mitigation system in our home. |
| Unknown.   |
| Testing before purchasing                        |

|   |
|---|
| not sure  |
| well vented areas   |
| We have a radon detector in our home  |
| Testing, information, and education.  |
| tests   |
| Don't   |
| Radon filter in the home  |
| Radon testing?  |
| having residence tested and then doing the venting protocol if radon is detected  |
| We have radon detectors in our home and test it often   |
| Radon mitigation of our home  |
| Don't know how to limit exposure  |
| When building my home, I had a radon barrier installed. I also had a radon fan installed at the same time. Open windows when possible to improve ventilation. Filter my well water with carbon filters. |
| NOT SURE?? WE HAVE A CARBON MONOXIDE DETECTOR   |
| Conduct radon tests(s). No underground space is used as a living space. First floor above ground and well ventilated. Install mitigation as needed.   |
| Nothing at this time. When we built our home it was not something that was being addressed.   |
| I don't???  |
| Monitoring  |
| Have a radon mitigation team do a survey and clean up.  |
| radon detector  |

|   |
|---|
| Fresh air circulation, on a regular basis   |
| We have a radon vent.   |
| CSU has given out radon detectors.  |
| radon mitigation systems in home  |
| We do t have mitigation . Other than sealed off crawl space In House  |
| Just installed a mitigation system. Will also open up the house more often when weather permits.  |
| We installed radon mitigation when we built our house and check it periodically.  |
| I dont  |
| Use Radon testing and mitigation  |
| Had the home tested.  |
| Testing yearly, currently no radon system on our house.   |
| ??  |
| We have installed a radon mitigation system. Although, when we moved to Colorado several years ago, we did not realize the dangerous exposure in Teller County and what to do. It was only through our neighbor's concern that we invested in a system. It should be required by all real estate agents to inform residents of this danger. |
| Test  |
| Periodic testing and improvement to HVAC and ventilation system in our home.  |

**Q15 - Do you have any other health and environmental concerns that we did not ask about that you would like to share?**

46 Responses

| Field | Choice Count |
|-------|--------------|
| Yes   | 6            |

|       |    |
|-------|----|
| No    | 40 |
| Total | 46 |

**Q15 - Yes\_Text**

6 Responses

|  |
|--|
| Lack of transportation in the community is increasing the impact of access to jobs and health care.  |
| access to consistent and reliable medical doctors and pediatricians. To the best of my knowledge there is no pediatrician up here any more.  |
| Hazards from all the county dirt roads. Dirt in the air is hazardous to the lungs. Dust suppression with routine road maintenance is important to keep the community safe.   |
| Even when appropriate, masking and closures due to pandemics cause or aggravate feelings of isolation, depression, and other mental health issues, and this should be considered (as one factor) in any pandemic response. |
| I should have added smoke inhalation for an environmental concern...wildfire smoke was nasty last year and really damages lungs. Cautions needed.  |
| Drug addiction and mentally ill transient people causing crime and health concerns due to transmissible diseases   |

**Q16 - Do you have any other thoughts about Teller County that you want to share?**

24 Responses

|  |
|--|
| We need increased police presence on the 24 corridor.  |
| No.  |
| it would be nice if the main Teller County webpage or the Sheriff's Office main webpage would give information about fires or emergency situations instead of having to go to specific departments webpages or the Sheriff's office facebook page. |
| not really   |
| Teller County is an amazing place to live and work. My hope is that all members of the community will realize  |

the critical importance of making positive contributions to the community and the value of working together to improve quality of life for all who live here. Finally to encourage everyone to volunteer and get involved in a positive way.

The agencies of Teller County have always worked well together. That is even more true after the pandemic. This healthcare collaboration must be solidified in a meaningful way and can be leveraged to address many of the healthcare issues that impact our rural community today. This type of collaborative partnership must be supported by leaders and elected officials. This will require some financial investment to sustain but that prevention and sustainment funding will be far less than the amount that will need to be spent in the next disaster. This sustained model will also go a long way to reduce the cost of not addressing chronic health needs in the community. This approach would also set our community up to be a best practices model when HHS makes the transition to a single-payer approach that focuses on community-wide prevention over episodic care approaches. Finally, we must use local resources to address local behavioral health needs. We can no longer send our behavioral health and substance use clients to facilities all over the state. The community has the resources and infrastructure available to address these needs in the community improving both outcomes and experiences. Right now is the time to make this happen when the state is also set this as a priority. The state can help provide the sustaining funding to grow treatment programs in the community.

I think Teller County needs more resources for people that are struggling with homelessness. There doesn't seem to be enough low-income housing

Doing non-emergency educating will make the community aware of issues that they may not think are very threatening.

N/A

You guys are amazing!

THANK YOU FOR ALL YOU DO FOR TELLER COUNTY

(I live in western El Paso County but am responding with my personal experience and knowledge of Teller Co to help with your pilot survey.)

I hope Covid demonstrated the unique expertise, organization and intervention our Emergency Preparedness requires of Public Health. In a pandemic, wildfire, dangerous chemical spill and beyond. The health of the community is only as healthy as Our PH dept is. I hope the Director is on the panel to select the next OEM.

Need more mental health resources.

None

Although we are not a heavily populated area, the County works hard to take care of people, and to reach as many as possible.

|   |
|---|
| Great place to live, love the small community, but I expect this to be short lived as growth seems crazy  |
| No  |
| No  |
| N/A   |
| I think the county did a fantastic job during the pandemic, continuing education for fire mitigation and information dissemination.                               |
| I mentioned the Red Flag law, which is basically about mental health (not gun control). I am concerned that our police forces are not willing to uphold this law. |
| No  |
| I see the Health Department as valuable partner and have enjoyed working with the team.   |

**Q17 - What gender do you identify as?**

46 Responses

| Field                    | Choice Count |
|--------------------------|--------------|
| Female                   | 31           |
| Male                     | 14           |
| Non-binary               | 0            |
| Prefer not to say        | 1            |
| Prefer to self-describe: | 0            |
| Total                    | 46           |

**Q18 - What is your age? (Check the age range that applies best.)**

46 Responses

| Field | Choice Count |
|-------|--------------|
| 18-24 | 1            |
| 25-34 | 1            |
| 35-44 | 1            |
| 45-54 | 1            |
| 55-64 | 1            |
| 65-74 | 1            |
| 75-84 | 1            |
| 85+   | 1            |

|                   |    |
|-------------------|----|
| 18 to 24          | 1  |
| 25 to 34          | 4  |
| 35 to 44          | 9  |
| 45 to 54          | 7  |
| 55 to 64          | 13 |
| 65 to 74          | 10 |
| 75 & older        | 2  |
| Prefer not to say | 0  |
| Total             | 46 |

Q19 - Which of the following best describes your race? (Please check all that apply.)

46 Responses

| Field                               | Choice Count |
|-------------------------------------|--------------|
| American Indian or Alaskan Native   | 2            |
| Asian                               | 0            |
| Black or African American           | 1            |
| Native Hawaiian or Pacific Islander | 0            |
| White                               | 43           |
| Prefer not to say                   | 1            |
| Race not listed:                    | 1            |
| Total                               | 48           |

Q19 - Race not listed\_Text

1 Response

Hispanic

Q20 - Are you of Hispanic, Latino, or Spanish origin?

46 Responses

| Field             | Choice Count |
|-------------------|--------------|
| Yes               | 6            |
| No                | 39           |
| Prefer not to say | 1            |
| Total             | 46           |

Q21 - Where is your home physically located? (Please select the zip code that best describes where your home is located.) - Selected Choice

46 responses

| Field | Choice Count |
|-------|--------------|
| 80863 | 15           |
| 80813 | 6            |
| 80829 | 0            |
| 80816 | 12           |
| 80814 | 4            |
| 80819 | 3            |
| 80860 | 0            |

|                      |   |
|----------------------|---|
| 80866                | 0 |
| Prefer not to say    | 1 |
| Zip Code not listed: | 5 |

**Q21 - Zip Code not listed\_Text**

5 Responses

|       |
|-------|
| 80903 |
| 80905 |
| 80903 |
| 80920 |
| 80917 |

**Q22 - Do you work in Teller County?**

46 Responses

| Field             | Choice Count |
|-------------------|--------------|
| Yes               | 39           |
| No                | 5            |
| Prefer not to say | 2            |
| Total             | 46           |

**Q23 - If applicable, which of the following best describes the type of work you do?**

46 Responses

| Field                                     | Choice Count |
|---|--------------|
| Construction                              | 0            |
| Education                                 | 6            |
| Gaming Industry                           | 0            |
| Healthcare                                | 12           |
| Mining Industry                           | 0            |
| Small Business Owner                      | 0            |
| Military (Active/Retired)                 | 0            |
| Retired                                   | 4            |
| Service (e.g., restaurant, retail, salon) | 2            |
| Computer Technology                       | 0            |
| Government                                | 12           |
| Student                                   | 0            |
| Unemployed                                | 0            |
| Another type of work not listed:          | 5            |
| First Responder (e.g., police, fire, EMS) | 5            |
| Total                                     | 46           |

**Q23 - Another type of work not listed\_Text**

4 Responses

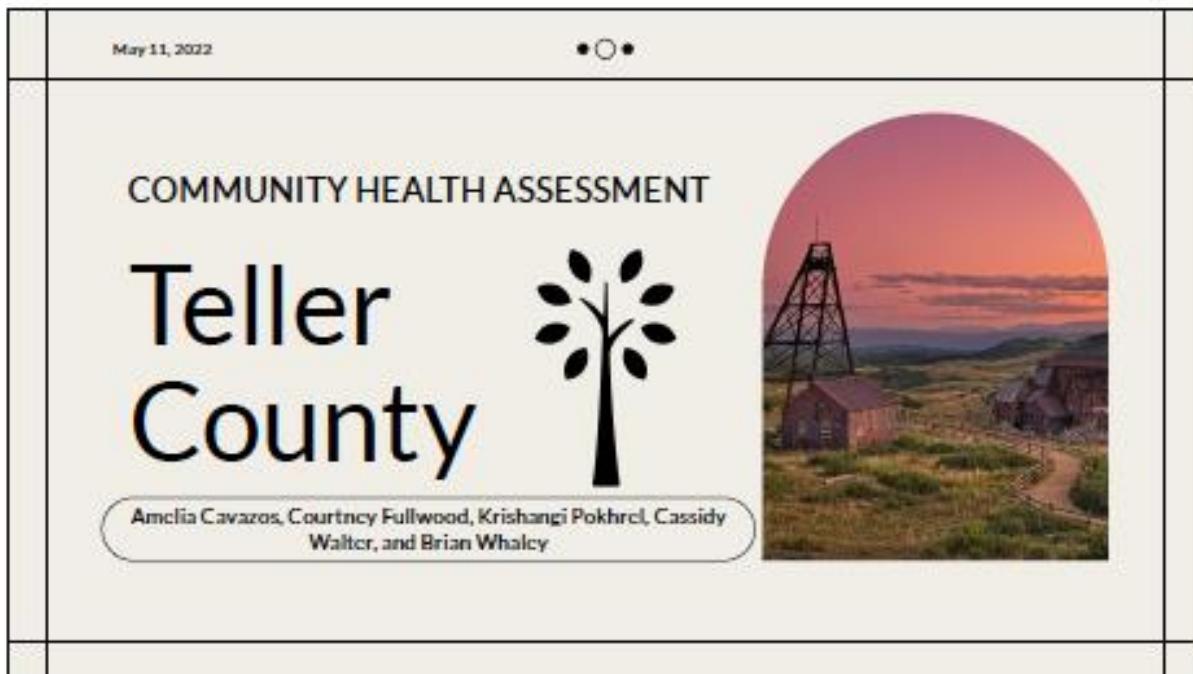
Human Services

community service

Volunteer

PPWFC/COC

## Appendix F: PowerPoint Presentation Slides





| •○•  | •○• | Teller County, CO |
|--|-----|-------------------|
| <h2>Background &amp; Context</h2>  |     |                   |
| <ul style="list-style-type: none"> <li>→ Teller County sits geographically in the center of Colorado</li> <li>→ Teller County has many outdoor recreational activities including kayaking, hiking, rock climbing, and camping</li> <li>→ Five towns: Woodland Park, Cripple Creek, Victor, Divide, and Florissant</li> <li>→ The last CHA occurred in 2017 (survey consisted of 13 closed-ended and 10 open-ended questions, broken down into several sections)</li> </ul> |     |                   |

## Summary of Scope of Work

What is the community's perception of their general health, wellness and environment?

What are the health and/or environmental issues the community is facing?

What are the barriers the community has/views in terms to healthcare access and resources?

What is the health status of the community?

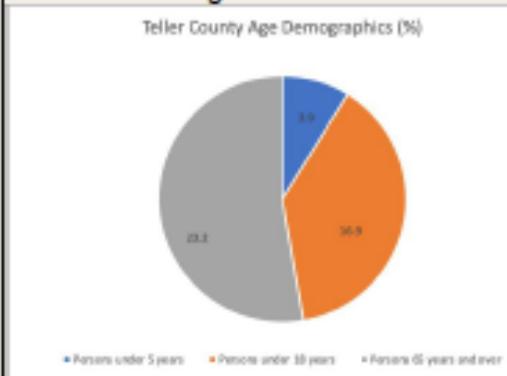
### Population Demographics

### Health and environmental issues

### Existing health inequities

## Demographics

### Age Distribution



### Race/Ethnic Distribution

| Race/Ethnicity                            | % of Total Population |
|---|-----------------------|
| White                                     | 93.8 %                |
| Hispanic or Latino                        | 7.1 %                 |
| Black or African American                 | 1.0 %                 |
| American Indian/Alaskan Native            | 1.4 %                 |
| Asian                                     | 1.1 %                 |
| Native Hawaiian or Other Pacific Islander | 0.1 %                 |

## Student Assessment Team (SAT)

Colorado School of Public Health, MPH Candidates

|   |                   |
|---|-------------------|
| Lead Liaison & Report Editor                | Amelia Cavazos    |
| Secondary Liaison & Report Editor           | Krishangi Pokhrel |
| Data Visualization & Data Analysis Co-Lead  | Courtney Fullwood |
| Data Generation & Data Analysis Co-Lead     | Brain Whaley      |
| Survey Development/Piloting & Report Editor | Cassidy Walter    |

colorado school of  
**public health**

## Faculty

|                   |                             |
|-------------------|-----------------------------|
| Course Instructor | Virginia Visconti, MAT, PhD |
| Course Coach      | Alison Grace Bui, MPH       |

colorado school of  
**public health**



## Community Partners

Teller County Public Health and Environment (TCPHE)

|                                      |                              |
|--------------------------------------|------------------------------|
| CHA Project Coordinator              | Karissa Larson, RN, BSN      |
| Teller County Public Health Director | Michelle Wolff, MSN, WHNP-BC |
| CHAPS Project Coordinator            | Martha Hubbard, RN, BSN      |

Weekly meetings occurred on Wednesday's at 10:00 AM

## Methods - Data Collection

01

Secondary Quantitative  
Data

CoHID, Healthy Kids, Health  
Access Survey, BRFSS,  
Coroner's Office

02

Primary Qualitative  
Data

Tour of Teller County with  
TCPHE

03

Community  
Survey

Piloted to Teller County  
Residents

## Methods - Data Analysis & Interpretation

### Comparative Analysis

| Indicator   | Year      | Teller County | Colorado |
|---|-----------|---------------|----------|
| % of tests above the radon action level (4 pCi/L) <sup>1</sup>  | 2011-2015 | 66.7%         | 52.1%    |
| Radon is a cancer-causing radioactive gas found in homes, the presence of which is tested for in Colorado. Teller County has a higher percentage of radon tests above the action level than the statewide percentage, hence the inclusion of a survey question regarding radon. |           |               |          |
| <i>Data Retrieved from: <sup>1</sup> CDPH/E, 2022</i>   |           |               |          |
| Indicator   | Year      | Teller County | Colorado |
| Age-adjusted suicide rates per 100,000 population <sup>1</sup>  | 2016-2020 | 39.6          | 21.6     |



### Findings: Comparative Analysis



|                               |    |    |                           |
|-------------------------------|----|----|---------------------------|
| Demographics                  | 01 | 04 | Impact of Gaming Industry |
| Mental Health & Suicide       | 02 | 05 | Housing                   |
| Environmental Health & Mining | 03 | 06 | Geographic Isolation      |

## Methods - Pilot Data Analysis

Completion % Rate

01

Quality of Open-Ended Responses

02

Representation of the Pilot Group

03



## Pilot Survey Results: Comparative Analysis

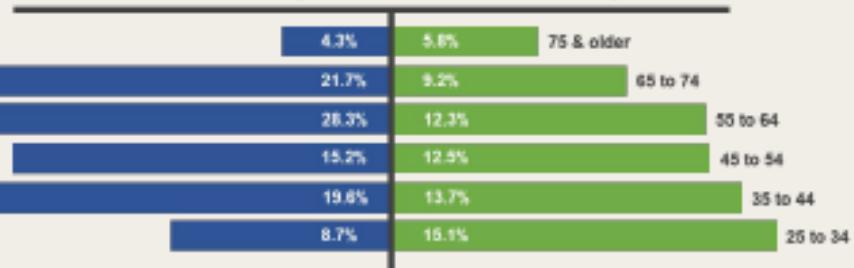


01

Age

Pilot Group

Teller County



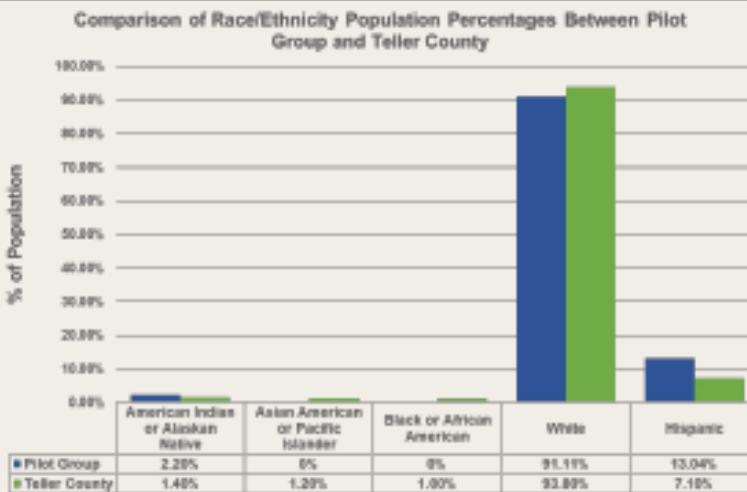


## Pilot Survey Results: Comparative Analysis



02

### Race & Ethnicity

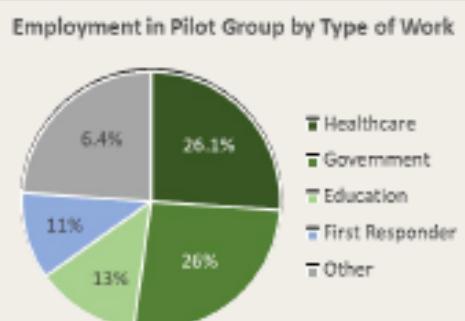


## Pilot Survey Results: Comparative Analysis

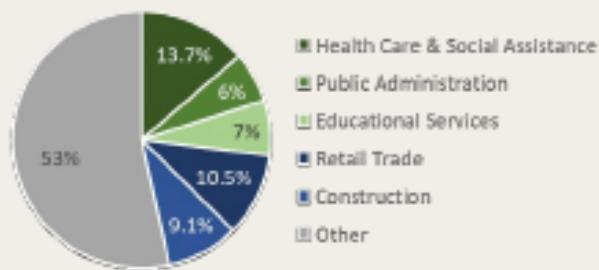


03

### Industry/Type of Work



### Employment in Teller County by Industry





## Findings: Pilot Survey



Survey Format  
→ Good/No Changes Needed



Representation of Teller County  
→ Needs Improvement



## Recommendations



Further analyze  
the pilot survey  
results



Develop survey  
distribution plan that  
reaches ALL  
community members



Consider  
conducting a  
second pilot survey

|                    |   |  |
|--------------------|---|--|
|                    | <p>CHIA 2022</p> <p>•○•</p>   |  |
| <b>Wrapping Up</b> |   |  |
|                    |  <p><b>Challenges</b></p> <ul style="list-style-type: none"> <li>- Putting data into context</li> <li>- Relating to a rural town as urban residents - septic tanks, water, transportation</li> <li>- Offering an inclusive pilot survey for residents</li> </ul> |  <p><b>Successes</b></p> <ul style="list-style-type: none"> <li>- Did not have to make changes to pilot survey</li> <li>- In-person tour</li> </ul> |
|                    |   |  <p><b>Lessons Learned</b></p> <p>Importance of Health Equity</p>   |
|                    |   |  |

# Appendix B: OMNI's Supplemental Secondary Data Review

## Public Safety & Transportation

| Indicator   | Year(s)   | Teller County | Colorado     |
|---|-----------|---------------|--------------|
| Adult Violent Crime Rate <sup>1</sup>   | 2021      | 25 cases      | 30,739 cases |
| Juvenile Violent Crime Rate <sup>1</sup>  | 2021      | 0             | 741 cases    |
| Percent of workers (age 16+ years) that commute to work by public transportation <sup>1</sup> | 2020      | 0             | 2.8%         |
| Mean travel time to work (minutes) <sup>2</sup>   | 2020      | 33.4 minutes  | 25.8 minutes |
| Age-adjusted rate of motor vehicle accident injuries <sup>3</sup>                             | 2018-2020 | 114.2/100,000 | 89.9/100,000 |

Sources: 1. Colorado Crime Statistics Dashboard <https://coloradocrimestats.state.co.us/tops/>  
 2. United States Census, American Community Survey  
[https://data.census.gov/cedsci/table?q=DP03&g=0400000US08\\_0500000US08119&tid=ACSDP5Y2020.DP03](https://data.census.gov/cedsci/table?q=DP03&g=0400000US08_0500000US08119&tid=ACSDP5Y2020.DP03)  
 3. CDPHE Health Indicators Dashboard <https://cdphe.colorado.gov/colorado-health-indicators>

## Substance Use

| Indicator   | Year(s)   | Teller County | Colorado |
|---|-----------|---------------|----------|
| Percent of adults aged 18+ years who currently smoke cigarettes <sup>4</sup>                              | 2019      | 13.9%         | 13.5%    |
| Percent of women who smoked during the last three months of pregnancy <sup>5</sup>                        | 2018      | 7%            | 5.1%     |
| Percent of adults aged 18+ years who used marijuana one or more days during the past 30 days <sup>6</sup> | 2018-2020 | 23.6%         | 18.7%    |
| Percent of adults aged 18+ years who reported binge drinking in past 30 days <sup>6</sup>                 | 2018-2020 | 22.1%         | 18.7%    |

4. CDC PLACES Report  
[https://nccd.cdc.gov/PLACES/rdPage.aspx?rdReport=DPH\\_500\\_Cities.ComparisonReport&Locations=08119&rdRequestForwarding=Form](https://nccd.cdc.gov/PLACES/rdPage.aspx?rdReport=DPH_500_Cities.ComparisonReport&Locations=08119&rdRequestForwarding=Form), <https://www.cdc.gov/statesystem/cigaretteuseadult.html>  
 5. Colorado's Children's Campaign, Kids Count 2021 Report [https://www.coloradokids.org/data/2021-county-fact-sheets/?ajax\\_post=29113](https://www.coloradokids.org/data/2021-county-fact-sheets/?ajax_post=29113)  
 6. CDPHE Colorado Health Indicators Dashboard <https://cdphe.colorado.gov/colorado-health-indicators>

## Mortality

| Indicator                          | Year(s)   | Teller County        | Colorado  |
|------------------------------------|-----------|----------------------|---|
| Life expectancy <sup>7</sup>       | 2021      | 81.8 years           | 78 years  |
| Infant mortality rate <sup>8</sup> | 2015-2019 | Low Number of Events | 4.7 (infant deaths per 1,000 live births, 2020) |

7. U.S. News and World Report <https://www.usnews.com/news/healthiest-communities/colorado/teller-county>  
8. Colorado Children's Campaign, Kids Count 2021 Report  
[https://www.coloradokids.org/data/2021-county-fact-sheets/?ajax\\_post=29113](https://www.coloradokids.org/data/2021-county-fact-sheets/?ajax_post=29113); CDC  
<https://www.cdc.gov/nchs/pressroom/states/colorado/co.htm>

## Suicide Morbidity

| Indicator   | Year(s)   | Teller County | Colorado |
|---|-----------|---------------|----------|
| Age-adjusted suicide rates per 100,000 residents <sup>9</sup>   | 2018-2020 | 39.61         | 21.4     |
| Age-adjusted rates of ED visits mentioning intentional self-harm injuries per year per 100,000 residents <sup>9</sup> | 2018-2020 | 232.3         | 143.3    |

9. CDPHE Injury Indicators Dashboard [https://cohealthviz.dphe.state.co.us/t/PSDVIP-MHPPUBLIC/views/InjuryIndicatorsDashboard/CHAAdjustedRates?%3AshowAppBanner=false&%3Adisplay\\_count=n&%3AshowVizHome=n&%3Aorigin=viz\\_share\\_link&%3AisGuestRedirectFromVizportal=y&%3Aembed=y](https://cohealthviz.dphe.state.co.us/t/PSDVIP-MHPPUBLIC/views/InjuryIndicatorsDashboard/CHAAdjustedRates?%3AshowAppBanner=false&%3Adisplay_count=n&%3AshowVizHome=n&%3Aorigin=viz_share_link&%3AisGuestRedirectFromVizportal=y&%3Aembed=y)

## Gaming Industry

| Indicator  | Year(s)    | Teller County       | Colorado             |
|--|------------|---------------------|----------------------|
| Adjusted Gross Proceeds (millions) <sup>10</sup>               | FY2021     | \$146.47            | \$818.23             |
| Employed Residents <sup>10</sup>                               | 2019; 2020 | 1,558; 690          | 8,656; 4,551         |
| Gaming Taxes/Fees (millions) <sup>10</sup>                     | FY 2021    | \$13.06             | \$120.48             |
| Casino Employment Impact (% of Total Employment) <sup>10</sup> | 2020       | 11% <sup>10.1</sup> | .18% <sup>10.1</sup> |

10. Colorado Department of Revenue <https://sbg.colorado.gov/industry-statistics-gaming>  
10.1 Calculated using Total Employment 2020 from  
<https://www.census.gov/quickfacts/fact/table/CO,tellercountycolorado/BZA110220>

## Drug Overdoses

| Indicator  | Year(s)   | Teller County | Colorado |
|--|-----------|---------------|----------|
| Average annual age-adjusted rate of drug overdose deaths per 100,000 residents <sup>11</sup> | 2018-2020 | 18.1          | 19.8     |
| Average annual age-adjusted rate of drug overdose deaths per 100,000 ANY OPIOID              | 2020      | 21.1          | 16.2     |

|   |           |      |      |
|---|-----------|------|------|
| (prescription or heroin) <sup>11</sup>  |           |      |      |
| Average annual age-adjusted rate of drug overdose deaths per 100,000<br>METHAMPHETAMINE <sup>11</sup>             | 2019-2020 | 12.6 | 7.3  |
| 2020 Average age-adjusted rate of ED visits for overdose involving any opioid per 100,000 residents <sup>11</sup> | 2020      | 47.2 | 46.3 |

11. CDPHE Drug Overdose Dashboard: [https://cohealthviz.dphe.state.co.us/t/PSDVIP-MHPPUBLIC/views/DrugOverdoseDashboard/PoisoningDeathAdjustedRates?iframeSizedToWindow=true&%3Aembed=y&%3AshowAppBanner=false&%3Adisplay\\_count=no&%3AshowVizHome=no&%3Aorigin=viz\\_share\\_link](https://cohealthviz.dphe.state.co.us/t/PSDVIP-MHPPUBLIC/views/DrugOverdoseDashboard/PoisoningDeathAdjustedRates?iframeSizedToWindow=true&%3Aembed=y&%3AshowAppBanner=false&%3Adisplay_count=no&%3AshowVizHome=no&%3Aorigin=viz_share_link)

## Chronic Illness

| Indicator   | Year(s)   | Teller County | Colorado |
|---|-----------|---------------|----------|
| Cancer (other than skin cancer), adults <sup>12</sup> | 2016-2018 | 8.7%          | 6.3%     |
| Diabetes, adults <sup>12</sup>                        | 2016-2018 | 4.8%          | 6.8%     |
| Asthma, current adults <sup>12</sup>                  | 2016-2018 | 5.6%          | 8.9%     |
| High blood pressure, adults <sup>12</sup>             | 2015-2017 | 32.6%         | 25.8%    |

12. CDPHE VISION Dashboard  
[https://cohealthviz.dphe.state.co.us/t/HSEBPublic/views/CDPHEVISION/CDPHEVISION?%3Aembed\\_code\\_version=3&%3Aembed\\_=y&%3AloadOrderID=0&%3Adisplay\\_spinner=no&%3AshowAppBanner=false&%3Adisplay\\_count=n&%3AshowVizHome=n&%3Aorigin=viz\\_share\\_link](https://cohealthviz.dphe.state.co.us/t/HSEBPublic/views/CDPHEVISION/CDPHEVISION?%3Aembed_code_version=3&%3Aembed_=y&%3AloadOrderID=0&%3Adisplay_spinner=no&%3AshowAppBanner=false&%3Adisplay_count=n&%3AshowVizHome=n&%3Aorigin=viz_share_link)

## Food Access/Security

| Indicator                               | Year(s) | Teller County | Colorado |
|---|---------|---------------|----------|
| Below poverty level <sup>13</sup>       | 2019    | 8.4%          | 7.4%     |
| At or above poverty level <sup>13</sup> | 2019    | 91.6%         | 92.6%    |

13. United States Census, American Community Survey  
[https://data.census.gov/cedsci/table?q=SNAP&g=0400000US08\\_0500000US08119&tid=ACSST5Y2019.S2201](https://data.census.gov/cedsci/table?q=SNAP&g=0400000US08_0500000US08119&tid=ACSST5Y2019.S2201)

## Additional Public Health Data

| Indicator  | Year(s)   | Teller County | Colorado |
|--|-----------|---------------|----------|
| Age-adjusted rates of ED visits mentioning unintentional injuries per year per 100,000 <sup>14</sup> | 2018-2020 | 7,739         | 6,332    |
| People fully vaccinated for COVID-19 <sup>15</sup>   | 2022      | 57.53%        | 73.76%   |
| % females ages 50-74 years had a mammogram within the  | 2016-2018 | 86.90%        | 85.2%    |

|   |                      |        |        |
|---|----------------------|--------|--------|
| past 2 years <sup>16</sup>                      |                      |        |        |
| % of adults with prediabetes <sup>16</sup>      | 2014-2017            | 24.5%  | 9.1%   |
| Youth who received 1+ MMR vaccine <sup>17</sup> | Jan 2020 – June 2020 | 83%    | 89.9%  |
| Teen 1+MCV <sup>17</sup>                        | Jan 2020 – June 2020 | 66.64% | 75.75% |
| Patients all gender UTD <sup>17</sup>           | Jan 2020 – June 2020 | 30%    | 49%    |

14. CDPHE Injury Indicator Dashboard [https://cohealthviz.dphe.state.co.us/t/PSDVIP-MHPPUBLIC/views/InjuryIndicatorsDashboard/CHAAdjustedRates?%3AshowAppBanner=false&%3Adisplay\\_count=n&%3AshowVizHome=n&%3Aorigin=viz\\_share\\_link&%3AisGuestRedirectFromVizportal=y&%3Aembed=y](https://cohealthviz.dphe.state.co.us/t/PSDVIP-MHPPUBLIC/views/InjuryIndicatorsDashboard/CHAAdjustedRates?%3AshowAppBanner=false&%3Adisplay_count=n&%3AshowVizHome=n&%3Aorigin=viz_share_link&%3AisGuestRedirectFromVizportal=y&%3Aembed=y)

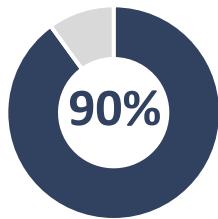
15. Statesman Journal <https://data.statesmanjournal.com/covid-19-vaccine-tracker/colorado/teller-county/08119/>

16. CDPHE VISION Dashboard  
[https://cohealthviz.dphe.state.co.us/t/HSEBPublic/views/CDPHEVISION/CDPHEVISION?%3Aembed\\_code\\_version=3&%3Aembed\\_=y&%3AloadOrderID=0&%3Adisplay\\_spinner=no&%3AshowAppBanner=false&%3Adisplay\\_count=n&%3AshowVizHome=n&%3Aorigin=viz\\_share\\_link](https://cohealthviz.dphe.state.co.us/t/HSEBPublic/views/CDPHEVISION/CDPHEVISION?%3Aembed_code_version=3&%3Aembed_=y&%3AloadOrderID=0&%3Adisplay_spinner=no&%3AshowAppBanner=false&%3Adisplay_count=n&%3AshowVizHome=n&%3Aorigin=viz_share_link)

17. CDPHE CIIS County Level Immunization Rate Maps  
[https://cohealthviz.dphe.state.co.us/t/DCEED\\_Public/views/CountyRateMaps-Storyboard/CountyRateMapsCombined?iframeSizedToWindow=true&%3Aembed\\_=y&%3Adisplay\\_spinner=no&%3AshowAppBanner=false&%3Aembed\\_code\\_version=3&%3AloadOrderID=0&%3Adisplay\\_count=n&%3AshowVizHome=n&%3Aorigin=viz\\_share\\_link](https://cohealthviz.dphe.state.co.us/t/DCEED_Public/views/CountyRateMaps-Storyboard/CountyRateMapsCombined?iframeSizedToWindow=true&%3Aembed_=y&%3Adisplay_spinner=no&%3AshowAppBanner=false&%3Aembed_code_version=3&%3AloadOrderID=0&%3Adisplay_count=n&%3AshowVizHome=n&%3Aorigin=viz_share_link)

## Appendix C: Survey Respondent Demographics

290 community members responded to the community survey.

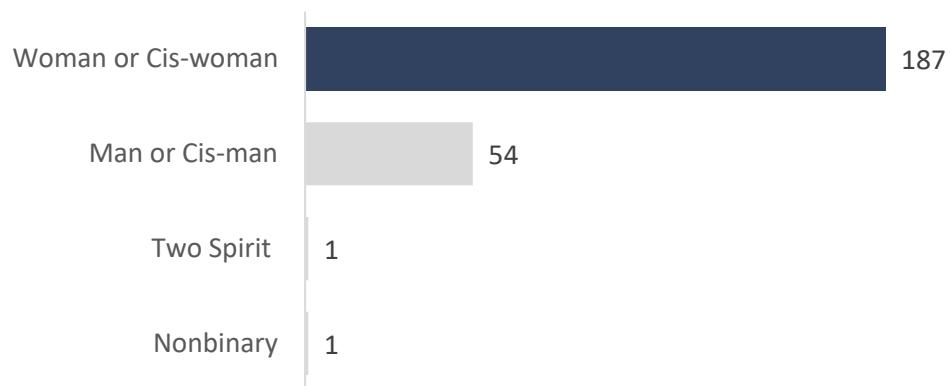


identified as **White**. American Indian and Latino/a, Latinx, Hispanic or of Spanish origin both comprised 3% of respondents. (n=234)

### Race

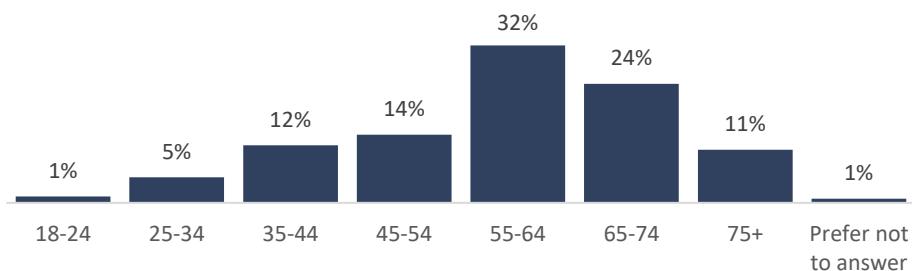
### Gender

The vast majority of respondents identified as a **woman or cis-woman**. (n=243)



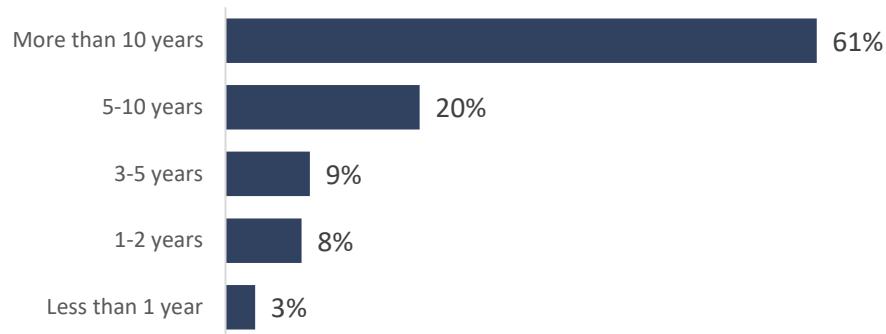
### Age

The median age of survey respondents fell between **55-64 years old**. (n=231)



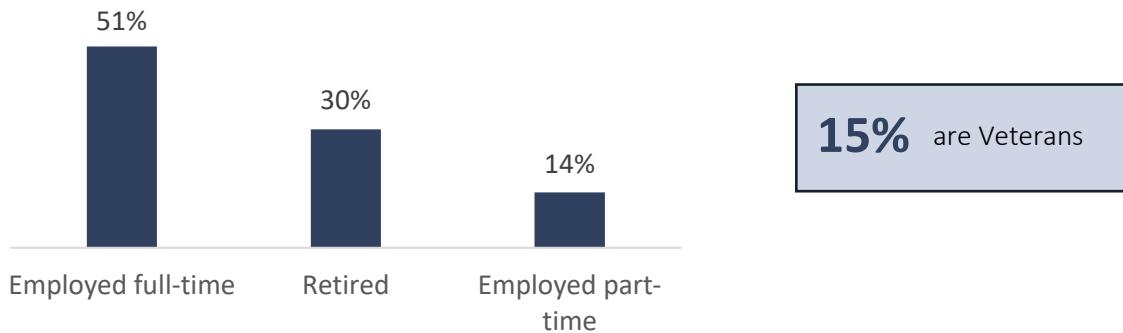
## Residency in Teller County

Survey respondents tended to be long-term residents. (n=231)



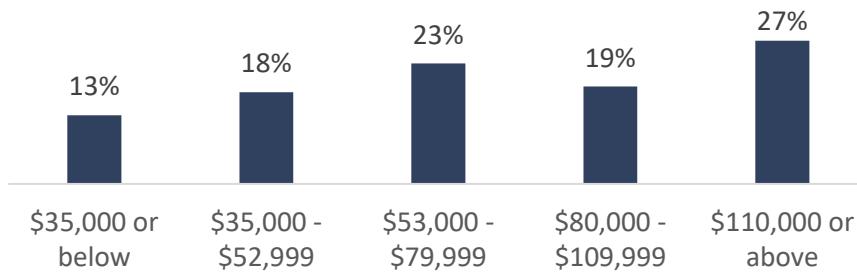
## Employment Status

About half of respondents work full time. (n=227)



## Household Income

A little more than half of respondents had a household income less than \$80,000. (n=182)



## Education

Two-thirds of respondents had a bachelor's degree or higher degree. (n= 226)

