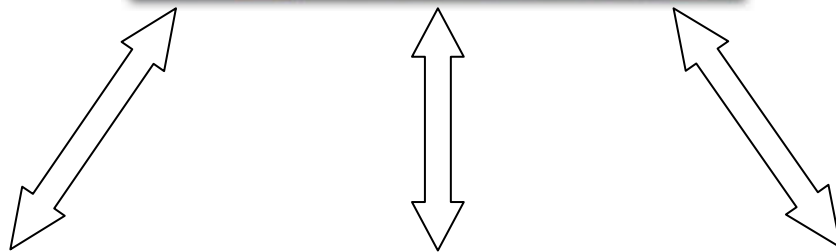


Community Health Assessment - Phone Survey Form and Results for Grimes County, Texas



National Association of Counties Project
Funded by Federal Office of Rural Health Policy

November 2008

**Community Health Assessment –
Phone Survey Form and Results
for Grimes County, Texas**

Prepared for:

Grimes St. Joseph Health Center, Navasota, Grimes County, Texas

through

National Association of Counties Project

Prepared by:

Pamela S. Hartman, Extension Associate
Email: pamela.hartman@okstate.edu

Cheryl F. St. Clair, Associate State Extension Specialist
Email: cheryl@okstate.edu

Gerald A. Doeksen, Extension Economist
Email: gad@okstate.edu

National Center for Rural Health Works
Oklahoma Cooperative Extension Service
Oklahoma State University
(405) 744-6083

and

Val Schott, Director
Email: val.schott@okstate.edu

National Center for Rural Health Works
Rural Health Policy & Research Center
Oklahoma Osteopathic School of Medicine
Oklahoma State University
(405) 945-9197

November 2008

**Grimes County, Texas -
Health Care
Phone Survey Form**

Survey Date: Week of October 13, 2008

NOTE TO INTERVIEWER: All questions are optional and respondent may, of course, choose not to answer. All answers provided on this form are for facilitation purposes only. If an answer does not "fit" into one of the provided answers, please take down the exact answer given. Thank you.

Introduction and screener:

Hello. My name is _____ with _____. I am calling on behalf of the local Grimes County Health Care committee. We are conducting a brief survey on the topic of health care in Grimes County. The community is reviewing the health care situation in Grimes County. It is very important that we include the opinion of you or someone in your household in this brief but important survey. To ensure confidentiality, all responses are completely anonymous.

Qualifier 1: May I ask, are you over the age of 18?

- Yes
 No (*Ask to speak to someone over the age of 18. TERMINATE if there is no one over the age of 18 in the household.*)

1. What is your zip code?

- | | |
|--|--|
| <input type="checkbox"/> 77830 Anderson | <input type="checkbox"/> 77868 Navasota |
| <input type="checkbox"/> 77831 Bédias | <input type="checkbox"/> 77873 Richards |
| <input type="checkbox"/> 77861 Iola | <input type="checkbox"/> 77880 Washington |
| <input type="checkbox"/> 77363 Plantersville | <input type="checkbox"/> Other _____(<i>TERMINATE</i>) |

2a. Do you use a family doctor for most of your routine health care?

- Yes (*Skip to Q.3a*)
 No
 (*Do not read*) Don't know/Refused (*Skip to Q.3a*)

2b. If no, then what kind of medical provider do you use for routine care? (*Record exact response. Probe for clarification. Do not read list.*)

- | | |
|--|---|
| <input type="checkbox"/> Community Health Center | <input type="checkbox"/> Rural Health Clinic |
| <input type="checkbox"/> Health Department | <input type="checkbox"/> Specialist |
| <input type="checkbox"/> Emergency Room/Hospital | <input type="checkbox"/> Other (<i>Specify</i>) _____ |
| <input type="checkbox"/> Medicaid | |

- 3a. Which city do you go to for most of your family's routine health care needs? *(Do not read list)*
- | | |
|--|---|
| <input type="checkbox"/> Brenham | <input type="checkbox"/> Navasota <i>(Skip to Q4a)</i> |
| <input type="checkbox"/> Bryan/College Station | <input type="checkbox"/> Other <i>(Specify)</i> _____ |
| <input type="checkbox"/> Conroe | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused <i>(skip to Q4a)</i> |
| <input type="checkbox"/> Huntsville | |
| <input type="checkbox"/> Madisonville | |

- 3b. Why do you or someone in your household use a medical provider for routine health care needs outside of Grimes County? *(Record exact response. Probe for clarification. Do not read list.)*
- | | |
|--|--|
| <input type="checkbox"/> Better quality of providers | <input type="checkbox"/> Speed of getting an appointment |
| <input type="checkbox"/> Closer/Convenient location | <input type="checkbox"/> Approved provider for insurance/Health benefits program |
| <input type="checkbox"/> Have used for years/Personal relationship | <input type="checkbox"/> Other <i>(Specify)</i> _____ |
| <input type="checkbox"/> Nicer facilities | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused |
| <input type="checkbox"/> Specialist | |

- 4a. Have you or someone else in your household been to a primary care doctor in Grimes County in the past 24 months?
- Yes
 - No *(Skip to Q.5)*
 - (Do not read)* Don't know/Refused *(Skip to Q5)*

- 4b. How satisfied were you or someone in your household with the quality of care received in Grimes County? Would you say that you were...*(Read List)* ?
- Satisfied
 - Dissatisfied
 - (Do not read)* Don't know/Refused *(Skip to Q.5)*

- 4c. Why do you say that? *(Record exact response. Probe for clarification.)*
-
-

5. Do you think there are enough primary care doctors in Grimes County?
- Yes
 - No
 - (Do not read)* Don't know/Refused

6. Are you able to get an appointment with your primary care doctor when you need one?
- Yes
 - No
 - (Do not read)* Don't know/Refused

- 7a. Have you or someone in your household been to a specialist in the past 24 months?
- Yes
 - No (*Skip to Q.8*)
 - (*Do not read*) Don't know/Refused (*Skip to Q.8*)

- 7b. What type of specialist have you or someone in your household been to and in which city are they located?

Type of Specialist	City

- 7c. Did the specialist request further testing, laboratory work and/or x-rays?
- Yes
 - No (*Skip to Q.7f*)
 - (*Do not read*) Don't know/Refused (*Skip to Q.7f*)

- 7d. In which city were the tests or laboratory work conducted? (*Record response below*)

- 7e. Are you aware that you can have your tests, laboratory work and/or x-rays performed in Navasota regardless of the location of your specialist?
- Yes
 - No
 - (*Do not read*) Don't know/Refused

- 7f. Did the specialist prescribe medication(s)?
- Yes
 - No (*Skip to Q.8*)
 - (*Do not read*) Don't know/Refused (*Skip to Q.8*)

- 7g. In which city was the pharmacy located that filled your prescription(s)? Or did you use mail-order? (*Record response below*)

8. How many people live in your household? (**Record response below**)
 _____ (*If respondent is the only person who lives in household, ask for "you" only in Q.9*)

9. What type of health insurance covers you and your family? *(Read list if needed. Ask for "you" and "family" (if applicable). Can provide more than one response.)*

	<u>You</u>	<u>Family</u>
Champus/TriCare Program	<input type="checkbox"/>	<input type="checkbox"/>
Insurance through Employer/Previous employer	<input type="checkbox"/>	<input type="checkbox"/>
Celtic	<input type="checkbox"/>	<input type="checkbox"/>
UNICARE	<input type="checkbox"/>	<input type="checkbox"/>
Golden Rule	<input type="checkbox"/>	<input type="checkbox"/>
Humana	<input type="checkbox"/>	<input type="checkbox"/>
Scott & White	<input type="checkbox"/>	<input type="checkbox"/>
Aetna	<input type="checkbox"/>	<input type="checkbox"/>
BCBS	<input type="checkbox"/>	<input type="checkbox"/>
Companion	<input type="checkbox"/>	<input type="checkbox"/>
Other _____ <i>(Specify)</i>		
Medicaid	<input type="checkbox"/>	<input type="checkbox"/>
CHIPS	<input type="checkbox"/>	<input type="checkbox"/>
Medicare	<input type="checkbox"/>	<input type="checkbox"/>
Medicare Part D (Prescriptions)	<input type="checkbox"/>	<input type="checkbox"/>
Medicare Advantage (Private pay)	<input type="checkbox"/>	<input type="checkbox"/>
Medicare Supplement (Private pay)	<input type="checkbox"/>	<input type="checkbox"/>
Self-Paid Insurance Plan	<input type="checkbox"/>	<input type="checkbox"/>
Celtic	<input type="checkbox"/>	<input type="checkbox"/>
UNICARE	<input type="checkbox"/>	<input type="checkbox"/>
Golden Rule	<input type="checkbox"/>	<input type="checkbox"/>
Humana	<input type="checkbox"/>	<input type="checkbox"/>
Scott & White	<input type="checkbox"/>	<input type="checkbox"/>
Aetna	<input type="checkbox"/>	<input type="checkbox"/>
BCBS	<input type="checkbox"/>	<input type="checkbox"/>
Companion	<input type="checkbox"/>	<input type="checkbox"/>
Other _____ <i>(Specify)</i>		
VA benefits	<input type="checkbox"/>	<input type="checkbox"/>
Texas Risk Pool	<input type="checkbox"/>	<input type="checkbox"/>
* Do Not Have Health Insurance	<input type="checkbox"/>	<input type="checkbox"/>
Other _____ <i>(Specify)</i>	<input type="checkbox"/>	<input type="checkbox"/>

10. Have you or someone in your household used the non-emergency services of a hospital in the past 24 months?
- Yes
- No (*Skip to Q.16*)
- (*Do not read*) Don't know/Refused (*Skip to Q.16*)
11. At which hospital(s) were services received? (*Do not read list unless prompt is needed. Record exact responses. Allow for responses for more than one hospital.*)
- Grimes St. Joseph Health Center - Navasota (*Skip to Q.14*)
- College Station Medical Center - College Station
- Conroe Regional Medical Center - Conroe
- Huntsville Memorial Hospital - Huntsville
- Madison St. Joseph Health Center - Madisonville
- M.D. Anderson - Houston
- Solara Hospital Conroe - Conroe
- St. Joseph Regional Health System - Bryan
- Trinity Hospital - Brenham
- Other (*Specify*) _____
- (*Do not read*) Don't know/Refused
12. (*If any hospital other than Grimes St. Joseph Health Center was indicated in Q.11, ask Q.12, Q.13a and Q.13b; otherwise, skip to Q.14*) You mentioned that you or someone in your household received care at a hospital other than Grimes St. Joseph Health Center. Why did you or your family member choose this/these hospital(s)? (*Record exact response. Probe for clarification.*)
-
-
- 13a. What hospital services were used there? (*Do not read list unless prompt is needed. Record exact response.*)
- | | |
|---|--|
| <input type="checkbox"/> Birthing services | <input type="checkbox"/> Occupational health |
| <input type="checkbox"/> Bone density | <input type="checkbox"/> Oncology |
| <input type="checkbox"/> CT Scan (CAT Scan) | <input type="checkbox"/> Outpatient surgery |
| <input type="checkbox"/> Dietary services/Diabetic counseling | <input type="checkbox"/> Physical therapy |
| <input type="checkbox"/> Emergency room | <input type="checkbox"/> Radiology (X-Ray) |
| <input type="checkbox"/> Inpatient stay | <input type="checkbox"/> Respiratory therapy |
| <input type="checkbox"/> Inpatient surgery | <input type="checkbox"/> Sleep study |
| <input type="checkbox"/> Laboratory (blood) tests | <input type="checkbox"/> Specialty doctor |
| <input type="checkbox"/> Mammogram | <input type="checkbox"/> Ultrasound |
| <input type="checkbox"/> Mental health/Substance abuse | <input type="checkbox"/> Other (<i>Specify</i>) _____ |
| <input type="checkbox"/> MRI | <input type="checkbox"/> (<i>Do not read</i>) Don't know/Refused |

13b. Why did you use a hospital outside of Grimes County?

- | | |
|--|--|
| <input type="checkbox"/> Better quality of providers | <input type="checkbox"/> Specialist |
| <input type="checkbox"/> Closer/Convenient location | <input type="checkbox"/> Speed of getting an appointment |
| <input type="checkbox"/> Have used for years/Personal relationship | <input type="checkbox"/> Approved provider for insurance |
| <input type="checkbox"/> Nicer facilities | <input type="checkbox"/> Other (<i>Specify</i>) _____ |

14. (*If Grimes St. Joseph Health Center is mentioned in Q.11, ask Q.12, Q.15a, and Q.15b; otherwise, skip to Q. 16.*) What hospital services were used at Grimes St. Joseph Health Center? (*Do not read list unless prompt is needed. Record exact response.*)

- | | |
|---|--|
| <input type="checkbox"/> Bone density | <input type="checkbox"/> Occupational health |
| <input type="checkbox"/> CT Scan (CAT Scan) | <input type="checkbox"/> Outpatient surgery |
| <input type="checkbox"/> Dietary services/Diabetic counseling | <input type="checkbox"/> Physical therapy |
| <input type="checkbox"/> Emergency room | <input type="checkbox"/> Radiology (X-Ray) |
| <input type="checkbox"/> Inpatient stay | <input type="checkbox"/> Respiratory therapy |
| <input type="checkbox"/> Inpatient surgery | <input type="checkbox"/> Specialty doctor |
| <input type="checkbox"/> Laboratory (blood) tests | <input type="checkbox"/> Ultrasound |
| <input type="checkbox"/> Mental health/Substance abuse | <input type="checkbox"/> Other (<i>Specify</i>) _____ |
| <input type="checkbox"/> MRI | <input type="checkbox"/> (<i>Do not read</i>) Don't know/Refused |

15a. How satisfied were you or someone in your household with the services you received at Grimes St. Joseph Health Center? Would you say you were...(*Read list*)

- Satisfied
- Dissatisfied
- (*Do not read*) Don't know/Refused (*Skip to Q.16*)

15b. Why do you say that? (*Record exact response. Probe for clarification.*)

16. Have you or someone in your household used emergency room services in the past 24 months?

- Yes
- No (*Skip to Q.22*)
- (*Do not read*) Don't know/Refused (*Skip to Q.22*)

17.

At which hospital(s) were emergency room services received? *(Do not read list unless prompt is needed. Record exact responses. Allow for responses for more than one hospital.)*

- Grimes St. Joseph Health Center - Navasota *(Skip to Q.20)*
- College Station Medical Center - College Station
- Conroe Regional Medical Center - Conroe
- Huntsville Memorial Hospital - Huntsville
- Madison St. Joseph Health Center - Madisonville
- Solara Hospital Conroe - Conroe
- St. Joseph Regional Health System - Bryan
- Trinity Hospital - Brenham
- Other *(Specify)* _____
- (Do not read)* Don't know/Refused

18.

(If any hospital other than Grimes St. Joseph Health Center was indicated in Q.17, ask Q.18; otherwise, skip to Q.19) You mentioned that you or someone in your household received emergency room care at a hospital other than Grimes St. Joseph Health Center. What type of emergency room services have you or someone in your household used in the past 24 months at this hospital? *(Do not read list unless prompt is needed. Record exact response.)*

- | | |
|--|--|
| <input type="checkbox"/> Cardiac evaluation/Heart | <input type="checkbox"/> Routine illness |
| <input type="checkbox"/> Laboratory | <input type="checkbox"/> Stroke/TIA |
| <input type="checkbox"/> Minor emergencies | <input type="checkbox"/> Trauma care |
| <input type="checkbox"/> MVA (motor vehicle accident) | <input type="checkbox"/> Radiology (X-Ray) |
| <input type="checkbox"/> Orthopedic care | <input type="checkbox"/> Urgent care |
| <input type="checkbox"/> Respiratory distress/Breathing difficulties | <input type="checkbox"/> Other <i>(Specify)</i> _____ |
| | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused |

19.

(If Grimes St. Joseph Health Center is mentioned in Q.17 ask Q.19, Q.20a, and Q.20b; otherwise, skip to Q. 21a) What type of emergency room services have you or someone in your household used in the past 24 months at Grimes St. Joseph Health Center? *(Do not read list unless prompt is needed. Record exact response.)*

- | | |
|--|--|
| <input type="checkbox"/> Cardiac evaluation/Heart | <input type="checkbox"/> Stroke/TIA |
| <input type="checkbox"/> Laboratory | <input type="checkbox"/> Trauma care |
| <input type="checkbox"/> Minor emergencies | <input type="checkbox"/> Radiology (X-Ray) |
| <input type="checkbox"/> MVA (motor vehicle accident) | <input type="checkbox"/> Urgent care |
| <input type="checkbox"/> Respiratory distress/Breathing difficulties | <input type="checkbox"/> Other <i>(Specify)</i> _____ |
| <input type="checkbox"/> Routine illness | <input type="checkbox"/> <i>(Do not read)</i> Don't know/Refused |

20a. How satisfied were you or someone in your household with the services you received at the emergency room in Grimes St. Joseph Health Center? Would you say you were... **(Read list)**

- Satisfied
 Dissatisfied
 (Do not read) Don't know/Refused **(Skip to Q.21)**

20b. Why do you say that? **(Record exact response. Probe for clarification.)**

21a. Have you or someone in your household used the services of the local health department in the past 24 months?

- Yes
 No **(Skip to Q.22)**
 (Do not read) Don't know/Refused **(Skip to Q.22)**

21b. How satisfied were you or someone in your household with the services you received at the local health department? Would you say you were... **(Read list)**

- Satisfied
 Dissatisfied
 (Do not read) Don't know/Refused

22. What concerns you most about health care in your community? **(Record exact response.)**

23. Do you routinely receive dental care?

- Yes
 No
 (Do not read) Don't know/Refused

24. Have you received dental care in the past 24 months?

- Yes **(Ask 24a and 24b)**
 No **(Skip to Q.25)**
 (Do not read) Don't know/Refused **(Skip to Q.25)**

24a. In which city did you receive dental care in the past 24 months?

- | | |
|--|--|
| <input type="checkbox"/> Brenham | <input type="checkbox"/> Madisonville |
| <input type="checkbox"/> Bryan/College Station | <input type="checkbox"/> Navasota |
| <input type="checkbox"/> Conroe | <input type="checkbox"/> Other (Specify) _____ |
| <input type="checkbox"/> Huntsville | <input type="checkbox"/> (Do not read) Don't know/Refused |

24b. Why did you choose to go there for dental care? (**Record exact response.**)

- | | |
|--|--|
| <input type="checkbox"/> Better quality of providers | <input type="checkbox"/> Approved provider for insurance/Health benefits program |
| <input type="checkbox"/> Closer/Convenient location | |
| <input type="checkbox"/> Have used for years/Personal relationship | <input type="checkbox"/> Other (<i>Specify</i>) _____ |
| <input type="checkbox"/> Nicer facilities | <input type="checkbox"/> (Do not read) Don't know/Refused |
| <input type="checkbox"/> Speed of getting an appointment | |

25. Have you or someone in your household used the following services in the past 24 months, and if so, were those services performed inside or outside of Grimes County?

25a. Have you used physical therapy services in the past 24 months?

- Yes, Inside Grimes County
- Yes, Outside Grimes County
- No, did not use physical therapy services

25b. Have you used mental health services in the past 24 months?

- Yes, Inside Grimes County
- Yes, Outside Grimes County
- No, did not use mental health services

25c. Have you used substance abuse services in the past 24 months?

- Yes, Inside Grimes County
- Yes, Outside Grimes County
- No, did not use substance abuse services

25d. Have you used eye care services in the past 24 months?

- Yes, Inside Grimes County
- Yes, Outside Grimes County
- No, did not use eye care services

25e. Have you used dialysis services in the past 24 months?

- Yes, Inside Grimes County
- Yes, Outside Grimes County
- No, did not use dialysis services

26. What additional health care services would you like in the area? (**Record exact response.**)

The last few questions are for statistical purposes only and like any of the other questions, respondents may choose not to answer.

27. What is your age?

- 18-20
- 21-30
- 31-40
- 41-50
- 51-60
- 61-70
- 71-80
- 80+
- (*Do not read*) Don't know/Refused

28. What is your ethnicity?

- Caucasian
- Asian
- Hispanic
- African American
- Native American
- Other (*Specify*) _____
- (*Do not read*) Don't know/Refused

29. What is your annual household income?

- Less than \$10,000
- \$10,000 to \$14,999
- \$15,000 to \$24,999
- \$25,000 to \$34,999
- \$35,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 to \$149,999
- \$150,000 to \$199,999
- \$200,000 or more
- (*Do not read*) Don't know/Refused

30. ***INTERVIEWER: RECORD ANSWER BASED ON OBSERVATION ONLY. DO NOT ASK.***

- Male
- Female
- Unknown (Can't Tell)

That completes the survey. Thank you for your time! Thank you from the Grimes County Health Resource Commission.

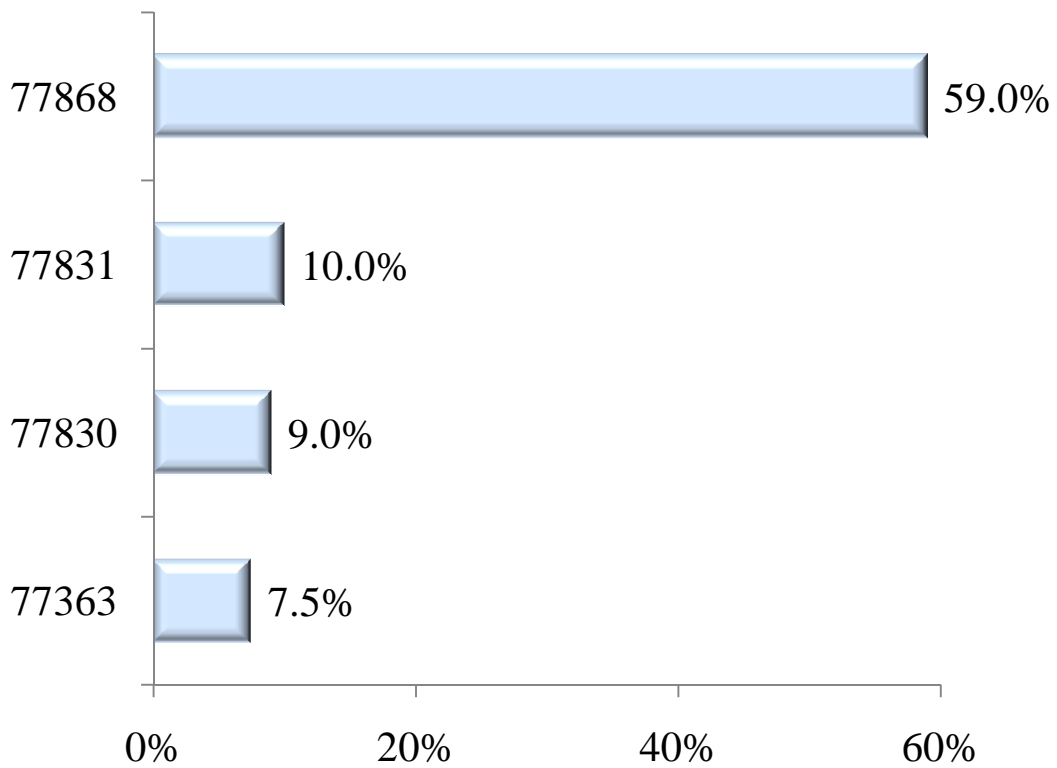
Grimes County, Texas -

Health Care

Phone Survey Results

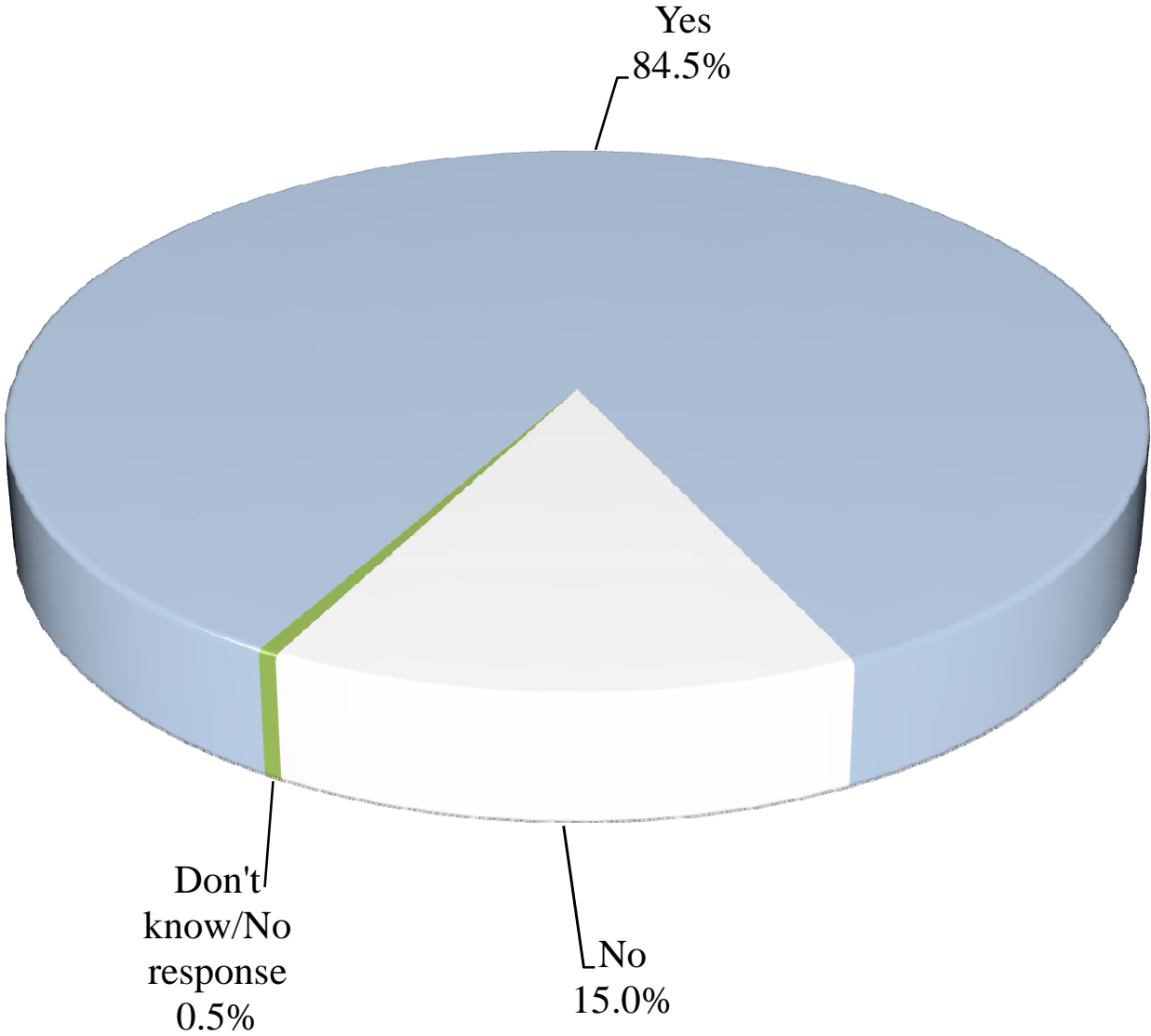
Q1. What is your zip code?

Response Category	No.	Percent
77868 Navasota	118	59.0%
77831 Bedias	20	10.0%
77830 Anderson	18	9.0%
77363 Plantersville	15	7.5%
77861 Iola	13	6.5%
77880 Washington	10	5.0%
77873 Richards	<u>6</u>	<u>3.0%</u>
Total	<u>200</u>	<u>100.0%</u>



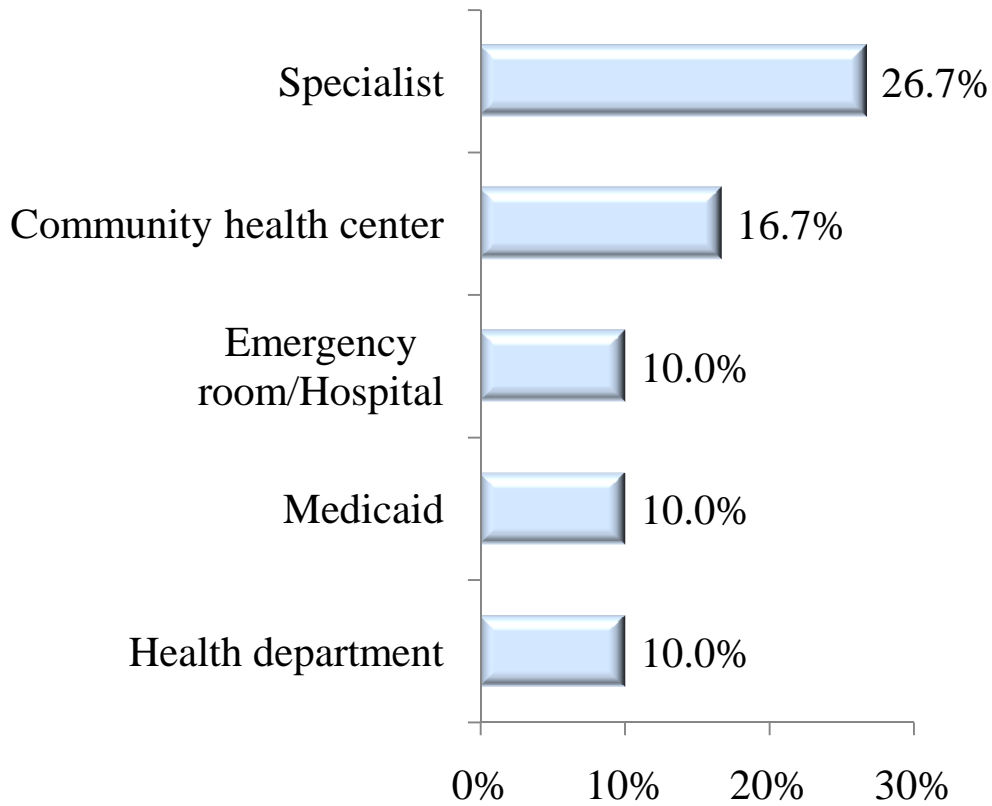
Q2a. Do you use a family doctor for most of your routine health care?

Response Category	No.	Percent
Yes	169	84.5%
No	30	15.0%
Don't know/No response	<u>1</u>	<u>0.5%</u>
Total	<u>200</u>	<u>100.0%</u>



**Q2b. If no, then what kind of medical provider
do you use for routine care?**

Response Category	No.	Percent
Specialist	8	26.7%
Community health center	5	16.7%
Emergency room/Hospital	3	10.0%
Medicaid	3	10.0%
Health department	3	10.0%
Rural health clinic	2	6.7%
Look in phonebook	1	3.3%
Veteran's facility doctor	1	3.3%
Family works there	1	3.3%
Don't know/No response	<u>3</u>	<u>10.0%</u>
Total	<u>30</u>	<u>100.0%</u>



Q3a. Which city do you go to for most of your family's routine health care needs?

Response Category	County	No.	Percent	No. by County	% by County
Bryan/College Station	Brazos	86	43.0%	86	43.0%
Navasota	Grimes	69	34.5%	69	34.5%
Conroe	Montgomery	8	4.0%	15	7.5%
Magnolia	Montgomery	4	2.0%		
Montgomery	Montgomery	3	1.5%		
Houston	Harris	7	3.5%	11	5.5%
Tomball	Harris	4	2.0%		
Brenham	Washington	8	4.0%	8	4.0%
Madisonville	Madison	6	3.0%	6	3.0%
Huntsville	Walker	3	1.5%	3	1.5%
Temple	Bell	1	0.5%	1	0.5%
Don't know/No response		<u>1</u>	<u>0.5%</u>	<u>1</u>	<u>0.5%</u>
Total		<u>200</u>	<u>100.0%</u>	<u>200</u>	<u>100.0%</u>

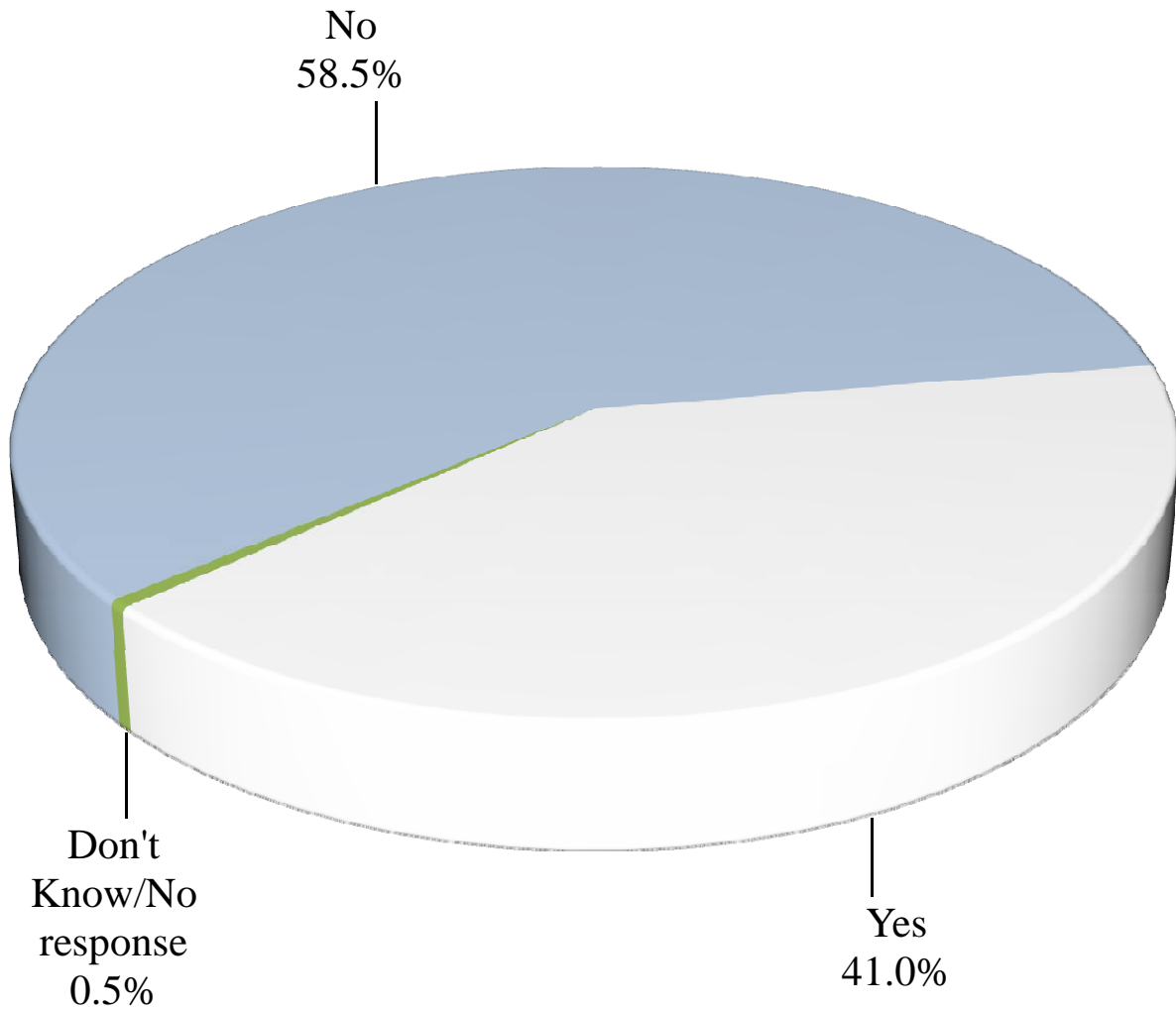
Q3b. Why do you or someone in your household use a medical provider for routine health care needs outside of Grimes County?

Response Category	No.	Percent
Closer/Convenient location	36	26.9%
Have used for years/Personal relationship	34	25.4%
Approved provider for insurance/Health benefits program	33	24.6%
Better quality of providers	20	14.9%
Specialist	7	5.2%
Nicer facilities	3	2.2%
Speed of getting an appointment	<u>1</u>	<u>0.7%</u>
Total	<u>134</u>	<u>100.0%</u>

Some respondents answered more than once.

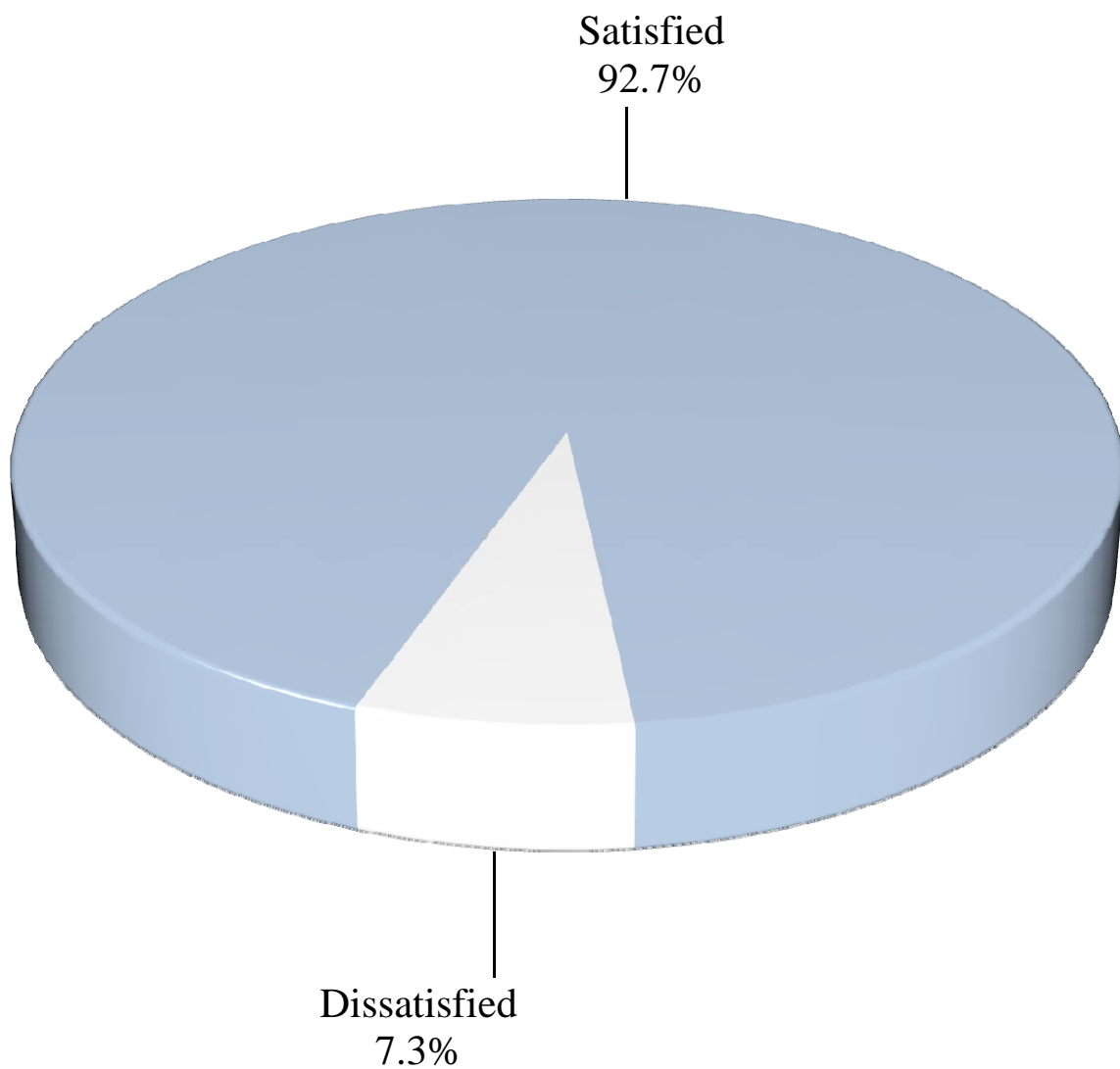
Q4a. Have you or someone else in your household been to a primary care doctor in Grimes County in the past 24 months?

Response Category	No.	Percent
No	117	58.5%
Yes	82	41.0%
Don't Know/No response	<u>1</u>	<u>0.5%</u>
Total	<u>200</u>	<u>100.0%</u>



Q4b-1. How satisfied were you or someone in your household with the quality of care received in Grimes County? Would you say that you were...

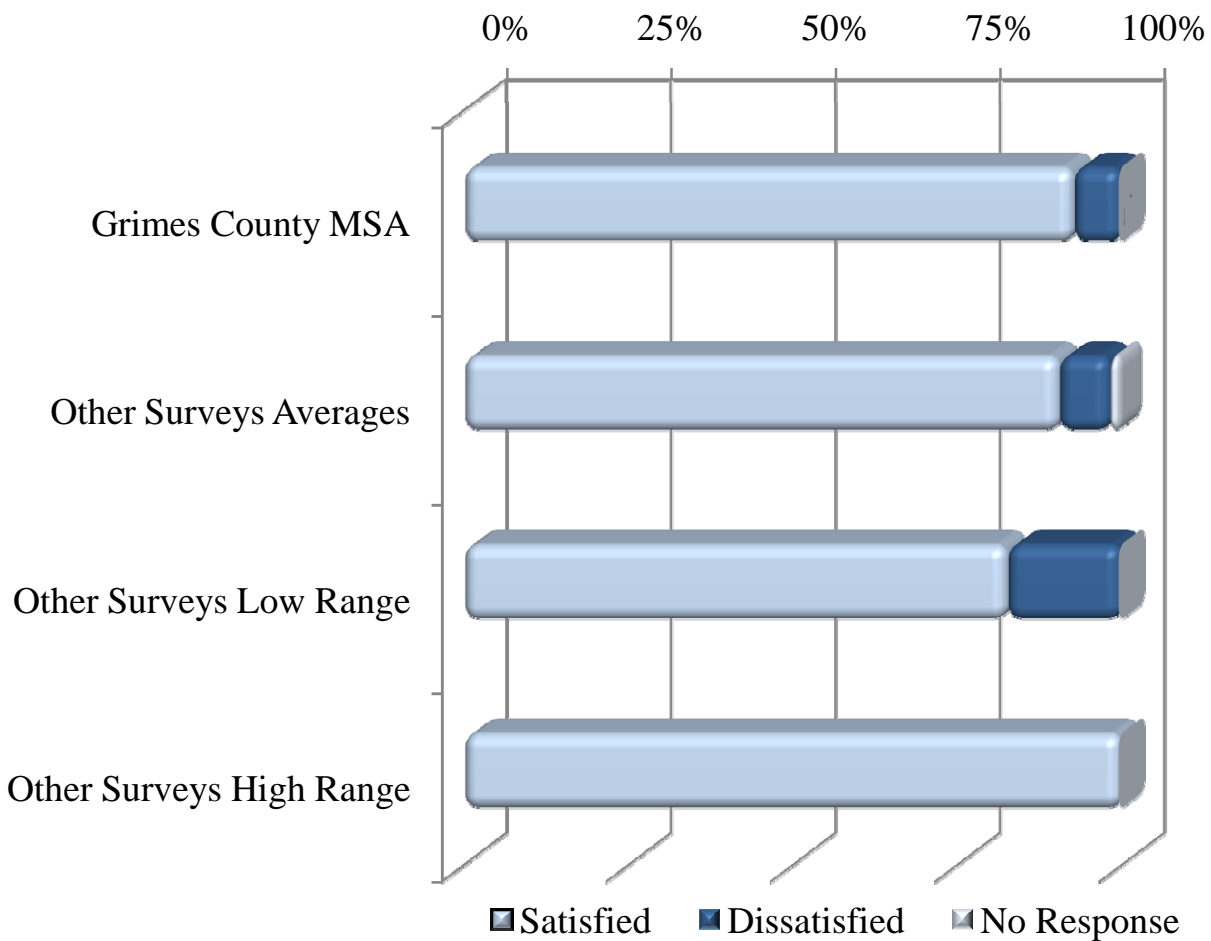
Response Category	No.	Percent
Satisfied	76	92.7%
Dissatisfied	<u>6</u>	<u>7.3%</u>
Total	<u>82</u>	<u>100.0%</u>



Q4b-2. How satisfied were you or someone in your household with the quality of care you received in your medical service area?

Compared to Other Studies

Survey Area	Satisfied	Dissatisfied	No Response
Grimes County MSA	92.7%	7.3%	0.0%
Other Surveys Averages	90.5%	7.8%	1.7%
Other Surveys Low Range	82.6%	17.4%	0.0%
Other Surveys High Range	100.0%	0.0%	0.0%



Q4c-1. Why do you say that you are satisfied with the quality of care in Grimes County?

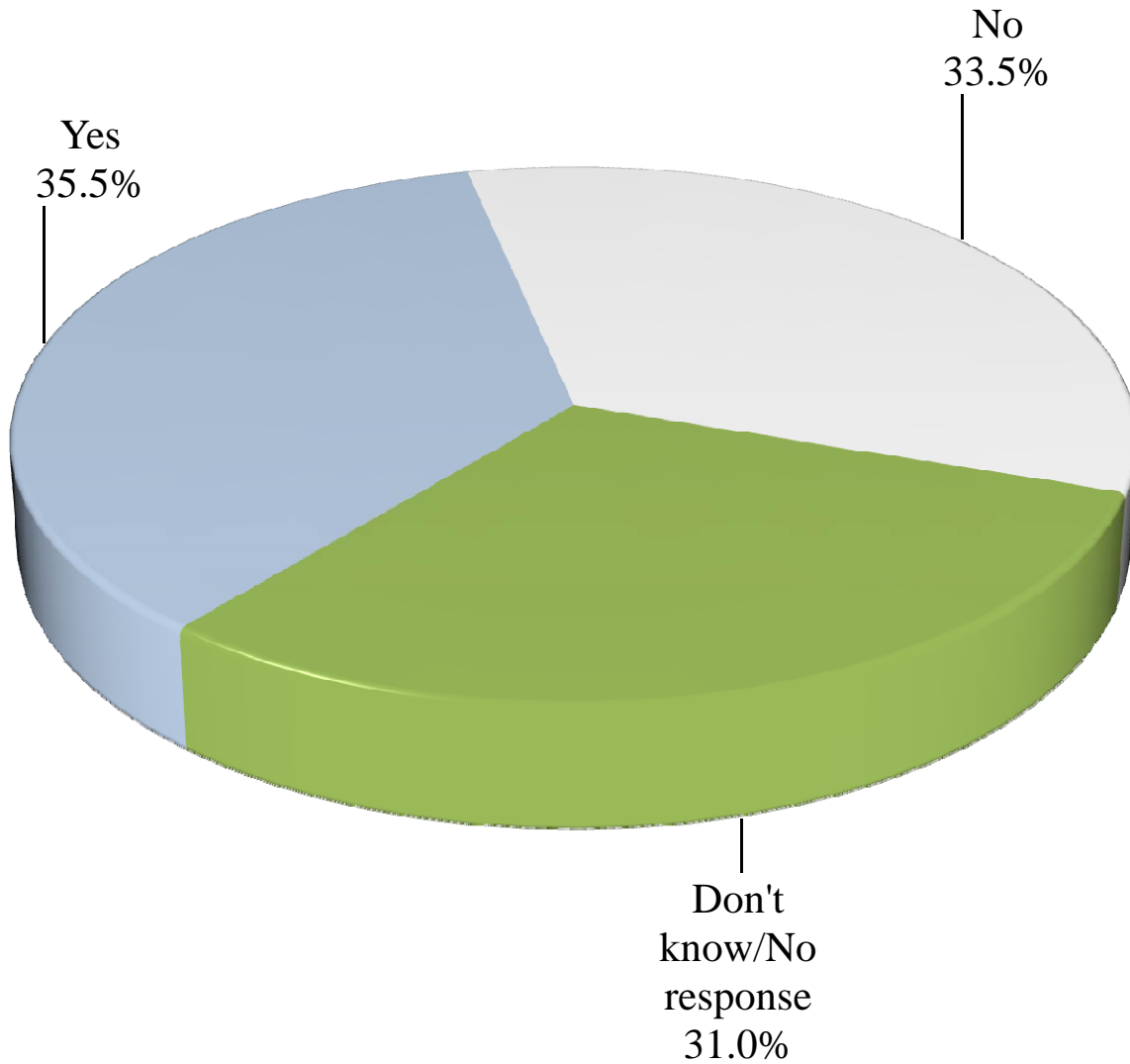
Response Category	No.	Percent
Professional/Caring doctors	28	36.8%
Good service	16	21.1%
Established relationship with doctor	13	17.1%
Met my needs	9	11.8%
Resolved medical problem	7	9.2%
Convenience	1	1.3%
Fast service	1	1.3%
Satisfied, but thought follow-up was lacking	<u>1</u>	<u>1.3%</u>
Total	<u>76</u>	<u>100.0%</u>

Q4c-2. Why do you say that you are dissatisfied with the quality of care in Grimes County?

Response Category	No.	Percent
Poor communication/Medical treatment	2	33.3%
Long wait	2	33.3%
Poor medical treatment	1	16.7%
Old technology	<u>1</u>	<u>16.7%</u>
Total	<u>6</u>	<u>100.0%</u>

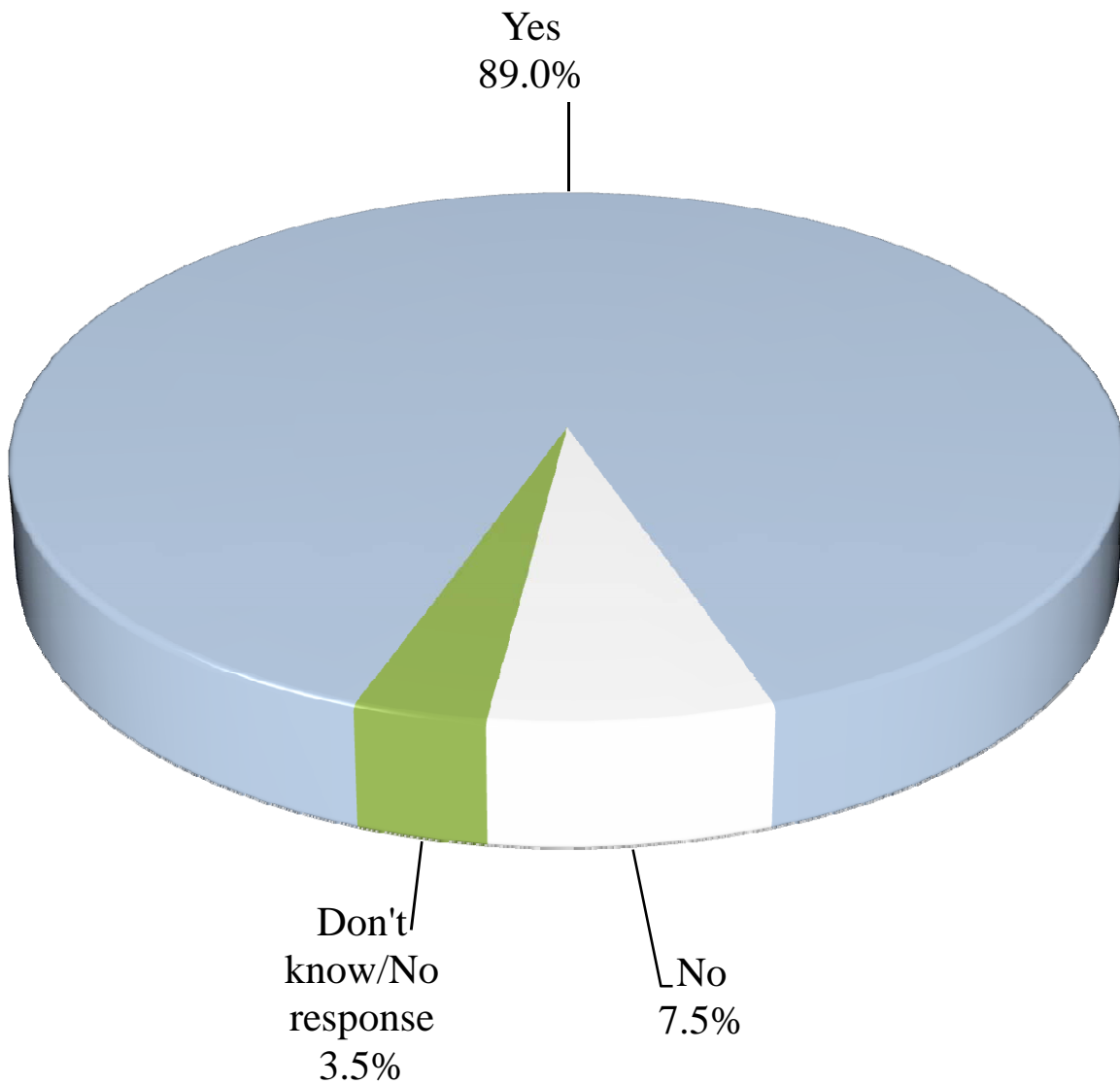
Q5. Do you think there are enough primary care doctors in Grimes County?

Response Category	No.	Percent
Yes	71	35.5%
No	67	33.5%
Don't know/No response	<u>62</u>	<u>31.0%</u>
Total	<u>200</u>	<u>100.0%</u>



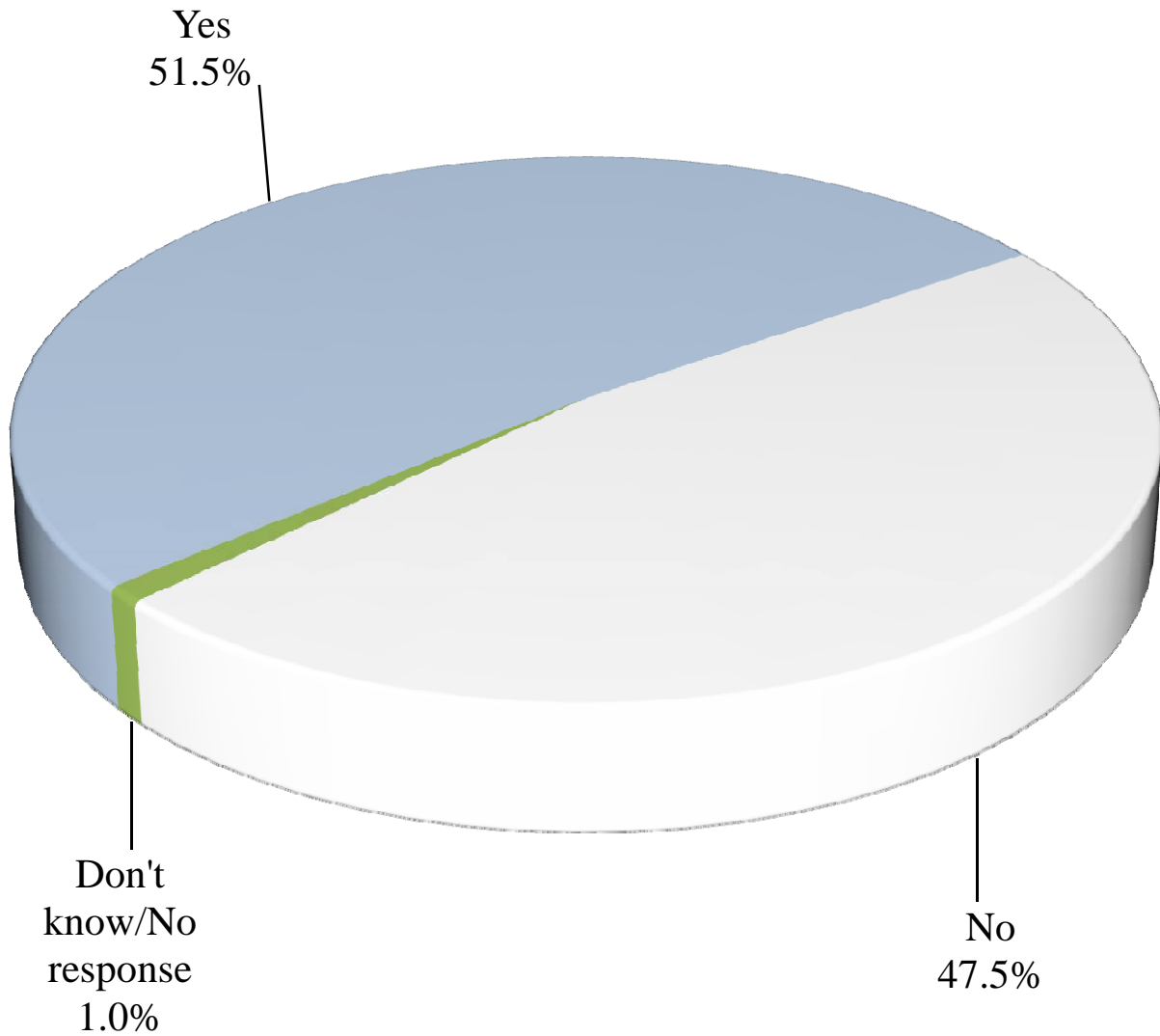
Q6. Are you able to get an appointment with your primary care doctor when you need one?

Response Category	No.	Percent
Yes	178	89.0%
No	15	7.5%
Don't know/No response	7	3.5%
Total	<u>200</u>	<u>100.0%</u>



Q7a. Have you or someone in your household been to a specialist in the past 24 months?

Response Category	No.	Percent
Yes	103	51.5%
No	95	47.5%
Don't know/No response	<u>2</u>	<u>1.0%</u>
Total	<u>200</u>	<u>100.0%</u>



**Q7b-1. What type of specialist have you
or someone in your household been to?**

Type of Specialist	No.	Percent
<i>Top 11 Responses</i>		
Cardiologist	36	25.7%
Orthopedist/Orthopedic Surgeon	24	17.1%
Urologist	11	7.9%
OB/GYN	10	7.1%
Ophthalmologist	10	7.1%
Podiatrist	8	5.7%
Gastroenterologist	6	4.3%
Dermatologist	5	3.6%
Pulmonologist	4	2.9%
Endocrinologist	4	2.9%
Surgeon	4	2.9%
All others	<u>18</u>	<u>12.9%</u>
Total	<u>140</u>	<u>100.0%</u>

Some respondents answered more than once.

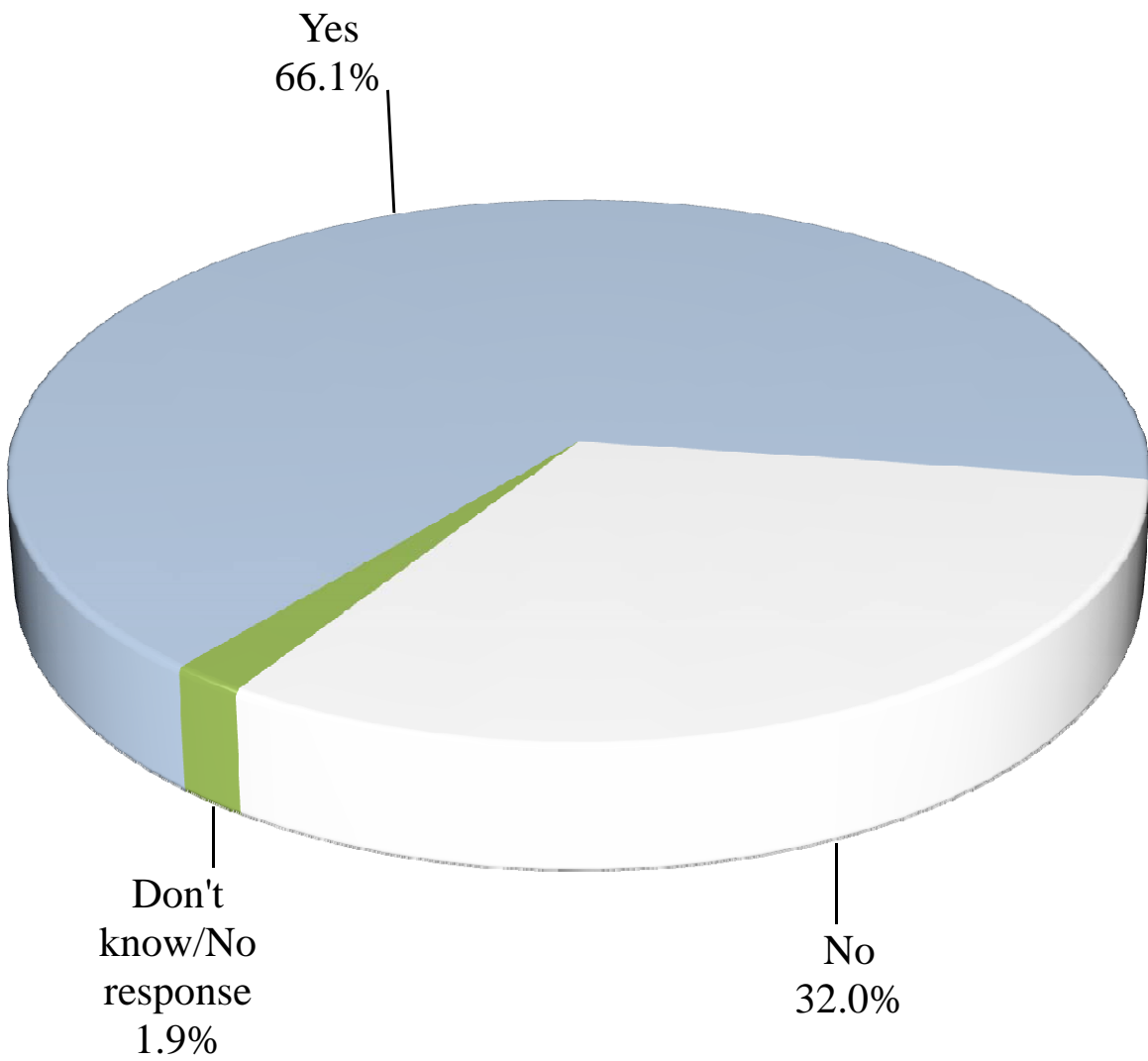
Q7b-2. What type of specialist have you or someone in your household been to and in which city are they located?

Type of Specialist	City	No.	Percent
Cardiologist	Bryan/College Station (27); Conroe (2); Temple (2); Houston (1); Humble (1); Madisonville (1); Navasota (1); Tomball (1)	36	25.7%
Orthopedist/Orthopedic Surgeon	Bryan/College Station (19); Brazos (1); Houston (2); Brenham (1); Harris (1)	24	17.1%
Urologist	Bryan/College Station (7); Houston (2); Conroe (1); Temple (1)	11	7.9%
OB/GYN	Bryan/College Station (8); Houston (1); Victoria (1)	10	7.1%
Ophthalmologist	Bryan/College Station (7); Conroe (1); Houston (1); Temple (1)	10	7.1%
Podiatrist	Bryan/College Station (5); Austin (1); Houston (1); Katy (1)	8	5.7%
Gastroenterologist	Bryan/College Station (6)	6	4.3%
Dermatologist	Bryan/College Station (3); Houston (2)	5	3.6%
Pulmonologist	Bryan/College Station (1); Houston (1); Humble (1); Temple (1)	4	2.9%
Endocrinologist	Bryan/College Station (2); Huntsville (1); Temple (1)	4	2.9%
Surgeon	Houston (4)	4	2.9%
Oncologist	Bryan/College Station (2); Houston (1)	3	2.1%
Rheumatologist	Houston (2); Bryan/College Station (1)	3	2.1%
Internist	Bryan/College Station (2)	2	1.4%
ENT	Bryan/College Station (2)	2	1.4%
Allergist	Conroe (1)	1	0.7%
Geriatrician	Bryan/College Station (1)	1	0.7%
Nephrologist	Bryan/College Station (1)	1	0.7%
Obstetrician	Bryan/College Station (1)	1	0.7%
Optometrist	Temple (1)	1	0.7%
Physical Therapist	Navasota (1)	1	0.7%
Plastic Surgeon	Houston (1)	1	0.7%
Psychiatrist	Bryan/College Station (1)	1	0.7%
Total		<u>140</u>	<u>100.0%</u>

Some respondents answered more than once.

Q7c. Did the specialist request further testing or laboratory work?

Response Category	No.	Percent
Yes	68	66.1%
No	33	32.0%
Don't know/No response	<u>2</u>	<u>1.9%</u>
Total	<u>103</u>	<u>100.0%</u>



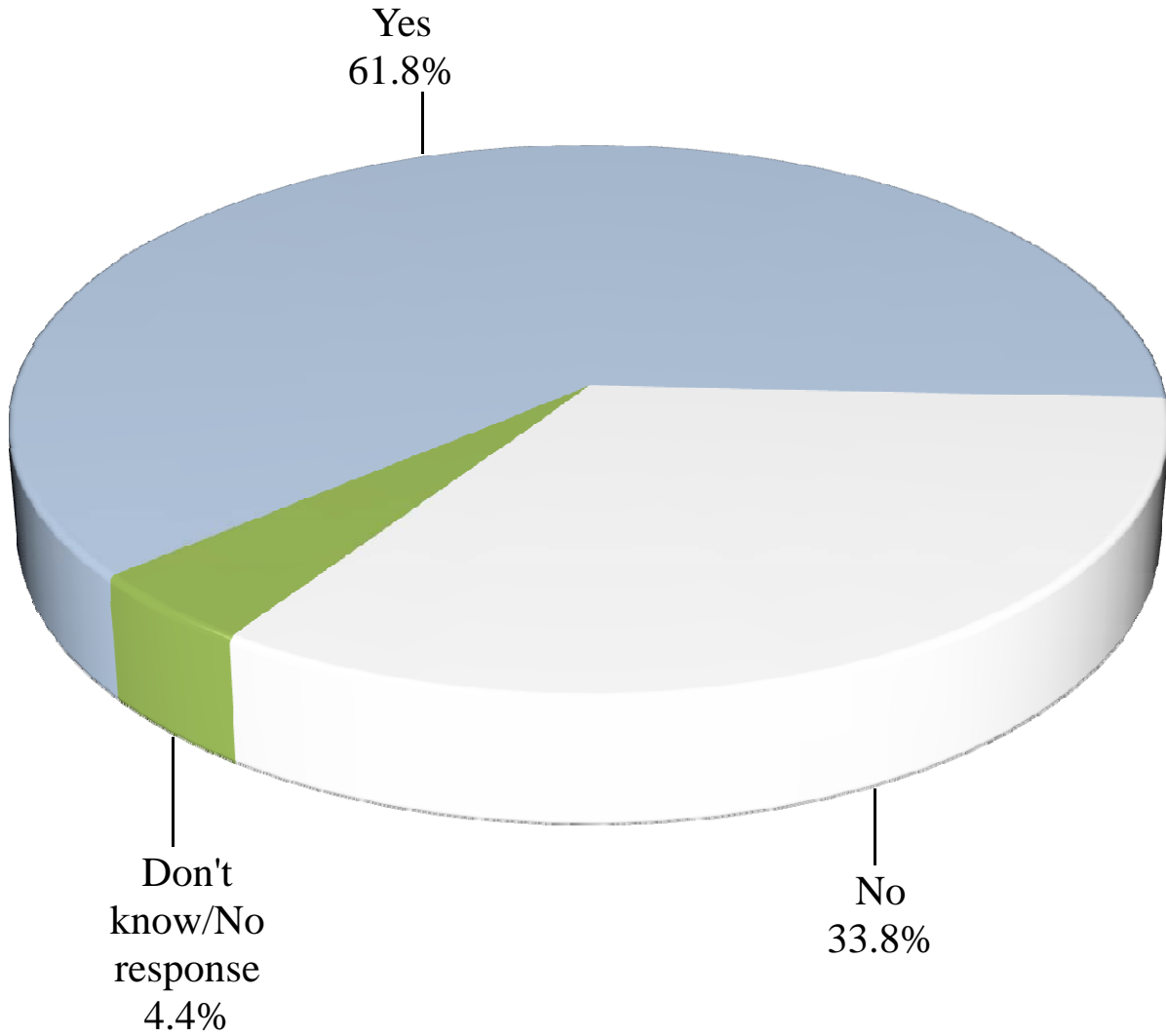
Q7d. In which city were the tests or laboratory work conducted?

Response Category	No.	Percent
Bryan/College Station	45	58.4%
Houston	11	14.3%
Navasota	10	13.0%
Conroe	3	3.9%
Temple	3	3.9%
Huntsville	2	2.6%
Madisonville	1	1.3%
Humble	1	1.3%
Victoria	<u>1</u>	<u>1.3%</u>
Total	<u>77</u>	<u>100.0%</u>

Some respondents answered more than once.

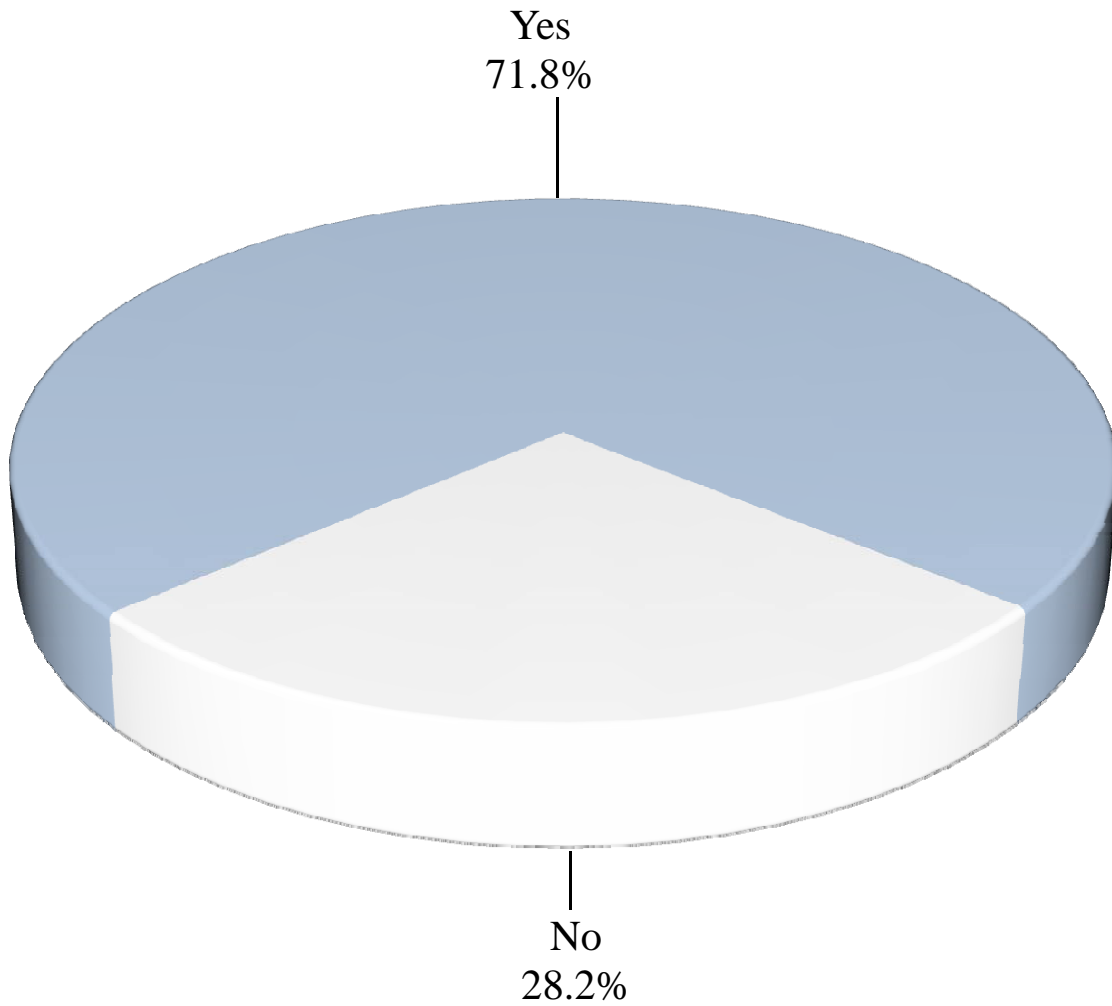
Q7e. Are you aware that you can have your tests and/or laboratory work performed in Navasota regardless of the location of your specialist?

Response Category	No.	Percent
Yes	42	61.8%
No	23	33.8%
Don't know/No response	<u>3</u>	<u>4.4%</u>
Total	<u>68</u>	<u>100.0%</u>



Q7f. Did the specialist prescribe medication(s)?

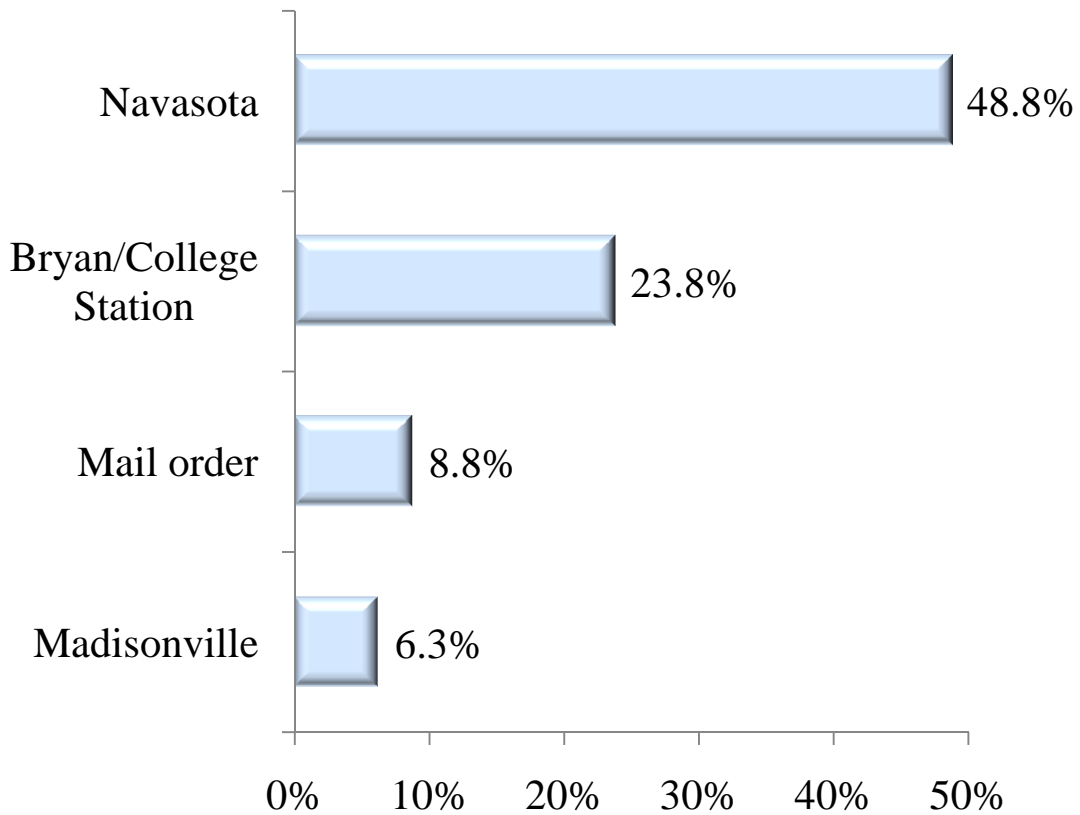
Response Category	No.	Percent
Yes	74	71.8%
No	<u>29</u>	<u>28.2%</u>
Total	<u>103</u>	<u>100.0%</u>



Q7g. In which city was the pharmacy located that filled your prescription(s)? Or did you use mail-order?

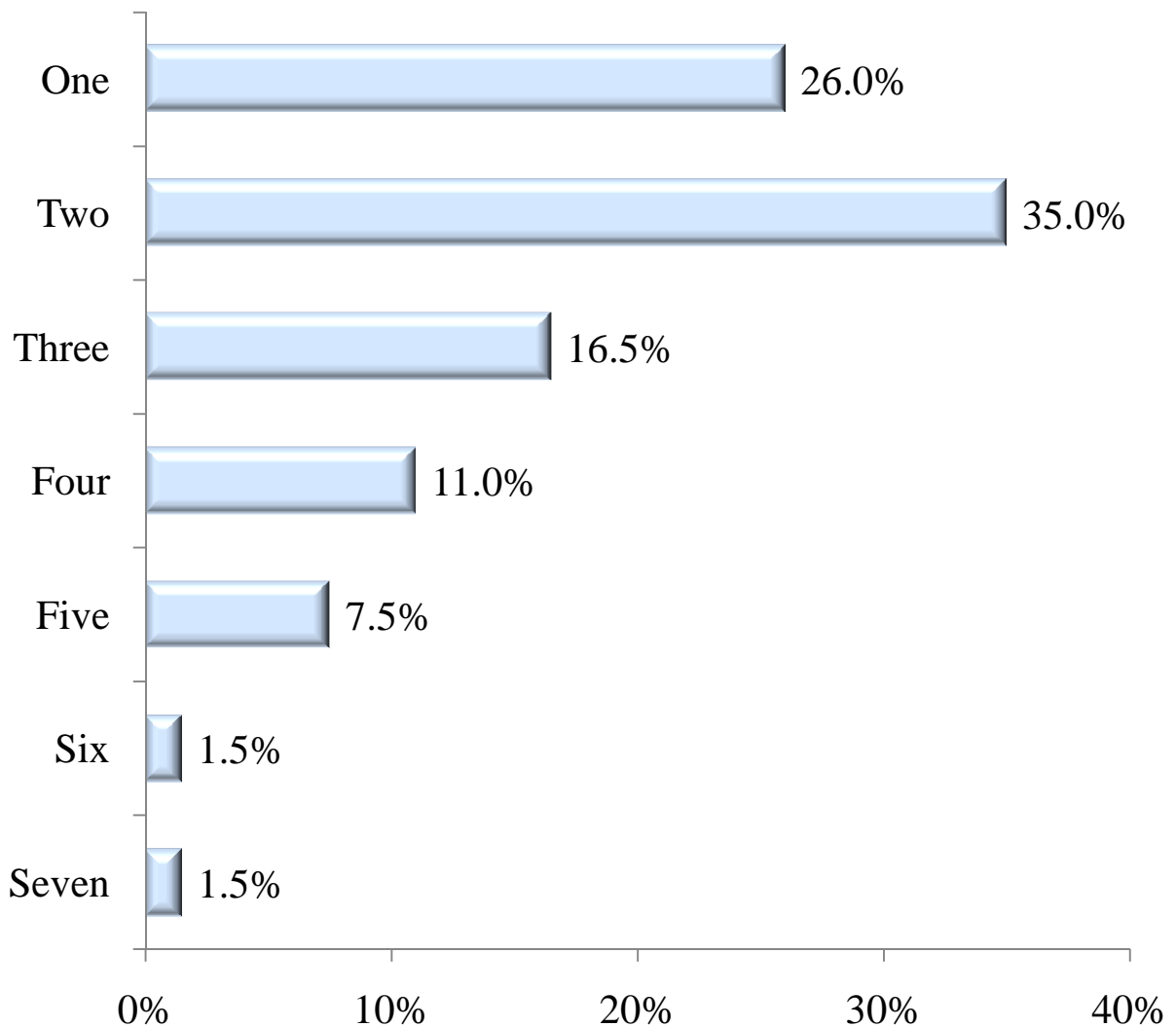
Response Category	No.	Percent
Navasota	39	48.8%
Bryan/College Station	19	23.8%
Mail order	7	8.8%
Madisonville	5	6.3%
Brenham	3	3.8%
Huntsville	3	3.8%
Montgomery	2	2.5%
Tomball	1	1.3%
Houston	1	1.3%
Total	<u>80</u>	<u>100.0%</u>

Some respondents answered more than once.



Q8. How many people live in your household?

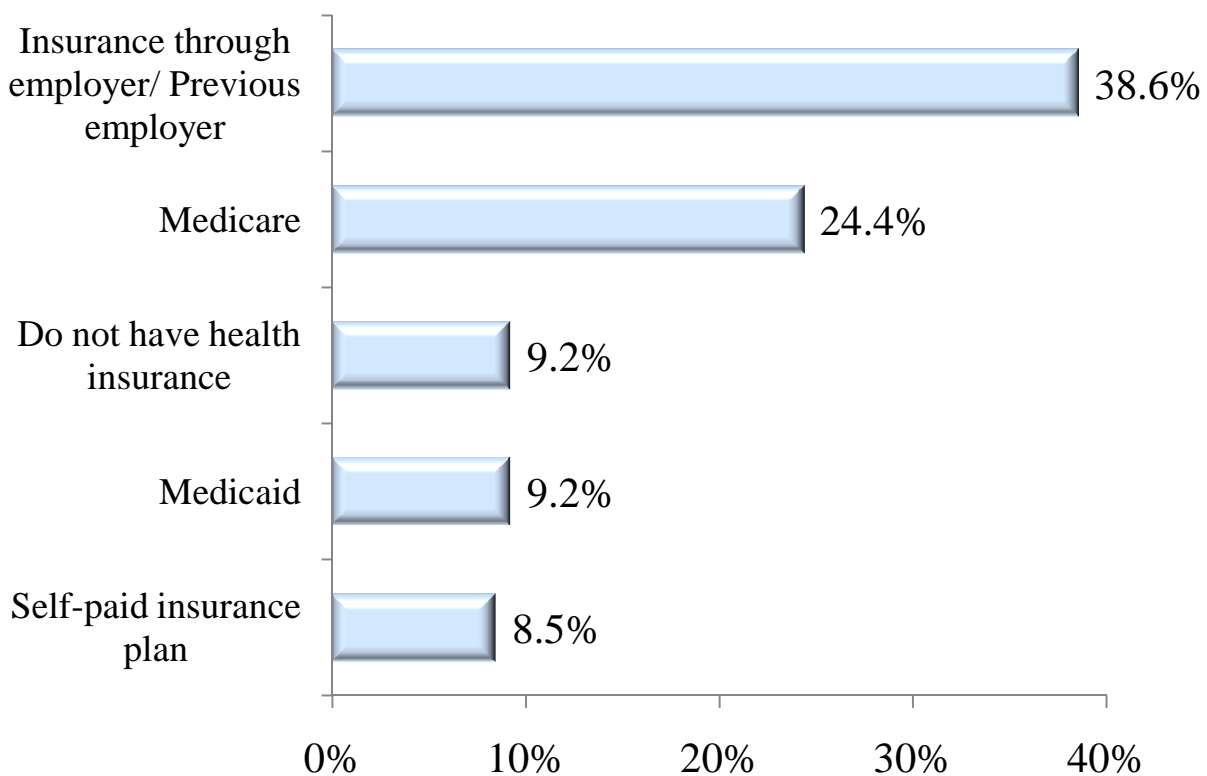
Response Category	No.	Percent
One	52	26.0%
Two	70	35.0%
Three	33	16.5%
Four	22	11.0%
Five	15	7.5%
Six	3	1.5%
Seven	3	1.5%
Don't know/No response	<u>2</u>	<u>1.0%</u>
Total	<u>200</u>	<u>100.0%</u>



Q9a. What type of health insurance covers you and your household members?

Response Category	You (the Respondent)		Household Members		Combined	
	No.	Percent	No.	Percent	No.	Percent
Insurance through employer/ Previous employer	84	35.9%	71	42.3%	155	38.6%
Medicare	67	28.6%	31	18.5%	98	24.4%
Do not have health insurance	20	8.5%	17	10.1%	37	9.2%
Medicaid	19	8.1%	18	10.7%	37	9.2%
Self-paid insurance plan	17	7.3%	17	10.1%	34	8.5%
Medicare Part D (Prescriptions)	10	4.3%	5	3.0%	15	3.7%
Medicare supplement (Private pay)	9	3.8%	2	1.2%	11	2.7%
VA benefits	6	2.6%	4	2.4%	10	2.5%
CHIPS	1	0.4%	2	1.2%	3	0.7%
Medicare Advantage (Private pay)	<u>1</u>	<u>0.4%</u>	<u>1</u>	<u>0.6%</u>	<u>2</u>	<u>0.5%</u>
Total	<u>234</u>	<u>100.0%</u>	<u>168</u>	<u>100.0%</u>	<u>402</u>	<u>100.0%</u>

Some respondents answered more than once.

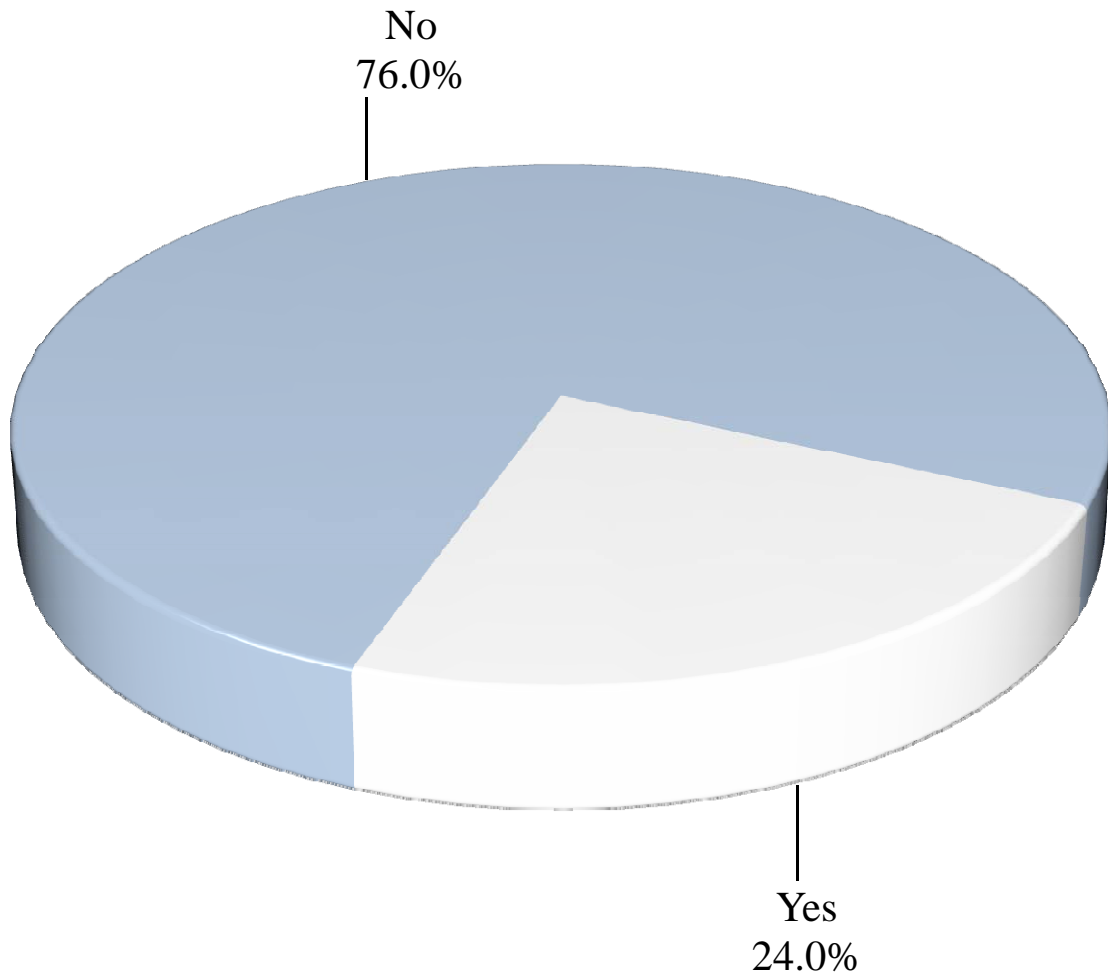


Q9b. Which insurance carrier(s) cover you (the respondent) or other household members?

Response Category	No.	Percent
Blue Cross/Blue Shield	50	49.0%
Scott & White	22	21.6%
Aetna	5	4.9%
United Healthcare	5	4.9%
Humana	3	2.9%
Cigna	3	2.9%
Mega Life	2	2.0%
Aggressive	1	1.0%
City of Austin	1	1.0%
Companion	1	1.0%
Golden Rule	1	1.0%
Great West	1	1.0%
Intrust	1	1.0%
Physicians Mutual	1	1.0%
State Farm Insurance	1	1.0%
Sterling	1	1.0%
Texas True Choice	1	1.0%
UNICARE	1	1.0%
Western Teamsters	<u>1</u>	<u>1.0%</u>
Total	<u>102</u>	<u>100.0%</u>

Q10. Have you or someone in your household used the non-emergency services of a hospital in the past 24 months?

Response Category	No.	Percent
No	152	76.0%
Yes	<u>48</u>	<u>24.0%</u>
Total	<u>200</u>	<u>100.0%</u>



Q11. At which hospital(s) were services received?

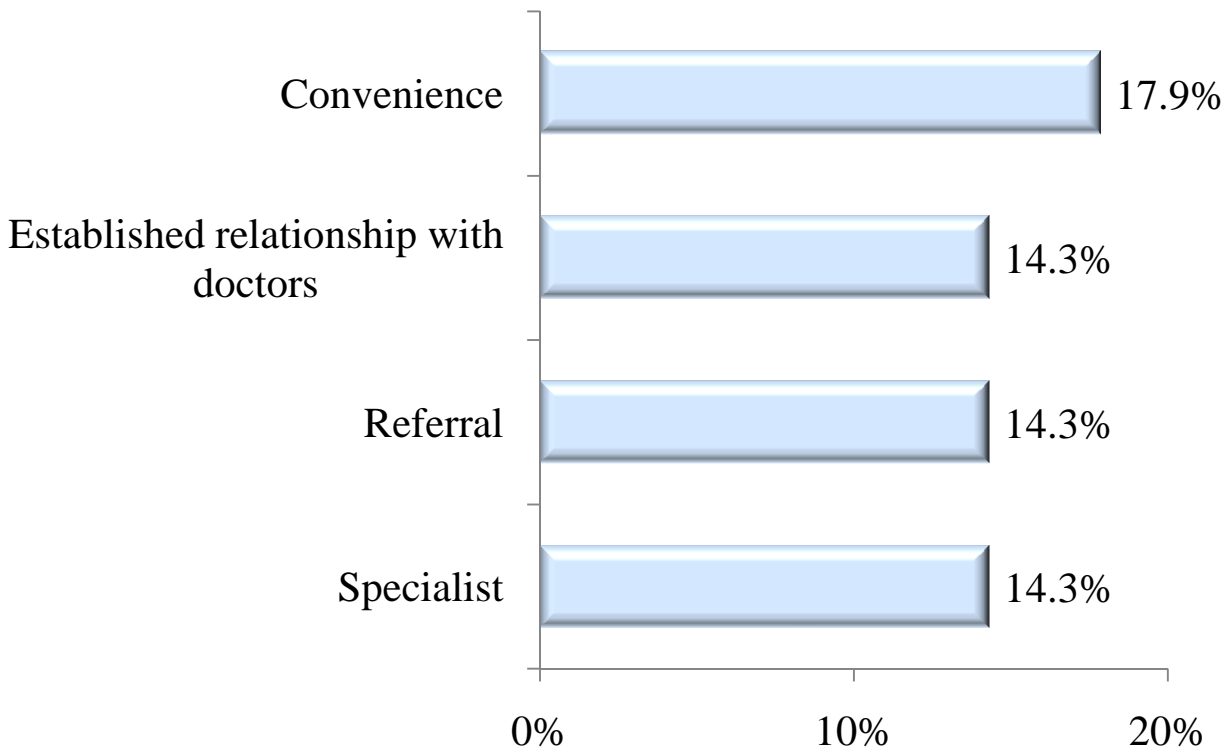
Response Category	Location	No.	Percent
Grimes St. Joseph Health Center	Navasota	21	42.0%
College Station Medical Center	College Station	13	26.0%
St. Joseph Regional Health System	Bryan	7	14.0%
Madison St. Joseph Health Center	Madisonville	2	4.0%
Care Plus Medical Center	College Station	1	2.0%
Huntsville Memorial Hospital	Huntsville	1	2.0%
Katy Memorial Hospital	Katy	1	2.0%
M.D. Anderson	Houston	1	2.0%
Scott & White Clinic	Temple	1	2.0%
Tomball Regional Hospital	Tomball	1	2.0%
Veterans Hospital	Conroe	1	2.0%
Total		<u>50</u>	<u>100.0%</u>

Some respondents answered more than once.

Q12. You mentioned that you or someone in your household received care at a hospital other than Grimes St. Joseph Health Center. Why did you or your family member choose this/these hospital(s)?

Response Category	No.	Percent
Convenience	5	17.9%
Established relationship with doctors	4	14.3%
Referral	4	14.3%
Specialist	4	14.3%
Medical treatment	3	10.7%
Work at other hospital	3	10.7%
Insurance	2	7.1%
Better service/Medical treatment	2	7.1%
Ambulance	1	3.6%
Total	<u>28</u>	<u>100.0%</u>

Some respondents answered more than once.



Q13a. What hospital services were used there?

Response Category	All Categories	Percent	Major Categories	Percent
Inpatient Services			12	26.7%
Inpatient surgery	7	15.6%		
Inpatient stay	5	11.1%		
Dietary services/counseling	7	15.6%	7	15.6%
Medical Imaging			6	13.3%
X-Ray	4	8.9%		
CT scan	1	2.2%		
MRI	1	2.2%		
Outpatient surgery	5	11.1%	5	11.1%
Specialty doctor	5	11.1%	5	11.1%
Emergency room	3	6.7%	3	6.7%
Birthing services	2	4.4%	2	4.4%
Laboratory (blood) tests	2	4.4%	2	4.4%
Mental health/Substance abuse	1	2.2%	1	2.2%
Oncology	1	2.2%	1	2.2%
Respiratory therapy	<u>1</u>	<u>2.2%</u>	<u>1</u>	<u>2.2%</u>
Total	<u>45</u>	<u>100.0%</u>	<u>45</u>	<u>100.0%</u>

Some respondents answered more than once.

Q13b. Why did you use a hospital outside of Grimes County?

Response Category	No.	Percent
Closer/Convenient location	10	29.4%
Better quality of providers	8	23.5%
Approved provider for insurance	7	20.6%
Specialist	5	14.7%
Have used for years/Personal relationship	3	8.8%
Nicer facilities	<u>1</u>	<u>2.9%</u>
Total	<u>34</u>	<u>100.0%</u>

Some respondents answered more than once.

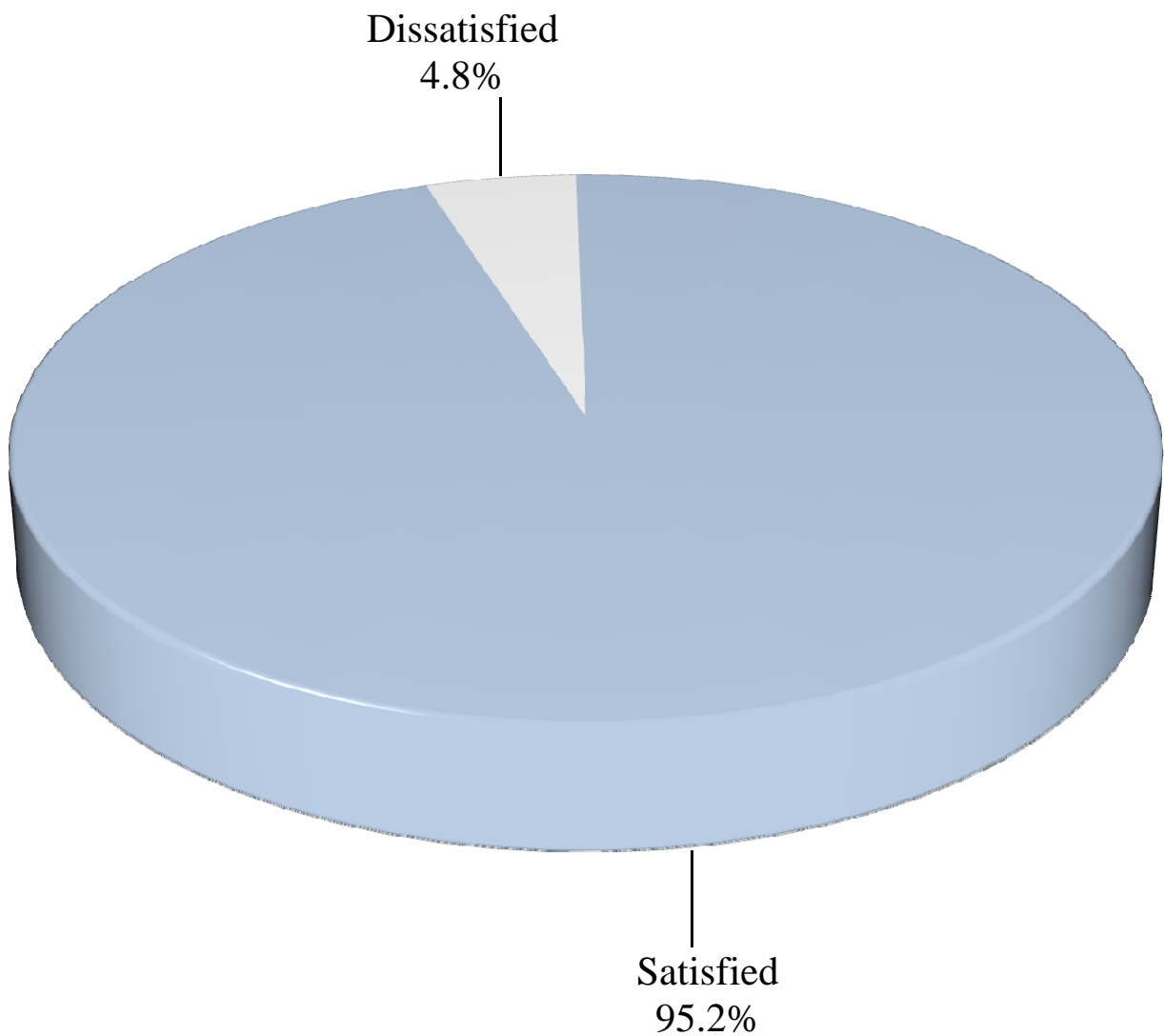
**Q14. What hospital services were used at
Grimes St. Joseph Health Center?**

Response Category	All Categories	Percent	Major Categories	Percent
Emergency room	10	38.5%	10	38.5%
Laboratory (blood) tests	3	11.5%	3	11.5%
Inpatient surgery	2	7.7%	2	7.7%
Outpatient surgery	2	7.7%	2	7.7%
Medical Imaging		0.0%	4	15.4%
X-Ray	2	7.7%		
CT scan	2	7.7%		
Physical therapy	2	7.7%	2	7.7%
Cardiologist	1	3.8%	1	3.8%
Colonoscopy	1	3.8%	1	3.8%
Routine check-up	1	3.8%	1	3.8%
Total	<u>26</u>	<u>100.0%</u>	<u>26</u>	<u>100.0%</u>

Some respondents answered more than once.

Q15a. How satisfied were you or someone in your household with the services you received at Grimes St. Joseph Health Center? Would you say that you were...

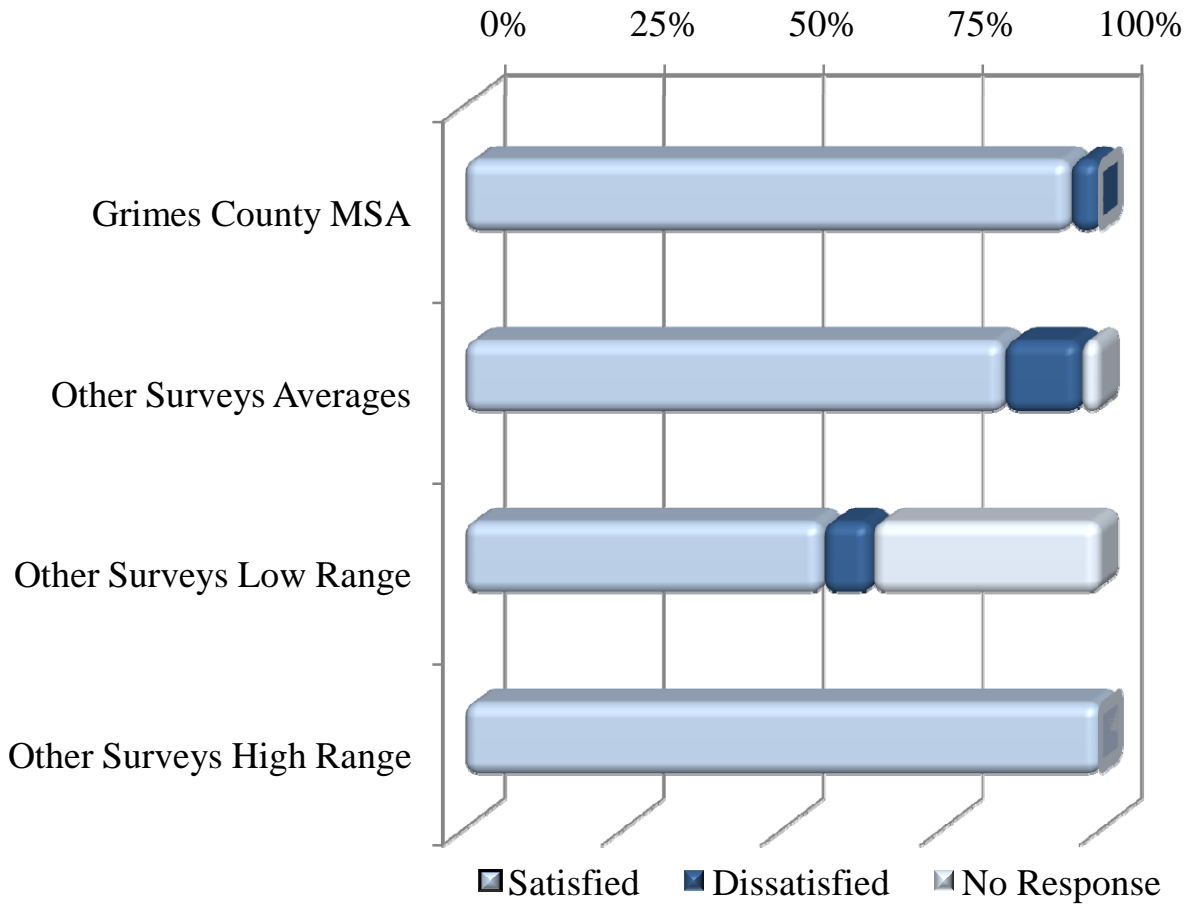
Response Category	No.	Percent
Satisfied	20	95.2%
Dissatisfied	<u>1</u>	<u>4.8%</u>
Total	<u>21</u>	<u>100.0%</u>



Q15a-2. How satisfied were you or someone in your household with the services you received at your local hospital?

Compared to Other Studies

Survey Area	Satisfied	Dissatisfied	No Response
Grimes County MSA	95.2%	4.8%	0.0%
Other Surveys Averages	84.8%	12.1%	3.1%
Other Surveys Low Range	56.4%	7.7%	35.9%
Other Surveys High Range	100.0%	0.0%	0.0%



Q15b-1. Why do you say that you are satisfied with the services received at Grimes St. Joseph Health Center?

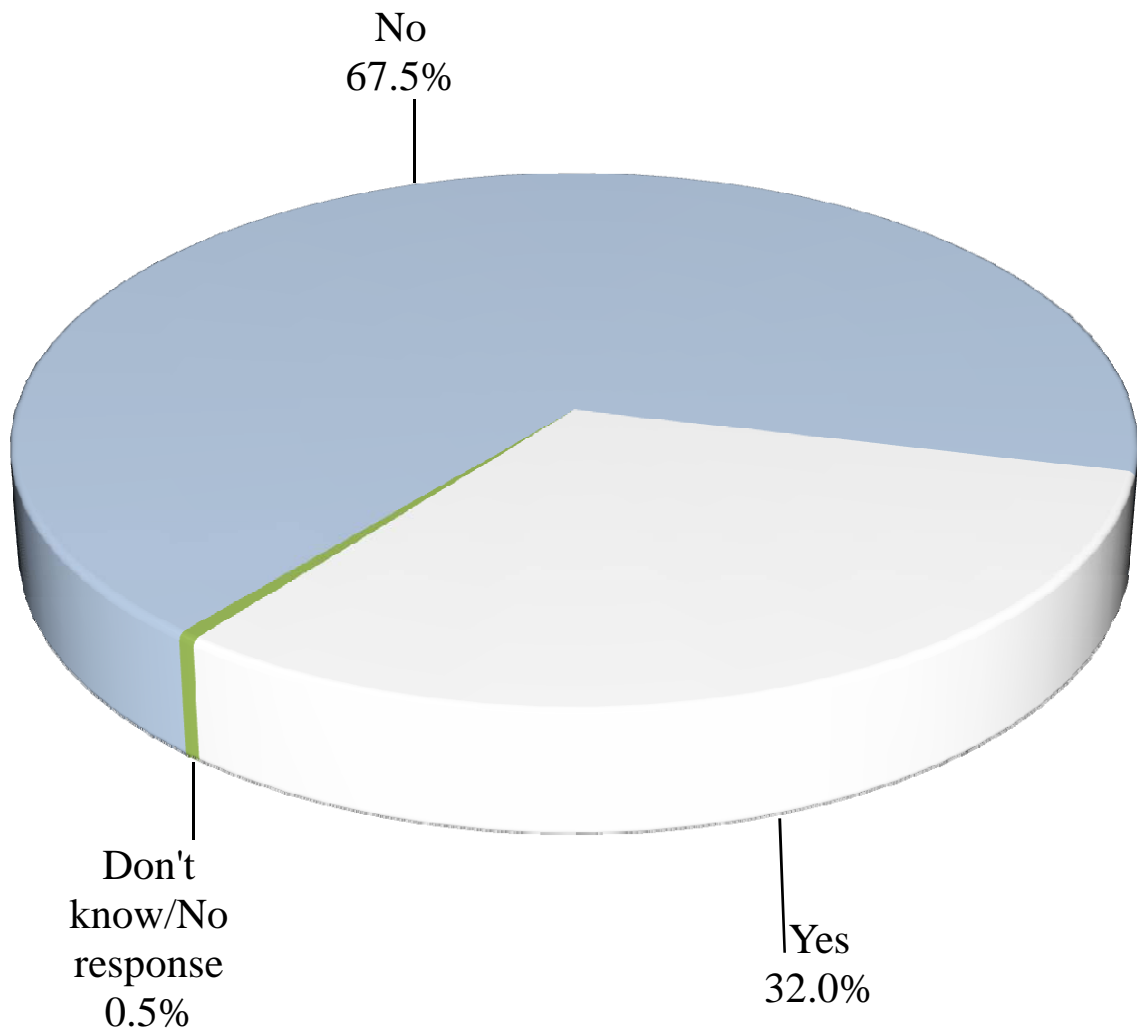
Response	No.	Percent
Good service	9	45.0%
Short wait	7	35.0%
Resolved medical problem	2	10.0%
Staff was polite	<u>2</u>	<u>10.0%</u>
Total	<u>20</u>	<u>100.0%</u>

Q15b-2. Why do you say that you are dissatisfied with the services you received at Grimes St. Joseph Health Center?

Response	No.	Percent
Cost was expensive	<u>1</u>	<u>100.0%</u>
Total	<u>1</u>	<u>100.0%</u>

Q16. Have you or someone in your household used emergency room services in the past 24 months?

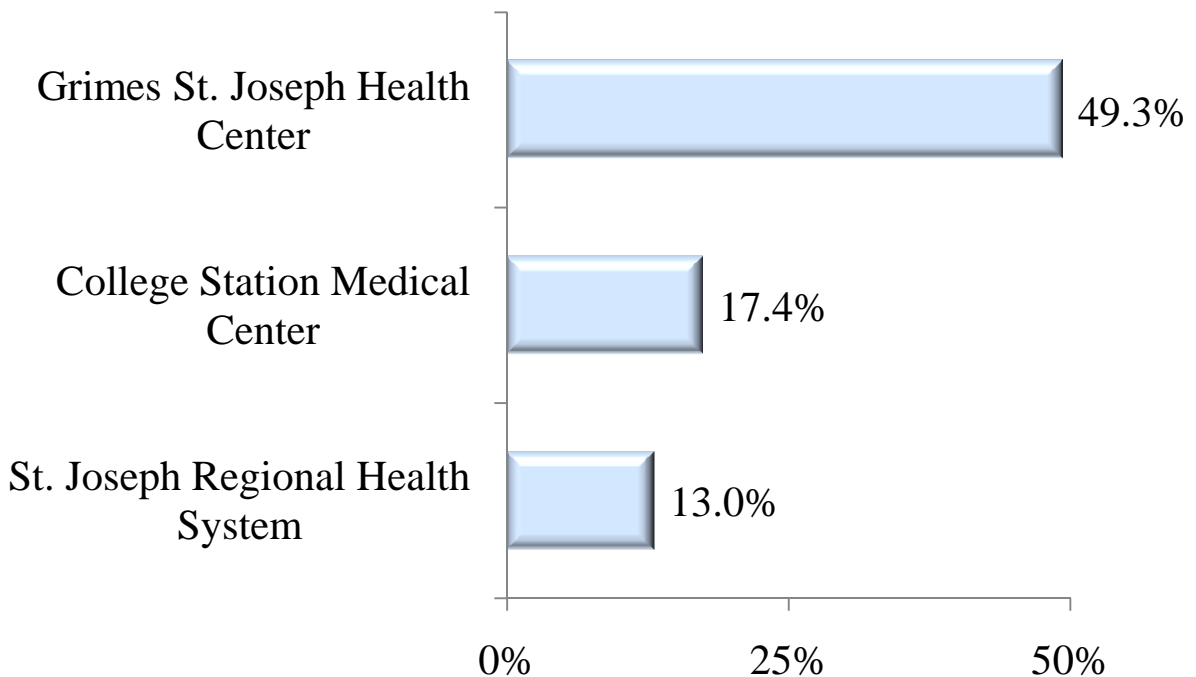
Response	No.	Percent
No	135	67.5%
Yes	64	32.0%
Don't know/No response	<u>1</u>	<u>0.5%</u>
Total	<u>200</u>	<u>100.0%</u>



Q17. At which hospital(s) were emergency room services received?

Response Category	Location	No.	Percent
Grimes St. Joseph Health Center	Navasota	34	49.3%
College Station Medical Center	College Station	12	17.4%
St. Joseph Regional Health System	Bryan	9	13.0%
Huntsville Memorial Hospital	Huntsville	4	5.8%
Madison St. Joseph Health Center	Madisonville	3	4.3%
Tomball Regional Medical Center	Tomball	3	4.3%
Scott & White	Temple	2	2.9%
Trinity Hospital	Brenham	1	1.4%
Don't know/No response		<u>1</u>	<u>1.4%</u>
Total		<u>69</u>	<u>100.0%</u>

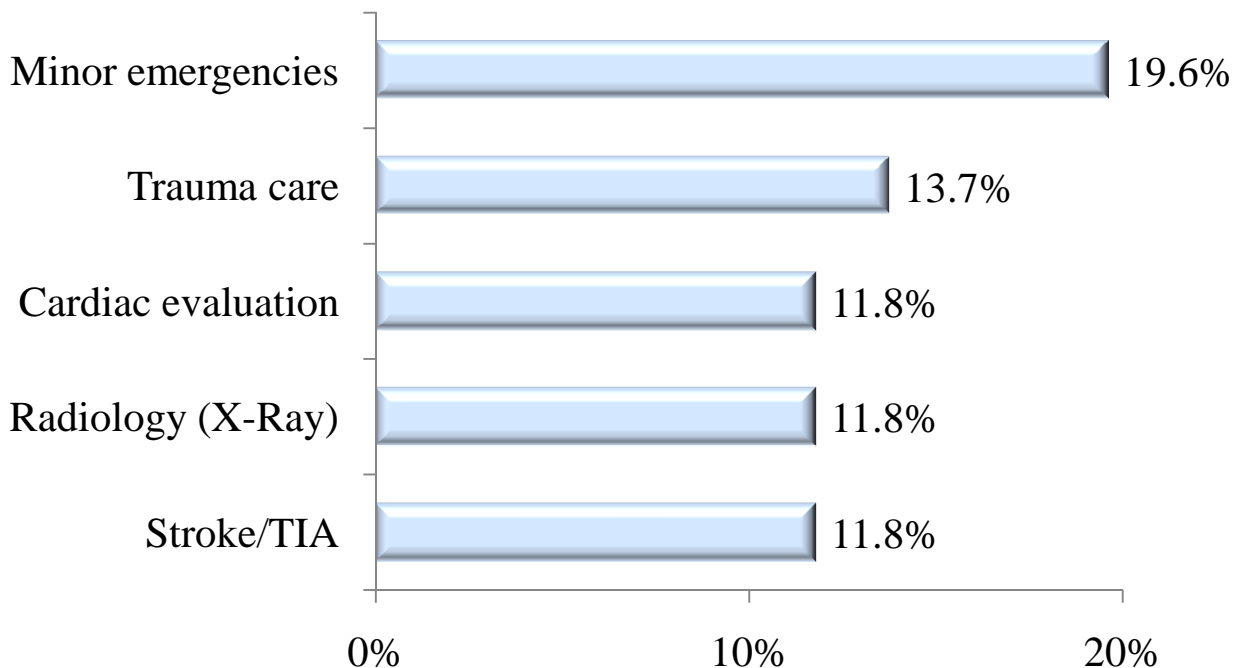
Some respondents answered more than once.



Q18. You mentioned that you or someone in your household received emergency room care at a hospital other than Grimes St. Joseph Health Center. What type of emergency room services have you or someone in your household used in the past 24 months at this hospital?

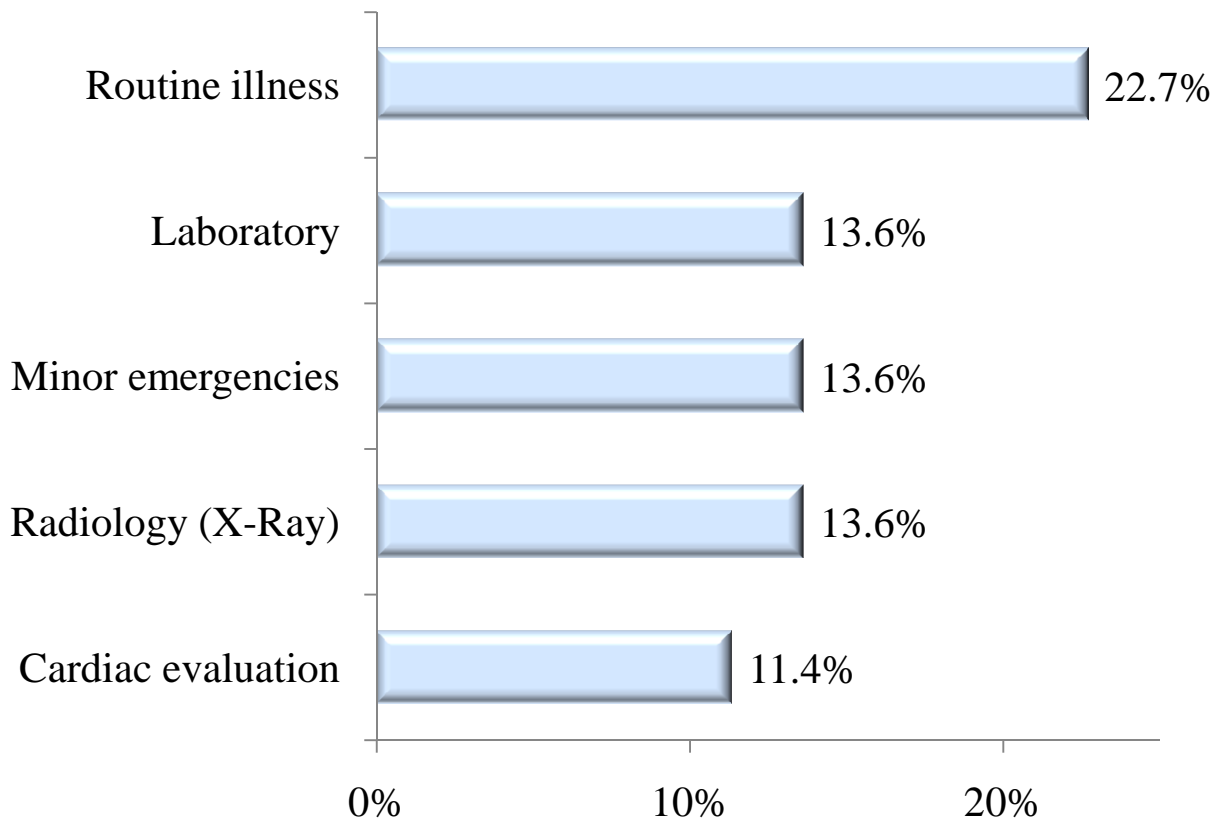
Response Category	No.	Percent
Minor emergencies	10	19.6%
Trauma care	7	13.7%
Cardiac evaluation	6	11.8%
Radiology (X-Ray)	6	11.8%
Stroke/TIA	6	11.8%
Laboratory	5	9.8%
Urgent care	3	5.9%
MVA (motor vehicle accident)	2	3.9%
Orthopedic care	2	3.9%
Routine illness	2	3.9%
MRI	1	2.0%
Respiratory distress/Breathing difficulties	1	2.0%
Total	<u>51</u>	<u>100.0%</u>

Some respondents answered more than once.



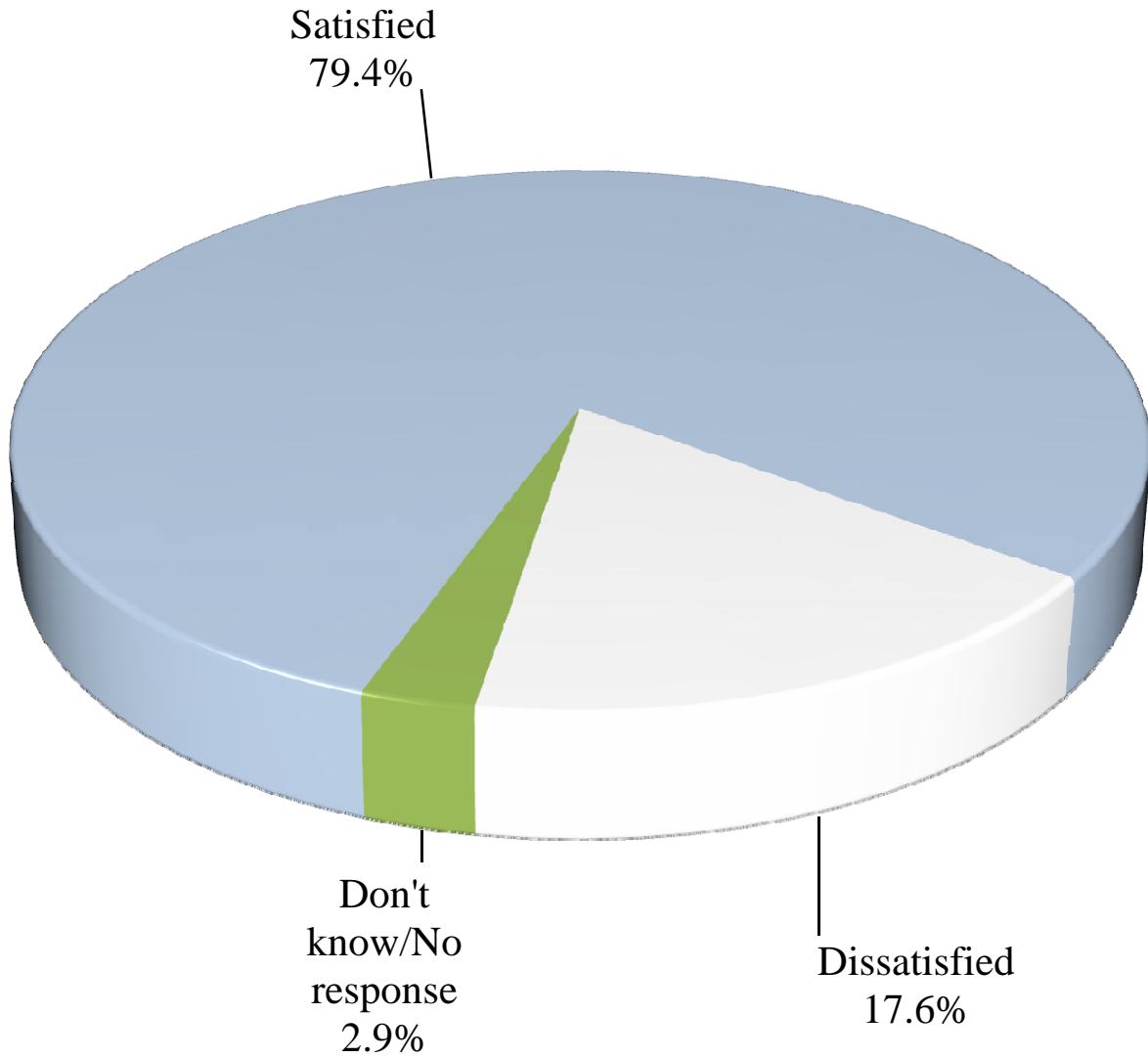
Q19. What type of emergency room services have you or someone in your household used in the past 24 months at Grimes St. Joseph Health Center?

Response Category	No.	Percent
Routine illness	10	22.7%
Laboratory	6	13.6%
Minor emergencies	6	13.6%
Radiology (X-Ray)	6	13.6%
Cardiac evaluation	5	11.4%
Trauma care	4	9.1%
Urgent care	3	6.8%
Respiratory distress/Breathing difficulties	1	2.3%
Mental health	1	2.3%
Stroke/TIA	1	2.3%
Don't know/No response	1	2.3%
Total	<u>44</u>	<u>100.0%</u>



Q20a. How satisfied were you or someone in your household with the services you received at the emergency room Grimes St. Joseph Health Center? Would you say you were...

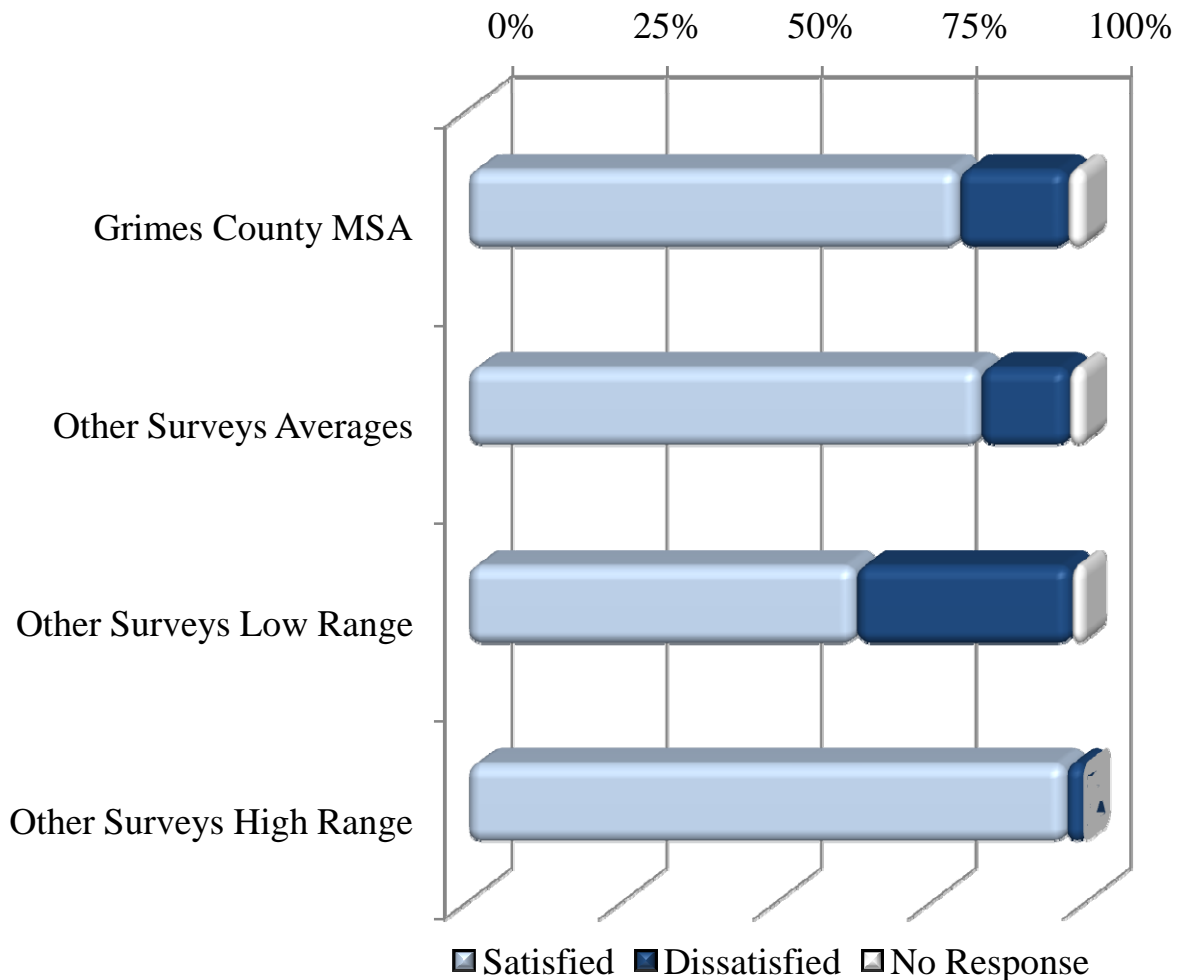
Response Category	No.	Percent
Satisfied	27	79.4%
Dissatisfied	6	17.6%
Don't know/No response	1	2.9%
Total	<u>34</u>	<u>100.0%</u>



Q20a-2. How satisfied were you or someone in your household with the services you received in the emergency room in your local hospital?

Compared to Other Studies

Survey Area	Satisfied	Dissatisfied	No Response
Grimes County MSA	79.4%	17.6%	2.9%
Other Surveys Averages	82.9%	14.4%	2.7%
Other Surveys Low Range	62.8%	34.9%	2.3%
Other Surveys High Range	96.8%	3.2%	0.0%



Q20b-1. Why do you say that you are satisfied with the services received at the emergency room Grimes St. Joseph Health Center?

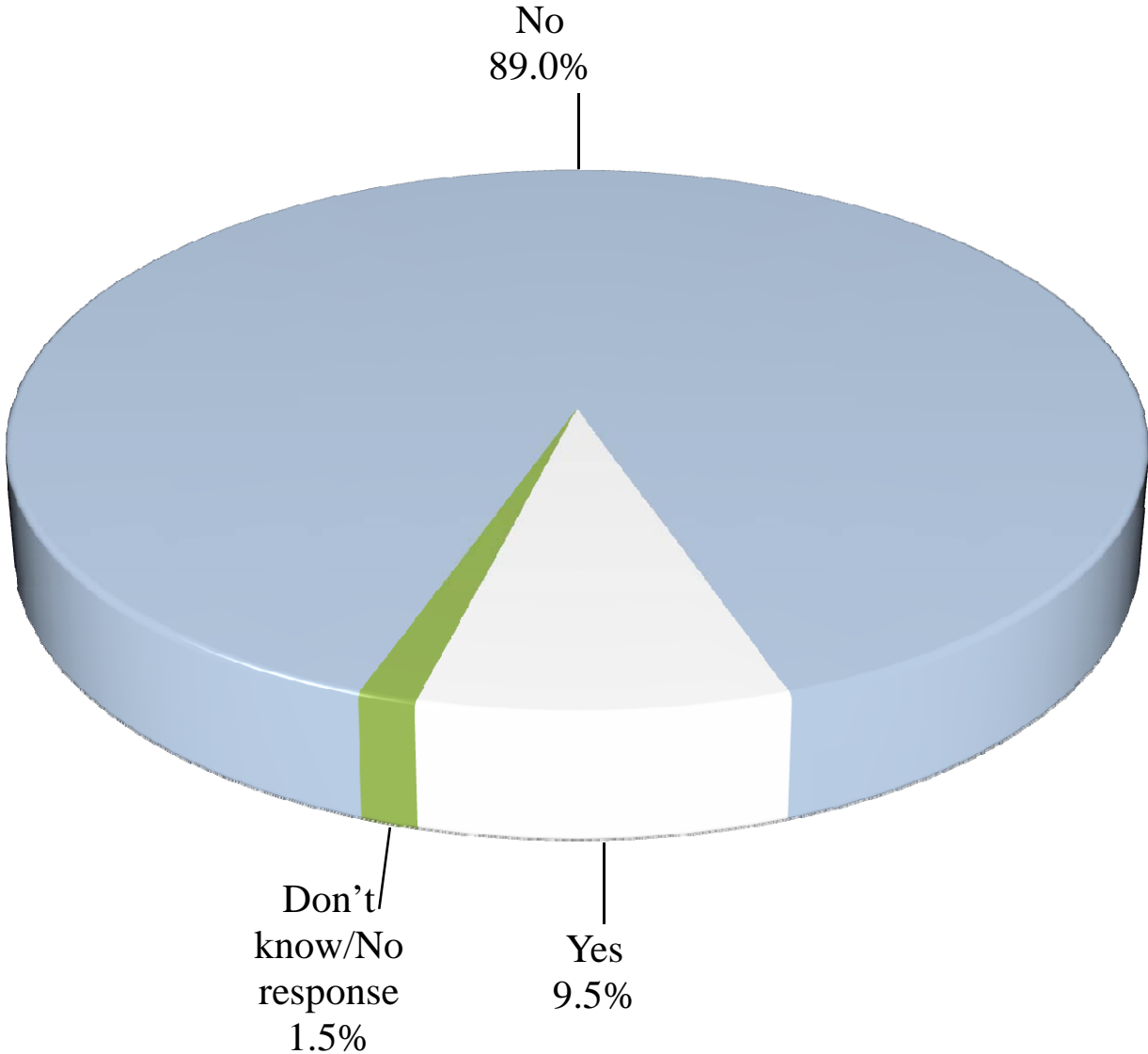
Response	No.	Percent
Good treatment/care	8	29.6%
Short waiting time	6	22.2%
Satisfied, no reason given	6	22.2%
Satisfied with doctors/physician assistants/nurses	4	14.8%
Resolved medical issue(s)	<u>3</u>	<u>11.1%</u>
Total	<u>27</u>	<u>100.0%</u>

Q20b-2. Why do you say that you are dissatisfied with the services received at the emergency room in this hospital?

Response	No.	Percent
Too expensive	3	50.0%
Bad treatment/care	2	33.3%
Did not resolve medical issue	<u>1</u>	<u>16.7%</u>
Total	<u>6</u>	<u>100.0%</u>

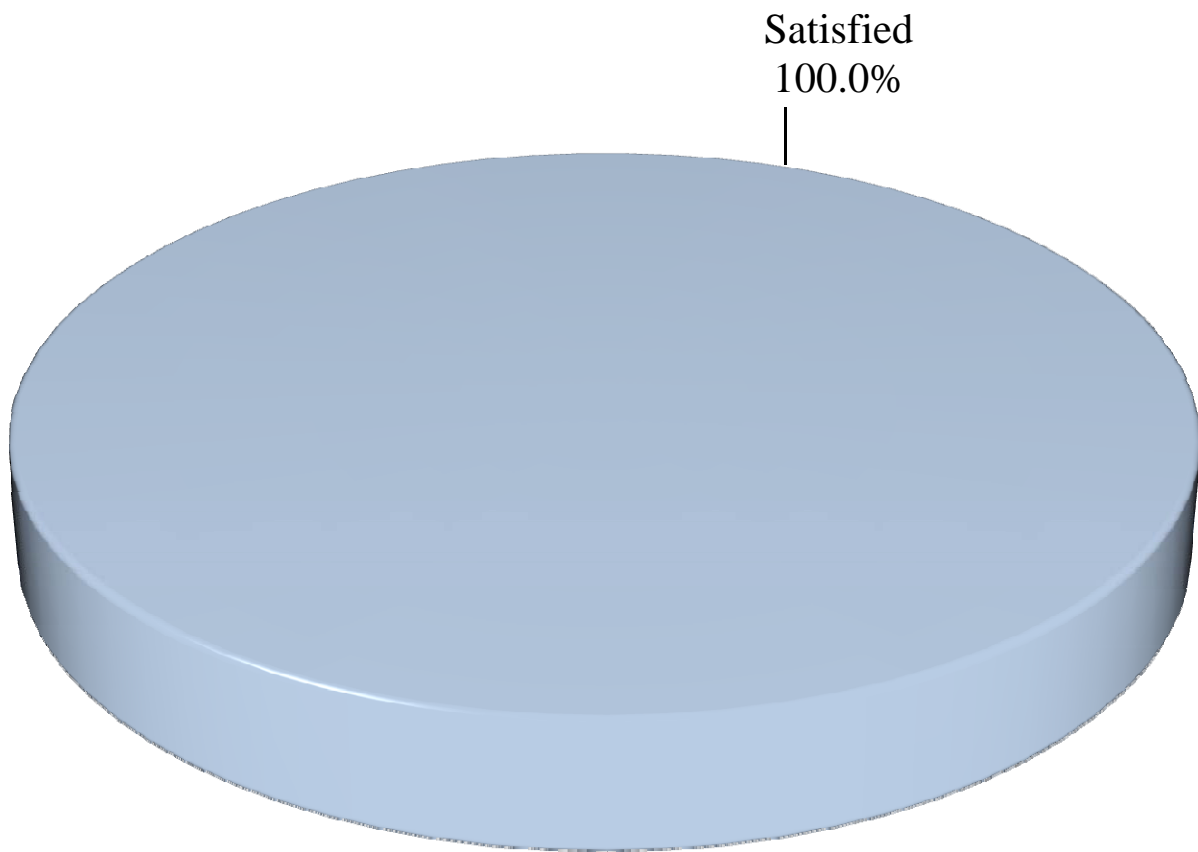
Q21a. Have you or someone in your household used the services of the local health department in the past 24 months?

Response Category	No.	Percent
No	178	89.0%
Yes	19	9.5%
Don't know/No response	3	1.5%
Total	<u>200</u>	<u>100.0%</u>



Q21b. How satisfied were you or someone in your household with the services you received at the local health department?

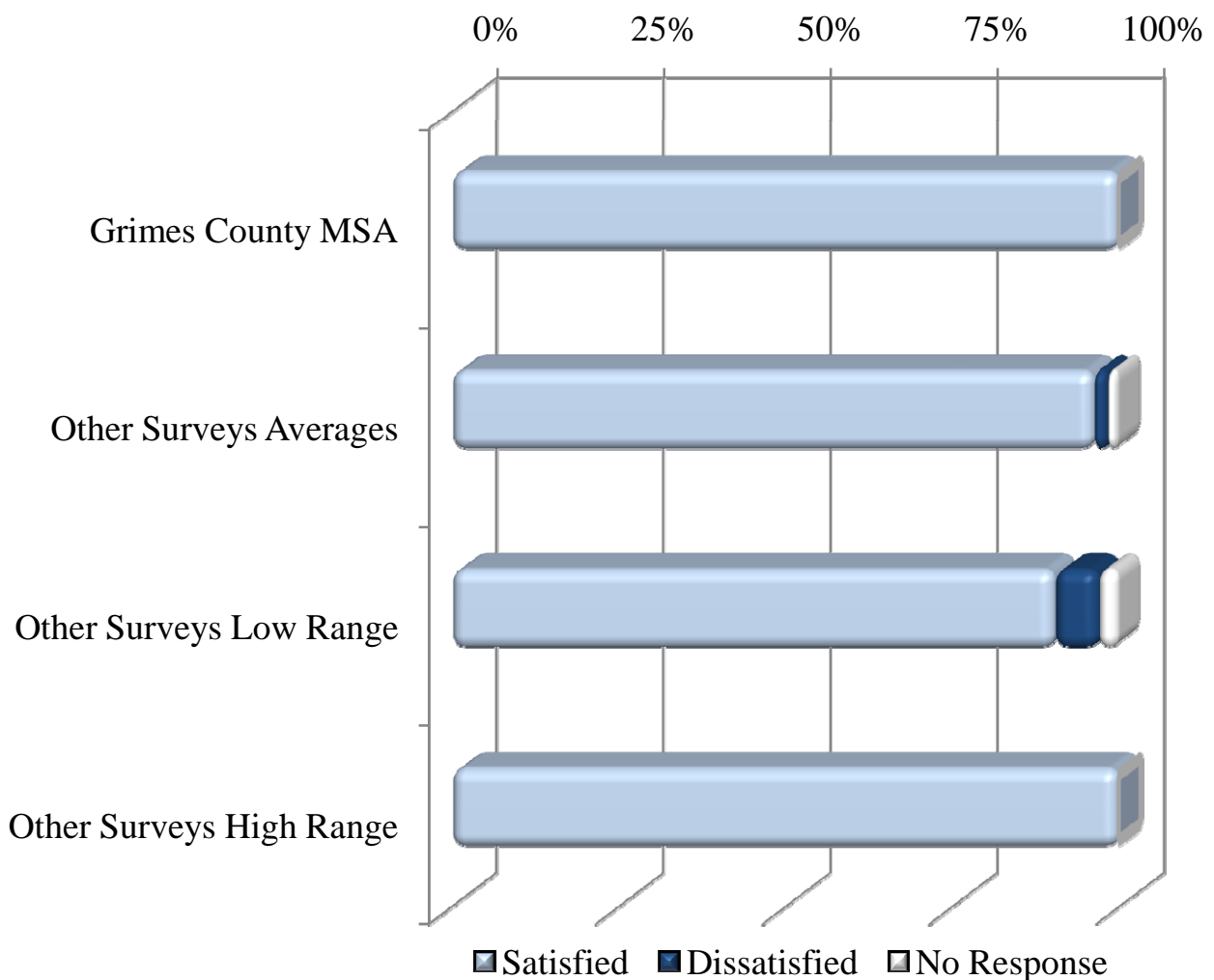
Response Category	No.	Percent
Satisfied	<u>19</u>	<u>100.0%</u>
Total	<u>19</u>	<u>100.0%</u>



Q21b-2. How satisfied were you or someone in your household with the services you received at the local health department?

Compared to Other Studies

Survey Area	Satisfied	Dissatisfied	No Response
Grimes County MSA	100.0%	0.0%	0.0%
Other Surveys Averages	96.3%	2.0%	1.7%
Other Surveys Low Range	90.4%	6.6%	3.0%
Other Surveys High Range	100.0%	0.0%	0.0%

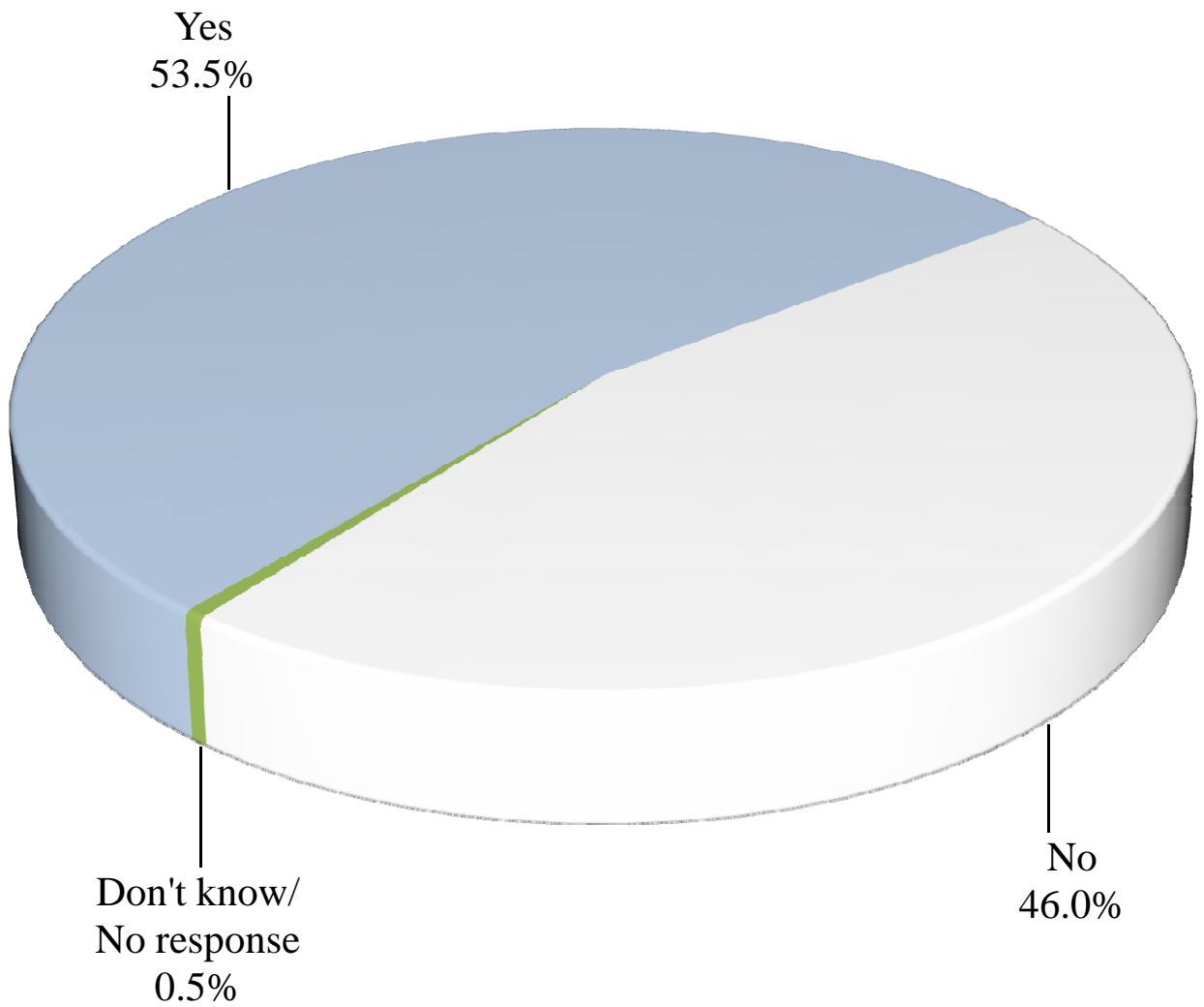


Q22. What concerns you most about health care in your community?

Response	No.	Percent
No concerns/complaints	51	25.5%
High cost of care	37	18.5%
New doctors/younger doctors/more doctors	18	9.0%
Distance to health facilities	15	7.5%
Making sure there is access to health care	11	5.5%
Insurance/Medicare acceptance	8	4.0%
Physician competence	7	3.5%
No concerns because I seek care elsewhere	7	3.5%
Length of time for EMS to get me	6	3.0%
Acquiring newer medical technology	6	3.0%
Preventive care for people without insurance	6	3.0%
Lack of insurance for children	3	1.5%
Lack of geriatric services that take Medicare	2	1.0%
Dissatisfied with health care	2	1.0%
Long waiting times for physicians	2	1.0%
Free community clinics	2	1.0%
Hates paying for others' health care	3	1.5%
Emergency room services	1	0.5%
Need more nurses in our area	1	0.5%
Need a Scott & White Clinic	1	0.5%
Availability of DME and assistive tools	1	0.5%
AIDS/HIV	1	0.5%
Coordinated care	1	0.5%
Afraid of socialized medicine	1	0.5%
Don't know/No response	7	3.5%
Total	<u>200</u>	<u>100.0%</u>

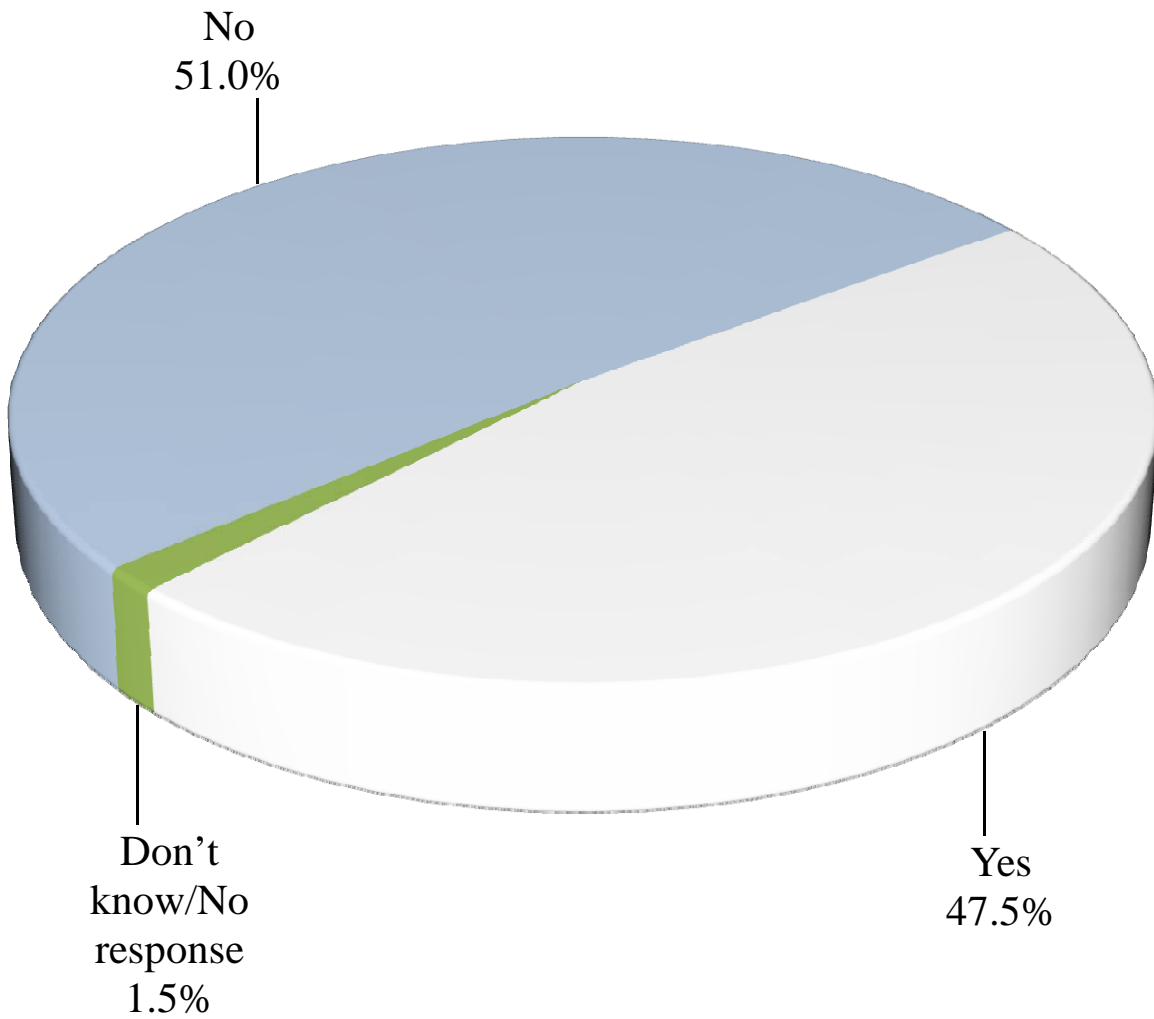
Q23. Do you routinely receive dental care?

Response Category	No.	Percent
Yes	107	53.5%
No	92	46.0%
Don't know/No response	<u>1</u>	<u>0.5%</u>
Total	<u>200</u>	<u>100.0%</u>



Q24. Have you received dental care in the past 24 months?

Response Category	No.	Percent
No	102	51.0%
Yes	95	47.5%
Don't know/No response	<u>3</u>	<u>1.5%</u>
Total	<u>200</u>	<u>100.0%</u>



Q24a. In which city did you receive dental care in the past 24 months?

Response Category	No.	Percent
Bryan/College Station	40	40.0%
Navasota	26	26.0%
Houston	6	6.0%
Brenham	4	4.0%
Huntsville	4	4.0%
Madisonville	4	4.0%
Conroe	2	2.0%
Magnolia	2	2.0%
Montgomery	2	2.0%
The Woodlands	2	2.0%
Washington, DC	1	1.0%
Beaumont	1	1.0%
Elmhurst, IL	1	1.0%
Hempstead	1	1.0%
Johnson City	1	1.0%
San Marcos	1	1.0%
Spring	1	1.0%
Don't know/No response	<u>1</u>	<u>1.0%</u>
Total	<u>100</u>	<u>100.0%</u>

Some respondents answered more than once.

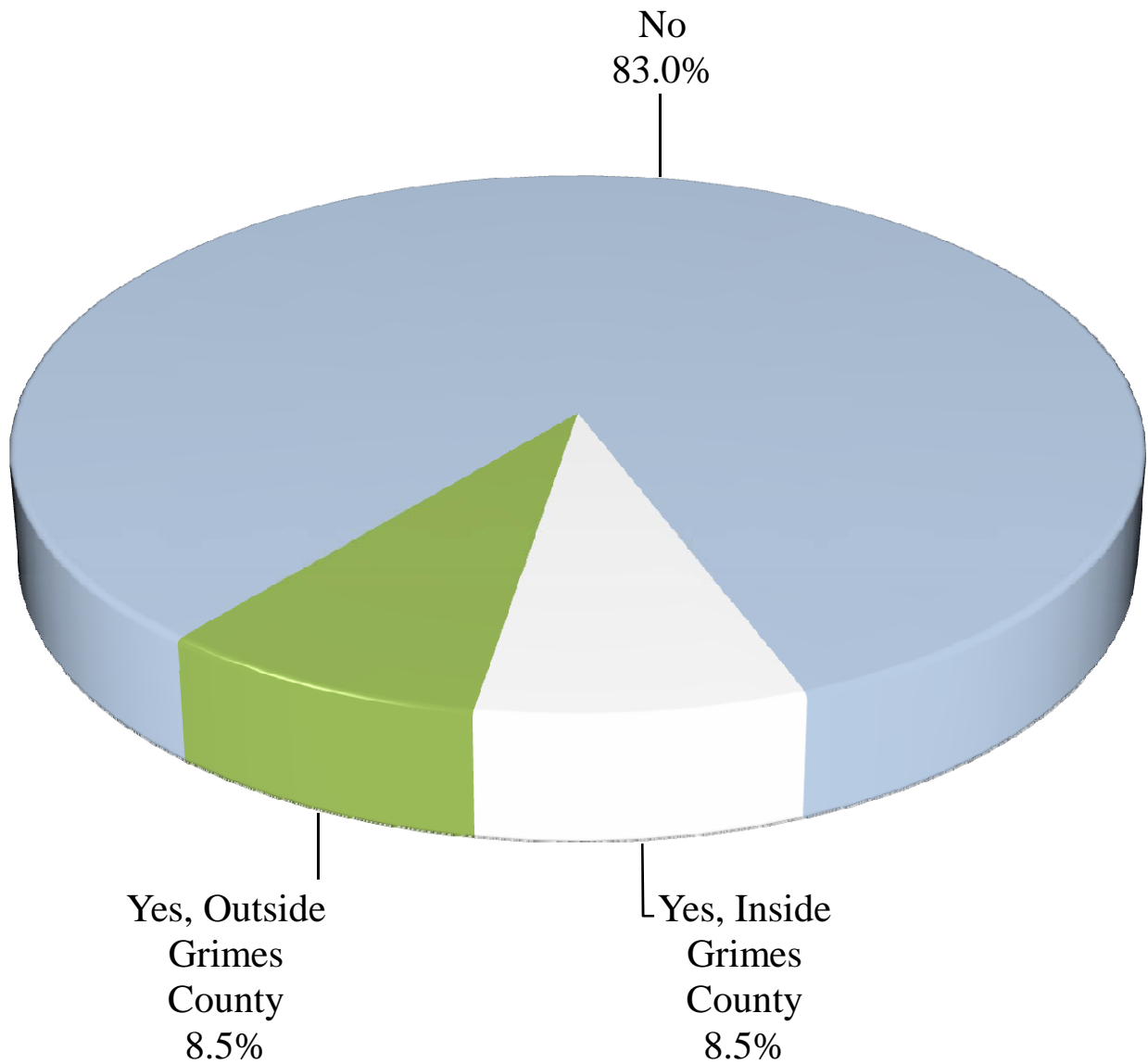
Q24b. Why did you choose to go there for dental care?

Response	No.	Percent
Closer/Convenient location	31	30.1%
Have used for years/Personal relationship	30	29.1%
Approved provider for insurance	21	20.4%
Better quality of providers	9	8.7%
Referral	8	7.8%
Specialist care	2	1.9%
Speed of getting an appointment	1	1.0%
Don't know/No response	<u>1</u>	<u>1.0%</u>
Total	<u>103</u>	<u>100.0%</u>

Some respondents answered more than once.

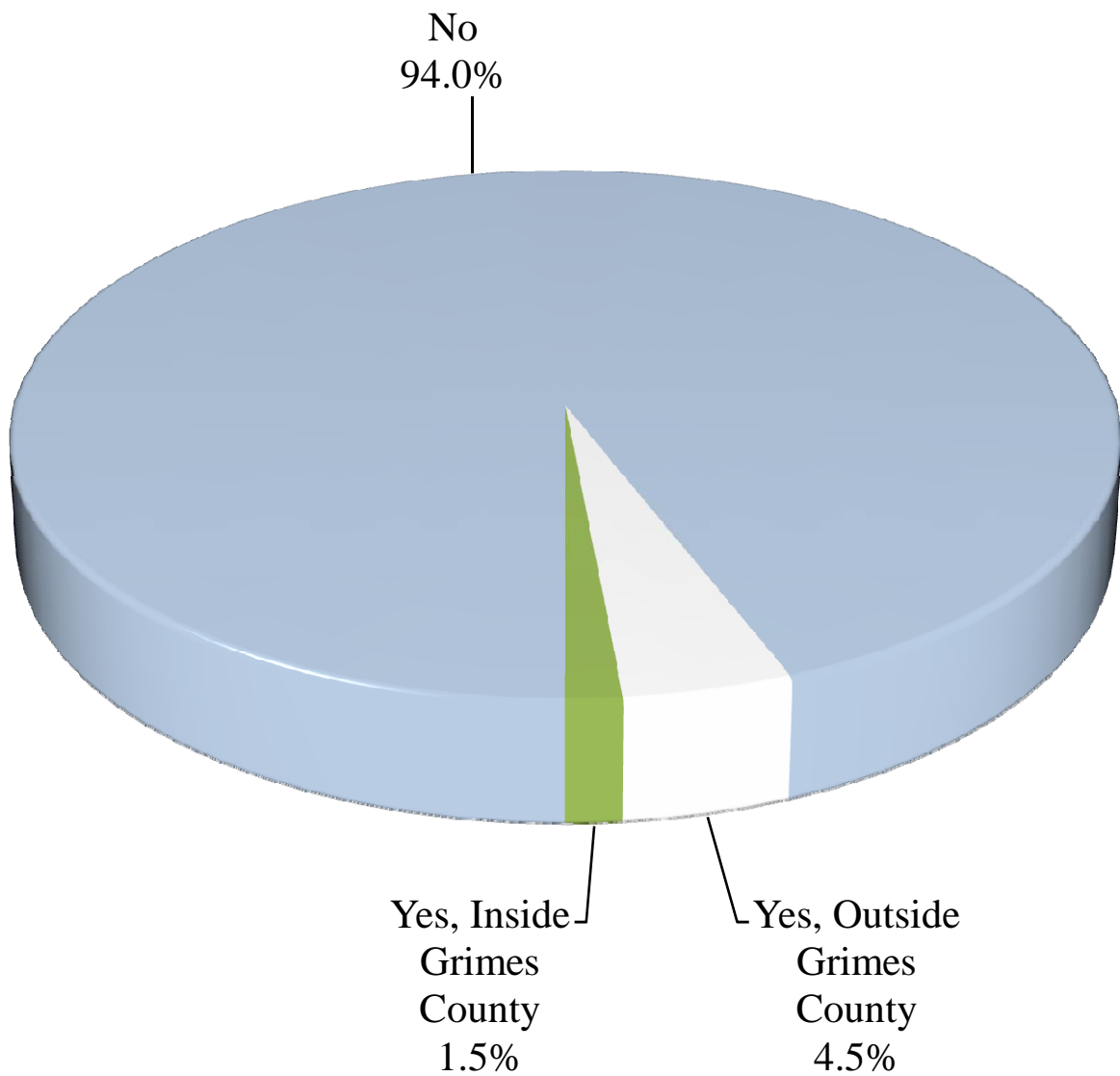
Q25a. Have you used physical therapy services in the past 24 months?

Response Category	No.	Percent
No	166	83.0%
Yes, Inside Grimes County	17	8.5%
Yes, Outside Grimes County	17	8.5%
Total	<u>200</u>	<u>100.0%</u>



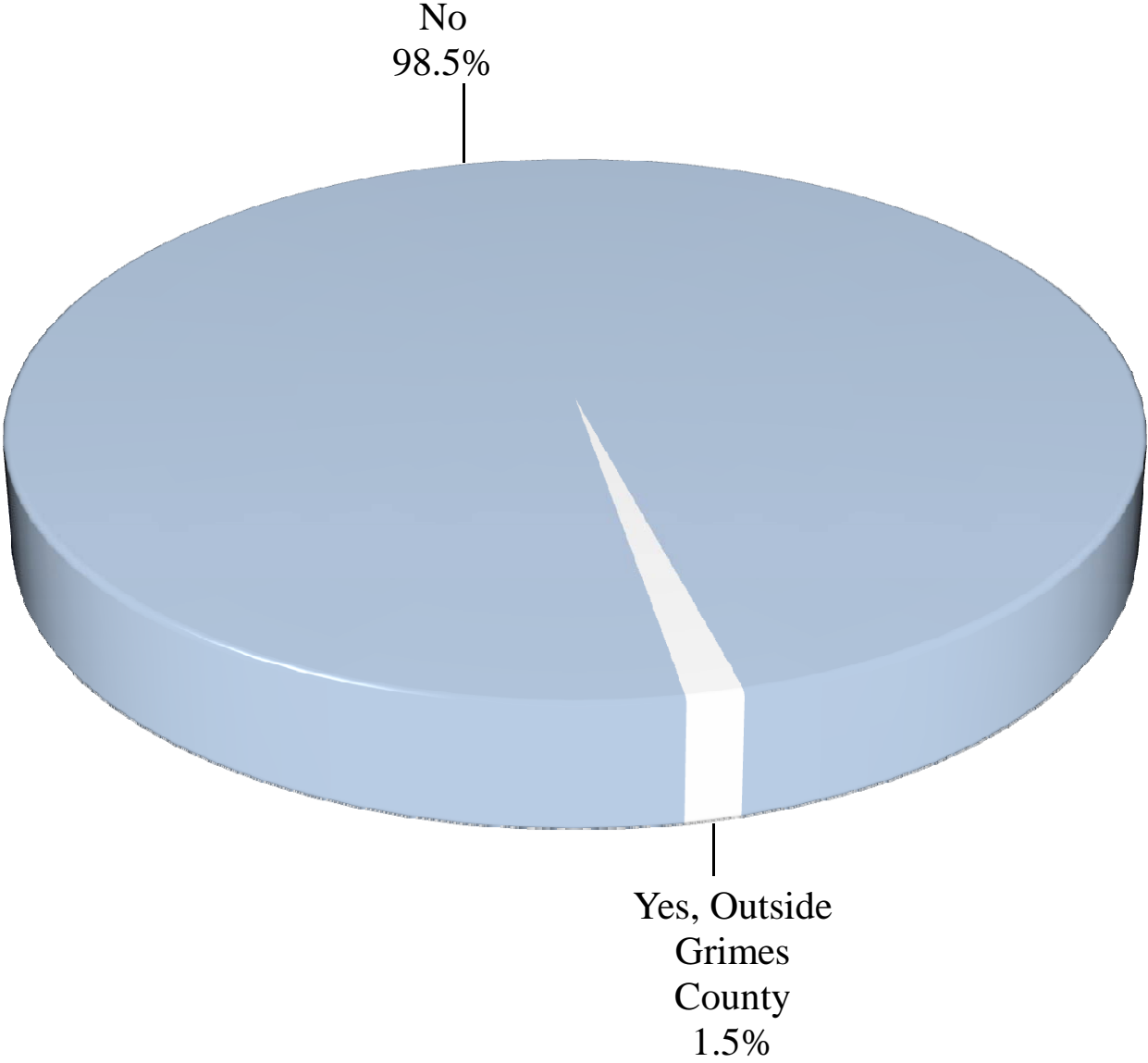
Q25b. Have you used mental health services in the past 24 months?

Response Category	No.	Percent
No	188	94.0%
Yes, Outside Grimes County	9	4.5%
Yes, Inside Grimes County	3	1.5%
Total	<u>200</u>	<u>100.0%</u>



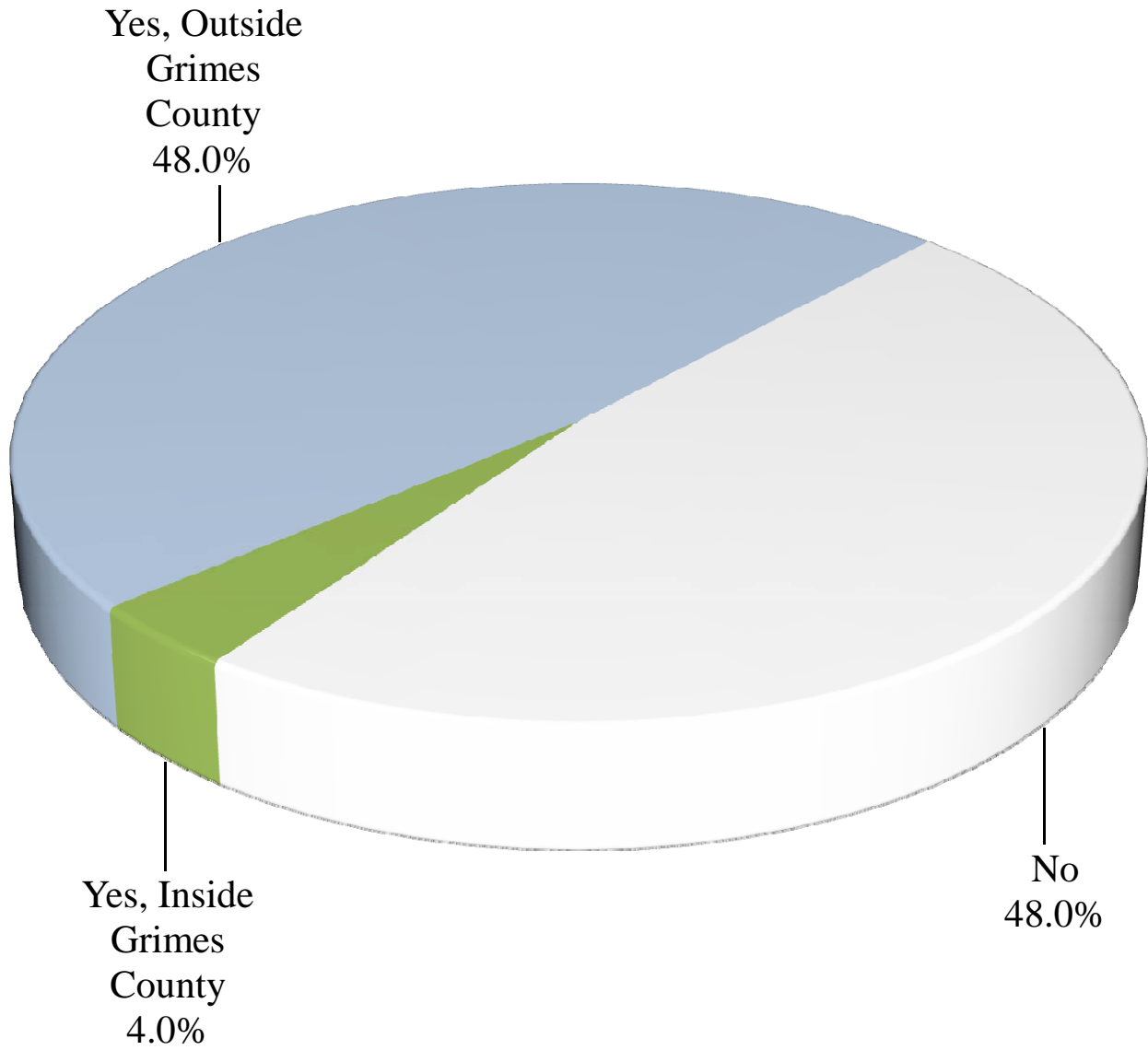
Q25c. Have you used substance abuse services in the past 24 months?

Response Category	No.	Percent
No	197	98.5%
Yes, Outside Grimes County	<u>3</u>	<u>1.5%</u>
Total	<u>200</u>	<u>100.0%</u>



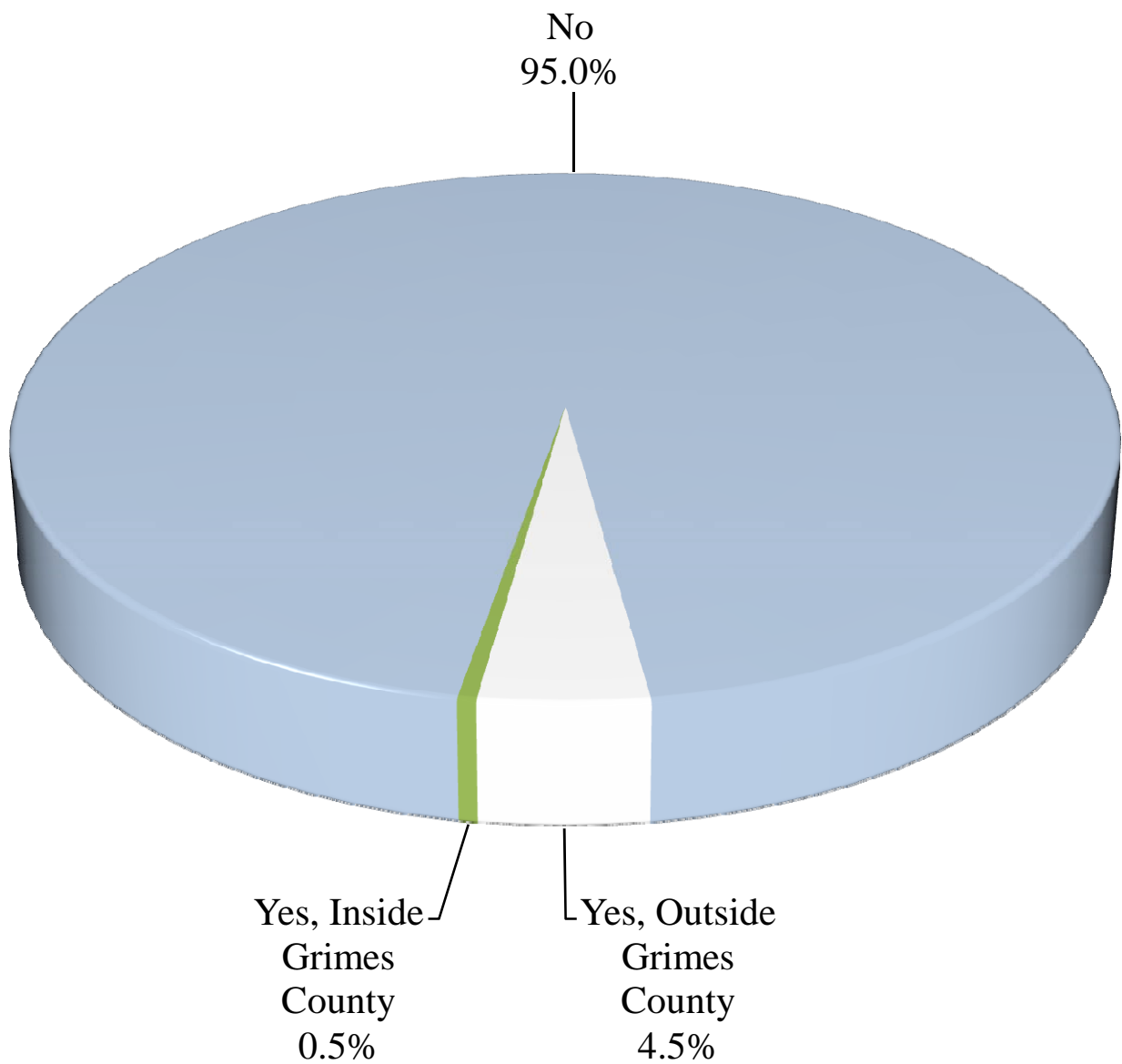
Q25d. Have you used eye care services in the past 24 months?

Response Category	No.	Percent
Yes, Outside Grimes County	96	48.0%
No	96	48.0%
Yes, Inside Grimes County	8	4.0%
Total	<u>200</u>	<u>100.0%</u>



Q25e. Have you used dialysis services in the past 24 months?

Response Category	No.	Percent
No	190	95.0%
Yes, Outside Grimes County	9	4.5%
Yes, Inside Grimes County	<u>1</u>	<u>0.5%</u>
Total	<u>200</u>	<u>100.0%</u>



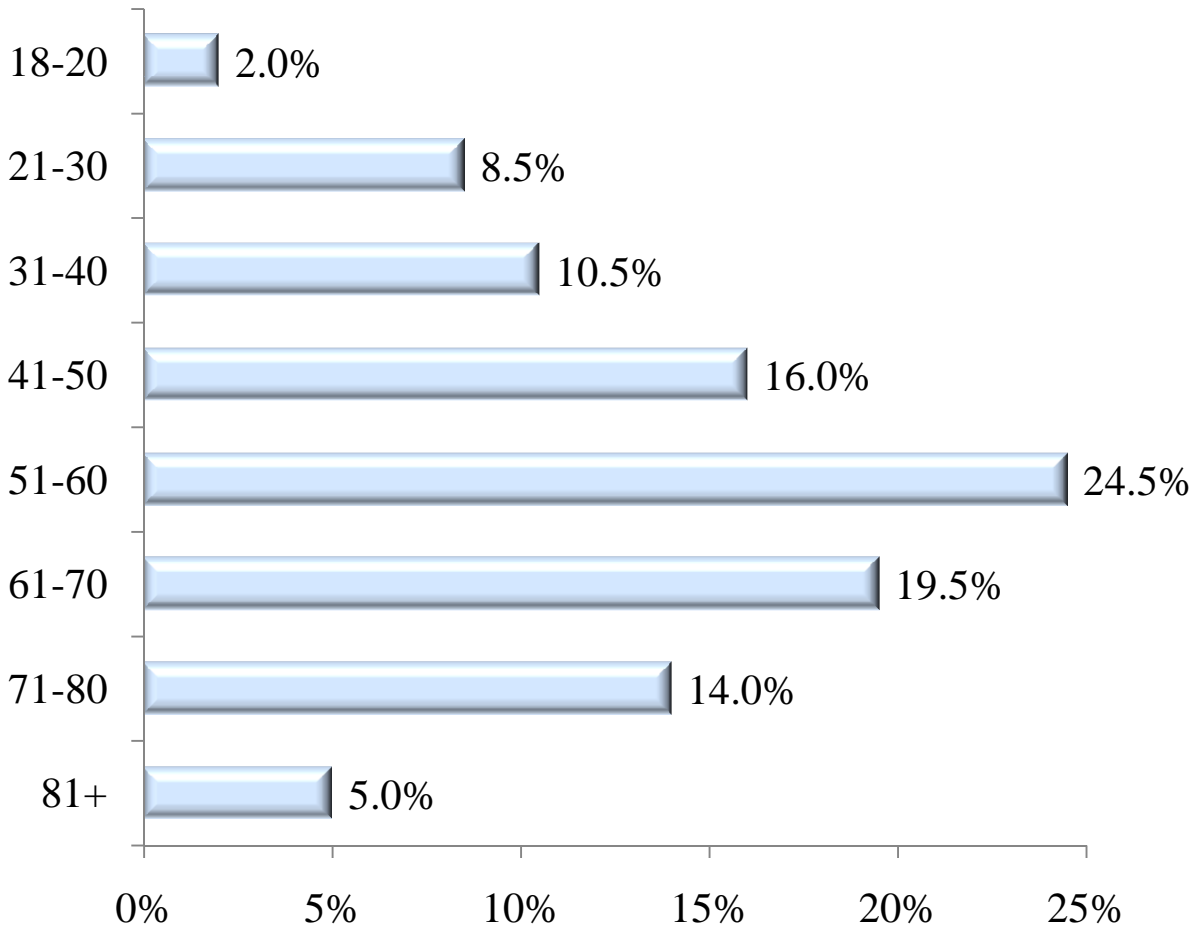
Q26. What additional health care services would you like in the area?

Response	No.	Percent
Bigger/more accommodating hospital	44	19.8%
Eye clinic	24	10.8%
Dental clinic	23	10.4%
Cardiologist	7	3.2%
Emergency services	6	2.7%
Need more insurance services	3	1.4%
Physical therapy	3	1.4%
Surgeon	3	1.4%
Radiology services/MRI/CT scan	3	1.4%
Counseling services	2	0.9%
Women's clinic	2	0.9%
Hearing clinic	2	0.9%
Pediatrician	2	0.9%
Substance abuse center	2	0.9%
Oncology/Chemotherapy services	2	0.9%
Allergy clinic	1	0.5%
Dermatologist	1	0.5%
Sleep lab services	1	0.5%
Urologist	1	0.5%
Don't know/No response	<u>90</u>	<u>40.5%</u>
Total	<u>222</u>	<u>100.0%</u>

Some respondents answered more than once.

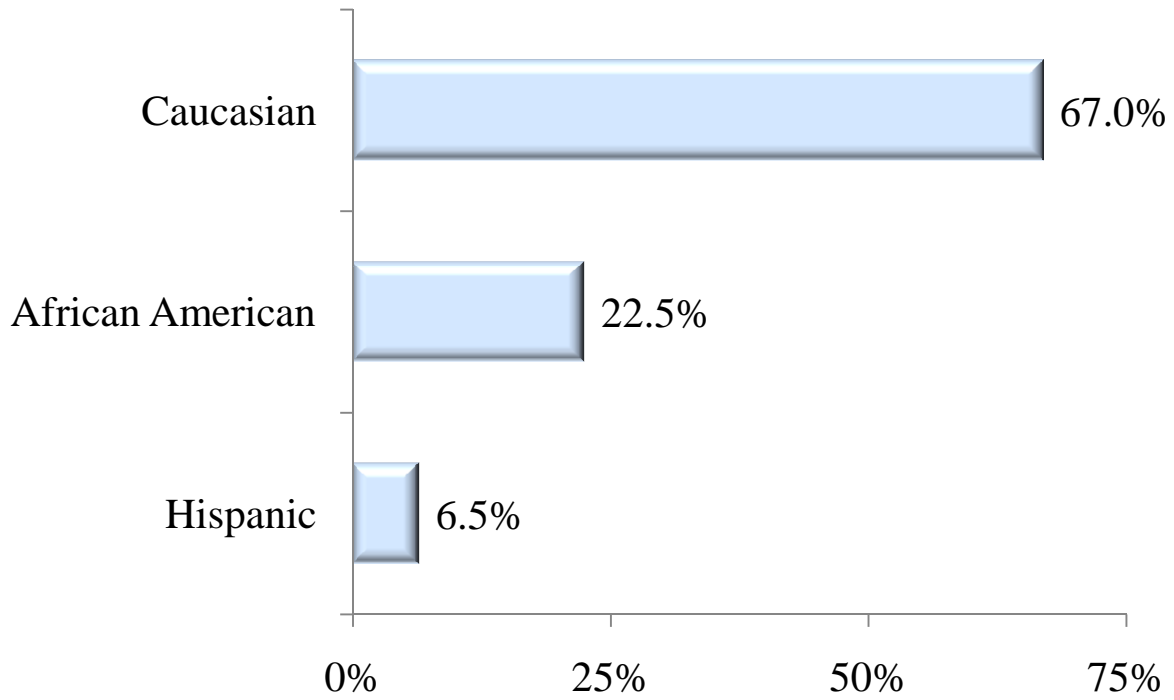
Q27. What is your age?

Response Category	No.	Percent
18-20	4	2.0%
21-30	17	8.5%
31-40	21	10.5%
41-50	32	16.0%
51-60	49	24.5%
61-70	39	19.5%
71-80	28	14.0%
81+	<u>10</u>	<u>5.0%</u>
Total	<u>200</u>	<u>100.0%</u>



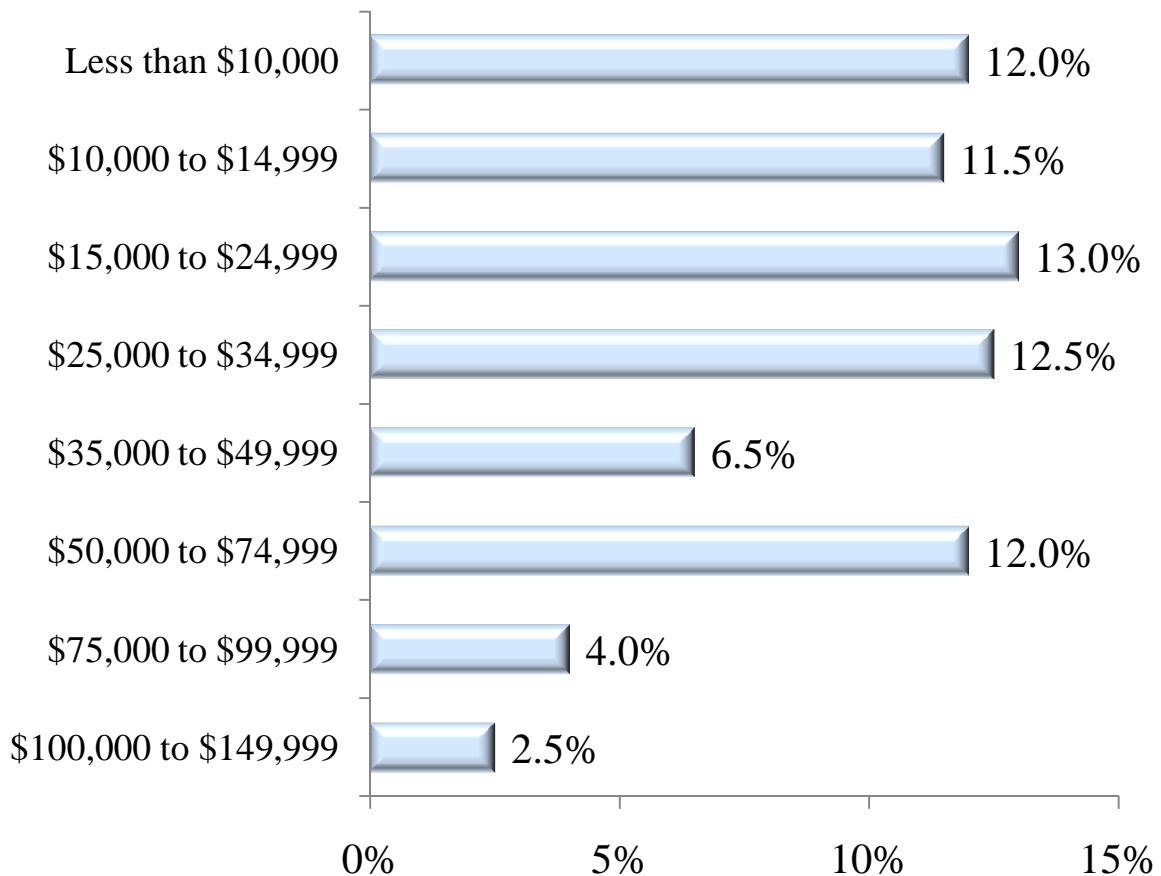
Q28. What is your ethnicity?

Response Category	No.	Percent
Caucasian	134	67.0%
African American	45	22.5%
Hispanic	13	6.5%
Native American	1	0.5%
Don't know/No response	7	3.5%
Total	<u>200</u>	<u>100.0%</u>



Q29. What is your annual household income?

Response Category	No.	Percent
Less than \$10,000	24	12.0%
\$10,000 to \$14,999	23	11.5%
\$15,000 to \$24,999	26	13.0%
\$25,000 to \$34,999	25	12.5%
\$35,000 to \$49,999	13	6.5%
\$50,000 to \$74,999	24	12.0%
\$75,000 to \$99,999	8	4.0%
\$100,000 to \$149,999	5	2.5%
\$150,000 to \$199,999	2	1.0%
\$200,000 or more	1	0.5%
Don't know/No response	<u>49</u>	<u>24.5%</u>
Total	<u>200</u>	<u>100.0%</u>



Q30. What is your gender?

Response Category	No.	Percent
Female	143	71.5%
Male	56	28.0%
Don't know/No response	<u>1</u>	<u>0.5%</u>
Total	<u>200</u>	<u>100.0%</u>

