

Collier County Health Assessment Survey Questions

1. How would you rate the **general health** of Collier County residents?

- Excellent Good Fair Poor

2. How would you rate the **quality** of healthcare in Collier County?

- Excellent Good Fair Poor

3. Where do you think the residents of Collier County go to get health information (select all that apply)?

- | | |
|---|-------------------------------------|
| <input type="checkbox"/> Books | <input type="checkbox"/> Magazines |
| <input type="checkbox"/> Family doctor or health provider | <input type="checkbox"/> Newspaper |
| <input type="checkbox"/> Friends or relatives | <input type="checkbox"/> Radio |
| <input type="checkbox"/> Internet | <input type="checkbox"/> Television |
| <input type="checkbox"/> Social Media | |
| <input type="checkbox"/> Other _____ | |

4. Where do you go to get healthcare (select all that apply)?

- | | |
|--|--|
| <input type="checkbox"/> Clinic | <input type="checkbox"/> Health department |
| <input type="checkbox"/> Family doctor | <input type="checkbox"/> Hospital/emergency room |
| <input type="checkbox"/> Don't know | <input type="checkbox"/> Dental Care |
| <input type="checkbox"/> Other _____ | |

5. Are you a client of Health Care Network?

- No Yes I Don't know

If yes, which facility do you visit? _____

6. Which of the following do you feel are the three most important **health concerns** in Collier County (select three)?

- | | |
|---|---|
| <input type="checkbox"/> Access to primary care (family doctor) | <input type="checkbox"/> HIV/AIDS |
| <input type="checkbox"/> Access to specialty care (doctors who provide care for one specific medical issue) | <input type="checkbox"/> Lack of food |
| <input type="checkbox"/> Aging problems (arthritis, hearing or vision loss, etc.) | <input type="checkbox"/> Mental health problems |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Not enough doctors |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Crime | <input type="checkbox"/> Poor nutrition |
| <input type="checkbox"/> Dental problems | <input type="checkbox"/> Senior care |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Sexually transmitted diseases (STDs) |
| <input type="checkbox"/> Domestic violence | <input type="checkbox"/> Teenage pregnancy |
| <input type="checkbox"/> Flu | <input type="checkbox"/> Unsafe living conditions |
| <input type="checkbox"/> Heart disease and stroke | <input type="checkbox"/> Unsafe work environment |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Women's issues |

7. Which of the following do you feel are the three most important **risky behaviors** in Collier County (select three)?

- | | |
|---|--|
| <input type="checkbox"/> Being overweight | <input type="checkbox"/> Not using seat belts/child safety seats |
| <input type="checkbox"/> Discrimination | <input type="checkbox"/> Poor eating habits |
| <input type="checkbox"/> Distracted driving (texting, etc.) | <input type="checkbox"/> Smoking/tobacco use |
| <input type="checkbox"/> Dropping out of school | <input type="checkbox"/> Substance abuse (drug, alcohol, prescription, other) |
| <input type="checkbox"/> Lack of exercise | <input type="checkbox"/> Not getting shots to prevent disease |
| <input type="checkbox"/> Lack of maternity care | <input type="checkbox"/> Unsafe sex |
| <input type="checkbox"/> Not using birth control | <input type="checkbox"/> Lack of Health Literacy (<i>health information needed to make appropriate health decisions</i>) |
| <input type="checkbox"/> Other _____ | |

8. What do you think is the main reason that keeps people in Collier County from seeking medical treatment?

- | | |
|--|---|
| <input type="checkbox"/> Cultural/health beliefs | <input type="checkbox"/> Lack of insurance/unable to pay for doctor's visit |
| <input type="checkbox"/> Fear (due to immigration status) | <input type="checkbox"/> Language barrier |
| <input type="checkbox"/> Fear (not ready to face health problem) | <input type="checkbox"/> Mental/Behavioral Health |
| <input type="checkbox"/> Health services too far away | <input type="checkbox"/> No appointments available at doctor when needed/have to wait too long at doctor's office |
| <input type="checkbox"/> Lack of knowledge/understanding of need | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> None/no barriers | |
| <input type="checkbox"/> Other _____ | |

9. What types of residents of Collier County have more difficulty with healthcare than others?

- | | |
|--|--|
| <input type="checkbox"/> Adults | <input type="checkbox"/> Persons in dependency (foster care/non-relative care) |
| <input type="checkbox"/> Children | <input type="checkbox"/> Persons with disabilities |
| <input type="checkbox"/> Elderly/senior citizens | <input type="checkbox"/> Teens/adolescents |
| <input type="checkbox"/> Migrants | <input type="checkbox"/> Uninsured/low-income |
| <input type="checkbox"/> Non-English speaking | <input type="checkbox"/> Veterans |
| <input type="checkbox"/> None | |
| <input type="checkbox"/> Other _____ | |

10. Are there areas/neighborhoods in the county where residents have a particularly difficult time accessing health services?

- No
 Yes

If yes, which areas/neighborhoods?

11. Are there services that individuals in Collier County have difficulty accessing?

- No
- Yes

If yes, which of the following services have you or someone you know had difficulty accessing (select all that apply)?

- | | |
|---|---|
| <input type="checkbox"/> Dental care (for adults) | <input type="checkbox"/> Mental/Behavioral health care (for adults) |
| <input type="checkbox"/> Dental care (for children) | <input type="checkbox"/> Mental/Behavioral health care (for children) |
| <input type="checkbox"/> Emergency care | <input type="checkbox"/> Pediatric care |
| <input type="checkbox"/> Hospital care | <input type="checkbox"/> Primary Care |
| <input type="checkbox"/> Maternity/prenatal care | <input type="checkbox"/> Specialty care |
| <input type="checkbox"/> Medications/pharmacy | |
| <input type="checkbox"/> Other _____ | |

12. What does Collier County need to improve the health of your family, friends, and neighbors?

- | | |
|---|---|
| <input type="checkbox"/> Additional health services | <input type="checkbox"/> Mental/Behavioral health services |
| <input type="checkbox"/> After-school/out-of-school programs | <input type="checkbox"/> More doctors |
| <input type="checkbox"/> Bicycle paths/walking paths | <input type="checkbox"/> Recreational facilities (parks, sports fields, etc.) |
| <input type="checkbox"/> Counseling & support groups | <input type="checkbox"/> Safer environment |
| <input type="checkbox"/> Dental Care | <input type="checkbox"/> Specialty doctors |
| <input type="checkbox"/> Financial assistance for health care | <input type="checkbox"/> Substance abuse treatment services |
| <input type="checkbox"/> Health education | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Healthier food choices | <input type="checkbox"/> Wellness programs |
| <input type="checkbox"/> Job opportunities | |
| <input type="checkbox"/> Other _____ | |

13. Please share any additional comments you have about healthcare needs in Collier County.

What is your Zip Code? _____

Are you a permanent, seasonal, or temporary resident of Collier County?

- Permanent Seasonal Temporary

Age:

- Under 18 18-34 35-65 over 65

Gender:

- Male Female

Race:

- American Indian or Alaska Native
 Native Hawaiian or Other Pacific Islander
- Asian
 White
- Black or African American
 Mixed

Ethnicity:

- Hispanic or Latino Not Hispanic or Latino

What is your primary language?

- English Spanish Creole Other _____

What type of insurance do you have?

- Private insurance (through employer) Private insurance (self-pay) Veteran
 Medicare Medicaid (Staywell, Prestige etc.) None
 Other _____

Please mail or fax completed surveys to:

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