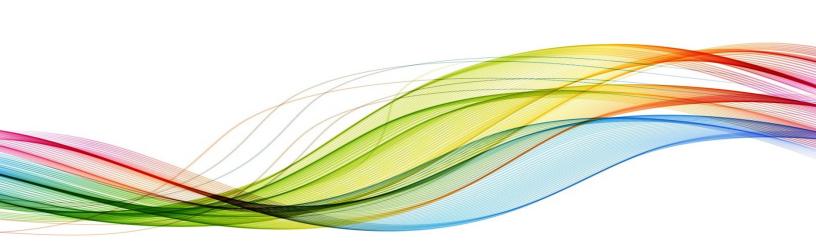


Community Health Needs Assessment Golden Valley Memorial Healthcare in partnership with Compass Health Network & Henry County Health Center Henry and Benton Counties, MO



December 2019

VVV Consultants LLC Olathe, KS

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I. Executive Summary

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I. Executive Summary

quality health care.

Golden Valley Memorial Healthcare (Primary Service Area) - 2019 Community Health Needs Assessment (CHNA)

Creating healthy communities requires a high level of mutual understanding and collaboration among community leaders. The development of this assessment brings together community health leaders and providers, along with the residents, to research and prioritize county health needs and document community health delivery success. This health assessment will serve as the foundation for community health improvement efforts for the next three years.

GVMH, Compass Health Network, and Henry County Health Center (Henry and Benton Counties, MO) previous CHNA was completed in 2016. (Note: The Patient Protection and Affordable Care Act (ACA) require not-for-profit hospitals to conduct a CHNA every three years and adopt an implementation strategy to meet the needs identified by the CHNA). Wave #3 CRMC (Primary Service Area) CHNA assessment began August 2019 and was facilitated / created by VVV Consultants, LLC (Olathe, KS) staff under the direction of Vince Vandehaar, MBA.

Important community CHNA Benefits for both the local hospital and the health department, are as follows: 1) Increases knowledge of community health needs and resources 2) Creates common understanding of the priorities of the community's health needs 3) Enhances relationships and mutual understanding between and among stakeholders 4) Provides a basis upon which community stakeholders can make decisions about how they can contribute to improving the health of the community 5) Provides rationale for current and potential funders to support efforts to improve the health of the community 6) Creates opportunities for collaboration in delivery of services to the community and 7) Provides guidance to the hospital and local health department for how they can

align their services and community benefit programs to best meet needs, and 8) fulfills Hospital "Mission" to deliver

a) County Health Area of Future Focus Henry and Benton Co, MO: Town Hall - "Community Health Improvements Needs"

	2019 CHNA Health Priorities							
Henry and Benton County, MO CHNA Wave #3 Town Hall - Oct 15, 2019								
#	COMMH, Compass Health and HCHC PSA (43 Attendee Community Health Needs to Change and/or Improve	Votes	"	Accum				
1	Mental Health School focused (Diagnosis, Treatment, Aftercare) / Suicides	26	18.2%	18.2%				
2	Economic Development	24	16.8%	35.0%				
3	Drugs (Opioids, Meth, Heroin, Marijuana)	21	14.7%	49.7%				
4	Psychiatric Unit - Inpatient	14	9.8%	59.4%				
5	Obesity (Nutrition / Exercise) / Food Insecurity	14	9.8%	69.2%				
6	Poor Health Insurance (Lack of Coverage)	7	4.9%	74.1%				
7	Housing (Safe and Affordable)	7	4.9%	79.0%				
	Total Votes: 143 100.0%							
	Other Items receiving votes: Awareness of Services, Transportation, Broad Band Services, Safe Child Care, Urgent Care (Subtilized), Abuse / Violence, Senior Health, Community Apathy towards Health, Smoking / Vaping (Mom's), Access to Walking Trails, and Sensitivity Training.							

b) Town Hall CHNA Findings: Areas of Strengths

Henry and Benton Co, MO: Town Hall - "Community Health Areas of Strengths"

	Henry and Benton County "Community Health Strengths"					
#	Topic	#	Topic			
1	Availability / Extended Hours	7	GVMH and Compass aremajor employers			
2	Community Activities	8	Mental Health offerings			
3	Community Collaboration	9	Opportunities for Healthcare Careers			
4	Crisis Intervention Team	10	Provider to Patient Ratio			
5	Drug Recovery Court	11	School Health / Nurses			
6	Good Healthcare Perceptions	12	Specialized Service Offerings			

Key CHNA Wave#3 Secondary Research Conclusions are as follows:

MISSOURI HEALTH RANKINGS: According to the 2019 Robert Woods Johnson County Health Rankings, Henry County, MO Average was ranked 95th in Health Outcomes, 54th in Health Factors, and 26th in Physical Environmental Quality out of the 115 Counties, while Benton County, MO Average was ranked 90th in Health Outcomes, 86th in Health Factors and 67th in Physical Environment.

- **TAB 1.** Henry County's population is 21,718 (based on 2017), with a population per square mile (based on 2010) of 32 persons. Benton County's population is 19,074 with a population per square mile of 27 persons. Six percent (6.1%) and four percent (4.4%) of the population is under the age of 5 and 24% is over 65 years old. Hispanic or Latinos make up 2.1-2.4% of the population and there are 1.8-2.5% of Henry and Benton County citizens that speak a language other than English at home. Children in single parent households make up 28-37% and 84% are living in the same house as one year ago. There are 2,368 and 2,177 Veterans living in Henry and Benton Counties.
- **TAB 2.** The per capita income in Henry County is \$24,371 and Benton County is \$20,163, while 16-17.2% of the population is in poverty. There is a severe housing problem of 76-85% and an unemployment rate of 4.2-5.2%. Food insecurity is 15%, and limited access to a store (healthy foods) is 5% in Benton County, but at 14% in Henry County. Thirty-one percent (31%) to 40% of Henry and Benton County citizens have a long commute.
- **TAB 3.** Children eligible for a free or reduced-price lunch is 80% and 84.5% of students graduate high school while 11.6% of students get their bachelor's degree or higher in Benton County. Henry County has 87.9% of students that graduate high school and 15.9% that get their bachelor's degree or higher.
- **TAB 4.** The percent of births where prenatal care started in the first trimester is 73.3-76.2%. Forty-two (42.3-43.9%) of births in Henry and Benton Counties occur to unmarried women. Births where mothers have smoked during the pregnancy is at 28% and the percent of babies that were born prematurely is about 9%.
- **TAB 5.** There is one primary care physician per 1,440 people in Henry County and one per 3,770 people in Benton County. Seventy-two percent (72-74%) of patients gave their hospital a rating of 9 or 10 out 10 and there are 67-68% of patients who reported Yes, They Would Definitely Recommend the Hospital.

TAB 6. Medicare population getting treated for depression in Henry and Benton County is 17-8-18.5%. There are 4.6 days out of the year that are considered poor mental health days. The age-adjusted suicide mortality rate per 100,000 is 18.8-20 in Henry and Benton County.

TAB 7. Thirty-four percent (31-34%) of adults in Henry and Benton Counties are obese (based on 2019), with 27% of the population physically inactive. Fourteen percent (14-16%) of adults drink excessively and 22% smoke. The rate per 100,000 sexually transmitted diseases is lower than the comparative norm (262.2 and 166). Hypertension (51.4% and 52.3%), Hyperlipidemia (32.6% and 43.1%), COPD (15.8% and 16.7%), and Cancer (6.6% and 8%) risk are all higher than the competitive norm

TAB 8. The adult uninsured rate for Henry County is 12% and 14% for Benton County.

TAB 9. The life expectancy rate in Henry and Benton County is 74 for Males and 78 for Females. Alcohol-impaired driving deaths for Henry County is 21% and 29% for Benton County.

TAB 10. Fifty-one percent (51%) of Henry County has access to exercise opportunities and 39% monitor diabetes. Thirty percent (30%) of Benton County has access to exercise opportunities and 43% monitor diabetes. Thirty-three percent (33-35%) of women in Henry and Benton County get annual mammography screenings.

Key 2019 Community Feedback Conclusions: Stakeholder feedback from residents, community leaders and providers (N=381) provided the following community insights via an online perception survey:

- Using a Likert scale, 63.3% of Henry and Benton County stakeholders would rate the overall quality of healthcare delivery in their community as either Very Good or Good.
- Henry and Benton County stakeholders are satisfied with the following services:
 Dentists, Eye Doctors, Home Health, Hospice, Inpatient Services, Outpatient Services,
 Pharmacy, Physician Clinics and School Nurses.
- When considering past CHNA needs: Drug Abuse, Awareness of Mental Health specialty services, Improve quality of Nursing Homes, Economic Development, and Emergency Department came up.

CHNA Wave #3 - Year 2019			Henry & Benton Counties MO (N=381)			
	Past CHNAs health needs identified	Ongoing Problem			Pressing	
#	Topic	Votes	%	Trend	RANK	
1	Drug Abuse	225	81.8%		1	
2	Awareness of Mental Health specialty services	167	60.7%		2	
3	Improve quality of Nursing Homes	151	54.9%		3	
4	Obesity	132	48.0%		6	
5	Emergency Department	121	44.0%		5	
6	Economic Development	108	39.3%		4	
7	Healthcare Transportation	108	39.3%		8	
8	Urgent Care Services	94	34.2%		7	
9	Services for Autistic Children and Adults	91	33.1%		12	
10	Smoking	88	32.0%		10	
11	Visiting Specialists	77	28.0%		9	
12	Oral Surgeon Services	75	27.3%		14	
13	Increase # of Dentists who take Medicaid	72	26.2%		11	
14	Encourage Parental Guidance	70	25.5%		13	
15	Expand Community Wellness Education	66	24.0%		15	
16	Pediatric Care Services	40	14.6%		16	

II. Methodology

[VVV Consultants LLC]

II. Methodology

a) CHNA Scope and Purpose

The federal Patient Protection and Affordable Care Act (ACA) requires that each registered 501(c)3 hospital conduct a Community Health Needs Assessment (CHNA) at least once every three years and adopt a strategy to meet community health needs. Any hospital that has filed a 990 is required to conduct a CHNA. IRS Notice 2011-52 was released in late fall of 2011 to give notice and request comments.

JOB #1: Meet/Report IRS 990 Required Documentation

- 1. A <u>description of the community served</u> by the facility and how the community was determined;
- 2. A description of the process and methods used to conduct the CHNA;
- 3. The <u>identity of any and all organizations</u> with which the organization collaborated and third parties that it engaged to assist with the CHNA;
- **4.** A <u>description of how</u> the organization considered the input of persons representing the community (e.g., through meetings, focus groups, interviews, etc.), who those persons are, and their qualifications;
- **5.** A <u>prioritized description of all of the community needs</u> identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and
- **6.** A <u>description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.</u>

Section 501(r) provides that a CHNA must take into account input from persons who represent the broad interests of the community served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: Government agencies with current information relevant to the health needs of the community and representatives or members in the community who are medically underserved, low-income, minority populations, and populations with chronic disease needs. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility's defined community (e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc.).

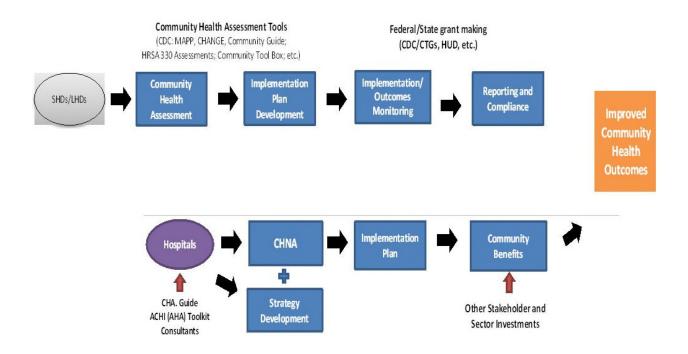
JOB #2: Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be "conducted" in the taxable year that the written report of the CHNA findings is made widely available to the public. The Notice also indicates that the IRS intends to pattern its rules for **making a CHNA** "widely available to the **public**" after the rules currently in effect for Form 990. Accordingly, an organization would make a **facility's written report** widely available by posting the final report on its website either in the form of (1) the report itself, in a readily accessible format or (2) a link to another organization's website, along with instructions for accessing the report on that website. The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.

JOB #3: Adopt an Implementation Strategy by Hospital

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. The Notice defines an "implementation strategy" as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it. A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

Great emphasis has been given to work hand-in-hand with leaders from hospitals, the state health department and the local health department. A common approach has been adopted to create the CHNA, leading to aligned implementation plans and community reporting.



IRS Notice 2011-52 Overview

Notice and Request for Comments Regarding the Community Health Needs Assessment Requirements for Tax-exempt Hospitals

Applicability of CHNA Requirements to "Hospital Organizations"

The CHNA requirements apply to "hospital organizations," which are defined in Section 501(r) to include (1) organizations that operate one or more state-licensed hospital facilities, and (2) any other organization that the Treasury Secretary determines is providing hospital care as its principal function or basis for exemption.

How and When to Conduct a CHNA

Under Section 501(r), a hospital organization is required to conduct a CHNA for each of its hospital facilities once every three taxable years. The CHNA must take into account input from persons representing the community served by the hospital facility and must be made widely available to the public. The CHNA requirements are effective for taxable years beginning after March 23, 2012. As a result, a hospital organization with a June 30 fiscal year end must conduct an initial CHNA for each of its hospital facilities by June 30, 2013, either during the fiscal year ending June 30, 2013 or during either of the two previous fiscal years.

Determining the Community Served

A CHNA must identify and assess the health needs of the **community served** by the hospital facility. Although the Notice suggests that geographic location should be the primary basis for defining the community served, it provides that the organization may also take into account the target populations served by the facility (e.g., children, women, or the aged) and/or the facility's principal functions (e.g., specialty area or targeted disease). A hospital organization, however, will not be permitted to define the community served in a way that would effectively circumvent the CHNA requirements (e.g., by excluding medically underserved populations, low-income persons, minority groups, or those with chronic disease needs).

Persons Representing the Community Served

Section 501(r) provides that a CHNA must take into account input from persons who represent the broad interests of the community served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: (1) government agencies with current information relevant to the health needs of the community and (2) representatives or members of medically underserved, low-income, and minority populations, and populations with chronic disease needs, in the community. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility's defined community (e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc).

Required Documentation

The Notice provides that a hospital organization will be required to separately document the CHNA for each of its hospital facilities in a **written report** that includes the following information: 1) a description of the community served by the facility and how the community was determined; 2) a description of the process and methods used to conduct the CHNA; 3) the identity of any and all organizations with which the organization collaborated and third parties that it engaged to assist with the CHNA; 4) a description of how the organization considered the input of persons representing the community (e.g., through meetings, focus groups, interviews, etc.), who those persons are, and their qualifications; 5) a prioritized description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and 6) a description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be "conducted" in the taxable year that the written report of the CHNA findings is made widely available to the public. The Notice also indicates that the IRS intends to pattern its rules for making a CHNA "widely available to the public" after the rules currently in effect for Forms 990. Accordingly, an organization would make a facility's written report widely available by posting on its website either (1) the report itself, in a readily accessible format, or (2) a link to another organization's website, along with instructions for accessing the report on that website. The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.

How and When to Adopt an Implementation Strategy

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. The Notice defines an "implementation strategy" as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need, or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it. A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

<u>Under the Notice, an implementation strategy is considered to be "adopted" on the date the strategy is approved by the organization's board of directors or by a committee of the board or other parties legally authorized by the board to act on its behalf. Further, the formal adoption of the implementation strategy must occur by the end of the same taxable year in which the written report of the CHNA findings was made available to the public. For hospital organizations with a June 30 fiscal year end, that effectively means that the organization must complete and appropriately post its first CHNA no later than its fiscal year ending June 30, 2013, and formally adopt a related implementation strategy by the end of the same tax year. This final requirement may come as a surprise to many charitable hospitals, considering Section 501(r) contains no deadline for the adoption of the implementation strategy.</u>

Public Health Criteria:

<u>Domain 1: Conduct and disseminate assessments focused on population health status and public health issues facing the community.</u>

Domain 1 focuses on the assessment of the health of the population in the jurisdiction served by the health department. The domain includes: systematic monitoring of health status; collection, analysis, and dissemination of data; use of data to inform public health policies, processes, and interventions; and participation in a process for the development of a shared, comprehensive health assessment of the community.

DOMAIN 1 includes 4 STANDARDS:

- **Standard 1.1 -** Participate in or Conduct a Collaborative Process Resulting in a Comprehensive Community Health Assessment
- Standard 1.2 Collect and Maintain Reliable, Comparable, and Valid Data That Provide Information on Conditions of Public Health Importance and on the Health Status of the Population
- **Standard 1.3** Analyze Public Health Data to Identify Trends in Health Problems, Environmental Public Health Hazards, and Social and Economic Factors That Affect the Public's Health
- Standard 1.4 Provide and Use the Results of Health Data Analysis to Develop Recommendations Regarding Public Health Policy, Processes, Programs, or Interventions

Required CHNA Planning Process Requirements:

- a. Participation by a wide range of community partners.
- b. Data / information provided to participants in CHNA planning process.
- c. Evidence of community / stakeholder discussions to identify issues & themes. Community definition of a "healthy community" included along with list of issues.
- d. Community assets & resources identified.
- e. A description of CHNA process used to set priority health issues.

Seven Steps of Public Health Department Accreditation (PHAB):

- 1. Pre-Application
- 2. Application
- 3. Document Selection and Submission
- 4. Site Visit
- 5. Accreditation Decision
- 6. Reports
- 7. Reaccreditation

II. Methodology

b) Local Collaborating CHNA Parties

Working together to improve community health takes collaboration. Listed below is an in-depth profile of the local hospital, health department and health center CHNA partners:

Golden Valley Memorial Healthcare

1600 N. 2nd St., Clinton, MO 64735

Phone: (660) 885-5511 CEO: Craig Thompson

About Us: Golden Valley Memorial Healthcare (GVMH) is a leading not-for-profit, healthcare organization with a 56-bed hospital, 24/7 emergency department, home health services, hospice services, rehabilitation and wellness services and physician and outpatient clinics in Clinton. We also have multi-specialty physician clinics in Osceola, Warsaw and Windsor. GVMH has more than 60 providers, 11 specialty areas, 850 employees and cares for approximately 1,000 people per day.

We are recognized as one of the best in the nation for our food service, home health services, safety, specialty clinics and state-of-the art medical equipment. Our expert team is dedicated to providing exceptional quality healthcare with friendliness and compassion.

Mission: To provide exceptional healthcare with friendliness and compassion.

Vision: Great people committed to innovative healthcare; recognized by our families, friends and neighbors as the provider and employer of choice.

Values:

QUALITY Golden Valley Memorial Healthcare (GVMH) is committed to providing exceptional care and services.

PROFESSIONALISM GVMH is a learning organization that maintains a competent, qualified and progressive staff.

ACCOUNTABILITY GVMH is committed to its responsibility to the community and the cost effective utilization of resources and financial soundness.

COMPASSION GVMH is a caring organization, valuing human dignity and quality of life.

EXCELLENCE GVMH is committed to providing an exceptional healthcare experience.

Please note that key operating priorities embodied in our updated mission, vision and values include:

- Our organizational commitment to the provision of exceptional care and services.
- Our commitment to providing care and service with friendliness and compassion.
- Our commitment to maintain a competent, qualified and progressive staff.
- The importance of fiscal responsibility and efforts to cost-effectively utilize resources and to maintain financial soundness.

Our updated mission, vision and values statements continue to provide a framework of operating priorities that help to guide and shape the behavior of everyone at GVMH on a day-to-day basis.

We have much to be proud of at GVMH. Together, we truly do provide exceptional health and wellness services with friendliness and compassion.

Services Directory:

- 2 East Surgical Unit/3 West -Medical Unit
- Birthing Center
- Botox
- Cancer Center
- Cardiac and Pulmonary Services
- Diabetes Education
- Diagnostic Imaging
- Emergency Services
- Endoscopy
- Food & Nutrition Services
- Home Services
- Hospice
- Intensive Care Unit
- Laboratory

- Medical Care Unit
- Patient & Staff Education
- Pediatrics
- Psychiatry
- Rehabilitation & Wellness
- Respiratory Therapy & EKG
- Sleep Lab
- Social Services
- Surgery
- Teleneonatology
- Teleneurology
- Urology
- Vascular Access
- Wound & Ostomy Clinic

Henry County Health Center

1800 Community Dr, Clinton, MO 64735

Phone: (660) 885-8193

Administrator: Peggy Bowles

What is public health?

Public Health is a sophisticated science for identifying and dealing with real or potential health threats to the community. Public Health's primary focus is to improve the health of communities, to prevent disease from occurring, and to save lives. HCHC does this through:

- Assessing and promoting health and safety through training and self-assessment
- Prevents or minimizes the occurrence of diseases and injuries through immunizations, community education, and nursing services
- Plans, prepares and responds to natural or man-made disasters
- Enforces public health laws and regulations

Mission: To protect the health and promote the wellness of the community

Compass Health Network: Co-locating service organizations in the same building makes it easier to work together to improve the overall health of individuals and families in Henry County.

Services:

- **WIC** (M-F 8am to 4:30pm Mon Evenings by Apt until 6:00pm)
 - Breastfeeding
 - Windsor Clinic
 - Lead Testing
- Nursing Services
 - o Flu Shots
 - Immunizations
 - STI / HIV Testing
 - TB Testing
- Community Programs
 - Car Seat Program

- Safe Cribs Program
- Daycare Provider Education
- o CPR / First Aid
- Vital Records
- o Emergency Preparedness
- Distracted Driving
- Environmental
 - Food Handler Cards
 - Food Permits
 - Food and Septic Training
 - o Regulations

Compass Health Network

1800 Community Dr, Clinton, MO 64735

Phone: (844) 853-8937

President / CEO: Tim Swinfard

About: Compass Health Network is a nonprofit health care organization that provides a full continuum of behavioral health services and supports as well as primary and dental health services throughout Missouri. Our roots trace back to 1974 when we first began strategizing ways to increase access to behavioral health care in Missouri. Since then, two leaders in the mental health field in Missouri, Jerry Osborne, founder of Pathways Community Health, and Karl Wilson, founder of Crider Health Center, worked tirelessly to build a complete continuum of behavioral health, substance use disorder, primary care, and dental services for those most in need. As those organizations merged in 2014 to include Royal Oaks Hospital, a state-of-the-art inpatient behavioral health facility, today's Compass Health Network is poised to help its customers achieve full, productive, healthy lives.

Compass Health Network takes a person-centered, integrated approach to caring for our customers. This health care model focuses on treating the whole person and is a collaboration of care involving the individual customer, personal providers and, when appropriate, family members. Our efficient, effective services are enhanced by data and technology to ensure customers receive evidence-based care delivered in the right way, at the right time, and in the right place.

Our Mission: Inspire Hope. Promote Wellness.

Our Vision: Full, Productive, Healthy Lives for Everyone

Crider Health Center: Crider Health Center, part of the Compass Health network, is committed to caring for its customers and their overall well-being as well as that of their families. Crider Health Center believes in a wrap-around philosophy.

In order to accomplish this approach, Crider Health Center forms partnerships in the community with other local agencies and governmental entities to not only take care of physical and behavioral health needs, but to also ensure that people have adequate and healthy nourishment, housing, and the skills that they need to achieve their fullest potential. By treating the whole person rather than just the symptoms of their illness, individuals are empowered to live full, productive, healthy lives.

Since 1979, Crider Health Center has been serving the behavioral health needs of Franklin, Lincoln, Warren, and St. Charles Counties. This is accomplished through a number of services including counseling, psychiatry, community support, crisis services and prevention services. The organization was initially developed to serve the increasing need for community behavioral health services in the four-county area.

In 2006, the Board of Directors voted to expand its services to include Primary Health Care and Dental Services. Crider Health Center merged with Pathways Community Health and Royal Oaks Hospital in October 2014 to form Compass Health. Together, these nonprofit organizations provide a full continuum of health care services including primary, behavioral and dental throughout Missouri and Louisiana with a focus on treating the whole person.

Royal Oaks Hospital: Royal Oaks Hospital, part of the Compass Health network, is a leader in the field of behavioral health care. Our experts are committed to providing the highest quality of care to our patients. Royal Oaks Hospital believes in the health and wellbeing of our patients, and it shows in the kind of care they receive.

There are dedicated, caring staff waiting to assist you at Royal Oaks Hospital. We have a long history helping men, women, children and families through the recovery process and on their way to a more fulfilling life. In October 2014, Royal Oaks Hospital, Pathways Community Health and Crider Health Center merged to form Compass Health. Together, these nonprofit organizations provide a full continuum of health care services including primary, behavioral and dental throughout Missouri and Louisiana with a focus on treating the whole person.

Services: Compass Health takes a "person centered, integrated approach" to your care that focuses on treating the whole person. It is a collaboration between individual patients, their personal providers, and when appropriate, their family. It is a true team approach that assists the person/family with learning techniques to help them manage their own illnesses and also focuses on ways to prevent the onset of illnesses. Efficient and effective care is enhanced by data and technology to assure that patients receive the care they need when and where they need it. Care is delivered in a culturally and linguistically appropriate manner.

- Community Based Behavioral Health Services and Support
- Crisis Services
- Dental
- Developmental Disabilities Support
- Family Medicine / Primary Care

- Outpatient Behavioral Health
- Pharmacy
- Residential Treatment
- Substance Use Disorders / Alcohol and Drug Treatment

II. Methodology

b) Collaborating CHNA Parties Continued

Consultant Qualifications

VVV Consultants LLC

Company Profile: 601 N. Mahaffie, Olathe, KS 66061 (913) 302-7264

Vince Vandehaar MBA, Principal Consultant & Adjunct (913) 302-7264 wvv@vandehaarMarketing.com

Vince provides professional business consulting services to help healthcare organizations with business strategy, research and development. Specifically, Vince facilitates strategic planning, creates proven marketing plans/tactics, prepares IRS aligned community health needs assessments and conducts both qualitative and quantitative market research studies.

Vince started his consulting firm (VVV Consultants LLC) on 1/1/2009, after working for Saint Luke's Health System of Kansas City for 16 years. (Note: Saint Luke's Hospital of KC, SLHS's largest hospital, won the Malcolm Baldrige National Quality Award in March of 2003). Prior to his experience at Saint Luke's, Vince worked in the payor and insurance industry for Blue Cross and Blue Shield of Kansas City; Tillinghast, a Tower's Perrin Actuarial Consulting Firm; and Lutheran Mutual Life Insurance Company.

Vince also is an Adjunct Professor teaching BA, MBA & MHA classes part time 20% of his time at Avila, Rockhurst and/or Webster University (Strategic Planning, Marketing, MHA Capstone, Marketing Research, Sales & Social Media classes) and consults the remainder of his time.

Vince is a Malcolm Baldrige coach and a professional focus group moderator. He is actively involved in the national Society for Healthcare Strategy & Market Development (SHSMD), KHA/MHA Marketing Associations, KC Employee Benefit Professional Association, Healthcare Executives Kansas City, the American Marketing Association KC Chapter and is a SG2 advocate.

Collaborating Support:

Tessa Taylor BBA BA - VVV Consultants LLC Lead Consultant

II. Methodology

c) CHNA and Town Hall Research Process

Wave #3 Community Health Needs Assessment (CHNA) process began in August 2019 for Golden Valley Memorial Healthcare, Compass Health Network, and Henry County Health Center (Henry and Benton County, MO) to meet IRS CHNA requirements.

In August, a meeting was called by GVMH, Compass and HCHC to review CHNA collaborative options. Note: VVV Consultants LLC from Olathe, KS was asked to facilitate this discussion with the following agenda: VVV CHNA experience, review CHNA requirements (regulations) and discuss CHNA steps/options to meet IRS requirements and to discuss next steps. Outcomes from discussion led to GVMH, Compass and HCHC requesting VVV Consultants LLC to complete a CHNA IRS aligned comprehensive report.

VVV CHNA Deliverables:

- Document Hospital Primary Service Area meets the 80-20 Patient Origin Rule.
- Uncover / document basic secondary research county health data, organized by 10 tabs.
- Conduct / report CHNA Community Check-in Feedback Findings (primary research).
- Conduct a Town Hall meeting to discuss with community secondary & primary data findings leading to determining (prioritizing) county health needs.
- Prepare & publish CHNA report which meets ACA requirements.

To ensure proper PSA Town Hall representation (that meets the 80-20 Patient Origin Rule), a patient origin three-year summary was generated documenting patient draw by zips as seen below:

	Golden Valley Memorial Healthcare - Clinton, MO Define Primary Service Area								
#									
	OVERALL	7,081	100%		2,532	2,284	2,265		
1	Henry, MO	3,911	55.2%	55.2%	1,380	1,252	1,279		
2	Benton, MO	1,488	21.0%	76.2%	537	494	457		
3	St. Clair, MO	757	10.7%	86.9%	247	250	260		
4	Bates, MO	234	3.3%	90.2%	99	70	65		
5	5 Johnson, MO 218 3.1% 93.3% 80 77 61								
6	6 Cass, MO 142 2.0% 95.3% 59 39 44								
So	urce: MHA PO	Reports -	Inpatier	nt Origin	by County	1			

Specific CHNA roles, responsibility and project timelines are documented by the following calendar.

CHNA Wave #3 for Henry and Benton Counties, MO on behalf of Golden Valley Memorial Hospital, Henry County Health Center and Compass Health Network

	Option C - Project Timeline and Roles 2019							
Step	Date (Start-Finish)	Lead	Task					
1	3/28/2019	VVV	Sent VVV quote for review.					
2	4/18/2019	Hosp	Select CHNA Option A/B/C. Approve and sign VVV CHNA quote.					
3	8/12/2019	VVV	Hold Kickoff call. Send out REQCommInvite Excel file. Hospital to fill in PSA stakeholders names, addresses and emails.					
4	8/12/2019	VVV	Request client to send MHA PO101, PO103 and TOT223 PO Reports for FFY 16, 17 and 18. In addition, request three year historical PSA IP/OP/ER/Clinic patient origin file (Use ZipPSA_3yrPOrigin.xls).					
5	On or before 8/23/2019	VVV	Prepare CHNA Wave #3 stakeholder feedback online link. Send text link for hospital review.					
6	On or before 8/23/2019	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming CHNA work. Hospital to place.					
7	On or before 8/23/2019	VVV / Hosp	Prepare Email request to Roster Stakeholders announcing online CHNA Wave #3 feedback. BCC email from Hospital Administration.					
8	By 9/4/2019	VVV	Launch and conduct online survey to stakeholders. Hospital Admin will e-mail announcement to participate to all stakeholders. (Survey to end October 4th, 2019)					
9	Sept-Oct	VVV	Assemble and complete secondary research. Find and populate 10 TABS. Create Town Hall PowerPoint for presentation.					
10	On or before 9/30/2019	Hosp	Prepare and send out community Town Hall invite letter and place local ad.					
11	On or before 10/1/2019	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming Town Hall. VVV will mock up PR release to media sources.					
12	TBD Week prior to Town Hall	All	Conduct conference call (time TBD) with hospital and health department to review Town Hall data and flow.					
13	Tuesday, October 15th, 2019 (5:30pm-7:00pm)	VVV	Conduct CHNA Town Hall from 5:30 p.m. to 7:00 p.m. at the Rotary Building (200 W Franklin St, Clinton, MO 64735). Review and discuss basic health data plus rank health needs.					
14	On or before 12/6/2019	VVV	Complete analysis. Release draft one and seek feedback from leaders at hospital and health department.					
15	On or before 12/20/2019	VVV	Produce and release final CHNA report. Hospital will post CHNA online.					
16	30 days prior to end of hospital fiscal year	TBD	Hold board meetings to discuss CHNA needs and create and adopt an Implementation Plan. Communicate CHNA plan to community.					

To meet IRS aligned CHNA requirements and meet Public Health accreditation criteria stated earlier, a four-phase methodology was followed:

Phase I—Discovery:

Conduct a 30-minute conference call with the CHNA county health department and hospital clients. Review / confirm CHNA calendar of events, explain / coach clients to complete required participant database and schedule / organize all Phase II activities.

Phase II—Qualify Community Need:

A) Conduct secondary research to uncover the following historical community health status for the primary service area. Use Missouri Hospital Association (MHA), Vital Statistics, Robert Wood Johnson Foundation: County Health Rankings, etc. to document current state of county health organized as follows:

TAB 1. Demographic Profile
TAB 2. Economic/Business Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospitalization / Providers Profile
TAB 6. Behavioral Health Profile
TAB 7. Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

B) Gather primary research (stakeholder feedback) to uncover public health needs, practices and perceptions for primary service areas.

Phase III—Quantify Community Need:

Conduct a 90-minute town hall meeting with required community primary service area residents. At each town hall meeting, CHNA secondary data will be reviewed, facilitated group discussion will occur and a group ranking activity to determine the most important community health needs was administered.

<u>Phase IV—Complete Data Analysis and Create Comprehensive Community Health Needs Assessment:</u>

Post CHNA report findings to meet both PHAB and IRS CHNA criteria.

After consideration of CHNA stakeholders (sponsoring county health department and hospital), the CHNA Option C was selected with the following project schedule:

Phase I: Discovery	Aug 2019
Phase II: Secondary / Primary Research	Sept 2019
Phase III: Town Hall Meeting	Oct 15 th , 2019
Phase IV: Prepare / Release CHNA report	Dec 2019

Detail CHNA Development Steps Include:

Development Steps to Create Comprehensive					
Commur	Community Health Needs Assessment				
Step # 1 Commitment	Determine interest level of area healthcare leaders (Hospital, Health Dept., Mental Health Centers, schools, churches, physicians etc.), prepare project quote.				
Step # 2 Planning	Prepare brief CHNA Project Work Calendar - list goals, objectives, purpose, outcome, roles, community involvement, etc. Hold community kick-off meeting.				
Step # 3 Secondary Research	Collect and report community health published facts. Gather data health practice data from published secondary research sources (i.e. census, county health records, behavioral risk factors surveillance, etc.)				
Step # 4a Primary Research - Town Hall prep	Collect community opinions. (quantitative research). Gather stakeholders / community opinions regarding community health needs and healthcare practices.				
Step # 4b Primary Research - Conduct Town Hall	Conduct "Conversation with Community" Town Hall (qualitative research). Review secondary & primary data findings. Facilitate community conversation to build consensus; discuss opinions / identify health needs.				
Steps # 5 Reporting	Prepare and present comprehensive CHNA report (to community leaders), facilitate development of CHNA Implementation Plan (actions to improve health). (Note: formal report will follow IRS Notice 2011-52 regs & PHAB requirements.)				
/VV Consultants, LLC Olathe, KS (913) 302-7264					

Overview of Town Hall Community Priority Setting Process

Each community has a wealth of expertise to be tapped for CHNA development. For this reason, a town hall is the perfect forum to gather community insight and provide an atmosphere to objectively consensus build and prioritize county health issues.

All Town Hall priority-setting and scoring processes involve the input of key stakeholders in attendance. Individuals and organizations attending the Town Halls were critically important to the success of the CHNA. The following list outlines partners invited to Town Hall: local hospital, public health community, mental health community, free clinics, community-based clinics, service providers, local residents, community leaders, opinion leaders, school leaders, business leaders, local government, faith-based organizations and persons (or organizations serving them), people with chronic conditions, uninsured community members, low income residents and minority groups.

Henry and Benton County, MO town hall meeting was held on Tuesday, October 15th, 2019 from 5:30 p.m. to 7:00 p.m. at the Clinton Rotary Building (200 W Franklin St, Clinton, MO 64735). Vince Vandehaar facilitated this 1 ½ hour session with forty-three (43) attendees. (Note: a detailed roster of Town Hall attendees is listed in Section V a).

The following Town Hall agenda was conducted:

- 1. Welcome & Introductions
- 2. Review Purpose for the CHNA Town Hall & Process Roles
- 3. Present / Review of Historical County Health Indicators (10 TABS)
- 4. Facilitate Town Hall participant discussion of data (probe health strengths / concerns). Reflect on size and seriousness of any health concerns cited and discuss current community health strengths.
- Engage Town Hall participants to rank health needs (using 4 dots to cast votes on priority issues). Tally & rank top community health concerns cited.
- 6. Close meeting by reflecting on the health needs / community voting results. Inform participants on "next steps."

At the end of each Town Hall session, VVV encouraged all community members to continue to contribute ideas to both hospital / health department leaders via e-mail or personal conversations. NOTE: To review detail Town Hall discussion content, please turn to Section V for detailed notes of session and activity card content reporting strengths & items to change or improve.



Community Health Needs Assessment (CHNA) Town Hall Discussion Agenda Opening / Introductions (10 mins) **Review CHNA Purpose and Process (10 mins) Review Current County "Health Status"** -Secondary Data by 10 TAB Categories -Review Community Feedback Research (35 mins) **IV. Collect Community Health Perspectives** -Hold Community Voting Activity

-Determine Most Important Health Areas (30 mins) v. Close / Next Steps (5 mins)



Town Hall Participation (You)

- ALL attendees welcome to share Parking Lot
- There are no right or wrong answers
- Only one person speaks at a time
- Please give truthful responses
- Have a little fun along the way

4

2

I. Introductions: A Conversation with the Community

Community members and organizations invited to CHNA Town Hall

CONSUMERS: Uninsured/underinsured people, Members of at-risk populations, Parents, caregivers and other consumers of health care in the community, and Consumer advocates.

Community leaders and groups: The hospital organization's board members, Local clergy and congregational leaders, Presidents or chairs of civic or service clubs - Chamber of Commerce, veterand organizations, Lions, Rotary, etc., Representatives from businesses – owners/(ECS) of large businesses (local or large corporations with local branches-,Business people & merchants (e.g., who self tobacco, alcohol, or other drugs), Representatives from organized labor, Political, appointed and elected officials, Foundations, United Way organizations. And other 'Community leaders', Soundations, United Way organizations. And other 'Community leaders'.

Public and other organizations: Public health officials, Directors or staff of health and human service organizations, City/Community planners and development officials, Individuals with business and economic development experience, Weifard and social service agency staff, Mousing advocates - administrators of housing programs: homeless shelters, Jouricome-family housing and senior housing Education officials and staff - school superintendents, principals and teachers, Public safety officials, Staff from state and area agencies on aging, Law enforcement agencies - Chiefs of police, Local colleges and universities, Coalitions working on health or other issues.

Other providers: Physicians, Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services, Leaders from Catholic Charities and other faith-based service providers, Mental health providers, Oral health providers, Health insurers, Parish and congregational nursing programs, Other health professionals

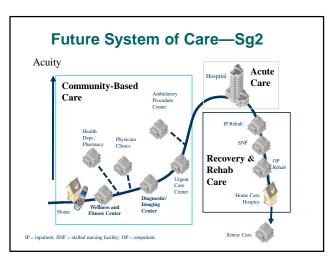
II. Review CHNA Definition

- A Community Health Needs Assessment (CHNA) is a systematic collection, assembly, analysis, and dissemination of information about the health of the community. (NOTE: Some the data has already been collected / published by Local, State and Federal public health organizations. Some data will be collected today.)
- A CHNA's role is to identify <u>factors</u> that affect the health of a population and <u>determine the</u> <u>availability of resources</u> to adequately address those factors.

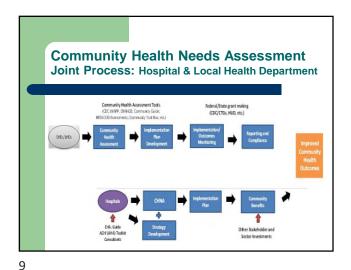
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Purpose—Why Conduct a CHNA?

- To determine health-related trends and issues of the community
- To understand / evaluate health delivery programs in place.
- To meet Federal requirements both local hospital and health department
- To develop strategies to address unmet health needs (4-6 weeks after Town Hall)



7





10

12

III. Review Current County Health Status:
Secondary Data by 10 Tab Categories & State Rankings

Trends: Good Some Poor

TAB 1. Demographic Profile
TAB 2. Economic/Business Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospitalization / Providers Profile
TAB 6. Behavioral Health Profile
TAB 7. Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

11

County Health Rankings Robert Wood Johnson Foundation and University of WI Health Institute

Length of Life (50%)

Quality of Life (50%)

Quality of Life (50%)

Tobacco Use
Diet & Exercise
(30%)

Alcohol & Drug Use
Sexual Activity

Clinical Care
(20%)

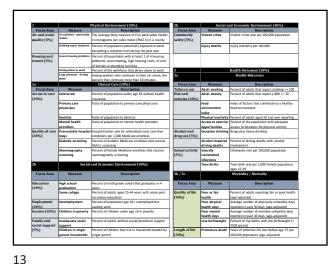
Cuality of Care

Education
Employment
Income
Family & Social Support
Community Safety

Physical
Environment
(10%)

Policies & Programs

Court healt being model 2 2014 (MY):



IV. Collect Community Health Perspectives Ask your opinion. Your thoughts?

- 1) Today: What are the strengths of our community that contribute to health?
- 2) Today: Are there healthcare services in your community / neighborhood that you feel need to be improved and / or changed?
- 3) Tomorrow: What is occurring or might occur that would affect the "health of our community?"

14

Have We Forgotten Anything? A.Aging Services м.Hospice N.Hospital Services **B.Chronic Pain Management** c.Dental Care/Oral Health o.Maternal, Infant & Child Health **D.Developmental Disabilities** P.Nutrition E.Domestic Violence, R.Pharmacy Services F.Early Detection & Screening s.Primary Health Care **G.Environmental Health** т.Public Health q.Exercise u.School Health н.Family Planning v Social Services I.Food Safety w.Specialty Medical Care Clinics J.Health Care Coverage x.Substance Abuse к.Health Education Y.Transportation L.Home Health z. Other

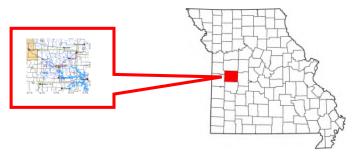


15 16

II. Methodology

d) Community Profile (A Description of Community Served)

Henry County, Missouri Community Profile



The population of Henry County was estimated to be 22,106 citizens in 2019 and a population density of 32 persons per square mile. Clinton County's major cities are Blairstown, Brownington, Calhoun, Clinton, Deepwater, Hartwell, La Due, Montrose, Tightwad, Urich and Windsor.

Henry County (MO) Public Airports¹

Name	USGS Topo Map
Brownsberger Airport	Johnstown
Clinton Regional Airport	Gaines
Ferros Ranch-Aero	Clinton North
George Bud Church Memorial Hospital Heliport	Clinton North

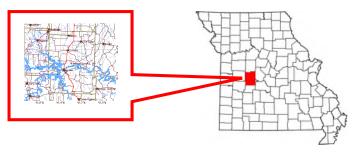
Henry County (MO): Public Schools²

Name	Address	Phone	Levels
	409 S College		
Calhoun Elem	Calhoun, MO 65323	660-694-3422	K-6
	409 S College		
Calhoun High	Calhoun, MO 65323	660-694-3412	7-12
	600 E Clinton		
Clinton Middle	Clinton, MO 64735	660-885-3353	6-8
	1106 S 2nd St		
Clinton Sr High	Clinton, MO 64735	660-885-2247	9-12
	227 SW Hwy T		
Davis Elem	Clinton, MO 64735	660-885-2629	K-8
	809 S 8th St		
Henry Elem	Clinton, MO 64735	660-885-5585	PK-2
	823 SE Hwy 7		
Leesville Elem	Clinton, MO 64735	660-477-3406	K-8
	307 E 2nd St		
Montrose Elem	Montrose, MO 64770	660-693-4812	PK-8
	307 E 2nd St		
Montrose High	Montrose, MO 64770	660-693-4812	9-12
	1193 N Hwy 13		
Shawnee Elem	Chillhowee, MO 64733	660-885-3620	K-8
	501 S Main St		
Windsor Elem	Windsor, MO 65360	660-647-5621	PK-6
	210 North St		
Windsor High	Windsor, MO 65360	660-647-3106	7-12

 $^{^{1}\} https://missouri.hometownlocator.com/features/countyfeatures,scfips,29083,c,henry.cfm$

² https://missouri.hometownlocator.com/mo/henry/

Benton County, Missouri Community Profile



The population of Benton County was estimated to be 19,629 citizens in 2019 and a population density of 28 persons per square mile. Benton County's major cities are Cole Camp, Ionia, Lincoln, and Warsaw.

Benton County (MO) Public Airports³

Name	USGS Topo Map
Lincoln Municipal Airport	Lincoln
Miller Airport	Climax Springs
Warsaw Municipal Airport	Lincoln SE

Benton County (MO): Public Schools⁴

Name	Address	Phone	Levels
	500 Keeney St		
Cole Camp Elem	Cole Camp, MO 65325	660-668-3011	K-4
	500 Keeney St		
Cole Camp High	Cole Camp, MO 65325	660-668-3751	9-12
	500 Keeney St		
Cole Camp Middle	Cole Camp, MO 65325	660-668-3505	5-8
	20363 Land of Champions		
John Boise Middle	Warsaw, MO 65355	660-438-1750	6-8
	101 W Lamine St		
Lincoln Elem	Lincoln, MO 65338	660-547-2222	K-6
	101 W Lamine St		
Lincoln High	Lincoln, MO 65338	660-547-3514	7-12
	134 W Kosciusko St		
North Elem	Warsaw, MO 65355	660-438-6260	3-5
	12947 Hwy 7		
Ruth Mercer Elem	Warsaw, MO 65355	660-438-7222	K-2
	23395 Hwy 7		
South Elem	Edwards, MO 65326	660-438-5965	PK-5
	20363 Land of Champions		
Warsaw High	Warsaw, MO 65355	660-438-7351	9-12

 $^{^{3}\} https://missouri.hometownlocator.com/features/cultural, class, airport, scfips, 29015.cfm$

⁴ https://missouri.hometownlocator.com/mo/benton/

	ERSI Demographics - Henry Co (MO)												
				!	Population		Н	ousehol	ds	Per Capita			
Zip	Name	ST	County	YR 2018	YR 2023	Chg.	YR 2018	YR 2023	Size	Inc 18			
64726	Blairstown	MO	HENRY	483	475	-1.7%	193	190	3	\$20,223			
64735	Clinton	MO	HENRY	13331	13019	-2.3%	5760	5643	2	\$25,924			
64739	Creighton	MO	HENRY	982	982	0.0%	395	396	2	\$25,500			
64740	Deepwater	MO	HENRY	1599	1531	-4.3%	708	680	2	\$23,443			
64770	Montrose	MO	HENRY	740	700	-5.4%	343	325	2	\$24,262			
64788	Urich	MO	HENRY	1082	1034	-4.4%	461	440	2	\$22,526			
65323	Calhoun	MO	HENRY	1045	1032	-1.2%	418	412	3	\$27,301			
65360	Windsor	MO	HENRY	4607	4489	-2.6%	1762	1710	3	\$21,115			
Totals				23,869	23,262	-2.5%	10,040	9.796	2	\$23,787			
				,	,	,	. 0, 0.0	-,	_	Ψ=0,.0.			
Zip	Name	ST	County	Pop18 65+		Females	White	-,	Amer. Ind.				
Zip 64726	Name Blairstown	ST MO	County HENRY										
				Pop18 65+	Pop18 <=18	Females	White	Black	Amer. Ind.	Hisp.			
64726	Blairstown	MO	HENRY	Pop18 65+ 90	Pop18 <=18 115	Females 242	White 461	Black 0	Amer. Ind.	Hisp. 20			
64726 64735	Blairstown Clinton	MO MO	HENRY HENRY	Pop18 65+ 90 3166	Pop18 <=18 115 2960	Females 242 6881	White 461 12578	Black 0 242	Amer. Ind. 0 90	Hisp. 20 322			
64726 64735 64739	Blairstown Clinton Creighton	MO MO MO	HENRY HENRY HENRY	90 3166 167	Pop18 <=18 115 2960 215	Females 242 6881 480	White 461 12578 953	Black 0 242 6	Amer. Ind. 0 90 5	Hisp. 20 322 19			
64726 64735 64739 64740	Blairstown Clinton Creighton Deepwater	MO MO MO	HENRY HENRY HENRY HENRY	90 3166 167 480	Pop18 <=18 115 2960 215 259	Females 242 6881 480 793	White 461 12578 953 1545	Black 0 242 6 7	90 5	Hisp. 20 322 19 36			
64726 64735 64739 64740 64770	Blairstown Clinton Creighton Deepwater Montrose	MO MO MO MO MO	HENRY HENRY HENRY HENRY	90 3166 167 480 168	Pop18 <=18 115 2960 215 259 159	242 6881 480 793 364	White 461 12578 953 1545 718	Black 0 242 6 7 11	90 5 16	Hisp. 20 322 19 36 7			
64726 64735 64739 64740 64770 64788	Blairstown Clinton Creighton Deepwater Montrose Urich	MO MO MO MO MO MO	HENRY HENRY HENRY HENRY HENRY HENRY	90 3166 167 480 168 212	Pop18 <=18 115 2960 215 259 159 258	Females 242 6881 480 793 364 552	White 461 12578 953 1545 718 1038	Black 0 242 6 7 11 8	90 5 16 0	Hisp. 20 322 19 36 7 30			
64726 64735 64739 64740 64770 64788 65323	Blairstown Clinton Creighton Deepwater Montrose Urich Calhoun	MO MO MO MO MO MO MO MO	HENRY HENRY HENRY HENRY HENRY HENRY HENRY	90 3166 167 480 168 212 208	Pop18 <=18 115 2960 215 259 159 258 253	Females 242 6881 480 793 364 552 503	White 461 12578 953 1545 718 1038 1011	Black 0 242 6 7 11 8 1	Amer. Ind. 0 90 5 16 0 7 6	Hisp. 20 322 19 36 7 30 17			

	ERSI Demographics - Benton Co (MO)												
					Population		H	ousehol	ds	Per Capita			
Zip	Name	ST	County	YR 2018	YR 2023	Chg.	YR 2018	YR 2023	Size	Inc 18			
65325	Cole Camp	MO	BENTON	3093	3063	-1.0%	1255	1240	2	\$23,603			
65326	Edwards	MO	BENTON	2085	2083	-0.1%	1016	1012	2	\$28,185			
65335	Ionia	MO	BENTON	332	338	1.8%	142	144	2	\$25,617			
65338	Lincoln	MO	BENTON	3158	3180	0.7%	1321	1329	2	\$21,230			
65355	Warsaw	MO	BENTON	10600	10743	1.3%	4817	4872	2	\$23,293			
Totals				19,268	19,407	0.7%	8,551	8,597	2	\$24,386			
Zip	Name	ST	County	Pop18 65+	Pop18 <=18	Females	White	Black	Amer. Ind.	Hisp.			
65325	Cole Camp	MO	BENTON	740	681	1563	3000	0	23	61			
65325 65326	Cole Camp Edwards	MO MO	BENTON BENTON	740 742	681 270	1563 1016	3000 2002	0 13	23 15	61 38			
				_									
65326	Edwards	МО	BENTON	742	270	1016	2002		15	38			
65326 65335	Edwards Ionia	MO MO	BENTON BENTON	742 59	270 84	1016 164	2002 315	13 1	15 0	38 23			
65326 65335 65338	Edwards Ionia Lincoln	MO MO MO MO	BENTON BENTON	742 59 874	270 84 674	1016 164 1631	2002 315 3032	13 1 14	15 0 25	38 23 73			

III. Community Health Status

[VVV Consultants LLC]

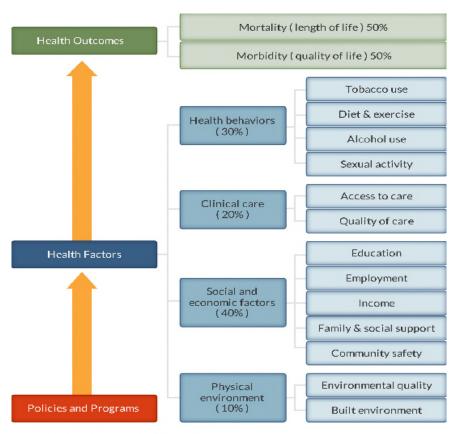
III. Community Health Status

a) Historical Health Statistics- Secondary Research

Health Status Profile

This section of the CHNA reviews published quantitative community health indicators from public health sources and results of community primary research. To produce this profile, VVV Consultants LLC staff analyzed & trended data from multiple sources. This analysis focuses on a set of published health indicators organized by ten areas of focus (10 TABS), results from the 2019 RWJ County Health Rankings and conversations from Town Hall participates. Each table published reflects a Trend column, with GREEN denoting growing/high performance indicators, YELLOW denoting minimal change/average performance indicators and RED denoting declining/low performance indicators.

Note: The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to release annual *County Health Rankings*. As seen below, RWJ's model use a number of health factors to rank each county.>



County Health Rankings model ©2012 UWPHI

National Research – Year 2019 RWJ Health Rankings:

#	2019 MO Rankings - 115 Counties	Definitions	Henry Co MO	Benton Co MO	Rural 20 MO Norms
1	Health Outcomes		95	90	47
	Mortality	Length of Life	100	93	51
	Morbidity	Quality of Life	69	73	44
2	Health Factors		54	86	53
	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activitiy	53	41	50
	Clinical Care	Access to care / Quality of Care	33	67	65
	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	75	97	49
3	Physical Environment	Environmental quality	26	67	60
htt	p://www.countyhealthrankings.o	rg, released 2019			
R	ural 20 MO Norms: Lewis, Marior	n, Monroe, Pike, Ralls, Shelby, Cass	, Johnson, Pettis	s, Lafayette, He	nry, Benton, St.

Rural 20 MO Norms: Lewis, Marion, Monroe, Pike, Ralls, Shelby, Cass, Johnson, Pettis, Lafayette, Henry, Benton, S Clair, Bates, Venon, Cedar, Clinton, DeKalb, Caldwell, Daviess.

PSA Secondary Research:

When studying community health, it's important to document health data by topical areas for primary service area (PSA). Below is a summary of key findings organized by subject area.

Tab 1 Demographic Profile

Understanding population and household make-up is vital to start CHNA evaluation.

Tab		Health Indicator	Henry Co MO	Trend	Benton Co MO	MO State	Rural 20 MO Norm	Source
1a	а	Population estimates, July 1, 2017, (V2017)	21,718		19,074	6,113,532	23,322	People Quick Facts
	b	Population, percent change - April 1, 2010 (estimates base) to July 1, 2017, (V2017)	-2.5%		0.1%	2.1%	-1.3%	People Quick Facts
	С	Population per square mile, 2010	32		27	87	37	People Quick Facts
	d	Persons under 5 years, percent, July 1, 2017, (V2017)	6.1%		4.4%	6.1%	5.9%	People Quick Facts
	е	Persons 65 years and over, percent, July 1, 2017	21.7%		30.5%	16.5%	19.8%	People Quick Facts
	f	Female persons, percent, July 1, 2017, (V2017)	50.9%		49.9%	50.9%	49.2%	People Quick Facts
	g	White alone, percent, July 1, 2017, (V2017)	95.7%		96.7%	83.1%	94.2%	People Quick Facts
		Black or African American alone, percent, July 1, 2017, (V2017)	1.3%		0.5%	11.8%	2.8%	People Quick Facts
	i	Hispanic or Latino, percent, July 1, 2017, (V2017)	2.4%		2.1%	4.2%	2.7%	People Quick Facts
	j	Foreign born persons, percent, 2013-2017	1.3%		0.6%	4.0%	1.4%	People Quick Facts
	k	Language other than English spoken at home, percent of persons age 5 years+, 2013-2017	2.5%		1.8%	6.0%	3.7%	People Quick Facts
		Living in same house 1 year ago, percent of persons age 1 year+, 2013-2017	84.2%		83.7%	84.3%	85.0%	People Quick Facts
	m	Children in single-parent households, percent, 2019	37.0%		28.0%	33.0%	29.3%	County Health Rankings
	n	Total Veterans, 2013-2017	2,368		2,177	424,605	2,005	People Quick Facts

Tab 2 Economic/Business Profile

Monetary resources will (at times) drive health "access" and self-care.

Tab		Health Indicator	Henry Co MO	Trend	Benton Co MO	MO State	Rural 20 MO Norm	Source
2	а	Per capita income in past 12 months (in 2017 dollars), 2013-2017	\$24,371		\$20,163	\$28,282	\$23,290	People Quick Facts
	b	Persons in poverty, percent, 2017	16.1%		17.2%	13.4%	14.7%	People Quick Facts
	С	Total Housing units, July 1, 2017, (V2017)	10,970		14,209	2,792,506	10,685	People Quick Facts
	d	Total Persons per household, 2012-2016	2.3		2.3	2.5	2.4	People Quick Facts
	е	Severe housing problems, percent, 2010-2014	85.0%		76.0%	82.0%	80.3%	County Health Rankings
	f	Total of All firms, 2012	2,213		1,802	491,606	1,845	People Quick Facts
	g	Unemployment, percent, 2019	4.2%		5.2%	3.8%	4.0%	County Health Rankings
	h	Food insecurity, percent, 2019	15.0%		15.0%	15.0%	13.9%	County Health Rankings
	i	Limited access to healthy foods, percent, 2019	14.0%		5.0%	7.0%	8.2%	County Health Rankings
	j	Long commute - driving alone, percent, 2019	31.0%		40.0%	32.0%	34.4%	County Health Rankings

Tab 3 Educational Profile

Currently, school districts are providing on-site primary health screenings and basic care.

Tab		Health Indicator	Henry Co MO	Trend	Benton Co MO	MO State	Rural 20 MO Norm	Source
3		Children eligible for free or reduced price lunch, percent, 2019 (All Districts)	60.0%		80.0%	51.0%	54.2%	County Health Rankings
	b	Number of Head Start Programs, 2018	2		1	379	3	US Dept of Health & Human Services, Admin for Children and Families
		High school graduate or higher, percent of persons age 25 years+, 2013-2017	87.9%		84.5%	89.2%	87.7%	People Quick Facts
	d	Bachelor's degree or higher, percent of persons age 25 years+, 2013-2017	15.9%		11.6%	28.2%	17.0%	People Quick Facts

Tab 4 Maternal and Infant Profile

Tracking maternal / infant care patterns are vital in understanding the foundation of family health.

Missouri Resident Births (MICA)											
County	2015	2016	2017	Trend							
Henry County	250	259	235								
Benton County	171	158	171								
Missouri	75,042	74,664	73,017								
Source: DHSS - MOPHIMS	- Birth MICA										

Tab 4 Maternal and Infant Profile (Continued)

Tab		Health Indicator	Henry Co MO	Trend	Benton Co MO	MO State	Rural 20 MO Norm	Source
4	а	Percent of Births Where Prenatal Care began in First Trimester, 2017 (rate per 100)	76.2%		73.3%	72.5%	73.5%	MOPHIMS
	b	Percentage of Preterm Births, 2013-2017 (rate per 100)	9.2%		8.7%	10.4%	9.1%	MOPHIMS
	C	Percent of Births with Low Birth Weight, 2013-2017 (rate per 100)	8.4%		7.5%	8.4%	7.3%	MOPHIMS
	a	Percent of WIC Infants- Ever Breastfed, percent, 2016 (rate per 100)	71.3%		76.5%	73.0%	74.3%	морнімѕ
	e	Percent of all Births Occurring to Teens (15-17), 2013- 2017 (rate per 100)	2.6%		2.6%	1.6%	1.6%	морнімѕ
	l t	Percent of Births Occurring to Unmarried (out-of- wedlock) women, 2013-2017 (rate per 100)	43.9%		42.3%	40.2%	37.5%	MOPHIMS
	a	Percent of births Where Mother Smoked During Pregnancy, 2013-2017 (rate per 100)	28.9%		28.2%	14.5%	19.4%	MOPHIMS

Tab 5 Hospitalization/Provider Profile

Understanding provider access and disease patterns are fundamental in healthcare delivery. Listed below are several vital county statistics.

Tab		Health Indicator	Henry Co MO	Trend	Benton Co MO	MO State	Rural 20 MO Norm	Source
5	а	Primary care physicians (MD or DO) (Pop Coverage per County officed doctor), 2019	1,440:1		3,770:1	1,420:1	3,370:1	County Health Rankings
	b	Preventable hospital stays - Rate of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees (lower the better), 2017.	75		71	57	69	County Health Rankings
		Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)	74.0%		72.0%	73.0%	68.4%	CMS Hospital Compare, 10/1/2015-9/30/2016
		Patients Who Reported Yes, They Would Definitely Recommend the Hospital	67.0%		68.0%	71.0%	67.3%	CMS Hospital Compare, 10/1/2015-9/30/2016
		Average Time Patients Spent in the ER. before seen by a HC Professional (in Minutes)	68		31	46	45	CMS Hospital Compare, 10/1/2015-9/30/2016

Tab 5 Hospitalization/Provider Profile (Continued)

Inpatient Utilization -3 year trend	Не	enry Co	MO	Ве	nton Co	МО
MHA Inpatient Utilization	YR18	YR17	YR16	YR18	YR17	YR16
Overall - County Inpatients	3,649	3,795	3,537	2,947	2,981	2,959
Pediatric Age 0-17	504	503	469	313	293	291
Adult Medical/Surgical Age 18-44	678	662	689	433	433	447
Adult Medical/Surgical Age 45-64	872	1,003	893	665	747	768
Adult Medical/Surgical Age 65-74	673	774	683	678	692	674
Adult Medical/Surgical Age 75+	922	853	803	858	816	779
MHA Inpatient Utilization	YR18	YR17	YR16	YR18	YR17	YR16
Golden Valley Only	1,282	1,336	1,191	543	474	456
% GVMH - County Share only	35.1%	35.2%	33.7%	18.4%	15.9%	15.4%
Pediatric Age 0-17	202	195	151	76	64	52
Adult Medical/Surgical Age 18-44	284	272	251	111	80	79
Adult Medical/Surgical Age 45-64	244	287	227	113	115	128
Adult Medical/Surgical Age 65-74	183	240	202	104	98	104
Adult Medical/Surgical Age 75+	369	342	360	139	117	93

Tab 6 Behavioral Profile

Behavioral healthcare provides another important indicator of community health status.

Tab		Health Indicator	Henry Co MO	Trend	Benton Co MO	MO State	Rural 20 MO Norm	Source
6	а	Depression: Medicare Population, percent, 2015	18.5%		17.8%	20.0%	16.7%	Centers for Medicare and Medicaid Services
	b	Age-adjusted Suicide Mortality Rate per 100,000 population, 2014-2016 (lower is better)	18.8		20.0	18.5	15.5	World Bank
	С	Poor mental health days, 2019	4.6		4.7	4.4	4.4	County Health Rankings

Tab 6 Behavioral Profile (Continued)

Opioid Prescription Rate per 100 – 2017 (Henry Co =130.6 Benton Co =97.3 MO =71.8)



Tab 7a Risk Indicators & Factors Profile

Knowing community health risk factors and disease patterns can aid in the understanding next steps to improve health.

Tab		Health Indicator	Henry Co MO	Trend	Benton Co MO	MO State	Rural 20 MO Norm	Source
7a	а	Adult obesity, percent, 2019	31.0%		34.0%	32.0%	34.2%	County Health Rankings
	b	Adult smoking, percent, 2019	22.0%		22.0%	22.0%	21.1%	County Health Rankings
	С	Excessive drinking, percent, 2019	16.0%		14.0%	19.0%	17.0%	County Health Rankings
	d	Physical inactivity, percent, 2019	27.0%		27.0%	25.0%	27.9%	County Health Rankings
	е	Poor physical health days, 2019	4.7		4.8	4.2	4.5	County Health Rankings
	f	Sexually transmitted infections, rate per 100k, 2019	262.2		166.0	507.0	273.9	County Health Rankings

Tab 7b Risk Indicators & Factors Profile

Tab		Health Indicator	Henry Co MO	Trend	Benton Co MO	MO State	Rural 20 MO Norm	Source
7b	а	Hypertension: Medicare Population, 2015	51.4%		52.3%	54.6%	52.1%	CMS
	b	Hyperlipidemia: Medicare Population, 2015	32.6%		43.1%	41.8%	38.2%	CMS
	С	Heart Failure: Medicare Population, 2015	14.4%		14.0%	13.7%	13.8%	CMS
	d	Chronic Kidney Disease: Medicare Pop, 2015	13.9%		13.1%	18.2%	15.6%	CMS
	е	COPD: Medicare Population, 2015	15.8%		16.7%	13.4%	14.5%	CMS
	f	Atrial Fibrillation: Medicare Population, 2015	8.1%		8.8%	8.2%	8.6%	CMS
	g	Cancer: Medicare Population, 2015	6.6%		8.0%	7.8%	7.3%	CMS
	h	Osteoporosis: Medicare Population, 2015	3.0%		4.0%	5.8%	4.6%	CMS
	i	Asthma: Medicare Population, 2015	8.0%		8.7%	8.6%	8.1%	CMS
	j	Stroke: Medicare Population, 2015	3.5%		4.3%	3.9%	3.7%	CMS

Tab 8a Uninsured Profile Community Benefit

Based on state estimations, the number of insured is documented below. Also, the amount of charity care (last three years of free care) from area providers is trended below.

Tab		Health Indicator	Henry Co MO	Trend	Benton Co MO	MO State	Rural 20 MO Norm	Source
8	а	Uninsured, percent, 2019	12.0%		14.0%	11.0%	12.3%	County Health Rankings
	l b	Percent of Insured Pop Receiving Medicaid, 2013- 2017	24.9%		25.0%	16.3%	18.9%	US Census Bureau, American Community Survey. 2013-17

Compass Health Network	YR 2018	YR 2017	YR 2016
Compass Charity Care (MO Counties Service Area)	\$11,379,000	\$2,590,000	\$2,195,000
**FY 2019 Henry and Benton County: \$2,241,000			
Henry County Health Center	YR 2018	YR 2017	YR 2016
Community Nursing Services Provided	\$27,737	\$42,066	\$44,915

	Golden Valley Memorial Hospital	YR 2018 *	YR 2017	YR 2016		
1	Bad Debt	\$12,176,635	\$10,976,426	\$10,446,248		
2	Charity Care	\$3,261,153	\$3,508,442	\$3,624,286		
	* Note - our Charity Care has decreased with bad debt increasing. We feel this is partly due to ACA					
	insurance. We also have quite a bit of uncompensated care related to our Medicaid patients.					

Henry County Health Center gives back to the community as well, listed below:

So	Source: Internal Records - 2019						
	Community Dollars- Henry County Health Center	YR 2018	YR 2017	YR 2016			
1	Immunizations/Vaccine Counts	607	614	816			
2	Screenings: STD Testing and Medications	78	47	51			
3	Counts	357	255	215			
4	Vaccine - received from State	665	800	1932			
5	Child Care Inspections	15	12	18			
6	Waste Water Services	92	106	73			
7	TB Testing and Reading	624	325	318			
8	Blood Pressures Done	56	22	73			
10	WIC Clients Served	5479	5614	6440			
11	Food Inspections	365	346	365			
12	Community Health Events	8	2	2			
13	Car Seats Installed in Auto	56	21	15			
14	Safe Cribs Installed in Home	23	16	1			

Tab 9 Mortality Profile

The leading causes of county deaths are listed below.

Tab		Health Indicator	Henry Co MO	Trend	Benton Co MO	MO State	Rural 20 MO Norm	Source
9	а	Life Expectancy for Males, 2014	74.1		74.4	74.9	75.0	World Bank
	b	Life Expectancy for Females, 2014	78.7		78.9	80.1	79.9	World Bank
	С	Alcohol-impaired driving deaths, percent, 2019	21.0%		29.0%	29.0%	25.3%	County Health Rankings

Causes of Death by County of Residence, MO 2016	Henry Co MO	%	Benton Co MO	%
TOTAL County	282	100%	297	100%
Diseases of heart	85	30.1%	64	21.5%
Malignant neoplasms	61	21.6%	88	29.6%
All other diseases	36	12.8%	32	10.8%
Cerebrovascular diseases	16	5.7%	15	5.1%
Chronic lower respiratory disease	15	5.3%	27	9.1%
Unintentional injuries	13	4.6%	7	2.4%
Alzheimer's disease	13	4.6%	10	3.4%
Motor vehicle crashes	6	2.1%	0	0.0%
Diabetes mellitus	5	1.8%	14	4.7%
Other unintentional injuries	5	1.8%	3	1.0%
Influenza and pneumonia	4	1.4%	3	1.0%
Nephritis and nephrosis	4	1.4%	9	3.0%
Parkinson's disease	4	1.4%	2	0.7%
Septicemia	4	1.4%	5	1.7%
Pneumonitis due to solids and liquids	4	1.4%	3	1.0%
https://health.mo.gov/data/vitalstatistics/mvs	16/Table 26c.pd	f		

Tab 10 Preventive Quality Measures Profile

The following table reflects future health of the county. This information also is an indicator of community awareness of preventative measures.

Tab		Health Indicator	Henry Co MO	Trend	Benton Co MO	MO State	Rural 20 MO Norm	Source
10	а	Access to exercise opportunities, percent, 2019	51.0%		30.0%	76.0%	46.0%	County Health Rankings
	b	Diabetes monitoring, percent, 2019	39.0%		43.0%	43.0%	39.3%	County Health Rankings
	С	Mammography screening, percent, 2019	33.0%		35.0%	44.0%	34.9%	County Health Rankings
	П	Percent Annual Check-Up Visit with PCP (Have a regular Doctor), 2016	81.2%		84.4%	NA	79.1%	MO Department of Health and Senior Services, MO Co-Level Study (CLS). 2016.
	ıе	Percent Annual Check-Up Visit with Dentist (Within last 12 months), 2016	50.0%		47.3%	NA	55.9%	MO Department of Health and Senior Services, MO Co-Level Study (CLS). 2016.
	f	Percent Annual Check-Up Visit with Eye Doctor	NA		NA	NA	NA	TBD

b) Online Research- Health Status

PSA Primary Research:

For each CHNA Wave # 3 evaluation, a community stakeholder survey has been created and administered to collect "current" healthcare information for Henry and Benton County, Missouri. Responses for Cherokee County online survey equals 381 residents. Below are multiple charts reviewing survey demographics.

Chart #1 – Henry and Benton County, MO Online Feedback Response N=381

Community Health Needs Assessment Wave #3						
	Henry & Benton		Rural Norms			
For reporting purposes, are you involved in or	Counties MO	Trend	35 Co			
are you a ?	(N=381)		N=6,353			
Business / Merchant	5.1%		10.9%			
Community Board Member	4.6%		8.6%			
Case Manager / Discharge Planner	1.5%		1.3%			
Clergy	0.5%		1.4%			
College / University	2.0%		2.4%			
Consumer Advocate	1.5%		1.9%			
Dentist / Eye Doctor / Chiropractor	0.3%		0.6%			
Elected Official - City/County	1.5%		2.0%			
EMS / Emergency	1.3%		2.5%			
Farmer / Rancher	3.8%		6.4%			
Hospital / Health Dept	20.6%		19.0%			
Housing / Builder	0.5%		0.7%			
Insurance	0.3%		1.1%			
Labor	1.0%		2.2%			
Law Enforcement	0.5%		1.6%			
Mental Health	2.8%		2.7%			
Other Health Professional	15.7%		11.5%			
Parent / Caregiver	15.2%		16.9%			
Pharmacy / Clinic	3.3%		2.4%			
Media (Paper/TV/Radio)	0.0%		0.5%			
Senior Care	1.8%		2.9%			
Teacher / School Admin	9.6%		6.9%			
Veteran	1.5%		3.0%			
Unemployed / Other	5.1%		8.2%			

Rural 35 Norms Include the following counties: Appanoose IA, Atchison KS, Barton, Bates MO, Benton MO, Brown KS, Butler KS, Carroll IA, Cass MO, Clinton MO, Cowley, Decatur IA, Dickinson KS, Edwards, Ellsworth KS, Fremont IA, Furnas NE, Hays, Henry MO, Hoxie, Jasper IA, Johnson MO, Kiowa, Linn, Marion MO, Miami, Montgomery KS, Nemaha, Osborne, Page IA, Pawnee, Pike MO, Russell KS, Smith, Trego.

Chart #2 - Quality of Healthcare Delivery Community Rating

Community Health Needs Assessment Wave #3						
How would you rate the "Overall Quality" of healthcare delivery in our community?	Henry & Benton Counties MO (N=381)	Trend	Rural Norms 35 Co N=6,353			
Top Box %	13.9%		21.1%			
Top 2 Boxes %	63.3%		64.9%			
Very Poor	0.8%		1.2%			
Poor	4.5%		5.8%			
Average	30.2%		27.6%			
Good	49.3%		43.8%			
Very Good	13.9%		21.1%			

Chart #3 – Overall Community Health Quality Trend

Community Health Needs Assessment Wave #3						
When considering "overall community health quality", is it	Henry & Benton Counties MO (N=381)	Trend	Rural Norms 35 Co N=6,353			
Increasing - moving up	50.1%		40.8%			
Not really changing much	28.1%		39.1%			
Decreasing - slipping	11.0%		11.2%			

Chart #4 - Re-evaluate Past Community Health Needs Assessment Needs

	CHNA Wave #3 - Year 2019		Benton (N=3		nties MO
	Past CHNAs health needs identified	Ongoir	ng Prob	lem	Pressing
#	Торіс	Votes	%	Trend	RANK
1	Drug Abuse	225	81.8%		1
2	Awareness of Mental Health specialty services	167	60.7%		2
3	Improve quality of Nursing Homes	151	54.9%		3
4	Obesity	132	48.0%		6
5	Emergency Department	121	44.0%		5
6	Economic Development	108	39.3%		4
7	Healthcare Transportation	108	39.3%		8
8	Urgent Care Services	94	34.2%		7
9	Services for Autistic Children and Adults	91	33.1%		12
10	Smoking	88	32.0%		10
11	Visiting Specialists	77	28.0%		9
12	Oral Surgeon Services	75	27.3%		14
13	Increase # of Dentists who take Medicaid	72	26.2%		11
14	Encourage Parental Guidance	70	25.5%		13
15	Expand Community Wellness Education	66	24.0%		15
16	Pediatric Care Services	40	14.6%		16

Chart #5 - Community Health Needs Assessment "Causes of Poor Health"

Community Health Needs Assessment Wave #3				
In your opinion, what are the root causes of "poor health" in our community?	Henry & Benton Counties MO (N=381)	Trend	Rural Norms 35 Co N=6,353	
Finance & Insurance Coverage*	27.1%		15.5%	
Lack of awareness of existing local programs, providers, and services	12.8%		17.6%	
Limited access to mental health assistance	17.7%		16.7%	
Elder assistance programs	7.1%		9.0%	
Lack of health & wellness education	8.9%		11.4%	
Family assistance programs	6.5%		7.3%	
Chronic disease prevention	10.7%		10.4%	
Case management assistance	4.3%		6.8%	
Other (please specify)	4.9%		5.3%	
Note: *Finance & Insurance Coverage Norm is for 21 counties.				

Chart #6 – Community Rating of HC Delivery Services (Perceptions)

CHNA Wave #3 - 2019	Henry & Benton Counties MO (N=381)		Counties MO				orms 35 =6,353
How would our community rate each of the following?	Top 2 boxes	Bottom 2 boxes	Trend	Top 2 boxes	Bottom 2 boxes		
Ambulance Services	72.8%	6.0%		84.9%	2.6%		
Child Care	47.5%	13.0%		50.0%	12.0%		
Chiropractors	58.0%	7.8%		73.2%	5.1%		
Dentists	71.6%	4.9%		63.2%	13.8%		
Emergency Room	34.0%	32.1%		66.0%	12.2%		
Eye Doctor/Optometrist	80.5%	3.1%		75.2%	6.8%		
Family Planning Services	45.9%	12.9%		39.9%	17.7%		
Home Health	75.7%	3.0%		58.8%	9.7%		
Hospice	85.0%	1.1%		70.9%	6.2%		
Inpatient Services	73.5%	3.9%		72.8%	6.2%		
Mental Health	26.3%	36.3%		23.9%	35.9%		
Nursing Home	12.9%	41.8%		42.1%	19.4%		
Outpatient Services	80.2%	2.7%		74.1%	4.5%		
Pharmacy	87.9%	0.4%		87.3%	2.4%		
Physician Clinics	82.5%	1.9%		76.4%	5.2%		
Public Health	51.8%	9.4%		58.3%	8.7%		
School Nurse	66.0%	4.9%		63.5%	7.8%		
Specialists	63.8%	7.8%		57.6%	12.6%		

Chart #7 – Community Health Readiness

Community Health Needs Assessment Wave #3	Botte	om 2	boxes
Community Health Readiness is vital. How would you rate each of the following? (% Poor / Very Poor)	Henry & Benton Counties MO (N=381)	Trend	Rural Norms 35 Co N=6,353
Early Childhood Development Programs	6.9%		10.2%
Emergency Preparedness	9.1%		9.1%
Food and Nutrition Services/Education	10.0%		14.2%
Health Screenings (asthma, hearing, vision, scoliosis)	13.2%		14.8%
Immunization Programs	5.6%		6.8%
Obesity Prevention & Treatment	43.0%		33.7%
Prenatal / Child Health Programs	3.7%		11.5%
Sexually Transmitted Disease Testing	16.3%		16.3%
Spiritual Health Support	11.1%		11.9%
Substance Use Treatment & Education	38.1%		34.4%
Tobacco Prevention & Cessation Programs	30.2%		30.0%
Violence Prevention	36.8%		32.8%
Women's Wellness Programs	10.8%		16.3%
WIC Nutrition Program	3.3%		6.6%
Poverty / Financial Health*	40.5%		36.3%

Chart #8 – Healthcare Delivery "Outside our Community"

Community Health I	Spec SPÉC	ialties: CTS			
In the past 2 years, did you or	Henry & Benton		Rural Norms	SURG	28
someone you know receive HC outside of our community?	Counties MO (N=381)	Trend	35 Co N=6,353	CARD ONC	16 14
Yes	76.4%	TTCTIC	81.2%	OBG PEDS	11 11
No	17.3%		13.7%	ORTH	10 10
I don't know	6.3%		5.1%	CANC	9

Chart #8 – Healthcare Delivery "Outside our Community" (Continued)

Community Health Needs Assessment Wave #3				
Are we actively working together to address community health?	Henry & Benton Counties MO (N=381)	Trend	Rural Norms 35 Co N=6,353	
Yes	56.7%		47.4%	
No	7.5%		12.4%	
l don't know	35.3%		39.8%	

Chart #9 - What Healthcare topics need to be discussed in future Town Hall Meeting

Community Health Needs Assessment Wave #3				
What needs to be discussed further at our	Henry & Benton		Rural Norms	
CHNA Town Hall meeting?	Counties MO		35 Co	
Crina rown rian meeting:	(N=381)	Trend	N=6,353	
Abuse/Violence	7.2%		5.6%	
Alcohol	4.4%		4.8%	
Breast Feeding Friendly Workplace	1.6%		1.7%	
Cancer	3.0%		3.7%	
Diabetes	2.9%		4.2%	
Drugs/Substance Abuse	9.5%		9.4%	
Family Planning	2.9%		2.7%	
Heart Disease	2.1%		3.0%	
Lead Exposure	0.9%		0.8%	
Mental Illness	9.8%		10.4%	
Nutrition	4.0%		4.7%	
Obesity	6.4%		7.6%	
Environmental Health	2.6%		1.5%	
Physical Exercise	4.1%		5.7%	
Poverty	7.9%		7.1%	
Lung Disease	1.4%		1.7%	
Sexually Transmitted Diseases	2.4%		2.4%	
Smoke-Free Workplace	0.9%		1.5%	
Suicide	7.3%		7.2%	
Teen Pregnancy	4.7%		3.2%	
Tobacco Use	4.1%		3.6%	
Vaccinations	2.2%		2.9%	
Water Quality	3.0%		3.3%	
Wellness Education	4.7%		5.9%	

IV. Inventory of Community Health Resources

Cat Healthcare Services Offered in County: Yes / No Hospital Health Other		Inventory of Healthcare Services - GVMH PSA				
Hosp Ambulatory Surgery Centers	Cat	Healthcare Services Offered in County: Yes / No	Hospital		Other	
Hosp	Clinic	Primary Care	Х		Х	
Hosp	Hosp	Alzheimer Center			Х	
Hosp						
Hosp			X			
Hosp Birthing / LDR / LDR P Room						
Hosp Breast Cancer Services						
Hosp Burn Care						
Hosp						
Hosp			i e			
Hosp						
Hosp			x			
Hosp Chaplaincy / Pastoral Care			1		X	
Hosp Chemotherapy					Х	
Hosp						
Hosp						
Hosp Diagnostic Radioisotope Facility x Hosp Diagnostic / Invasive Catheterization Hosp Electron Beam Computed Tomography (EBCT) Hosp Enrollment Assistance x x x x Hosp Extracorporeal Shock Wave Lithotripter (ESWL) Hosp Fertility Clinic Hosp Fertility Clinic Hosp Full Field Digital Mammography (FFDM) x x Hosp Genetic Testing / Counseling Hosp Geriatric Services x x x x x Hosp Heart Services x x x x x Hosp Hemodialysis x x Hosp Hil/ AIDS Services Hosp Image-Guided Radiation Therapy (IGRT) Hosp Intensity-Modulated Radiation Therapy (IMRT) 161 Hosp Intensive Care Unit Hosp Intermediate Care Unit Hosp Intermediate Care Unit Hosp Interventional Cardiac Catheterization Hosp Isolation Room x x Hosp Lung Services x x Hosp Lung Services x x Hosp Lung Services x x Hosp Mammograms x x x Hosp Mammograms x x x Hosp Mobile Health Services x x Hosp Mobile Health Services x x Hosp Multi-slice Spiral Computed Tomography (<64 Slice CT) Hosp Neonals Services x x Hosp Neonals Services x x Hosp Neonals Services x x Hosp Neurological services x x Hosp Obstetrics Services x x					Y	
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Hosp Diagnostic / Invasive Catheterization Hosp Electron Beam Computed Tomography (EBCT) Hosp Entrollment Assistance K X X X Hosp Extracorporeal Shock Wave Lithotripter (ESWL) Hosp Fertility Clinic Hosp Full Field Digital Mammography (FFDM) K X X X Hosp Genetic Testing / Counseling Hosp Geriatric Services K X X X Hosp Heart Services Hosp Hemodialysis Hosp HIV / AIDS Services Hosp Inpatient Acute Care Services Hosp Intensity-Modulated Radiation Therapy (IMRT) 161 Hosp Internediate Care Unit Hosp Interwentional Cardiac Catheterization Hosp Isolation Room Kidney Services Hosp Liver Services K X X Hosp Liver Services K X X Hosp Liver Services K X X X Hosp Magnetic Resonance Imaging (MRI) Hosp Magnetic Resonance Imaging (MRI) Hosp Multi-slice Spiral Computed Tomography (<64 Slice CT) Hosp Multi-slice Spiral Computed Tomography (644 Slice CT) Hosp Neurological services K X X X X Hosp Neurological services K X X X X X X Hosp Neurological services K X X X X X X X X X X X X X X X X X X						
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Hosp Neurological services x Hosp Obstetrics Services x						
Hosp Obstetrics Services x			v			

Inventory of Healthcare Services - GVMH PSA				
Cat	Healthcare Services Offered in County: Yes / No	Hospital	Health Dept.	Other
Hosp	Oncology Services	x		
Hosp	Orthopedic Services	х		
Hosp	Outpatient Surgery	х		
Hosp	Pain Management	х		
Hosp	Palliative Care Program	х		Х
Hosp	Pediatric Services	х		Х
Hosp	Physical Rehabilitation	х		
Hosp	Positron Emission Tomography (PET)			
Hosp	Positron Emission Tomography / CT (PET / CT)	х		
	Psychiatric Services			Х
Hosp	Radiology, Diagnostic	х		
	Radiology, Therapeutic	х		
	Reproductive Health			
Hosp	Robotic Surgery			
	Shaped Beam Radiation System 161			
Hosp	Single Photon Emission Computerized Tomography			
	Sleep Center	х		
	Social Work	х	Х	Х
	Sports Medicine	х		
	Stereotactic Radiosurgery	х		
Hosp	Swing Bed Services	х		
Hosp	Transplant Services			
Hosp	Trauma Center -Level IV			
	Ultrasound	х		Х
Hosp	Women's Health Services	х		Х
Hosp	Wound Care	х		
SR	Adult Day Care Program			Х
SR	Assisted Living			Х
SR	Home Health	х		Х
SR	Hospice			Х
SR	Long-term Care			Х
SR	Nursing Home			Х
SR	Retirement Housing			Х
SR	Skilled Nursing Care	х		Х
ER	Emergency Services	х		
ER	Urgent Care Center			
ER	Ambulance Services	Х		X
SERV	Alcoholism-Drug Abuse Services			х
SERV	Blood Donor Center	Х		
	Chiropractic Services			Х
SERV	Complementary Medicine Services	Х	Х	Х
	Dental Services			X
	Fitness Center	X		X
	Health Education Classes	X		X
CEDV	Health Fair	х		Х
SERV	Health Information Center Health Screenings	Х	Х	X

	Inventory of Healthcare Services - GVMH PSA					
Cat	Healthcare Services Offered in County: Yes / No	Hospital	Health Dept.	Other		
SERV	Meals on Wheels			x		
SERV	Nutrition Program	х	Х	x		
SERV	Patient Education Center	х	Х	Х		
SERV	Support Groups	X		X		
SERV	Teen Outreach Services			X		
SERV	Tobacco Treatment / Cessation Program	X		X		
SERV	Transportation to Health Facilities	X		X		
SERV	Wellness Program	X		X		

Providers Delivering Care - Henry and Benton Co GVMH - Primary Service Area FTE Allied Staff FTE Physicians FTE Providers Working in PSA FTE MD / DO Visiting DR* FTE NP / PA **Primary Care: Family Practice** 18.0 Internal Medicine / Geriatrics 4.0 Obstetrics / Gynecology 3.0 **Pediatrics** 2.0 Medicine Specialists: Allergy / Immunology Cardiology 1.0 Dermatology 8.0 Endocrinology Gastroenterology 1.0 0.2 Oncology / Radiology 1.0 Infectious Disease Nephrology 8.0 0.2 Neurology 0.6 0.2 **Psychiatry** 1.0 **Pulmonary** 0.2 Rheumatology Surgery Specialists: General Surgery / Colon / Oral 3.2 Neurosurgery 0.1 Ophthalmology 1.0 Orthopedics 1.0 Otolaryngology 1.0 Plastic / Reconstructive Surgery Thoracic / Cardiovascular / Vascular Surgery 0.2 Urology 1.0 0.2 **Hospital Based:** Anesthesia / Pain Management 1.2 0.0 **Emergency Medicine** 4.2 0.0 Radiology 2.2 **Pathology** 1.0 Hospitalist 2.0 2.0 Neonatology / Perinatology Physical Medicine / Rehabilitation Occupational Medicine 1.0 **Podiatry** Chiropractic Optometry 0.6 Dental 0.6 **TOTALS** 49.8 6.7 0.0

^{*}FTE Specialists serving the community whose office is outside the PSA.

VISITING SPECIALISTS TO GVMH - 2019					
Specialty	Physician Name	Office Location	Days per Month		
Cardiology	Blackburn, Timothy	Kansas City, MO	16		
Cardiology	Cope, Casey (NP)	Kansas City, MO	16		
Cardiology	Hilbrenner, Jo (NP)	Kansas City, MO	8		
Cardiology	Rios, David	Kansas City, MO	4		
Dermatology	Tonkovic-Capin, V	Kansas City, MO	7		
Nephrology	Bender, Walter	Kansas City, MO	8		
Oncology	Cox, Sandra	Kansas City, MO	8		
Oncology	Singh, Jaswinder	Kansas City, MO	8		
Pulmonary	Alshami, Hamza	Kansas City, MO	1		
Pulmonary	Balmaceda, Daniel	Kansas City, MO	1		
Pulmonary	Beary, William	Kansas City, MO	1		
Pulmonary	Chacey, Michael	Kansas City, MO	1		
Pulmonary	Kincaide, Kathryn (NP)	Kansas City, MO	4		
Vascular Surgery	Cameron, Jeffrey	Kansas City, MO	1		

Henry and Benton Counties, Missouri Healthcare Resources Directory

Emergency Numbers

Police/Sheriff	911
Fire	911
Ambulance	911

Non-Emergency Numbers

	Sheriff	Ambulance
Clinton	(660) 885-7021	(660) 890-7180
Warsaw	(660) 438-6135	, ,

Other Rural Non-Emergency Numbers

Clinton Police	(660) 885-6121
Warsaw Police	(660) 438-5262
Clinton Fire	(660) 885-2560

Hospitals

Golden Valley Memorial Healthcare 1600 N. Second St. Clinton, MO 64735 660-885-5511

Clinics

Clinton

Cardiology

Cardiology Clinic, Cardiac Care 1600 N. Second Clinton, MO 64735

Dermatology

Viseslav Tonkovic, MD Dermatology Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-890-8171

Ear, Nose and Throat / Otolaryngology

Richard H. Woodland, DO Ear, Nose and Throat/Otolaryngology Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-890-8171

Family Practice

Brendan P. Bagley, MD Family Practice Golden Valley Medical – Clinton 1602 North Second Street Clinton, MO 64735 660-885-8171

Brian K. Bellamy, MD Family Practice Golden Valley Medical – Clinton 1602 North Second Street Clinton, MO 64735 660-885-8171

Bruce G. Bellamy, MD Family Practice Golden Valley Medical – Clinton 1602 North Second Street Clinton, MO 64735

660-885-8171

Amie Christensen-Etters, MD Family Practice 1602 North Second Street Clinton, MO 64735 660-885-8171

Crystal L. Jones, M.D. Family Practice 1602 North Second Street Clinton, MO 64735 660-885-8171

Stephanie A. Lersch, M.D. Family Practice 1602 North Second Street Clinton, MO 64735 660-885-8171

Elizabeth A. Logan, DO Family Practice 1602 North Second Street Clinton, MO 64735 660-885-8171

Manik Mehra, MD Family Practice Golden Valley Medical – Clinton 1602 North Second Street Clinton, MO 64735 660-885-8171

Mark P. Snell, DO Family Medicine Golden Valley Medical – Clinton 1602 North Second Street Clinton, MO 64735 660-885-8171

Bradley M. Townsend, MD Family Practice Clinton Medical Clinic 1413 S. 2nd St Clinton, MO 64735 660-885-7776

Michelle Brown, FNP-BC Family Practice Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Heather Dains, FNP-BC Family Practice Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Taylor Lincoln, FNP Family Practice Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Brenda Messer, NP Family Practice Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Laura Noble, FNP-BC Family Practice Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

General Surgery

Sunanda G. Ghosh, MD General Surgery Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Gus S. Wetzel, MD General Surgery Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Rob Wetzel, MD General Surgery Golden Valley Medical – Clinton 1602 North Second Street Clinton, MO 64735 660-885-8171

Hospitalists

Jose Moonjely Davis, M.D. Golden Valley Memorial Hospital 1600 North Second Street Clinton, MO 64735 660-885-5511 Stephen Malutich, D.O. Golden Valley Memorial Hospital 1600 North Second Street Clinton, MO 64735 660-885-5511

Internal Medicine

James C. Clouse, DO, FACIO-FACNP Internal Medicine Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Erik M. Miller, D.O. Internal Medicine Golden Valley Medical – Warsaw 1771 Commercial Warsaw, MO 65355 660-438-5193

Alice Ruttinger, DO, FACOI Internal Medicine Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Mark D. Vogt, DO, FACP Internal Medicine Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Neurology

Rebecca Fredrich, NP Neurology Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Obstetrics and Gynecology

Pamela McCool, DO Obstetrics and Gynecology Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-890-8427

Gary W. Taney, MD Obstetrics and Gynecology Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-890-8427

Renee Baker, FNP-BC OB/GYN Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-890-8171

Oncology

Oncology Clinic Golden Valley Memorial Healthcare – Outpatient Treatment Center 1600 N. Second Clinton, MO 64735 660-890-7266

Ophthalmology

E. Glenn Sanford, M.D. Ophthalmology Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Orthopedic Surgery

Andrew Rendoff, Physician Assistant Orthopedic Surgery Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

James L. Womack, MD Orthopedic Surgery Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Pain Management

Pain Management 1600 N. Second Clinton, MO 64735 660-885-5511

Pediatrics

Aften Anderson, MD Pediatrics Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-890-8443

Jamie Ball, M.D.
Pediatrics
Golden Valley Medical – Clinton
1602 North Second Street
Clinton, MO 64735

Emily Baker, FNP-BC Pediatrics Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-890-8443

Podiatry

Garrett J. Child, DPM Golden Valley Medical – Clinton 1602 N. Second Clinton, MO 64735 660-885-8171

Psychiatry

Aneel Ursani, M.D. Golden Valley Medical – Clinton 1602 North Second Street Clinton, MO 64735 660-885-8171

Pulmonology

Pulmonology Clinic Golden Valley Memorial Healthcare 1600 N. Second Clinton, MO 64735 660-890-7194

Urology

Joseph Myers, M.D. Urology 1602 N. Second Clinton, MO 64735 660-890-8512

Wound Care

Wound / Skin Care Clinic Golden Valley Memorial Healthcare 1600 N. Second Clinton, MO 647353 660-890-7245

Warsaw

Family Medicine with Obstetrics

Drew A. Smith, MD Family Medicine with Obstetrics Golden Valley Medical – Warsaw 1771 Commercial Warsaw, MO

Family Practice

Amber B. Campbell, DO Family Practice Golden Valley Medical – Warsaw 1771 Commercial Warsaw, MO 65355 660-438-5193

Erik M. Miller, DO Family Practice Golden Valley Medical – Warsaw 1771 Commercial Warsaw, MO 65355 660-438-5193

Leah Rogers, PA-C Physician Assistant Golden Valley Medical – Warsaw 1771 Commercial Warsaw, MO 65355 660-438-5193

enda Jones, FNP-BC Physician Assistant Golden Valley Medical – Warsaw 1771 Commercial Warsaw, MO 65355 660-438-5193

Michael Becker, PA Physician Assistant Golden Valley Medical – Warsaw 1771 Commercial Warsaw, MO 65355 660-438-5193

Elizabeth Dawson, FNP-BC Golden Valley Medical – Warsaw 1771 Commercial Warsaw, MO 65355 660-438-5193

Windsor

Family Practice

Jennifer Blair, D.O. Family Practice with OB Golden Valley Medical – Windsor 100 S. Tebo Windsor, MO 65360 660-647-2147

Katie Terry, FNP-BC Family Practice Golden Valley Medical – Windsor 100 S. Tebo Windsor, MO 65360 660-647-2147

Elizabeth Elwell, NP Family Practice Golden Valley Medical – Windsor 100 S. Tebo Windsor, MO 65360 660-647-2147

Children and Youth

Boys and Girls Town National Hotline 1-800-448-3000 www.girlsandboystown.org

Child / Adult Abuse and Neglect Hotline 800-922-5330

Child Abuse National Hotline 800-422-4453 800-222-4453 (TDD) www.childhelp.org

Child Abuse National Hotline 1-800-4-A-CHILD (422-4453) www.childabuse.com

Children and Youth with Special Health Care Needs – Henry County Health Center 660-885-8193

Child Find of America 1-800-426-5678

Child Help USA National Child Abuse Hotline 1-800-422-4453 National Runaway Switchboard 1-800-RUNAWAY www.1800runaway.org/

National Society for Missing and Exploited Children 1-800-THE-LOST (843-5678) www.missingkids.com

Parents Anonymous Help Line 800-345-5044 http://www.parentsanonymous.org/palndex 10.html

Runaway Line 800-621-4000 800-621-0394 (TDD) http://www.1800runaway.org/

Eye Doctors

Eyecare Specialties 1104 E. Ohio Street Clinton, MO 660-885-7116

Parks Optical 106 W. Jefferson Street Clinton, MO 64735 660-885-2800

Wal-Mart Supercenter - Clinton 1712 E. Ohio Street Clinton, MO 64735 660-885-5536

Sedalia Eye Associates 103 Cottonwood Street Warsaw, MO 65355

Wal-Mart Supercenter – Warsaw 1712 E. Ohio Street Clinton, MO 64735 660-885-5536

Dentists

Dr. Robert J. Sexauer, DDS 2000 Gaines Drive Clinton, MO 64735 660-885-6933

Groff Dental Studio 1100 E. Ohio Street Clinton, MO 64735 660-885-6911 Clinton Family Dentistry 1200 E. Ohio Street Clinton, MO 64735 660-885-3632

University Park Orthodontics 702 E. Ohio Street Clinton, MO 6735 660-885-6944

Bernard T Henehan, DDS 2000 Gaines Drive Clinton, MO 64735 660-885-6991

Bouland Bruck & Housh 906 E. Ohio Street Clinton, MO 64735 660-885-6114

John R. Bailey, DDS 2000 Gaines Drive Clinton, MO 64735 660-885-3391

James Cowsert, DDS 211 S. Main Street Clinton, MO 64735 660-885-2741

Dr. Merlin Eaton & Dr Patrick Lancaster 1631 Commercial Street Warsaw, MO 65355 660-438-5139

James E. Spring, DDS 601 Commercial Street Warsaw, MO 65355 660-438-7355

Stephanie Eaton 1631 Commercial Street Warsaw, MO 65355 660-438-5139

Paul Griner, DDS 106 E. Colt Street Windsor, MO 65360 660-647-3133

Disability Services

American Disability Group 877-790-8899

American Association of People with Disabilities (AAPD) www.aapd.com

American Council for the Blind 1-800-424-8666 www.acb.org

Americans with Disabilities Act Information Hotline 1-800-514-0301 1-800-514-0383 (TTY) www.ada.gov

National Center for Learning Disabilities 1-888-575-7373 www.ncld.org

National Library Services for Blind & Physically Handicapped www.loc.gov/nls/ 1-800-424-8567

Environment

Environmental Services, Food Inspections, Septic Inspections, Water Testing, Lead Testing – Henry County Health Center 660-885-8193

Environmental Protection Agency 1-800-223-0425 913-321-9516 (TTY) www.epa.gov

Fitness Centers

Clinton Community Center 1004 E. Sedalia Avenue 660-885-2181

GVMH Wellness Center - Windsor 100 S. Tebo Street Windsor, MO 65360 660-647-4000

Food and Drug

Center for Food Safety and Applied Nutrition 1-888-SAFEFOOD (723-3366) www.cfsan.fda.gov/ www.healthfinder.gov/

US Consumer Product Safety Commission 800-638-2772 800-638-8270 (TDD) www.cpsc.gov

USDA Meat and Poultry Hotline 1-888-674-6854 1-800-256-7072 (TTY) www.fsis.usda.gov/

U.S. Food and Drug Administration 1-888-INFO-FDA 1-888-463-6332 www.fsis.usda.gov/

Health Departments

Henry County Health Center 1800 Community Drive, Suite A Clinton, MO 64735 660-885-8193 www.henrycohealth.org

Benton County Health Dept. 1238 Commercial Street Warsaw 660-438-2876

Home Health

GVMH Home Services 1617 N. Second 660-885-5088

Hospice

GVMH Hospice 725 E. Ohio St. Clinton, MO 64735 660-890-2014

Twin Lakes Hospice - Warsaw 304 W. Main St. Warsaw, MO 65355 660-438-9700

Legal Services

Missouri Attorney General's Office Supreme Court Building 207 W. High St. P.O. Box 899 Jefferson City, MO 65102 573-751-3321 Fax: 573-751-0774

Medicaid

U.S. Department of Health and Human Services

Centers for Medicare and Medicaid Services 800-MEDICARE (800-633-4227) or 877-486-2048 (TTY) www.cms.hhs.gov

Medicare

Social Security Administration 1612 Imperial Drive West Plains, MO 65775 1-866-614-2741 1-800-772-1213 TTY: 1-800-325-0778

Office Hours: Monday - Friday:

09:00 Am - 03:30 Pm

Mental Health Services

Pathways / Compass Health 1800 Community Drive Clinton, MO 64735 660-885-8131

Royal Oaks Hospital 307 N. Main Street Windsor, MO 65360 660-647-2182

Missouri Department of Mental Health 573-751-4122 1-800-364-9687 Fax: 573-751-8224

Mental Health America 1-800-969-6MHA (969-6642)

National Alliance for the Mentally III Helpline 1-800-950-6264 703-516-7227 (TTY) www.nami.org

National Institute of Mental Health 1-866-615-6464 1-866-415-8051 (TTY) www.nimh.nih.gov

Suicide Prevention Hotline 1-800-SUICIDE [784-2433] www.hopeline.com

National and State Agencies

Missouri Child Abuse Hotline Toll-Free: 800-392-3738 Local: 573-751-3448

Missouri Coalition Against Domestic and Sexual Violence 217 Oscar Dr., Suite A Jefferson City, MO 65101 573-634-4161

National Domestic Violence Hotline 800-799-7233 www.ndvh.org www.thehotline.org

National Sexual Assault Hotline 800-656-4673

Federal Bureau of Investigation St. Louis Office 2222 Market Street St. Louis, MO 314-231-4324

Federal Bureau of Investigation 866-483-5137

Missouri Road Conditions MoDOT Central Office 105 W. Capitol Avenue Jefferson City, MO 65102 1-888 ASK MODOT (1-888-275-6636)

Poison Control Center 800-222-1222 www.aapcc.org

Suicide Prevention Hotline 800-SUICIDE 800-442-HOPE http://hopeline.com 800-273-TALK www.suicidepreventionlifeline.com

Toxic Chemical and Oil Spills 800-424-8802

Alcohol and Drug Treatment Programs

A 1 A Detox Treatment 1-800-757-0771

Recovery Connection 1-800-993-3869

Able Detox-Rehab Treatment 1-800-577-2481 (NATIONAL)

Abuse Addiction Agency 1-800-861-1768 www.thewatershed.com

Al-Anon Family Group 1-888-4AL-ANON (425-2666) www.al-anon.alateen.org

Alcohol and Drug Abuse Hotline 800-ALCOHOL

Alcohol and Drug Addiction Treatment Programs 1-800-510-9435

Alcohol and Drug Helpline 1-800-821-4357

Alcoholism/Drug Addiction Treatment Center 800-477-3447

Mothers Against Drunk Driving 1-800-GET-MADD (438-6233) www.madd.org

National Council on Alcoholism and Drug Dependence, Inc. 1-800-NCA-CALL (622-2255) www.ncadd.org

National Health Services

AIDS / HIV Center for Disease Control and Prevention 800-CDC-INFO 888-232-6348 (TTY) http://www.cdc.gov/hiv/

AIDS/STD National Hot Line 800-342-AIDS 800-227-8922 (STD line)

American Health Assistance Foundation 800-437-2423 www.ahaf.org

American Heart Association 800-242-8721 www.americanheart.org American Lung Association 800-586-4872

American Stroke Association 1-888-4-STROKE www.american heart.org

Center for Disease Control and Prevention 800-CDC-INFO 888-232-6348 (TTY) http://www.cdc.gov/hiv/

Elder Care Helpline www.eldercarelink.com Eye Care Council 800-960-EYES www.seetolearn.com

National Health Information Center 800-336-4797 www.health.gov/nhic

National Cancer Information Center 800-227-2345 866-228-4327 (TTY) www.cancer.org

National Institute on Deafness and Other Communication Disorders Information Clearinghouse 800-241-1044 800-241-1055 (TTY) www.nidcd.nih.gov

Nutrition

American Dietetic Association 1-800-877-1600 www.eatright.org

American Dietetic Association Consumer Nutrition Hotline 800-366-1655

Missouri Coordinated School Health Coalition P.O. Box 309 Columbia, MO 65205 info@healthykidsmo.org

WIC and Nutrition Services Clinton Location: 660-885-8193 573-751-6204 800-392-8209 Fax: 573-526-1470 info@health.mo.gov Community Food and Nutrition Assistance 573-751-6269 800-733-6251 CACFP@health.mo.gov

Pharmacy

Summers Pharmacy 605 E. Pawnee Ave. Clinton, MO 660-885-3034

CVS 1501 E. Ohio St. Clinton, MO 64735 660-890-0707

Wal-mart - Clinton 1712 E. Ohit St. Clinton, MO 64735 660-885-5536

Walgreen's 412 Pawnee Dr. Clinton, MO 64735 660-885-4020

Merryfield Pharmacy 200 W. Benton St. Windsor, MO 65360 660-647-2134

J&D Truecare Pharmacy 1330 Commercial Warsaw, MO 65355 660-438-7331

Wal-Mart - Warsaw 103 W .Polk St. Warsaw, MO 65355 660-438-2207

Boring's Rexall Drug 161 W. Main St. Warsaw, MO 65355 660-438-7331

Rehab

GMMH Rehab & Wellness 1200 E. Ohio St. Clinton, MO 64735 660-890-7190 SERC 109 W. Franklin Clinton, MO 64735 660-383-1280

GVMH Rehab and Wellness - Warsaw 1771 Commerical St. Warsaw, MO 65355 660-428-1146

GVMH Rehab and Wellness - Windsor 100 S. Tebo St. Windsor, MO 65360 660-647-4000

Senior Services

Active Aging Resource Center 109 S. Main St. Gallatin, MO 64640 660-663-2828

Missouri Veteran's Home 1111 Euclid Cameron, MO 64429 816-632-6010

NWMO Area Agency on Aging 504 US Hwy. 136 Box 265 Albany, MO 64402 660-726-3800

Alzheimer's Association 1-800-487-2585

American Association of Retired Persons 1-888-OUR-AARP (687-2277) www.aarp.org

Americans with Disabilities Act Information Line 1-800-514-0301 1-800-514-0383 [TTY] www.usdoj.gov/crt/ada

American Association of Retired Persons 888-687-2277 www.aarp.org

Eldercare Locator 1-800-677-1116 www.eldercare.gov/eldercare/public/home. asp Federal Information Center 1-800-333-4636 www.FirstGov.gov

U.S. Department of Veterans Affairs 1-800-513-7731 www.kcva.org

Education (GI Bill) 1-888-442-4551

Health Resource Center 877-222-8387

Insurance Center 800-669-8477

Veteran Special Issue Help Line Includes Gulf War / Agent Orange Helpline 800-749-8387

U.S. Department of Veterans Affairs Mammography Helpline 888-492-7844

Memorial Program Service [includes status of headstones and markers] 800-697-6947

Telecommunications Device for the Deaf / Hearing Impaired 800-829-4833 (TTY) www.vba.va.gov

Welfare Fraud Hotline 800-432-3913

General Online Healthcare Resources

Doctors and Dentists--General

AMA Physician Select: Online Doctor Finder (American Medical Association) <u>DocFinder</u> (Administrators in Medicine) <u>Find a Dentist</u> (Academy of General Dentistry) <u>Find a Dentist</u>: ADA Member Directory (American Dental Association) <u>Physician Compare</u> (Centers for Medicare & Medicaid Services)

Hospitals and Clinics--General

<u>Find a Health Center</u> (Health Resources and Services Administration) <u>Find a Provider: TRICARE Provider Directories</u> (TRICARE Management Activity) Hospital Quality Compare (Centers for Medicare & Medicaid Services)

Doctors and Dentists--Specialists

ACOG's Physician Directory (American College of Obstetricians and Gynecologists) ACR: Geographic Membership Directory (American College of Rheumatology) American College of Surgeons Membership Directory (American College of Surgeons) American Osteopathic Association D.O. Database (American Osteopathic Association) ASGE: Find a Doctor (American Society for Gastrointestinal Endoscopy) Cancer Genetics Services Directory (National Cancer Institute) Child and Adolescent Psychiatrist Finder (American Academy of Child and Adolescent Psychiatry) Dystonia: Find a Health Care Professional (Dystonia Medical Research Foundation) Expert Locator: Immunologists (Jeffrey Modell Foundation) Find a Dermatologic Surgeon (American Society for Dermatologic Surgery) Find a <u>Dermatologist</u> (American Academy of Dermatology) <u>Find a Gastroenterologist</u> (American College of Gastroenterology) Find a Gynecologic Oncologist (Society of Gynecologic Oncologists) Find a Hand Surgeon (American Society for Surgery of the Hand) Find a Hematologist (American Society of Hematology) Find a Neurologist (American Academy of Neurology) Find a Pediatric Dentist (American Academy of Pediatric Dentistry) Find a Pediatrician or Pediatric Specialist (American Academy of Pediatrics) Find a Periodontist (American Academy of Periodontology) Find a Physical Medicine & Rehabilitation Physician (American Academy of Physical Medicine and Rehabilitation) Find a Plastic Surgeon (American Society of Plastic Surgeons) Find a Podiatrist (American Podiatric Medical Association) Find a Thyroid Specialist (American Thyroid Association) Find a Urologist (American Urological Association) Find an ACFAS Physician (American College of Foot and Ankle Surgeons) Find an Allergist/Immunologist: Search (American Academy of Allergy, Asthma, and Immunology) Find an Endocrinologist (Hormone Health Network) Find an Eye M.D. (American Academy of Ophthalmology) Find an Interventional Radiologist (Society of Interventional Radiology) Find an Oncologist (American Society of Clinical Oncology) Find an Oral and Maxillofacial Surgeon (American Association of Oral and Maxillofacial Surgeons) Find an Orthopaedic Foot and Ankle MD (American Orthopaedic Foot and Ankle Society) Find an Otolaryngologist (ENT) (American Academy of Otolaryngology--Head and Neck Surgery) Finding an Eye Care Professional (National Eye Institute) GI Locator Service (American Gastroenterological Association)

Other Healthcare Providers

AMTA's Find a Massage Therapist (American Massage Therapy Association) Cancer Genetics Services Directory (National Cancer Institute) Find a Diabetes Educator (American Association of Diabetes Educators) Find a Genetic Counselor (National Society of Genetic Counselors) Find a Midwife (American College of Nurse-Midwives) Find a Nurse Practitioner (American Academy of Nurse Practitioners) Find a Physical Therapist (American Physical Therapy Association) Find a Professional: Online Directory of Audiology and Speech-Language Pathology Programs (American Speech-Language-Hearing Association) Find a Registered Dietitian (Academy of Nutrition and Dietetics) Find a Therapist (Anxiety Disorders Association of America) Find an Audiologist (American Academy of Audiology) Manual Lymphatic Drainage Therapists (National Lymphedema Network) National Register of Health Service Providers in Psychology (National Register of Health Service Providers in Psychology) NCCAOM: Find Nationally Certified Practitioners (National Certification Commission for Acupuncture and Oriental Medicine) Search for an Emergency Contraception Provider in the United States (Princeton University, Office of Population Research)

Hospitals and Clinics--Specialized

Accredited Birth Centers (Commission for the Accreditation of Birth Centers) Alzheimer's Disease Research Centers (National Institute on Aging) Cystic Fibrosis Foundation: Find a Chapter (Cystic Fibrosis Foundation) Cystic Fibrosis Foundation: Find an Accredited Care Center (Cystic Fibrosis Foundation) Dialysis Facility Compare (Centers for Medicare & Medicaid Services) FDA Certified Mammography Facilities (Food and Drug Administration) Find a Free Clinic (National Association of Free Clinics) Find an Indian Health Service Facility (Indian Health Service) Find Treatment Centers (American Cancer Society) Genetics Clinic Directory Search (University of Washington) Locate a Sleep Center in the United States by Zip Code (American Academy of Sleep Medicine) MDA ALS Centers (Muscular Dystrophy Association) Mental Health Services Locator (Substance Abuse and Mental Health Services Administration) NCI Designated Cancer Centers (National Cancer Institute) Neurofibromatosis Specialists (Children's Tumor Foundation) Post-Polio Directory 2011: Post-Polio Clinics, Health Professionals, Support Groups (Post-Polio Health International including International Ventilator Users Network) Spina Bifida Clinic Directory (Spina Bifida Association of America) Substance Abuse Treatment Facility Locator (Substance Abuse and Mental Health Services Administration) Transplant Center Search Form (BMT InfoNet) U.S. NMDP Transplant Centers (National Marrow Donor Program) VA Health Care Facilities Locator & Directory (Veterans Health Administration) Where to Donate Blood (AABB) Where to Donate Cord Blood (National Marrow Donor Program)

Other Healthcare Facilities and Services

Alzheimer's Disease Resource Locator (Fisher Center for Alzheimer's Research Foundation) American College of Radiology Accredited Facility Search (American College of Radiology) APA District Branch / State Association Directory (American Psychiatric Association) Directory of Organizations (Deafness and Communication Disorders) (National Institute on Deafness and Other Communication Disorders) Dog Guide Schools in the United States (American Foundation for the Blind) Eldercare Locator (Dept. of Health and Human Services) Find a Hospice or Palliative Care Program (National Hospice and Palliative Care Organization) Find Services (for People with Vision Loss) (American Foundation for the Blind) Find Urgent Care Centers by State (Urgent Care Association of America) Genetic Testing Laboratory Directory (University of Washington) Home Health Compare (Centers for Medicare & Medicaid Services) Medicare: Helpful Contacts (Centers for Medicare & Medicaid Services) Muscular Dystrophy Association Clinics and Services (Muscular Dystrophy Association) National Foster Care and Adoption Directory Search (Children's Bureau) Nursing Home Compare (Centers for Medicare & Medicaid Services) Organizations That Offer Support Services (National Cancer Institute) Poison Control Centers (American Association of Poison Control Centers) Resources and Information for Parents about Braille (American Foundation for the Blind) State-Based Physical Activity Program Directory (Centers for Disease Control and Prevention) TSA Chapters in the USA (Tourette Syndrome Association) Violence against Women: Resources by State (Dept. of Health and Human Services, Office on Women's Health) Where to Find Hair Loss Accessories and Breast Cancer Products (American Cancer Society)

SOURCE: MedlinePlus provides links to directories to help you find libraries, health professionals, services and facilities. National Library of Medicine (NLM) does not endorse or recommend the organizations that produce these directories, nor the individuals or organizations that are included in the directories.

V. Detail Exhibits

a) Patient Origin Source Files

	Henry County MO - MHA Patient Origin by Age	0-17	18-44	45-64	65-74	75+	Total
#	2016 Inpatient Totals	469	689	893	683	803	3537
1	Golden Valley Memorial Healthcare - Clinton, MO	151	251	227	202	360	1191
2	Research Medical Center - Kansas City, MO	3	87	175	89	74	428
3	Saint Luke's Hospital of Kansas City - Kansas City, MO	17	63	93	108	89	370
4	Saint Luke's East Hospital - Lees Summit, MO	8	33	67	49	47	204
5	Western Missouri Medical Center - Warrensburg, MO	40	47	25	23	27	162
6	Children's Mercy Kansas City - Kansas City, MO	93	6				99
7	University of Missouri Health Care - Columbia, MO	6	10	44	19	14	93
8	Bothwell Regional Health Center - Sedalia, MO	8	20	17	12	35	92
9	The University of Kansas Health System - KC, KS	7	15	28	33	8	91
10	St. Joseph Medical Center - Kansas City, MO	1	13	16	27	24	81
11	Royal Oaks Hospital - Windsor, MO	34	15	6			55
12	Saint Luke's South Hospital - Overland Park, KS	5	5	16	14	14	54
13	Centerpoint Medical Center - Independence, MO	1	14	13	10	8	46
14	Cass Regional Medical Center - Harrisonville, MO		8	8	15	13	44
15	Belton Regional Medical Center - Belton, MO		3	16	10	7	36
16	Heartland Behavioral Health Services - Nevada, MO	36					36
	Others	59	99	142	72	83	455
			_				
	Henry County MO - MHA Patient Origin by Age	0-17	18-44	45-64	65-74	75+	Total
#	2017 Inpatient Totals	503	662	1003	774	853	3795
1	Golden Valley Memorial Healthcare - Clinton, MO	195	272	287	240	342	1336
2	Research Medical Center - Kansas City, MO	14	73	185	136	111	519
3	Saint Luke's Hospital of Kansas City - Kansas City, MO	9	72	99	106	103	389
4	Saint Luke's East Hospital - Lees Summit, MO	15	29	75	80		204
-				,,,	80	82	281
5	The University of Kansas Health System - Kansas City, KS	5	26	62	50	82 13	281 156
6	·	5 27	26 37				
<u> </u>		+		62	50	13	156
6	Western Missouri Medical Center - Warrensburg, MO Children's Mercy Kansas City - Kansas City, MO	27	37	62	50	13	156 127
6 7	Western Missouri Medical Center - Warrensburg, MO Children's Mercy Kansas City - Kansas City, MO Bothwell Regional Health Center - Sedalia, MO	27 98	37 1	62 24	50 18	13 21	156 127 99
6 7 8 9	Western Missouri Medical Center - Warrensburg, MO Children's Mercy Kansas City - Kansas City, MO Bothwell Regional Health Center - Sedalia, MO	27 98 8	37 1 15	62 24 15	50 18 22	13 21 36	156 127 99 96
6 7 8 9	Western Missouri Medical Center - Warrensburg, MO Children's Mercy Kansas City - Kansas City, MO Bothwell Regional Health Center - Sedalia, MO University of Missouri Health Care - Columbia, MO Saint Luke's South Hospital - Overland Park, KS	27 98 8 3	37 1 15 18	62 24 15 27	50 18 22 15	13 21 36 4	156 127 99 96 67
6 7 8 9 10	Western Missouri Medical Center - Warrensburg, MO Children's Mercy Kansas City - Kansas City, MO Bothwell Regional Health Center - Sedalia, MO University of Missouri Health Care - Columbia, MO Saint Luke's South Hospital - Overland Park, KS	27 98 8 3	37 1 15 18 4	62 24 15 27 16	50 18 22 15 11 1	13 21 36 4	156 127 99 96 67 56
6 7 8 9 10 11	Western Missouri Medical Center - Warrensburg, MO Children's Mercy Kansas City - Kansas City, MO Bothwell Regional Health Center - Sedalia, MO University of Missouri Health Care - Columbia, MO Saint Luke's South Hospital - Overland Park, KS Royal Oaks Hospital - Windsor, MO	27 98 8 3	37 1 15 18 4 16	62 24 15 27 16 8	50 18 22 15 11 1	13 21 36 4 22	156 127 99 96 67 56 55
6 7 8 9 10 11 12	Western Missouri Medical Center - Warrensburg, MO Children's Mercy Kansas City - Kansas City, MO Bothwell Regional Health Center - Sedalia, MO University of Missouri Health Care - Columbia, MO Saint Luke's South Hospital - Overland Park, KS Royal Oaks Hospital - Windsor, MO St. Joseph Medical Center - Kansas City, MO	27 98 8 3	37 1 15 18 4 16 1	62 24 15 27 16 8 14	50 18 22 15 11 1	13 21 36 4 22	156 127 99 96 67 56 55 42
6 7 8 9 10 11 12 13	Western Missouri Medical Center - Warrensburg, MO Children's Mercy Kansas City - Kansas City, MO Bothwell Regional Health Center - Sedalia, MO University of Missouri Health Care - Columbia, MO Saint Luke's South Hospital - Overland Park, KS Royal Oaks Hospital - Windsor, MO St. Joseph Medical Center - Kansas City, MO Belton Regional Medical Center - Belton, MO	27 98 8 3	37 1 15 18 4 16 1 4	62 24 15 27 16 8 14	50 18 22 15 11 1	13 21 36 4 22	156 127 99 96 67 56 55 42 35
6 7 8 9 10 11 12 13 14	Western Missouri Medical Center - Warrensburg, MO Children's Mercy Kansas City - Kansas City, MO Bothwell Regional Health Center - Sedalia, MO University of Missouri Health Care - Columbia, MO Saint Luke's South Hospital - Overland Park, KS Royal Oaks Hospital - Windsor, MO St. Joseph Medical Center - Kansas City, MO Belton Regional Medical Center - Belton, MO Nevada Regional Medical Center - Nevada, MO	27 98 8 3	37 1 15 18 4 16 1 4	62 24 15 27 16 8 14 16	50 18 22 15 11 1 9	13 21 36 4 22 18 3	156 127 99 96 67 56 55 42 35 34
6 7 8 9 10 11 12 13 14 15	Western Missouri Medical Center - Warrensburg, MO Children's Mercy Kansas City - Kansas City, MO Bothwell Regional Health Center - Sedalia, MO University of Missouri Health Care - Columbia, MO Saint Luke's South Hospital - Overland Park, KS Royal Oaks Hospital - Windsor, MO St. Joseph Medical Center - Kansas City, MO Belton Regional Medical Center - Belton, MO Nevada Regional Medical Center - Nevada, MO Cass Regional Medical Center - Harrisonville, MO	27 98 8 3	37 1 15 18 4 16 1 4 18	62 24 15 27 16 8 14 16 16 12	50 18 22 15 11 1 9 12	13 21 36 4 22 18 3	156 127 99 96 67 56 55 42 35 34 33

	Henry County MO - MHA Patient Origin by Age	0-17	18-44	45-64	65-74	75+	Total
#	2018 Inpatient Totals	504	678	872	673	922	3649
1	Golden Valley Memorial Healthcare - Clinton, MO	202	284	244	183	369	1282
2	Research Medical Center - Kansas City, MO	12	90	198	147	131	578
3	Saint Luke's Hospital of Kansas City - Kansas City, MO	12	60	90	68	107	337
4	Saint Luke's East Hospital - Lees Summit, MO	4	23	58	53	82	220
5	Western Missouri Medical Center - Warrensburg, MO	24	31	21	22	23	121
6	The University of Kansas Health System - Kansas City, KS	6	16	25	41	18	106
7	Bothwell Regional Health Center - Sedalia, MO	8	10	15	18	47	98
8	Children's Mercy Kansas City - Kansas City, MO	94	4				98
9	Royal Oaks Hospital - Windsor, MO	41	21	5			67
10	Saint Luke's South Hospital - Overland Park, KS	1	3	21	15	18	58
11	Menorah Medical Center - Overland Park, KS	1	9	20	15	5	50
12	Cass Regional Medical Center - Harrisonville, MO		5	14	17	13	49
13	University of Missouri Health Care - Columbia, MO	3	8	21	9	7	48
14	Nevada Regional Medical Center - Nevada, MO	1	30	10		1	42
15	Centerpoint Medical Center - Independence, MO	3	6	16	6	10	41
16	Belton Regional Medical Center - Belton, MO		4	18	9	9	40
17	Heartland Behavioral Health Services - Nevada, MO	38					38
	Others	54	74	96	70	82	376

В	Benton County MHA - Patient Origin by Age	0-17	18-44	45-64	65-74	75+	Total
#	2016 Inpatients Totals	291	447	768	674	779	2959
1	Bothwell Regional Health Center - Sedalia, MO	55	83	169	191	375	873
2	Golden Valley Memorial Healthcare - Clinton, MO	52	79	128	104	93	456
3	University of Missouri Health Care - Columbia, MO	34	89	126	67	50	366
4	Research Medical Center - Kansas City, MO	1	17	53	47	27	145
5	Saint Luke's Hospital of Kansas City - Kansas City, MO	5	17	57	35	31	145
6	Boone Hospital Center - Columbia, MO	1	5	41	33	45	125
7	Lake Regional Health System - Osage Beach, MO	10	14	25	29	22	100
8	The University of Kansas Health System - KC, KS	1	14	28	25	16	84
9	Saint Luke's East Hospital - Lees Summit, MO	3	7	20	29	20	79
10	Children's Mercy Kansas City - Kansas City, MO	41	8				49
11	Royal Oaks Hospital - Windsor, MO	29	14	3			46
12	Western Missouri Medical Center - Warrensburg, MO	9	13	9	5	3	39
13	Mercy Hospital Springfield - Springfield, MO	2	3	10	12	10	37
14	Centerpoint Medical Center - Independence, MO		2	7	7	11	27
15	Rusk Rehabilitation Hospital - Columbia, MO		4	7	10	4	25
16	Fitzgibbon Hospital - Marshall, MO	2	14	5	1	1	23
	Others	46	64	80	79	71	340

E	Benton County MHA - Patient Origin by Age	0-17	18-44	45-64	65-74	75+	Total
#	2017 Inpatient Totals	293	433	747	692	816	2981
1	Bothwell Regional Health Center - Sedalia, MO	66	98	198	206	359	927
2	Golden Valley Memorial Healthcare - Clinton, MO	64	80	115	98	117	474
3	University of Missouri Health Care - Columbia, MO	25	80	122	78	59	364
4	Research Medical Center - Kansas City, MO	3	19	64	42	41	169
5	Saint Luke's Hospital of Kansas City - Kansas City, MO	3	10	36	39	50	138
6	Boone Hospital Center - Columbia, MO	4	6	23	39	36	108
7	Saint Luke's East Hospital - Lees Summit, MO	3	15	24	26	28	96
8	The University of Kansas Health System - KC, KS	1	10	36	28	14	89
9	Lake Regional Health System - Osage Beach, MO	5	10	21	22	27	85
10	Children's Mercy Kansas City - Kansas City, MO	46	2				48
11	Royal Oaks Hospital - Windsor, MO	30	12	4			46
12	North Kansas City Hospital - North Kansas City, MO			7	13	10	30
13	Mercy Hospital Springfield - Springfield, MO		4	9	8	6	27
14	CoxHealth - Springfield, MO	6	4	4	5	4	23
15	Citizens Memorial Hospital - Bolivar, MO	1	2	5	6	5	19
16	Fitzgibbon Hospital - Marshall, MO	1	13	5			19
	Others	35	68	74	82	60	319
E	Benton County MHA - Patient Origin by Age	0-17	18-44	45-64	65-74	75+	Total
#	2018 Inpatient Totals	313	433	665	678	858	2947
1	Bothwell Regional Health Center - Sedalia, MO						
	Bothwell Regional Health Center - Sedana, Wo	57	109	164	190	382	902
2	Golden Valley Memorial Healthcare - Clinton, MO	57 76	109 111	164 113	190 104	382 139	902 543
3							
	Golden Valley Memorial Healthcare - Clinton, MO	76	111	113	104	139	543
3	Golden Valley Memorial Healthcare - Clinton, MO University of Missouri Health Care - Columbia, MO	76 24	111 51	113 74	104 67	139 44	543 260
3	Golden Valley Memorial Healthcare - Clinton, MO University of Missouri Health Care - Columbia, MO Research Medical Center - Kansas City, MO	76 24 4	111 51 27	113 74 64	104 67 53	139 44 56	543 260 204
3 4 5	Golden Valley Memorial Healthcare - Clinton, MO University of Missouri Health Care - Columbia, MO Research Medical Center - Kansas City, MO Saint Luke's Hospital of Kansas City - Kansas City, MO	76 24 4 2	111 51 27 10	113 74 64 43	104 67 53 32	139 44 56 45	543 260 204 132
3 4 5 6	Golden Valley Memorial Healthcare - Clinton, MO University of Missouri Health Care - Columbia, MO Research Medical Center - Kansas City, MO Saint Luke's Hospital of Kansas City - Kansas City, MO Lake Regional Health System - Osage Beach, MO	76 24 4 2 4	111 51 27 10 13	113 74 64 43 24	104 67 53 32 35	139 44 56 45 30	543 260 204 132 106
3 4 5 6 7	Golden Valley Memorial Healthcare - Clinton, MO University of Missouri Health Care - Columbia, MO Research Medical Center - Kansas City, MO Saint Luke's Hospital of Kansas City - Kansas City, MO Lake Regional Health System - Osage Beach, MO Boone Hospital Center - Columbia, MO	76 24 4 2 4 1	111 51 27 10 13 5	113 74 64 43 24 30	104 67 53 32 35 33	139 44 56 45 30 27	543 260 204 132 106 96
3 4 5 6 7 8	Golden Valley Memorial Healthcare - Clinton, MO University of Missouri Health Care - Columbia, MO Research Medical Center - Kansas City, MO Saint Luke's Hospital of Kansas City - Kansas City, MO Lake Regional Health System - Osage Beach, MO Boone Hospital Center - Columbia, MO The University of Kansas Health System - KC, KS	76 24 4 2 4 1	111 51 27 10 13 5	113 74 64 43 24 30 29	104 67 53 32 35 33 28	139 44 56 45 30 27 30	543 260 204 132 106 96 94
3 4 5 6 7 8 9	Golden Valley Memorial Healthcare - Clinton, MO University of Missouri Health Care - Columbia, MO Research Medical Center - Kansas City, MO Saint Luke's Hospital of Kansas City - Kansas City, MO Lake Regional Health System - Osage Beach, MO Boone Hospital Center - Columbia, MO The University of Kansas Health System - KC, KS Saint Luke's East Hospital - Lees Summit, MO Children's Mercy Kansas City - Kansas City, MO Western Missouri Medical Center - Warrensburg, MO	76 24 4 2 4 1 1	111 51 27 10 13 5	113 74 64 43 24 30 29	104 67 53 32 35 33 28	139 44 56 45 30 27 30	543 260 204 132 106 96 94 86
3 4 5 6 7 8 9	Golden Valley Memorial Healthcare - Clinton, MO University of Missouri Health Care - Columbia, MO Research Medical Center - Kansas City, MO Saint Luke's Hospital of Kansas City - Kansas City, MO Lake Regional Health System - Osage Beach, MO Boone Hospital Center - Columbia, MO The University of Kansas Health System - KC, KS Saint Luke's East Hospital - Lees Summit, MO Children's Mercy Kansas City - Kansas City, MO	76 24 4 2 4 1 1 1 68	111 51 27 10 13 5 6	113 74 64 43 24 30 29 22	104 67 53 32 35 33 28 29	139 44 56 45 30 27 30 25	543 260 204 132 106 96 94 86 68
3 4 5 6 7 8 9 10	Golden Valley Memorial Healthcare - Clinton, MO University of Missouri Health Care - Columbia, MO Research Medical Center - Kansas City, MO Saint Luke's Hospital of Kansas City - Kansas City, MO Lake Regional Health System - Osage Beach, MO Boone Hospital Center - Columbia, MO The University of Kansas Health System - KC, KS Saint Luke's East Hospital - Lees Summit, MO Children's Mercy Kansas City - Kansas City, MO Western Missouri Medical Center - Warrensburg, MO	76 24 4 2 4 1 1 1 68 9	111 51 27 10 13 5 6 9	113 74 64 43 24 30 29 22	104 67 53 32 35 33 28 29	139 44 56 45 30 27 30 25	543 260 204 132 106 96 94 86 68 41
3 4 5 6 7 8 9 10 11	Golden Valley Memorial Healthcare - Clinton, MO University of Missouri Health Care - Columbia, MO Research Medical Center - Kansas City, MO Saint Luke's Hospital of Kansas City - Kansas City, MO Lake Regional Health System - Osage Beach, MO Boone Hospital Center - Columbia, MO The University of Kansas Health System - KC, KS Saint Luke's East Hospital - Lees Summit, MO Children's Mercy Kansas City - Kansas City, MO Western Missouri Medical Center - Warrensburg, MO Royal Oaks Hospital - Windsor, MO Citizens Memorial Hospital - Bolivar, MO North Kansas City Hospital - North Kansas City, MO	76 24 4 2 4 1 1 1 68 9	111 51 27 10 13 5 6 9	113 74 64 43 24 30 29 22 6 4	104 67 53 32 35 33 28 29	139 44 56 45 30 27 30 25	543 260 204 132 106 96 94 86 68 41
3 4 5 6 7 8 9 10 11 12	Golden Valley Memorial Healthcare - Clinton, MO University of Missouri Health Care - Columbia, MO Research Medical Center - Kansas City, MO Saint Luke's Hospital of Kansas City - Kansas City, MO Lake Regional Health System - Osage Beach, MO Boone Hospital Center - Columbia, MO The University of Kansas Health System - KC, KS Saint Luke's East Hospital - Lees Summit, MO Children's Mercy Kansas City - Kansas City, MO Western Missouri Medical Center - Warrensburg, MO Royal Oaks Hospital - Windsor, MO Citizens Memorial Hospital - Bolivar, MO	76 24 4 2 4 1 1 1 68 9	111 51 27 10 13 5 6 9	113 74 64 43 24 30 29 22 6 4 7	104 67 53 32 35 33 28 29 7	139 44 56 45 30 27 30 25 6	543 260 204 132 106 96 94 86 68 41 33 31
3 4 5 6 7 8 9 10 11 12 13	Golden Valley Memorial Healthcare - Clinton, MO University of Missouri Health Care - Columbia, MO Research Medical Center - Kansas City, MO Saint Luke's Hospital of Kansas City - Kansas City, MO Lake Regional Health System - Osage Beach, MO Boone Hospital Center - Columbia, MO The University of Kansas Health System - KC, KS Saint Luke's East Hospital - Lees Summit, MO Children's Mercy Kansas City - Kansas City, MO Western Missouri Medical Center - Warrensburg, MO Royal Oaks Hospital - Windsor, MO Citizens Memorial Hospital - Bolivar, MO North Kansas City Hospital - North Kansas City, MO	76 24 4 2 4 1 1 1 68 9	111 51 27 10 13 5 6 9	113 74 64 43 24 30 29 22 6 4 7 5	104 67 53 32 35 33 28 29 7	139 44 56 45 30 27 30 25 6	543 260 204 132 106 96 94 86 68 41 33 31 30

b) Town Hall Attendees, Notes, & Feedback

	Henry and Benton County, Missouri CHNA Town Hall meeting on Tuesday, October 15th (5:30-7pm) N=43									
#	Attend	Last	First	Organization	Title	City	ST	Zip		
1	1	Allee	Erin	Royal Oaks Hospital	Director of Nursing	Windsor	МО	65360		
2	1	Bowles	Peggy	Henry County Health Center	Administrator	Clinton	МО	64735		
3	1	Boyles	Jarrod	Clinton School District	Principal	Clinton	МО	64726		
4	1	Bunch	Fred	WCMCAA/Now Growth	Charman of Board	Clinton	МО	64735		
5	1	Burns	Angela	gvмн	Assistant Clinical Supervisor	Clinton	МО	64735		
6	1	Cox	Jessica	Compass Health Network	Community Mental Health Liaison	Clinton/Warsaw	МО	64735		
7	1	Cummings	Andy	GVMH		Clinton	МО	64735		
8	1	Dacoy	Bill	gvмн		Clinton	МО	64735		
9	1	Dailey	William	GVMH	Physician	Osceola	МО	64776		
10	1	Dull	Tara	GVMH	Director of Health Information Management	Clinton	МО	64735		
11	1	Faulconer	Christine	gvмн	Clinic Quality Coordinator	Clinton	МО	64735		
12	1	Ferguson	Libby	GVMH	ACNO	Clinton	МО	64735		
13	1	Foster	Cassie	Clinton School District	Health Occupations Instructor	Clinton	МО	64735		
14	1	Fowler	Jake	Clinton Technical School	Administration	Clinton	МО	64735		
15	1	Garman-Neeman	Sheridan	Kaysinger Basin Regional Planning Commission	Executive Director	Clinton	МО	64735		
16	1	Grgurich	Linda	Compass Health Network	Ex VP	Clinton	МО	64735		
17	1	Hayes	Lynnette	gvмн	CNO	Clinton	МО	64735		
18	1	Hilton	Wes	Cover & Hilton Law		Clinton	МО	64735		
19	1	Houk	Barbara	Clinton Technical School	Health Occupations Instructor	Clinton	МО	64735		
20	1	Jenkins	Erica	Royal Oaks Hospital	CQI Coordinator	Windsor	МО	65360		
21	1	Jenkins	Allan	Compass Health Network	Director, HIM/Privacy Officer	Clinton	МО	64735		
22	1	Jones-Hard	Susan	MU Extension - Henry County	County Engagement Specialist - Nutrition and Health	Clinton	МО	64735		
23	1	Kuck	Donni	Compass Health Network		Clinton	МО	64735		
24	1	Lifa	Noma	gvмн	Infection Control Officer	Clinton	МО	64735		
25	1	Lowe	GR	GVMH Board		Clinton	МО	64735		
26	1	McDowell	Kim	GVMH Home Health	Manager/Administrator	Clinton	МО	64735		
27	1	Nadler	Tammy	gvмн		Clinton	МО	64735		
28	1	Orr	Charlene	Orrbitz Productions and Event Planning	Business Manager	Urich	МО	64788		
29	1	Overton	Saundra	Royal Oaks Hospital	Chief Nursing Officer/CQI Dir	Windsor	МО	65360		
30	1	Pitts	Stacy	Clinton High School	Counselor	Clinton	МО	64735		
31	1	Schreck	Linda	West Central Missouri Community Action Agency	Community Initiatives Associate Director	Appleton City	МО	64724		
32	1	Shannon	Greg	GVMH	Chief Human Resource Officer	Clinton	МО	64735		
33	1	Simmons	Kayla	GVMH	Clinic Supervisor	Windsor	МО	65360		
34	1	Sisk	Nina	US Bank	мьо	Clinton	МО	64735		
35	1	Smith	Bree	gvмн	Community Outreach & Development Coordinator	Clinton	МО	64735		
36	1	Staashelm	Ernie	UMB Bank	Community Bank President	Clinton	МО	64735		
37	1	Studer	Lea	gvмн	Director of Marketing and Communications	Clinton	МО	64735		
38	1	Swope	Sherri	Clinton School District	Elementary Principal	Clinton	МО	64735		
39	1	Terry	Katie	GVMH-Windsor		Windsor	МО	65360		
40	1	Thompson	Chris	West Central Missouri Community Action Agency	President/CEO	Appleton City	МО	64724		
41	1	Thompson	Craig	gvмн	CEO	Clinton	МО	64735		
42	1	Wagner	Joanne	gvмн	Accreditation, Safety & Compliance Officer	Clinton	МО	64735		
43	1	Warner	Julie	GVMН	Public Relations and Media Coordinator	Clinton	МО	64735		

GVMH, Compass Health, and HCHC – Henry & Benton Co CHNA Town Hall Tuesday, October 15th 5:30-7:00pm N=43

News:

HCHC has nurses that go to schools that do not have nurses on staff.

Suicides are increasing.

Drugs: Opioids, Meth, Heroin, Marijuana. Prescription Drug Monitoring system in place as of Oct 2019.

Smoking and vaping are very prevalent, as well as alcohol.

Medicaid expansion ballet vote in Nov 2020.

BFC Vaccine initiative state-wide has increased since 2016.

Hiring an Economic Development lead for Benton County starting 2020.

Strengths:

- Provider to Patient Ratio
- Community Activities: Park, Trails, Centers
- Stable Hospital system that is growing
- Good Healthcare Perception
- Opportunities for Healthcare Careers
- Compass and GVMH are major employers
- Specialized Service offerings
- Availability / Extended Hours
- Mental Health First-aid trainings Compass
- Collaborative amongst community / Partnerships
- School health
- Drug Recovery Court
- Crisis Intervention Team

Things to Improve:

- Sensitivity Training
- Food Insecurity
- Smoking / Vaping
- Community Paramedics
- Suicides
- Poor Insurance
- Drugs
- Psych Inpatient
- Senior Health
- Awareness of Services
- Economic Development
- Housing
- Community / General Public Apathy
- Transportation
- Safe Child Care
- Abuse / Violence
- Urgent Care (Subsidized)
- Obesity (Nutrition, Exercise)
- Internet Infrastructure
- Access to Fitness Centers / Nutrition
- Mental health schools
- STD's

Wave #3 CHNA - Henry and Benton Co MO

Town Hall Conversation - Strengths (Color Cards) N= 43

		Town Hall Conversation - 30	- Criga		, , , , , , , , , , , , , , , , , , ,
Card #	C1	Today: What are the strengths of our community that contribute to health?	Card #	Ci	Today: What are the strengths of our community that contribute to health?
10	ACC	Access to care - improving	16	FIT	Multiple gyms
21	ACC	Access to healthcare	24	FIT	Outdoor activities
26	ACC	Access to more healthcare locally such as oncology, etc.	11	FIT	Some areas for physical activity
27	ACC	Accessible hospital and growth of practitioners	13	FP	Family practice/access to complete annual exams
14	ACC	Availability of care - family practice	22	НН	Home health and hospice services are amazing
9	ACC	Available healthcare services	18	НН	Home-based services (home health/hospice)
27	ACC	Large availability of health services	4	HOSP	Community hospital leadership that is invested in the community
25	ACC	Services offered at Henry Co Health	23	HOSP	Good local healthcare facilities wanting to make a difference
8	ACC	Sources for healthcare	19	HOSP	GVMH
5	ACC	Wide variety of health services offered	22	HOSP	Hospital services - very active in community involvement
16	ALL	Healthcare in community/hospital	30	HOSP	Hospital system and expanding services and focus on quality
12	ALL	People rate healthcare high locally	32	HOSP	SMHW
25	ВН	Access to physical and mental healthcare	28	HOSP	Stable hospital system with increasing investment
24	BH	Expansion of mental health - jobs	32	HOSP	VFC
16	BH	Large mental health organization	31	HOSP	VFC offerings
25	BH	Mental health inpatient services	34	HOSP	VFC offerings
24	ВН	Mental health open access	23	HSCRE	Improved health screenings
36	CLIN	Clinic presence - walk in urgent care	6	ΙP	Access to inpatient, outpatient medical care
29	CLIN	Longer clinic hours/walk in	1	JOB	Employment/job availability and healthcare
13	CLIN	Rural clinics - locations seem to be in the right areas	20	NUTR	Places to get free meals - Samaritan Center, churches, schools
3	CLIN	Specialty clinics	20	OBG	Birthing Center
35	CLIN	Valley Memorial Healthcare's many clinics around the 2 counties	11	OTHR	Resources available
11	CMEM	Community strengths/support for change	31	OTHR	Show Me Healthy Women
23	CMEM	Community willing to want improvement	31	OTHR	Tomorrow - Rural Health Modernization Act
4	CMEM	Dedication to strategic planning geared toward community (TCD)	14	PART	Collaboration of organizations in the community
28	CMEM	Invested community members	30	PART	Collaborative atmosphere for engagement and coordinate
11	COAL	Honor Coalition -> opioid	24	PART	Coordination of healthcare
7	COAL	Honor coalition's focus is conquering opioid addiction	2	PART	Good working relationship with hospital & schools
26	COMM	Providers willingness to communicate with each other	15	PART	Organizations work well together
10	CONF	Privacy/patient rights	17	PART	Organizations work well together
33	CORP	Truman Area CIT council/West Central CIT Community Stakeholders meet to discuss and problem solve issue. Officers are attending mental health training	3	PART	Relationship with school and healthcare
13	DENT	Dental and eye exams at high rates annually	5	PART	School & community partnerships
19	DENT	Dental mobile unit	22	PHARM	Number of pharmacy available
20	DENT	Dentists	29		Pharmacies
29	DOCS	Clinic/doctor expansion	20	PHARM	Pharmacy
33	DOCS	Compass Health is adding more providers and is working to treat the whole person	10	PNEO	Prenatal care - improving
36	DOCS	Good availability of healthcare providers	31	PREV	Crisis intervention team

Wave #3 CHNA - Henry and Benton Co MO Town Hall Conversation - Strengths (Color Cards) N= 43 Today: What are the strengths of our community Today: What are the strengths of our community Card # C1 Card # C1 that contribute to health? that contribute to health? DOCS 1 PREV 29 More different providers Drug Court/Celebrate Recovery 20 DOCS Number of doctors/nurse practitioners 2 PRIM Access to primary care physicians DOCS Number of health providers 3 PRIM Large volume of primary care 5 DOCS 28 18 PRIM Number of providers PCP options/availability 32 Provider availability (walk in) weekend clinics 21 QUAL Confidence in healthcare/perception DOCS **QUAL** Healthcare & treatment 31 DOCS Provider to patient ratio 15 Charity care/free opportunities - Benson 3 **REC** 32 Specialty providers DOCS Center, Samaritan Center Health department - very active in community 22 DOH 15 REC Civic Center involvement Community based programs - Community 8 **ECON** 1 **REC** Business retention (E/D) Center Cost of living 6 **ECON** 19 REC Community Center **ECON** 14 Economic driver of healthcare employers 20 REC Community Center 18 **ECON** Gracious/free financial options 27 REC Community exercise centers 1 3 **ECON** Healthcare benefits thorugh strong employers REC Samaritan Center Healthcare is a strong employer and creates **ECON** 17 19 **REC** Youth sports programs jobs Smoking ban - good idea - enforcement is a **SMOK** 30 **ECON** Low cost of living generally 22 problem There is the capacity to enhance and improve 17 **ECON** healthcare in these counties with political People perceive nursing in schools as strong factors (political factors are a barrier now) **SNUR** 12 EDU 21 Community support for schools SNUR School health services 6 EDU 29 31 SNUR Education School nurse presence in Clinton Engaged school systems - expansions with 8 **EDU** 19 SNUR School nurses STCC & CMU EDU SNUR School nurses 16 Good schools 20 School nurses in Clinton schools - look to Good schools & education to make a 23 EDU 35 increase to Shawnee Mound & other schools difference SNUR without nurses 4 EDU Great public school system 23 SNUR School nursing - great scores EDU 2 SPEC Health education- school partnerships Access to some specialty services EDU 36 Many schools in both counties 31 SPEC Access to specialty care Many schools in both counties (private 31 13 SPEC Access to specialty services **EDU** schools) 10 20 EDU SPEC More availability for specialized care Schools 6 **EMER** Improved ED care 24 SPEC More specialty healthcare 20 EYE Eyecare specialties 15 SPEC Specialties Telehealth 8 FAC Facilities or physical activity 31 TEL 9 FIT Access to exercise opportunities 32 TEL Telehealth FIT TEL 19 35 Telehealth Anytime Fitness Availability of extended hours with walk in FIT Benson center - access to exercise URG 24 31 urgent care FIT VACC 29 19 Exercise opportunities Flu shots at school FIT Vaccinations being more readily available 14 Exercise opportunity 22 VACC Free wellness center (Benson) 12 FIT

Wave #3 CHNA - Henry and Benton Co MO

Town Hall Conversation - Weakness (Color Cards) N= 43

Card # Ot Indexty What are the weaknesses of our community Card # Other Community Card # Other Community and community and community and community and community Card # Other Community			Town Hall Conversation - We	=akiie	33 (COIC	•
Limited access to food with more volunteers to fix backpass.	Card #	C1	Today: What are the weaknesses of our community that contribute to health?	Card #	C1	Today: What are the weaknesses of our community that contribute to health?
ACC fix backpacks	31	ACC	Continuing addition of services in GVMH	10	INSU	Medicaid expansion
39 AGE Low income senior housing 11 INSU Uninsured specialty health 10 AGE Senior care - nursing home & senior living 40 IP Inpatient/acute psych Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or inclination Need for impatient paych unit or inclination Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or inclination Need for impatient paych unit or an acute stabilization unit Need for impatient paych unit or inclination Need for impatient paych unit or inclination Need for impatient paych unit or an acute stabilization unit or inclination Need for impatient	25	ACC		40	INSU	Underinsured or uninsured
AGE Sentor care - nursing home & sentor living 40	37		Elderly housing		INSU	Uninsured
AMB	39		Low income senior housing			Uninsured specialty health
AMB Community paramedics	10	AGE		40	IP	
Awab Community parameters S No Care	7	AMB		7	IP	stabilization unit
BH Resources S4 KID Child/adolescent outreach	40	AMB	• .	5	KID	
18	35	ВН	resources	34		Child/adolescent outreach
BH Access to mental health services 8						
BH	18		Access to mental health - inpatient services	17	KID	
August Bello	10	BH		8	KID	Quality childcare
Better understanding of mental health patients and helf needs Patients and helf needs	33	ВН		36	MOM	Percent born to unmarried mothers
and their needs 27 MRKT Awareness of available services 9 BH Mental care access/awareness 27 MRKT More public knowledge of all programs 39 BH Mental health 26 MRKT Services Outreach - educating population of available services 29 BH Mental health 20 NH Nursing Homes 28 BH Mental health access 38 NH Nursing Homes 38 BH Mental health access 16 NH Quality/clean nursing homes 27 BH Mental health access 1 NH Ouality/clean nursing homes 38 BH Mental health access 1 NH Nursing Homes 39 BH Mental health access 1 NH Nursing Homes 30 BH Mental health access 1 NH Nursing homes 31 NH Nursing homes 32 NH Nursing homes 33 NH Nursing homes 40 NUTR Access to healthy foods 40 NUTR Access to healthy foods 40 NUTR Access to healthy foods 40 NUTR Access to nutrition services/education 40 NU	14	BH	Awareness of mental health services	32	MOM	Teen pregnancies/unmarried mothers
2	13				MRKT	Awareness
BH Mental health 20 NH Nursing Homes Nursing Homes BH Mental health access BH Mental health access - care coordination BH Mental health access - care coordination BH Mental health access - care coordination NUTR Access to healthy foods NUTR Access to healthy foods NUTR Access to healthy foods NUTR Access to nutrition services / education Acting out in schools on Friday due to not having food over the weekend NUTR Food security NUTR Food security BH Mental health patient access to care besides mental health patient access to care besides BH More access to BHT and mental health AD OBES Childhood obesity NUTR Food security BH More mental health providers BH More mental health providers BH More mental health providers BH Ned more mental health providers BH Ned more mental health providers BH Stigma of mental health BH Stigma of mental health services ACTED OBES Obesity OBES Obesity OBES Obesity and related factors Vastly expanded mental health services ACTED OBES OBESITY OBES OBESITY There needs to be plans to reduce obesity & improve physical activities CMEM Apathy CMEM Apathy DENT CMEM Participation in community DENT CMEM Participation in community DENT CMEM Participation in community DENT CMEM Internet infrastructure	9	BH	Mental care access/awareness	27	MRKT	Awareness of available services
29 BH Mental health 20 NH Nursing homes 28 BH Mental health access 38 NH Nursing homes 38 BH Mental health access 16 NH Quality/clean nursing homes 38 BH Mental health access 16 NH Quality/clean nursing homes 38 NH Mental health access 16 NH Quality/clean nursing homes 39 NUTR Access to healthy foods 40 NUTR Access to nutrition services / education 40 NUTR Access to nutrition services / education 40 NUTR Access to nutrition services/education 40 OBES Obesity 40 OBES Obesity 41 Destrict nutrition services/education 41 OBES Obesity 42 OBES Obesity 43 OBES Obesity 44 Destrict nutrition services/education 45 OBES Obesity nutrition services/education 46 OBES Obesity 47 OBES Obesi	2	BH	Mental health	31	MRKT	More public knowledge of all programs
BH	39	ВН	Mental health	26	MRKT	9.1.1
38 BH Mental health access 16 NH Quality/clean nursing homes	29	BH	Mental health	20	NH	Nursing Homes
BH	28	BH	Mental health access	38	NH	-
BH Mental health awareness/education 6 NUTR Access to nutrition services / education	38	BH	Mental health access	16	NH	Quality/clean nursing homes
11BHMental health education40NUTRAccess to nutrition services/education5BHMental health offerings12NUTRActing out in schools on Friday due to not having food over the weekend40BHMental health offerings/stigma of mental health issues4NUTRFood security36BHmental health patient access to care besides ER40NUTRFood security22BHMore access to BHT and mental health40OBESChildhood obesity8BHMore mental health providers5OBESChildhood obesity1BHMTL health awareness6OBESObesity17BHNeed more mental health providers22OBESObesity37BHReimbursement to mental health29OBESObesity4BHStigma of mental health services38OBESObesity and related factors30BH(resources now are bleak) - applies to depression and suicide17OBESObesity prevention14CLINHealthcare improvement - weekend medical walk in clinics23OBESObesity rates11CMEMApathy30OBESThere needs to be plans to reduce obesity & improve physical activities15CMEMAwareness of issues relating to the overall health of communities5OBGOB care11CMEMParticipation in community3OTHRInternet infrastructure12DENTDental in the schools -	27	BH	Mental health access - care coordination	1	NUTR	Access to healthy foods
5 BH Mental health offerings 40 BH Mental health offerings/stigma of mental health issues 36 BH mental health patient access to care besides ER 22 BH More access to BHT and mental health 40 OBES Childhood obesity 38 BH More mental health providers 40 NUTR Food security 50 OBES Childhood obesity 51 BH MTL health awareness 52 OBES Childhood obesity 53 OBES Obesity 54 BH Reimbursement to mental health providers 55 OBES Obesity 56 OBES Obesity 57 OBES Obesity 58 OBES Obesity 59 OBES Obesity 60 OBES Obesity 61 OBES Obesity 61 OBES Obesity 63 OBES Obesity 64 OBES Obesity 65 OBES Obesity 66 OBES Obesity 66 OBES Obesity 67 OBES Obesity 68 OBES Obesity 69 OBES Obesity 60 OBES Obesity 60 OBES Obesity 61 OBES Obesity 61 OBES Obesity and related factors 63 OBES Obesity prevention 64 OBES Obesity prevention 65 OBES Obesity prevention 66 OBES Obesity and related factors 76 OBES Obesity prevention 77 OBES Obesity prevention 78 OBES Obesity rates 79 OBES Obesity rates 70 OBES Obesity rates 70 OBES Obesity rates 70 OBES Obesity rates 71 OBES Obesity rates 71 OBES Obesity rates 71 OBES Obesity rates 72 OBES Obesity rates 73 OBES Obesity rates 74 OBES Obesity rates 75 OBES Obesity rates 76 OBES Obesity rates 77 OBES Obesity rates 78 OBES OBES OBES OBESITY rates 78 OBES OBES OBES OBES OBESITY rates 78 OBES OBES OBES OBES OBES OBESITY rates 78 OBES OBES OBES OBES OBES OBES OBES OBES	6	BH	Mental health awareness/education	6	NUTR	
Mental health orierings	11	ВН	Mental health education	40	NUTR	Access to nutrition services/education
BH	5	ВН	Mental health offerings	12	NUTR	· ·
BH	40	ВН		4	NUTR	Food security
8 BH More mental health providers 5 OBES Childhood obesity 1 BH MTL health awareness 6 OBES Obesity 17 BH Need more mental health providersespecially in the schools 22 OBES Obesity 37 BH Reimbursement to mental health 29 OBES Obesity 4 BH Stigma of mental health issues 38 OBES Obesity and related factors 30 BH Vastly expanded mental health services (resources now are bleak) - applies to depression and suicide 17 OBES Obesity prevention 14 CLIN Healthcare improvement - weekend medical walk in clinics 23 OBES Obesity rates 11 CMEM Apathy 30 OBES There needs to be plans to reduce obesity & improve physical activities 15 CMEM Awareness of issues relating to the overall health of communities 5 OBG OB care 11 CMEM Participation in community 3 OTHR Gun purchases - needs to be harder buy guns 12 DENT Dental in the schools - offer more than cleaning 2 OTHR Internet infrastructure	36	ВН	mental health patient access to care besides	40	NUTR	Food security
8BHMore mental health providers5OBESChildhood obesity1BHMTL health awareness6OBESObesity17BHNeed more mental health providersespecially in the schools22OBESObesity37BHReimbursement to mental health29OBESObesity4BHStigma of mental health issues38OBESObesity and related factors30BHVastly expanded mental health services (resources now are bleak) - applies to depression and suicide17OBESObesity prevention14CLINHealthcare improvement - weekend medical walk in clinics23OBESObesity rates11CMEMApathy30OBESThere needs to be plans to reduce obesity & improve physical activities15CMEMAwareness of issues relating to the overall health of communities5OBGOB care11CMEMParticipation in community3OTHRGun purchases - needs to be harder buy guns12DENTDental in the schools - offer more than cleaning2OTHRInternet infrastructure	22	BH		40	OBES	Childhood obesity
BH Need more mental health providers especially in the schools 22 OBES Obesity	8	BH	More mental health providers	5	OBES	Childhood obesity
17	1	BH	MTL health awareness	6	OBES	Obesity
4 BH Stigma of mental health issues 38 OBES Obesity and related factors Vastly expanded mental health services (resources now are bleak) - applies to depression and suicide 14 CLIN Healthcare improvement - weekend medical walk in clinics 16 CMEM Apathy There needs to be plans to reduce obesity & improve physical activities There needs to be plans to reduce obesity & improve physical activities There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & improve physical activities There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates There needs to be plans to reduce obesity & obesity rates	17	ВН		22	OBES	Obesity
30 BH Vastly expanded mental health services (resources now are bleak) - applies to depression and suicide Healthcare improvement - weekend medical walk in clinics 23 OBES Obesity rates	37	BH		29	OBES	Obesity
30 BH	4	BH	Stigma of mental health issues	38	OBES	Obesity and related factors
14CLINHealthcare improvement - weekend medical walk in clinics23OBESObesity rates11CMEMApathy30OBESThere needs to be plans to reduce obesity & improve physical activities15CMEMAwareness of issues relating to the overall health of communities5OBGOB care11CMEMParticipation in community3OTHRGun purchases - needs to be harder buy guns12DENTDental in the schools - offer more than cleaning2OTHRInternet infrastructure	30	ВН	(resources now are bleak) - applies to	17	OBES	
15 CMEM Awareness of issues relating to the overall health of communities 15 CMEM Participation in community 16 DENT Dental in the schools - offer more than cleaning 17 CMEM Awareness of issues relating to the overall improve physical activities 18 OBG OB care 19 OTHR Gun purchases - needs to be harder buy guns 2 OTHR Internet infrastructure	14	CLIN	Healthcare improvement - weekend medical	23	OBES	Obesity rates
15 CMEM Awareness of issues relating to the overall health of communities 5 OBG OB care 11 CMEM Participation in community 3 OTHR Gun purchases - needs to be harder buy guns 12 DENT Dental in the schools - offer more than cleaning 2 OTHR Internet infrastructure	11	CMEM	Apathy	30	OBES	
12 DENT Dental in the schools - offer more than cleaning 2 OTHR Internet infrastructure	15	CMEM		5	OBG	OB care
12 DENT cleaning 2 OTHR Internet intrastructure	11	CMEM	· · ·	3	OTHR	Gun purchases - needs to be harder buy guns
13 DENT More local dental services for uninsured 37 OTHR NH				2		Internet infrastructure
	13	DENT		37	OTHR	NH

Wave #3 CHNA - Henry and Benton Co MO

Town Hall Conversation - Weakness (Color Cards) N= 43

		Town Hall Conversation - We	Janiie.	33 (0010	•
Card #	C1	Today: What are the weaknesses of our community that contribute to health?	Card #	C1	Today: What are the weaknesses of our community that contribute to health?
19	DRUG	Drug abuse	34	OTHR	Routine exam reminders
22	DRUG	Drug abuse	5	OTHR	Rural health modernization
38	DRUG	Drug abuse	40	OTHR	Sensitivity training for first responders
40	DRUG	Drug abuse	27	PART	Identification of high utilizers/care
40		Drug abuse	21		coordination
25	DRUG	Drug abuse by awareness	4	POV	Hopelessness of poverty
23	DRUG	Drug abuse/education	40	POV	Hopelessness of poverty
14	DRUG	Drug awareness	36	POV	Percent of families in poverty
34	DRUG	Drug awareness & prevention	12	POV	Poverty of the county and kids
26	DRUG	Drug prevention	32	POV	Poverty/food insecurity
5	DRUG	Drug treatment	9	POV	Willingness to address poverty in a holistic way (organizational, community, economic develop
4	DRUG	Drug use	23	PREV	Sex ed/prevention - underaged mothers
28	DRUG	Drug use education for youth	4	PREV	Teaching healthy coping mechanisms
17	DRUG	Drug use prevention	3	PYS	Availability of psych services all over the two counties - available to other clinics - not just Clinton
11	DRUG	Drug, alcohol prevention	9	REC	Communities made conducive to active living (biking, walking, playing)
28	DRUG	Drug, alcohol, and tobacco assistance	23	REC	Don't utilize what we have (walking trail/Katy Trail, fitness facility)
6	DRUG	Drug/alcohol use	28	SMOK	Cessation programs
2	DRUG	Drugs	22		No smoking/vaping
29			1	SMOK	Smoking while pregnant
28	DRUG	Enforcement on drug distribution (illegal)	16		Need for school based therapists
5	DRUG	Need prescription drug monitoring	22	SNUR	School health
35	DRUG	Opioid crisis, resources to address	40	SNUR	School nurses
3	DRUG	Prescribing opioids needs to be decreased even more	17	SPAR	Help for single parent households
37	ECON	Economic development	4	SPAR	Single parent households support
19		Economic development	13		Better access to specialized care
39	ECON	Economic growth	39		Frequency of specialties
15	ECON	Encourage economic development	29		Keep here for specialized services
16	ECON	Encourage economic development	2	SPEC	More specialty
24	ECON	Jobs	1	SUIC	Suicide
35		Lack of economic development	22		Suicide
16		ER care	5	SUIC	Suicide awareness & sensitivity training for first responders
36	EMER	ER care	32	SUIC	Suicide/depression improvement of rates
8		ER wait time/urgent care	40	TEL	Telehealth access
39	FAC	Skilled facilities	6	TEL	Telehealth access in schools
40	HOSP	PDMP	28	TOB	Tobacco education
40		Adequate housing	21		Access for transportation challenged
2	HOUS	Housing	27	TRANS	Access to transportation - impacts access to care
4	HOUS	Housing	18	TRANS	Improved access (transportation) to healthcare
21	HOUS	Housing challenges	22	TRANS	Transportation
2	HOUS	PDMP	10		Transportation services
18	INSU	ACA/market place insurance options	8		Transportation system
20		Access to affordable insurance (not Medicaid)	33	URG	Access to public urgent care (perception)
5	INSU	Additional insurance providers of Medicare advantage	20	URG	Urgent care vs ER
15	INSU	Better healthcare coverage	16	VIO	Investigation of abuse
-		1=			1

Wave #3 CHNA - Henry and Benton Co MO Town Hall Conversation - Weakness (Color Cards) N= 43 Today: What are the weaknesses of our community Today: What are the weaknesses of our community Card # C1 Card # C1 that contribute to health? that contribute to health? INSU 40 VIO Better insurance payers - under insured Violence 22 INSU Better Rx coverage 23 VIO Violence increased 4 INSU 19 VIO Violence prevention Crappy insurance 5 19 INSU VIO **Expanded Medicaid** Violence prevention 29 INSU 6 WELL Community wellness/education Insurance 22 9 WELL INSU Insurance - everything! Healthy living education 8 INSU Insurance accepted 9 WELL Healthy living education 6 INSU Insured or underinsured

c) Public Notice & Requests

[VVV Consultants LLC]

EMAIL #1: Request to Henry Co CHNA Stakeholders (Send via your Email ... paste message add subject line BCC all stakeholder emails from roster.)

From: cthompson@gvmh.org, peggv.bowles@lpha.mo.gov, dkuck@compasshn.org

Date: Sept 3, 2019

cthompson@gvmh.org, peggy.bowles@lpha.mo.gov, dkuck@compasshn.org

BCC: Community Leaders, Providers, Hospital Board and leadership

Subject: Henry & Benton Co - Community Health Needs Assessment 2019 Online

Feedback Survey

Golden Valley Memorial Healthcare, in partnership with Compass Health Network and Henry County Health Center, are working on their 2019 Henry and Benton County MO Community Health Needs Assessment (CHNA). (Note: This assessment update is a follow-up to meet final IRS regulations released on 01/02/2015, requiring all 501(c) (3) hospitals to conduct a Community Health Needs Assessment and adopt an implementation strategy at least once every three years.)

The goal of this assessment update is to understand progress in addressing community health needs cited in the 2016 CHNA report and to collect up-to-date community health perceptions and needs. To accomplish this work, a short online survey has been developed: https://www.surveymonkey.com/r/GVMH HenryCo BentonCo CHNA 2019

All community residents and business leaders are encouraged to participate in the survey by Friday, October 4th.

VVV Consultants LLC, an independent research firm from Olathe, KS, has been retained to conduct this countywide research. All responses will be confidential.

Thank you in advance for your time and support by participating in this important request. Also, please hold Tuesday, October 15th from 5:30 p.m. to 7:00 p.m. to attend the Community Town Hall at the Clinton Rotary Building. A light dinner will be provided starting at 5:15 p.m.

Sincerely,

Craig Thompson, Peggy Bowles, and Donni Kuck



FOR IMMEDIATE RELEASE:

Contact:

Lea Studer
Director of Marketing and Communications
Golden Valley Memorial Healthcare
660-890-7603
Is4444@gvmh.org

Golden Valley Memorial Healthcare, Compass Health and Henry County Health Center Request Community Health Needs Assessment Feedback

Clinton, Mo. – (September 9, 2019) – Golden Valley Memorial Healthcare (GVMH) in partnership with Compass Health Network and Henry County Health Center, are working on the 2019 Community Health Needs Assessment (CHNA) for Henry and Benton counties in Missouri.

This assessment update is a follow-up to meet final IRS regulations released on January 2, 2015, requiring all 501(c) (3) hospitals to conduct a Community Health Needs Assessment and adopt an implementation strategy at least once every three years.

The goal of this assessment update is to understand progress in addressing community health needs cited in the 2016 CHNA report and to collect up-to-date community health perceptions and needs. To accomplish this work, a short online survey has been developed:

https://www.surveymonkey.com/r/GVMH_HenryCo_BentonCo_CHNA_2019

-more-

All community residents and business leaders are encouraged to participate in this survey by October 4, 2019.

"This work is key to determine the health direction for the communities we serve," said Craig Thompson, CEO of GVMH. "We hope that all community stakeholders will take advantage of this opportunity to provide input into the future of healthcare delivery in their community."

VVV Consultants LLC, an independent research firm from Olathe, Kansas has been retained to conduct this countywide research. All responses will be confidential.

On October 15, a community town hall meeting will be held at the Elks Lodge Banquet Hall in Clinton, Mo., from 5:30-7 p.m., to discuss the results. A light dinner will be provided starting at 5:15 p.m.

Thank you in advance for your time and support by participating in this important request.

For more information, contact Craig Thompson at cthompson@gvmh.org; Peggy Bowles at peggy.bowles@lpha.mo.gov or Donni Kuck at dkuck@compasshn.org.

###

Email #2 - Town Hall Invite

From: cthompson@gvmh.org, peggy.bowles@lpha.mo.gov, dkuck@compasshn.org

Date: Sept 27, 2019

To: cthompson@gvmh.org, peggy.bowles@lpha.mo.gov, dkuck@compasshn.org

BCC: Community Leaders, Providers, Hospital Board and leadership

Subject: Henry & Benton Co – CHNA Community Town Hall, Oct 15

Golden Valley Memorial Healthcare, in partnership with Compass Health Network and Henry County Health Center, are working on their 2019 Henry and Benton County MO Community Health Needs Assessment (CHNA).

The goal of this assessment update is to understand progress in addressing community health needs cited in the 2016 CHNA report and to collect up-to-date community health perceptions and needs. To accomplish this work, a short online survey has been developed and results will be presented at a Community Town Hall. VVV Consultants LLC, an independent research firm from Olathe, KS, has been retained to conduct this countywide research.

The Henry and Benton County, Missouri CHNA Town Hall working dinner meeting is on Tuesday, October 15th from 5:30 p.m. to 7:00 p.m. in Rotary Club Building (200 W Franklin St, Clinton, MO 64735). A light dinner will be provided starting at 5:15 p.m.

Please RSVP here for the Oct 15th Town Hall:

https://www.surveymonkey.com/r/GVMH_Henry_BentonCo_CHNA_RSVP_2019

Thank you in advance for your time and support in participating with this important request. If you seek any additional information or have any questions regarding this assessment, please contact me.

Sincerely,

Craig Thompson, Peggy Bowles, and Donni Kuck



FOR IMMEDIATE RELEASE:

Contact:

Lea Studer
Director of Marketing and Communications
Golden Valley Memorial Healthcare
660-890-7306
Is4444@gymh.org

Town Hall Meeting for Community Health Needs Assessment is October 15 at Rotary Club Building

Clinton, Mo. – (Oct. 4, 2019) – Golden Valley Memorial Healthcare (GVMH) in partnership with Compass Health Network and Henry County Health Center, are working on the 2019 Community Health Needs Assessment (CHNA) for Henry and Benton counties in Missouri.

The goal of this assessment update is to understand progress in addressing community health needs cited in the 2016 CHNA report and to collect up-to-date community health perceptions and needs. To accomplish this work, a short online survey has been developed and results will be presented at a Community Town Hall. VVV Consultants LLC, an independent research firm from Olathe, KS, has been retained to conduct this countywide research.

-more-

The Henry and Benton County, Missouri CHNA Town Hall working dinner meeting is Tuesday, October 15 from 5:30-7 p.m. at the Rotary Club Building located at 200 W Franklin Street in Clinton. A light dinner will be provided starting at 5:15 p.m.

Please RSVP here for the Oct. 15 Town Hall Meeting:

https://www.surveymonkey.com/r/GVMH_Henry_BentonCo_CHNA_RSVP_2019

Thank you in advance for your time and support in participating with this important request. If you seek any additional information or have questions regarding this assessment, please contact Lea Studer at 660-890-7306.

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d) Primary Research Detail Neighborhood Roundtables & Online Research

[VVV Consultants LLC]

ID			Community Fee	1			
	Zip	Overall	Movement	с1	c2	с3	In your opinion, what are the root causes of "poor health" in our community?
1043	64735	Average	Increasing - moving up	ACC	MRKT		Availability, desire, awareness and options of services
		Ŭ					I think in general most people if they have a mental health issue, do not
							want to go somewhere local - as they don't want others to know or run ir
1150		Very Good	Increasing - moving up	ВН	TRAV		someone they know
			Not really changing				
1200	64735	Good	much	DRUG	BH		Drugs and Mental illness.
			Not really changing				Adults with major drug & mental health issues who do not value or care
1374	64735	Average	much	DRUG	BH		about anyone including their kids.
							Provide better services in our school to mentor them not only in education
							but in life that doesn't lead to drugs. For example Tide provided some
							schools with washers and dryers and detergent, for kids who need clean
1117	64735	Average	Increasing - moving up	DRUG	WELL	SS	clothes, so they don't feel ashamed.
1010	64735	Good	Increasing - moving up	DRUG			increasing drug abuse
1013	64735		Increasing - moving up	DRUG			drug abuse
1014	64735	Poor		DRUG			All the drugs in this town!
1055			Increasing - moving up	DRUG			drugs
1064		Very Good	Increasing - moving up	DRUG			Drug abuse
1119	64735	Good	Increasing - moving up	DRUG			Drug Abuse
			Not really changing				
1334	64735	Poor	much	DRUG			Drugs
1332	64735	Average	Decreasing - slipping downward	ECON	DRUG		The problem is the willingness for people to want to work. Economic development is a problem in this downthere is NONE!! Drugs are a huge issue, but we make it easy for people to move in due housing bein so cheap in certain areas, with certain people being landlords. Every year it gets worse. Look at all the arrest on a daily basis for drugs.
			Decreasing - slipping				low economic status of patients in the area, so unable to consistantly
1282	64093	Average	downward	ECON	POV		afford healthiest choices for food, preventive care
1086	64735	Good	Increasing - moving up	ECON			limited economic opportunities
			Decreasing - slipping				
1344		Good	downward	ECON			Clinton needs more job opportunities
1063	64735	Good	Increasing - moving up	FAM			Families are not staying together.
1125	64735	Average	Not really changing much	GOV	ECON	ВН	Our environment, systems, and policies do not support good health 2 Lack of job opportunities that supply a living wage 3) Stigma surrounding mental healthcare
4040	0.4705		Decreasing - slipping	001/			
1318	64735	G000	downward	GOV			Complacency among community leadership
1267	65360	Good	Increasing - moving up	INSU	SS		Patients at Royal Oaks and Pathways need assistance applying for MCI coverage
		١.	Not really changing	07110			
1008	64735	Average	much	OTHR			Limited educational attainment within the community
405	0===		Not really changing				
1051	65355	Good	much	OTHR			The programs are out there but getting them to participate.
		., 6	Decreasing - slipping				
1088	64735	Very Good	downward	OTHR			Disfunctional home environment
		., -	Decreasing - slipping				
1145	64735	Very Poor	downward	OTHR			legal system is allowing rampant criminal sctivity in this area
	64735		Increasing - moving up	OTHR			Apathy
		Average	Increasing - moving up	OTHR		1	Lack of ambition on the part of the patient
		Very Good	Increasing - moving up	OTHR			Lack of personal responsibility
1222	64735	Good	Increasing - moving up	OTHR			non-compliance of patients
40-			Not really changing				some people don't care to improve their health, especially if there is no
1300	64726		much	OTHR			financial incentive to make it so.
1364		Good	Increasing - moving up	OTHR			stress
			Not really changing				
1234	64724	Good	much	POV			limited income - poverty
			Not really changing				
		Average	much	REC	<u> </u>		bike trails around town
1102	0=000	Average	Increasing - moving up	SS			CPS/DFS not taking kids from poor home life conditions
1102 1028	65360			· -		1	
	65360		Decreasing - slipping				
			Decreasing - slipping downward	SS			Poor agency reputation
1028				SS			Poor agency reputation People on disability that are not honestly disabled. They take the \$\$\$
1028	64735		downward	SS			

(CHN/	A 2019 (Community Fee	dbacl	<u>k - GV</u>	<u>/MH (I</u>	Henry and Benton Counties MO) N=381
ID	Zip	Overall	Movement	c1	c2	с3	What "new" community health programs should be created to meet current community health needs? Can we partner somehow with others?
1196	64770	Average	Not really changing much	ACC	SPEC		Better access to specialists
1100	01110	Attorage		noo	OI EO		Elderly Assistance Programs- Care Connection for the Area Aging. Our older population does not have enough caregiver or facility care options. The elderly population is going increase. Juvenile Office should partne with Division of Youth Services for a more effective source of treatment intervention. We don't have enough Juvenile Officers to cover the amoun of children needing services. As a individual that has grown up in this community and watched several adolescents grow into adult offenders,
1110	64735	Good	Increasing moving up	AGE	FAC	CORP	Henry Co doesn't have an effective outcome. Also having worked in DYS seen, learned, and know that the service is proven to be effective and har increased outcomes. Referrals to an outpatient program is beneficial but cometimes cometimes cometimes to be done.
1119	64733	Good	Increasing - moving up	AGE	FAC	CORP	sometimes something different needs to be done. We need better elder care in our community as well as child care and
1009	64735	Good	Increasing - moving up	AGE	KID		health screenings available for all.
1309	64776	Very Good	Increasing - moving up	ALC	DRUG		alcohol and drug abuse. Abuse
1052	64735	Good	Increasing - moving up	ALZ	WELL	MRKT	More support for individuals and families with Alzheimer's. More education and marketing of services in the community or surrounding areas
			Not really changing				A large assisted living facility would help to provide services otherwise unavailable in our area. The facility would not have to be to the scale of John Knox Village, but could provide many of the same services for our aging population. Poverty and drug abuse are increasing among the younger population. The mental health providers and the criminal justice
1293 1043		Good Average	much Increasing - moving up	ASLV ASLV	POV	DRUG	system are failing those affected. Skilled facility
1122			Increasing - moving up	ASLV			Potentially assisited living
1118			Increasing - moving up	BH	DRUG	CORP	mental health services substance abuse treatment/services yes,
1030	64744	Cood	Ingraphing moving up	DII	DDIIC		People need to be more aware and helpful for the depression, suicidal,
1030	64744	G000	Increasing - moving up Decreasing - slipping	BH	DRUG		drug users, and mental health issues. address mental health and drug abuse without overloading the hospital
1344		Good	downward	BH	DRUG		and ED
1248	64735	Average	Decreasing - slipping downward	вн	KID	OTHR	better mental health, childhood development, lifestyle change / wellness
			Decreasing - slipping				More juvenile mental health servicesmore therapists, community support
1325 1195	64735 65785		downward Increasing - moving up	BH BH	KID KID	PSY	workers, psychiatrists. Mental health. Especially for children.
1275	00700	Very Good	Increasing - moving up Not really changing	BH	KID		More mental health, especially for people under age 18.
1328	64735	Good	much	ВН	KID		Need a behavioral specialist for children.
		Very Good	Increasing - moving up	ВН	PSY		Better mental health services for patients that need a psychiatrist for med only and better counseling services where patients don't have to go thru an "interview" process.
1081	64735	Average	Increasing - moving up	BH	QUAL		Mental health awareness and quality mental health services.
1064	64736	Very Good	Increasing - moving up	ВН	TRAU	PSY	We have got to do something to address mental health. The schools need help in dealing with children who experience trauma. Teachers need meaningful training and every school needs a school psychologist.
			Decreasing - slipping				. ,
1373 1239			downward Increasing - moving up	BH BH	WELL		Metal health and wellness programs. Mental Health placement
1272		Average	Increasing - moving up	ВН			Need more partnering with Mental Health services.
1290	64735		Increasing - moving up	BH	1	1	Mental health and management of .
1295		Very Good	Increasing - moving up	BH			mental health services
1313	64776		Increasing - moving up	BH			Mental Health
1319	a :-	Very Good	Increasing - moving up	BH			Behavioral Health Unit
1329	64735		Increasing - moving up Not really changing	BH			Mental Health Facilities
1143 1193			much Increasing - moving up	CHRON			copd Chronic disease management
1133	00000	Joou	moreasing - moving up	OLINON			Better communication between all providers in both counties would be a
1071	64763	Good	Increasing - moving up	COMM	ENDO		start. New having a visiting Endocrinologist. "rich" people do not understand what it is like to be without so therefore
1120	64725	Average	Not really changing much	CORP	CRUG		they never see the health issues the community has or potentially be dealing with. Take the Clinton high school for example: When my kids were going there the principal, administration, social workers, counselors and staff did not want to look at the problem of drug usage and bullying within the school. "We don't have that problem here" was said to me as well as other community members. You have to open your eyes as a community first before any real "issues" can be resolved or programs put in place.
1130	04100	, woraye	muon	JONE	CINOG		yes, we can partner with Compass/Health Center so people know they have options besides going to the emergency room for minor health
1210	64735	Average	Increasing - moving up	CORP	EMER		issues.

(CHN	A 2019 (Community Fee	dback	< - GV	MH (I	Henry and Benton Counties MO) N=381
ID	Zip	Overall	Movement	c1	c2	с3	What "new" community health programs should be created to meet current community health needs? Can we partner somehow with others?
							Not sure that "new" community programs should be created but more partnerships with Area Agency on Aging, University Extension, and other agencies that can and are already providing services as: Medicare and Medicaid education; serivces for older adults - case management, inhome, respite, nutritional meals; chronic disease management; pain management; health and wellness programs such as Tai Chi, Matter of
1053	64735	Good	Increasing - moving up	CORP	INSU	AGE	Balance - Falls Preventions; care transitions/discharge from hospital; Opioid education; more focus on caregivers providing care to family members, adult disabled children; education on Alzheimer's and dementia; lastly education on wills, POA, DPOA, estate planning.
							I think having more education in schools about Over the Counter products, like partnering with UMKC pharmacy school would be helpful. Also if there was a daycare for employees of both would be super helpful
1279	64726	Average	Increasing - moving up	CORP	KID	CANC	for healthcare workers, and a positive service for the community. And if we worked with Relay for Life to promote cancer screenings.
1017			Not really changing much	CORP	OTHR		Partnership between Golden Valley ER and Compass health for timely handoff for addiction treatment. ER providers to start treatment in ER and refer to Compass next day.
		Average	Decreasing - slipping downward	CORP	PEDS		Partner with childrens mercy for more pediatric services in this area. We have none. Offer free smoking cessation classes. Provide more community education on drugs and obesity.
			Decreasing - slipping			SIVIOR	Partner with bigger hospitals in the city and have mote full time Specialist
1029	64735	Average	downward Not really changing	CORP	SPEC		on staff. partnerships with UCM beyond nursing (exercise science, public health,
1300	64726	Good	much Not really changing	CORP	WELL	PREV	etc) to create wellness and prevention programs. We should concentrate our efforts on improving the problems we as a facility have and take on partnering with others after we have fixed
1039	64788	Average	much	CORP			ourselves. There is no support from any of these companies in the outreach
							programs that are taking place within the Henry Co community. We have a lot of outreach programs but it doesn't seem like anyone from these different companies wants to come to our open meetings to see how they can lend a hand or just to get information. They need to start reaching out to the local outreach programs in the area and start networking in order to
1251	64735	Good	Not really changing much	CORP			build these relationships and see how we can all work together to build a better community.
1233	64735	Good	Not really changing much	DENT	POV		Maybe offer something similar to what the schools do each year like a dentist varnish and check to 18+ that maybe can't afford it. Host at the Benson Center.
1188	64735	Very Good	Increasing - moving up	DENT			Perhaps more dental specialists
1234	64724	Good	Not really changing much	DOCS	GOV	INSU	Health Care providers need to work more with legislators and the health care regulators in regard to excessive insurance premiums, deductibles, exclusions (necessary meds). Insurance system is broken.
1200	64735	Good	Not really changing much	DRUG	ВН		Drug and mental illness in Clinton and Windsor is off the chart. It is getting to the point where it isn't safe to live here anymore
1063	64735	Cood	Increasing - moving up	DRUG	CORP	OTUB	We have to do something about all of the drugs. Partner with law enforcement, whomever it needs to be, to get our streets clean, our children free from these addictions, and people back in stable environments.
1191		Very Good	Increasing - moving up	DRUG	INSU	OTHK	Drug Screen Medicaid/Welfare recipients.
1010	64735	Good	Increasing - moving up Not really changing	DRUG	OBG	PNEO	Drug addiction maternal/well child/prenatal
1334			much	DRUG	OTHR		Solve the drug issues-police dept
1055			Increasing - moving up Not really changing	DRUG	PREV	AGE	drug prevention & help, elderly help, mental health help Drug abuse prevention Budgeting classes Health and Nutrition classes for families. Welking clubs or programs with insentings for families.
1068	65326	<u> </u>	much	DRUG	PREV	WELL	for families Walking clubs or programs with incentives for families It is difficult to even figure out where to start with some of the issues. Programs can only be determined to be successful IF you can get people to participate. Getting the participants to focus on their personal health is where the struggle lies. Drugs, Smoking, Abuse, Obesity - these are all
1331	65355	Average	Not really changing much	DRUG	SMOK	OBES	issues that some people choose to live. Until we can work toward changing that mindset, health programs are meaningless.
1065	65355	Average	Decreasing - slipping downward	DRUG	WELL	ВН	drug programs and school mental health
1330			Increasing - moving up	DRUG	WELL		S.A.D.D., Teen drug program at high school
1100	64735	Average	Not really changing much	DRUG			Drug infestation
1120		Very Good	Not really changing much	DRUG			More effective drug intervention starting with stepped up enforcement
1237 1371		Average Very Good	Increasing - moving up Increasing - moving up	DRUG DRUG			Drug issues are slowly killing our community. I think the drug problem needs to be addressed
			Not really changing				

	Zip	Overall	Movement				What "new" community health programs should be created to meet
			Wovernent	c1	c2	с3	current community health needs? Can we partner somehow with others?
							The ability for ER to triage patients and send to Walk- in clinics, so ER
1276		Average	Increasing - moving up	EMER	CLIN		employees can handle true emergencies.
1028	65360	Average	Increasing - moving up	FAM	ALT		I would like to see a program for people struggling with infertility & the holistic effects it has.
1255		Very Good	Increasing - moving up	FAM	REC		Have something for families to do together, bowling for example.
		, ,	Not really changing				g a same and g a same and g a same g a
1261	64735	Good	much	FAM			Better Birth control methods
4004	0.4705	0	Not really changing	FINIA			Financial Halo
1034 1339	64735	Average	much Increasing - moving up	FINA			Financial Help more affordable healthcare
1352	64735	Average	Increasing - moving up	FINA			more affordable healthcare-2. not sure
			Not really changing				
1317		Average	much	FIT			We need to get more children active.
1161	64735	Good	Increasing - moving up	GAS	SPEC		bariatric treatments MEDICARE AND MEDICARE REPLACEMENT OFFERS AND
1153	64761	Very Good	Increasing - moving up	INSU			BENEFITS
1100	04701	very dood	moreasing moving up	11100			I believe that more people could pay for their services if they had
							assistance applying for Medicaid. This would alleviate the need to write-o
1267			Increasing - moving up	INSU			their healthcare bills.
1086	64735	Good	Increasing - moving up	IP	BH	OP	Inpatient mental health, stronger outpatient mental health services. I think we need more inpatient services for youth and adults (More
1212	64735	Average	Not really changing much	IP	KID	EMER	intensive type treatment facilities). A better and more consistent ER!!
1040			Increasing - moving up	IP	OP	BH	Inpatient/Outpatient mental health facility
			0 01				Somehow, we need to reach the kids and teach them life skills, healthy
1082	64735	Good	Increasing - moving up	KID	WELL	NUTR	eating, and what real love is!
1115	64725	Very Poor	Decreasing - slipping	NAANI	OLIAI		Current hospital management needs to be replaced with experts at
1145	64735	very Poor	downward Decreasing - slipping	MAN	QUAL		managing a quality hospital that serves the local customers. Something to help people afford healthy food options. Maybe partner with
1284	64735	Good	downward	NUTR	CORP		a food bank from a larger city.
			Not really changing				More awareness of health and fitness; more organized youth sport
1286	64770	Good	much	NUTR	FIT		opportunities for those who might not be "sporty"
1016	64776	Cood	Not really changing	NUITO	DO)/	405	Healthy food alternatives for low income and elderly. Cannot afford the
1016	64776	G000	much Decreasing - slipping	NUTR	POV	AGE	fresh food recommended for diets. Nutrition education with food assistance Physical activity education
1060	65338	Good	downward	NUTR	WELL	FIT	Mental health and how it impacts chronic conditions
			Decreasing - slipping				
1087	64735	Average	downward	OBES	FIT	DRUG	weight loss, exercise, drug addiction & recovery, parenting
4040	0.4705			0050	NUITO		Obesity and healthy eating. Needs to be available to everyone (adults
1046	64735	G000	Increasing - moving up	OBES	NUTR		and children alike). More obesity programs for young children and adults, more smoking
1360	65355	Good	Increasing - moving up	OBES	SMOK	ВН	cessation and more mental health services both inpatient and outpatient
			Not really changing				
1080			much	OBES			Obesity/weight loss
1162	65323	Good	Increasing - moving up Not really changing	ONC			As we all know, GV needs Radiation Oncology services.
1164	64735	Good	much	ONC			Wider Oncology services.
-			Not really changing				
1000	65355	Good	much	ORAL			Dental Tooth Extraction
4044	0.4750	A	Not really changing	OTUD	DII		better men's health services and increased mental health programs/
1211	64753	Average	much	OTHR	BH		assistance
							Why can't we improve our hospital and make its reputation better? I just
							wish we could clean up our town from run down houses and drug streets
							and neighborhoods and all the trashy yards . Plus kids have nothing to do
1014	64725	Door		ОТИВ			so they damage church parking lots and their playgrounds and landscape
1014	64735	1 001	 	OTHR	 	 	Parents who don't care, their kids don't care either. It's sad. Teach personal responsibility from health to finance to societal
1219	64735	Very Good	Increasing - moving up	OTHR			responsibilities.
			Not really changing				Let's concentrate on getting an excellent rating on the ones we have
1335	64735	Average	much	OTHR		ļ	before we venture out to add more and only do them fair.
							More fun, engaging prenatal education programs. Programs designed to
							keep our community here for their healthcare needs, so we need to revamp our whole marketing plan, bring website up to date for hospital
1336	64735	Very Good	Increasing - moving up	PNEO	WELL	MRKT	and highlight each department and what programs they offer.
			Not really changing				
1358	64735	Average	much	POV	KID	ļ	Helping our homeless community, specifically youth.
1100	64725	Good	Decreasing - slipping	BOY			homologs treatment
1182 1366		Good	downward Increasing - moving up	POV	1	-	homeless treatment helping people with money issues
1000		J000	Decreasing - slipping	, ov	†	1	A solution to care for psych patients needing acute care other than
1088	64735	Very Good	downward	PSY	EMER		accessing ER.
	'				1		psychiatric care and family support services. Many families are struggling
	1 .		Not rooth, shan-i				
1002	64735	Average	Not really changing	PSV	FΔM	PO\/	to provide the "basics" for their family, coupled with low income and low
1008	64735	Average	Not really changing much Decreasing - slipping	PSY	FAM	POV	to provide the "basics" for their family, coupled with low income and low educational attainment. Provides for poor health outcomes.

ID Z	Zip	Overall	Movement	c1			What "new" community health programs should be created to mee
				C1	c2	с3	current community health needs? Can we partner somehow with others?
							Our school district does an above average job addressing the needs of children & teens w/ psychiatric issues. Unfortunately as soon as the schools no longer have input & guidance about a student's mental health issues, there isn't a system in place to "hand them off" to the next services. Granted, it comes down to adjudicated competency vs a willingness to access services that will make life easier for them & those
			Decreasing - slipping				whilingless to access services that will make the easier to them those who love them. There are so many young adults who are lost without the structure of school which leads to poor choices such as drug abuse & crime. It's a civil rights issue so the options are minimal unless / until those individuals commit a crime or become severely mentally ill. Guess
1093	64735	Very Good	downward	PSY	KID	DRUG	
1036	64735	Good	Decreasing - slipping downward	QUAL	ACC	ВН	abuse treatment. Current provider has no competition and does shows to big to fail attitude.
1375	64735	Average	Decreasing - slipping downward	RAD	FINA		We need reasonably priced diagnostic imaging. It is absolutely crazy the someone with insurance (HSA) has to pay over \$500 out of pocket for all ultrasound that can be done at a diagnostic imaging center for \$150 or less for better quality.
1125	64735	Average	Not really changing much	REC	ACC		Improving sidewalks, adding bike/walking trails & paths to connect the community's resources. Look at enhancing ACCESS to existing resources not so much offering new programs.
1120	047.00	Average		RLC	ACC		Our parks and recreation program has the means to contribute to the overall health of our community and there is a lot of opportunity for improvement within the organization. A partnership may be necessary in order to orchestrate positive change within the organization. There needs to be a balance between help and punishment when it comes to substance abuse in our community. Setting pride aside and
1318	64735	Good	Decreasing - slipping downward Decreasing - slipping	REC	CORP	DRUG	understanding what role each party has in decreasing substance abuse our community could be a great place to start.
1377	64735	Poor	downward	REC	FIT		Really need more places to walk and exercise beside the Katy Trail. Walking trail around the hospital. Program for children to increase activities.
1037	64735	Very Good	Not really changing much Not really changing	REC	KID	WELL	(pedometer or fitbit device beginning with 1-2 classes/grades, newslette or email on seasonal activities, walk or ride to school with parent, app for device to track activity)
1102	64735	Average	much	REC			bike trails around town Tobacco Cessation programs and education Mental Health counseling
1165	64763	Good	Increasing - moving up	SMOK	ВН	ALC	and education Alcohol Abuse education Need anti-smoking campaigns for children and adults, more anti-smokin laws for public areas, fewer liquor stores, more preventative care for
		Average	Increasing - moving up	SMOK	GOV	ALC	chronic health issues Tobacco & e-cigarette prevention and cessation programs in schools an the general public. Work on improving ACCESS to existing resources.
1134	64735	Average	Increasing - moving up	SMOK	PREV	REC	Our community's sidewalks and roads are horrible. Stop Vaping education. Mentoring underserved kids. Economic
1117	64735	Average	Increasing - moving up	SMOK	WELL	ECON	opportunities. Case management/community support services for individuals without Medicaid or patients that do not need behavioral health services but still
1106	65360	Good	Increasing - moving up	SS	INSU	ВН	struggle to navigate insurance and medical health services. If we get someone else like Compass Health that pays more, then we can
1321	64735	Good	Increasing - moving up	STFF			loose more employees to them.
1297	65325	Good	Increasing - moving up	SUIC	PREV	ВН	Suicide prevention, mental health programs with schools, DFS paperwo assistance,
1115	64788	Good	Increasing - moving up	TRAN	AMB		transportation after discharge instead of abusing ambulances. especially on nights and weekends.
1283	64735	Good	Increasing - moving up	TRAN	POV		Healthcare transportation for the needy that is more convenient than OATS Better transportation services for patients that don't leave them stranded
1003	65360	Average	Decreasing - slipping downward	TRAN			at appointments for hours or not getting care they need because they ca get to appointments because they can not get rides from their homes if they live in the more rural areas to their appointments.
1038	64735	Good	Increasing - moving up	TRAN			Transportation needs to be improved now that GVMH doesn't provide transportation to visits, etc
1263	64776	Average	Not really changing much	TRAN			Partner with West Central and others making efforts for transportation systems.
	65326	J	Increasing - moving up	URG	CORP	STFF	After hours care. Yes, ask the existing community providers to team up Also recruit experienced medical staff. Our new, young professionals are an important asset. They bring new information and technology to the table but they still need mentoring. I leave frustrated when someone right out of school doesn't listen and wants to try everything all over again without reading my file.
			Not really changing		33111	5711	<u> </u>
	64735 65360		Mot really changing	VACC			Urgent Care facility

	CHN	A 2019 (Community Fee	dbacl	· - GV	MH (F	Henry and Benton Counties MO) N=381
ID	Zip	Overall	Movement	c1	c2	с3	What "new" community health programs should be created to meet current community health needs? Can we partner somehow with others?
1228	64735	Good	Increasing - moving up	WELL	FAM	REC	Non-insured wellness workshops partnering with Community Action agencies, Family Services and Park and Rec Depts.
							I just feel like we need to do more for the ones that want to better themselves. A class for the Following 1) Money and how to pay bills 2) Get an apartment 3) About there insurance. Some had not had insurance for a while then goes to doctor and has a lot of test done and know cannot pay for them even if they do have Financial Assistants. The Payments are higher now and some cannot afford to pay \$50 a month. **Maybe ask the schools if they can start a program that teaches students
1294	65338	Good	Increasing - moving up	WELL	INSU		how to live a life outside the system.

Let Your Voice Be Heard!

Golden Valley Memorial Hospital, Henry County Health Center and Compass Health Network on behalf of Henry and Benton Counties, MO are in the process in creating a Wave #3 2019 Community Health Needs Assessment (CHNA). To collect "up to date" community feedback, a short online survey has been created to uncover any current community health issues and evaluate local health delivery.

While your participation is voluntary and confidential, all community input is valued. Thank you for your attention! Deadline to participate is Friday, October 4th, 2019.

	the "Overall Quality" of healthcare delivery in our community? Good Very Good
2. When considering "overall communit	ity health quality", is it
Increasing - moving up	Decreasing - slipping downward
Not really changing much	
Why? (please specify)	
3. In your opinion, are there any health worked on and/or changed? (Please be	ncare services or delivery issues that you feel need to be improve e specific.)

5. From p	ast health assessments o	f our	community, a number of healtl	n nee	ds were identified as pri
Are any o	f these an ongoing proble	m fo	r our community? Please selec	t all t	hat apply.
Aware service	ness of Mental Health specialty		Healthcare Transportation		Services for Autistic Children Adults
D. D	huaa		Improve quality of Nursing Homes		Concline
Drug A	เมนระ		Increase # of Dentists who take		Smoking
Econo	mic Development		Medicaid		Urgent Care Services
Emerg	ency Department		Obesity		Visiting Specialists
Encou	rage Parental Guidance		Oral Surgeon Services		
Expan Educa	d Community Wellness tion		Pediatric Care Services		
6. Which	past health assessment o	f our	community need is NOW the "	most	pressing" for improvement
	elect top THREE.		•		
Aware service	ness of Mental Health specialty		Healthcare Transportation		Services for Autistic Children Adults
			Improve quality of Nursing Homes		
Drug A	buse		Increase # of Dentists who take		Smoking
Econo	mic Development		Medicaid		Urgent Care Services
Emero	ency Department		Obesity		Visiting Specialists
	•		-	Ш	g openation
	rage Parental Guidance		Oral Surgeon Services		
Encou					

	cation		Elder assistance p	rograms	
Chronic disease preve	ntion		Family assistance	programs	
Limited access to men	tal health assistance		Awareness of exis	ting local programs,	providers, and
Case management as	sistance		Finance & Insuran	ce coverage	
Other (please specify)					
0.11					
8 How would our com	munitv area resid	ents rate each of	the following hea	alth services?	
o. How would our com					
o. How would our com	Very Good	Good	Fair	Poor	Very P
Ambulance Services	•	Good	Fair	Poor	Very P
	•	Good	Fair	Poor	Very P
Ambulance Services	•	Good	Fair	Poor	Very P
Ambulance Services Child Care	•	Good	Fair	Poor	Very P
Ambulance Services Child Care Chiropractors	•	Good	Fair	Poor O O O O O O O O O O O O O O O O O O	Very P
Ambulance Services Child Care Chiropractors Dentists	•	Good	Fair	Poor O O O O O O O O O O O O O O O O O O	Very P
Ambulance Services Child Care Chiropractors Dentists Emergency Room	•	Good	Fair O O O O O O O O O O O O O O O O O O	Poor O O O O O O O O O O O O O O O O O O	Very P
Ambulance Services Child Care Chiropractors Dentists Emergency Room Eye Doctor/Optometrist Family Planning	•	Good	Fair O O O O O O O O O O O O O O O O O O	Poor O O O O O O O O O O O O O O O O O O	Very Po
Ambulance Services Child Care Chiropractors Dentists Emergency Room Eye Doctor/Optometrist Family Planning Services	•	Good O O O O O O O O O O O O O O O O O O	Fair O O O O O O O O O O O O O O O O O O	Poor O O O O O O O O O O O O O O O O O O	Very Po

9. How would our community area i	esidents rate each of	the following health services?	Continued.
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	Very Good	Good	Fair	Poor	Very Poor
Inpatient Services					
Mental Health					
Nursing Home					
Outpatient Services					
Pharmacy					
Physician Clinics					
Public Health					
School Nurse					
Specialists/Medical Providers		\bigcirc			

10. Community Health Readiness is vital. How would you rate each of the following?

	Very Good	Good	Fair	Poor	Very Poor
Early Childhood Development Programs					
Emergency Preparedness					
Food and Nutrition Services/Education					
Poverty/Financial Health					
Health Screenings (such as asthma, hearing, vision, wellness)		\bigcirc		\circ	
Immunization Programs					\bigcirc
Obesity Prevention & Treatment					

	Very Good	Good	Fair	Poor	Very Poor
Spiritual Health Support					
Prenatal / Child Health Programs	\bigcirc	\bigcirc	\bigcirc		\bigcirc
Sexually Transmitted Disease Testing					
Substance Use Treatment & Education					
Tobacco Prevention & Cessation Programs					\bigcirc
Violence Prevention					
Women's Wellness Programs			\circ		\bigcirc
WIC Nutrition Program					
rommunity? Yes	did you or some	eone you know re	ceive healthcare s	services outside	of our
L2. In the past 2 years, community? Yes No f YES, please specify the he				services outside	of our
community? Yes No				services outside	of our
community? Yes No				services outside	of our
community? Yes No				services outside	of our
community? Yes No				services outside	of our
community? Yes No	althcare services re	eceived.) I don't know		
Yes No YES, please specify the he	althcare services re	eceived.) I don't know		
Yes No YES, please specify the he 13. Are our healthcare of address/improve health	althcare services re	eceived.	I don't know		
Yes No YES, please specify the he Are our healthcare of address/improve health Yes	althcare services re	eceived.	I don't know		
Yes No Yes, No YES, please specify the headdress/improve health Yes No	althcare services re	eceived.	I don't know		

11. Community Health Readiness is vital. How would you rate each of the following? Continued.

15. Are there any other health ne	eds (listed below) that need to be	e discussed further at our upcoming
CHNA Town Hall meeting? (Pleas	,	·
Abuse/Violence	Lead Exposure	Sexually Transmitted Diseases
Alcohol	Mental Illness	Smoke-Free Workplace
Breast Feeding Friendly Workplace	Nutrition/Access to Food	Suicide
Cancer	Obesity	Teen Pregnancy
Diabetes	Environmental health	Tobacco Use
Drugs/Substance Abuse	Physical Exercise	Vaccinations
Family Planning	Poverty	Water Quality
Heart Disease	Lung Disease	Wellness Education
Tiedit Discuse		

16. For reporting purposes, are you involved in or are you a ? (Please select all that apply.)					
Business / Merchant	EMS / Emergency	Other Health Professional			
Community Board Member	Farmer / Rancher	Parent / Caregiver			
Case Manager / Discharge Planner	Hospital / Health Dept	Pharmacy / Clinic			
Clergy	Housing / Builder	Media (Paper/TV/Radio)			
College / University	Insurance	Senior Care			
Consumer Advocate	Labor	Teacher / School Admin			
Dentist / Eye Doctor / Chiropractor	Law Enforcement	Veteran			
Elected Official - City/County	Mental Health	Unemployed			
Other (please specify)					
17. What is your home ZIP code? Please enter 5-digit ZIP code; for example 00544 or 95305					
-		•			





VVV Consultants LLC

Vince Vandehaar, MBA
Principal & Adjunct Professor
(913) 302-7264 (C)
VVV@VandehaarMarketing.com

Tessa E. Taylor, BBA BA Lead Consultant (920) 250-3722 (C) TET@VandehaarMarketing.com

Office:

601 N Mahaffie, Olathe, KS 66061 http://vandehaarmarketing.com/

VVV Consultants LLC is an Olathe, KS based "boutique" healthcare consulting firm specializing in Strategy; Research and Business Development services. We partner with clients. Plan the Work; Work the Plan