



# **Community Health Needs Assessment Henry and Benton County, MO**

On Behalf of Golden Valley Memorial Healthcare in partnership with  
Compass Health Network & Henry County Health Center



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**January 2023**

**VVV Consultants LLC  
Olathe, KS**

# Community Health Needs Assessment

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# I. Executive Summary

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# I. Executive Summary

## Golden Valley Memorial Healthcare (Primary Service Area) – Henry and Benton County, MO - 2022 Community Health Needs Assessment (CHNA)

The previous CHNA for GVMH, Compass Health Network, and Henry County Health Center (Henry and Benton Counties, MO) was completed in 2019. (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 #4 Henry and Benton County, MO CHNA assessment began in May of 2022 and was facilitated / created by VVV Consultants, LLC (Olathe, KS) staff under the direction of Vince Vandehaar, MBA.

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. **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.

## County Health Area of Future Focus on Unmet Needs

Area Stakeholder held a community conversation to review, discuss and prioritize health delivery. Below are two tables reflecting community views and findings:

| 2022 CHNA Priorities - Unmet Needs   |  |       |       |       |
|--|--|-------|-------|-------|
| Henry & Benton Co - Clinton MO   |  |       |       |       |
| On Behalf of Golden Valley Memorial Healthcare   |  |       |       |       |
| CHNA Wave #4 Town Hall - October 13th, 2022  |  |       |       |       |
| Primary Service Area (41 Attendees /39 voter for 156 Total Votes)  |  |       |       |       |
| #  | Community Health Needs to Change and/or Improve                  | Votes | %     | Accum |
| 1  | Substance Abuse (Drug / Alcohol / Nicotine)                      | 23    | 14.7% | 15%   |
| 2  | Psychiatric IP Beds  | 14    | 9.0%  | 24%   |
| 3  | Nursing Home (Available / Quality)                               | 14    | 9.0%  | 33%   |
| 4  | Housing (Affordable / Safe)                                      | 12    | 7.7%  | 40%   |
| 5  | Community Education (Mental Health / Anxiety)                    | 10    | 6.4%  | 47%   |
| 6  | Chronic Disease Management (COPD, Diabetes, Cardiac, and Cancer) | 10    | 6.4%  | 53%   |
| 7  | Transportation (All)   | 8     | 5.1%  | 58%   |
| 8  | Urgent Care Services (After Hours)                               | 8     | 5.1%  | 63%   |
| 9  | Senior Transitional Living                                       | 8     | 5.1%  | 69%   |
| 10   | Food Insecurity (Healthy foods / Education)                      | 8     | 5.1%  | 74%   |
| 11   | Wellness Programs  | 8     | 5.1%  | 79%   |
| Total Votes  |  | 156   | 100%  |       |
| Other needs receiving votes: Childcare (Available, Affordable, Safe), Homeless, Obesity (Nutritional / Exercise), Family Planning / Women's Health, Domestic Abuse, Crisis Intervention, Poverty, Suicide Prevention |  |       |       |       |

## Town Hall CHNA Findings: Areas of Strengths

| Henry & Benton County, MO - Community Health Strengths Recalled |  |    |                                       |
|---|--|----|---------------------------------------|
| #   | Topic                                      | #  | Topic                                 |
| 1   | Primary Care Provider Access (Henry Co)    | 6  | Outpatient Services                   |
| 2   | Collaboration between GV, DOH, and Compass | 7  | Dental Services for Medicaid Patients |
| 3   | Exercise Opportunities                     | 8  | Superior quality of care              |
| 4   | Community Assistance Programs              | 9  | School Health                         |
| 5   | Access to Specialty Care                   | 10 | New Services (Oncology coming)        |

### Key CHNA Wave #4 Secondary Research Conclusions found:

**MISSOURI HEALTH RANKINGS:** According to the 2022 Robert Wood's Henry County Health Rankings, Henry County, MO Average was ranked 80<sup>th</sup> in Health Outcomes, 34<sup>th</sup> in Health Factors, and 76<sup>th</sup> in Physical Environmental Quality out of the 115 Counties. Benton County, MO Average was ranked 85 in Health Outcomes, 14<sup>th</sup> in Health Factors, and 78<sup>th</sup> in Physical Environment Quality out of the 115 counties.

**TAB 1.** Henry County's population is 15,544 (based on 2021). About six percent (5.7%) of the population is under the age of 5, while the population that is over 65 years old is 22.1%. As of 2019, 3.4% of citizens speak a language other than English in their home. Children in single parent households make up a total of 23.3% compared to the rural norm of 20.3%, and 83.9% are living in the same house as one year ago.

**TAB 2.** In Henry County, the average per capita income is \$26,944 while 13.6% of the population is in poverty. The severe housing problem was recorded at 12.0% compared to the rural norm of 12.6%. Those with food insecurity in Henry County is 16.4%, and those having limited access to healthy foods (store) is 13.8%. Individuals recorded as having a long commute while driving alone is 32.1% compared to the norm of 32.4%.

**TAB 3.** Children eligible for a free or reduced-price lunch in Henry County is 57.8%. Roughly ninety-three percent (93.1%) of students graduated high school compared to the rural norm of 90.3%, and 22.2% have a bachelor's degree or higher.

**TAB 4.** The rate per 1,000 of births where prenatal care started in the first trimester is 818.6 and 48.7 of births in Henry County have a low birth weight. The percent of all births occurring to teens (15-19) is 57.5 per 1,000.

**TAB 5.** The Henry County primary care service coverage ratio is 1 provider (county based officed physician who is a MD and/or DO) to 1,415 residents. There were 5,164 preventable hospital stays in 2018 compared to the Rural Norm of 3,453.

**TAB 6.** In Henry County, 15.9% of the Medicare population has depression. The average mentally unhealthy days last reported (2018) is 3.6 days in a one-week period, while the age-adjusted suicide mortality rate (per 100,000) is 15.4.

**TAB 7a – 7b.** Henry County has an obesity percentage of 35.1% and a physical inactivity percentage is 24.2%. The percentage of adults who smoke is 19.3%, while the excessive drinking percentage is 24.7%. The Medicare hypertension percentage is 58.7%, while their heart failure percentage is 15.7%. Those with chronic kidney disease amongst the Medicare population is 25.7% compared to the rural norm of 21.0%. The percentage of individuals who were recorded with COPD was 15.7%. Henry County recorded as three percent of individuals having had a stroke at 3.0%.

**TAB 8.** The adult uninsured rate for Henry County is 6.0% (based on 2019) compared to the rural norm of only 6.2%.

**TAB 9.** The life expectancy rate in Henry County for males and females is eighty years of age (80.0). Alcohol-impaired driving deaths for Henry County is 42.9% while age-adjusted Cancer Mortality rate per 100,000 is 178.0. The age-adjusted heart disease mortality rate per 100,000 is at 165.8.

**TAB 10.** A recorded seventy-seven percent (77.5%) of Henry County has access to exercise opportunities. Those reported having diabetes is 11.0%. Continually, fifty-two percent (52.0%) of women in Henry County seek annual mammography screenings compared to the rural norm of 48.3%.

## Key CHNA Wave #4 Primary Research Conclusions found:

**Community Feedback from residents, community leaders and providers (N=259) provided the following community insights via an online perception survey:**

- Using a Likert scale, average between Henry & Benton County stakeholders and residents that would rate the overall quality of healthcare delivery in their community as either Very Good or Good; is 71.1%.
- Henry & Benton County stakeholders are satisfied with some of the following services: Community Collaboration (Attendance and Funding), Active Younger Populace, Access to Providers, Access to EMS, Public Health, Insurance Option for Business Community, Quality of Life Options, Police and Fire Support, Visiting Specialists, New Day Care Center, Strong Hospice Services, Health Services to the Schools, and High Quality Health Care Services.
- When considering past CHNA needs, the following topics came up as the most pressing: Mental health (OP Access) / Crisis Services, Obesity (Nutrition / Exercise), Cancer, Disease Prevention / Wellness (Education), Awareness of Healthcare Services, Substance Abuse (Drugs / Alcohol / Smoking), Transportation (All), Suicide, and Dialysis.

| Henry & Benton Counties MO - CHNA YR 2022 N=408 |  |                 |        |       |          |
|---|--|-----------------|--------|-------|----------|
| Past CHNA Unmet Needs Identified                |  | Ongoing Problem |        |       | Pressing |
| Rank  | Ongoing Problem  | Votes           | %      | Trend | Rank     |
| 1   | Mental Health Specialty Services                       | 276             | 30.6%  |       | 1        |
| 2   | Emergency Room Services                                | 224             | 24.8%  |       | 2        |
| 3   | Drug Abuse (Heroin, Marijuana, Meth, Prescription)     | 140             | 15.5%  |       | 3        |
| 4   | Improve Quality of Nursing Home Care Services          | 119             | 13.2%  |       | 4        |
| 5   | Healthcare Transportation                              | 106             | 11.8%  |       | 5        |
| 6   | Visiting Specialists (PEDS, ONC, PSY, DERM, ORTH, URL) | 101             | 11.2%  |       | 6        |
| 7   | Obesity (Nutrition / Exercise)                         | 100             | 11.1%  |       | 9        |
| 8   | Urgent Care Services                                   | 99              | 11.0%  |       | 7        |
| 9   | Expand Community "Wellness" Education                  | 96              | 10.6%  |       | 8        |
| 10  | Increase # of Dentists who take Medicaid               | 93              | 10.3%  |       | 11       |
| 11  | Services for Autistic Children / Adults                | 73              | 8.1%   |       | 12       |
| 12  | Provide Local Oral Surgeon Services                    | 71              | 7.9%   |       | 13       |
| 13  | Economic Development                                   | 65              | 7.2%   |       | 10       |
| 14  | Pediatric Care Services                                | 57              | 6.3%   |       | 14       |
| Totals  |  | 1620            | 100.0% |       |          |

## II. Methodology

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## 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 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.

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.*).

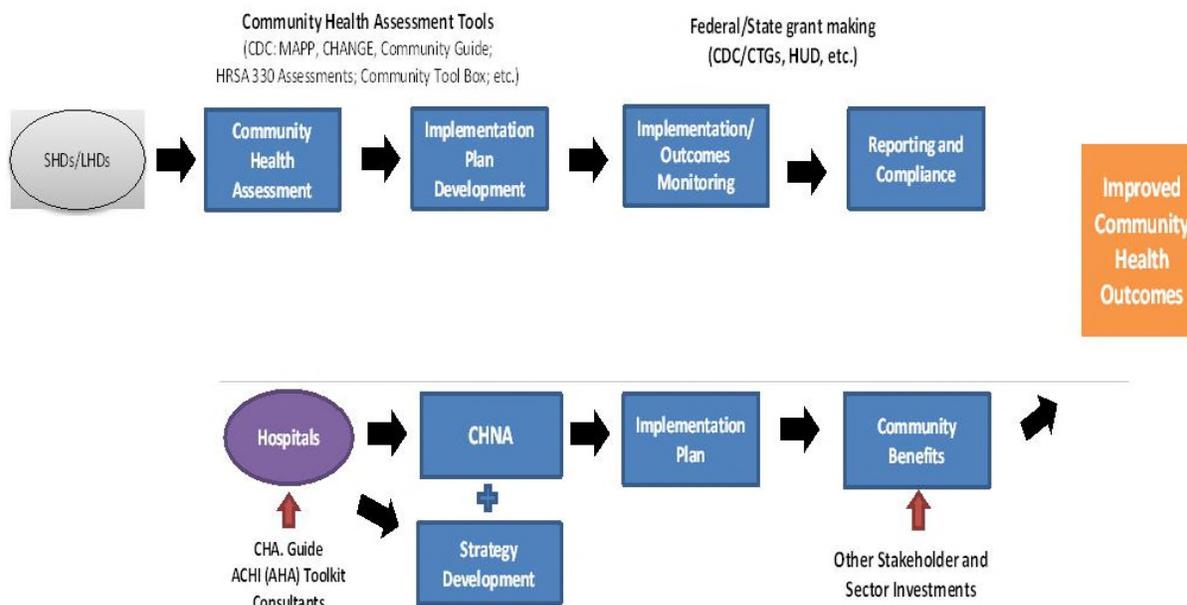
#### **JOB #2: Making a CHNA Widely Available to the Public**

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 Requirements Overview (Notice 2011-52)

### 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 complete a CHNA full report every 3 years for each of its hospital facilities by fiscal June 30th.

#### 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.

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.*

## **IRS Community Health Needs Assessment for Charitable Hospital Organizations - Section 501(0)(3) Last Reviewed or Updated: 21-Aug-2020**

In addition to the general requirements for tax exemption under Section 501(c)(3) and Revenue Ruling 69-545 hospital organizations must meet the requirements imposed by Section 501(r) on a facility-by-facility basis in order to be treated as an organization described in Section 501(c)(3). These additional requirements are:

1. Community Health Needs Assessment (CHNA) - Section 501(r)(3),
2. Financial Assistance Policy and Emergency Medical Care Policy - Section 501(r)(4),
3. Limitation on Charges - Section 501(r)(5), and
4. Billing and Collections - Section 501(r)(6).

Medically underserved populations include populations experiencing health disparities or that are at risk of not receiving adequate medical care because of being uninsured or underinsured, or due to geographic, language, financial, or other barriers. Populations with language barriers include those with limited English proficiency. Medically underserved populations also include those living within a hospital facility’s service area but not receiving adequate medical care from the facility because of cost, transportation difficulties, stigma, or other barriers.

Additionally, in determining its patient populations for purposes of defining its community, a hospital facility must take into account all patients without regard to whether (or how much) they or their insurers pay for the care received or whether they are eligible for assistance under the hospital facility's financial assistance policy. If a hospital facility consists of multiple buildings that operate under a single state license and serve different geographic areas or populations, the community served by the hospital facility is the aggregate of these areas or populations.

### **Additional Sources of Input**

In addition to soliciting input from the three required sources, a hospital facility may solicit and take into account input received from a broad range of persons located in or serving its community. This includes, but is not limited to:

- Health care consumers and consumer advocates
- Nonprofit and community-based organizations
- Academic experts
- Local government officials
- Local school districts
- Health care providers and community health centers
- Health insurance and managed care organizations,
- Private businesses, and
- Labor and workforce representatives.

Although a hospital facility is not required to solicit input from additional persons, it must take into account input received from any person in the form of written comments on the most recently conducted CHNA or most recently adopted implementation strategy.

### **Collaboration on CHNA Reports**

A hospital facility is permitted to conduct its CHNA in collaboration with other organizations and facilities. This includes related and unrelated hospital organizations and facilities, for-profit and government hospitals, governmental departments, and nonprofit organizations.

In general, every hospital facility must document its CHNA in a separate CHNA report unless it adopts a joint CHNA report. However, if a hospital facility is collaborating with other facilities and organizations in conducting its CHNA, or if another organization has conducted a CHNA for all or part of the hospital facility's community, portions of a hospital facility's CHNA report may be substantively identical to portions of the CHNA reports of a collaborating hospital facility or other organization conducting a CHNA, if appropriate under the facts and circumstances.

If two hospital facilities with overlapping, but not identical, communities collaborate in conducting a CHNA, the portions of each hospital facility's CHNA report relevant to the shared areas of their communities might be identical. So, hospital facilities with different communities, including general and specialized hospitals, may collaborate and adopt substantively identical CHNA reports to the extent appropriate. However, the CHNA reports of collaborating hospital facilities should differ to reflect any material differences in the communities served by those hospital facilities. Additionally, if a governmental public health department has conducted a CHNA for all or part of a hospital facility's community, portions of the hospital facility's CHNA report may be substantively identical to those portions of the health department's CHNA report that address the hospital facility's community.

Collaborating hospital facilities may produce a joint CHNA report as long as all of the collaborating hospital facilities define their community to be the same and the joint CHNA report contains all of the same basic information that separate CHNA reports must contain. Additionally, the joint CHNA report must be clearly identified as applying to the hospital facility.

### **Joint Implementation Strategies**

As with the CHNA report, a hospital facility may develop an implementation strategy in collaboration with other hospital facilities or other organizations. This includes but is not limited to related and unrelated hospital organizations and facilities, for-profit and government hospitals, governmental departments, and nonprofit organizations. In general, a hospital facility that collaborates with other facilities or organizations

in developing its implementation strategy must still document its implementation strategy in a separate written plan that is tailored to the particular hospital facility, taking into account its specific resources. However, a hospital facility that adopts a joint CHNA report may also adopt a joint implementation strategy. With respect to each significant health need identified through the joint CHNA, the joint implementation strategy must either describes how one or more of the collaborating facilities or organizations plan to address the health need or identify the health need as one the collaborating facilities or organizations do not intend to address. It must also explain why they do not intend to address the health need.

A joint implementation strategy adopted for the hospital facility must also: Be clearly identified as applying to the hospital facility, Clearly identify the hospital facility's role and responsibilities in taking the actions described in the implementation strategy as well as the resources the hospital facility plans to commit to such actions, and Include a summary or other tool that helps the reader easily locate those portions of the joint implementation strategy that relate to the hospital facility.

#### **Adoption of Implementation Strategy**

An authorized body of the hospital facility must adopt the implementation strategy. See the discussion of the Financial Assistance Policy below for the definition of an authorized body. This must be done on or before the 15th day of the fifth month after the end of the taxable year in which the hospital facility finishes conducting the CHNA. This is the same due date (without extensions) of the Form 990.

**Acquired Facilities** A hospital organization that acquires a hospital facility (through merger or acquisition) must meet the requirements of Section 501(r)(3) with respect to the acquired hospital facility by the last day of the organization's second taxable year beginning after the date on which the hospital facility was acquired. In the case of a merger that results in the liquidation of one organization and survival of another, the hospital facilities formerly operated by the liquidated organization will be considered "acquired," meaning they will have until the last day of the second taxable year beginning after the date of the merger to meet the CHNA requirements. Thus, the final regulations treat mergers equivalently to acquisitions.

#### **New Hospital Organizations**

An organization that becomes newly subject to the requirements of Section 501(r) because it is recognized as described in Section 501(c)(3) and is operating a hospital facility must meet the requirements of Section 501(r)(3) with respect to any hospital facility by the last day of the second taxable year beginning after the latter of: The effective date of the determination letter recognizing the organization as described in Section 501(c)(3), or The first date that a facility operated by the organization was licensed, registered, or similarly recognized by a state as a hospital.

#### **New Hospital Facilities**

A hospital organization must meet the requirements of Section 501(r)(3), with respect to a new hospital facility it operates by the last day of the second taxable year beginning after the date the facility was licensed, registered, or similarly recognized by its state as a hospital.

#### **Transferred/Terminated Facilities**

A hospital organization is not required to meet the requirements of Section 501(r)(3) with respect to a hospital facility in a taxable year if the hospital organization transfers all ownership of the hospital facility to another organization or otherwise ceases its operation of the hospital facility before the end of the taxable year. The same rule applies if the hospital facility ceases to be licensed, registered, or similarly recognized as a hospital by a state during the taxable year. By extension, a government hospital organization that voluntarily terminates its Section 501(c)(3) recognition as described in Rev. Proc. 2018-5 (updated annually) is no longer considered a hospital organization for purposes of Section 501(r) and therefore is not required to meet the CHNA requirements during the taxable year of its termination.

## **Public Health Criteria:**

### **Domain 1: Conduct and disseminate assessments focused on population health status and public health issues facing the community.**

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):**

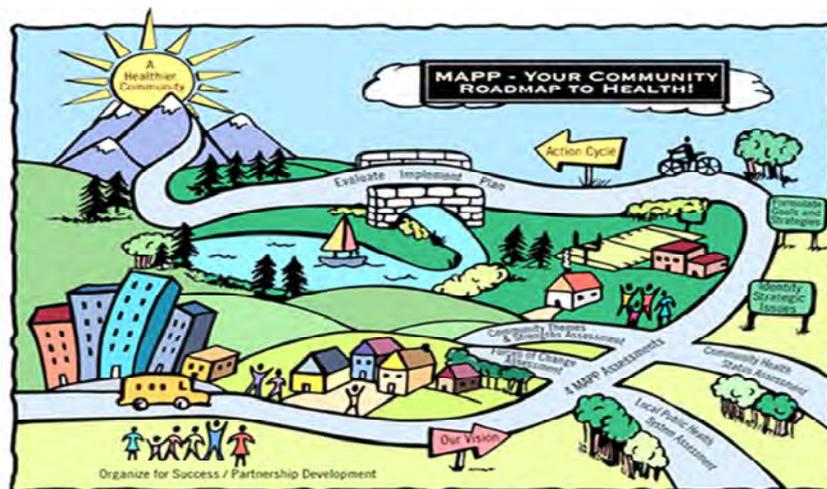
1. Pre-Application
2. Application
3. Document Selection and Submission
4. Site Visit
5. Accreditation Decision
6. Reports
7. Reaccreditation

## MAPP Process Overview

**Mobilizing for Action through Planning and Partnerships (MAPP)** is a flexible strategic planning tool for improving the health and quality of life for the community. Like most strategic planning, MAPP involves organizing partners, creating a vision and shared values, collecting data, identifying areas for improvement, and developing goals and strategies to address them. Through collaboration with partners and the community, MAPP allows us to focus our efforts and work on issues to strengthen the local public health system.

**The MAPP process includes the following six phases.** It's important to note that MAPP has no set end point and will continue throughout the life cycle of the Community Health Improvement Plan (CHIP).

1. In this first phase, **Organize for Success/Partnership Development**, various sectors of the community with established relationships are reviewed, leading to the identification of areas for partnership development and creation of new relationships to enhance the MAPP process.
2. In the second phase, **Visioning**, a shared community vision and common values for the MAPP process are created.
3. In the third phase, **Four MAPP Assessments**, data is collected from existing and new sources about the health of our community, which results in a Community Health Assessment (CHA).
4. In the fourth phase, **Identify Strategic Issues**, community partners and health professionals select issues based on data collected from the third phase that are critical to the local public health system and align with the vision from the second phase.
5. In the fifth phase, **Formulate Goals and Strategies**, potential ways to address the strategic issues are identified by the community along with the setting of achievable goals. The final result is a Community Health Improvement Plan (CHIP).
6. The sixth and final phase of the MAPP process is the **Action Cycle**, which is where the work happens for meeting the objectives set in the previous phase. Through these collaborative efforts, the health of the community is improved.



## Drivers of Health Assessment & Improvement Planning

Different drivers have led health agencies and organizations to institutionalize community health assessment and community health improvement planning in recent years.

### National Voluntary Accreditation Requirements

In 2011, the Public Health Accreditation Board (PHAB), in partnership with key public health organizations, launched a new national voluntary accreditation program for state, tribal, local, and territorial health departments. The standards and measures encompass 12 domains of performance and include a comprehensive community health assessment (Domain 1, Standard 1.1) and a community health improvement plan (Domain 5, Standard 5.2). A documented community health assessment and improvement plan are two of the three prerequisites for applying to PHAB. PHAB requires that these processes be conducted collaboratively and that the documents be dated within the last five years. More information is available from [PHABexternal icon](#) and [CDC](#).

### CDC Grant Requirements

CDC grants often require or encourage completing a community health assessment or improvement plan. In some cases, these plans provide valuable information for identifying priority health issues or needs. Examples include ; [National Public Health Improvement Initiative \(NPHII\)](#); [Community Transformation Grants or REACH Core](#)

The Public Health Accreditation board defines *community health assessment* as a systematic examination of the health status indicators for a given population that is used to identify key problems and assets in a community. The ultimate goal of a community health assessment is to develop strategies to address the community's health needs and identified issues. A variety of tools and processes may be used to conduct a community health assessment; the essential ingredients are community engagement and collaborative participation. Turnock B. *Public Health: What It Is and How It Works*. Jones and Bartlett, 2009, as adapted in [Public Health Accreditation Board Acronyms and Glossary of Terms Version 1.0 Cdc-pdf\[PDF – 536KB\]External](#), July 2011.

The Catholic Health Association defines a *community health needs assessment* as a systematic process involving the community to identify and analyze community health needs and assets in order to prioritize these needs, and to plan and act upon unmet community health needs.” Catholic Health Association, [Guide to Assessing and Addressing Community Health Needs Cdc-pdf\[PDF-1.5MB\]External](#), June 2013.

## Social Determinants of Health

What Are Social Determinants of Health?



[Social determinants of health \(SDOH\)external icon](#) are defined as the conditions in which people are born, grow, live, work, and age. SDOH are shaped by the distribution of money, power, and resources throughout local communities, nations, and the world. Differences in these conditions lead to health inequities or the unfair and avoidable differences in health status seen within and between countries.

[Healthy People 2030external icon](#) includes SDOH among its leading health indicators. One of Healthy People 2030's five overarching goals is specifically related to SDOH: Create social, physical, and economic environments that promote attaining the full potential for health and well-being for all.

Through broader awareness of how to better incorporate SDOH throughout the multiple aspects of public health work and the [10 Essential Public Health Services](#), public health practitioners can transform and strengthen their capacity to advance health equity. Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health, such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

## 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 create a stronger community by promoting health, providing quality resources, and protecting the overall wellness of Henry County residents.

### **Services:**

- **WIC** (M-F 8am to 4:30pm – Mon Evenings by Apt until 6:00pm)
  - Breastfeeding
  - Windsor Clinic
  - Lead Testing
- **Nursing Services**
  - Flu Shots
  - Immunizations
  - STI / HIV Testing
  - TB Testing
  - Lab Draws
- **Children and Youth Special Health Care Needs**
  - Providing health related services and case management
- **Maternal Child Health (MCH)**
  - Title V Program
- **Epidemiology**
  - Contact Tracing
  - Reportable Diseases
  - Outbreak Oversight
- **Community Programs**
  - Car Seat Program
  - Safe Cribs Program
  - Daycare Provider Education
  - CPR / First Aid
  - Vital Records
  - Emergency Preparedness
  - Teen Outreach Program in Schools
  - Distracted Driving
- **Environmental**
  - Food Handler Cards
  - Food Permits
  - Food and Septic Training
  - Septic Inspections
  - 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. Additionally, we provide inpatient psychiatric services through Royal Oaks Hospital

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

**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.

- Same day assessments
- Community Based Behavioral Health Services and Support
- Crisis Services including 23 hour crisis stabilization
- Dental
- Developmental Disabilities Support
- Family Medicine / Primary Care
- Outpatient Behavioral Health
- Pharmacy
- Residential Treatment
- Substance Use Disorders including withdrawal management

## II. Methodology

### b) Collaborating CHNA Parties Continued

#### Consultant Qualifications:

VVV Consultants LLC 601 N. Mahaffie, Olathe, KS 66061 (913) 302-7264

VVV Consultants LLC is an Olathe, KS based “boutique” healthcare consulting firm specializing in Strategy, Research and Business Development services. To date we have completed 70 unique community CHNA’s in KS, MO, IA and NE (references found on our website [VandehaarMarketing.com](http://VandehaarMarketing.com))

#### Introduction: Who We Are Background and Experience



Vince Vandehaar, MBA – Principal  
VVV Consultants LLC – start 1/1/09 \*  
– Adjunct Full Professor @ Avila & Webster Universities  
– 35+ year veteran marketer, strategist and researcher  
– Saint Luke’s Health System, BCBS of KC,  
– Hometown: Bondurant IA



Cassandra Kahl, BHS – Director, Project Management – Nov 2020  
University of Kansas – Health Sciences  
Park University - MHA  
Hometown: Maple, WI



Hannah Foster MBA – Associate Consultant – April 2022  
MO Southern State – Joplin, MO  
Avila University – MBA with HC  
Hometown: Lee’s Summit, MO

VVV Consultants LLC (EIN 27-0253774) began as “VVV Research & Development INC” in early 2009 and converted to an LLC on 12/24/12. Web: [VandehaarMarketing.com](http://VandehaarMarketing.com)

**Our Mission:** to research, facilitate, train, and create processes to improve healthcare delivery and uncover strategic “critical success” initiatives.

**Our Vision:** meeting today’s challenges with the voice of the market.

#### Our Values :

“Community” – Industry engagement...membership AMA KC, ACHE, EPBA, Forum and SHSMD.

“Stewardship” – Fair fees based on client, project scope, turnaround time, etc.

“Integrity” – Trustworthy delivery with numerous client recommendations / endorsements.

“Experience” – Skilled consulting; Marketing careers. We understand business because we have been there!

“Growth” – Process-driven; ongoing innovational delivery.

## II. Methodology

### c) CHNA and Town Hall Research Process

Wave #4 Community Health Needs Assessment (CHNA) process began in July of 2022 for Golden Valley Memorial Health (GVMH) in Clinton, Missouri to meet Federal IRS CHNA requirements.

In early March 2022, a meeting was called amongst the GVMH leaders 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 the CRMC to request 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:

| GVMH - Define PSA            |             |           |                | Inpatients |       |       | ER    |        |        | Outpatients |         |         | Clinic (Emp. Prov) |         |         |         |
|------------------------------|-------------|-----------|----------------|------------|-------|-------|-------|--------|--------|-------------|---------|---------|--------------------|---------|---------|---------|
| Source: MHA, FFY 2019 - 2021 |             | 1,306,086 | Totals - IP/OP |            | 2,253 | 2,282 | 2,326 | 14,292 | 12,625 | 12,955      | 287,821 | 303,878 | 316,764            | 154,367 | 196,523 | 223,219 |
| Patient Zip Code             | County      | 3YR TOT   | %              | Accum      | FFY19 | FFY20 | FFY21 | FFY19  | FFY20  | FFY21       | FFY19   | FFY20   | FFY21              | FFY19   | FFY20   | FFY21   |
| 64735                        | HENRY       | 454,210   | 34.8%          | 34.8%      | 856   | 864   | 797   | 5510   | 4912   | 5065        | 96880   | 106754  | 111771             | 52,889  | 67,912  | 76,627  |
| 65355                        | BENTON      | 220,110   | 16.9%          | 51.6%      | 342   | 398   | 358   | 1916   | 1839   | 1959        | 51142   | 51188   | 52956              | 25,773  | 32,239  | 36,887  |
| 65360                        | HENRY       | 115,229   | 8.8%           | 60.5%      | 171   | 167   | 181   | 1135   | 910    | 986         | 25837   | 26829   | 27718              | 14,158  | 17,137  | 19,894  |
| 64776                        | SAINT CLAIR | 67,461    | 5.2%           | 65.6%      | 102   | 102   | 138   | 681    | 559    | 643         | 14394   | 15932   | 16600              | 7,925   | 10,385  | 11,550  |
| 64740                        | HENRY       | 51,475    | 3.9%           | 69.6%      | 90    | 86    | 88    | 654    | 571    | 569         | 10969   | 12069   | 12907              | 5,937   | 7,535   | 8,972   |
| 64763                        | SAINT CLAIR | 39,987    | 3.1%           | 72.6%      | 72    | 74    | 85    | 433    | 445    | 424         | 8358    | 9152    | 10166              | 4,509   | 6,269   | 6,841   |
| 65338                        | BENTON      | 38,019    | 2.9%           | 75.5%      | 78    | 67    | 67    | 405    | 336    | 328         | 8988    | 8776    | 8774               | 4,613   | 5,587   | 6,097   |
| 65323                        | HENRY       | 27,073    | 2.1%           | 77.6%      | 52    | 29    | 46    | 350    | 272    | 288         | 5946    | 6148    | 6829               | 3,184   | 3,929   | 4,606   |
| 65326                        | BENTON      | 25,621    | 2.0%           | 79.6%      | 38    | 43    | 43    | 216    | 193    | 245         | 5916    | 5988    | 6252               | 2,995   | 3,692   | 4,161   |
| 64788                        | HENRY       | 22,760    | 1.7%           | 81.3%      | 51    | 43    | 51    | 274    | 183    | 210         | 4952    | 5160    | 5798               | 2,695   | 3,343   | 3,912   |
| 64770                        | HENRY       | 16,098    | 1.2%           | 82.5%      | 15    | 19    | 28    | 107    | 92     | 122         | 3232    | 3860    | 4193               | 1,840   | 2,590   | 2,917   |
| 64724                        | SAINT CLAIR | 14,576    | 1.1%           | 83.7%      | 16    | 23    | 37    | 76     | 71     | 80          | 3217    | 3311    | 3883               | 1,562   | 2,300   | 2,814   |
| 65325                        | BENTON      | 9,676     | 0.7%           | 84.4%      | 14    | 14    | 21    | 99     | 57     | 70          | 2513    | 2041    | 2376               | 1,024   | 1,447   | 1,878   |
| 64738                        | SAINT CLAIR | 8,706     | 0.7%           | 85.1%      | 28    | 10    | 21    | 65     | 54     | 65          | 2064    | 1977    | 2008               | 1,097   | 1,317   | 1,496   |
| 64726                        | HENRY       | 7,258     | 0.6%           | 85.6%      | 7     | 27    | 12    | 71     | 83     | 79          | 1406    | 1718    | 1852               | 792     | 1,211   | 1,157   |
| 64739                        | HENRY       | 7,240     | 0.6%           | 86.2%      | 21    | 12    | 11    | 77     | 61     | 73          | 1463    | 1721    | 1808               | 850     | 1,143   | 1,484   |

**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 valid health indicator sources cited to document current state of county health organized as follows:

| <b>Health Indicators - Secondary Research</b>    |
|--|
| <b>TAB 1. Demographic Profile</b>                |
| <b>TAB 2. Economic Profile</b>                   |
| <b>TAB 3. Educational Profile</b>                |
| <b>TAB 4. Maternal and Infant Health Profile</b> |
| <b>TAB 5. Hospital / Provider Profile</b>        |
| <b>TAB 6. Behavioral / Mental Health Profile</b> |
| <b>TAB 7. High-Risk Indicators &amp; Factors</b> |
| <b>TAB 8. Uninsured Profile</b>                  |
| <b>TAB 9. Mortality Profile</b>                  |
| <b>TAB 10. Preventative Quality Measures</b>     |

B) Survey Community Stakeholders to inquire about past CHNA unmet needs and obtain current health delivery trends and document on going health issues.

**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 unmet health needs was administered.

**Phase IV—Complete Data Analysis and Create Comprehensive Community Health Needs Assessment:**

Complete full documentation to create each CHNA sections documented in Table of Contents. Publish hard copy reports (2) for client usage plus create a full CHNA report pdf to be posted on hospital website to meet government CHNA regulation criteria.

**Detail CHNA Development Steps Include:**

| <b>Development Steps to Create Comprehensive Community Health Needs Assessment</b> |   |
|--|---|
| <b>Step # 1 Commitment</b>   | <i>Determine interest level of area healthcare leaders (Hospital, Health Dept., Mental Health Centers, Schools, Churches, Physicians etc.), prepare project quote.</i>  |
| <b>Step # 2 Planning</b>   | <i>Prepare brief CHNA Project Work Calendar - list goals, objectives, purpose, outcome, roles, community involvement, etc. Hold Community Kick-off meeting.</i>   |
| <b>Step # 3 Secondary Research</b>   | <i>Collect &amp; 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.</i>                             |
| <b>Step # 4a Primary Research - Town Hall prep</b>                                 | <i>Collect Community Opinions. (Quantitative Research). Gather Stakeholders/ Community opinions regarding community health needs and healthcare practices.</i>  |
| <b>Step # 4b Primary Research - Conduct Town Hall</b>                              | <i>Conduct "Conversation with Community" Town Hall (Qualitative Research). Review Secondary &amp; Primary Data findings. Facilitate community conversation to build consensus; discuss opinions / identify health needs.</i>                        |
| <b>Steps # 5 Reporting</b>   | <i>Prepare/Present comprehensive CHNA report (to community leaders), facilitate development of CHNA Implementation Plan (Actions to improve health). &lt; Note: Formal report will follow IRS Notice 2011-52 regs &amp; PHAB requirements. &gt;</i> |
| VVV Consultants, LLC Olathe, KS 913 302-7264                                       |   |

## Data & Benchmarks Review

Community health assessments typically use both primary and secondary data to characterize the health of the community:

- **Primary data** are collected first-hand through surveys, listening sessions, interviews, and observations.
- **Secondary data** are collected by another entity or for another purpose.
- **Indicators** are secondary data that have been analyzed and can be used to compare rates or trends of priority community health outcomes and determinants.

Data and indicator analyses provide descriptive information on demographic and socioeconomic characteristics; they can be used to monitor progress and determine whether actions have the desired effect. They also characterize important parts of health status and health determinants, such as behavior, social and physical environments, and healthcare use.

Community health assessment indicators should be.

- Methodologically sound (valid, reliable, and collected over time)
- Feasible (available or collectable)
- Meaningful (relevant, actionable, and ideally, linked to evidence-based interventions)
- Important (linked to significant disease burden or disparity in the target community)

Jurisdictions should consider using data and indicators for the smallest geographic locations possible (e.g., county-, census block-, or zip code-level data), to enhance the identification of local assets and gaps.

Local reporting (County specific) sources of community-health level indicators:

| CHNA Detail Sources                                     |
|---|
| Quick Facts - Business                                  |
| Centers for Medicare and Medicaid Services              |
| CMS Hospital Compare                                    |
| County Health Rankings                                  |
| Quick Facts - Geography                                 |
| Kansas Health Matters                                   |
| Kansas Hospital Association (KHA)                       |
| Quick Facts - People                                    |
| U.S. Department of Agriculture - Food Environment Atlas |
| U.S. Center for Disease Control and Prevention          |

## Sources of community-health level indicators:

- [County Health Rankings and Roadmaps](#)  
The annual Rankings measure vital health factors, including high school graduation rates, obesity, smoking, unemployment, access to healthy foods, the quality of air and water, income inequality, and teen births in nearly every county in America. They provide a snapshot of how health is influenced by where we live, learn, work and play.
- [Prevention Status Reports \(PSRs\)](#)  
The PSRs highlight—for all 50 states and the District of Columbia—the status of public health policies and practices designed to prevent or reduce important public health problems.
- [Behavioral Risk Factor Surveillance System](#)  
The world's largest, ongoing telephone health survey system, tracking health conditions and risk behaviors in the United States yearly since 1984. Data are collected monthly in all 50 states, the District of Columbia, Puerto Rico, the US Virgin Islands, and Guam.
- The [Selected Metropolitan/ Micropolitan Area Risk Trends](#) project was an outgrowth of BRFSS from the increasing number of respondents who made it possible to produce prevalence estimates for smaller statistical areas.
- [CDC Wonder](#) Databases using a rich ad-hoc query system for the analysis of public health data. Reports and other query systems are also available.
- [Center for Applied Research and Engagement Systems external icon](#)  
Create customized interactive maps from a wide range of economic, demographic, physical and cultural data. Access a suite of analysis tools and maps for specialized topics.
- [Community Commons external icon](#)  
Interactive mapping, networking, and learning utility for the broad-based healthy, sustainable, and livable communities' movement.
- [Dartmouth Atlas of Health Care external icon](#)  
Documented variations in how medical resources are distributed and used in the United States. Medicare data used to provide information and analysis about national, regional, and local markets, as well as hospitals and their affiliated physicians.
- [Disability and Health Data System](#)  
Interactive system that quickly helps translate state-level, disability-specific data into valuable public health information.
- [Heart Disease and Stroke Prevention's Data Trends & Maps](#)  
View health indicators related to heart disease and stroke prevention by location or health indicator.
- [National Health Indicators Warehouse external icon](#)  
Indicators categorized by topic, geography, and initiative.
- [US Census Bureau external icon](#)  
Key source for population, housing, economic, and geographic information.
- [US Food Environment Atlas external icon](#)  
Assembled statistics on food environment indicators to stimulate research on the determinants of food choices and diet quality, and to provide a spatial overview of a community's ability to access healthy food and its success in doing so.
- [Centers for Medicare & Medicaid Services Research and Data Clearinghouse external icon](#)  
Research, statistics, data, and systems.
- [Environmental Public Health Tracking Network](#)  
System of integrated health, exposure, and hazard information and data from a variety of national, state, and city sources.
- [Health Research and Services Administration Data Warehouse external icon](#)  
Research, statistics, data, and systems.
- [Healthy People 2030 Leading Health Indicators external icon](#)  
Twenty-six leading health indicators organized under 12 topics.
- [Kids Count external icon](#)  
Profiles the status of children on a national and state-by-state basis and ranks states on 10 measures of well-being; includes a [mobile site external icon](#).
- [National Center for Health Statistics](#)  
Statistical information to guide actions and policies.
- [Pregnancy Risk Assessment and Monitoring System](#)  
State-specific, population-based data on maternal attitudes and experiences before, during, and shortly after pregnancy.
- [Web-based Injury Statistics Query and Reporting System \(WISQARS\)](#)  
Interactive database system with customized reports of injury-related data.
- [Youth Risk Behavior Surveillance System](#)  
Monitors six types of health-risk behaviors that contribute to the leading causes of death and disability among youth and adults.

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

| <b>Golden Valley Memorial Health - (Clinton, MO)</b><br><b>VVV CHNA Wave #4 Work Plan - Year 2022</b> |                                 |            |  |
|---|---------------------------------|------------|--|
| Project Timeline & Roles - Working Draft as of 6/24/22  |                                 |            |  |
| Step  | Timeframe                       | Lead       | Task   |
| 1   | 3/26/2022                       | VVV / Hosp | Sent Leadership information regarding CHNA Wave #4 for review.   |
| 2   | 3/31/2022                       | Hosp       | Select CHNA Wave #4 Option B. Approve / Sign VVV CHNA quote  |
| 3   | 7/6/2022                        | VVV        | Hold Kick-off Meeting. Send out <b>REQCommInvite Excel</b> file. HOSP & HLTH Dept to fill in PSA Stakeholders Names /Address /Email  |
| 4   | 7/6/2022                        | VVV        | & Request Hospital Client to send NHA PO reports for FFY 19, 20 and 21. In addition, request hospital to complete 3 year historical PSA IP/OP/ER/Clinic patient origin file (Use <b>ZipPSA_3yrPOOrigin.xls</b> ) |
| 5   | 7/6/2022                        | VVV        | Prepare CHNA Wave#4 Stakeholder Feedback "online link". Send link for hospital review.   |
| 6   | July-Aug 2022                   | VVV        | Assemble & complete Secondary Research - Find / populate 10 TABS. Create Town Hall ppt for presentation.   |
| 7   | 8/1/2022                        | VVV / Hosp | Prepare/send out PR story#1 / Email#1 Request announcing upcoming CHNA work to CEO to review/approve.  |
| 8   | 8/8/2022                        | VVV / Hosp | Place PR #1 story to local media CHNA survey announcing "online CHNA Wave #4 feedback". Request public to participate. Send E Mail request to local stakeholders   |
| 9   | 8/22/2022                       | VVV        | Launch / conduct online survey to stakeholders: Hospital will e-mail invite to participate to all stakeholders. <b>Cut-off 9/22/2022 for Online Survey</b>   |
| 10  | 9/7/2022                        | Hosp       | Prepare/send out to leaders the PR#2 story / Email#2 Request announcing upcoming Community TOWN HALL invite letter and place local AD.   |
| 11  | 9/12/2022                       | VVV / Hosp | Place PR #2 story to local media / Send Email to local stakeholders announcing / requesting participation in upcoming Town Hall Event.   |
| 12  | 10/10/2022                      | ALL        | Conduct conference call (time TBD) with Hospital / Public HLTH to review Town Hall data / flow   |
| 13  | <b>Thursday Oct. 13th, 2022</b> | VVV        | Conduct CHNA Town Hall for a working Dinner 5:30pm-7pm. Review & Discuss Basic health data plus RANK Health Needs.   |
| 14  | On or Before 11/15/2022         | VVV        | Complete Analysis - Release Draft 1- seek feedback from Leaders (Hospital & Health Dept.)  |
| 15  | On or Before 11/15/2022         | VVV        | Produce & Release final CHNA report. Hospital will post CHNA online (website).   |
| 16  | Nov or Dec 2022                 | VVV        | Conduct Client Implementation Plan PSA Leadership meeting  |
| 17  | TBD                             | VVV        | Hold Board Meetings discuss CHNA needs, create & adopt an implementation plan. Communicate CHNA plan to community.   |

## Community Health Needs Assessment Town Hall Meeting - 2022

On behalf of Golden Valley Memorial Healthcare Henry County  
Health Center & Compass Health Network



**VVV Consultants LLC**  
Olathe, Kansas 66061

VandehaarMarketing.com  
913-302-7264

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### TEAM Table Assignments

**Henry & Benton Counties, MO CHNA Town Hall Oct 13th (5:30-7pm)**

| #  | Team | Lead | Last      | First     | Organization                   | #  | Team | Lead | Last      | First     | Organization                  |
|----|------|------|-----------|-----------|--------------------------------|----|------|------|-----------|-----------|-------------------------------|
| 1  | A    | ##   | Adkins    | Kyle      | GVMH                           | 25 | G    | ##   | Bowles    | Peggy     | Henry Health Dept             |
| 2  | A    |      | Amy       | Jenkins   | WILS                           | 26 | G    |      | Meier     | Christian | Clinton School District       |
| 3  | A    |      | Bigler    | Dara      | SFCC                           | 27 | G    |      | Nasalroad | Debi      | WC MO Comm Action Agency      |
| 4  | A    |      | Boyles    | Rachel    | GVMH                           | 28 | G    |      | OBERKROM  | JAMES     | HENRY COUNTY SHERIFF          |
| 5  | B    | ##   | Bullock   | Don       | 1st Bap. Windsor               | 29 | H    | ##   | Overson   | Sandra    | Compass Health                |
| 6  | B    |      | Corson    | Jennifer  | Clinton School District        | 30 | H    |      | Schreck   | Linda     | WC MO Comm Action Agency      |
| 7  | B    |      | Dixon     | Deborah   | HCHC                           | 31 | H    |      | Shields   | Richard   | Henry Co Prosecuting Attorney |
| 8  | B    |      | Dody      | Debbie    | MU Extension                   | 32 | H    |      | Valentine | Taylor    | WC MO Comm Action Agency      |
| 9  | C    | ##   | Faulconer | Christine | GVMH                           | 33 | I    | ##   | Thompson  | Craig     | GVMH                          |
| 10 | C    |      | Dull      | Tara      | GVMH                           | 34 | I    |      | Stasheim  | Ernie     | JNB Bank / Co Health Board    |
| 11 | C    |      | Garnett   | Dave      | Hawthorn                       | 35 | I    |      | Stewart   | Sarah     | Compass Health                |
| 12 | C    |      | Glasscock | Tim       | GVMH and Compass               | 36 | I    |      | Wagner    | Joanne    | GVMH                          |
| 13 | D    | ##   | Hall      | Dana      | Henry County Health Center     | 37 | J    | ##   | Ruck      | Donni     | Compass Health                |
| 14 | D    |      | Bayless   | Jerrri    |                                | 38 | J    |      | Bullock   | Karen     | 1st Bap. Windsor              |
| 15 | D    |      | Henderson | Jessika   | GVMH                           | 39 | J    |      | Huff      | Jennifer  | GVMH                          |
| 16 | D    |      | Huf       | Allen     | Public Official                | 40 | J    |      | Walrath   | Ranee     | GVMH                          |
| 17 | E    | ##   | Journey   | Vincent   | Henry CO Off of Emergency MNGT | 41 | K    | ##   | Studer    | Lea       | GVMH                          |
| 18 | E    |      | Johns     | James     |                                | 42 | K    |      | Bellamy   | Bruce     | GVMH                          |
| 19 | E    |      | Kelley    | Colleen   | Clinton Healthcare & Rehab Ctr | 43 | K    |      | Bayless   | Jerri     |                               |
| 20 | E    |      | Lowe      | G.R.      | Aviation Fabricators           | 44 | K    |      |           |           |                               |
| 21 | F    | ##   | Junnette  | Hayes     | GVMH                           |    |      |      |           |           |                               |
| 22 | F    |      | Mickey    | Charla    | Clinton Healthcare & Rehab Ctr |    |      |      |           |           |                               |
| 23 | F    |      | Maggi     | Christy   | City of Clinton                |    |      |      |           |           |                               |
| 24 | F    |      | Mark      | Dawson    | Greater dinton area chamber    |    |      |      |           |           |                               |

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## Community Health Needs Assessment (CHNA) Onsite Town Hall Discussion Agenda

- I. Opening / Introductions (5 mins)
- II. Review CHNA Purpose and Process (5 mins)
- III. Review Current County "Health Status"
  - Secondary Data by 10 TAB Categories
  - Review Community Feedback Research (40 mins)
- IV. Collect Community Health Perspectives
  - Hold Community Voting Activity
  - Determine Most Important Unmet Needs (40 mins)
- V. Close / Next Steps (5 mins)

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## Introduction: Who We Are Background and Experience







**Vince Vandehaar, MBA – Principal**  
VVV Consultants LLC – start 1/1/09 \*

- Adjunct Full Professor @ Avila & Webster Universities
- 35+ year veteran marketer, strategist and researcher
- Saint Luke's Health System, BCBS of KC,
- Tillinghast Towers Perrin, and Lutheran Mutual Life
- Hometown: Bondurant IA

**Hannah Foster – Associate Consultant**  
VVV Consultants LLC – April 2022

- MO Southern State – Joplin, MO
- Avila University – MBA with HC
- Hometown: Lee's Summit, MO

**Cassandra Kahl, BHS – Director, Project Management**  
VVV Consultants LLC – Nov 2020

- University of Kansas – Health Sciences
- Park University - MHA
- Hometown: Maple, WI

\*NOTE: Vince started VVV Consultants LLC on 1/1/2009, after working for Saint Luke's Health System of Kansas City for 16 years. Saint Luke's Hospital of KC, SLHS's largest hospital, won the Malcolm Baldrige National Quality Award in March of 2003.

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## CHNA Experience



| 2022 CHNA Wave #4 Clients - VVV Consultants LLC as of 8/9/22 N=46 |    |                     |                |    |    |                       |                     |
|---|----|---------------------|----------------|----|----|-----------------------|---------------------|
| #   | ST | Clients from 1/1/21 | Location       | #  | ST | Clients from 1/1/21   | Location            |
| 1   | KS | Cove Co Med Center  | Quincy, KS     | 24 | IA | SAC                   | Shenandoah IA       |
| 2   | KS | Roemer Valley       | Larned, KS     | 25 | IA | MercyOne Centerville  | Centerville IA      |
| 3   | KS | Citizens Health     | Colby, KS      | 26 | IA | Manning Regional      | Manning IA          |
| 4   | KS | Hays Medical        | Hays, KS       | 27 | IA | MercyOne Newton       | Newton, IA          |
| 5   | KS | Osborne Co Mem H    | Osborne, KS    | 28 | IA | MercyOne Elmer        | Elmer, IA           |
| 6   | KS | Smith Co Mem Hosp   | Smith Ctr, KS  | 29 | IA | Elsworth Med          | Elsworth, KS        |
| 7   | KS | Sherridan Co        | Hiale, KS      | 30 | KS | Republic Co Hosp      | Republic, KS        |
| 8   | KS | Kiowa Co            | Greensburg, KS | 31 | MO | Camren Reg PSA        | Camren, MO          |
| 9   | KS | Fraught Reg         | Fraught, KS    | 32 | MO | Hannibal Reg PSA      | Hannibal, MO        |
| 10  | KS | Nemaha Valley Com   | Sabetha, KS    | 33 | NE | Bellevue Reg JF       | Bellevue, NE        |
| 11  | KS | Saline Co Mem Hosp  | Salina, KS     | 34 | KS | Moundridge            | Moundridge, KS      |
| 12  | KS | Miami County        | Pesha, KS      | 35 | MO | Bay County MO         | Bay County, MO      |
| 13  | KS | Glathe Med          | GMU JCCC       | 36 | KS | MHS                   | Abilene, KS         |
| 14  | KS | Pattonson Health    | Altamont, KS   | 37 | KS | Coffeyville Regional  | Coffeyville, KS     |
| 15  | KS | Wakeney Co          | Wakeney, KS    | 38 | KS | Amberwell - Alchison  | Alchison, KS        |
| 16  | KS | Russell Reg         | Russell, KS    | 39 | KS | Amberwell - Hawatha   | Hawatha, KS         |
| 17  | MO | Carroll Co MO       | Carrollton, MO | 40 | IA | Cherokee Regional     | Cherokee, IA        |
| 18  | KS | Cowley Co           | Wrayfield, KS  | 41 | MO | Cap Regional          | Jaytonville, MO     |
| 19  | KS | Marion Co           | Hillsboro, KS  | 42 | KS | Comm Memorial HC      | Marysville, KS      |
| 20  | KS | HCJ Jackson Co      | Hollon, KS     | 43 | KS | SW Medical Center     | Liberal, KS         |
| 21  | KS | CCMC - Not Online   | Kinsley, KS    | 44 | MO | Golden V Compass DOH  | Canton, MO          |
| 22  | NE | Tal Valley          | Cambridge NE   | 45 | MO | Bates co Mem Hospital | Butler, MO          |
| 23  | IA | G.C. Grape Mem Hosp | Hamburg IA     | 46 | MO | Cedar Co Mem Hosp     | Edorado Springs, MO |

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## Town Hall Participation

- ALL attendees practice "Safe Engagement". We will work together - Table Teams
- ALL attendees welcome to share. Engaging conversation (No right or wrong answer)
  - Parking Lot
- ALL Take Notes – Important health indicators
- Please give truthful responses – Serious community conversation.
- Purpose: Update unmet needs for 2022
- Have a little fun along the way

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## II. Review of a CHNA

- **A Community Health Needs Assessment (CHNA) is a...**
  - Systematic collection, assembly, analysis, and dissemination of information about the health of the community.
- **A CHNA's role is to....**
  - Identify factors that affect the health of a population and determine the availability of resources to adequately address those factors.
- **Purpose of a CHNA – Why Conduct One?**
  - Determine health-related trends and issues of the community
  - Understand / evaluate health delivery programs in place.
  - Meet Federal requirements – both local hospital and health department
  - Develop Implementation Plan strategies to address unmet health needs (4-6 weeks after Town Hall)

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## A Conversation with the Community & Stakeholders

Community members and organizations invited to CHNA Town Hall

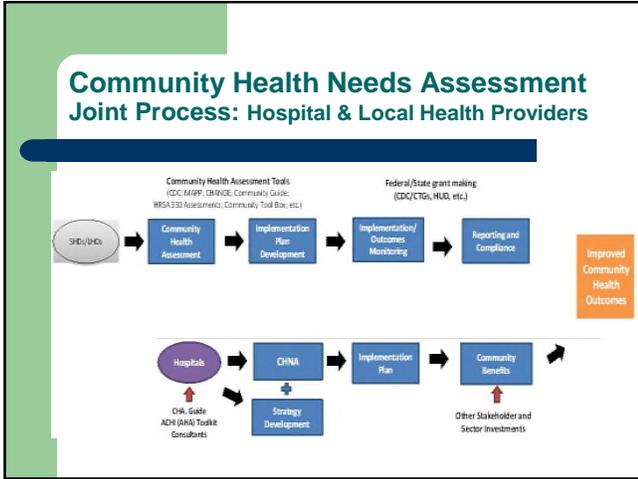
**Consumers:** Uninsured/underinsured people, Members of at-risk populations, Parents, caregivers and other consumers of health care in the community, and Consumer advocates.

**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, veterans' organizations, Lions, Rotary, etc., Representatives from businesses – owners/CEOs of large businesses (local or large corporations with local branches), Business people & merchants (e.g., who sell tobacco, alcohol, or other drugs), Representatives from organized labor, Political, appointed and elected officials., Foundations., United Way organizations. And other "community leaders."

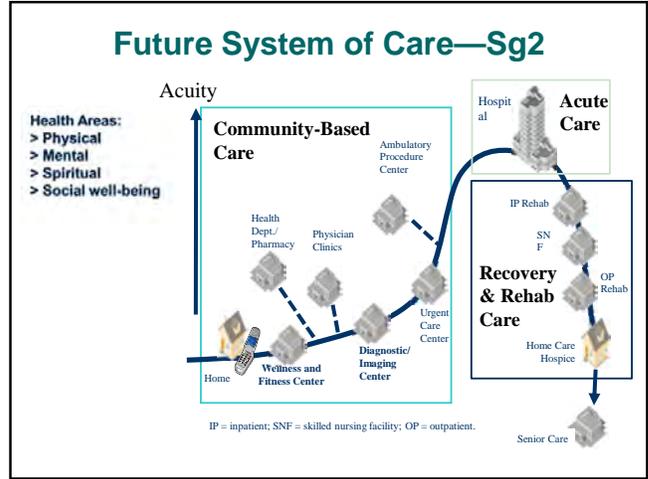
**Public and other organizations:** Public health officials, Directors or staff of health and human service organizations, City/Community planners and development officials, Individuals with business and economic development experience, Welfare and social service agency staff, Housing advocates – administrators of housing programs: homeless shelters, low-income-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

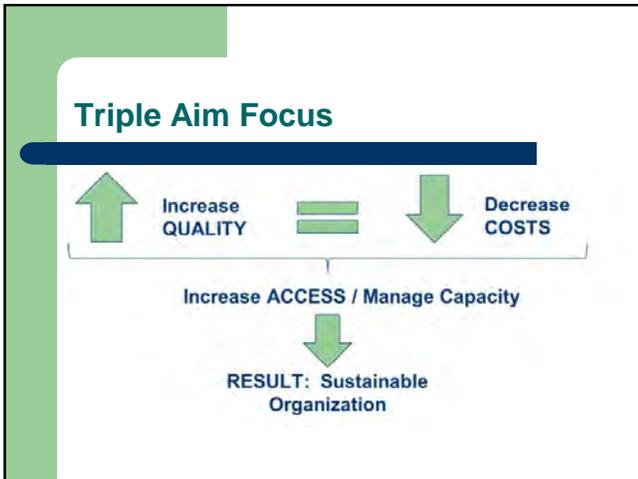
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- ### II. CHNA Written Report Documentation (IRS Aligned) – Table of Contents
- A description of the community served
  - A description of the CHNA process
  - The identity of any and all organizations and third parties which collaborated to assist with the CHNA
  - 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
  - A prioritized description of all of the community needs identified by the CHNA.
  - A description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA

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

Trends: **Good** **Same** **Poor**

#### Health Indicators - Secondary Research

TAB 1. Demographic Profile

TAB 2. Economic Profile

TAB 3. Educational Profile

TAB 4. Maternal and Infant Health Profile

TAB 5. Hospital / Provider Profile

TAB 6. Behavioral / Mental Health Profile

TAB 7. High-Risk Indicators & Factors

TAB 8. Uninsured Profile

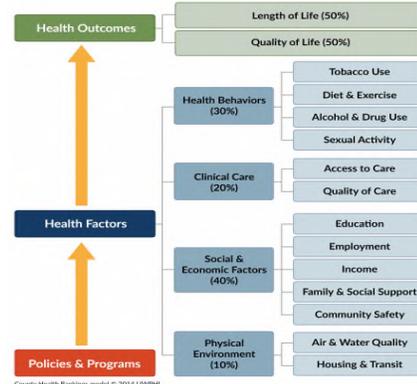
TAB 9. Mortality Profile

TAB 10. Preventative Quality Measures

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### County Health Rankings -

Robert Wood Johnson Foundation and University of WI Health Institute



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### IV. Collect Community Health Perspectives Thoughts/Opinions?

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

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### Community Health Needs Assessment

#### Questions Next Steps?

VVV Consultants LLC.  
801 N Mahaffie  
Olathe, KS 66061

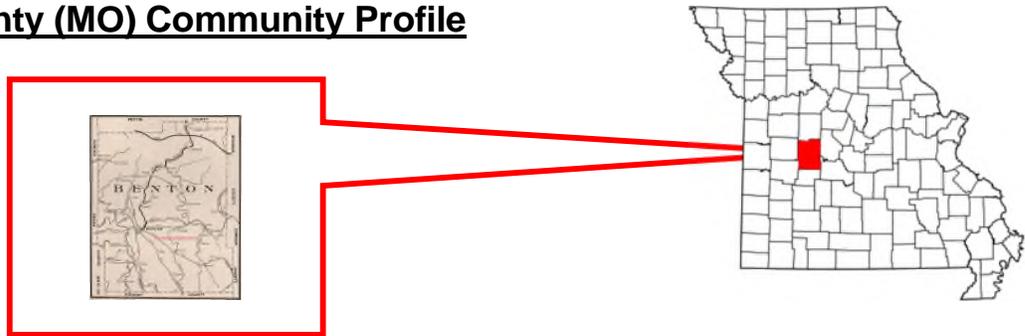
VVV@VandehaarMarketing.com  
HCF@VandehaarMarketing.com  
(913) 302-7264

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## II. Methodology

### d) Community Profile (A Description of Community Served)

#### Benton County (MO) Community Profile



**The population of Benton County was estimated to be 19,295 citizens** as of July 2022 and a population density of 27 persons per square mile.

U.S Route 65 goes vertically throughout the middle of the county. Missouri Route 7 runs throughout the bottom half of the county. U.S. Route 52 runs throughout the top of the county. Golden Valley Memorial Hospital is located off of Missouri Route 7.

## **Benton County (MO) Community Profile**

### **Benton County Public Airports<sup>1</sup>**

| <b>Name</b>                               | <b>USGS Topo Map</b> |
|---|----------------------|
| <a href="#">Lincoln Municipal Airport</a> | Lincoln              |
| <a href="#">Miller Airport</a>            | Climax Springs       |
| <a href="#">Warsaw Municipal Airport</a>  | Lincoln SE           |

### **Schools in Benton County: Public Schools<sup>2</sup>**

| <b>Name</b>                         | <b>Level</b>    |
|-------------------------------------|-----------------|
| <a href="#">Cole Camp Elem.</a>     | Elementary      |
| <a href="#">Cole Camp High</a>      | High            |
| <a href="#">Cole Camp Middle</a>    | Middle          |
| <a href="#">Cole Camp Preschool</a> | Prekindergarten |
| <a href="#">John Boise Middle</a>   | Middle          |
| <a href="#">Lincoln Elem.</a>       | Elementary      |
| <a href="#">Lincoln High</a>        | High            |
| <a href="#">North Elem.</a>         | Elementary      |
| <a href="#">Ruth Mercer Elem.</a>   | Not reported    |
| <a href="#">South Elem.</a>         | Elementary      |
| <a href="#">Warsaw High</a>         | High            |

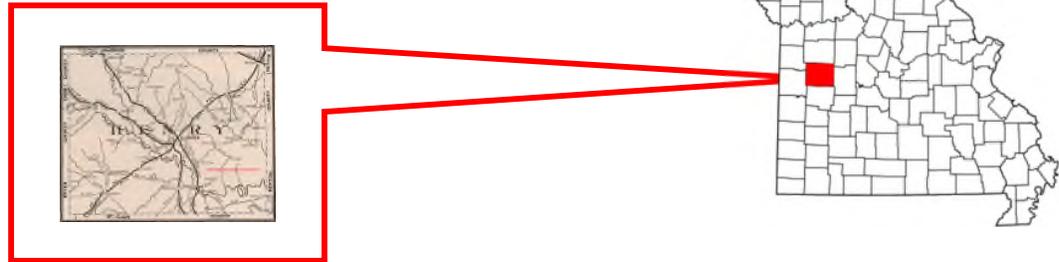
<sup>1</sup> <https://missouri.hometownlocator.com/features/cultural,class,airport,scfips,29015.cfm>

<sup>2</sup> <https://missouri.hometownlocator.com/schools/sorted-by-county,n,benton.cfm>

## II. Methodology

### d) Community Profile (A Description of Community Served)

#### Henry County (MO) Community Profile



**The population of Henry County was estimated to be 21,792 citizens** as of July 2022 and a population density of 31 persons per square mile.

U.S Route 13 goes vertically throughout the middle of the county. Missouri Route 7 runs throughout the top left of the county. U.S. Route 52 runs throughout the bottom half of the county. U.S. Route 18 runs horizontally throughout the county. Golden Valley Memorial Hospital is located off of Missouri Route 7.

#### Henry County (MO) Community Profile

## Henry County Public Airports<sup>1</sup>

| Name   | USGS Topo Map |
|--|---------------|
| <a href="#">Brownsberger Airport</a>                         | Johnstown     |
| <a href="#">Clinton Regional Airport</a>                     | Gaines        |
| <a href="#">Ferros Ranch-Aero</a>                            | Clinton North |
| <a href="#">George Bud Church Memorial Hospital Heliport</a> | Clinton North |

## Schools in Henry County: Public Schools<sup>2</sup>

| Name   | Level           |
|--|-----------------|
| <a href="#">Calhoun Early Childhood Ctr.</a>   | Prekindergarten |
| <a href="#">Calhoun Elem.</a>                  | Elementary      |
| <a href="#">Calhoun High</a>                   | High            |
| <a href="#">Clinton Early Childhood Center</a> | Prekindergarten |
| <a href="#">Clinton Intermediate School</a>    | Elementary      |
| <a href="#">Clinton Middle</a>                 | Middle          |
| <a href="#">Clinton Sr. High</a>               | High            |
| <a href="#">Davis Elem.</a>                    | Elementary      |
| <a href="#">Henry Elem.</a>                    | Elementary      |
| <a href="#">Leesville Elem.</a>                | Elementary      |
| <a href="#">Montrose Elem.</a>                 | Elementary      |
| <a href="#">Montrose High</a>                  | High            |
| <a href="#">Shawnee Elem.</a>                  | Elementary      |
| <a href="#">Windsor Elem.</a>                  | Elementary      |
| <a href="#">Windsor High</a>                   | High            |

<sup>1</sup> <https://missouri.hometownlocator.com/features/cultural,class,airport,scfips,29083.cfm>

<sup>2</sup> <https://missouri.hometownlocator.com/schools/sorted-by-county,n,henry.cfm>

## Henry County, MO - Detail Demographic Profile

| #             | ZIP   | NAME       | County | Population    |               |              | Households    |               | HH            | Per Capita      |
|---------------|-------|------------|--------|---------------|---------------|--------------|---------------|---------------|---------------|-----------------|
|               |       |            |        | Year 2020     | Year 2025     | Change       | YR 2020       | YR 2025       | Avg Size 2020 | Income 2020     |
| 1             | 64726 | Blairstown | HENRY  | 573           | 578           | 0.9%         | 235           | 237           | 2.4           | \$28,815        |
| 2             | 64735 | Clinton    | HENRY  | 13,701        | 13,704        | 0.0%         | 5,932         | 5,950         | 2.3           | \$28,661        |
| 3             | 64739 | Creighton  | HENRY  | 1,070         | 1,102         | 3.0%         | 429           | 444           | 2.5           | \$29,332        |
| 4             | 64740 | Deepwater  | HENRY  | 1,965         | 1,934         | -1.6%        | 866           | 852           | 2.3           | \$25,441        |
| 5             | 64770 | Montrose   | HENRY  | 907           | 884           | -2.5%        | 405           | 396           | 2.2           | \$28,904        |
| 6             | 64788 | Urich      | HENRY  | 1,297         | 1,292         | -0.4%        | 548           | 547           | 2.4           | \$25,334        |
| 7             | 65323 | Calhoun    | HENRY  | 1,072         | 1,068         | -0.4%        | 426           | 425           | 2.5           | \$25,760        |
| 8             | 65360 | Windsor    | HENRY  | 4,835         | 4,842         | 0.1%         | 1,857         | 1,857         | 2.6           | \$21,683        |
| <b>Totals</b> |       |            |        | <b>25,420</b> | <b>25,404</b> | <b>-0.1%</b> | <b>10,698</b> | <b>10,708</b> | <b>2.4</b>    | <b>\$26,741</b> |

| #             | ZIP   | NAME       | County | Population    |              |              |              | Year 2020     |               | Females      |
|---------------|-------|------------|--------|---------------|--------------|--------------|--------------|---------------|---------------|--------------|
|               |       |            |        | Year 2020     | Pop. 65+     | Kids<18      | Gen Y        | Males         | Females       | # Age 20-35  |
| 1             | 64726 | Blairstown | HENRY  | 573           | 122          | 149          | 67           | 280           | 293           | 64           |
| 2             | 64735 | Clinton    | HENRY  | 13,701        | 3,348        | 3,660        | 1,558        | 6,635         | 7,066         | 1,466        |
| 3             | 64739 | Creighton  | HENRY  | 1,070         | 196          | 274          | 130          | 541           | 529           | 114          |
| 4             | 64740 | Deepwater  | HENRY  | 1,965         | 592          | 407          | 177          | 994           | 971           | 169          |
| 5             | 64770 | Montrose   | HENRY  | 907           | 208          | 229          | 89           | 458           | 449           | 88           |
| 6             | 64788 | Urich      | HENRY  | 1,297         | 275          | 359          | 149          | 630           | 667           | 136          |
| 7             | 65323 | Calhoun    | HENRY  | 1,072         | 222          | 305          | 114          | 558           | 514           | 115          |
| 8             | 65360 | Windsor    | HENRY  | 4,835         | 944          | 1,507        | 600          | 2,367         | 2,468         | 598          |
| <b>Totals</b> |       |            |        | <b>25,420</b> | <b>5,907</b> | <b>6,890</b> | <b>2,884</b> | <b>12,463</b> | <b>12,957</b> | <b>2,750</b> |

| #             | ZIP   | NAME       | County | Population 2020 |              |             |             | Households 2020 |                 |              |
|---------------|-------|------------|--------|-----------------|--------------|-------------|-------------|-----------------|-----------------|--------------|
|               |       |            |        | Caucasian       | African Amer | Amer Ind.   | Hispanic    | HH 2020         | Med \$ HH       | # HH \$50K+  |
| 1             | 64726 | Blairstown | HENRY  | 95.1%           | 0.2%         | 0.2%        | 4.2%        | 235             | \$52,652        | 135          |
| 2             | 64735 | Clinton    | HENRY  | 94.0%           | 1.9%         | 0.6%        | 2.8%        | 5932            | \$48,814        | 3,099        |
| 3             | 64739 | Creighton  | HENRY  | 96.7%           | 0.7%         | 0.5%        | 2.1%        | 429             | \$52,326        | 259          |
| 4             | 64740 | Deepwater  | HENRY  | 96.2%           | 0.4%         | 0.9%        | 2.6%        | 866             | \$44,413        | 387          |
| 5             | 64770 | Montrose   | HENRY  | 96.9%           | 1.2%         | 0.1%        | 1.2%        | 405             | \$48,991        | 200          |
| 6             | 64788 | Urich      | HENRY  | 95.8%           | 0.8%         | 0.7%        | 3.0%        | 548             | \$44,542        | 270          |
| 7             | 65323 | Calhoun    | HENRY  | 96.5%           | 0.1%         | 0.6%        | 2.0%        | 426             | \$53,529        | 246          |
| 8             | 65360 | Windsor    | HENRY  | 94.7%           | 0.3%         | 1.1%        | 3.6%        | 1857            | \$44,391        | 887          |
| <b>Totals</b> |       |            |        | <b>95.8%</b>    | <b>0.7%</b>  | <b>0.6%</b> | <b>2.7%</b> | <b>10698</b>    | <b>\$48,707</b> | <b>5,483</b> |

Source: ERSI Demographics

## Benton County, MO - Detail Demographic Profile

| #             | ZIP   | NAME      | County | Population    |               |             | Households   |              | HH            | Per Capita      |
|---------------|-------|-----------|--------|---------------|---------------|-------------|--------------|--------------|---------------|-----------------|
|               |       |           |        | Year 2020     | Year 2025     | Change      | YR 2020      | YR 2025      | Avg Size 2020 | Income 2020     |
| 1             | 65325 | Cole Camp | BENTON | 3,205         | 3,206         | 0.0%        | 1,321        | 1,324        | 2.4           | \$21,045        |
| 2             | 65326 | Edwards   | BENTON | 2,105         | 2,142         | 1.8%        | 1,044        | 1,065        | 2.0           | \$24,627        |
| 3             | 65335 | Ionia     | BENTON | 360           | 372           | 3.3%        | 155          | 160          | 2.3           | \$25,201        |
| 4             | 65338 | Lincoln   | BENTON | 3,283         | 3,345         | 1.9%        | 1,399        | 1,429        | 2.3           | \$19,876        |
| 5             | 65355 | Warsaw    | BENTON | 11,114        | 11,323        | 1.9%        | 5,109        | 5,219        | 2.2           | \$22,520        |
| <b>Totals</b> |       |           |        | <b>20,067</b> | <b>20,388</b> | <b>1.6%</b> | <b>9,028</b> | <b>9,197</b> | <b>2.2</b>    | <b>\$22,654</b> |

| #             | ZIP   | NAME      | County | Population    |              |              |              | Year 2020     |              | Females      |
|---------------|-------|-----------|--------|---------------|--------------|--------------|--------------|---------------|--------------|--------------|
|               |       |           |        | Year 2020     | Pop. 65+     | Kids<18      | Gen Y        | Males         | Females      | # Age 20-35  |
| 1             | 65325 | Cole Camp | BENTON | 3,205         | 793          | 806          | 363          | 1,589         | 1,616        | 332          |
| 2             | 65326 | Edwards   | BENTON | 2,105         | 815          | 317          | 136          | 1,078         | 1,027        | 129          |
| 3             | 65335 | Ionia     | BENTON | 360           | 65           | 108          | 47           | 179           | 181          | 43           |
| 4             | 65338 | Lincoln   | BENTON | 3,283         | 981          | 804          | 327          | 1,588         | 1,695        | 313          |
| 5             | 65355 | Warsaw    | BENTON | 11,114        | 3,991        | 2,082        | 829          | 5,669         | 5,445        | 783          |
| <b>Totals</b> |       |           |        | <b>20,067</b> | <b>6,645</b> | <b>4,117</b> | <b>1,702</b> | <b>10,103</b> | <b>9,964</b> | <b>1,600</b> |

| #             | ZIP   | NAME      | County | Population 2020 |              |             |             | Households 2020 |                 |              |
|---------------|-------|-----------|--------|-----------------|--------------|-------------|-------------|-----------------|-----------------|--------------|
|               |       |           |        | Caucasian       | African Amer | Amer Ind.   | Hispanic    | HH 2020         | Med \$ HH       | # HH \$50K+  |
| 1             | 65325 | Cole Camp | BENTON | 96.8%           | 0.0%         | 0.8%        | 1.9%        | 1321            | \$40,433        | 564          |
| 2             | 65326 | Edwards   | BENTON | 95.7%           | 0.7%         | 0.7%        | 1.7%        | 1044            | \$37,398        | 394          |
| 3             | 65335 | Ionia     | BENTON | 94.7%           | 0.3%         | 0.0%        | 6.9%        | 155             | \$43,293        | 75           |
| 4             | 65338 | Lincoln   | BENTON | 95.8%           | 0.4%         | 0.9%        | 2.3%        | 1399            | \$32,780        | 492          |
| 5             | 65355 | Warsaw    | BENTON | 95.1%           | 0.8%         | 0.9%        | 2.3%        | 5109            | \$35,649        | 1,994        |
| <b>Totals</b> |       |           |        | <b>95.6%</b>    | <b>0.4%</b>  | <b>0.6%</b> | <b>3.0%</b> | <b>9028</b>     | <b>\$37,911</b> | <b>3,519</b> |

Source: ERSI Demographics

# III. Community Health Status

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[VVV Consultants LLC]

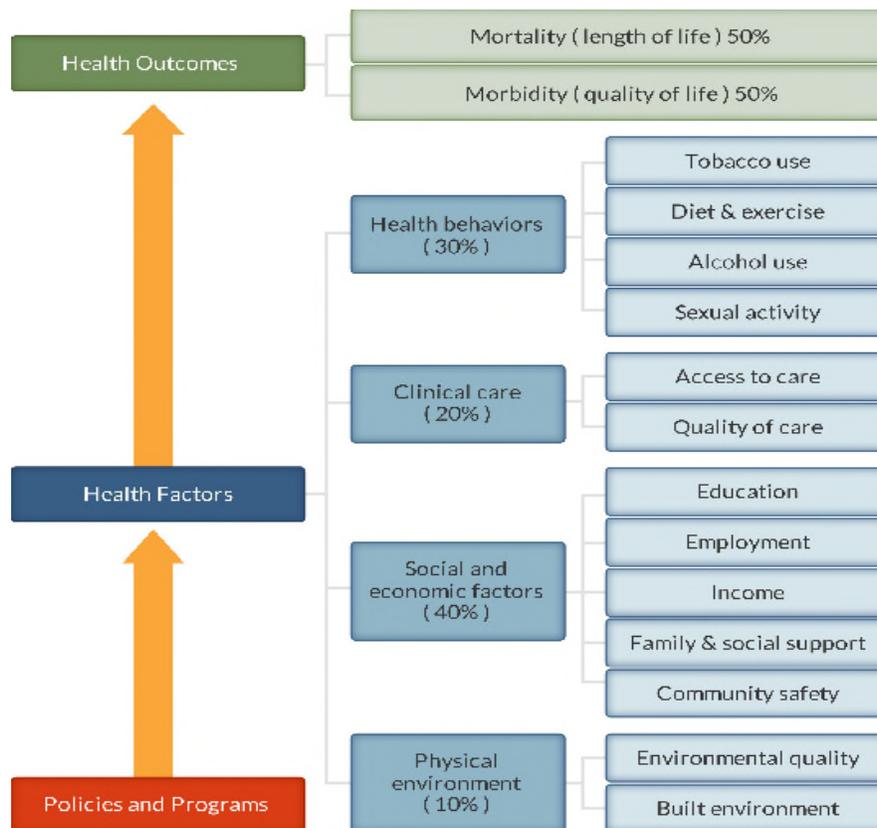
### III. Community Health Status

#### 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 2020 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 uses a number of health factors to rank each county.



County Health Rankings model ©2012 UWPHI

## National Research – Year 2022 RWJ Health Rankings:

| #   | 2022 MO Rankings - 115 Counties | Definitions  | Henry Co MO | Trend | Benton Co MO | MO Norms (23) |
|---|---------------------------------|--|-------------|-------|--------------|---------------|
| 1   | <b>Health Outcomes</b>          |  | 80          |       | 85           | 27            |
|   | Mortality                       | Length of Life   | 78          |       | 94           | 17            |
|   | Morbidity                       | Quality of Life  | 78          |       | 61           | 54            |
| 2   | <b>Health Factors</b>           |  | 34          |       | 14           | 57            |
|   | Health Behaviors                | Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity               | 71          |       | 66           | 84            |
|   | Clinical Care                   | Access to care / Quality of Care                                       | 28          |       | 84           | 94            |
|   | Social & Economic Factors       | Education, Employment, Income, Family/Social support, Community Safety | 79          |       | 98           | 92            |
| 3   | <b>Physical Environment</b>     | Environmental quality  | 76          |       | 78           | 95            |
| MO Norms (23): Adair, Barton, Bates, Benton, Caldwell, Carroll, Cass, Cedar, Clinton, Dade, Henry, Hickory, Johnson, Lafayette, Livingston, Macon, Pettis, Polk, Randolph, Ray, Saline, St. Clair, Vernon |                                 |  |             |       |              |               |
| <a href="http://www.countyhealthrankings.org">http://www.countyhealthrankings.org</a> , released 2022   |                                 |  |             |       |              |               |

## PSA Secondary Research:

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

*Note: Each Tab has been trended to reflect County trends to NORM.*

| Health Indicators - Secondary Research    |
|---|
| TAB 1. Demographic Profile                |
| TAB 2. Economic Profile                   |
| TAB 3. Educational Profile                |
| TAB 4. Maternal and Infant Health Profile |
| TAB 5. Hospital / Provider Profile        |
| TAB 6. Behavioral / Mental Health Profile |
| TAB 7. High-Risk Indicators & Factors     |
| TAB 8. Uninsured Profile                  |
| TAB 9. Mortality Profile                  |
| TAB 10. Preventative Quality Measures     |

**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  | MO Rural Norms (23) | Source                 |
|-----|--|-------------|-------|--------------|-----------|---------------------|------------------------|
| 1a  | a Population Estimates, July 1 2021, (V2021)   | 15,544      |       | 14,783       | 4,150,049 | 19,115              | County Health Rankings |
|     | d Persons under 5 years, percent, July 1, 2021, (V2021)                                  | 5.7%        |       | 4.6%         | 6.0%      | 5.7%                | People Quick Facts     |
|     | c Persons 65 years and over, percent, July 1, 2021, (V2021)                              | 22.1%       |       | 31.2%        | 17.3%     | 20.8%               | People Quick Facts     |
|     | d Female persons, percent, July 1, 2021, (V2021)   | 50.8%       |       | 49.9%        | 50.9%     | 50.5%               | People Quick Facts     |
|     | e White alone, percent, July 1, 2021, (V2021)  | 95.5%       |       | 96.3%        | 82.9%     | 93.7%               | People Quick Facts     |
|     | f Black or African American alone, percent, July 1, 2021, (V2021)                        | 1.2%        |       | 0.6%         | 11.8%     | 2.1%                | People Quick Facts     |
|     | g Hispanic or Latino, percent, July 1, 2021, (V2021)                                     | 2.6%        |       | 2.1%         | 4.4%      | 3.2%                | People Quick Facts     |
|     | h Language other than English spoken at home, percent of persons age 5 years+, 2015-2019 | 3.4%        |       | 3.6%         | 6.3%      | 3.6%                | People Quick Facts     |
|     | i Living in same house 1 year ago, percent of persons age 1 year+, 2015-2019             | 83.9%       |       | 88.0%        | 84.8%     | 86.2%               | People Quick Facts     |
|     | j Children in single-parent households, percent, 2015-2019                               | 23.3%       |       | 19.8%        | 25.4%     | 20.3%               | County Health Rankings |
|     | k Total Veterans, 2015-2019  | 2,293       |       | 1,966        | 401,779   | 1,835               | People Quick Facts     |

**Tab 2: Economic Profile**

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

| Tab | Health Indicator   | Henry Co MO | Trend | Benton Co MO | MO State  | MO Rural Norms (23) | Source                 |
|-----|--|-------------|-------|--------------|-----------|---------------------|------------------------|
| 2   | a Per capita income in past 12 months (in 2017 dollars), 2015-2019 | \$26,944    |       | \$24,317     | \$30,810  | \$25,462            | People Quick Facts     |
|     | b Persons in poverty, percent, 2021                                | 13.6%       |       | 16.8%        | 12.1%     | 14.0%               | People Quick Facts     |
|     | c Total Housing units, July 1, 2019, (V2019)                       | 10,983      |       | 14,274       | 2,819,383 | 11,121              | People Quick Facts     |
|     | d Total Persons per household, 2015-2019                           | 2.3         |       | 2.4          | 2.5       | 2.4                 | People Quick Facts     |
|     | e Severe housing problems, percent, 2013-2017                      | 12.0%       |       | 14.7%        | 13.3%     | 12.6%               | County Health Rankings |
|     | f Total of All firms, 2012   | 2,213       |       | 1,802        | 491,606   | 1,942               | People Quick Facts     |
|     | g Unemployment, percent, 2019                                      | 3.7%        |       | 4.8%         | 3.3%      | 4.3%                | County Health Rankings |
|     | h Food insecurity, percent, 2019                                   | 16.4%       |       | 16.5%        | 13.3%     | 14.4%               | County Health Rankings |
|     | i Limited access to healthy foods, percent, 2019                   | 13.8%       |       | 4.7%         | 6.8%      | 7.6%                | County Health Rankings |
|     | j Long commute - driving alone, percent, 2019                      | 32.1%       |       | 38.6%        | 32.4%     | 34.7%               | 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 | MO Rural Norms (23) | Source                 |
|-----|---|-------------|-------|--------------|----------|---------------------|------------------------|
| 3 a | Children eligible for free or reduced price lunch, percent, 2019            | 57.8%       |       | 77.5%        | 50.2%    | 53.3%               | County Health Rankings |
| c   | High school graduate or higher, percent of persons age 25 years+, 2013-2017 | 87.8%       |       | 84.5%        | 89.9%    | 88.4%               | People Quick Facts     |
| d   | Bachelor's degree or higher, percent of persons age 25 years+, 2013-2017    | 15.9%       |       | 13.0%        | 29.2%    | 18.5%               | People Quick Facts     |

| #  | School Health Indicators  | Sherwood Cass R-VIII | Davis R-XII | Montrose R-XIV | Shawnee R-III | Clinton | Lakeland R-II | Henry Co. R-I | Calhoun R-VIII | Leesville R-IX | Lincoln R-II | Cole Camp R-I | Warsaw R-IX |
|----|---|----------------------|-------------|----------------|---------------|---------|---------------|---------------|----------------|----------------|--------------|---------------|-------------|
| 1  | Total Public School Nurses  | NA                   | 1           | 0              | 0             | 3       | 1             | 0             | 0              | 0              | NA           | NA            | NA          |
| 2  | School Nurse Part of IEP Team                                     | NA                   | 1           | 0              | 0             |         | 1             | 0             | 0              | 0              | NA           | NA            | NA          |
| 3  | Active School Wellness Plan                                       | NA                   | Yes         | Yes            | Yes           | Yes     | Yes           | Yes           | Yes            | Yes            | NA           | NA            | NA          |
| 4  | VISION: # Screened / Referred to Prof / Seen by Professional      | NA                   | NA          | NA             | NA            | NA      | NA            | NA            | NA             | NA             | NA           | NA            | NA          |
| 5  | HEARING: # Screened / Referred to Prof / Seen by Professional     | NA                   | NA          | NA             | NA            | NA      | NA            | NA            | NA             | NA             | NA           | NA            | NA          |
| 6  | ORAL HEALTH: # Screened / Referred to Prof / Seen by Professional | NA                   | NA          | NA             | NA            | NA      | NA            | NA            | NA             | NA             | NA           | NA            | NA          |
| 7  | SCOLIOSIS: # Screened / Referred to Prof / Seen by Professional   | NA                   | NA          | NA             | NA            | NA      | NA            | NA            | NA             | NA             | NA           | NA            | NA          |
| 8  | Students Served with No Identified Chronic Health Concerns        | NA                   | NA          | NA             | NA            | NA      | NA            | NA            | NA             | NA             | NA           | NA            | NA          |
| 9  | School has Suicide Prevention Program                             | NA                   | NA          | NA             | NA            | NA      | NA            | NA            | NA             | NA             | NA           | NA            | NA          |
| 10 | Compliance on Required Vaccinations                               | NA                   | NA          | 100%           | 100%          | NA      | 100%          | 100%          | 100%           | NA             | NA           | NA            | NA          |

**Tab 4: Maternal / Infant Profile**

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

| Tab | Health Indicator   | Henry Co MO | Trend | Benton Co MO | MO State | MO Rural Norms (23) | Source  |
|-----|--|-------------|-------|--------------|----------|---------------------|---------|
| 4 a | Number of Births Where Prenatal Care began in First Trimester, 2019 (rate per 100) | 67.6        |       | 64.5         | 71.2     | 71.4                | MOPHIMS |
| b   | Number of Preterm Births, 2015-2019 (rate per 100)                                 | 9.7         |       | 9.5          | 10.5     | 9.9                 | MOPHIMS |
| c   | Number of Births with Low Birth Weight, 2015-2019 (rate per 100)                   | 8.5         |       | 8.1          | 8.7      | 8.0                 | MOPHIMS |
| d   | Number of WIC Infants- Ever Breastfed, percent, 2019 (rate per 100)                | 75.2        |       | 76.2         | 73.5     | 74.7                | MOPHIMS |
| e   | Number of all Births Occurring to Teens (15-17), 2015-2019 (rate per 100)          | 2.5         |       | 2.4          | 1.4      | 1.7                 | MOPHIMS |
| g   | Number of births Where Mother Smoked During Pregnancy, 2019 (rate per 100)         | 22.8        |       | 23.9         | 12.8     | 17.8                | MOPHIMS |

| Missouri Resident Births (MICA) |        |        |        |       |
|---------------------------------|--------|--------|--------|-------|
| County                          | 2017   | 2018   | 2019   | Trend |
| Henry County                    | 235    | 243    | 318    |       |
| Benton County                   | 171    | 183    | 158    |       |
| Missouri                        | 73,017 | 73,281 | 72,103 |       |

Source: DHSS - MOPHIMS - Birth MICA

**Tab 5: Hospitalization and 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 | MO Rural Norms (23) | Source                                    |
|-----|---|-------------|-------|--------------|----------|---------------------|---|
| 5   | a Primary care physicians (MD or DO with County office) (Pop Coverage per), 2019  | 1282:1      |       | 3856:1       | 1422:1   | 3276:1              | County Health Rankings                    |
|     | b Preventable hospital stays - Rate of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees. (lower the better), 2018 | 4,889       |       | 4,792        | 4,638    | 4,498               | County Health Rankings                    |
|     | c Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)   | 71.0%       |       | NA           | 73.0%    | 70.8%               | CMS Hospital Compare, 10/1/2015-9/30/2016 |
|     | d Patients Who Reported Yes, They Would Definitely Recommend the Hospital   | 68.0%       |       | NA           | 72.0%    | 66.8%               | CMS Hospital Compare, 10/1/2015-9/30/2016 |
|     | e Average Time Patients Spent in the Emergency Dept. before seen by a Healthcare Professional (minutes)   | 189         |       | NA           | 122      | 120                 | CMS Hospital Compare, 10/1/2015-9/30/2016 |

**Tab 6: Behavioral / Mental Profile**

Behavioral healthcare provides another important indicator of community health status.

| Tab | Health Indicator   | Henry Co MO | Trend | Benton Co MO | MO State | MO Rural Norms (23) | Source                                     |
|-----|--|-------------|-------|--------------|----------|---------------------|--|
| 6   | a Depression: Medicare Population, percent, 2018                                     | 18.8%       |       | 18.0%        | 21.3%    | 16.9%               | Centers for Medicare and Medicaid Services |
|     | b Age-adjusted Suicide Mortality Rate per 100,000 population, 2019 (lower is better) | 19.9        |       | 21.9         | 18.2     | 16.7                | World Bank                                 |
|     | c Poor mental health days, 2019  | 5.1         |       | 5.1          | 4.5      | 5.0                 | County Health Rankings                     |

**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 | MO Rural Norms (23) | Source                 |
|-----|--|-------------|-------|--------------|----------|---------------------|------------------------|
| 7a  | a Adult obesity, percent, 2019                         | 32.1%       |       | 34.3%        | 32.5%    | 36.3%               | County Health Rankings |
|     | b Adult smoking, percent, 2019                         | 25.0%       |       | 24.5%        | 20.1%    | 23.9%               | County Health Rankings |
|     | c Excessive drinking, percent, 2019                    | 18.7%       |       | 18.2%        | 20.5%    | 18.3%               | County Health Rankings |
|     | d Physical inactivity, percent, 2019                   | 29.1%       |       | 29.8%        | 25.5%    | 31.6%               | County Health Rankings |
|     | e Poor physical health days, 2019                      | 5.0         |       | 5.0          | 4.2      | 4.7                 | County Health Rankings |
|     | f Sexually transmitted infections, rate per 100k, 2019 | 382.2       |       | 194.0        | 568.1    | 307.7               | County Health Rankings |

**Tab 7b: Chronic Risk Profile**

| Tab | Health Indicator                                 | Henry Co MO | Trend | Benton Co MO | MO State | MO Rural Norms (23) | Source |
|-----|--|-------------|-------|--------------|----------|---------------------|--------|
| 7b  | a Hypertension: Medicare Population, 2018        | 55.8%       |       | 54.7%        | 59.9%    | 56.1%               | CMS    |
|     | b Hyperlipidemia: Medicare Population, 2018      | 35.0%       |       | 43.0%        | 47.5%    | 39.5%               | CMS    |
|     | c Heart Failure: Medicare Population, 2018       | 15.2%       |       | 14.1%        | 15.3%    | 14.4%               | CMS    |
|     | d Chronic Kidney Disease: Medicare Pop, 2018     | 22.5%       |       | 18.8%        | 25.2%    | 20.0%               | CMS    |
|     | e COPD: Medicare Population, 2018                | 15.1%       |       | 16.7%        | 13.1%    | 14.0%               | CMS    |
|     | f Atrial Fibrillation: Medicare Population, 2018 | 8.6%        |       | 9.2%         | 9.9%     | 9.0%                | CMS    |
|     | g Cancer: Medicare Population, 2018              | 7.7%        |       | 6.9%         | 9.5%     | 8.0%                | CMS    |
|     | h Osteoporosis: Medicare Population, 2018        | 4.0%        |       | 4.7%         | 7.2%     | 5.2%                | CMS    |
|     | i Asthma: Medicare Population, 2018              | 2.8%        |       | 2.9%         | 3.9%     | 3.3%                | CMS    |
|     | j Stroke: Medicare Population, 2018              | 3.5%        |       | 3.1%         | 3.6%     | 3.1%                | CMS    |

**Tab 8: Uninsured Profile and 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 | MO Rural Norms (23) | Source                 |
|-----|----------------------------|-------------|-------|--------------|----------|---------------------|------------------------|
| 8   | a Uninsured, percent, 2019 | 12.8%       |       | 16.5%        | 11.4%    | 15.1%               | County Health Rankings |

| Golden Valley Memorial Hospital |              | YR 2019      | YR 2020 +    | YR 2021 +    |
|---------------------------------|--------------|--------------|--------------|--------------|
| 1                               | Bad Debt     | \$12,176,635 | \$12,742,344 | \$11,101,075 |
| 2                               | Charity Care | \$3,261,153  | \$4,565,595  | \$7,336,499  |

| Compass Health Network |  | YR 2019      | YR 2020     | YR 2021     |
|------------------------|--|--------------|-------------|-------------|
|                        | Pathways Charity Care (MO Counties Service Area) | \$11,379,000 | \$2,590,000 | \$2,195,000 |

| Henry County Health Center |                                     | YR 2019  | YR 2018  | YR 2021  |
|----------------------------|-------------------------------------|----------|----------|----------|
|                            | Community Nursing Services Provided | \$27,737 | \$42,066 | \$44,915 |

**Tab 9: Mortality Profile**

The leading causes of county deaths from Vital Statistics are listed below.

| Tab | Health Indicator   | Henry Co MO | Trend | Benton Co MO | MO State | MO Rural Norms (23) | Source                 |
|-----|--|-------------|-------|--------------|----------|---------------------|------------------------|
| 9 a | Life Expectancy (Males & Females) 2017-2019,   | 75.7        |       | 76.1         | 77.3     | 76.6                | County Health Rankings |
|     | Age-adjusted Cancer Mortality Rate per 100,000 population, 2019 (lower is better)        | 206.4       |       | 202.4        | 159.7    | 192.1               | World Bank             |
|     | Age-adjusted Heart Disease Mortality Rate per 100,000 population, 2019 (lower is better) | 265.7       |       | 238.9        | 187.0    | 229.1               | World Bank             |
| c   | Alcohol-impaired driving deaths, percent, 2019   | 20.0%       |       | 31.3%        | 27.1%    | 27.3%               | County Health Rankings |

| Causes of Death by County of Residence, MO 2020 | Henry Co MO | %           | T | Benton Co MO | %           | MO Rural Norm | %           |
|---|-------------|-------------|---|--------------|-------------|---------------|-------------|
| <b>TOTAL</b>                                    | <b>308</b>  | <b>100%</b> |   | <b>317</b>   | <b>100%</b> | <b>259</b>    | <b>100%</b> |
| Diseases of heart                               | 95          | 30.8%       |   | 63           | 19.9%       | 56            | 16.1%       |
| Malignant neoplasms                             | 62          | 20.1%       |   | 72           | 22.7%       | 63            | 18.2%       |
| All other diseases                              | 42          | 13.6%       |   | 52           | 16.4%       | 43            | 12.4%       |
| Unintentional injuries                          | 26          | 8.4%        |   | 21           | 6.6%        | 18            | 5.2%        |
| Other malignant neoplasms                       | 22          | 7.1%        |   | 21           | 6.6%        | 16            | 4.7%        |
| Trachea, bronchus, and lung                     | 21          | 6.8%        |   | 26           | 8.2%        | 16            | 4.5%        |
| Chronic lower respiratory disease               | 21          | 6.8%        |   | 25           | 7.9%        | 15            | 4.3%        |

**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 | MO Rural Norms (23) | Source                 |
|------|---|-------------|-------|--------------|----------|---------------------|------------------------|
| 10 a | Access to exercise opportunities, percent, 2019 | 44.9%       |       | 31.1%        | 76.7%    | 46.7%               | County Health Rankings |
| b    | Diabetes monitoring, percent, 2019              | 19.6%       |       | 14.8%        | 11.4%    | 11.9%               | County Health Rankings |
| c    | Mammography screening, percent, 2019            | 41.0%       |       | 43.0%        | 44.0%    | 40.6%               | County Health Rankings |
| d    | Percent Annual Check-Up Visit with PCP          | NA          |       | NA           | 16.3%    | 16.8%               | TBD                    |
| e    | Percent Annual Check-Up Visit with Dentist      | NA          |       | NA           | 24.4%    | 27.4%               | TBD                    |
| f    | Percent Annual Check-Up Visit with Eye Doctor   | NA          |       | NA           | NA       | NA                  | TBD                    |

## PSA Primary Research:

For each CHNA Wave # 4 evaluation, a community stakeholder survey has been created and administered to collect current healthcare information for Henry & Benton County, MO.

**Chart #1 – Henry and Benton County, MO Online Feedback Response (N=259)**

| Henry Benton Co KS - CHNA YR 2022  |                            |       |                      |
|--|----------------------------|-------|----------------------|
| For reporting purposes, are you involved in or are you a ...? (Multiple)   | Henry & Benton CO MO N=408 | Trend | Wave 4 Norms N=8,781 |
| Business / Merchant  | 4.7%                       |       | 13.9%                |
| Community Board Member   | 2.7%                       |       | 12.5%                |
| Case Manager / Discharge Planner   | 0.8%                       |       | 1.3%                 |
| Clergy   | 2.2%                       |       | 2.0%                 |
| College / University   | 3.3%                       |       | 4.5%                 |
| Consumer Advocate  | 1.4%                       |       | 2.1%                 |
| Dentist / Eye Doctor / Chiropractor  | 1.1%                       |       | 1.2%                 |
| Elected Official - City/County   | 0.5%                       |       | 2.8%                 |
| EMS / Emergency  | 1.1%                       |       | 3.3%                 |
| Farmer / Rancher   | 6.8%                       |       | 9.3%                 |
| Hospital / Health Dept   | 19.7%                      |       | 24.7%                |
| Housing / Builder  | 1.9%                       |       | 1.2%                 |
| Insurance  | 2.2%                       |       | 1.7%                 |
| Labor  | 2.5%                       |       | 4.2%                 |
| Law Enforcement  | 0.8%                       |       | 1.7%                 |
| Mental Health  | 3.8%                       |       | 2.8%                 |
| Other Health Professional  | 12.6%                      |       | 15.1%                |
| Parent / Caregiver   | 10.1%                      |       | 22.2%                |
| Pharmacy / Clinic  | 2.2%                       |       | 3.1%                 |
| Media (Paper/TV/Radio)   | 2.5%                       |       | 0.9%                 |
| Senior Care  | 3.6%                       |       | 4.7%                 |
| Teacher / School Admin   | 5.2%                       |       | 9.6%                 |
| Veteran  | 1.9%                       |       | 4.3%                 |
| Other (please specify)   | 6.3%                       |       | 10.9%                |
| <b>TOTAL</b>   | <b>365</b>                 |       | <b>8177</b>          |
| <small>Norms: <b>KS Counties:</b> Atchinson, Brown, Dickinson, Jackson, Marion, Marshall, Montgomery, Cowley, Russell, Trego, Harper, Miami, Johnson, Nemaha, Ellis, Pawnee, Gove, Sheridan, Kiowa, Pratt, Ellsworth, Republic, Seward, <b>MO Counties:</b> Benton, Carroll, Caldwell, Clinton, Daviess, DeKalb, Lewis, Marion, Monroe, Pike, Ralls, Ray, Shelby Co, <b>IA Counties:</b> Cass, Cherokee, Fremont, Page, Appanoose, Carroll, Jasper, Clayton, <b>NE Counties:</b> Custer &amp; Fumis.</small> |                            |       |                      |

**Chart #2 - Quality of Healthcare Delivery Community Rating**

| Henry & Benton Counties MO - CHNA YR 2022  |                               |       |                            |
|--|-------------------------------|-------|----------------------------|
| How would you rate the "Overall Quality" of healthcare delivery in our community?  | Henry & Benton CO<br>MO N=408 | Trend | Wave 4<br>Norms<br>N=8,781 |
| Top Box %  | 23.4%                         |       | 24.8%                      |
| Top 2 Boxes %  | 63.1%                         |       | 68.3%                      |
| Very Good  | 23.4%                         |       | 24.8%                      |
| Good   | 39.7%                         |       | 43.5%                      |
| Average  | 28.3%                         |       | 28.1%                      |
| Poor   | 7.4%                          |       | 7.6%                       |
| Very Poor  | 1.2%                          |       | 2.4%                       |
| Valid N  | 408                           |       | 8,724                      |
| <small>Norms: <b>KS Counties:</b> Atchinson, Brown, Dickinson, Jackson, Marion, Marshall, Montgomery, Cowley, Russell, Trego, Harper, Miami, Johnson, Nemaha, Ellis, Pawnee, Gove, Sheridan, Kiowa, Pratt, Ellsworth, Republic, Seward; <b>MO Counties:</b> Benton, Carroll, Caldwell, Clinton, Dawes, DeKalb, Lewis, Marion, Marion, Pike, Ralls, Ray, Shelby Co.; <b>IA Counties:</b> Cass, Cherokee, Fremont, Page, Appanoose, Carroll, Jasper, Clayton; <b>NE Counties:</b> Custer &amp; Furness</small> |                               |       |                            |

**Chart #3 – Overall Community Health Quality Trend**

| Henry & Benton Counties MO - CHNA YR 2022                     |                               |       |                            |
|---|-------------------------------|-------|----------------------------|
| When considering "overall community health quality", is it... | Henry & Benton CO<br>MO N=408 | Trend | Wave 4<br>Norms<br>N=8,781 |
| Increasing - moving up  | 49.6%                         |       | 41.2%                      |
| Not really changing much                                      | 39.8%                         |       | 46.1%                      |
| Decreasing - slipping   | 10.6%                         |       | 12.8%                      |
| Valid N   | 408                           |       | 7,856                      |

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

| Henry & Benton Counties MO - CHNA YR 2022 N=408 |   |                 |        |       |          |
|---|---|-----------------|--------|-------|----------|
| Past CHNA Unmet Needs Identified                |   | Ongoing Problem |        |       | Pressing |
| Rank  | Ongoing Problem   | Votes           | %      | Trend | Rank     |
| 1   | Mental Health Specialty Services                          | 276             | 30.6%  |       | 1        |
| 2   | Emergency Room Services                                   | 224             | 24.8%  |       | 2        |
| 3   | Drug Abuse (Heroin, Marijuana, Meth, Prescription)        | 140             | 15.5%  |       | 3        |
| 4   | Improve Quality of Nursing Home Care Services             | 119             | 13.2%  |       | 4        |
| 5   | Healthcare Transportation                                 | 106             | 11.8%  |       | 5        |
| 6   | Visiting Specialists for Peds, Onc, Psych, Derm, Ortho, U | 101             | 11.2%  |       | 6        |
| 7   | Obesity (Nutrition / Exercise)                            | 100             | 11.1%  |       | 9        |
| 8   | Urgent Care Services                                      | 99              | 11.0%  |       | 7        |
| 9   | Expand Community "Wellness" Education                     | 96              | 10.6%  |       | 8        |
| 10  | Increase # of Dentists who take Medicaid                  | 93              | 10.3%  |       | 11       |
| 11  | Services for Autistic Children / Adults                   | 73              | 8.1%   |       | 12       |
| 12  | Provide Local Oral Surgeon Services                       | 71              | 7.9%   |       | 13       |
| 13  | Economic Development                                      | 65              | 7.2%   |       | 10       |
| 14  | Pediatric Care Services                                   | 57              | 6.3%   |       | 14       |
| Totals  |   | 1620            | 100.0% |       |          |

**Chart #5 - Community Health Needs Assessment “Causes of Poor Health”**

| <b>Henry &amp; Benton Counties MO - CHNA YR 2022</b>                         |                            |       |                      |
|--|----------------------------|-------|----------------------|
| In your opinion, what are the root causes of "poor health" in our community? | Henry & Benton CO MO N=408 | Trend | Wave 4 Norms N=8,781 |
| Chronic disease prevention   | 11.6%                      |       | 13.0%                |
| Lack of health & Wellness Education  | 13.1%                      |       | 16.5%                |
| Lack of Nutrition / Exercise Services  | 9.7%                       |       | 12.7%                |
| Limited Access to Primary Care   | 8.5%                       |       | 9.2%                 |
| Limited Access to Specialty Care   | 8.3%                       |       | 10.6%                |
| Limited Access to Mental Health Assistance                                   | 13.4%                      |       | 21.5%                |
| Family assistance programs   | 8.0%                       |       | 7.2%                 |
| Lack of health insurance   | 17.1%                      |       | 17.8%                |
| Neglect  | 10.3%                      |       | 12.9%                |
| <b>Total Votes</b>   | <b>749</b>                 |       | <b>14,552</b>        |

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

| <b>Henry &amp; Benton Co MO - CHNA YR 2022</b> | Henry & Benton CO MO N=408 |                | Trend | Wave 4 Norms N=8,781 |                |
|--|----------------------------|----------------|-------|----------------------|----------------|
|  | Top 2 boxes                | Bottom 2 boxes |       | Top 2 boxes          | Bottom 2 boxes |
| Ambulance Services                             | 73.2%                      | 5.9%           |       | 78.9%                | 5.9%           |
| Child Care                                     | 34.7%                      | 21.9%          |       | 39.9%                | 18.0%          |
| Chiropractors                                  | 50.6%                      | 10.3%          |       | 67.6%                | 6.7%           |
| Dentists                                       | 55.1%                      | 10.6%          |       | 67.0%                | 11.2%          |
| Emergency Room                                 | 37.7%                      | 30.4%          |       | 67.9%                | 11.6%          |
| Eye Doctor/Optomtrist                          | 62.5%                      | 6.6%           |       | 72.0%                | 7.6%           |
| Family Planning Services                       | 43.1%                      | 17.7%          |       | 36.5%                | 19.5%          |
| Home Health                                    | 62.6%                      | 10.2%          |       | 53.2%                | 11.2%          |
| Hospice  | 70.0%                      | 8.3%           |       | 61.5%                | 9.5%           |
| Telehealth                                     | 47.0%                      | 17.4%          |       | 46.4%                | 14.4%          |
| Inpatient Services                             | 66.3%                      | 7.7%           |       | 71.4%                | 8.5%           |
| Mental Health                                  | 31.6%                      | 32.0%          |       | 24.9%                | 37.5%          |
| Nursing Home/Senior Living                     | 25.0%                      | 36.7%          |       | 48.8%                | 15.8%          |
| Outpatient Services                            | 67.9%                      | 5.2%           |       | 70.6%                | 5.9%           |
| Pharmacy                                       | 77.0%                      | 4.4%           |       | 83.1%                | 3.2%           |
| Primary Care                                   | 68.8%                      | 8.4%           |       | 72.0%                | 7.7%           |
| Public Health                                  | 50.8%                      | 11.8%          |       | 55.5%                | 10.2%          |
| School Health                                  | 50.4%                      | 11.4%          |       | 57.5%                | 9.0%           |
| Visiting Specialists                           | 51.2%                      | 14.6%          |       | 61.4%                | 11.0%          |

**Chart #7 – Community Health Readiness**

| Henry & Benton Co MO- CHNA YR 2022  |                               | Bottom 2 boxes |                         |
|---|-------------------------------|----------------|-------------------------|
| Community Health Readiness is vital. How would you rate each of the following? (% Poor / Very Poor) | Henry & Benton CO<br>MO N=408 | Trend          | Wave 4 Norms<br>N=8,781 |
| Behavioral / Mental Health  | 30.1%                         | Yellow         | 37.4%                   |
| Emergency Preparedness  | 14.5%                         | Red            | 10.7%                   |
| Food and Nutrition Services/Education   | 17.2%                         | Yellow         | 17.9%                   |
| Health Screenings (as asthma, hearing, vision, scoliosis)   | 12.5%                         | Yellow         | 12.7%                   |
| Prenatal/Child Health Programs  | 13.4%                         | Yellow         | 13.7%                   |
| Substance Use/Prevention  | 39.3%                         | Red            | 37.0%                   |
| Suicide Prevention  | 33.8%                         | Yellow         | 38.9%                   |
| Violence Prevention   | 38.7%                         | Red            | 36.5%                   |
| Women's Wellness Programs   | 16.5%                         | Yellow         | 19.9%                   |

Norms: **KS Counties:** Atchinson, Brown, Dickinson, Jackson, Marion, Marshall, Montgomery, Cowley, Russell, Trego, Harper, Miami, Johnson, Nemaha, Ellis, Pawnee, Gove, Sheridan, Kiowa, Pratt, Ellsworth, Republic, Seward; **MO Counties:** Benton, Carroll, Caldwell, Clinton, Daviess, DeKalb, Lewis, Marion, Monroe, Pike, Ralls, Ray, Shelby Co; **IA Counties:** Cass, Cherokee, Fremont, Page, Appanoose, Carroll, Jasper, Clayton; **NE Counties:** Custer & Furnis.

**Chart #8a – Healthcare Delivery “Outside our Community”**

| Henry & Benton Co MO - CHNA YR 2022   |                               |        |                         |
|---|-------------------------------|--------|-------------------------|
| In the past 2 years, did you or someone you know receive HC outside of our community? | Henry & Benton CO<br>MO N=408 | Trend  | Wave 4 Norms<br>N=8,781 |
| Yes   | 51.0%                         | Yellow | 50.0%                   |
| No  | 49.0%                         | Yellow | 50.0%                   |

**Specialties:**

| Spec | Cts |
|------|-----|
| SURG | 10  |
| CARD | 9   |
| NEU  | 9   |
| ORTH | 7   |
| PEDS | 7   |
| EMER | 6   |
| DERM | 5   |

**Chart #8b – Healthcare Delivery “Outside our Community”**

| Henry & Benton Co MO - CHNA YR 2022   |                               |        |                         |
|---|-------------------------------|--------|-------------------------|
| Access to care is vital. Are there enough providers / staff available at the right times to care for you and our community? | Henry & Benton CO<br>MO N=408 | Trend  | Wave 4 Norms<br>N=8,781 |
| Yes   | 53.5%                         | Yellow | 54.9%                   |
| No  | 46.5%                         | Yellow | 45.1%                   |

Norms: **KS Counties:** Atchinson, Brown, Dickinson, Jackson, Marion, Marshall, Montgomery, Cowley, Russell, Trego, Harper, Miami, Johnson, Nemaha, Ellis, Pawnee, Gove, Sheridan, Kiowa, Pratt, Ellsworth, Republic, Seward; **MO Counties:** Benton, Carroll, Caldwell, Clinton, Daviess, DeKalb, Lewis, Marion, Monroe, Pike, Ralls, Ray, Shelby Co; **IA Counties:** Cass, Cherokee, Fremont, Page, Appanoose, Carroll, Jasper, Clayton; **NE Counties:** Custer & Furnis.

**Chart #9 – What HC topics need to be discussed in future Town Hall Meeting**

| <b>Henry &amp; Benton Co MO - CHNA YR 2022</b>                           |                               |              |                                     |
|--|-------------------------------|--------------|-------------------------------------|
| <b>What needs to be discussed further at our CHNA Town Hall meeting?</b> | <b>Benton Co KS<br/>N=408</b> | <b>Trend</b> | <b>Wave 4<br/>Norms<br/>N=8,781</b> |
| Abuse/Violence   | 5.5%                          | Red          | 4.0%                                |
| Alcohol  | 3.0%                          | Yellow       | 3.7%                                |
| Alternative Medicine   | 2.7%                          | White        | 2.9%                                |
| Breast Feeding Friendly Workplace  | 2.3%                          | White        | 1.9%                                |
| Cancer   | 6.7%                          | Red          | 4.8%                                |
| Care Coordination  | 2.5%                          | White        | 2.2%                                |
| Diabetes   | 1.9%                          | White        | 2.6%                                |
| Drugs/Substance Abuse  | 2.8%                          | White        | 5.0%                                |
| Family Planning  | 2.7%                          | White        | 2.5%                                |
| Heart Disease  | 6.1%                          | Red          | 3.5%                                |
| Lack of Providers/Qualified Staff  | 1.3%                          | White        | 3.5%                                |
| Lead Exposure  | 3.0%                          | Yellow       | 1.4%                                |
| Mental Illness   | 1.8%                          | White        | 6.1%                                |
| Neglect  | 4.4%                          | Red          | 3.0%                                |
| Nutrition  | 4.7%                          | Red          | 4.7%                                |
| Obesity  | 0.8%                          | White        | 3.6%                                |
| Occupational Medicine  | 2.5%                          | White        | 1.1%                                |
| Ozone (Air)  | 3.2%                          | Yellow       | 1.8%                                |
| Physical Exercise  | 3.7%                          | Yellow       | 4.4%                                |
| Poverty  | 1.0%                          | White        | 3.1%                                |
| Preventative Health / Wellness   | 1.0%                          | White        | 3.1%                                |
| Respiratory Disease  | 2.6%                          | White        | 1.6%                                |
| Sexually Transmitted Diseases  | 6.1%                          | Red          | 2.6%                                |
| Smoke-Free Workplace   | 3.4%                          | Yellow       | 2.0%                                |
| Suicide  | 2.1%                          | White        | 4.4%                                |
| Teen Pregnancy   | 5.2%                          | Red          | 3.7%                                |
| Telehealth   | 2.4%                          | White        | 2.4%                                |
| Tobacco Use  | 1.8%                          | White        | 2.2%                                |
| Transporation  | 2.1%                          | White        | 2.4%                                |
| Vaccinations   | 4.3%                          | Red          | 3.3%                                |
| Water Quality  | 2.4%                          | White        | 2.1%                                |
| Health Literacy  | 2.8%                          | White        | 2.7%                                |
| Other (please specify)   | 1.0%                          | White        | 1.4%                                |
| <b>TOTAL Votes</b>   | <b>1549</b>                   |              | <b>27,641</b>                       |

# IV. Inventory of Community Health Resources

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[VVV Consultants LLC]

| <b>Inventory of HC Services - Henry / Benton Counties MO</b> |  |                 |                     |              |
|--|--|-----------------|---------------------|--------------|
| <b>Cat</b>   | <b>Healthcare Services Offered in County: Yes / No</b> | <b>Hospital</b> | <b>Health Dept.</b> | <b>Other</b> |
| Clinic   | Primary Care   | Yes             |                     | Yes          |
| Hosp   | Alzheimer Center                                       |                 |                     | Yes          |
| Hosp   | Ambulatory Surgery Centers                             |                 |                     |              |
| Hosp   | Arthritis Treatment Center                             | Yes             |                     |              |
| Hosp   | Bariatric / Weight Control Services                    | Yes             |                     |              |
| Hosp   | Birthing / LDR / LDRP Room                             | Yes             |                     |              |
| Hosp   | Breast Cancer Services                                 | Yes             |                     |              |
| Hosp   | Burn Care  | Yes             |                     |              |
| Hosp   | Cardiac Rehabilitation                                 | Yes             |                     |              |
| Hosp   | Cardiac Surgery  |                 |                     |              |
| Hosp   | Cardiology Services                                    | Yes             |                     |              |
| Hosp   | Case Management  | Yes             |                     | Yes          |
| Hosp   | Chaplaincy / Pastoral Care                             | Yes             |                     |              |
| Hosp   | Chemotherapy   | Yes             |                     |              |
| Hosp   | Colonoscopy  | Yes             |                     |              |
| Hosp   | Crisis Prevention                                      |                 |                     | Yes          |
| Hosp   | CT Scanner   | Yes             |                     |              |
| Hosp   | Diagnostic Radioisotope Facility                       | Yes             |                     |              |
| Hosp   | Diagnostic / Invasive Catheterization                  |                 |                     |              |
| Hosp   | Electron Beam Computed Tomography (EBCT)               |                 |                     |              |
| Hosp   | Enrollment Assistance                                  | Yes             | Yes                 | Yes          |
| Hosp   | Extracorporeal Shock Wave Lithotripter (ESWL)          | Yes             |                     |              |
| Hosp   | Fertility Services                                     | Yes             |                     |              |
| Hosp   | Full Field Digital Mammography (FFDM)                  | Yes             |                     | Yes          |
| Hosp   | Genetic Testing / Counseling                           |                 |                     |              |
| Hosp   | Geriatric Services                                     | Yes             | Yes                 | Yes          |
| Hosp   | Heart Services   | Yes             |                     |              |
| Hosp   | Hemodialysis   |                 |                     | Yes          |
| Hosp   | HIV / AIDS Services                                    | Yes             |                     |              |
| Hosp   | Image-Guided Radiation Therapy (IGRT)                  |                 |                     |              |
| Hosp   | Inpatient Acute Care Services                          | Yes             |                     |              |
| Hosp   | Intensity-Modulated Radiation Therapy (IMRT) 161       |                 |                     |              |
| Hosp   | Intensive Care Unit                                    | Yes             |                     |              |
| Hosp   | Intermediate Care Unit                                 | Yes             |                     |              |
| Hosp   | Interventional Cardiac Catheterization                 |                 |                     |              |
| Hosp   | Isolation Room   | Yes             |                     |              |
| Hosp   | Kidney Services  | Yes             |                     | Yes          |
| Hosp   | Liver Services   | Yes             |                     |              |
| Hosp   | Lung Services  | Yes             |                     |              |
| Hosp   | Magnetic Resonance Imaging (MRI)                       | Yes             |                     |              |
| Hosp   | Mammograms   | Yes             |                     | Yes          |
| Hosp   | Mobile Health Services                                 | Yes             |                     | Yes          |
| Hosp   | Multi-slice Spiral Computed Tomography (<64 Slice CT)  | Yes             |                     |              |
| Hosp   | Multi-slice Spiral Computed Tomography (64+ Slice CT)  | Yes             |                     |              |
| Hosp   | Neonatal Services                                      | Yes             |                     |              |
| Hosp   | Neurological services                                  | Yes             |                     |              |
| Hosp   | Obstetrics Services                                    | Yes             |                     |              |
| Hosp   | Occupational Health Services                           | Yes             |                     |              |
| Hosp   | Oncology Services                                      | Yes             |                     |              |
| Hosp   | Orthopedic Services                                    | Yes             |                     |              |
| Hosp   | Outpatient Surgery                                     | Yes             |                     |              |
| Hosp   | Pain Management  | Yes             |                     |              |
| Hosp   | Palliative Care Program                                |                 |                     | Yes          |
| Hosp   | Pediatric Services                                     | Yes             |                     | Yes          |

| <b>Inventory of HC Services - Henry / Benton Counties MO</b> |  |                 |                     |              |
|--|--|-----------------|---------------------|--------------|
| <b>Cat</b>   | <b>Healthcare Services Offered in County: Yes / No</b> | <b>Hospital</b> | <b>Health Dept.</b> | <b>Other</b> |
| Hosp   | Physical Rehabilitation                                | Yes             |                     |              |
| Hosp   | Positron Emission Tomography (PET)                     |                 |                     |              |
| Hosp   | Positron Emission Tomography / CT (PET / CT)           | Yes             |                     |              |
| Hosp   | Psychiatric Services                                   | Yes             |                     | Yes          |
| Hosp   | Radiology, Diagnostic                                  | Yes             |                     |              |
| Hosp   | Radiology, Therapeutic                                 | Yes             |                     |              |
| Hosp   | Reproductive Health                                    | Yes             |                     |              |
| Hosp   | Robotic Surgery  | Yes             |                     |              |
| Hosp   | Shaped Beam Radiation System 161                       |                 |                     |              |
| Hosp   | Single Photon Emission Computerized Tomography         | Yes             |                     |              |
| Hosp   | Sleep Center   | Yes             |                     |              |
| Hosp   | Social Work  | Yes             | Yes                 | Yes          |
| Hosp   | Sports Medicine  | Yes             |                     |              |
| Hosp   | Stereotactic Radiosurgery                              | Yes             |                     |              |
| Hosp   | Swing Bed Services                                     |                 |                     | Yes          |
| Hosp   | Transplant Services                                    |                 |                     |              |
| Hosp   | Trauma Center -Level IV                                |                 |                     |              |
| Hosp   | Ultrasound   | Yes             |                     | Yes          |
| Hosp   | Women's Health Services                                | Yes             |                     | Yes          |
| Hosp   | Wound Care   | Yes             |                     |              |
| SR   | Adult Day Care Program                                 |                 |                     | Yes          |
| SR   | Assisted Living  |                 |                     | Yes          |
| SR   | Home Health  | Yes             |                     | Yes          |
| SR   | Hospice  | Yes             |                     | Yes          |
| SR   | Long-term Care   |                 |                     | Yes          |
| SR   | Nursing Home   |                 |                     | Yes          |
| SR   | Retirement Housing                                     |                 |                     | Yes          |
| SR   | Skilled Nursing Care                                   |                 |                     | Yes          |
| ER   | Emergency Services                                     | Yes             |                     |              |
| ER   | Urgent Care Center                                     |                 |                     |              |
| ER   | Ambulance Services                                     | Yes             |                     | Yes          |
| SERV   | Alcoholism-Drug Abuse Services                         |                 |                     | Yes          |
| SERV   | Blood Donor Center                                     | Yes             |                     |              |
| SERV   | Chiropractic Services                                  |                 |                     | Yes          |
| SERV   | Complementary Medicine Services                        | Yes             | Yes                 | Yes          |
| SERV   | Dental Services  |                 |                     | Yes          |
| SERV   | Fitness Center   | Yes             |                     | Yes          |
| SERV   | Health Education Classes                               | Yes             |                     | Yes          |
| SERV   | Health Fair  | Yes             |                     | Yes          |
| SERV   | Health Information Center                              | Yes             | Yes                 | Yes          |
| SERV   | Health Screenings                                      | Yes             | Yes                 | Yes          |
| SERV   | Meals on Wheels  |                 |                     | Yes          |
| SERV   | Nutrition Program                                      | Yes             | Yes                 | Yes          |
| SERV   | Patient Education Center                               | Yes             | Yes                 | Yes          |
| SERV   | Support Groups   | Yes             |                     | Yes          |
| SERV   | Teen Outreach Services                                 |                 |                     | Yes          |
| SERV   | Tobacco Treatment / Cessation Program                  | Yes             |                     | Yes          |
| SERV   | Transportation to Health Facilities                    | Yes             |                     | Yes          |
| SERV   | Wellness Program                                       | Yes             |                     | Yes          |

| <b>Providers Delivering Care - Henry and Benton Co</b> |                    |                     |                     |
|--|--------------------|---------------------|---------------------|
| <b>FTE Providers Working in PSA</b>                    | <b>Physicians</b>  |                     | <b>Allied Staff</b> |
|  | <b>FTE MD / DO</b> | <b>Visiting DR*</b> | <b>FTE NP / PA</b>  |
| <b>Primary Care:</b>                                   |                    |                     |                     |
| Family Practice  | 13.2               | 0.20                | 9.2                 |
| Internal Medicine / Geriatrics                         | 4.0                | 0.00                | 0.0                 |
| Obstetrics / Gynecology                                | 1.3                | 0.00                | 1.0                 |
| Pediatrics   | 1.0                | 0.00                | 1.0                 |
| <b>Medicine Specialists:</b>                           |                    |                     |                     |
| Allergy / Immunology                                   | 0.2                | 0.00                | 0.2                 |
| Cardiology   | 0.0                | 1.10                | 0.0                 |
| Dermatology  | 0.0                | 0.40                | 0.0                 |
| Endocrinology  | 0.0                | 0.00                | 0.0                 |
| Gastroenterology                                       | 0.0                | 0.00                | 0.0                 |
| Oncology / Radiology                                   | 0.0                | 0.85                | 1.0                 |
| Infectious Disease                                     | 0.0                | 0.00                | 0.0                 |
| Nephrology   | 0.0                | 0.20                | 0.0                 |
| Neurology  | 1.0                | 0.00                | 1.0                 |
| Psychiatry   | 1.0                | 0.00                | 0.8                 |
| Pulmonary  | 1.0                | 0.00                | 0.0                 |
| Rheumatology   | 1.0                | 0.00                | 0.0                 |
| <b>Surgery Specialists:</b>                            |                    |                     |                     |
| General Surgery / Colon / Oral                         | 3.0                | 0.00                | 0.0                 |
| Neurosurgery   | 0.0                | 0.30                | 0.0                 |
| Ophthalmology  | 1.0                | 0.00                | 0.0                 |
| Orthopedics  | 1.0                | 0.00                | 1.0                 |
| Otolaryngology   | 0.8                | 0.00                | 0.8                 |
| Plastic / Reconstructive Surgery                       | 0.0                | 0.00                | 0.0                 |
| Thoracic / Cardiovascular / Vascular Surgery           | 0.0                | 0.10                | 0.0                 |
| Urology  | 1.0                | 0.00                | 0.0                 |
| <b>Hospital Based:</b>                                 |                    |                     |                     |
| Anesthesia / Pain Management                           | 0.3                | 0.25                | 0.6                 |
| Bariatric & Metabolic                                  |                    | 0.10                |                     |
| Emergency Medicine                                     | 0.0                | 10.00               |                     |
| Radiology  | 3.0                | 0.20                | 0.0                 |
| Pathology  | 0.0                | 0.60                | 0.0                 |
| Hospitalist  | 0.0                | 8.00                | 0.0                 |
| Maternal Fetal Medicine                                | 0.0                | 0.30                | 0.0                 |
| Physical Medicine / Rehabilitation                     | 0.0                | 0.00                | 0.0                 |
| Occupational Medicine                                  | 0.0                | 0.00                | 0.0                 |
| Podiatry   | 1.0                | 0.00                | 0.0                 |
| <b>Other:</b>  |                    |                     |                     |
| Chiropractic   | 0.0                | 0.00                | 0.0                 |
| Optometry  | 1.0                | 0.00                | 0.0                 |
| Dental   | 5.0                | 0.00                | 0.0                 |
| <b>TOTALS</b>  | <b>40.8</b>        | <b>22.60</b>        | <b>16.6</b>         |

\*FTE Specialists serving the community whose office is outside the PSA.

## Visiting Specialists To GVMH - Year 2023

| Specialty               | Physician Name       | GroupName                                       | Office Location | Schedule   | Days per Month | FTE |
|-------------------------|----------------------|---|-----------------|--|----------------|-----|
| Bariatric & Metabolic   | Scott, Steven        | Bariatric & Metabolic Specialist of Kansas City | Kansas City, MO | 2nd Wednesday telemed only                       | 1              |     |
| Bariatric & Metabolic   | Tann, John           | Bariatric & Metabolic Specialist of Kansas City | Kansas City, MO | 4th Thursday telemed only                        | 1              |     |
| Cardiology              | Blackburn, Timothy   | Midwest Heart and Vascular                      | Kansas City, MO | M-F  | 20             |     |
| Cardiology              | Rios, David          | Midwest Heart and Vascular                      | Kansas City, MO | Covers Blackburn's vacation                      | 2              |     |
| Maternal Fetal Medicine | Parrott, Jessica     | Maternal Fetal Medicine Group                   | Kansas City, MO | Every other Tuesday, Every Thursday telemed only | 6              |     |
| Nephrology              | Al-Absi, Ahmed       | Kidney Consultants                              | Kansas City, MO | 3rd & 4th Weds                                   | 2              |     |
| Nephrology              | Mohialdeen, Mohammed | Kidney Consultants                              | Kansas City, MO | 1st & 3rd Friday                                 | 2              |     |
| Neurosurgery            | Textor, Laura NP     | Midwest Neurosurgery Associates                 | Kansas City, MO | 2nd & 3rd Friday                                 | 2              |     |
| Neurosurgery            | Chilton, Jonathan    | Midwest Neurosurgery Associates                 | Kansas City, MO | Every Tuesday telemed only                       | 4              |     |
| Oncology & Hematology   | Nair, Kiron          | MidAmerica Cancer Care                          | Kansas City, MO | Mon/Wed/Thu, every 4th Friday                    | 13             |     |
| Oncology & Hematology   | Singh, Jaswinder     | MidAmerica Cancer Care                          | Kansas City, MO | Every Tuesday                                    | 4              |     |
| Vascular Surgery        | Cameron, Jeffrey     | KC Vascular & General Surgery                   | Kansas City, MO | Every 3rd Tuesday                                | 1              |     |
| Vascular Surgery        | Cates, Joe           | KC Vascular & General Surgery                   | Kansas City, MO | Every 3rd Monday                                 | 1              |     |

# Henry and Benton Counties, MO 2022 Healthcare Resources Directory

## Emergency Numbers

|                        |            |
|------------------------|------------|
| <b>Police/Sheriff</b>  | <b>911</b> |
| <b>Fire</b>            | <b>911</b> |
| <b>Ambulance</b>       | <b>911</b> |
| <b>Suicide Hotline</b> | <b>988</b> |

## Non-Emergency Numbers

|                |                       |                         |
|----------------|-----------------------|-------------------------|
|                | <b><i>Sheriff</i></b> | <b><i>Ambulance</i></b> |
| <b>Clinton</b> | (660) 885-7021        | (660) 890-7180          |
| <b>Warsaw</b>  | (660) 438-6135        |                         |

## Other Rural Non-Emergency Numbers

|                       |                |
|-----------------------|----------------|
| <b>Clinton Police</b> | (660) 885-6121 |
| <b>Warsaw Police</b>  | (660) 438-5262 |
| <b>Clinton Fire</b>   | (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  
660-885-5511

#### **Dermatology**

Viseslav Tonkovic-Capin, MD  
Dermatology  
Golden Valley Medical – Clinton  
1600 N. Second  
Clinton, MO 64735  
660-885-5511

Marija Tonkovic-Capin, MD  
Dermatology  
Golden Valley Medical – Clinton  
1600 N. Second  
Clinton, MO 64735  
660-885-5511

#### **Diabetic Education**

Diabetic Education  
1600 North Second Street  
Clinton MO 64735  
660-885-5511

#### **Ear, Nose and Throat / Otolaryngology**

Richard H. Woodland, DO  
Ear, Nose and Throat/Otolaryngology  
Golden Valley Medical – Clinton  
1602 N. Second  
Clinton, MO 64735  
660-885-8171

#### **Endoscopy**

Golden Valley Memorial Healthcare  
1600 N 2<sup>nd</sup> St.  
Clinton Mo 64735  
660-885-5511

## **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

Savannah Ericksen  
Family Practice  
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

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. 2<sup>nd</sup> St  
Clinton, MO 64735  
660-885-7776

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

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

Jamie Ketterman, NP-C, CDE  
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

Emily Truitt  
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

Gregory Sainnovall  
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

### **Internal Medicine**

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**

Ali Ebrahim  
Neurology  
Golden Valley Medical – Clinton  
1602 N. Second  
Clinton, MO 64735  
660-885-8171

Rebecca Fredrich, NP  
Neurology  
Golden Valley Medical – Clinton

1602 N. Second  
Clinton, MO 64735  
660-885-8171

### **Obstetrics and Gynecology**

Doug MacFarlane  
OB/GYN  
Golden Valley Medical – Clinton  
1602 N. Second  
Clinton, MO 64735  
660-890-8171

Adam Newman  
OB/GYN  
Golden Valley Medical – Clinton  
1602 N. Second  
Clinton, MO 64735  
660-890-8171

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

Dan Weber OD  
Ophthalmology  
Golden Valley Medical – Clinton  
1602 N. Second  
Clinton, MO 64735  
660-885-8171

### **Orthopedic Surgery**

Kathy Ervie, Physician Assistant  
Orthopedic Surgery  
Golden Valley Medical – Clinton

603 E. Gaines Dr  
Clinton, MO 64735  
660-890-8445

James L. Womack, MD  
Orthopedic Surgery  
Golden Valley Medical – Clinton  
603 E. Gaines Dr  
Clinton, MO 64735  
660-890-8445

### **Pain Management**

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

Karl Kaake, MD  
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

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  
603 E. Gaines Dr  
Clinton, MO 64735  
660-890-8445

### **Psychiatry**

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

Michelle Tremain PMHNP-BC  
Golden Valley Medical – Clinton  
1602 North Second St  
Clinton, MO 64735  
660-885-8171

Angela Heck, MSW, LCSW  
Golden Valley Medical – Clinton  
1602 North Second St  
Clinton, MO 64735  
660-885-8171

Shanda Watson, MS, MSW, LCSW  
Golden Valley Medical – Clinton  
1602 North Second St  
Clinton, MO 64735  
660-885-8171

### **Pulmonology**

Essam Elkady, MD, FCCP  
Golden Valley Memorial Healthcare  
1600 N. Second  
Clinton, MO 64735  
660-890-7194

### **Rheumatology**

Zahara Rehman, MD  
Rheumatology  
1602 N. Second  
Clinton, MO 64735  
660-890-8512

### **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 64735  
660-890-7245

## ***Warsaw***

### **Cardiology**

Cardiology Clinic  
Golden Valley Medical – Warsaw  
1771 Commercial  
Warsaw, MO 65355  
660-438-5193

### **Diabetic Education**

Diabetic Education  
Golden Valley Medical – Warsaw  
1771 Commercial  
Warsaw, MO  
660-438-5193

### **Family Medicine with Obstetrics**

Cassie White, DO  
Family Medicine with Obstetrics  
Golden Valley Medical – Warsaw  
1771 Commercial  
Warsaw, MO  
660-438-5193

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

Collin Campbell FNP-C  
Family Practice  
Golden Valley Medical – Warsaw  
1771 Commercial  
Warsaw, MO 65355  
660-438-5193

Myles Edwards, PA  
Physician Assistant  
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

**Urology**

Joseph Myers, M.D.  
Urology  
Golden Valley Medical – Warsaw  
1771 Commercial  
Warsaw, MO 65355  
660-438-5193

**Wound Care**

Wound / Skin Care Clinic  
Golden Valley Medical – Warsaw  
1771 Commercial  
Warsaw, MO 65355  
660-438-5193

Michael Carozza, MD  
OB/GYN  
Bothwell Health Center- Truman Lake  
1765 Commercial St  
Warsaw Mo 65355  
660-438-6800

William Decker, MD  
Radiation Oncology  
Bothwell Health Center- Truman Lake  
1765 Commercial St  
Warsaw Mo 65355  
660-438-6800

Sarah Hasek, MD  
Bothwell Health Center- Truman Lake  
1765 Commercial St  
Warsaw Mo 65355  
660-438-6800

David Kuhlmann, MD  
Sleep Medicine  
Bothwell Health Center- Truman Lake  
1765 Commercial St  
Warsaw Mo 65355  
660-438-6800

Loraine Nolla, MD  
OB/GYN  
Bothwell Health Center- Truman Lake  
1765 Commercial St

Warsaw Mo 65355  
660-438-6800

David Oberkrom  
OB/GYN  
Bothwell Health Center- Truman Lake  
1765 Commercial St  
Warsaw Mo 65355  
660-438-6800

Matt Triplett, MD  
Hem/Onc  
Bothwell Health Center- Truman Lake  
1765 Commercial St  
Warsaw Mo 65355  
660-438-6800

Chelsea Castell, FNP  
Bothwell Health Center- Truman Lake  
1765 Commercial St  
Warsaw Mo 65355  
660-438-6800

Lindsey Graham PA-C  
Bothwell Health Center- Truman Lake  
1765 Commercial St  
Warsaw Mo 65355  
660-438-6800

Megan Ray, WHNP  
Bothwell Health Center- Truman Lake  
1765 Commercial St  
Warsaw Mo 65355  
660-438-6800

Jamie Reed, PA-C  
Bothwell Health Center- Truman Lake  
1765 Commercial St  
Warsaw Mo 65355  
660-438-6800

Karen Walters, FNPBC  
Bothwell Health Center- Truman Lake  
1765 Commercial St  
Warsaw Mo 65355  
660-438-6800

Katy Trail Community Health-Warsaw  
1751 N Dam Access Road  
Warsaw Mo 65355  
877-733-5824

***Windsor***

**Diabetic Education**

Diabetic Education

Golden Valley Medical – Windsor  
100 S. Tebo  
Windsor, MO 65360  
660-647-2147

**Family Practice with OB**

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

**Family Practice**

Alicia Albers, MD  
Family Practice  
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

Dr. Dorna Armbrister  
Family Practice  
Compass Health  
1800 Community Drive,  
Clinton, MO 64735  
844-853-8937

Dr. Jason Meler  
Family Practice  
Compass Health  
1800 Community Drive,  
Clinton, MO 64735  
844-853-8937

Dr. Kara Meler  
Family Practice  
Compass Health  
1800 Community Drive,  
Clinton, MO 64735  
844-853-8937

**Urology**

Joseph Myers, M.D.  
Urology  
Golden Valley Medical – Windsor

100 S. Tebo  
Windsor, MO 65360  
660-647-2147

**Wound Care**

Wound / Skin Care Clinic  
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](http://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](http://www.childhelp.org)

Child Abuse National Hotline  
1-800-4-A-CHILD (422-4453)  
[www.childabuse.com](http://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/](http://www.1800runaway.org/)

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

Parents Anonymous Help Line  
800-345-5044  
<http://www.parentsanonymous.org/palIndex10.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**

Gillis Family Dentistry  
1108 E Ohio Street  
Clinton, MO 64735  
Krystal Gillis  
660-885-6933

Celebrate Dental & Braces  
906 E Ohio Street  
Clinton, MO 64735  
660-885-6114

Compass Health Network  
1800 Community Drive  
Clinton, MO 64735  
Dr. Taylor Rogers  
Dr. Samantha Mahoney  
844-853-8937

Compass Health Network  
2000 N Gaines Drive  
Clinton, MO 64735  
Dr. Casey Zook  
Dr. Richard Campos  
Dr. Abena Asante Mante

844-853-8937

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

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](http://www.aapd.com)

American Council for the Blind  
1-800-424-8666  
[www.acb.org](http://www.acb.org)

Americans with Disabilities Act Information  
Hotline  
1-800-514-0301  
1-800-514-0383 (TTY)  
[www.ada.gov](http://www.ada.gov)

National Center for Learning Disabilities  
1-888-575-7373  
[www.nclld.org](http://www.nclld.org)

National Library Services for Blind &  
Physically Handicapped  
[www.loc.gov/nls/](http://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](http://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/](http://www.cfsan.fda.gov/)  
[www.healthfinder.gov/](http://www.healthfinder.gov/)

US Consumer Product Safety Commission  
800-638-2772  
800-638-8270 (TDD)  
[www.cpsc.gov](http://www.cpsc.gov)

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

U.S. Food and Drug Administration  
1-888-INFO-FDA  
1-888-463-6332  
[www.fsis.usda.gov/](http://www.fsis.usda.gov/)

## **Health Departments**

Henry County Health Center  
1800 Community Drive, Suite A  
Clinton, MO 64735  
660-885-8193  
[www.henrycohealth.org](http://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](http://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**

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

Compass Health Network- Warsaw  
17571 N. Dam Access Rd.  
Warsaw, MO 65355  
Seth Casey, LMSW  
Therapy  
844-853-8937

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 Ill  
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](http://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](http://www.madd.org)

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

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

### **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](http://www.ahaf.org)

American Heart Association  
800-242-8721  
[www.americanheart.org](http://www.americanheart.org)

American Lung Association  
800-586-4872

American Stroke Association  
1-888-4-STROKE  
[www.americanheart.org](http://www.americanheart.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](http://www.eldercarelink.com)  
Eye Care Council  
800-960-EYES  
[www.seetolearn.com](http://www.seetolearn.com)

National Health Information Center  
800-336-4797  
[www.health.gov/nhic](http://www.health.gov/nhic)

National Cancer Information Center  
800-227-2345  
866-228-4327 (TTY)  
[www.cancer.org](http://www.cancer.org)

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

### **Nutrition**

American Dietetic Association  
1-800-877-1600  
[www.eatright.org](http://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](mailto:info@healthykidsmo.org)

Henry County Health Center  
WIC and Nutrition Services  
Clinton Location: 660-885-8193  
573-751-6204  
800-392-8209  
Fax: 573-526-1470  
[info@health.mo.gov](mailto: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 Commercial 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](http://www.aarp.org)

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

American Association of Retired Persons  
888-687-2277  
[www.aarp.org](http://www.aarp.org)

Eldercare Locator  
1-800-677-1116  
[www.eldercare.gov/eldercare/public/home.  
asp](http://www.eldercare.gov/eldercare/public/home.asp)

Federal Information Center  
1-800-333-4636  
[www.FirstGov.gov](http://www.FirstGov.gov)

U.S. Department of Veterans Affairs  
1-800-513-7731  
[www.kcva.org](http://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](http://www.vba.va.gov)

Welfare Fraud Hotline  
800-432-3913

# V. Detail Exhibits

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[VVV Consultants LLC]

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## a.) Patient Origin Source Files

[VVV Consultants LLC]



| <b>HIDI Market IP Discharges by Hospitals Yr18-21</b> |  |               | <b>Henry County MO</b> |             |             |             | <b>Benton County MO</b> |             |             |             |
|---|--|---------------|------------------------|-------------|-------------|-------------|-------------------------|-------------|-------------|-------------|
| #   | Hospitals  | 4Yr Vsts      | Yr18                   | Yr19        | Yr20        | Yr21        | Yr18                    | Yr19        | Yr20        | Yr21        |
| <b>Overall Totals - IP Discharges</b>                 |  | <b>26,238</b> | <b>2953</b>            | <b>3120</b> | <b>2840</b> | <b>2744</b> | <b>3656</b>             | <b>3891</b> | <b>3524</b> | <b>3510</b> |
| 1   | Golden Valley Memorial Healthcare - Clinton, MO          | 7,354         | 543                    | 502         | 505         | 506         | 1,282                   | 1,432       | 1,273       | 1,311       |
| 2   | Bothwell Regional Health Center - Sedalia, MO            | 3,592         | 902                    | 854         | 775         | 737         | 98                      | 90          | 69          | 67          |
| 3   | Research Medical Center - Kansas City, MO                | 3,154         | 204                    | 249         | 228         | 192         | 578                     | 630         | 598         | 475         |
| 4   | Saint Luke's Hospital of Kansas City - Kansas City, MO   | 1,537         | 132                    | 153         | 121         | 92          | 337                     | 302         | 220         | 180         |
| 5   | University of Missouri Health Care - Columbia, MO        | 1,357         | 260                    | 341         | 266         | 279         | 48                      | 55          | 51          | 57          |
| 6   | Saint Luke's East Hospital - Lees Summit, MO             | 1,056         | 85                     | 109         | 57          | 50          | 218                     | 238         | 177         | 122         |
| 7   | The University of Kansas Health System - Kansas City, KS | 810           | 94                     | 84          | 90          | 76          | 106                     | 116         | 124         | 120         |
| 8   | Western Missouri Medical Center - Warrensburg, MO        | 633           | 41                     | 33          | 25          | 25          | 121                     | 142         | 109         | 137         |
| 9   | Children's Mercy Kansas City - Kansas City, MO           | 523           | 68                     | 46          | 25          | 37          | 98                      | 82          | 76          | 91          |
| 10  | Boone Hospital Center - Columbia, MO                     | 508           | 96                     | 111         | 123         | 106         | 18                      | 22          | 15          | 17          |
| 11  | Lake Regional Health System - Osage Beach, MO            | 451           | 106                    | 116         | 103         | 95          | 2                       | 16          | 5           | 8           |
| 12  | Centerpoint Medical Center - Independence, MO            | 431           | 25                     | 26          | 40          | 54          | 41                      | 39          | 73          | 133         |
| 13  | Royal Oaks Hospital - Windsor, MO                        | 417           | 33                     | 49          | 30          | 38          | 67                      | 90          | 65          | 45          |

| <b>HIDI Market OP Visits by Hospitals Yr18-21</b> |  |                  | <b>Henry County MO</b> |                |                |                | <b>Benton County MO</b> |                |                |                |
|---|--|------------------|------------------------|----------------|----------------|----------------|-------------------------|----------------|----------------|----------------|
| #   | Hospitals  | 4Yr Vsts         | Yr18                   | Yr19           | Yr20           | Yr21           | Yr18                    | Yr19           | Yr20           | Yr21           |
| <b>Overall Totals - OP Visits</b>                 |  | <b>1,175,278</b> | <b>170,908</b>         | <b>183,970</b> | <b>192,342</b> | <b>208,253</b> | <b>104,245</b>          | <b>102,822</b> | <b>101,956</b> | <b>110,782</b> |
| 1   | Golden Valley Memorial Healthcare - Clinton, MO          | 964,394          | 152,422                | 165,441        | 174,990        | 188,817        | 71,726                  | 70,177         | 67,669         | 73,152         |
| 2   | Bothwell Regional Health Center - Sedalia, MO            | 87,826           | 1,915                  | 1,652          | 1,837          | 1,895          | 19,095                  | 18,268         | 20,565         | 22,599         |
| 3   | University of Missouri Health Care - Columbia, MO        | 25,363           | 1,512                  | 1,422          | 1,300          | 1,395          | 4,846                   | 5,098          | 4,947          | 4,843          |
| 4   | The University of Kansas Health System - Kansas City, KS | 14,107           | 1,826                  | 1,939          | 2,126          | 2,278          | 1,299                   | 1,528          | 1,595          | 1,516          |
| 5   | Western Missouri Medical Center - Warrensburg, MO        | 12,106           | 2,325                  | 2,365          | 2,389          | 2,706          | 634                     | 544            | 556            | 587            |
| 6   | Children's Mercy Kansas City - Kansas City, MO           | 8,575            | 1,534                  | 1,620          | 1,284          | 1,566          | 714                     | 712            | 465            | 680            |
| 7   | Cass Regional Medical Center - Harrisonville, MO         | 6,469            | 1,648                  | 1,501          | 1,405          | 1,593          | 81                      | 69             | 85             | 87             |
| 8   | Saint Luke's Hospital of Kansas City - Kansas City, MO   | 6,238            | 1,277                  | 1,305          | 993            | 1,023          | 442                     | 460            | 353            | 385            |
| 9   | Lake Regional Health System - Osage Beach, MO            | 5,055            | 23                     | 67             | 41             | 48             | 1,151                   | 1,193          | 1,179          | 1,353          |
| 10  | Saint Luke's East Hospital - Lees Summit, MO             | 4,328            | 779                    | 864            | 688            | 725            | 306                     | 389            | 284            | 293            |
| 11  | Research Medical Center - Kansas City, MO                | 4,174            | 780                    | 873            | 569            | 738            | 256                     | 286            | 319            | 353            |
| 12  | Bates County Memorial Hospital - Butler, MO              | 3,504            | 748                    | 812            | 795            | 871            | 44                      | 47             | 78             | 109            |
| 13  | Children's Mercy Hospital Kansas - Overland Park, KS     | 2,698            | 642                    | 537            | 389            | 439            | 189                     | 191            | 131            | 180            |
| 14  | Boone Hospital Center - Columbia, MO                     | 2,651            | 76                     | 70             | 64             | 161            | 457                     | 472            | 492            | 859            |
| 15  | Citizens Memorial Hospital - Bolivar, MO                 | 2,337            | 171                    | 200            | 259            | 301            | 249                     | 338            | 335            | 484            |



**GVMH Market/Case Share, Five Year - Inpatient\***

| Patient Zip Code        | 2017  |               | 2018  |               | 2019  |               | 2020  |               |
|-------------------------|-------|---------------|-------|---------------|-------|---------------|-------|---------------|
|                         | Cases | Share Percent |
| 64735-Clinton, MO       | 811   | 38.3%         | 901   | 39.8%         | 853   | 38.9%         | 863   | 39.0%         |
| 65355-Warsaw, MO        | 368   | 21.1%         | 383   | 21.6%         | 342   | 18.8%         | 397   | 22.5%         |
| 65360-Windsor, MO       | 174   | 25.9%         | 183   | 28.5%         | 171   | 27.1%         | 166   | 29.9%         |
| 64776-Osceola, MO       | 103   | 19.0%         | 115   | 21.3%         | 102   | 19.3%         | 102   | 21.2%         |
| 64740-Deepwater, MO     | 106   | 36.7%         | 108   | 40.0%         | 89    | 33.3%         | 86    | 30.0%         |
| 64763-Lowry City, MO    | 92    | 33.5%         | 79    | 32.6%         | 72    | 27.4%         | 74    | 30.1%         |
| 65338-Lincoln, MO       | 65    | 14.7%         | 92    | 21.5%         | 78    | 17.1%         | 67    | 16.8%         |
| 64788-Urich, MO         | 53    | 29.6%         | 49    | 24.6%         | 51    | 26.8%         | 43    | 28.5%         |
| 65326-Edwards, MO       | 40    | 15.3%         | 31    | 11.3%         | 38    | 12.9%         | 43    | 15.2%         |
| 64730-Butler, MO        | 32    | 2.5%          | 60    | 4.9%          | 32    | 2.6%          | 41    | 4.1%          |
| 65323-Calhoun, MO       | 44    | 32.4%         | 64    | 36.6%         | 52    | 35.9%         | 29    | 23.2%         |
| 64726-Blairstown, MO    | 10    | 23.3%         | 15    | 28.8%         | 7     | 14.0%         | 27    | 50.9%         |
| 64701-Harrisonville, MO | 16    | 0.7%          | 17    | 0.7%          | 10    | 0.4%          | 25    | 1.2%          |
| 64724-Appleton City, MO | 32    | 9.9%          | 37    | 14.5%         | 16    | 5.2%          | 23    | 8.6%          |
| 64761-Leeton, MO        | 23    | 11.3%         | 29    | 12.6%         | 22    | 10.9%         | 22    | 10.9%         |
| 65301-Sedalia, MO       | 13    | 0.3%          | 24    | 0.5%          | 15    | 0.3%          | 20    | 0.4%          |
| 64770-Montrose, MO      | 21    | 18.3%         | 40    | 27.6%         | 15    | 16.1%         | 19    | 16.8%         |
| 64720-Adrian, MO        | 29    | 5.0%          | 18    | 3.4%          | 20    | 3.7%          | 17    | 3.4%          |
| 64733-Chilhowee, MO     | 17    | 13.9%         | 17    | 13.5%         | 16    | 15.4%         | 17    | 11.9%         |
| 64040-Holden, MO        | 13    | 1.3%          | 13    | 1.3%          | 5     | 0.5%          | 15    | 1.7%          |
| 64747-Garden City, MO   | 20    | 3.9%          | 19    | 3.4%          | 15    | 3.0%          | 14    | 3.1%          |
| 65325-Cole Camp, MO     | 16    | 4.4%          | 28    | 6.8%          | 14    | 3.5%          | 14    | 3.8%          |
| 64093-Warrensburg, MO   | 19    | 0.6%          | 17    | 0.6%          | 8     | 0.3%          | 13    | 0.5%          |
| 64739-Creighton, MO     | 12    | 11.3%         | 13    | 12.4%         | 21    | 15.0%         | 12    | 9.8%          |
| 64738-Collins, MO       | 20    | 13.2%         | 15    | 8.9%          | 28    | 13.9%         | 10    | 6.7%          |

| GVMH Market/Case Share, Five Year - Outpatient* |        |               |         |               |        |               |         |               |
|---|--------|---------------|---------|---------------|--------|---------------|---------|---------------|
| Patient Zip Code                                | 2017   |               | 2018    |               | 2019   |               | 2020    |               |
|   | Cases  | Share Percent | Cases   | Share Percent | Cases  | Share Percent | Cases   | Share Percent |
| 64735-Clinton, MO                               | 97,260 | 92.5%         | 101,435 | 92.7%         | 96,880 | 92.4%         | 106,754 | 93.3%         |
| 65355-Warsaw, MO                                | 47,617 | 70.9%         | 52,110  | 73.5%         | 51,142 | 74.8%         | 51,188  | 74.7%         |
| 65360-Windsor, MO                               | 24,742 | 84.0%         | 26,638  | 85.9%         | 25,837 | 85.5%         | 26,829  | 87.0%         |
| 64776-Osceola, MO                               | 13,272 | 77.4%         | 15,617  | 80.5%         | 14,394 | 77.7%         | 15,932  | 79.5%         |
| 64740-Deepwater, MO                             | 11,499 | 89.3%         | 11,697  | 89.6%         | 10,969 | 88.9%         | 12,069  | 90.8%         |
| 64763-Lowry City, MO                            | 7,465  | 83.9%         | 8,373   | 86.6%         | 8,358  | 85.4%         | 9,152   | 87.3%         |
| 65338-Lincoln, MO                               | 9,005  | 63.6%         | 9,680   | 66.2%         | 8,988  | 65.9%         | 8,776   | 64.5%         |
| 65323-Calhoun, MO                               | 5,328  | 89.9%         | 5,962   | 90.1%         | 5,946  | 91.0%         | 6,148   | 90.2%         |
| 65326-Edwards, MO                               | 5,814  | 62.0%         | 6,209   | 63.5%         | 5,916  | 63.6%         | 5,988   | 64.2%         |
| 64788-Urich, MO                                 | 4,718  | 76.4%         | 5,043   | 76.1%         | 4,952  | 77.4%         | 5,160   | 80.2%         |
| 64093-Warrensburg, MO                           | 3,554  | 7.9%          | 3,641   | 7.0%          | 3,905  | 7.3%          | 4,218   | 7.4%          |
| 64770-Montrose, MO                              | 3,485  | 73.5%         | 3,756   | 74.3%         | 3,232  | 70.8%         | 3,860   | 75.4%         |
| 64761-Leeton, MO                                | 3,389  | 62.6%         | 3,341   | 60.8%         | 3,604  | 60.7%         | 3,728   | 62.7%         |
| 65301-Sedalia, MO                               | 2,096  | 2.6%          | 2,778   | 3.4%          | 3,017  | 3.9%          | 3,371   | 4.1%          |
| 64724-Appleton City, MO                         | 3,193  | 41.8%         | 3,613   | 49.6%         | 3,217  | 44.3%         | 3,311   | 46.5%         |
| 64733-Chilhowee, MO                             | 2,800  | 68.2%         | 2,958   | 68.1%         | 2,660  | 66.0%         | 3,018   | 67.9%         |
| 64730-Butler, MO                                | 2,062  | 8.3%          | 2,506   | 9.9%          | 1,974  | 7.3%          | 2,241   | 8.4%          |
| 65325-Cole Camp, MO                             | 2,568  | 29.5%         | 3,033   | 33.0%         | 2,513  | 30.2%         | 2,041   | 23.2%         |
| 64738-Collins, MO                               | 1,739  | 53.6%         | 2,021   | 57.3%         | 2,064  | 55.4%         | 1,977   | 55.5%         |
| 65332-Green Ridge, MO                           | 1,586  | 34.8%         | 1,533   | 33.6%         | 1,595  | 37.0%         | 1,839   | 41.3%         |
| 64739-Creighton, MO                             | 1,437  | 49.4%         | 1,496   | 50.9%         | 1,463  | 50.3%         | 1,721   | 57.7%         |
| 64726-Blairstown, MO                            | 1,475  | 81.9%         | 1,689   | 82.5%         | 1,406  | 83.4%         | 1,718   | 82.1%         |
| 64747-Garden City, MO                           | 1,493  | 18.6%         | 1,504   | 19.1%         | 1,404  | 19.1%         | 1,552   | 21.8%         |
| 64040-Holden, MO                                | 908    | 7.9%          | 1,061   | 9.1%          | 1,011  | 8.6%          | 1,383   | 12.1%         |
| 64720-Adrian, MO                                | 1,460  | 14.2%         | 1,317   | 12.9%         | 1,226  | 12.1%         | 1,139   | 11.4%         |
| 64701-Harrisonville, MO                         | 905    | 3.2%          | 879     | 3.2%          | 751    | 2.8%          | 1,137   | 4.5%          |
| 65336-Knob Noster, MO                           | 749    | 6.5%          | 789     | 6.4%          | 817    | 6.6%          | 1,099   | 8.4%          |
| 65774-Weaubleau, MO                             | 610    | 38.3%         | 698     | 38.5%         | 703    | 31.1%         | 772     | 34.0%         |
| 64744-El Dorado Springs, MO                     | 447    | 2.3%          | 728     | 4.0%          | 737    | 4.1%          | 721     | 4.1%          |
| 65335-Ionia, MO                                 | 611    | 53.8%         | 668     | 54.3%         | 766    | 59.1%         | 650     | 58.0%         |
| 65779-Wheatland, MO                             | 732    | 18.6%         | 819     | 21.1%         | 800    | 18.9%         | 594     | 14.7%         |
| 65634-Cross Timbers, MO                         | 431    | 33.1%         | 539     | 37.5%         | 491    | 33.8%         | 556     | 35.7%         |
| 65324-Climax Springs, MO                        | 600    | 19.0%         | 593     | 17.3%         | 565    | 16.9%         | 445     | 14.1%         |
| 65674-Humansville, MO                           | 265    | 6.0%          | 360     | 7.7%          | 523    | 10.3%         | 436     | 8.9%          |
| 65735-Quincy, MO                                | 395    | 68.0%         | 383     | 62.4%         | 359    | 59.2%         | 406     | 63.8%         |
| 64780-Rockville, MO                             | 516    | 30.4%         | 409     | 26.9%         | 396    | 26.8%         | 402     | 26.2%         |
| 65337-La Monte, MO                              | 330    | 7.9%          | 335     | 7.7%          | 294    | 7.9%          | 328     | 7.7%          |
| 64019-Centerview, MO                            | 335    | 7.4%          | 311     | 6.7%          | 265    | 5.6%          | 308     | 6.3%          |
| 64012-Belton, MO                                | 280    | 0.6%          | 231     | 0.5%          | 283    | 0.6%          | 287     | 0.6%          |
| 64725-Archie, MO                                | 225    | 5.4%          | 360     | 8.5%          | 319    | 7.6%          | 287     | 7.0%          |
| 65668-Hermitage, MO                             | 228    | 7.6%          | 332     | 11.7%         | 379    | 11.7%         | 246     | 8.0%          |
| 65305-Whiteman Air Force Base, MO               | 44     | 1.0%          | 90      | 2.0%          | 80     | 1.7%          | 210     | 4.6%          |
| 65732-Preston, MO                               | 132    | 9.9%          | 154     | 12.2%         | 185    | 13.9%         | 200     | 14.0%         |
| 64783-Schell City, MO                           | 242    | 13.7%         | 188     | 12.5%         | 139    | 8.9%          | 196     | 12.9%         |
| 64080-Pleasant Hill, MO                         | 217    | 1.1%          | 206     | 1.0%          | 174    | 0.9%          | 194     | 1.0%          |
| 64772-Nevada, MO                                | 140    | 0.4%          | 171     | 0.6%          | 197    | 0.7%          | 190     | 0.6%          |
| 64779-Rich Hill, MO                             | 144    | 2.2%          | 159     | 2.4%          | 214    | 3.1%          | 189     | 2.7%          |

| Other Zips               |       |               |       |               |       |               |       |               |
|--------------------------|-------|---------------|-------|---------------|-------|---------------|-------|---------------|
| Patient Zip Code         | 2017  |               | 2018  |               | 2019  |               | 2020  |               |
|                          | Cases | Share Percent |
| 65078-Stover, MO         | 264   | 3.0%          | 317   | 3.6%          | 211   | 2.6%          | 175   | 2.1%          |
| 65785-Stockton, MO       | 129   | 1.5%          | 193   | 2.3%          | 189   | 2.0%          | 166   | 1.8%          |
| 64083-Raymore, MO        | 84    | 0.2%          | 141   | 0.4%          | 282   | 0.7%          | 165   | 0.5%          |
| 65020-Camdenton, MO      | 147   | 0.5%          | 121   | 0.4%          | 135   | 0.4%          | 147   | 0.5%          |
| 64076-Odessa, MO         | 167   | 1.1%          | 106   | 0.7%          | 174   | 1.1%          | 140   | 1.0%          |
| 64037-Higginsville, MO   | 188   | 1.5%          | 104   | 0.8%          | 135   | 1.0%          | 139   | 1.1%          |
| 65650-Flemington, MO     | 58    | 2.9%          | 115   | 5.1%          | 148   | 5.8%          | 135   | 5.2%          |
| 65724-Pittsburg, MO      | 91    | 3.9%          | 174   | 7.2%          | 171   | 6.4%          | 121   | 4.3%          |
| 64078-Peculiar, MO       | 98    | 0.7%          | 157   | 1.1%          | 100   | 0.7%          | 118   | 0.8%          |
| 64020-Concordia, MO      | 64    | 0.8%          | 111   | 1.3%          | 113   | 1.5%          | 109   | 1.5%          |
| 65613-Bolivar, MO        | 134   | 0.5%          | 180   | 0.7%          | 169   | 0.6%          | 108   | 0.4%          |
| 64050-Independence, MO   | 51    | 0.1%          | 44    | 0.1%          | 152   | 0.3%          | 105   | 0.2%          |
| 64015-Blue Springs, MO   | 51    | 0.1%          | 65    | 0.1%          | 57    | 0.1%          | 104   | 0.2%          |
| 65803-Springfield, MO    | 45    | 0.1%          | 38    | 0.0%          | 61    | 0.1%          | 99    | 0.1%          |
| 64056-Independence, MO   | 28    | 0.1%          | 31    | 0.1%          | 153   | 0.4%          | 95    | 0.3%          |
| 65084-Versailles, MO     | 61    | 0.4%          | 64    | 0.5%          | 67    | 0.5%          | 95    | 0.7%          |
| 64067-Lexington, MO      | 56    | 0.4%          | 23    | 0.1%          | 113   | 0.7%          | 92    | 0.6%          |
| 65350-Smithton, MO       | 57    | 1.6%          | 21    | 0.6%          | 49    | 1.6%          | 92    | 2.8%          |
| 65807-Springfield, MO    | 50    | 0.1%          | 37    | 0.0%          | 71    | 0.1%          | 92    | 0.1%          |
| 64750-Harwood, MO        | 42    | 5.5%          | 119   | 13.5%         | 71    | 9.6%          | 91    | 12.0%         |
| 65714-Nixa, MO           | 59    | 0.1%          | 78    | 0.2%          | 63    | 0.1%          | 90    | 0.1%          |
| 65649-Fair Play, MO      | 13    | 0.6%          | 37    | 1.6%          | 68    | 2.6%          | 89    | 3.1%          |
| 65536-Lebanon, MO        | 74    | 0.1%          | 73    | 0.1%          | 77    | 0.1%          | 88    | 0.1%          |
| 65037-Gravois Mills, MO  | 58    | 0.5%          | 57    | 0.5%          | 49    | 0.4%          | 84    | 0.7%          |
| 65802-Springfield, MO    | 56    | 0.1%          | 70    | 0.1%          | 58    | 0.1%          | 82    | 0.1%          |
| 64052-Independence, MO   | 72    | 0.2%          | 55    | 0.1%          | 70    | 0.1%          | 81    | 0.2%          |
| 65345-Mora, MO           | 109   | 11.7%         | 93    | 10.7%         | 98    | 13.2%         | 81    | 9.7%          |
| 64061-Kingsville, MO     | 109   | 2.1%          | 91    | 1.8%          | 159   | 2.8%          | 80    | 1.7%          |
| 64644-Hamilton, MO       | 0     |               | 41    | 0.5%          | 68    | 0.8%          | 72    | 0.9%          |
| 64722-Amoret, MO         | 22    | 2.0%          | 81    | 6.7%          | 63    | 5.5%          | 71    | 5.5%          |
| 64801-Joplin, MO         | 38    | 0.0%          | 40    | 0.1%          | 84    | 0.1%          | 69    | 0.1%          |
| 65787-Roach, MO          | 77    | 2.4%          | 57    | 1.7%          | 75    | 2.4%          | 69    | 2.3%          |
| 64075-Oak Grove, MO      | 72    | 0.4%          | 87    | 0.4%          | 120   | 0.6%          | 68    | 0.4%          |
| 65767-Urbana, MO         | 66    | 2.2%          | 42    | 1.3%          | 71    | 2.0%          | 67    | 2.0%          |
| 64030-Grandview, MO      | 60    | 0.1%          | 51    | 0.1%          | 82    | 0.2%          | 63    | 0.1%          |
| 64034-Greenwood, MO      | 13    | 0.1%          | 28    | 0.3%          | 55    | 0.5%          | 62    | 0.6%          |
| 65101-Jefferson City, MO | 44    | 0.1%          | 41    | 0.1%          | 30    | 0.0%          | 62    | 0.1%          |
| 64055-Independence, MO   | 42    | 0.1%          | 97    | 0.1%          | 79    | 0.1%          | 61    | 0.1%          |
| 65340-Marshall, MO       | 66    | 0.2%          | 62    | 0.2%          | 73    | 0.2%          | 60    | 0.2%          |
| 64081-Lees Summit, MO    | 43    | 0.1%          | 58    | 0.2%          | 54    | 0.1%          | 59    | 0.2%          |
| 64082-Lees Summit, MO    | 60    | 0.3%          | 19    | 0.1%          | 38    | 0.2%          | 59    | 0.3%          |
| 64029-Grain Valley, MO   | 60    | 0.2%          | 21    | 0.1%          | 71    | 0.2%          | 57    | 0.2%          |
| 64085-Richmond, MO       | 25    | 0.1%          | 19    | 0.1%          | 38    | 0.2%          | 57    | 0.3%          |
| 64752-Hume, MO           | 71    | 3.6%          | 77    | 4.0%          | 59    | 3.2%          | 57    | 3.5%          |
| 64742-Drexel, MO         | 93    | 3.0%          | 71    | 2.0%          | 78    | 2.3%          | 54    | 1.6%          |
| 64063-Lees Summit, MO    | 37    | 0.1%          | 32    | 0.1%          | 73    | 0.2%          | 52    | 0.2%          |
| 65672-Hollister, MO      | 13    | 0.1%          | 8     | 0.0%          | 23    | 0.1%          | 52    | 0.3%          |

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## b.) Town Hall Attendees, Notes, & Feedback

[VVV Consultants LLC]

## Henry & Benton Counties, MO CHNA Town Hall - Oct. 13th (5:30-7:00pm)

| #  | Team | Lead | Last      | First     | Organization                   | #  | Team | Lead | Last      | First     | Organization                  |
|----|------|------|-----------|-----------|--------------------------------|----|------|------|-----------|-----------|-------------------------------|
| 1  | A    | ##   | Adkins    | Kyle      | GVMH                           | 25 | G    | ##   | Bowles    | Peggy     | Henry Health Dept             |
| 2  | A    |      | Amy       | Jenkins   | WILS                           | 26 | G    |      | Meier     | Christian | Clinton School District       |
| 3  | A    |      | Bigler    | Dara      | SFCC                           | 27 | G    |      | Nasalroad | Debi      | WC MO Comm Action Agency      |
| 4  | A    |      | Boyles    | Rachel    | GVMH                           | 28 | G    |      | OBERKROM  | JAMES     | HENRY COUNTY SHERIFF          |
| 5  | B    | ##   | Bullock   | Don       | 1st Bapt., Windsor             | 29 | H    | ##   | Overton   | Saundra   | Compass Health                |
| 6  | B    |      | Corson    | Jennifer  | Clinton School District        | 30 | H    |      | Schreck   | Linda     | WC MO Comm Action Agency      |
| 7  | B    |      | Dixon     | Deborah   | HCHC                           | 31 | H    |      | Shields   | Richard   | Henry Co Prosecuting Attorney |
| 8  | B    |      | Dody      | Debbie    | MU Extension                   | 32 | H    |      | Valentine | Taylor    | WC MO Comm Action Agency      |
| 9  | C    | ##   | Faulconer | Christine | GVMH                           | 33 | I    | ##   | Thompson  | Craig     | GVMH                          |
| 10 | C    |      | Dull      | Tara      | GVMH                           | 34 | I    |      | Staashelm | Ernie     | UMB Bank / Co Health Board    |
| 11 | C    |      | Garnett   | Dave      | Hawthorn                       | 35 | I    |      | Stewart   | Sarah     | Compass Health                |
| 12 | C    |      | Glasscock | Tim       | GVMH and Compass               | 36 | I    |      | Wagner    | Joanne    | GVMH                          |
| 13 | D    | ##   | Hall      | Dana      | Henry County Health Center     | 37 | J    | ##   | Kuck      | Donni     | Compass Health                |
| 14 | D    |      | Bayless   | Jerri     |                                | 38 | J    |      | Bullock   | Karen     | 1st Bapt., Windsor            |
| 15 | D    |      | Henderson | Jessica   | GVMH                           | 39 | J    |      | Huff      | Jennifer  | GVMH                          |
| 16 | D    |      | Huf       | Allen     | Public Official                | 40 | J    |      | Walrath   | Ranae     | GVMH                          |
| 17 | E    | ##   | Journey   | Vincent   | Henry CO Off of Emergency MNGT | 41 | K    | ##   | Studer    | Lea       | GVMH                          |
| 18 | E    |      | Johns     | James     |                                | 42 | K    |      | Bellamy   | Bruce     | GVMH                          |
| 19 | E    |      | Kelley    | Colleen   | Clinton Healthcare & Rehab Ctr | 43 | K    |      |           |           |                               |
| 20 | E    |      | Lowe      | G. R.     | Aviation Fabricators           | 44 | K    |      |           |           |                               |
| 21 | F    | ##   | Lynnette  | Hayes     | GVMH                           |    |      |      |           |           |                               |
| 22 | F    |      | Mackey    | Charla    | Clinton Healthcare & Rehab Ctr |    |      |      |           |           |                               |
| 23 | F    |      | Maggi     | Christy   | City of Clinton                |    |      |      |           |           |                               |
| 24 | F    |      | Mark      | Dawson    | Greater clinton area chamber   |    |      |      |           |           |                               |

# Henry & Benton County, MO Town Hall Event Notes

Attendance: N=41

Date: 10/13/2022 – 5:30 p.m. to 7 p.m.

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**Community identified the following drugs (substance abuse) occurring in Clinton, MO:** Opioids, Meth, Fentanyl, Marijuana, and alcohol.

## **Strengths**

- Primary Care Provider Access (Henry Co)
- Collaboration between Golden Valley, Health Dept, and Compass
- Golden Valley, Health Dept, and Compass
- Exercise Opportunities
- Community Assistance Programs
- Access to Specialty Care
- Outpatient Services
- New Services (Oncology coming)
- Dental Services for Medicaid Patients
- Superior quality of care
- School Health

## **Needs**

- Transportation (All)
- Childcare (Available, Affordable, Safe)
- Urgent Care Services (After Hours)
- Community Education (Mental Health / Anxiety)
- Housing (Affordable / Safe)
- Appropriate Education on ED Services
- Obesity (Nutritional / Exercise)
- Family Planning / Women's Health
- Homeless
- Domestic Abuse
- Suicide Prevention (Education)
- Substance Abuse (Drug / Alcohol / Nicotine)
- Psychiatric IP Beds
- Crisis Intervention
- Chronic Disease Management (COPD, Diabetes, Cardiac, and Cancer)
- Senior Transitional Living
- Respite Care for Adults
- Food Insecurity (Healthy foods / Education)
- Nursing Home (Available / Quality)
- Wellness Programs
- Poverty

## Wave #4 CHNA - Henry & Benton County, MO

### Town Hall Conversation - Strengths (White Cards) N=37

| Card # | What are the strengths of our community that contribute to health? | Card # | What are the strengths of our community that contribute to health?           |
|--------|--|--------|--|
| 1      | Many specialities close to home                                    | 20     | Access to care-PCP hospital  |
| 2      | Family Staff   | 20     | Multi-specialty providers  |
| 3      | Availability of special providers                                  | 20     | BCH health and Compass (OP)  |
| 3      | Cancer Care  | 20     | Community Resources-WIC, Food pantry, Church                                 |
| 3      | Expanded clinic care/access/hours                                  | 20     | Job availability   |
| 3      | Quality/safe care  | 21     | Maternity-substance abuse  |
| 4      | Loads of passion by health community                               | 21     | Providers  |
| 4      | Lots of quality access   | 21     | Mental health IP services  |
| 5      | Visting specialist   | 21     | MCD availability of services   |
| 5      | Access to care   | 22     | Access to providers  |
| 5      | Appt. availability   | 22     | Access to medical services (PT, OT, Specialty)                               |
| 5      | Quality/safe care and services                                     | 22     | Access to vaccinations   |
| 6      | Access to care   | 22     | STD testing  |
| 6      | Specialists  | 23     | Access to healthcare close to home   |
| 6      | Dental   | 23     | Cancer center/Radiation  |
| 6      | New Services   | 23     | Onology  |
| 7      | Cordinations and responses   | 23     | Capacity of providers for area   |
| 7      | High quality unit opening at hospitals (Austims)                   | 24     | Physicians/access to care  |
| 7      | Use of telehealth services   | 24     | Specialty care   |
| 8      | Healthcare facilities collaboration                                | 24     | Hospital as largest employer   |
| 8      | Ambulance services   | 24     | Close to nature  |
| 8      | Quality schools and support for schools                            | 24     | Transitional care  |
| 8      | Access to Mental Health services                                   | 25     | Healthcare infrastructure  |
| 8      | Adequate funding for emergency services                            | 25     | Community physical activity resources  |
| 9      | Physician Access   | 26     | Medical Care   |
| 9      | School graduation rate   | 26     | Access healthcare  |
| 9      | Ambulance/ ER services   | 26     | Access to hym/physical exercise  |
| 9      | 3 entities with collaboration                                      | 26     | School health  |
| 10     | Ambulance services   | 26     | Collaboration between intities   |
| 10     | Access to health care  | 27     | Access to healthcare   |
| 10     | Quality schools-support from community                             | 27     | Increasing access dental services  |
| 10     | Adequate funding   | 27     | Access to a gym  |
| 10     | Access to Mental Health services (compass)                         | 27     | Collaboration among healthcare professionals (health dept, compass and GUMH) |
| 11     | Community care   | 27     | Crime rate   |
| 11     | Collab/communication   | 28     | Access to care in town   |
| 11     | Number of services available                                       | 28     | Local Cancer care  |
| 12     | Health care Hospital   | 28     | Mental health care   |
| 12     | Ambulance services   | 28     | Opportunities for exams  |
| 12     | Mental Health offerings  | 29     | Access to healthcare   |
| 12     | Urgent care services-limited                                       | 29     | Caring people  |
| 13     | Great Health care  | 29     | Concern for county   |
| 14     | Access to speciality healthcare                                    | 29     | Positive outlook   |
| 14     | Primary care   | 29     | Practice   |
| 14     | Outpatient support services  | 30     | Providers have increased   |
| 14     | Community collaboration (healthcare)                               | 30     | Mental Health access-better  |
| 14     | Hospital based ambulance   | 31     | Access to care   |
| 15     | Specialty care provider access                                     | 31     | Primary care   |
| 15     | Primary care provider access                                       | 31     | Collaboration  |
| 15     | Quality healthcare facilities                                      | 32     | Community support  |
| 15     | Collaboration of healthcare entities (Amb. services)               | 32     | Healthcare access  |
| 15     | Focus on immunizations in school districts                         | 32     | Access to facilities (public)  |

## Wave #4 CHNA - Henry & Benton County, MO

### Town Hall Conversation - Strengths (White Cards) N=37

| Card # | What are the strengths of our community that contribute to health? | Card # | What are the strengths of our community that contribute to health? |
|--------|--|--------|--|
| 15     | Number of healthcare services available                            | 33     | Access to hospital/clinic  |
| 16     | Availability of good quality of resources                          | 33     | Service groups (rotary/optimists)                                  |
| 16     | Dedicated professionals  | 33     | Many community resources   |
| 16     | Strong community   | 34     | Hospital   |
| 16     | Home health  | 34     | Healthcare   |
| 17     | Urgent care  | 34     | Compass  |
| 18     | Vaccinations   | 34     | Cancer Care  |
| 18     | Progressive hospital   | 35     | Hospital/clinic  |
| 18     | Available of food  | 35     | Compass  |
| 18     | Quality of care for mothers  | 35     | Cancer Care  |
| 18     | County health  | 36     | Expanding healthcare services                                      |
| 19     | Access to care-PCP   | 36     | Community support for schools                                      |
| 19     | Mental Health-negative wait time to access                         | 36     | Low Cost of living   |
| 19     | Community Resc - food pantry/local funds churches                  | 37     | Accessability to doctors   |
| 19     | Visiting specialists-though some are limited                       | 37     | Mental health-short term progress                                  |
| 19     | Employment opportunities   | 37     | ER access  |
|        |  | 37     | Long term care facilities  |

## Wave #4 CHNA - Henry & Benton County, MO

### Town Hall Conversation - Weaknesses (Color Cards) N= 40

| Card # | What are the weaknesses of our community that contribute to health? | Card # | What are the weaknesses of our community that contribute to health? |
|--------|---|--------|---|
| 1      | Quality of nursing homes care                                       | 22     | Assidental living/Nursing home                                      |
| 1      | Urgent care   | 22     | Housing   |
| 1      | Telehelath  | 22     | Exercise opportunity  |
| 1      | Housing   | 22     | ER  |
| 1      | Preventative services   | 22     | Health education substance  |
| 1      | Cancer  | 23     | New provider specialty  |
| 1      | Childcare   | 23     | Drug teaching/precaution  |
| 1      | Emergency Department  | 23     | Smoking classes   |
| 2      | Reduce tobacco use-access/education                                 | 23     | Drug treatment  |
| 2      | Create mindset with youth-break the cycle                           | 24     | STD   |
| 2      | Schools allocate resources for food security                        | 24     | Substance abuse   |
| 2      | Attract more industry to raise avergae wage                         | 24     | Emergency room services   |
| 2      | Work with restaurants for healthy options                           | 24     | Urgent Care service   |
| 3      | Improve cost of childcare   | 24     | Nursing home/ senior living   |
| 3      | Improve drug use/substance abuse in schools                         | 24     | Lack of plant based medicine  |
| 3      | Make community aware of mental health services                      | 25     | Assisting the under insured or uninsured                            |
| 3      | More mental health for adults                                       | 25     | Public transportation   |
| 3      | Suicide prevention  | 26     | Housing   |
| 4      | RAD ONE   | 26     | Maternal home care  |
| 4      | ER  | 26     | Economic Development  |
| 4      | Mental health   | 26     | Obesity   |
| 4      | Annual check up   | 27     | NH care   |
| 5      | Access to liveable housing  | 27     | Transportation (public)   |
| 5      | Chronic health conditions   | 27     | Access to care  |
| 5      | Cancer rates  | 27     | Economic Development (JOBS)   |
| 5      | Access to BH for acure crisis care                                  | 28     | Cancer  |
| 5      | Access to childcare   | 28     | Obesity   |
| 6      | Substance abuse   | 28     | Heart disease   |
| 6      | Violence  | 28     | Substance abuse   |
| 6      | Mental health   | 28     | Mental Health   |
| 6      | Poverty   | 29     | Senior Services   |
| 6      | Economic development  | 29     | Outreach to communities   |
| 6      | Exercise/physical health  | 29     | Heart disease   |
| 6      | Suicide prevention  | 29     | Cancer  |
| 6      | Parent Education/responsibility                                     | 29     | Housing   |
| 7      | Food insecurity /free-reduced meals                                 | 30     | Acces to resources  |
| 7      | Healthy food/health and nutrition education                         | 30     | Homelessness  |
| 7      | Substance abuse-access/care   | 30     | Community awareness/education                                       |
| 7      | Suicide awareness/prevention  | 30     | Public/medical transportation                                       |
| 7      | Obesity   | 30     | Substance abuse   |
| 7      | Economic development  | 30     | Community involvement   |
| 7      | Transportation  | 31     | Drugs and alcohol   |
| 7      | Housing   | 31     | Cancer  |
| 7      | Homeless  | 31     | Heart disease   |
| 8      | Access to impacient mental health services                          | 31     | Housing   |
| 8      | Access to affordable housing  | 31     | Obesity   |
| 8      | Access to educrinology services                                     | 32     | Drug abuse  |
| 8      | Appropriate ED utilization (throughout)                             | 33     | Poverty/economic opp.   |
| 8      | Decrease uninsured; increase benefit usage                          | 34     | Economic Opportunity  |
| 8      | Assisted living/transitional living                                 | 34     | Affordable Housing  |
| 8      | Food insecurity /free-reduced lunch                                 | 34     | Mental Health Services  |
| 8      | Homelessness  | 34     | Youth suicide/mental health prevention                              |
| 8      | Susbtance abuse   | 34     | Drug abuse prevention   |
| 9      | Phych bed access  | 35     | Suicide prevention/education (risk factors/signs)                   |
| 9      | Door to dorr ED time  | 35     | Health foods-obesity  |

## Wave #4 CHNA - Henry & Benton County, MO

### Town Hall Conversation - Weaknesses (Color Cards) N= 40

| Card # | What are the weaknesses of our community that contribute to health? | Card # | What are the weaknesses of our community that contribute to health? |
|--------|---|--------|---|
| 9      | Pediatrician courage  | 35     | Opioids/education   |
| 9      | Nepholsy/Dematology/Cardiology Coverage                             | 35     | Housing   |
| 9      | Housing   | 35     | Childcare   |
| 9      | Transportation Access   | 36     | Rural care of people at home  |
| 9      | Broad Access  | 37     | Mental health-long term treatment 3-6 months                        |
| 9      | Insurance coverage  | 37     | Affordable Housing  |
| 9      | Price Transparency  | 37     | Dental.denture for medicaid-affordable                              |
| 9      | Support care  | 37     | Obesity   |
| 9      | Advocacy and Navigation   | 37     | Substance abuse programs-long term program                          |
| 9      | Education   | 38     | ER-wait times   |
| 9      | RAD   | 38     | Access to mental health (hospitalization)                           |
| 10     | Access to transportation, wifi                                      | 38     | Better access to walk-in clinics                                    |
| 10     | Coverage-insurance  | 38     | Housing   |
| 10     | Support beyond health/dr/hospital                                   | 38     | Childcare   |
| 10     | Advocacy/navigation   | 39     | Substance abuse   |
| 10     | Education   | 39     | Childcare   |
| 11     | Access to RAD Onc locally   | 39     | Health insurance  |
| 11     | ER wait time/service  | 39     | Housing   |
| 11     | Uninsured/underinsured  | 39     | STD   |
| 11     | Workforce challenge   | 39     | Teen pregnancy  |
| 11     | Healthcare transportation   | 39     | Heart.cardiac education awareness                                   |
| 12     | STD/STI   | 39     | Depression/anxiety/suicide  |
| 12     | Obesity access to exercise for all levels                           | 39     | Urgent care-after hours   |
| 12     | Late for urgent care oversight weekend                              | 40     | New Cancer center   |
| 12     | Co-pay assistance   | 40     | ER-time frame   |
| 12     | Phych care  | 17     | Susbtance abuse   |
| 13     | Availability of affordable, safe housing                            | 17     | Access to IP  |
| 13     | Healthcare education, improve all over health                       | 17     | Availability of MCD Services  |
| 13     | Family planning and education/more focus on teens                   | 17     | Homeless services/resources   |
| 13     | Mental health access  | 17     | Appt. availability-even though there's access                       |
| 13     | Substance abuse, education, benefits marijuana                      | 18     | Substance use   |
| 13     | Domestic abuse  | 18     | Anxiety/depression  |
| 14     | Cancer  | 18     | Obesity   |
| 14     | Heath disease   | 18     | Healthy community   |
| 14     | Urgent care services-24hr care, expansion                           | 18     | Appointment availability  |
| 14     | Mental health specialties   | 18     | Poverty   |
| 14     | Single parent households  | 18     | Homelessness  |
| 15     | Mental health   | 18     | Single parent family  |
| 15     | Drug info   | 18     | Food insecurity for health foods                                    |
| 15     | Mothers with family   | 18     | Childcare   |
| 15     | Retirement facilities   | 19     | ER care   |
| 15     | Wellness  | 19     | Availability to get appts.  |
| 15     | Available health  | 19     | Teen pregnancy/substance abuse                                      |
| 15     | Coverage insurance  | 19     | Cost of food and rent   |
| 16     | Chronic disease   | 19     | Care for elderly  |
| 16     | Smoking/mothers smoking   | 20     | Opioid, substance abuse issues                                      |
| 16     | Sud   | 20     | Short-term, rental housing  |
| 16     | Social-single parent family/poverty/food insecurity                 | 20     | ED times/ ED utilization (quality)                                  |
| 16     | Uninsured-underinsured  | 21     | Substance abuse   |
| 16     | Support for all adult caregivers                                    | 21     | Mental health   |
| 17     | Poverty   | 21     | Housing(low income, homeless)                                       |
| 17     | Chronic disease   |        |   |

## EMAIL #1: Request to Henry County CHNA Stakeholders

**From:** Christine Faulconer, Peggy Bowles, and Donni Kuck

**Date:** August 22, 2022

**To:** Community Leaders, Providers, Hospital Board and Leadership

**Subject:** Henry & Benton Co - Community Health Needs Assessment 2022 Online Feedback Survey

**Golden Valley Memorial Hospital, in partnership with Compass Health Network and Henry County Health Department,** are working on their 2022 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 2019 CHNA report and to collect up-to-date community health perceptions and needs. To accomplish this work, a short online survey has been developed. Please scan the QR code below or use the following link:

[https://www.surveymonkey.com/r/HenryBenton\\_CHNA2022](https://www.surveymonkey.com/r/HenryBenton_CHNA2022)



Scan me to take the survey!

All community residents and business leaders are encouraged **to participate in the survey by Friday, September 22<sup>nd</sup>.**

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 **Thursday, October 13<sup>th</sup> from 5:30 p.m. to 7:00 p.m. at xxx.** A light dinner will be provided starting at 5:15 p.m.

Sincerely,

Christine Faulconer, Peggy Bowles, and Donni Kuck

# GVMH, Compass Health and Health Dept Requests Community Health Needs Assessment Feedback

**Media Release:** August 22<sup>nd</sup>, 2022

**Contact:** [cfaulconer@gvmh.org](mailto:cfaulconer@gvmh.org), [peggy.bowles@lpha.mo.gov](mailto:peggy.bowles@lpha.mo.gov), [dkuck@compasshn.org](mailto:dkuck@compasshn.org)

**Golden Valley Memorial Hospital, in partnership with Compass Health Network and Henry County Health Department,** are working on their 2022 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 2019 CHNA report and to collect up-to-date community health perceptions and needs. To accomplish this work, a short online survey has been developed. Either scan the QR code below or go to the following link:

[https://www.surveymonkey.com/r/HenryBenton\\_CHNA2022](https://www.surveymonkey.com/r/HenryBenton_CHNA2022)



Scan me to take the survey!

All community residents and business leaders are encouraged **to participate in the survey by Friday, September 22<sup>nd</sup>**. (*Note: you can also find CHNA feedback link on the GVMH, Compass and Henry Co Health Dept Websites and Facebook pages.*)

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 participation. “This work is key to determine the health direction for our county,” comments Craig Thompson, CEO of Golden Valley Memorial Hospital, “and we hope that all community stakeholders will take advantage of this opportunity to provide input into the future of healthcare delivery in our community.”

Thank you in advance for your time and support by participating in this important request. Also, please hold **Tuesday, October 15<sup>th</sup> from 5:30 p.m. to 7:00 p.m.** A light dinner will be provided starting at 5:15 p.m.

Sincerely,

Christine Faulconer, Peggy Bowles, and Donni Kuck

## Email #2 – Town Hall Invite

**From:** Craig Thompson, Peggy Bowles, Donni Kuck

**Date:** Sept 16, 2022

**To:** Community Leaders, Providers, Hospital Board and leadership

**Subject:** Henry & Benton Co – CHNA Community Town Hall, October 13<sup>th</sup>, 2022

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**The Henry and Benton County, Missouri CHNA Town Hall working dinner meeting is on Thursday, October 13<sup>th</sup> 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 at the following link or scan the QR code for the October 13<sup>th</sup> Town Hall:**

[https://www.surveymonkey.com/r/HenryBenton\\_TownHall\\_RSVP2022](https://www.surveymonkey.com/r/HenryBenton_TownHall_RSVP2022)



Scan me to RSVP!

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

# Henry and Benton County, MO CHNA Community Town Hall – October 13<sup>th</sup>, 2022

**Media Release:** September 16<sup>th</sup>, 2022

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Scan me to RSVP!

*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 Lea Studer at 660-890-7306.*

## d.) Primary Research Detail

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[VVV Consultants LLC]

## CHNA 2022 Community Feedback: Henry & Benton Counties MO (N=408)

| ID   | Zip   | Rating    | Movement                       | c1   | c2   | c3   | In your opinion, what are the root causes of "poor health" in our community?  |
|------|-------|-----------|--------------------------------|------|------|------|---|
| 1033 | 64740 | Very Good | Increasing - moving up         | BED  |      |      | more unbiased help, for everyone  |
| 1356 | 65360 | Average   | Increasing - moving up         | BED  |      |      | to many quotas to meet no time for beside manner  |
| 1065 | 65301 | Average   | Increasing - moving up         | BH   | SPEC |      | Mental health needs and special needs assistance for families   |
| 1045 | 64735 | Average   | Decreasing - slipping downward | DOCS | SCH  |      | dr too busy wait to long for appt   |
| 1047 | 64763 | Good      | Not really changing much       | DRUG |      |      | Drugs   |
| 1053 | 65360 | Very Good | Not really changing much       | DRUG |      |      | Drug/alcohol abuse  |
| 1076 | 64735 | Very Good | Increasing - moving up         | DRUG |      |      | The use of drugs and crime rate   |
| 1251 |       | Poor      | Decreasing - slipping downward | DRUG |      |      | drug addiction  |
| 1408 | 65338 | Good      | Not really changing much       | EDU  | FINA | NUTR | Limited health literacy, ability to afford health services and healthy food   |
| 1365 | 64735 | Average   | Not really changing much       | FINA | NUTR |      | When people "Can't afford" to be healthy, they'll go for the Cheaper McDonald's burger every time.                                      |
| 1029 | 64735 | Very Good | Increasing - moving up         | FINA |      |      | Lack of ability to afford or pay.   |
| 1134 | 65301 | Good      | Increasing - moving up         | FINA |      |      | Lack of Money   |
| 1188 | 64735 | Average   | Not really changing much       | FINA |      |      | money   |
| 1335 | 65360 | Very Good | Increasing - moving up         | FINA |      |      | cost of healthcare services   |
| 1337 | 64735 | Very Good | Increasing - moving up         | FINA |      |      | Lack of monetary funds that needed for a healthy lifestyle  |
| 1397 | 64735 | Good      | Decreasing - slipping downward | FINA |      |      | Cost of services too high   |
| 1317 | 64735 | Good      | Not really changing much       | INSU |      |      | unaffordable health care/insurance  |
| 1058 | 64735 | Good      | Not really changing much       | NEGL |      |      | Neglect of the party of the patient, not our health care.   |
| 1093 | 64724 | Good      | Not really changing much       | NH   | OWN  |      | A lot of elderly in our community that are hesitant to seek Healthcare.   |
| 1126 | 64740 | Good      | Decreasing - slipping downward | NUTR | EDUC |      | Lack of inexpensive healthy foods, along with education   |
| 1384 | 65360 | Good      | Increasing - moving up         | NUTR | FINA |      | Food costs, it's hard to make good choices when it's more expensive.  |
| 1006 |       | Very Good | Increasing - moving up         | POV  | FINA |      | Ignorance. Lack of motivation; poverty or unwilling to part with \$ for healthcare but will spend \$\$ for another tatoo                |
| 1222 | 64735 | Average   | Not really changing much       | POV  |      |      | Poverty   |
| 1281 | 65355 | Good      | Increasing - moving up         | POV  |      |      | Generational Poverty  |
| 1357 | 64726 | Very Good | Increasing - moving up         | PREV | COVD |      | putting off of preventative services due to fear of covid, the requirement to wear masks, and/or expense.                               |
| 1010 | 64735 | Very Good | Increasing - moving up         | PREV |      |      | Living in a rural area - most people are resistant to seeking healthcare advice until it's too late                                     |
| 1182 | 65779 | Poor      | Decreasing - slipping downward | PRIM |      |      | I switched to Bothwell services to have a stable PCP. Get est. with a PCP only for them to leave.                                       |
| 1044 | 65326 | Average   | Not really changing much       | SERV | QUAL |      | I believe we offer services but the patient population is poor/low income with lack of QUALITY assistance programs and therapy services |
| 1007 |       | Very Good | Increasing - moving up         | TRAN |      |      | Lack of transportation  |
| 1200 | 64770 | Average   | Decreasing - slipping downward | TRAN |      |      | lack of Transportation  |

**CHNA 2022 Community Feedback: Henry & Benton Counties MO (N=408)**

| ID   | Zip   | Rating    | Movement                       | c1    | c2    | c3   | Access to care is vital. Are there enough providers / staff available at the right times to care for you and our community?  |
|------|-------|-----------|--------------------------------|-------|-------|------|--|
| 1182 | 65779 | Poor      | Decreasing - slipping downward | AMB   | EMER  | WAIT | NO!! No Cath lab. Transferred for anything serious. Then hope there's an ambulance available. The wait for an ambulance can be 45 mins for a 911 call. 3 to 4 hours for transfer out of ER.  |
| 1044 | 65326 | Average   | Not really changing much       | BH    | COUN  |      | Mental health providers and therapists   |
| 1188 | 64735 | Average   | Not really changing much       | BH    | PEDS  |      | Mental health. Not much for children.  |
| 1030 | 64740 | Good      | Not really changing much       | BH    |       |      | Mental health access in crisis situations is poor.   |
| 1065 | 65301 | Average   | Increasing - moving up         | BH    |       |      | Mental health workers  |
| 1220 | 64735 | Very Good | Decreasing - slipping downward | BH    |       |      | Not enough for mental health   |
| 1107 | 64735 | Very Poor | Decreasing - slipping downward | CHRON |       |      | There are no chronic pain clinics, staff is only available for no more than 15 minutes, consumers are put into a box in those few minutes that is frequently the wrong box thus not helping consumer   |
| 1173 | 64735 | Average   | Not really changing much       | CLIN  | HRS   | SCH  | I have tried to use the walk in clinic on Sunday afternoon during the available hours only to find they left early because it was slow or they already had the appointment slots filled  |
| 1033 | 64740 | Very Good | Increasing - moving up         | CLIN  |       |      | There could be more urgent Care like the walk-in clinics that CVS and Walgreens have in the city   |
| 1129 | 65360 | Very Good | Increasing - moving up         | CLIN  |       |      | We do not have urgent care or hospital.  |
| 1391 | 64735 | Good      | Increasing - moving up         | DERM  | SCH   | ENDO | Last time dermatology services were needed, the wait time was several months. Endocrinology services in this area are also needed.   |
| 1074 | 64776 | Average   | Increasing - moving up         | DERM  | SURG  |      | no dermatologist or oral surgeon available most times  |
| 1337 | 64735 | Very Good | Increasing - moving up         | DERM  |       |      | Dermatology  |
| 1194 | 64735 | Good      | Increasing - moving up         | DOCS  | EMER  |      | NEED MORE PROVIDER COVERAGE IN THE ER  |
| 1047 | 64763 | Good      | Not really changing much       | DOCS  | RET   |      | Several of the good providers have or are leaving, and the ones that are not as good or caring are still here.   |
| 1169 | 65360 | Poor      | Decreasing - slipping downward | DOCS  | SCH   | CLIN | Windsor clinic needs more providers. It is difficult to schedule an appointment. Walk ins are schedule and not actually available  |
| 1201 | 65325 | Average   | Decreasing - slipping downward | DOCS  | SCH   |      | I think the providers are here but getting an appointment timely and the insurance and healthcare field has handicapped the providers in their treatment approach and prolonged the delivery of appropriate treatment.   |
| 1356 | 65360 | Average   | Increasing - moving up         | DOCS  | SCH   |      | Good doctors are always booked to the max and you always feel like they are running from one room to another somewhat listen but things get missed or forgotten and you don't feel like anyone is really listening to you and you just continue to suffer from same issues with no resolve.  |
| 1383 | 64735 | Good      | Increasing - moving up         | DOCS  | SCH   |      | long wait to get into a Dr or other appointment  |
| 1110 | 64735 | Very Good | Decreasing - slipping downward | DOCS  | SPEC  |      | it should not take greater than 3 weeks to get in to see a physician or even a specialty clinic  |
| 1086 | 65355 | Very Good | Decreasing - slipping downward | DOCS  |       |      | We need more providers in our area to take care of the patient load.   |
| 1087 | 65355 | Average   | Not really changing much       | DOCS  |       |      | Providers are needed in all areas of service   |
| 1170 | 65360 | Poor      | Decreasing - slipping downward | DOCS  |       |      | Windsor needs more providers in the clinic   |
| 1379 | 64735 | Average   | Decreasing - slipping downward | DOCS  |       |      | We need more Full Time MD's AND OD's   |
| 1385 | 64776 | Poor      | Increasing - moving up         | DOCS  |       |      | not enough doctors for the area  |
| 1344 | 64776 | Good      | Increasing - moving up         | EMER  | CLIN  | BH   | Emergency/Urgent care needs to be increased as well as these services tied to Mental Health patients needs   |
| 1370 | 64770 | Very Good | Not really changing much       | EMER  | CLIN  | SPEC | ED staff Walk-in Clinic providers/staff Specialty providers (cardiac, nephrology, GI, dermatology)   |
| 1154 | 64735 | Average   | Increasing - moving up         | EMER  | CLIN  |      | Emergency rooms are typically understaffed and the walk in clinic  |
| 1290 | 64735 | Average   | Not really changing much       | EMER  | DOCS  |      | Not all the time have long waiting period in the ER. If's on the weekend have two doctors in the ER with help the community.   |
| 1106 | 64776 | Very Good | Increasing - moving up         | EMER  | NURSE |      | Sometimes the ER will need more nurses then they have. I understand that some of that is covid related, but more would be good.  |
| 1200 | 64770 | Average   | Decreasing - slipping downward | EMER  | STFF  |      | a bigger Emergency Room and staff. People leave the ER daily without being seen in a timely fashion. It has been up to 12 people a day at times. Only 32 patients are expected in a 24 hour time frame. Look at how many people live in Henry & Benton County alone.   |
| 1366 | 64735 | Very Good | Increasing - moving up         | EMER  |       |      | ER staffing is very concerning   |
| 1008 | 64735 | Very Good | Increasing - moving up         | FAM   | CLIN  | HRS  | We need more family practice providers as well as an Urgent Care or Walk In Clinic with more available hours. We also need more nurses in all areas.   |
| 1142 | 64735 | Good      | Increasing - moving up         | HRS   | DOCS  | SCH  | I love the fact that our community has extended hours. However I have a family member who was very sickly and could never see the same provider. She has a primary care provider but those appointments had to be scheduled out a month in advance. Sometimes things that doctors see can be subjective and seeing multiple doctors for the same thing is not in the best interest. These were not 2nd opinions...just continual ear problems. |
| 1214 | 65338 | Average   | Increasing - moving up         | HRS   | SCH   |      | Weekend care or having to go to go to another county for after hours or weekend care. Waiting weeks to get in to see a primary care physician and be told to go to Urgent care if you can't wait.  |
| 1040 | 64735 | Good      | Increasing - moving up         | HRS   |       |      | need more on eve and weekends  |
| 1066 | 64735 | Poor      | Decreasing - slipping downward | HRS   |       |      | You've got to have facilities that care enough to work over if need be   |
| 1365 | 64735 | Average   | Not really changing much       | HRS   |       |      | More evening openings for people who work during the day.  |
| 1084 |       | Average   | Not really changing much       | IM    | FAM   | SCH  | We need more internal medicine and family doctors. Most aren't taking new patients.  |
| 1015 | 64788 | Average   | Not really changing much       | NH    | STFF  |      | All fields are in short supply, which causes needs of listening to patients, helping the elderly, and no being able to provide the very needs for community  |
| 1114 | 63026 | Good      | Increasing - moving up         | NURSE | STFF  |      | Nurses and medical staff   |
| 1215 | 65325 | Poor      | Decreasing - slipping downward | NURSE |       |      | not enough nurses to staff facilities  |
| 1384 | 65360 | Good      | Increasing - moving up         | OBG   | FEM   |      | OB options are limited, scarce if you are seeking care from a female OB.   |
| 1397 | 64735 | Good      | Decreasing - slipping downward | OBG   |       |      | Need more/ new OB/GYN providers  |
| 1339 | 64735 | Very Good | Increasing - moving up         | OPHT  |       |      | There is a need for retinal services that are now only available 30 to 90 miles from this area.  |

| CHNA 2022 Community Feedback: Henry & Benton Counties MO (N=408) |       |           |                                |      |      |      |   |
|--|-------|-----------|--------------------------------|------|------|------|---|
| ID   | Zip   | Rating    | Movement                       | c1   | c2   | c3   | Access to care is vital. Are there enough providers / staff available at the right times to care for you and our community?   |
| 1155   |       | Average   | Increasing - moving up         | ORTH | SPEC |      | We only have one Orthopedic Specialist, more services are needed.   |
| 1396   | 64735 | Average   | Decreasing - slipping downward | PEDS |      |      | Our community needs more pediatricians  |
| 1018   | 65360 | Average   | Not really changing much       | PRIM | SCH  |      | I have to make an appointment for my primary care Dr a month in advance. When you choose a Dr that's who you want to see. Not a walk in Dr that doesn't know you.   |
| 1057   | 65360 | Poor      | Decreasing - slipping downward | PRIM | SCH  |      | Again, to many Primary Care Physicians not accepting new patients. Some of our older doctors retire and we have a hard time finding a Primary Care Physician. This leads to having to go to the walk-in, less concern for the patients needs. Walk-in providers doesn't know the patients history. I have a 90 year old father that does not have a Primary Care Physician. He has had several TIA's and he has to be shuffled from the hospital to whoever the attending is at the hospital. |
| 1353   | 64735 | Very Good | Increasing - moving up         | PRIM |      |      | need more PCP's especially Windsor and Warsaw   |
| 1183   | 64724 | Good      | Decreasing - slipping downward | QUAL |      |      | Appleton City needs better care!!!  |
| 1140   | 64770 | Average   | Not really changing much       | SCAN |      |      | No ultrasound technicians in the emergency room after hours   |
| 1294   | 65355 | Poor      | Not really changing much       | SCH  | DOCS |      | Husband has a throat that hurts and feels like it has a huge lump in it and has to wait over a month for an appointment with his own dr. Was told no one else available and can only suggest the walk in clinic   |
| 1149   | 65355 | Good      | Increasing - moving up         | SCH  | SPEC | PRIM | It is sometimes hard to get in to see your primary or specialty drs.  |
| 1361   | 64040 | Average   | Not really changing much       | SCH  | SPEC |      | hard to get last minute appointments with some doctors. specialty is scheduled months out   |
| 1308   | 65355 | Average   | Not really changing much       | SCH  | TRAV |      | Long waits for appts. Travel to outside counties to receive care  |
| 1005   | 64735 | Good      | Increasing - moving up         | SCH  |      |      | Appointments can be too far out at times  |
| 1124   | 64735 | Good      | Increasing - moving up         | SCH  |      |      | Access to appointments in a timely manner not 3 mos out!!!  |
| 1181   | 64735 | Average   | Increasing - moving up         | SCH  |      |      | Appointments a month or more in future  |
| 1185   | 65355 | Average   | Not really changing much       | SCH  |      |      | sometimes hard to get an appt   |
| 1212   | 65338 | Poor      | Decreasing - slipping downward | SCH  |      |      | unable to get urgent appointment with physicians.   |
| 1009   | 65360 | Average   | Increasing - moving up         | SPEC | DOCS | QUAL | There are specific doctors/specialists that are not providing quality care, but there are not other options in the community for alternate providers.   |
| 1078   | 64740 | Average   | Decreasing - slipping downward | SPEC |      |      | We need specialties in house 24/7   |
| 1091   | 64735 | Average   | Increasing - moving up         | SPEC |      |      | not enough specialists  |
| 1113   | 65360 | Good      | Not really changing much       | SPEC |      |      | More specialists it took me over 3 weeks to see a doctor while in extreme pain  |
| 1076   | 64735 | Very Good | Increasing - moving up         | STFF | QUAL |      | In our hospital we have the staff, there are so many of us willing to step up and get the job done and be available when needed.  |
| 1277   | 64735 | Good      | Increasing - moving up         | STFF | SCAN |      | We are short staffed EVERYWHERE. It negatively impacts healthcare delivery every day. critical tests such as ultrasound are unavailable after hours or weekends. The time to get patients to a vital test seems to be getting longer and longer.  |
| 1150   | 63100 | Good      | Increasing - moving up         | STFF |      |      | There are too few medical staff to take care of all those people  |
| 1293   | 64735 | Good      | Increasing - moving up         | STFF |      |      | I understand, like everywhere there is a shortage of workers.   |
| 1402   | 64726 | Average   | Not really changing much       | TELE |      |      | Telehealth needs to be more viable  |
| 1012   | 65323 | Average   | Not really changing much       | WAIT | DOCS |      | There are days that when you have to wait an hour passed your scheduled appointment at the clinic to actually see your doctor for your appointment.   |
| 1019   | 64735 | Good      | Not really changing much       | WAIT |      |      | Too much wait times   |
| 1387   | 64735 | Good      | Increasing - moving up         | WIC  | DOCS | SCH  | The WIC is almost always down a provider. Meaning we have to turn patients away.  |

## CHNA 2022 Community Feedback: Henry & Benton Counties MO (N=408)

| ID   | Zip   | Rating    | Movement                       | c1    | c2    | c3    | What "new" community health programs should be created to meet current community health needs?   |
|------|-------|-----------|--------------------------------|-------|-------|-------|--|
| 1188 | 64735 | Average   | Not really changing much       | ALT   | BH    |       | Functional medicine for adults and children, mental health for children and increased for adults.  |
| 1260 |       | Poor      | Decreasing - slipping downward | AMB   |       |       | Addition of another ambulance so that we don't have to wait 30 minutes for an ambulance to come from Osceola or Windsor.   |
| 1252 | 41129 | Good      | Increasing - moving up         | AWARE | BED   |       | The most important thing is to enhance the health awareness of the community staff, classify the garbage, everyone should be more patient and treat the medical staff.   |
| 1150 | 63100 | Good      | Increasing - moving up         | AWARE | STFF  | EQUIP | The first is people's health awareness, the second is the increase in medical personnel and equipment, and finally timely materials.   |
| 1006 |       | Very Good | Increasing - moving up         | BED   |       |       | Flexible jobs. People in community to work at whatever hob they are capable. Willingness to treat LBG, etc without judgement   |
| 1234 | 66955 | Very Poor | Not really changing much       | BED   |       |       | Service attitude   |
| 1002 | 65735 | Good      | Not really changing much       | BH    | CC    | EDUC  | Creation of programs to help with mental health needs and resources, and not just where to get help - patients won't seek care because they don't have anyone to care for their animals, pick kids up from school, etc. and part of the education needs to speak to resources available that will help problem solve issues at home that are preventing patients from seeking care |
| 1140 | 64770 | Average   | Not really changing much       | BH    | DRUG  |       | Mental health awareness programs and substance abuse prevention  |
| 1299 | 64735 | Good      | Decreasing - slipping downward | BH    | DRUG  |       | We HAVE to focus on mental health and substance abuse. With three murders in our town in a 5 week time period, it is imperative that we focus on mental health and do better with access to substance abuse treatment. This is a critical need in our community!   |
| 1397 | 64735 | Good      | Decreasing - slipping downward | BH    | DRUG  |       | Mental Health and drug abuse support   |
| 1132 | 65338 | Average   | Increasing - moving up         | BH    | INSU  |       | FREE childrens mental health when not on medicaid or insurance (fix it before it is too late)  |
| 1059 | 64735 | Very Good | Increasing - moving up         | BH    | IP    |       | Better access to mental/behavioral health providers and inpatient programs.  |
| 1008 | 64735 | Very Good | Increasing - moving up         | BH    | SUIC  | DRUG  | We need more accessible local care for Mental Health issues, including suicide prevention and drug addiction. We need more accountability for nursing home care providers and better care for nursing home residents.  |
| 1030 | 64740 | Good      | Not really changing much       | BH    |       |       | Mental Health crisis services. To include hospitalization  |
| 1038 | 64735 | Good      | Not really changing much       | BH    |       |       | Mental health program education for teens  |
| 1050 | 64740 | Average   | Increasing - moving up         | BH    |       |       | Behavioral needs met   |
| 1065 | 65301 | Average   | Increasing - moving up         | BH    |       |       | Mental health coaching   |
| 1086 | 65355 | Very Good | Decreasing - slipping downward | BH    |       |       | Mental health  |
| 1105 | 64735 | Very Good | Not really changing much       | BH    |       |       | Mostly placement for mental health issues  |
| 1113 | 65360 | Good      | Not really changing much       | BH    |       |       | Local mental health services in windsor including programs for autism in children and adults   |
| 1153 | 64735 | Good      | Increasing - moving up         | BH    |       |       | something to do with mental health   |
| 1221 | 64735 | Average   | Not really changing much       | BH    |       |       | Increased mental health  |
| 1306 |       | Very Good | Increasing - moving up         | BH    |       |       | Mental healthcare facility.  |
| 1200 | 64770 | Average   | Decreasing - slipping downward | CHRON | OBES  | BH    | Chronic conditions: Hypertension; COPD; CHF; Obesity; & Depression should be addressed. Therapy for drug users; alcoholics; psychotherapy. Grief therapy.  |
| 1107 | 64735 | Very Poor | Decreasing - slipping downward | CHRON |       |       | Chronic pain clinic  |
| 1357 | 64726 | Very Good | Increasing - moving up         | CLIN  | BH    | IP    | Expanded Walk In Clinic, or Urgent Care Mental Health Services-inpatient   |
| 1209 | 65338 | Average   | Not really changing much       | CLIN  | CHRON |       | urgent care, chronic disease education   |
| 1161 | 64735 | Good      | Increasing - moving up         | DENT  |       |       | Dental   |
| 1125 | 64735 | Good      | Increasing - moving up         | DERM  | ONC   |       | Dermatologist, oncologists   |
| 1330 | 66544 | Good      | Increasing - moving up         | DOCS  | EQUIP |       | The first is the environment, the second is the professional doctors, and then the advanced medical equipment  |
| 1191 | 12201 | Good      | Not really changing much       | DOCS  | FAC   |       | To meet the reasonable needs of patients, increase the medical service level of doctors, and build more good facilities  |
| 1183 | 64724 | Good      | Decreasing - slipping downward | DOCS  | OBG   |       | More doctors and OB care   |
| 1261 | 64735 | Average   | Decreasing - slipping downward | DOCS  | QUAL  |       | Physicians who would do their jobs in the hospital and not send them somewhere else for the same care to be given  |
| 1154 | 64735 | Average   | Increasing - moving up         | DOCS  | SPEC  | EMER  | More doctors for the clinic or specific doctors that just do the clinic. On call staff for certain equipment in the emergency room.  |
| 1142 | 64735 | Good      | Increasing - moving up         | DOCS  |       |       | Don't rely on Nurse Practitioners. If primary doctors are so overloaded that they can't see their patients, maybe they need to limit the number of new patients and the clinic should look to hire more doctors.   |
| 1271 | 64735 | Poor      | Decreasing - slipping downward | DRUG  | FAM   | FIT   | Drug programs, parenting, self respect/mental well-being and nutrition. Exercise and clean water program   |
| 1134 | 65301 | Good      | Increasing - moving up         | DRUG  | VIO   | PREV  | anti-drug, anti-domestic violence, encourage wellness visits   |
| 1053 | 65360 | Very Good | Not really changing much       | DRUG  |       |       | Drug use prevention/treatment in the community - outside of schools for adults   |
| 1072 | 64735 | Good      | Not really changing much       | DRUG  |       |       | drug addiction   |
| 1099 | 64735 | Good      | Not really changing much       | DRUG  |       |       | DRUG ABUSE PREVENTION  |
| 1100 | 64770 | Very Good | Increasing - moving up         | DRUG  |       |       | Drug abuse   |
| 1207 | 64735 | Average   | Increasing - moving up         | DRUG  |       |       | I think there is a huge drug problem in our community and I think it needs to be talked about more. There needs to be more than just compass and NA meetings for these people with addictions. I feel like the drug problem running rapid in Clinton and Windsor especially really needs to be addressed instead of being swept under the rug.                                     |
| 1281 | 65355 | Good      | Increasing - moving up         | DRUG  |       |       | Drug court/rehabilitation programs   |
| 1382 |       | Very Good | Increasing - moving up         | DRUG  |       |       | out reach for drug abuse treatment   |
| 1049 | 43420 | Good      | Increasing - moving up         | EDUC  |       |       | We need to carry out ideological education consciously.  |
| 1073 | 64735 | Average   | Not really changing much       | EMER  | INSU  | DERM  | Emergency Dept. that isn't out of network for insurances from local businesses. Dermatology.   |
| 1233 | 68001 | Poor      | Decreasing - slipping downward | EQUIP |       |       | Physicians other than those all associated with the same parent entity.  |
| 1270 | 21045 | Good      | Not really changing much       | FAC   | STFF  |       | Advanced equipment   |
| 1135 | 53523 | Good      | Not really changing much       | FAC   |       |       | More medical facilities and staff  |
| 1373 | 64735 | Very Good | Increasing - moving up         | FAC   |       |       | Create new facilities and teams  |
| 1087 | 65355 | Average   | Not really changing much       | FAM   | DOH   | EDUC  | Long term care is a concern. Facilities in the area have very low star ratings   |
| 1333 | 64735 | Very Good | Increasing - moving up         | FAM   |       |       | More access for family services care local. Local health department and local healthcare services working together to educate community on how to access services needed. basically: Who can I call fro help? or Where do i go for help?   |
|      |       |           |                                |       |       |       | Parenting classes  |

## CHNA 2022 Community Feedback: Henry & Benton Counties MO (N=408)

| ID   | Zip   | Rating    | Movement                       | c1   | c2    | c3    | What "new" community health programs should be created to meet current community health needs?   |
|------|-------|-----------|--------------------------------|------|-------|-------|--|
| 1078 | 64740 | Average   | Decreasing - slipping downward | FEM  |       |       | IVF and womens health programs   |
| 1076 | 64735 | Very Good | Increasing - moving up         | FF   | REF   |       | We need a specific case management system where when high risk patients are released someone is following up for a specific amount of time to ensure they are getting the care that they need, and can answer any questions they may have. They could also initiate referrals and this way readmission rates would slow down.  |
| 1175 | 64735 | Very Good | Not really changing much       | FINA | EDUC  |       | Programs to help people budget and survive with little or no finances. So they can seek medical and dental services.   |
| 1124 | 64735 | Good      | Increasing - moving up         | FINA | NH    |       | Seniors need help with financial and a warm hand off!  |
| 1181 | 64735 | Average   | Increasing - moving up         | FIT  | NUTR  |       | Exercise/ nutrition programs for senior citizens. Keep therapy pool open to public year around.  |
| 1057 | 65360 | Poor      | Decreasing - slipping downward | FIT  | OBES  | CARD  | The Windsor area would benefit from a place to exercise. For obesity and cardiac.  |
| 1074 | 64776 | Average   | Increasing - moving up         | FIT  |       |       | fitness classes for families maybe yoga  |
| 1304 | 65360 | Good      | Increasing - moving up         | FIT  |       |       | A fitness facility would be wonderful!   |
| 1179 | 64735 | Average   | Not really changing much       | FUND | INSU  | NEG   | Some kind of funding for uninsured people so people don't die of neglect   |
| 1292 | 64735 | Very Good | Increasing - moving up         | HOUS | TRAN  |       | Affordable housing and public transportation   |
| 1063 | 64735 | Very Good | Not really changing much       | HOUS |       |       | Homeless shelter?  |
| 1029 | 64735 | Very Good | Increasing - moving up         | IP   | PSY   |       | Need inpatient psychiatric care  |
| 1060 | 64735 | Very Good | Increasing - moving up         | IP   |       |       | Larger availability for inpatient behavioral health services.  |
| 1095 | 64735 | Very Good | Increasing - moving up         | NH   |       |       | Geriatric care   |
| 1185 | 65355 | Average   | Not really changing much       | NUTR | FIT   |       | focus on nutrition and exercise awareness  |
| 1005 | 64735 | Good      | Increasing - moving up         | NUTR |       |       | Natural foods and plant based diets  |
| 1324 | 64735 | Good      | Not really changing much       | NUTR |       |       | Healthy eating programs/camps for children, families, groups   |
| 1184 | 65360 | Good      | Increasing - moving up         | OBES | NUTR  | NH    | More info to obesity, heart danger, not enough nutrition info, elderly food help.  |
| 1316 | 64735 | Very Good | Increasing - moving up         | OBES | NUTR  |       | Obesity and nutrition  |
| 1194 | 64735 | Good      | Increasing - moving up         | OBES |       |       | SOMETHING TO ADDRESS OBEISTY.  |
| 1301 | 64770 | Poor      | Not really changing much       | OBES |       |       | Obesity care   |
| 1092 | 64763 | Very Good | Increasing - moving up         | OPHT | BH    | SUIC  | Eye Care places Mental Health help suicide   |
| 1339 | 64735 | Very Good | Increasing - moving up         | OPHT |       |       | Find a way to bring medical retinal services to Clinton.   |
| 1396 | 64735 | Average   | Decreasing - slipping downward | PEDS | BH    | SPEC  | We need pediatricians and pediatric mental health providers, not to mention specialty providers such as Dermatology, Gastroenterology, Endocrinology, etc.   |
| 1044 | 65326 | Average   | Not really changing much       | PEDS | SCH   |       | More pediatric programs to test/treat autism/adhd as well as therapy for those individuals and families - less wait times for these programs   |
| 1366 | 64735 | Very Good | Increasing - moving up         | PNEO | CLIN  | PEDS  | Expanded Prenatal Care Urgent Care Clinic Expanded Pediatric options In Home and Nursing home Quality are severely lacking   |
| 1173 | 64735 | Average   | Not really changing much       | PNEO |       |       | Prenatal classes   |
| 1222 | 64735 | Average   | Not really changing much       | POV  | TRAN  | ACC   | Programs that focus on the help for the underprivileged. Bathing and laundry access for the homeless or nearly homeless.. Access to Transportation. While we have all these. Access is limited by costly transportation. On the surface it doesn't seem too expensive but when they have limited resources and need several trips per month it really takes alot of their very limited income. |
| 1371 | 64735 | Very Good | Increasing - moving up         | PREV | DRUG  |       | The focus on wellness and preventative. Drug awareness programs.   |
| 1137 | 64735 | Very Good | Increasing - moving up         | PREV | FINA  | NURSE | More prevention, reduce service costs, nursing waiting time reduced.   |
| 1257 | 95817 | Very Good | Increasing - moving up         | PREV | TRAIN |       | Disease-based medical model, prevention and health management-based medical model; this paper considers community health construction after long-term development. At present, it has entered a new stage, and all-round training and health management are the new community  |
| 1022 | 64735 | Very Good | Increasing - moving up         | PREV |       |       | Wellness   |
| 1066 | 64735 | Poor      | Decreasing - slipping downward | PREV |       |       | Preventive health and getting to the root cause of the disease and not have the band aid fix   |
| 1214 | 65338 | Average   | Increasing - moving up         | PREV |       |       | Wellness and preventative care services  |
| 1408 | 65338 | Good      | Not really changing much       | PREV |       |       | Establish wellness hours, times when community members can have their blood pressure and glucose checked and get referrals to PCPs if needed.  |
| 1028 | 64735 | Good      | Increasing - moving up         | PSY  |       |       | Need a psychiatric unit  |
| 1056 | 64735 | Poor      | Not really changing much       | QUAL |       |       | None, focus on improving where we are currently lacking would be key before try to introduce something new. The healthcare community keeps adding new "stuff" but it isn't make the daily services provided any better.  |
| 1219 | 64735 | Good      | Increasing - moving up         | SERV | BH    | PEDS  | Increased services for indigent people. Increased mental health. Increased pediatric services.   |
| 1081 | 64735 | Good      | Increasing - moving up         | SERV |       |       | More access to health services   |
| 1245 | 10004 | Very Good | Not really changing much       | SERV |       |       | Improve services and health care   |
| 1246 | 76011 | Good      | Increasing - moving up         | SERV |       |       | Improve services and health care   |
| 1275 | 64735 | Very Good | Not really changing much       | SH   |       |       | Programs at schools to teach kids about physical and mental issues; general care and why it's important to have check ups and follow doctor's orders; and avoiding poor health choices...  |
| 1004 | 64776 | Good      | Not really changing much       | SMOK |       |       | smoking cessation programs. not just meetings and counseling.  |
| 1110 | 64735 | Very Good | Decreasing - slipping downward | SMOK | FEM   | BH    | smoking cessation, womens health and birth control options, mental health programs for those who dont have insurance but need help   |
| 1071 | 64735 | Average   | Not really changing much       | SPEC | SCH   |       | more specialty clinics and faster access to specialty care   |
| 1356 | 65360 | Average   | Increasing - moving up         | SPRT | OBES  | BH    | More free support groups, weightloss, depression, abuse, single mothers/Fathers. Most people struggling and not getting help from their busy doctors could use support but joining Weightwatchers cost and you can't afford that.  |
| 1314 | 64735 | Very Good | Increasing - moving up         | SPRT | PULM  | DIAB  | Support groups for Pulmonary, Grief, Diabetes  |
| 1144 | 64735 | Very Good | Increasing - moving up         | SPRT |       |       | Cystic Fibrosis Awareness/Support Group  |
| 1312 | 64770 | Average   | Increasing - moving up         | SPRT |       |       | Meetings help once a month on how to fill out paperwork for various reasons.   |
| 1114 | 63026 | Good      | Increasing - moving up         | STFF | EDUC  | TRAIN | Increase the workforce and expand education programs to train more nurses and other health care providers.   |
| 1165 | 64788 | Good      | Increasing - moving up         | SUIC | SH    |       | Too much teen suicide lately. Would be nice if you could visit the schools to talk about this.   |
| 1064 | 64788 | Very Good | Not really changing much       | SURG |       |       | A local oral surgeon would be great.   |
| 1090 | 20009 | Average   | Increasing - moving up         | TECH |       |       | Adding smart Devices   |
| 1402 | 64726 | Average   | Not really changing much       | TELE | DOH   |       | More telehealth options; and public health outreach programs   |

### CHNA 2022 Community Feedback: Henry & Benton Counties MO (N=408)

| ID   | Zip   | Rating    | Movement                       | c1   | c2    | c3   | What "new" community health programs should be created to meet current community health needs?   |
|------|-------|-----------|--------------------------------|------|-------|------|--|
| 1380 | 64776 | Good      | Increasing - moving up         | TRAN | HANDI |      | Transportation for wheel chair bound patients.   |
| 1009 | 65360 | Average   | Increasing - moving up         | TRAN | HH    |      | improved transportation options, especially for those living outside city limits. Also, increased home health care providers. We need more options for increased levels of help in homes for patients that may not qualify for skilled nursing/nursing home level of care.   |
| 1308 | 65355 | Average   | Not really changing much       | TRAN | SPEC  |      | Transportation if not specialist avail in county   |
| 1122 | 64776 | Average   | Increasing - moving up         | TRAN |       |      | Transportation   |
| 1387 | 64735 | Good      | Increasing - moving up         | VACC | PREV  | INSU | Free Vaccine clinic and wellness clinic outside of the building. "Taking health care to you". I was one told by a patient that we are to "snoody" for her to see a PCP here at the clinic. Need to seem more open help the entire community instead of jsut people with health insurance. Health care is so expensive and people should not have to worry about the cost of getting their child vaccinated before school starts because they don't have health insurance. Hosting a Medicaid application seminar. Someone for SS and the BO there to answer any questions. |
| 1016 | 64735 | Very Poor | Decreasing - slipping downward | VET  | PHARM |      | Va approved care with prescription access  |
| 1126 | 64740 | Good      | Decreasing - slipping downward | VIO  | FEM   |      | Confidential help for abused women   |

Let Your Voice Be Heard!

**In 2019, Golden Valley Memorial Healthcare, in partnership with Compass Health Network and Henry County Health Department surveyed our community to assess health needs. Today, we request your input again in order to create a 2022 Henry and Benton County, MO Community Health Needs Assessment (CHNA).**

**To gather current area feedback, a short online survey has been created to evaluate current community health needs and delivery. Survey deadline will Friday, September 23rd, 2022.**

**While your participation is voluntary and confidential, all community input is valued. Thank you for your immediate attention!**

1. In your opinion, how would you rate the "Overall Quality" of healthcare delivery in your community?

- Very Good     Good     Average     Poor     Very Poor

2. When considering "overall community health quality", is it ...

- Increasing - moving up     Not really changing much     Decreasing - slipping downward

Please specify why.

3. In your own words, what is the general perception of healthcare delivery for our community (i.e. hospitals, doctors, public health, etc.)? Be Specific.

4. In your opinion, are there healthcare services in our community/your neighborhood that you feel need to be improved, worked on and/or changed? (Be specific)

5. From our past CHNA, a number of health needs were identified as priorities. Are any of these an ongoing problem for our community? Please select all that apply.

- |   |  |
|---|--|
| <input type="checkbox"/> Awareness of Mental Health Specialty Services      | <input type="checkbox"/> Improve Quality of Nursing Home Care Services   |
| <input type="checkbox"/> Expand Community "Wellness" Education              | <input type="checkbox"/> Increase Mental Health Delivery (Access / Placement)  |
| <input type="checkbox"/> Increase # of Dentists who take Medicaid           | <input type="checkbox"/> Increase Visiting Specialists for Pediatrics, Oncology, Psychiatry, Dermatology, Orthopedics, Urology |
| <input type="checkbox"/> Emergency Department                               | <input type="checkbox"/> Lessen Emergency Room Wait Time   |
| <input type="checkbox"/> Drug Abuse (Heroin, Marijuana, Meth, Prescription) | <input type="checkbox"/> Obesity (Nutrition / Exercise)  |
| <input type="checkbox"/> Economic Development                               | <input type="checkbox"/> Provide Local Oral Surgeon Services   |
| <input type="checkbox"/> Encourage Pediatric Care Services                  | <input type="checkbox"/> Services for Autistic Children / Adults   |
| <input type="checkbox"/> Healthcare Transportation                          | <input type="checkbox"/> Urgent Care Services  |

6. Which past CHNA needs are NOW the "most pressing" for improvement? Please select top three.

- |   |  |
|---|--|
| <input type="checkbox"/> Awareness of Mental Health Specialty Services      | <input type="checkbox"/> Improve Quality of Nursing Home Care Services   |
| <input type="checkbox"/> Expand Community "Wellness" Education              | <input type="checkbox"/> Increase Mental Health Delivery (Access / Placement)  |
| <input type="checkbox"/> Increase # of Dentists who take Medicaid           | <input type="checkbox"/> Increase Visiting Specialists for Pediatrics, Oncology, Psychiatry, Dermatology, Orthopedics, Urology |
| <input type="checkbox"/> Emergency Department                               | <input type="checkbox"/> Lessen Emergency Room Wait Time   |
| <input type="checkbox"/> Drug Abuse (Heroin, Marijuana, Meth, Prescription) | <input type="checkbox"/> Obesity (Nutrition / Exercise)  |
| <input type="checkbox"/> Economic Development                               | <input type="checkbox"/> Provide Local Oral Surgeon Services   |
| <input type="checkbox"/> Encourage Pediatric Care Services                  | <input type="checkbox"/> Services for Autistic Children / Adults   |
| <input type="checkbox"/> Healthcare Transportation                          | <input type="checkbox"/> Urgent Care Services  |

7. In your opinion, what are the root causes of "poor health" in our community? Please select top three.

- |  |  |
|--|--|
| <input type="checkbox"/> Chronic Disease                     | <input type="checkbox"/> Limited Access to Mental Health |
| <input type="checkbox"/> Lack of Health & Wellness           | <input type="checkbox"/> Family Assistance programs      |
| <input type="checkbox"/> Lack of Nutrition/Exercise Services | <input type="checkbox"/> Lack of Health Insurance        |
| <input type="checkbox"/> Limited Access to Primary Care      | <input type="checkbox"/> Neglect                         |
| <input type="checkbox"/> Limited Access Specialty Care       |  |

Other (Be Specific).

8. How would our community area residents rate each of the following health services?

|                          | Very Good             | Good                  | Fair                  | Poor                  | Very Poor             |
|--------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Ambulance Services       | <input type="radio"/> |
| Child Care               | <input type="radio"/> |
| Chiropractors            | <input type="radio"/> |
| Dentists                 | <input type="radio"/> |
| Emergency Room           | <input type="radio"/> |
| Eye Doctor/Optomtrist    | <input type="radio"/> |
| Family Planning Services | <input type="radio"/> |
| Home Health              | <input type="radio"/> |
| Hospice/Palliative       | <input type="radio"/> |
| Telehealth               | <input type="radio"/> |

9. How would our community area residents rate each of the following health services?

|                            | Very Good             | Good                  | Fair                  | Poor                  | Very Poor             |
|----------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Inpatient Services         | <input type="radio"/> |
| Mental Health Services     | <input type="radio"/> |
| Nursing Home/Senior Living | <input type="radio"/> |
| Outpatient Services        | <input type="radio"/> |
| Pharmacy                   | <input type="radio"/> |
| Primary Care               | <input type="radio"/> |
| Public Health              | <input type="radio"/> |
| School Health              | <input type="radio"/> |
| Visiting Specialists       | <input type="radio"/> |

Other (please specify)

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

|                                       | Very Good             | Good                  | Fair                  | Poor                  | Very Poor             |
|---------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Behavioral/Mental Health              | <input type="radio"/> |
| Emergency Preparedness                | <input type="radio"/> |
| Food and Nutrition Services/Education | <input type="radio"/> |
| Health Screenings/Education           | <input type="radio"/> |
| Prenatal/Child Health Programs        | <input type="radio"/> |
| Substance Use/Prevention              | <input type="radio"/> |
| Suicide Prevention                    | <input type="radio"/> |
| Violence/Abuse Prevention             | <input type="radio"/> |
| Women's Wellness Programs             | <input type="radio"/> |

11. Do you have any Covid-19 worries and/or concerns in regards to Community Health delivery?

Yes

No

If yes, please specify your thoughts.

12. Over the past 2 years, did you or someone in your household receive healthcare services outside of your County?

Yes

No

If yes, please specify the services received

13. Access to care is vital. Are there enough providers/staff available at the right times to care for you and our community?

Yes

No

If NO, please specify what is needed where. Be specific.

14. What "new" community health programs should be created to meet current community health needs?

15. Are there any other health needs (listed below) that need to be discussed further at our upcoming CHNA Town Hall meeting? Please select all that apply.

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Abuse/Violence                   | <input type="checkbox"/> Health Literacy                   | <input type="checkbox"/> Poverty                       |
| <input type="checkbox"/> Access to Health Education       | <input type="checkbox"/> Heart Disease                     | <input type="checkbox"/> Preventative Health/Wellness  |
| <input type="checkbox"/> Alcohol                          | <input type="checkbox"/> Housing                           | <input type="checkbox"/> Sexually Transmitted Diseases |
| <input type="checkbox"/> Alternative Medicine             | <input type="checkbox"/> Lack of Providers/Qualified Staff | <input type="checkbox"/> Suicide                       |
| <input type="checkbox"/> Behavioral/Mental Health         | <input type="checkbox"/> Lead Exposure                     | <input type="checkbox"/> Teen Pregnancy                |
| <input type="checkbox"/> Breastfeeding Friendly Workplace | <input type="checkbox"/> Neglect                           | <input type="checkbox"/> Telehealth                    |
| <input type="checkbox"/> Cancer                           | <input type="checkbox"/> Nutrition                         | <input type="checkbox"/> Tobacco Use                   |
| <input type="checkbox"/> Care Coordination                | <input type="checkbox"/> Obesity                           | <input type="checkbox"/> Transportation                |
| <input type="checkbox"/> Diabetes                         | <input type="checkbox"/> Occupational Medicine             | <input type="checkbox"/> Vaccinations                  |
| <input type="checkbox"/> Drugs/Substance Abuse            | <input type="checkbox"/> Ozone (Air)                       | <input type="checkbox"/> Water Quality                 |
| <input type="checkbox"/> Family Planning                  | <input type="checkbox"/> Physical Exercise                 |  |

Other (Please specify).

16. For reporting purposes, are you involved in or are you a....? Please select all that apply.

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Business/Merchant               | <input type="checkbox"/> EMS/Emergency         | <input type="checkbox"/> Other Health Professional |
| <input type="checkbox"/> Community Board Member          | <input type="checkbox"/> Farmer/Rancher        | <input type="checkbox"/> Parent/Caregiver          |
| <input type="checkbox"/> Case Manager/Discharge Planner  | <input type="checkbox"/> Hospital/Health Dept. | <input type="checkbox"/> Pharmacy/Clinic           |
| <input type="checkbox"/> Clergy                          | <input type="checkbox"/> Housing/Builder       | <input type="checkbox"/> Media (Paper/TV/Radio)    |
| <input type="checkbox"/> College/University              | <input type="checkbox"/> Insurance             | <input type="checkbox"/> Senior Care               |
| <input type="checkbox"/> Consumer Advocate               | <input type="checkbox"/> Labor                 | <input type="checkbox"/> Teacher/School Admin      |
| <input type="checkbox"/> Dentist/Eye Doctor/Chiropractor | <input type="checkbox"/> Law Enforcement       | <input type="checkbox"/> Veteran                   |
| <input type="checkbox"/> Elected Official - City/County  | <input type="checkbox"/> Mental Health         |  |

Other (Please specify).

17. What is your home ZIP code? Please enter 5-digit ZIP code; for example 66544 or 65305



**VVV Consultants LLC**



## **VVV Consultants LLC**

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**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