

SSM Health Cardinal Glennon Children's Hospital
1465 S. Grand Boulevard, St. Louis, MO 63104
Approved by St. Louis Regional Board on March 25, 2019



2019 - 2021 Community Health Needs *Implementation* Strategy



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Message to Our Community

SSM Health St. Mary's Hospital, SSM Health Cardinal Glennon Children's Hospital and SSM Health Saint Louis University Hospital, members of SSM Health, delivers exceptional, compassionate care to the St. Louis community. Inspired by our founding Franciscan Sisters of Mary and guided by our Mission – Through our exceptional health care services, we reveal the healing presence of God – we cherish the sacredness and dignity of each person as demonstrated through our Values of compassion, respect, excellence, stewardship and community.

Our sustained community commitment can be seen through our collaborative partnerships with residents and organizations. We rely on these relationships to help us identify and develop plans to address high-priority community health needs.

Over the last 12 months, in collaboration with our community partners, we have conducted a community health needs assessment by gathering health-related information from Think Health St. Louis – Partnership for a Healthy St. Louis regarding the St. Louis County and St. Louis City communities. We have also conducted community focus groups to identify concerns about the health of these communities and the number of area-based programs and organizations that exist to address their needs. These discussions identified needs that were prioritized based on the level of importance to community members and the hospital's ability to truly make an impact.

This document specifically addressed the Community Health Need Assessment Implementation Plan for SSM Health Cardinal Glennon Children's Hospital.

SSM Health St. Mary's Hospital

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Richmond Heights, MO
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Travis Capers, President

SSM Health Cardinal Glennon Children's Hospital

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Contact us for more information or to take part in improving the health of our community by visiting our website at ssmhealth.com

background

SSM Health Cardinal Glennon Children’s Hospital is pleased to present the 2018 Community Health Needs Assessment (CHNA). This report provides an overview of the health needs and priorities associated with our service area. The goal of this report is to provide individuals with a deeper understanding of the health needs in their community, as well as help guide the hospital in its community benefit planning efforts and development of the 2019-2021 community health needs assessment implementation strategy to address evaluated needs. SSM Health Cardinal Glennon Children’s Hospital last conducted a CHNA in 2015

The Affordable Care Act (ACA) requires 501(c)(3), tax-exempt hospitals to conduct a CHNA every three tax years and adopt a strategic implementation plan for addressing identified needs.



priorities

SSM Health Cardinal Glennon Children’s Hospital in collaboration with St. Louis Children’s Hospital and Shriner’s Hospital held a meeting with local and regional stakeholders to determine priorities for the 2019-2021 community health needs strategic implementation plan. Priorities include:

1. Access to Care
2. Maternal / Infant Health
3. Asthma

strategies

Access to Care

Resources include partnerships with Federally Qualified Health Centers (FQHC) and St. Louis Integrated Health Network (IHN) community referral coordinator program.

Maternal / Infant Health

Resources include SSM Health Maternal Services, St. Louis University Division of Maternal Fetal Medicine, Generate Health STL, FLOURISH St. Louis, Thrive St. Louis

Asthma

Resources include SSM Health Telehealth Services, SLU Care, Urgent Care for Kids, SSM Health Medical Group, Asthma and Allergy Foundation, Catholic Charities

About SSM Health and SSM Health Cardinal Glennon Children's Hospital



SSM Health

SSM Health is a Catholic not-for-profit health system serving the comprehensive health needs of communities across the Midwest through a robust and fully integrated health care delivery system. Headquartered in St. Louis, SSM Health has care delivery sites in Missouri, Illinois, Oklahoma and Wisconsin. The health system includes 24 hospitals, more than 300 physician offices and other outpatient care sites, 10 post-acute facilities, comprehensive

*Through our exceptional health care services,
we reveal the healing presence of God.*

home care and hospice services, a pharmacy benefit company, an insurance company, a technology company and an Accountable Care Organization.

With more than 10,000 providers and 40,000 employees in four states, SSM Health is one of the largest

employers in every community it serves. An early adopter of the electronic health record (EHR), SSM Health is a national leader for the depth of its EHR integration.

SSM Health Cardinal Glennon Children's Hospital

highlight of services

SSM Health Cardinal Glennon Children's Hospital has more than 60 medical specialty areas and offers a distributed network of pediatric programs throughout Missouri and Illinois. SSM Health Cardinal Glennon is home to:

- Dana Brown Neonatal Intensive Care Unit
- St. Louis Fetal Care Institute
- Dorothy and Larry Dallas Heart Center
- Bob Costas Cancer Center
- St. Louis Cord Blood Bank
- Missouri Poison Center
- Level 1 pediatric trauma center in Missouri and Illinois

community benefit

In 2017, SSM Health Cardinal Glennon Children's Hospital provided \$69.4 million in community benefit, comprised of charity care, community services, unpaid costs of Medicaid and other public programs.

affiliations and community partnerships

SSM Health Cardinal Glennon Children's Hospital is proud to partner with many different organizations to improve the health outcomes of its community including:

- SLU Care – Saint Louis University
- Ronald McDonald House
- St. Louis Crisis Nursery
- Generate Health STL
- Juvenile Diabetes Research
- Hospital Violence Intervention Program Collaboration

Hospital at a Glance	
Admissions	7,585
Outpatient Visits	158,038
ER Visits	62,896
Births	-----
Beds	195
Employees	1,867
Medical Staff	829
Volunteers	297
Charity Care	\$69.4MM

The Health Needs of Our Community

SSM Health Cardinal Glennon Children’s Hospital in collaboration with St. Louis Children’s Hospital and Shriners’ Hospital conducted a focus group to identify the health needs of our community. The group represented broad and diversified interests of St. Louis County and City. Included in the focus group were representatives from St. Louis County and St. Louis City Health Departments.

Participants were asked to identify the primary health issues affecting constituents that they represent. After exhausting individual concerns, the focus was shifted towards issues identified in the 2016 cycle. Items not previously discussed were re-evaluated by the participants. After all discussion had concluded, a survey inclusive of all topics discussed was distributed. Participants were asked to score each health issue in terms of their perception of its importance and the ability of the hospital to make an impact. The results were collected, analyzed and reviewed by senior leadership prior to identify the top priorities to be addressed.

key priorities

In St. Louis County, there are 123 Providers per 100,000 Persons compared to 85 in St. Louis City



Access to Care

Access to primary care providers increases the likelihood that community members will have routine checkups and screenings. Moreover, those with access to primary care are more likely to know where to go for treatment in acute situations. Communities that lack a sufficient number of primary care providers typically have members who delay necessary care when sick and conditions can become more severe and complicated.

82.5% of St. Louis County mothers receive prenatal care compared to 73.2% in St. Louis City



Maternal / Infant Health

Babies born to mothers who do not receive prenatal care are three times more likely to have a low birth weight and five times more likely to die than those born to mother who receive care.

Pediatric ER visits per 10,000 persons under age 18 in St. Louis County is 166 compared to 320.7 in St. Louis City



Chronic Disease - Asthma

Asthma in children is one of the most common long-term disease in children resulting in missed school days, limitations on activities and ER visits.

Our Progress Since 2015

Our last Community Health Needs Assessment was conducted in 2015. Below are the health needs identified in the 2016-2018 CHNA implementation plan and the strategies to address the issues.

SSM Health Cardinal Glennon Children's Hospital

Access to Care

Goals	Source	Release Date	Baseline	CY16TD	CY16YE	CY17TD	CY17YE	CY18TD	CY18YE
Improve overall Health Behaviors Ranking of St. Louis County from 7, as reported in 2015, to 6 by 2018 (HCI)	HCI	Annual	7	2	2	2	2	*	*
Improve Missouri Kids Count composite county rank in St. Louis from 115 in 2014 to 110 by 2018 (Missouri Kids Count)	MKC	2yr lag	115 (2010-2014)	115 (2010-2014)	115 (2010-2014)	115 (2010-2014)	115 (2010-2014)	115 (2017)	115 (2017)

* This data through HCI is no longer available, due to changes in contracted resources. It is not a data point available through other public sites, therefore not updated information can be provided.

Maternal/Infant Health

Goals	Source	Release Date	Baseline	CY16TD	CY16YE	CY17TD	CY17YE	CY18TD	CY18YE
Decrease infant mortality in St. Louis City from 10.9 deaths/1,000 live births to 10.5 deaths/1,000 live births by 2018 (MKC)	MKC	2yr lag	10.9 (2014)	10.9 (2014)	10.9 (2014)	9.8 (2015)	9.8 (2015)	9.5 (2016)	9.5 (2016)
Reduce the percentage of preterm births in St. Louis County from 12.4% reported in 2015 to the Healthy People 2020 goal of 11.4% by 2018 (HCI)	HCI	2yr lag	12.4% (2013)	10.5% (2014)	10.5% (2014)	10.5% (2014)	10.5% (2014)	11.27 (2017)	11.27 (2017)

Asthma

Goals	Source	Release Date	Baseline	CY16TD	CY16YE	CY17TD	CY17YE	CY18TD	CY18YE
Decrease rate of pediatric asthma inpatient hospitalizations in St. Louis from 57.6 hospitalizations per 10,000 population, as reported in 2012, to 54.6 hospitalizations per 10,000 persons by 2018 (MICA)	MICA	57.6 (2012)	57.6	38.3 (2013)	50.5 (2014)	50.5 (2014)	50.5 (2014)	42.15 (2015)	42.15 (2015)
Decrease St. Louis rate of pediatric asthma emergency room visits from 336.7 visits per 10,000 persons in 2012 to 330 visits per 10,000 persons by 2018 (MICA)	MICA	336.7 (2012)	336.7	313.2 (2013)	357.4 (2014)	357.4 (2014)	357.4 (2014)	326.1 (2015)	326.1 (2015)
Decrease number of asthma related 30-day readmissions (w/o CC/MCC) at SSM Health Cardinal Glennon Children's Hospital from 3.1% in 2015 to 2.8% by 2018 (Readmissions Report)	Readmissions Report	Ad hoc	3.1%	2.1%	2.4%	2.5%	4.1%*	2.3%	2.1%

SSM Health Cardinal Glennon Children’s Hospital in collaboration with St. Louis Children’s Hospital and Shriner’s Hospital conducted a focus group that represented the broad interest and diversity of St. Louis County and St. Louis City. Representation also included stakeholders from St. Louis County and / or St. Louis City Health Departments. Participants were asked to identify the primary health issues affecting constituents that they represent. After exhausting individual concerns, the focus was shifted towards issues identified in the 2016 cycle. Items not previously discussed were re-evaluated by the participants. After all discussion had concluded, a survey inclusive of all topics discussed was distributed. Participants were asked to score each health issue in terms of their perception of its importance and the ability of the hospital to make an impact.

In addition to the primary data collected, secondary data was derived from a variety of sources including Think Health St. Louis – St. Louis Partnership for a Healthy Community, which includes data pulls from Healthy Communities Institute covering topics in area of health, determinants of health and quality of life.

Primary and secondary data was reviewed and analyzed by the campus executive team and top priorities were identified for the 2019-2021 community health needs assessment / strategic implementation plan cycle.

Priority #1 **Access to Care**

Priority #2 **Maternal / Infant Health**

Priority #3 **Asthma**



Access to Care

To stay healthy, children require regular checkups, dental and vision care, and medical attention for illness and injury. Children with health insurance are more likely to have better health throughout their childhood and adolescence. They are more likely to receive required immunizations, fall ill less frequently, obtain necessary treatment when they do get sick, and perform better at school. Having health insurance lowers barriers to accessing care, which is likely to prevent the development of more serious illnesses.

- Access to primary care providers increases the likelihood that community members will have routine checkups and screenings. Moreover, those with access to primary care are more likely to know where to go for treatment in acute situations. Communities that lack a sufficient number of primary care providers typically have members who delay necessary care when sick and conditions can become more severe and complicated. Per 100,000 persons, there are 85 providers in St. Louis County and 123 providers in St. Louis City. Primary care providers include practicing physicians specializing in general practice medicine, family medicine, internal medicine, and pediatrics.
- Children ages 0-17 with health insurance is at 96.8% in St. Louis County and 96.3% in St. Louis City. Healthy People 2020 goal is 100%.
- Family income has been shown to affect a child's well-being in numerous studies. Compared to their peers, children in poverty are more likely to have physical health problems like low birth weight or lead poisoning, and are also more likely to have behavioral and emotional problems. Children in poverty also tend to exhibit cognitive difficulties, as shown in achievement test scores, and are less likely to complete basic education. St. Louis City / St. Louis County is divided into 5 regions, the corresponding children living in poverty is listed next to the region:

Inner North – 37.7%

Outer North – 18.5%

Central – 9.4%

South – 8.6%

West – 4.4%



Priority #1

Improve Access to Care

action plan

- In partnership with the Integrated Health Network, improve patient navigation system and continuity of care through the community referral coordinator role
- Through the expansion of pediatric specialty services in North St. Louis County, South St. Louis County and Midtown St. Louis City develop community outreach partnerships to increase utilization of needed services
- In partnership with Health Literacy Missouri, identify opportunities for health improvement throughout SSM Health Cardinal Glennon Children's Hospital facilities and develop strategies to address barriers
- Continue to implement foster care medical home program for the more than 800 foster children living in St. Louis City and St. Louis County
- Develop strategies to partner with area schools in telehealth primary care clinics

community partners

- Health Literacy Missouri
- SSM Health Cardinal Glennon Children's Hospital Child Protection
- SSM Telehealth Services
- School Districts

supporting resources

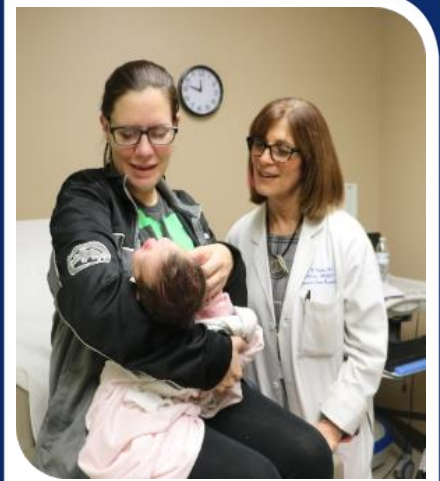
- St. Louis Partnership for a Healthy Community
- Church groups
- Missouri DSS
- Integrated Health Network



Maternal / Infant Health

Increasing the number of women who receive prenatal care, and who do so early in their pregnancies, can improve birth outcomes and lower health care costs by reducing the likelihood of complications during pregnancy and childbirth.

- 82.5% of St. Louis County mothers received prenatal care compared to 73.2% of St. Louis City mothers. Babies born to mothers who do not receive prenatal care are three times more likely to have a low birth weight and five times more likely to die than those born to mothers who do get care.
- Infant mortality rate continues to be one of the most widely used indicators of the overall health status of a community. The leading causes of death among infants are birth defects, preterm delivery, low birth weight, Sudden Infant Death Syndrome (SIDS), and maternal complications during pregnancy. St. Louis City has a rate of 11.2 per 1,000 live births compared to St. Louis County at 7.7. The Healthy People 2020 national health target is to reduce the infant mortality rate to 6 deaths per 1,000 live births.



Priority #2

Improve Maternal / Infant Health

action plan

- Expand WISH clinic at SSM Health St. Mary's Hospital – St. Louis serving new mothers dealing with substance abuse. In partnership with United Way 2-1-1 program, develop outreach strategies to community organizations working in the substance abuse space including access to kiosks and telephony for direct access also at SSM Health Cardinal Glennon Children's Hospital and SSM Health DePaul Hospital.
- Develop strategies to align with St. Louis Partnership for a Health Community initiatives to address safe sleep for babies in St. Louis
- Continue to actively participate in the Generate Health Build Grant focusing on improving maternal and infant health outcomes by targeting transportation access for pregnant women and new parents in two contiguous zip codes of 63106 and 63107 in the City of St. Louis.
- Work with FLOURISH St. Louis, a diverse community partnership designed to work in a new way to achieve large-scale, lasting improvements in the health and well-being of St. Louis babies and families
- Through Thrive St. Louis, establish seamless referral process for women needing prenatal care
- Partner with community groups to educate residents regarding the importance of prenatal care and the services available regardless of health insurance at OB Care Center at SSM Health DePaul Hospital and SSM Health St. Mary's Hospital – St. Louis

community partners

- Generate Health STL
- Thrive St. Louis
- FLOURISH St. Louis
- United Way 211

supporting resources

- St. Louis Partnership for a Healthy Community
- Saint Louis University Division of Maternal Fetal Medicine
- SSM Health OB Care Center



Asthma

Asthma in children is a serious public health problem in the US; it is one of the most common long-term diseases in children. The National Health Interview Survey has found that persons under 18 years have higher rates of asthma than any other age group. Asthma in children results in missed days of school, limitations on daily activities, emergency department visits, and hospitalizations. Moreover, asthma disproportionately affects low-income and minority children. There is no cure for asthma, but for most people, the symptoms can be managed through a combination of long-term medication prevention strategies and short-term quick relievers.

- Asthma is a condition in which a person's air passages become inflamed, and the narrowing of the respiratory passages makes it difficult to breathe. Symptoms can include tightness in the chest, coughing, and wheezing. These symptoms are often brought on by exposure to inhaled allergens, such as dust, pollen, mold, cigarette smoke, and animal dander, or by exertion and stress. Reducing exposure to poor housing conditions, traffic pollution, secondhand smoke and other factors impacting air quality can help prevent asthma and asthma attacks.
- Annual age adjusted emergency visits due to asthma per 10,000 under the age of 18 is 116 for St. Louis County and 320.7 for St. Louis City
- Annual age adjusted hospitalization rate due to asthma per 10,000 under the age of 18 is 19 for St. Louis County and 45.4 for St. Louis City



Priority #3

Improve Asthma Health Management

action plan

- Reduce the number of 30-day readmissions at SSM Health Cardinal Glennon Children's Hospital by reducing non-compliance with discharge medication. Initiatives include patient education, community referral coordination as needed to primary care and identifying community partners to disseminate educational materials
- Improve pediatrician office utilization of best practice asthma clinical protocol by distributing the protocol to pediatricians
- Expand SSM Health Cardinal Glennon Children's Hospital ability to diagnose and treat children with asthma, as part of the initiative to establish primary care telehealth services in St. Louis schools
- Explore opportunities to engage church groups and Catholic Charities to work with families to create healthy home environment
- Expansion of pulmonary specialist to North St. Louis County

community partners

- School Districts
- Catholic Charities
- Churches

supporting resources

- St. Louis Partnership for a Healthy Community
- Integrated Health Network
- Pediatricians



Going Forward



Visit us online at

[www.ssmhealth.com]

facebook.com/ssmhealth

@ssmhealth

www.thinkhealthstl.org

www.countyhealthrankings.org

Achieving our Goals, Now and in the Future

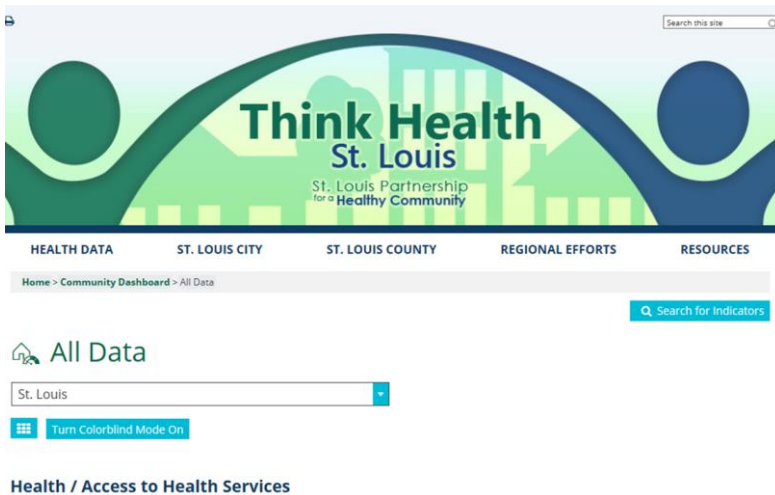
We are committed to improving the health of our community through focused and collaborative efforts to address unmet needs.

online tools

SSM Health Cardinal Glennon Children’s Hospital is pleased to make this source of reliable, current community health and population available to our community. We invite community organizations, planners, policy makers, educational institutions and residents to use this site as a tool to understand and track community health issues and plan strategies for improvement.

Please visit ssmhealth.com/system for more information.

The St. Louis Partnership for a Healthy Community is comprised of a broad range of public health stakeholders from leading community organizations and individual advocates who subscribe to a comprehensive definition of health. Their resource, www.thinkhealthstl.org, is a valuable online tool for looking at community data, especially in terms of the social determinants of health. Their community health dashboards allow anyone to search for indicators by location, topics, age group, classification, subgroup or comparison. In addition, a Health People Progress Tracker is also available on this website. With these tools, it is possible to measure the community’s health but also measure it in comparison to the state of Missouri.



Indicator	Value	MO Counties	U.S. Counties	MO Value
Adults with Health Insurance	90.1% (2016)	MO Counties	U.S. Counties	MO Value (87.2%)
		Prior Value (90.3%)	Trend	HP 2020 Target (100.0%)
Children with Health Insurance	96.8% (2016)	U.S. Counties	MO Value (95.5%)	US Value (95.5%)
		Prior Value (96.7%)	Trend	HP 2020 Target (100.0%)
Medicare Healthcare Costs	9,883 Dollars per enrollee (2015)	MO Value (9,750)	US Value (9,729)	Prior Value (9,610)
		Trend		

Contact our Community Benefit Leader for more information at
[Add contact name and contact info here.]

2019 – 2021

Appendices

prioritizing health needs

To be maximally effective, health programs and initiatives must meet a tangible need of the community. The programming must be presented to, and accessible by the very people who need it most. The study of demographics, community health indicators and community feedback is necessary to assist the hospitals in the planning, development, implementation and evaluation of population health programs in order to reduce disease burden within the community. SSM Health acknowledges the populations for which disparities exist and the unique burdens associated with their demographic status.

Prior to review of the data, a list of criteria was developed to aid in the selection of priority areas. During the data-review process, attention was directed to health issues that met any of these criteria:

- Health issues that impact a lot of people or for which disparities exist, and which put a greater burden on some population groups
- Poor rankings for health issues in the City and County of St. Louis as compared to the state of Missouri, other counties or Healthy People 2020 national health targets
- Health issues for which trends are worsening

A two-step prioritization process is utilized. Step one of this process focuses on community-specific criteria that are rated by community members to evaluate the identified needs. This step is subjective and measures community member's perceptions of the identified needs using a strongly agree to strongly disagree 5-point Likert scale. Once the community has evaluated their needs based on their perceptions, step two is that this list is sorted in descending order by priority and then reviewed by your internal prioritization team using system feasibility criteria. The internal criteria are more objective and focus on alignment to key strategies, resources, magnitude of issue and overall capability. Based on internal prioritization, the top ranking priorities establish the areas of focus for the Strategic Implementation Plan.

In addition, "social determinants of health," or factors in the community that can either contribute to poor health outcomes or support a healthy community are considered. This data is available on the at www.thinkhealthstl.org, www.countyhealthrankings.org and Health Communities Institute.

focus group objectives:

The main objective of the focus group meeting is to solicit feedback on the health needs of the community from experts and those with special interest in the health of the community served by the hospitals of St. Louis City and mid-St. Louis County.

Specifically, the discussion focused around the following ideas:

1. Determine whether the needs identified in the 2016 CHNA are still the right area on which to focus
2. Explore whether there are any needs on the list that should no longer be a priority
3. Determine where there are gaps in the plans to address the prioritized need
4. Identify other organizations with whom the hospital should consider collaborating
5. Discuss what has changed since 2015/2016 when these needs were prioritized, and whether there are new issues which should be addressed
6. Understand what other organizations are doing to impact the health of the community and how those activities might complement the hospital's initiatives
7. Evaluate what issues the stakeholders anticipate becoming a greater concern in the future that we need to consider now

The following topics were discussed at each of the community focus groups:

SSM Health St. Mary's Hospital: diabetes, high-risk pregnancy, substance abuse, access to care, continuity of care, trauma/stress informed care, obesity, quality/price transparency, obesity, cardiovascular disease, sexually transmitted infections, violence, pediatric abuse/neglect, ED visits, cancer, dental, tobacco use, cerebrovascular disease, behavioral health

SSM Health Cardinal Glennon Children's Hospital: mental / behavioral health, maternal / child health, social determinants of health, public safety/violence, access to services, immunizations/infectious disease, cultural barriers, health lifestyles, health literacy, reproductive health, asthma, diabetes, cancer, dental health, obesity, blood disease/lead, nutrition, injuries, food allergies

SSM Health Saint Louis University Hospital: mental health, substance abuse, violence, access to care, health literacy, maternal and child health, reproductive health, injuries, health lifestyles, diabetes, transportation, immunization / infectious disease, heart disease, stroke, respiratory disease, smoking / tobacco use, cancer, dental care

Needs SSM Health Cardinal Glennon Children's Hospital will not address and the reasons:

Because SSM Health Cardinal Glennon Children's Hospital has limited resources, not every health indicator which has an identified need for improvement could be addressed. Those community needs identified but not "prioritized" for improvement included the following:

- Social determinants of health - Access and health literacy priorities are helping address this need.
- Injury/violence - SSM Health Cardinal Glennon Children's Hospital is a Level I pediatric trauma center and, through partnership with Missouri Poison Control, this need is already being addressed.
- Mental and behavioral health - The Knights of Columbus Developmental Center is already addressing this need.
- Oral health - In partnership with Saint Louis University Center for Advanced Dental Education, SSM Health Cardinal Glennon Children's Hospital is establishing a pediatric dentistry residency program to address this need.
- Appropriate nutrition - SSM Health Cardinal Glennon Children's Hospital is restructuring its weight management program to be more consistent with clinical best practices to help address this need.
- Immunizations - With the expansion of Danis Pediatrics, the ability to provide additional childhood immunizations will increase capacity and address this need.
- Cultural barriers - The initiatives of access to care and health literacy will help to address this need.
- Lead poisoning - Missouri Poison Control is already addressing this need.

Search this site

Think Health St. Louis

St. Louis Partnership
for a Healthy Community

HEALTH DATA

ST. LOUIS CITY

ST. LOUIS COUNTY

REGIONAL EFFORTS
















RESOURCES

Home > Community Dashboard > All Data

Search for Indicators

All Data

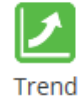
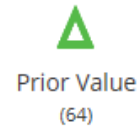
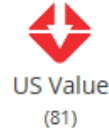
St. Louis

	VALUE	COMPARED TO:		
Adults with Health Insurance	90.1% (2016)	 MO Counties	 U.S. Counties	 MO Value (87.2%)
		 Prior Value (90.3%)	 Trend	 HP 2020 Target (100.0%)
Children with Health Insurance	96.8% (2016)	 U.S. Counties	 MO Value (95.5%)	 US Value (95.5%)
		 Prior Value (96.7%)	 Trend	 HP 2020 Target (100.0%)
Medicare Healthcare Costs	9,883 Dollars per enrollee (2015)	 MO Value (9,750)	 US Value (9,729)	 Prior Value (9,610)

St. Louis County Health Dashboard www.thinkhealthstl.org

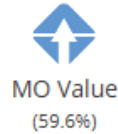
Non-Physician Primary Care Provider Rate

75
Providers per 100,000 population
(2017)



Persons with Private Health Insurance Only

66.7%
(2016)



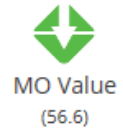
Persons with Public Health Insurance Only

15.3%
(2016)



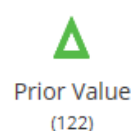
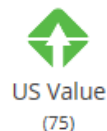
Preventable Hospital Stays: Medicare Population

46.8
Discharges per 1,000 Medicare enrollees
(2015)



Primary Care Provider Rate

123
Providers per 100,000 population
(2015)

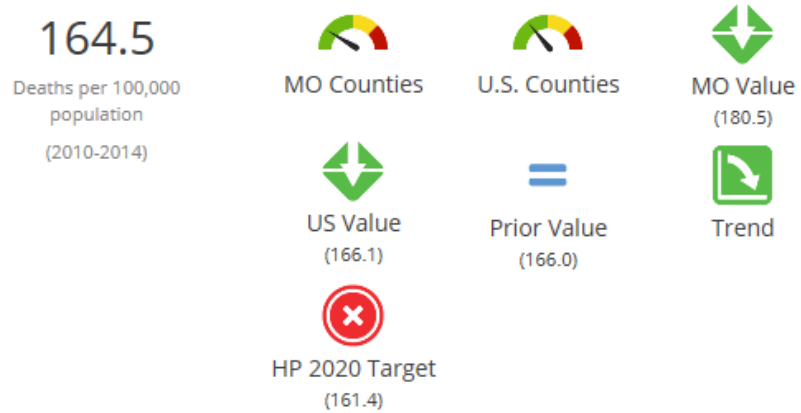


Health / Cancer

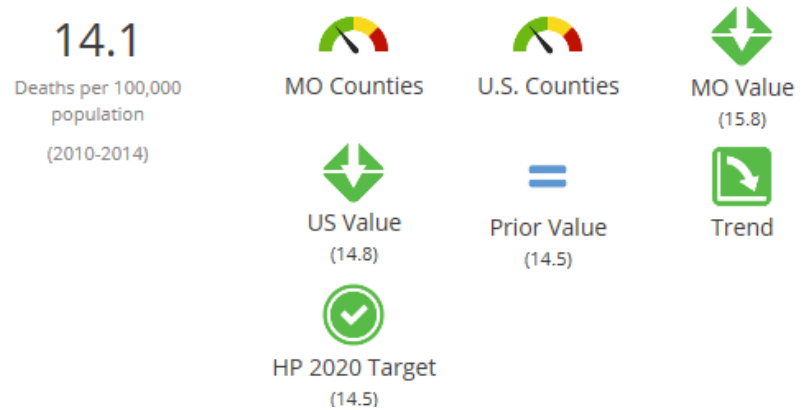
Age-Adjusted Death Rate due to Breast Cancer



Age-Adjusted Death Rate due to Cancer



Age-Adjusted Death Rate due to Colorectal Cancer

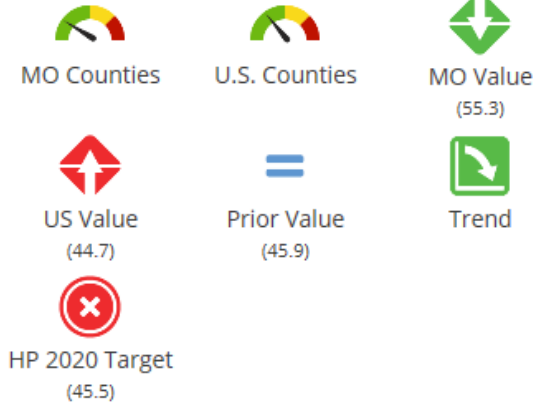


Appendix

St. Louis County Health Dashboard www.thinkhealthstl.org

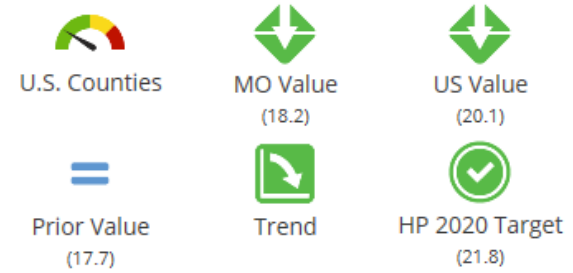
Age-Adjusted Death Rate due to Lung Cancer

46.0
Deaths per 100,000 population
(2010-2014)



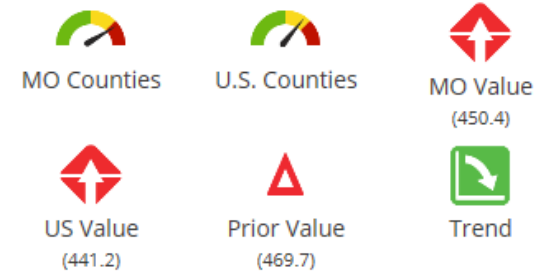
Age-Adjusted Death Rate due to Prostate Cancer

16.3
Deaths per 100,000 males
(2010-2014)



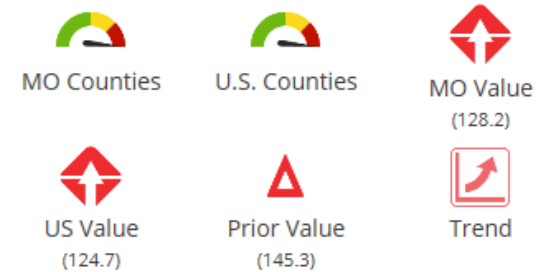
All Cancer Incidence Rate

470.3
Cases per 100,000 population
(2011-2015)



Breast Cancer Incidence Rate

146.4
Cases per 100,000 females
(2011-2015)




Appendix

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Cancer: Medicare Population


9.7%
(2015)


 MO Counties

 U.S. Counties

 MO Value
(7.8%)

 US Value
(7.8%)


 Prior Value
(9.7%)

 Trend

Cervical Cancer Incidence Rate

6.7
Cases per 100,000
females
(2011-2015)


 U.S. Counties

 MO Value
(8.3)

 US Value
(7.5)

 Prior Value
(6.6)

 Trend


 HP 2020 Target
(7.3)


Colon Cancer Screening: Sigmoidoscopy or Colonoscopy

70.8%
(2011)

 MO Counties

 MO Value
(66.6%)

 US Value
(69.3% in 2014)


 Prior Value
(67.5%)


Colorectal Cancer Incidence Rate

41.1
Cases per 100,000
population
(2011-2015)

 MO Counties


 U.S. Counties

 MO Value
(41.7)

 US Value
(39.2)

 Prior Value
(41.9)

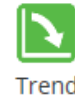
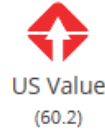
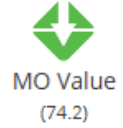
 Trend

 HP 2020 Target
(39.9)

St. Louis County Health Dashboard www.thinkhealthstl.org

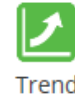
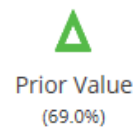
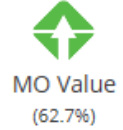
Lung and Bronchus Cancer Incidence Rate

64.1
Cases per 100,000 population
(2011-2015)



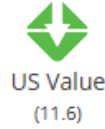
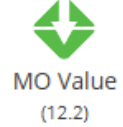
Mammography Screening: Medicare Population

70.2%
(2015)



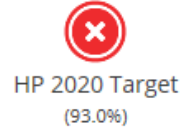
Oral Cavity and Pharynx Cancer Incidence Rate

11.4
Cases per 100,000 population
(2011-2015)



Pap Test in Past 3 Years

79.4%
(2011)



Appendix

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Prostate Cancer Incidence Rate

128.4

Cases per 100,000 males
(2011-2015)



MO Counties



U.S. Counties



MO Value
(98.0)



US Value
(109.0)



Prior Value
(126.5)




















Trend

Health / County Health Rankings

	VALUE	COMPARED TO:
Clinical Care Ranking	2 (2018)	 MO Counties
Health Behaviors Ranking	2 (2018)	 MO Counties
Morbidity Ranking	11 (2018)	 MO Counties
Mortality Ranking	24 (2018)	 MO Counties
Physical Environment Ranking	112 (2018)	 MO Counties
Social and Economic Factors Ranking	17 (2018)	 MO Counties

Health / Diabetes

	VALUE	COMPARED TO:		
Adults 20+ with Diabetes	<p>11.6%</p> <p>(2014)</p>	 <p>MO Counties</p>	 <p>U.S. Counties</p>	 <p>MO Value (11.3%)</p>
		 <p>US Value (10.0%)</p>	 <p>Prior Value (10.8%)</p>	 <p>Trend</p>
Age-Adjusted Death Rate due to Diabetes	<p>15.7</p> <p>Deaths per 100,000 population (2011-2015)</p>	 <p>MO Counties</p>	 <p>MO Value (19.9)</p>	 <p>US Value (21.2)</p>
		 <p>Prior Value (16.0)</p>	 <p>Trend</p>	
Age-Adjusted ER Rate due to Diabetes	<p>17.9</p> <p>ER visits per 10,000 population 18+ years (2012-2014)</p>	 <p>St. Louis City Value (35.3)</p>	 <p>Prior Value (17.9)</p>	
Age-Adjusted ER Rate due to Long-Term Complications of Diabetes	<p>5.8</p> <p>ER visits per 10,000 population 18+ years (2012-2014)</p>	 <p>St. Louis City Value (11.4)</p>	 <p>Prior Value (6.1)</p>	
Age-Adjusted ER Rate due to Short-Term Complications of Diabetes	<p>0.9</p> <p>ER visits per 10,000 population 18+ years (2012-2014)</p>	 <p>St. Louis City Value (1.8)</p>	 <p>Prior Value (0.8)</p>	

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Age-Adjusted ER Rate due to Uncontrolled Diabetes


1.3
ER visits per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(2.3)


Prior Value
(1.2)

Age-Adjusted Hospitalization Rate due to Diabetes

24.3
Hospitalizations per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(43.6)


Prior Value
(24.6)

Age-Adjusted Hospitalization Rate due to Long-Term Complications of Diabetes

12.9
Hospitalizations per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(23.3)


Prior Value
(13.1)

Age-Adjusted Hospitalization Rate due to Short-Term Complications of Diabetes

8.6
Hospitalizations per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(14.7)


Prior Value
(8.3)

Age-Adjusted Hospitalization Rate due to Uncontrolled Diabetes

2.1
Hospitalizations per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(4.3)



Prior Value
(2.5)


Diabetes: Medicare Population

24.8%
(2015)


MO Counties


U.S. Counties


MO Value
(25.8%)


US Value
(26.5%)


Prior Value
(24.8%)


Trend

Appendix

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Diabetic Monitoring: Medicare Population


86.0%
(2015)

 MO Counties

 U.S. Counties

 MO Value
(86.3%)

 US Value
(85.7%)

 Prior Value
(85.0%)

 Trend

Health / Disabilities

Persons with a Cognitive Difficulty (5-year)

VALUE
4.8%
(2012-2016)


COMPARED TO:

 MO Value
(5.9%)

 US Value
(5.0%)

Persons with a Disability

12.1%
(2016)

 MO Value
(14.6%)

 US Value
(12.8%)

 Prior Value
(11.7%)

 Trend

Persons with a Disability (5-year)

11.9%
(2012-2016)

 MO Value
(14.4%)

 US Value
(12.5%)

 Prior Value
(11.7%)

 Trend










Persons with a Hearing Difficulty (5-year)

3.0%
(2012-2016)












 MO Value
(4.1%)

 US Value
(3.5%)

St. Louis County Health Dashboard www.thinkhealthstl.org

Persons with a Self-Care Difficulty (5-year)	2.5% (2012-2016)	 MO Value (2.8%)	 US Value (2.7%)	
Persons with a Vision Difficulty (5-year)	1.9% (2012-2016)	 MO Value (2.5%)	 US Value (2.3%)	
Persons with an Ambulatory Difficulty (5-year)	6.6% (2012-2016)	 MO Value (8.2%)	 US Value (7.0%)	
Persons with Disability Living in Poverty (5-year)	20.5% (2012-2016)	 MO Counties	 MO Value (29.5%)	 US Value (27.6%)

Health / Exercise, Nutrition, & Weight

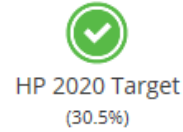
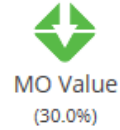
	VALUE	COMPARED TO:		
Adult Fruit and Vegetable Consumption	13.3% (2011)	 MO Counties	 MO Value (12.5%)	 US Value (23.4% in 2009)
		 Prior Value (24.5%)		
Adults 20+ who are Sedentary	22.7% (2014)	 MO Counties	 U.S. Counties	 MO Value (25.8%)
		 US Value (23.0%)	 Prior Value (23.0%)	 Trend
		 HP 2020 Target (32.6%)		

Appendix

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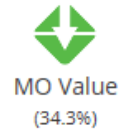
Adults who are Obese

28.2%
(2011)



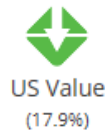
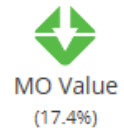
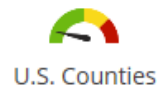
Adults who are Overweight

32.6%
(2011)



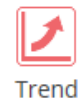
Child Food Insecurity Rate

14.8%
(2016)



Food Insecure Children Likely Ineligible for Assistance

45%
(2016)



St. Louis County Health Dashboard www.thinkhealthstl.org


Food Insecurity Rate

14.7%
(2016)


MO Counties


U.S. Counties


MO Value
(14.7%)


US Value
(12.9%)


Prior Value
(15.4%)


Trend


Health / Heart Disease & Stroke

Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)


VALUE
38.0
Deaths per 100,000 population
(2011-2015)

COMPARED TO:



MO Counties


MO Value
(41.3)


US Value
(37.0)


Prior Value
(38.0)



Trend


HP 2020 Target
(34.8)

Age-Adjusted Death Rate due to Heart Disease

176.1
Deaths per 100,000 population
(2011-2015)


MO Counties


MO Value
(194.6)


US Value
(167.0 in 2014-2016)


Prior Value
(178.4)


Trend

Age-Adjusted ER Rate due to Heart Failure

3.5
ER visits per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(5.9)


Prior Value
(3.2)

Age-Adjusted ER Rate due to Hypertension

30.2
ER visits per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(46.7)


Prior Value
(29.6)

Appendix

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Age-Adjusted Hospitalization Rate due to Heart Failure

44.7

Hospitalizations per 10,000 population 18+ years
(2012-2014)



St. Louis City Value
(67.2)



Prior Value
(44.7)

Age-Adjusted Hospitalization Rate due to Hypertension

6.3

Hospitalizations per 10,000 population 18+ years
(2012-2014)



St. Louis City Value
(16.9)



Prior Value
(6.7)

Atrial Fibrillation: Medicare Population

9.0%

(2015)



MO Counties



U.S. Counties



MO Value
(8.1%)



US Value
(8.1%)



Prior Value
(8.9%)



Trend

Heart Failure: Medicare Population

15.2%

(2015)



MO Counties



U.S. Counties



MO Value
(13.7%)



US Value
(13.5%)





























Prior Value
(14.8%)



Trend

Appendix

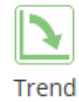
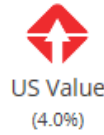
St. Louis County Health Dashboard www.thinkhealthstl.org

High Blood Pressure Prevalence	31.9% (2011)	 MO Counties	 MO Value (32.6%)	 US Value (30.9% in 2015)
		 Prior Value (17.5%)	 HP 2020 Target (26.9%)	
High Cholesterol Prevalence: Adults 35+	39.9% (2011)	 MO Counties	 MO Value (42.9%)	 Prior Value (17.9%)
Hyperlipidemia: Medicare Population	44.9% (2015)	 MO Counties	 U.S. Counties	 MO Value (41.8%)
		 US Value (44.6%)	 Prior Value (45.0%)	 Trend
Hypertension: Medicare Population	57.0% (2015)	 MO Counties	 U.S. Counties	 MO Value (54.6%)
		 US Value (55.0%)	 Prior Value (57.1%)	 Trend
Ischemic Heart Disease: Medicare Population	25.8% (2015)	 MO Counties	 U.S. Counties	 MO Value (26.6%)
		 US Value (26.5%)	 Prior Value (26.6%)	 Trend

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Stroke: Medicare Population

4.4%
(2015)

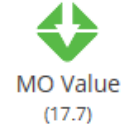


Health / Immunizations & Infectious Diseases

Age-Adjusted Death Rate due to Influenza and Pneumonia

VALUE
16.2
Deaths per 100,000 population
(2011-2015)

COMPARED TO:



Prior Value
(16.1)



Trend

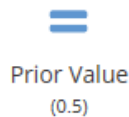
Age-Adjusted ER Rate due to Community Acquired Pneumonia

13.3
ER visits per 10,000 population 18+ years
(2012-2014)



Age-Adjusted ER Rate due to Hepatitis

0.5
ER visits per 10,000 population 18+ years
(2012-2014)



Age-Adjusted ER Rate due to Immunization-Preventable Pneumonia and Influenza

11.7
ER visits per 10,000 population 18+ years
(2012-2014)



St. Louis County Health Dashboard www.thinkhealthstl.org

Age-Adjusted Hospitalization Rate due to Community Acquired Pneumonia

24.1
Hospitalizations per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(29.3)


Prior Value
(25.6)

Age-Adjusted Hospitalization Rate due to Hepatitis


2.0
Hospitalizations per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(5.6)


Prior Value
(2.1)

Age-Adjusted Hospitalization Rate due to Immunization-Preventable Pneumonia and Influenza



3.2
Hospitalizations per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(3.2)



Prior Value
(2.2)


Chlamydia Incidence Rate: Females 15-19

4,119.5
Cases per 100,000 females aged 15-19
(2010-2014)


MO Counties

Prior Value
(4,297.1)


MO Value
(3,607.0)



US Value
(3,229.0)


Trend

Health / Maternal, Fetal & Infant Health

Babies with Low Birth Weight

VALUE
9.1%
(2014)


COMPARED TO:

MO Counties


MO Value
(8.2%)


US Value
(8.0%)

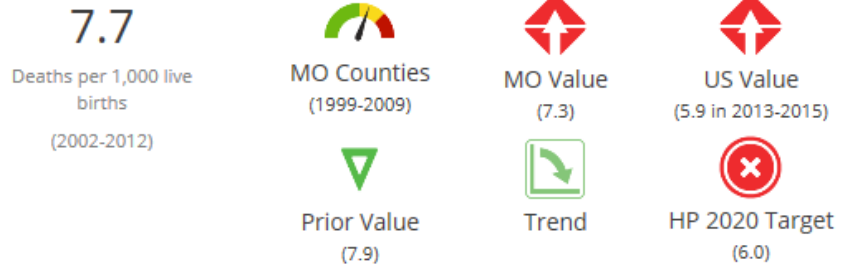

Prior Value
(8.9%)


Trend

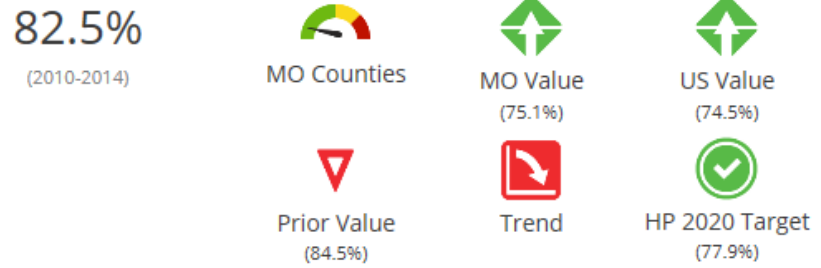

HP 2020 Target
(7.8%)

St. Louis County Health Dashboard www.thinkhealthstl.org

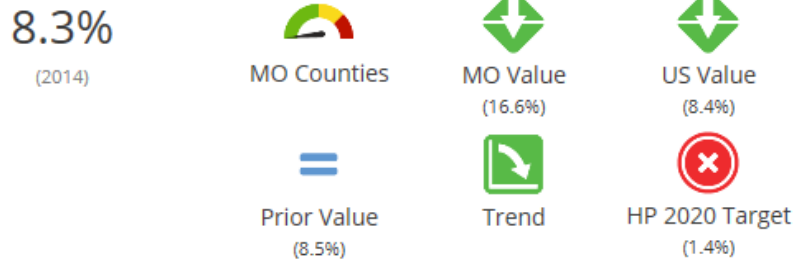
Infant Mortality Rate



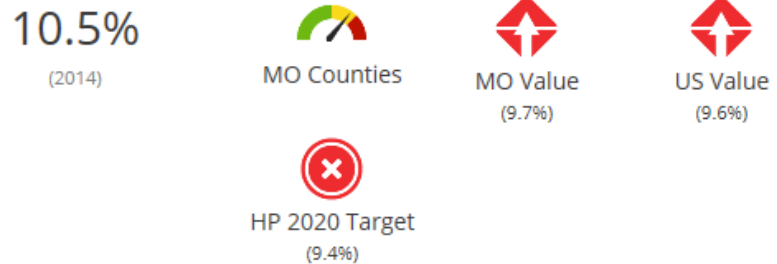
Mothers who Received Early Prenatal Care





















Mothers who Smoked During Pregnancy



Preterm Births



Health / Mental Health & Mental Disorders

	VALUE	COMPARED TO:		
Adults with a Mental Health Disorder	<p>134.8</p> <p>Per 10,000 population (2014)</p>	<p></p> <p>Prior Value (128.4)</p>	<p></p> <p>Trend</p>	
Adults with a Mental Health Disorder Except Drug and Alcohol Induced	<p>117.6</p> <p>Per 10,000 population (2014)</p>	<p></p> <p>Prior Value (110.4)</p>	<p></p> <p>Trend</p>	
Adults with a Mood or Depressive Disorder	<p>76.6</p> <p>Per 10,000 population (2014)</p>	<p></p> <p>Prior Value (71.4)</p>	<p></p> <p>Trend</p>	
Adults with a Schizophrenic Disorder	<p>27.3</p> <p>Per 10,000 population (2014)</p>	<p></p> <p>Prior Value (25.8)</p>	<p></p> <p>Trend</p>	
Age-Adjusted Death Rate due to Suicide	<p>12.8</p> <p>Deaths per 100,000 population (2011-2015)</p>	<p></p> <p>MO Counties (2005-2009)</p>	<p></p> <p>MO Value (15.7)</p>	<p></p> <p>US Value (12.8)</p>
		<p></p> <p>Prior Value (12.7)</p>	<p></p> <p>Trend</p>	<p></p> <p>HP 2020 Target (10.2)</p>
Age-Adjusted ER Rate due to Adolescent Suicide and Intentional Self-inflicted Injury	<p>35.7</p> <p>ER visits per 10,000 population aged 12-17 (2012-2014)</p>	<p></p> <p>St. Louis City Value (57.2)</p>	<p></p> <p>Prior Value (34.5)</p>	
Age-Adjusted ER Rate due to Mental Health	<p>75.8</p> <p>ER visits per 10,000 population 18+ years (2012-2014)</p>	<p></p> <p>St. Louis City Value (131.9)</p>	<p></p> <p>Prior Value (76.1)</p>	

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Age-Adjusted ER Rate due to Pediatric Mental Health

53.3
ER visits per 10,000 population under 18 years
(2012-2014)


St. Louis City Value
(78.1)


Prior Value
(51.1)

Age-Adjusted ER Rate due to Suicide and Intentional Self-inflicted Injury

16.3
ER visits per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(48.5)


Prior Value
(17.0)

Age-Adjusted Hospitalization Rate due to Adolescent Suicide and Intentional Self-inflicted Injury

85.0
Hospitalizations per 10,000 population aged 12-17
(2012-2014)


St. Louis City Value
(61.2)


Prior Value
(70.7)

Age-Adjusted Hospitalization Rate due to Mental Health

110.4
Hospitalizations per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(188.3)


Prior Value
(109.7)

Age-Adjusted Hospitalization Rate due to Pediatric Mental Health

62.2
Hospitalizations per 10,000 population under 18 years
(2012-2014)


St. Louis City Value
(55.5)


Prior Value
(58.8)

Age-Adjusted Hospitalization Rate due to Suicide and Intentional Self-inflicted Injury

58.6
Hospitalizations per 10,000 population 18+ years
(2012-2014)


St. Louis City Value
(103.8)

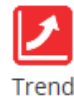
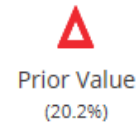
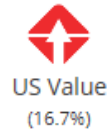

Prior Value
(53.5)

Appendix

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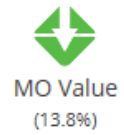
Depression: Medicare Population

20.6%
(2015)



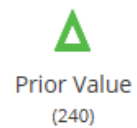
Frequent Mental Distress

11.3%
(2016)



Mental Health Provider Rate

258
Providers per 100,000
population
(2017)

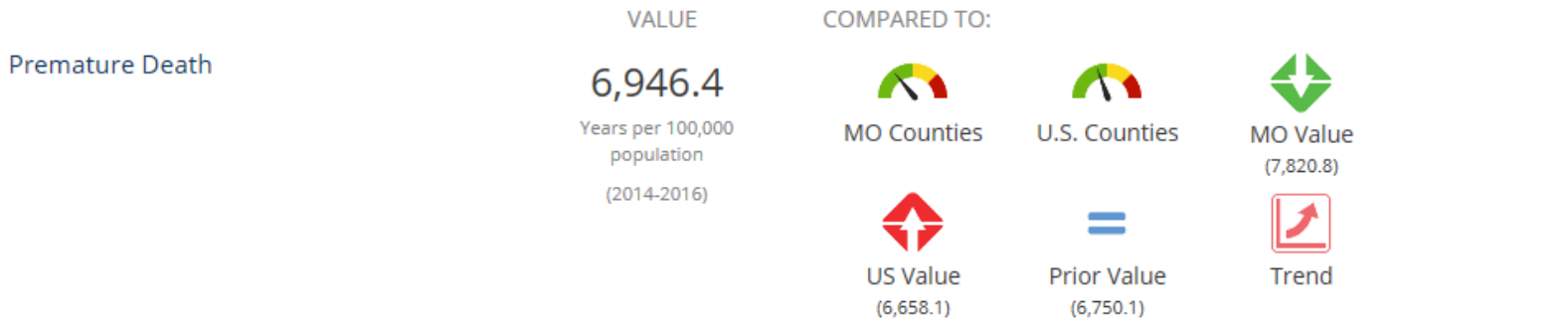


Poor Mental Health: Average Number of Days

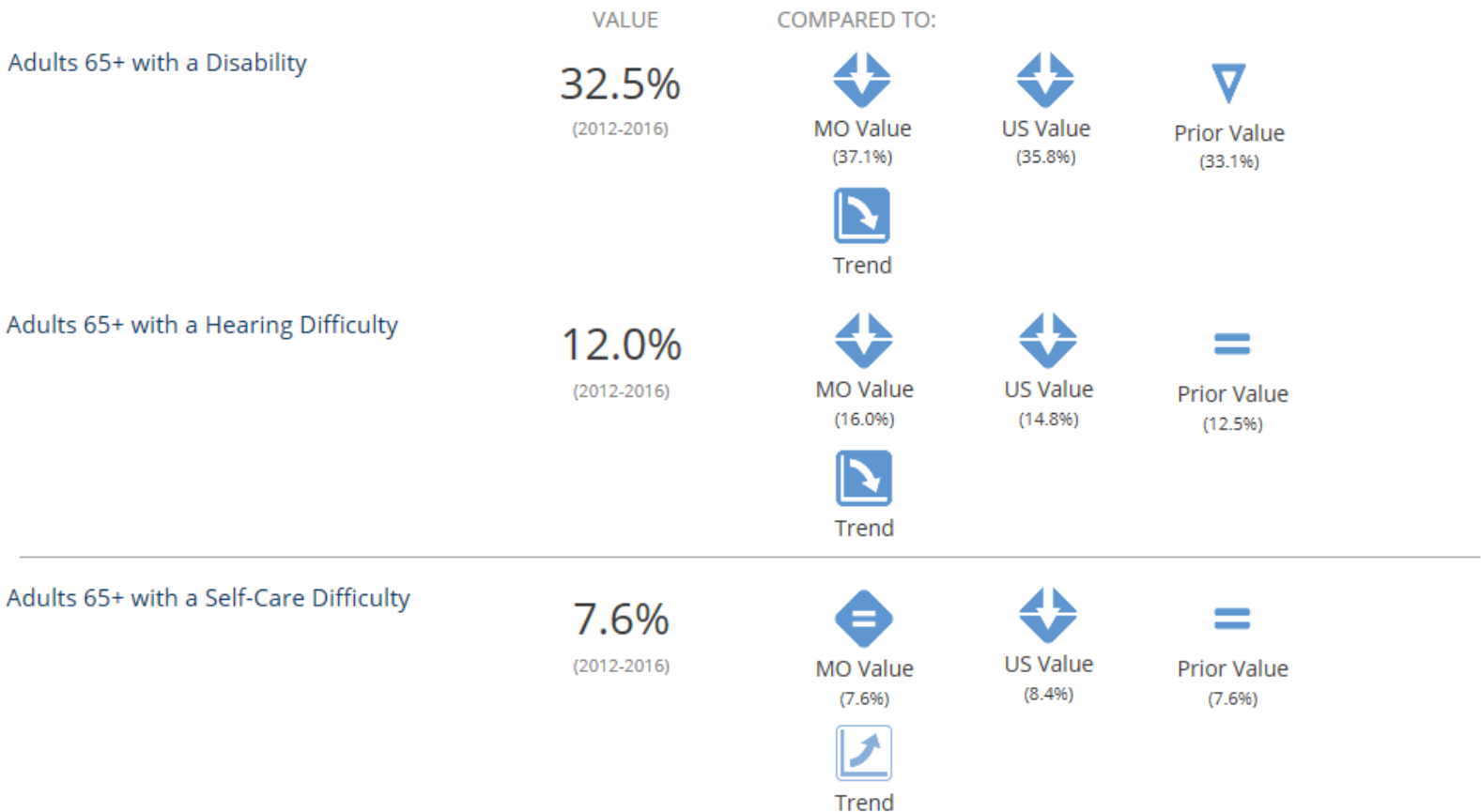
3.8
Days
(2016)



Health / Mortality Data



Health / Older Adults & Aging



Appendix

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Adults 65+ with a Vision Difficulty

5.1%

(2012-2016)



MO Value
(6.7%)



US Value
(6.6%)



Prior Value
(5.4%)



Trend

Adults 65+ with an Independent Living Difficulty

15.1%

(2012-2016)



MO Value
(14.4%)



US Value
(15.2%)



Prior Value
(15.5%)



Trend

Age-Adjusted Death Rate due to Alzheimer's Disease

22.0

Deaths per 100,000
population
(2011-2015)



MO Counties



MO Value
(27.3)



US Value
(25.4)



Prior Value
(20.0)



Trend

Alzheimer's Disease or Dementia:
Medicare Population

11.6%

(2015)



MO Counties



U.S. Counties



MO Value
(10.2%)



US Value
(9.9%)

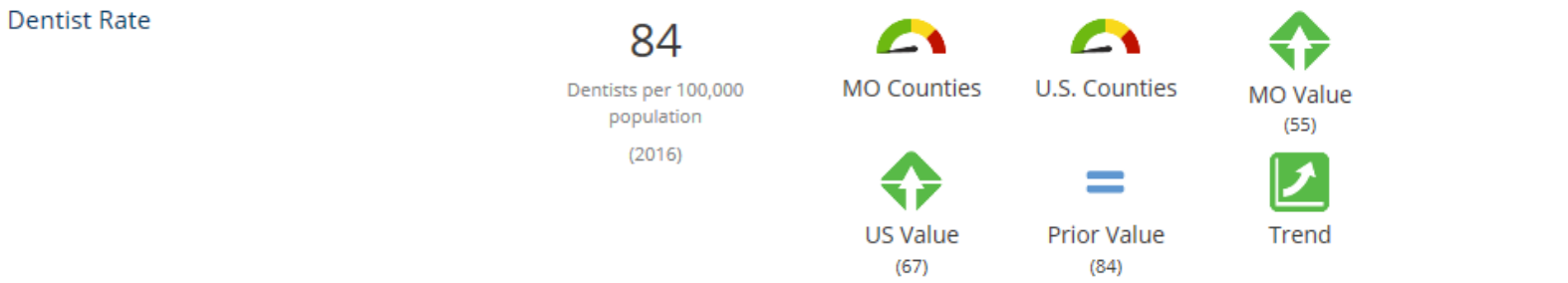
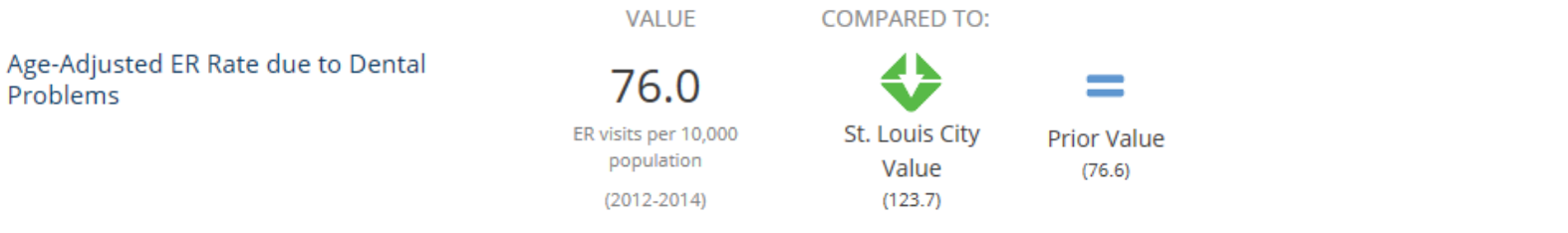


Prior Value
(11.4%)

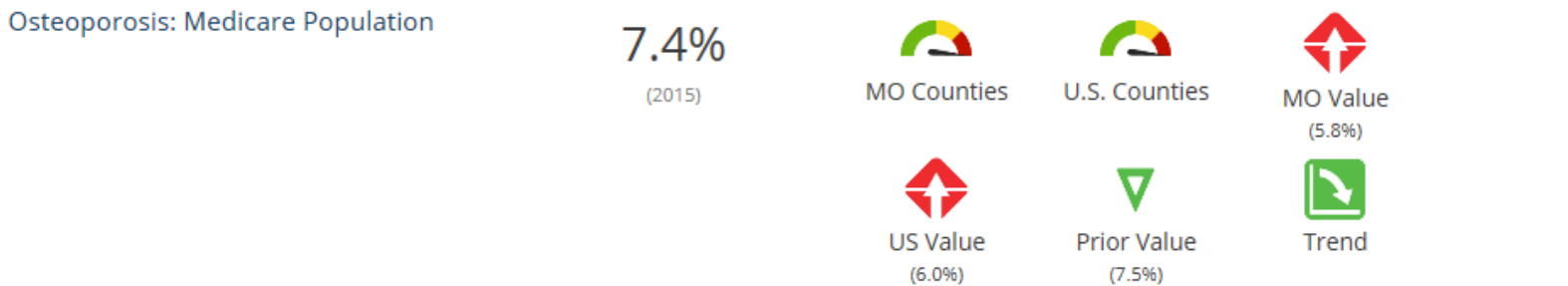
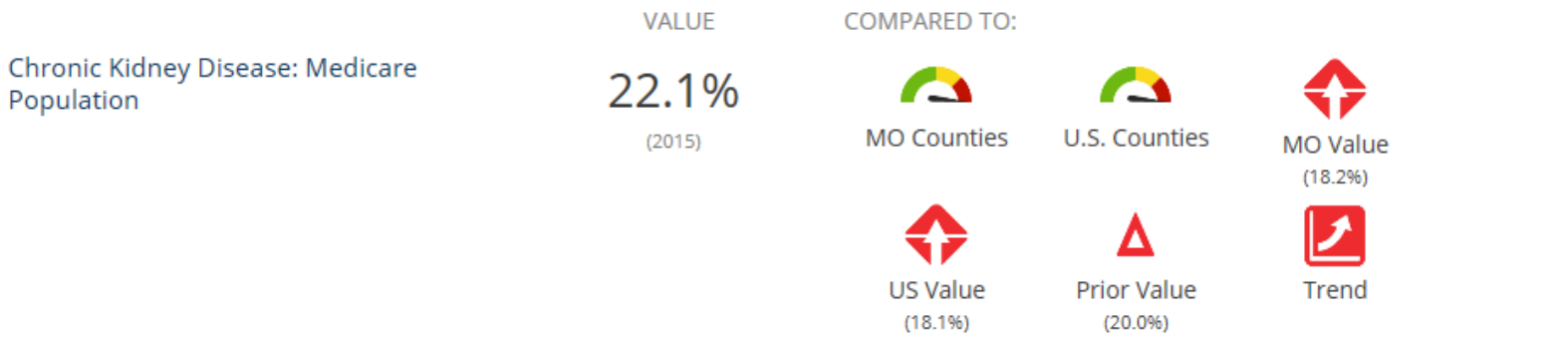


Trend

Health / Oral Health



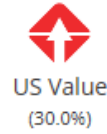
Health / Other Chronic Diseases



St. Louis County Health Dashboard www.thinkhealthstl.org

Rheumatoid Arthritis or Osteoarthritis:
Medicare Population

34.6%
(2015)



Health / Other Conditions

Age-Adjusted ER Rate due to Dehydration

VALUE

13.0

ER visits per 10,000
population 18+ years
(2012-2014)

COMPARED TO:



St. Louis City
Value
(13.8)



Prior Value
(12.0)

Age-Adjusted ER Rate due to Urinary
Tract Infections

82.9

ER visits per 10,000
population 18+ years
(2012-2014)



St. Louis City
Value
(102.1)



Prior Value
(74.7)

Age-Adjusted Hospitalization Rate due to
Dehydration

16.5

Hospitalizations per
10,000 population 18+
years
(2012-2014)



St. Louis City
Value
(22.2)



Prior Value
(18.2)

Age-Adjusted Hospitalization Rate due to
Urinary Tract Infections

18.6

Hospitalizations per
10,000 population 18+
years
(2012-2014)



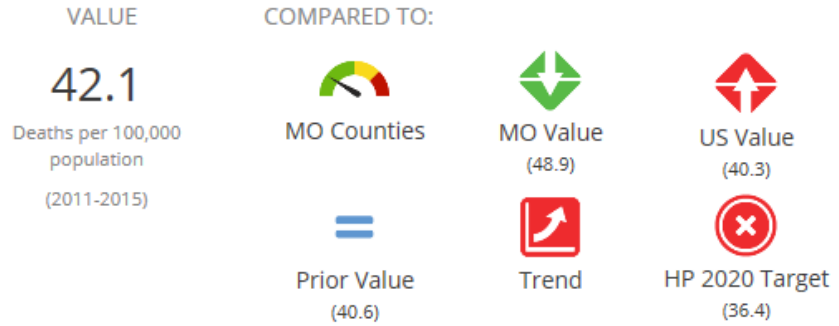
St. Louis City
Value
(22.9)



Prior Value
(19.9)

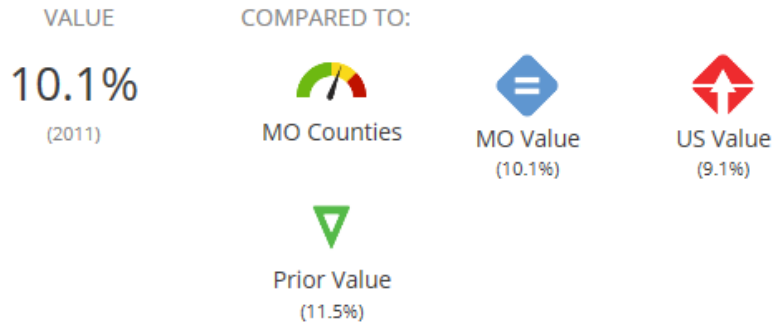
Health / Prevention & Safety

Age-Adjusted Death Rate due to Unintentional Injuries

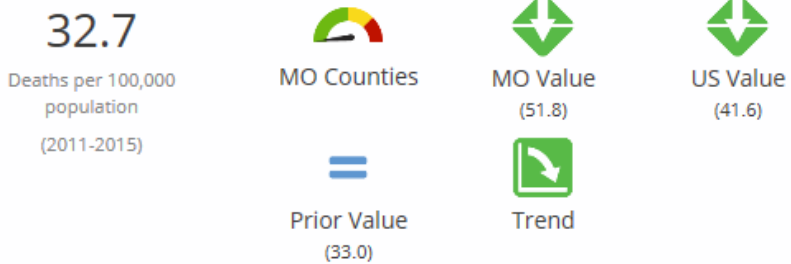


Health / Respiratory Diseases

Adults with Current Asthma



Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases



Age-Adjusted ER Rate due to Adult Asthma



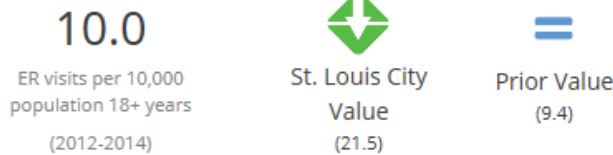
Age-Adjusted ER Rate due to Asthma



Appendix

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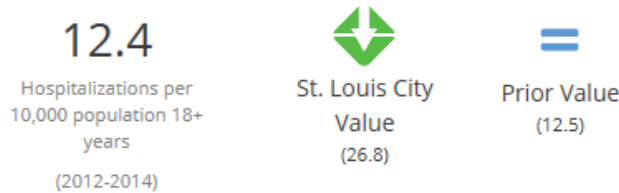
Age-Adjusted ER Rate due to COPD



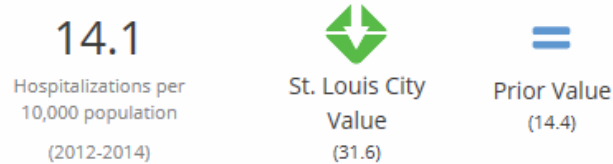
Age-Adjusted ER Rate due to Pediatric Asthma



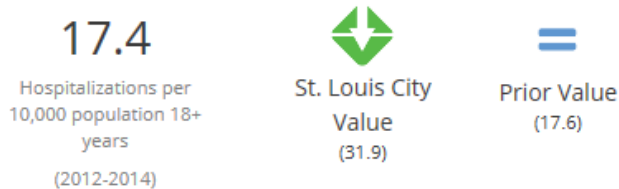
Age-Adjusted Hospitalization Rate due to Adult Asthma



Age-Adjusted Hospitalization Rate due to Asthma



Age-Adjusted Hospitalization Rate due to COPD



Age-Adjusted Hospitalization Rate due to Pediatric Asthma

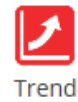
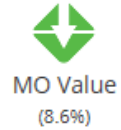


Appendix

St. Louis County Health Dashboard www.thinkhealthstl.org

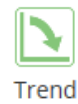
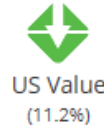
Asthma: Medicare Population

8.2%
(2015)



COPD: Medicare Population

10.0%
(2015)

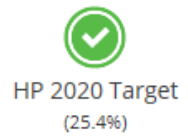
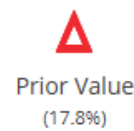


Health / Substance Abuse

Adults who Drink Excessively

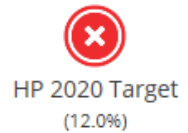
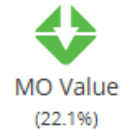
VALUE
19.7%
(2016)

COMPARED TO:



Adults who Smoke

18.4%
(2016)















Age-Adjusted ER Rate due to Alcohol Abuse

22.0
ER visits per 10,000
population 18+ years
(2012-2014)








Appendix

St. Louis County Health Dashboard www.thinkhealthstl.org

Age-Adjusted ER Rate due to Substance Abuse	17.9 ER visits per 10,000 population 18+ years (2012-2014)	 St. Louis City Value (39.9)	 Prior Value (18.2)	
Age-Adjusted Hospitalization Rate due to Alcohol Abuse	12.9 Hospitalizations per 10,000 population 18+ years (2012-2014)	 St. Louis City Value (21.9)	 Prior Value (12.7)	
Age-Adjusted Hospitalization Rate due to Substance Abuse	11.2 Hospitalizations per 10,000 population 18+ years (2012-2014)	 St. Louis City Value (27.8)	 Prior Value (12.1)	
Death Rate due to Drug Poisoning	20.7 Deaths per 100,000 population (2014-2016)	 MO Counties (2006-2012)	 U.S. Counties	 MO Value (19.2)
		 US Value (16.9)	 Prior Value (17.7)	 Trend

Health / Wellness & Lifestyle

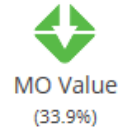
Frequent Physical Distress	VALUE	COMPARED TO:		
	10.9% (2016)	 MO Counties	 U.S. Counties	 MO Value (13.3%)
		 US Value (15.0%)	 Prior Value (10.5%)	

Appendix

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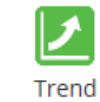
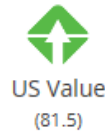
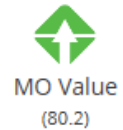
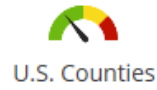
Insufficient Sleep

31.8%
(2016)



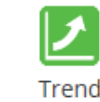
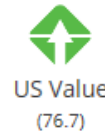
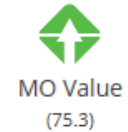
Life Expectancy for Females

81.7
Years
(2014)



Life Expectancy for Males

77.0
Years
(2014)



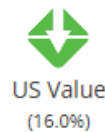
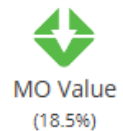
Poor Physical Health: Average Number of Days

3.6
Days
(2016)

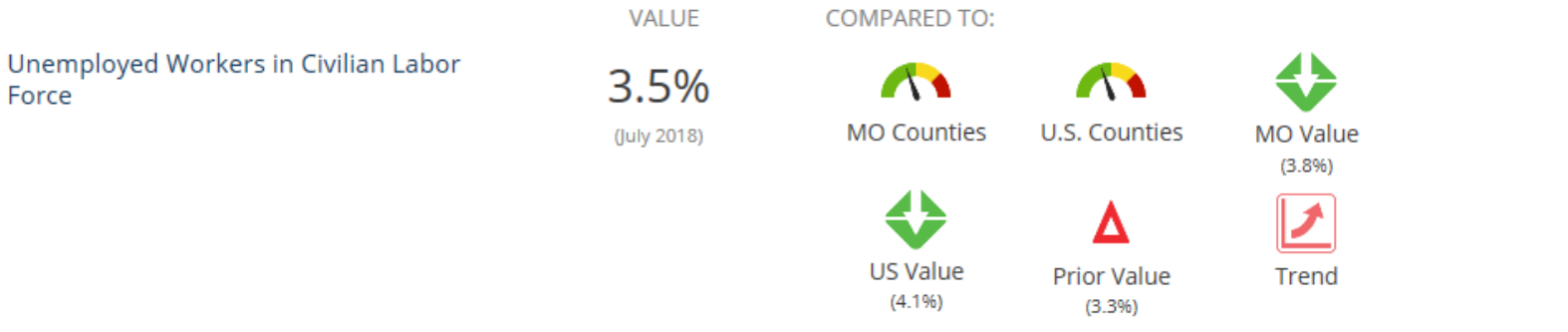


Self-Reported General Health Assessment: Poor or Fair

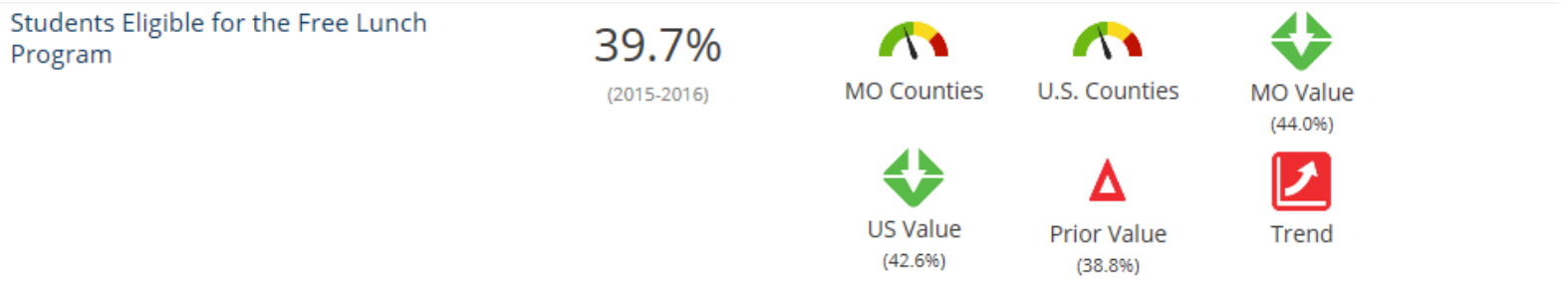
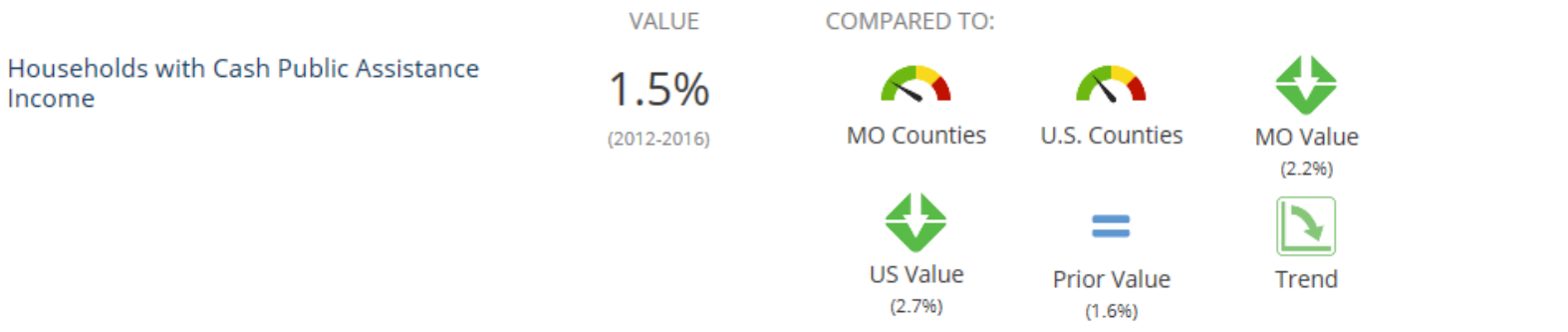
14.6%
(2016)



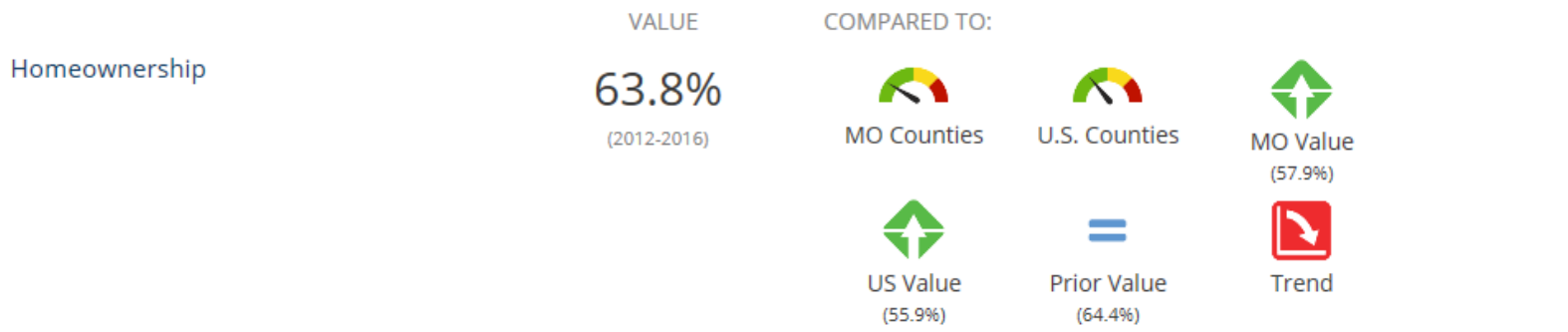
Economy / Employment



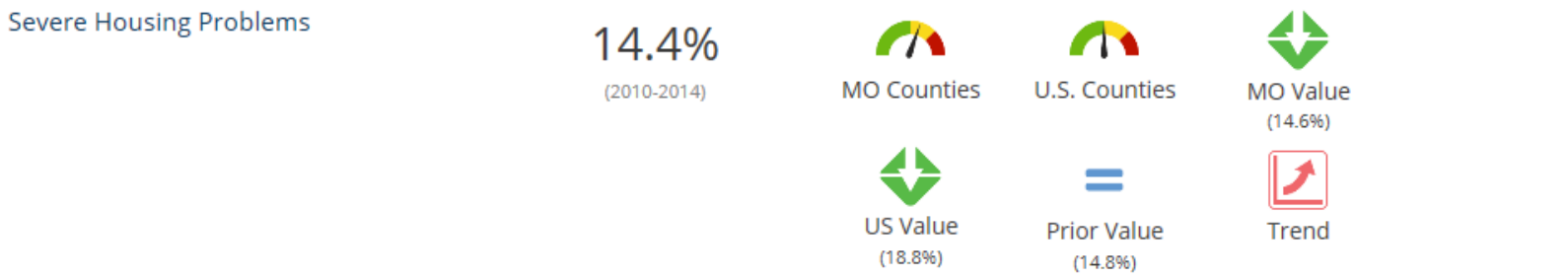
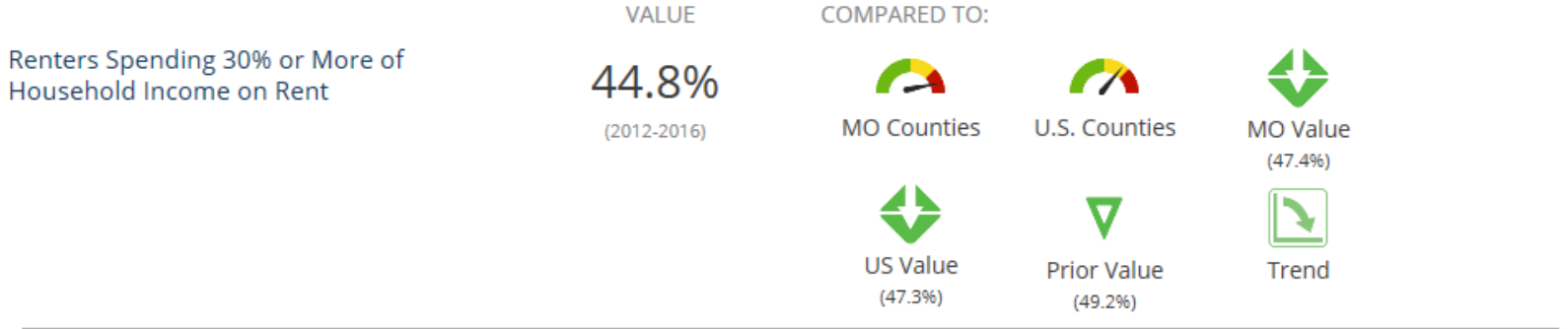
Economy / Government Assistance Programs



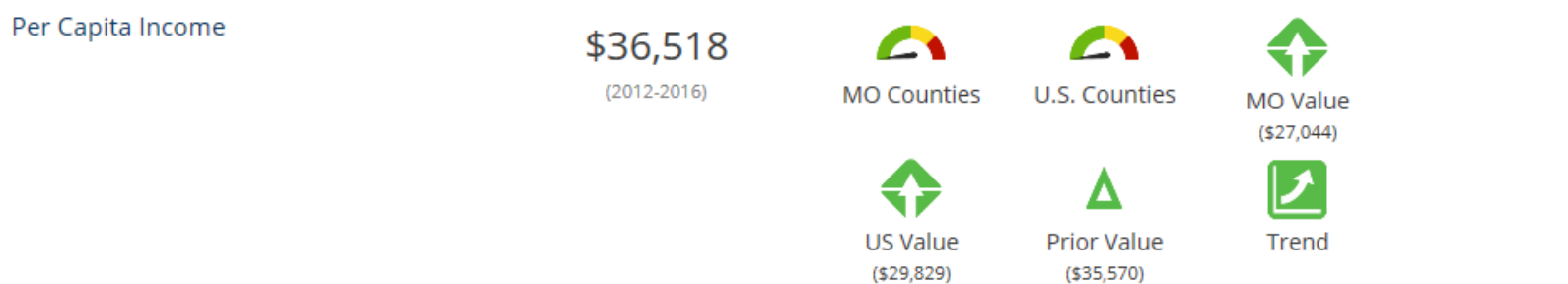
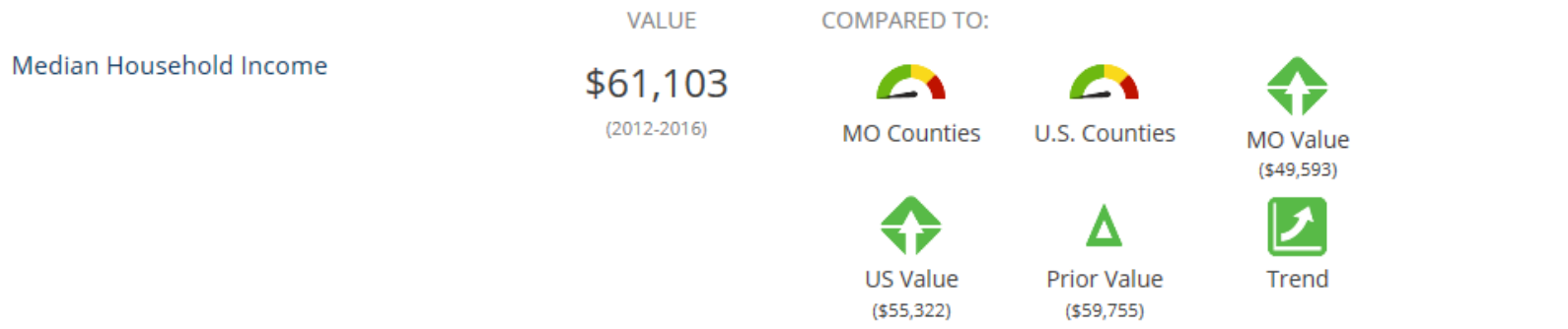
Economy / Homeownership

























Economy / Housing Affordability & Supply



Economy / Income



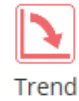
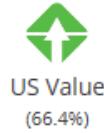
Economy / Poverty

	VALUE	COMPARED TO:		
Children Living Below Poverty Level	15.1% (2012-2016)	 MO Counties	 U.S. Counties	 MO Value (21.1%)
		 US Value (21.2%)	 Prior Value (16.1%)	 Trend
Families Living Below Poverty Level	7.4% (2012-2016)	 MO Counties	 U.S. Counties	 MO Value (10.8%)
		 US Value (11.0%)	 Prior Value (7.9%)	 Trend
Households with Children Receiving SNAP	53.8% (2012-2016)	 MO Value (51.5%)	 US Value (53.0%)	 Prior Value (55.3%)
		 Trend		
People 65+ Living Below Poverty Level	6.2% (2012-2016)	 MO Counties	 U.S. Counties	 MO Value (8.9%)
		 US Value (9.3%)	 Prior Value (6.3%)	 Trend

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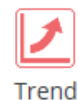
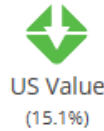
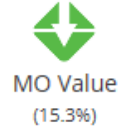
People Living 200% Above Poverty Level

75.0%
(2012-2016)



People Living Below Poverty Level

10.3%
(2012-2016)



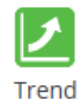
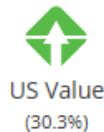
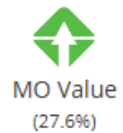
Education / Educational Attainment in Adult Population

VALUE

COMPARED TO:

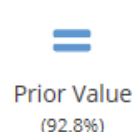
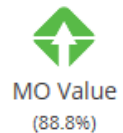
People 25+ with a Bachelor's Degree or Higher

42.4%
(2012-2016)

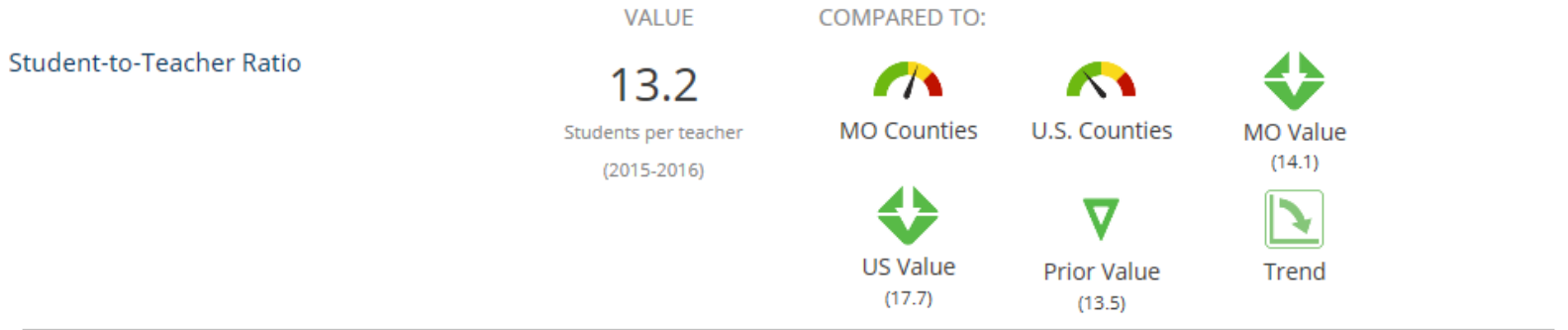


People 25+ with a High School Degree or Higher

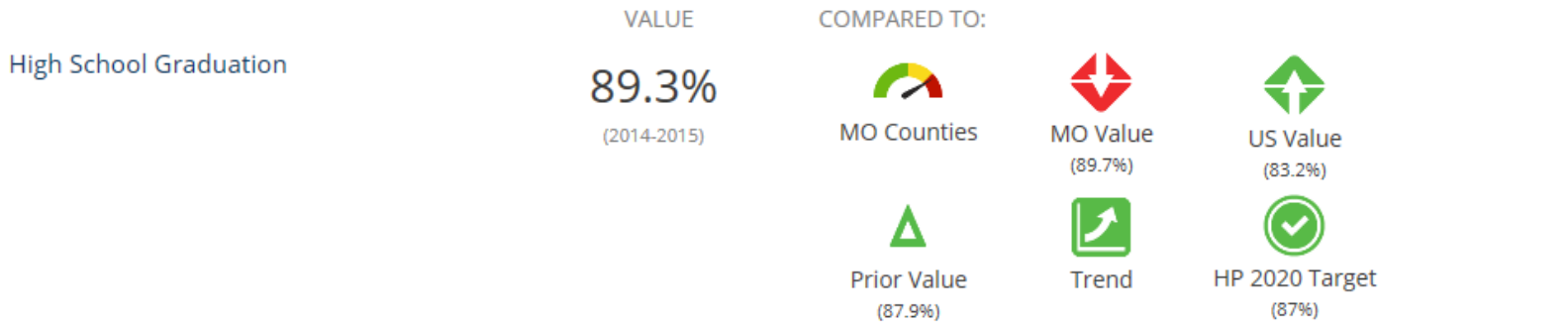
93.0%
(2012-2016)



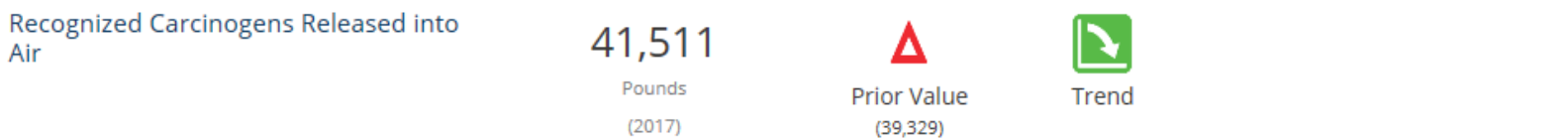
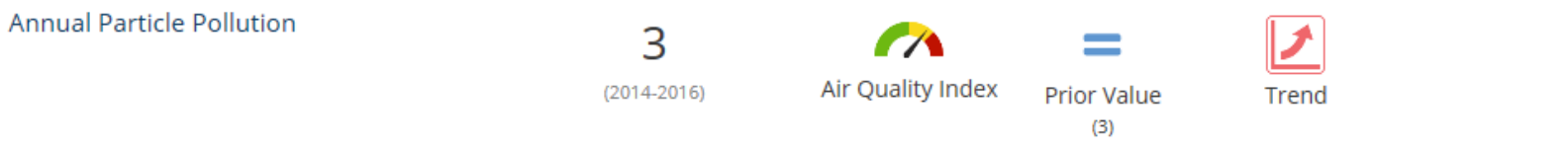
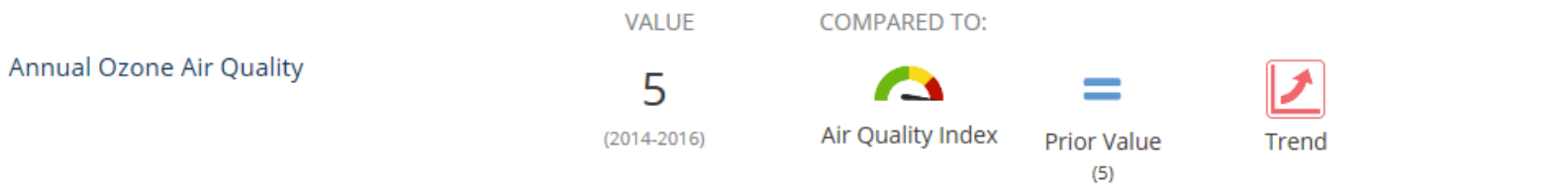
Education / School Resources























Education / Student Performance K-12



Environment / Air




























Environment / Built Environment

	VALUE	COMPARED TO:		
Access to Exercise Opportunities	<p>94.7%</p> <p>(2018)</p>	 MO Counties	 U.S. Counties	 MO Value (77.4%)
		 US Value (83.1%)		
Children with Low Access to a Grocery Store	<p>6.6%</p> <p>(2015)</p>	 MO Counties	 U.S. Counties	 Prior Value (6.5%)
Farmers Market Density	<p>0.02</p> <p>Markets per 1,000 population (2016)</p>	 US Value (0.03)	 Prior Value (0.01)	 Trend
Fast Food Restaurant Density	<p>0.80</p> <p>Restaurants per 1,000 population (2014)</p>	 MO Counties	 U.S. Counties	 Prior Value (0.83)
		 Trend		
Food Environment Index	<p>7.4</p> <p>(2018)</p>	 MO Counties	 U.S. Counties	 MO Value (6.7)
		 US Value (7.7)	 Prior Value (7.0)	 Trend

Appendix

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Grocery Store Density	0.18 Stores per 1,000 population (2014)	 MO Counties	 U.S. Counties	 Prior Value (0.19)
		 Trend		
Households with No Car and Low Access to a Grocery Store	1.6% (2015)	 MO Counties	 U.S. Counties	 Prior Value (1.1%)
Liquor Store Density	7.7 Stores per 100,000 population (2015)	 MO Counties	 U.S. Counties	 MO Value (6.3)
		 US Value (10.5)	 Prior Value (7.1)	 Trend
Low-Income and Low Access to a Grocery Store	6.0% (2015)	 MO Counties	 U.S. Counties	 Prior Value (5.0%)
People 65+ with Low Access to a Grocery Store	3.7% (2015)	 MO Counties	 U.S. Counties	 Prior Value (3.8%)
People with Low Access to a Grocery Store	26.8% (2015)	 MO Counties	 U.S. Counties	 Prior Value (26.5%)
Recreation and Fitness Facilities	0.13 Facilities per 1,000 population (2014)	 US Value (0.06)	 Prior Value (0.13)	 Trend

Appendix

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SNAP Certified Stores

0.6

Stores per 1,000
population
(2016)



MO Counties



U.S. Counties



Prior Value
(0.6)



Trend

Environment / Toxic Chemicals

VALUE

COMPARED TO:

Houses Built Prior to 1950

16.8%

(2012-2016)



MO Counties



U.S. Counties



MO Value
(19.1%)



US Value
(18.2%)



Prior Value
(17.1%)



Trend

PBT Released

55

Pounds
(2017)



Prior Value
(58)



Trend

Environment / Water

VALUE

COMPARED TO:

Drinking Water Violations

0.0%

(FY 2013-14)



MO Counties



U.S. Counties



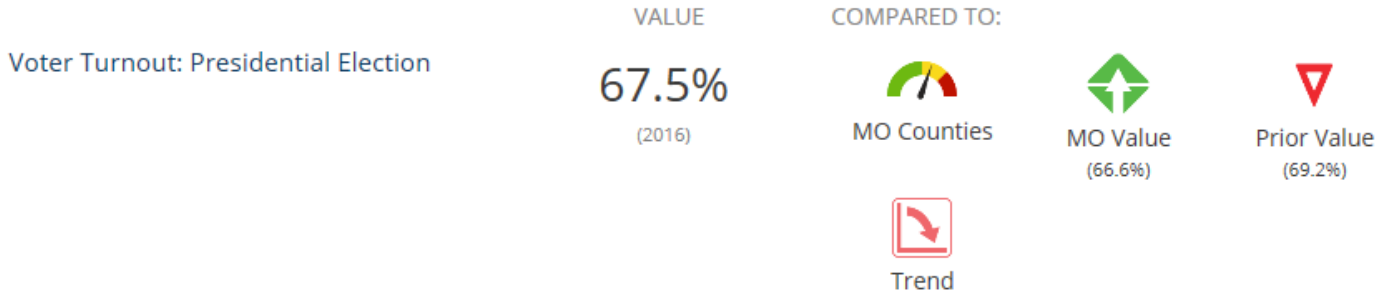
MO Value
(4.4%)



Prior Value
(0.0%)

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Government & Politics / Elections & Voting



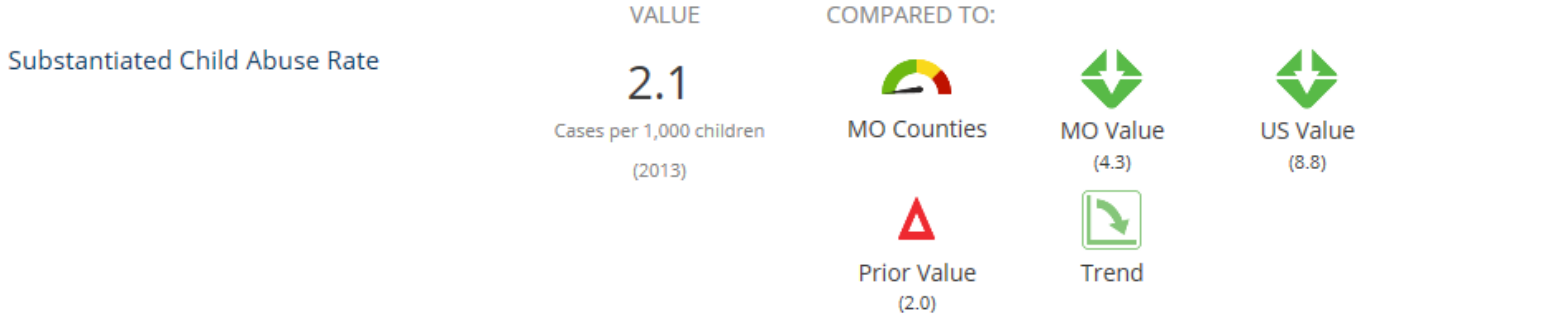
Public Safety / Crime & Crime Prevention



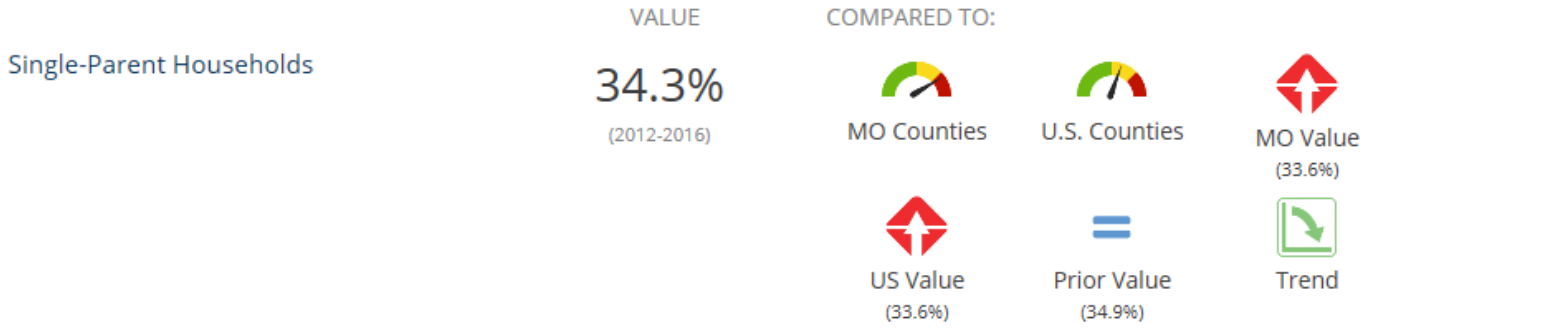
Public Safety / Transportation Safety



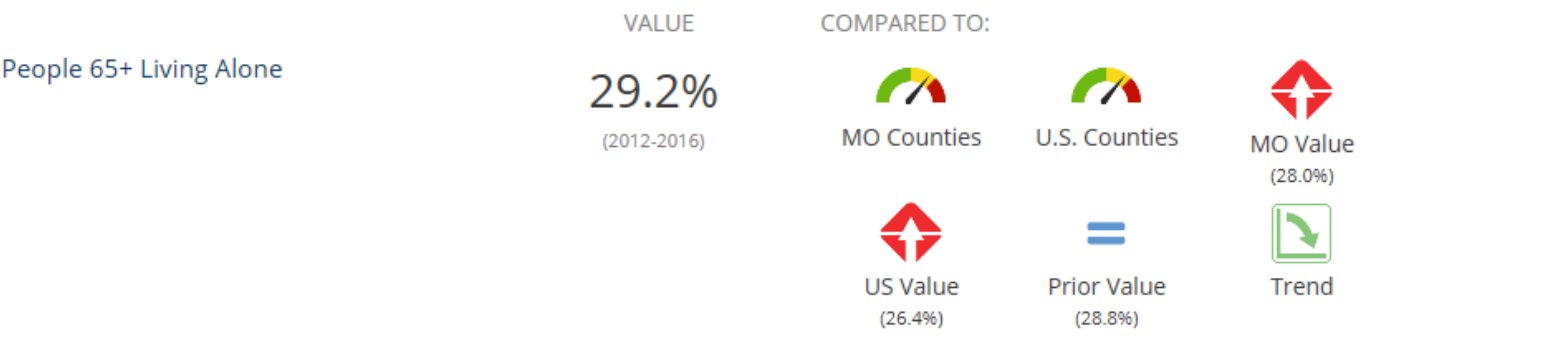
Social Environment / Children's Social Environment



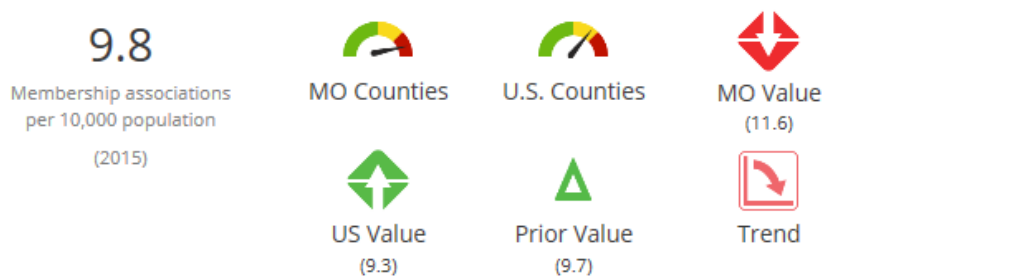
Social Environment / Family Structure




























Social Environment / Neighborhood/Community Attachment



Social Associations



Transportation / Commute To Work

	VALUE	COMPARED TO:		
Mean Travel Time to Work	<p>24.0 Minutes (2012-2016)</p>	 MO Counties	 U.S. Counties	 MO Value (23.4)
		 US Value (26.1)	 Prior Value (23.7)	 Trend
Solo Drivers with a Long Commute	<p>32.0% (2012-2016)</p>	 MO Counties	 U.S. Counties	 MO Value (30.9%)
		 US Value (34.7%)	 Prior Value (31.3%)	 Trend
Workers Commuting by Public Transportation	<p>2.6% (2012-2016)</p>	 MO Counties	 U.S. Counties	 MO Value (1.5%)
		 US Value (5.1%)	 Prior Value (2.6%)	 Trend
		 HP 2020 Target (5.5%)		
Workers who Drive Alone to Work	<p>83.3% (2012-2016)</p>	 MO Counties	 U.S. Counties	 MO Value (81.6%)
		 US Value (76.4%)	 Prior Value (83.5%)	 Trend

Appendix

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Workers who Walk to Work


1.5%
(2012-2016)


 MO Counties

 U.S. Counties

 MO Value
(1.9%)

 US Value
(2.8%)

 Prior Value
(1.5%)

 Trend

 HP 2020 Target
(3.1%)

Transportation / Personal Vehicle Travel

VALUE


Households without a Vehicle

7.2%
(2012-2016)

COMPARED TO:

 MO Counties

 U.S. Counties

 MO Value
(7.3%)

 US Value
(9.0%)

 Prior Value
(7.3%)

 Trend

Search this site

Think Health St. Louis

St. Louis Partnership
for a Healthy Community

HEALTH DATA

ST. LOUIS CITY

ST. LOUIS COUNTY

REGIONAL EFFORTS

RESOURCES

Home > Community Dashboard > All Data

Search for Indicators

All Data

St. Louis City

Turn Colorblind Mode On

Health / Access to Health Services

Adults with Health Insurance


VALUE
85.0%
(2016)

COMPARED TO:


MO Counties


U.S. Counties


MO Value
(87.2%)


Prior Value
(83.8%)


Trend


HP 2020 Target
(100.0%)

Children with Health Insurance

96.3%
(2016)


U.S. Counties


MO Value
(95.5%)


US Value
(95.5%)


Prior Value
(94.0%)


Trend



HP 2020 Target
(100.0%)

Appendix

St. Louis City Health Dashboard www.thinkhealthstl.org

Medicare Healthcare Costs

10,423
Dollars per enrollee
(2015)


MO Value
(9,750)


US Value
(9,729)


Prior Value
(9,977)



Trend

Non-Physician Primary Care Provider Rate

185
Providers per 100,000
population
(2017)



MO Counties


U.S. Counties


MO Value
(79)



US Value


Prior Value


Trend

Persons with Private Health Insurance Only

52.8%
(2016)


MO Value
(59.6%)


US Value
(56.0%)



Prior Value
(52.6%)


Trend

Persons with Public Health Insurance Only

28.8%
(2016)


MO Value
(19.8%)


US Value
(23.0%)


Prior Value
(27.3%)


Trend

Preventable Hospital Stays: Medicare Population

57.0
Discharges per 1,000
Medicare enrollees
(2015)


MO Counties


U.S. Counties


MO Value
(56.6)


US Value
(49.4)

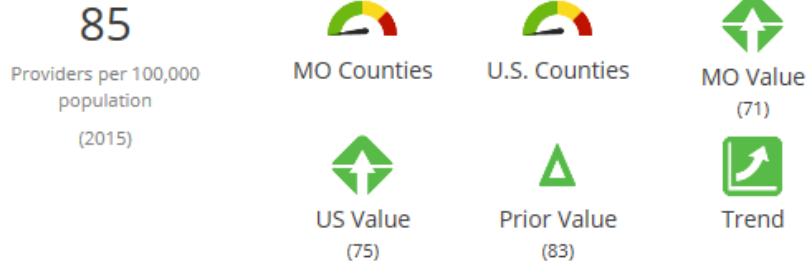

Prior Value
(58.9)


Trend

Appendix

St. Louis City Health Dashboard www.thinkhealthstl.org

Primary Care Provider Rate

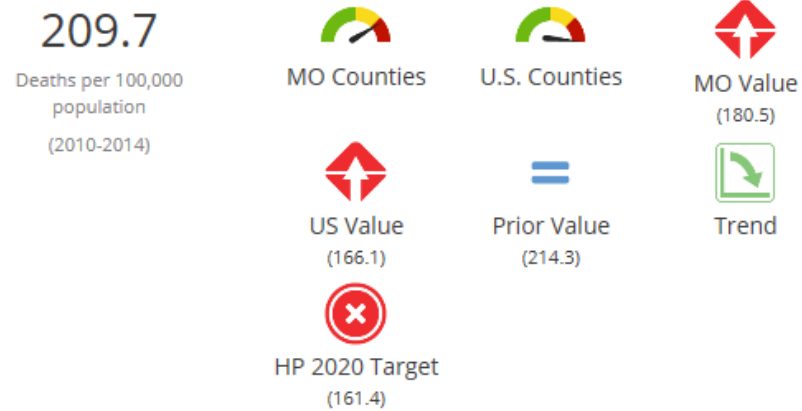


Health / Cancer

Age-Adjusted Death Rate due to Breast Cancer



Age-Adjusted Death Rate due to Cancer

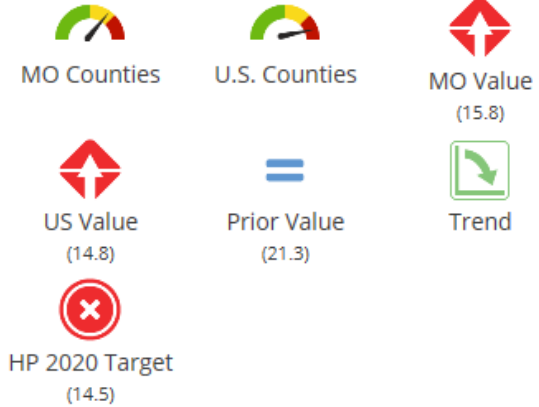


Appendix

St. Louis City Health Dashboard www.thinkhealthstl.org

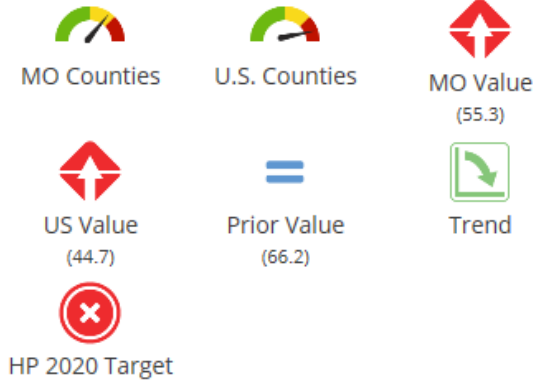
Age-Adjusted Death Rate due to Colorectal Cancer

20.3
Deaths per 100,000 population
(2010-2014)



Age-Adjusted Death Rate due to Lung Cancer

65.2
Deaths per 100,000 population
(2010-2014)



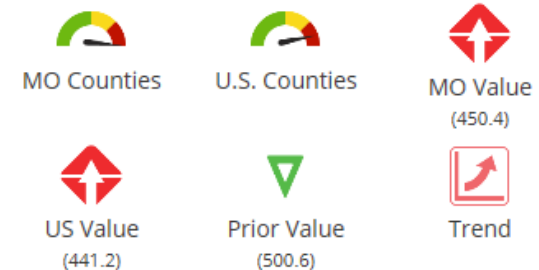
Age-Adjusted Death Rate due to Prostate Cancer

24.2
Deaths per 100,000 males
(2010-2014)



All Cancer Incidence Rate

490.2
Cases per 100,000 population
(2011-2015)

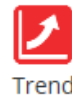
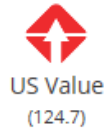
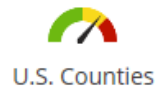


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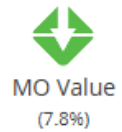
Breast Cancer Incidence Rate

129.8
Cases per 100,000 females
(2011-2015)



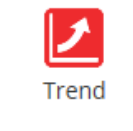
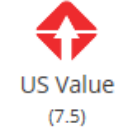
Cancer: Medicare Population

7.0%
(2015)



Cervical Cancer Incidence Rate

13.0
Cases per 100,000 females
(2011-2015)



Colon Cancer Screening: Sigmoidoscopy or Colonoscopy

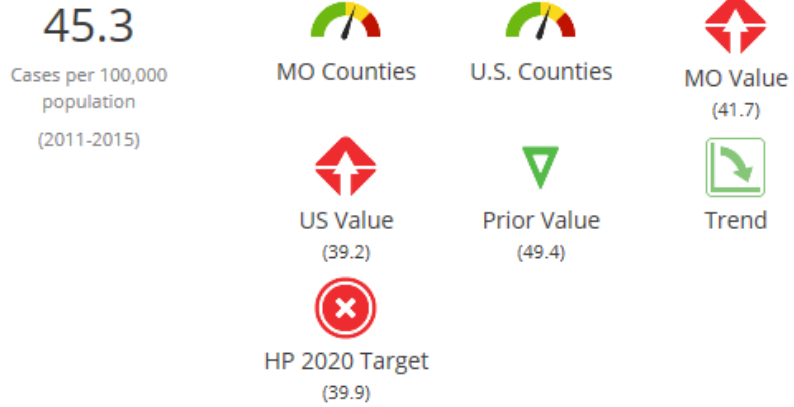
66.3%
(2011)



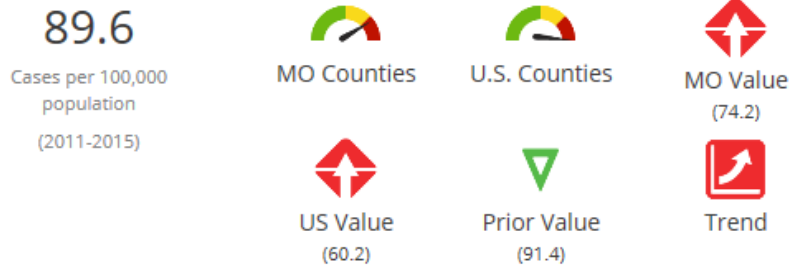
Appendix

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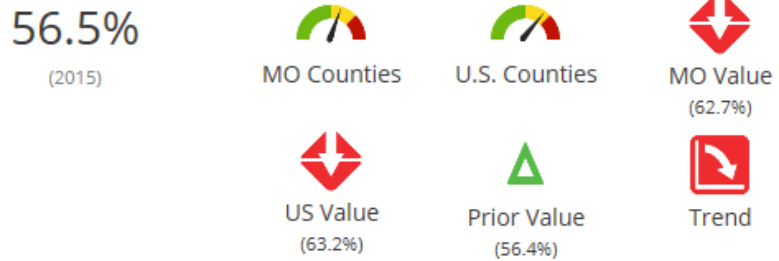
Colorectal Cancer Incidence Rate



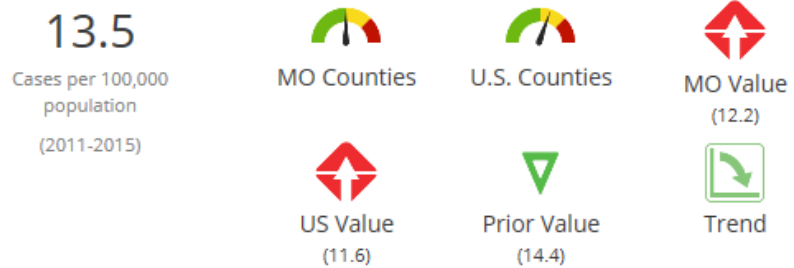
Lung and Bronchus Cancer Incidence Rate



Mammography Screening: Medicare Population



Oral Cavity and Pharynx Cancer Incidence Rate

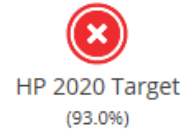
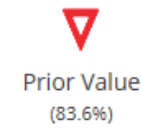
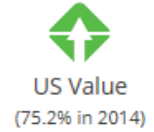


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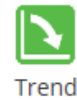
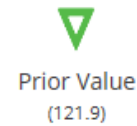
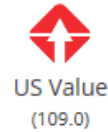
Pap Test in Past 3 Years

78.6%
(2011)



Prostate Cancer Incidence Rate

119.4
Cases per 100,000 males
(2011-2015)



Health / County Health Rankings

	VALUE	COMPARED TO:
Clinical Care Ranking	27 (2018)	MO Counties
Health Behaviors Ranking	110 (2018)	MO Counties
Morbidity Ranking	112 (2018)	MO Counties
Mortality Ranking	103 (2018)	MO Counties
Physical Environment Ranking	90 (2018)	MO Counties

Appendix

St. Louis City Health Dashboard www.thinkhealthstl.org

Social and Economic Factors Ranking

115
(2018)

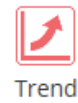
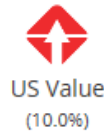


Health / Diabetes

Adults 20+ with Diabetes

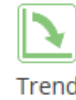
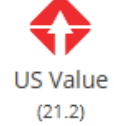
VALUE
12.6%
(2014)

COMPARED TO:



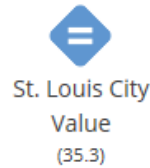
Age-Adjusted Death Rate due to Diabetes

30.3
Deaths per 100,000
population
(2011-2015)



Age-Adjusted ER Rate due to Diabetes

35.3
ER visits per 10,000
population 18+ years
(2012-2014)



Age-Adjusted ER Rate due to Long-Term Complications of Diabetes

11.4
ER visits per 10,000
population 18+ years
(2012-2014)



Appendix

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Age-Adjusted ER Rate due to Short-Term Complications of Diabetes



Age-Adjusted ER Rate due to Uncontrolled Diabetes



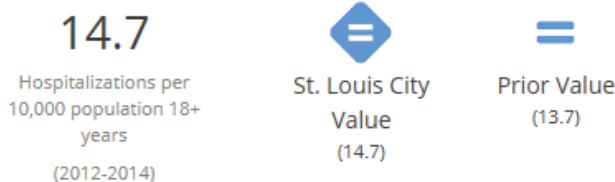
Age-Adjusted Hospitalization Rate due to Diabetes



Age-Adjusted Hospitalization Rate due to Long-Term Complications of Diabetes



Age-Adjusted Hospitalization Rate due to Short-Term Complications of Diabetes



Age-Adjusted Hospitalization Rate due to Uncontrolled Diabetes

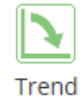
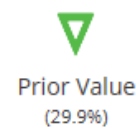
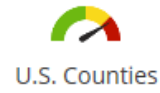


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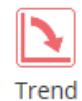
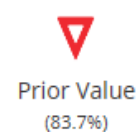
Diabetes: Medicare Population

29.6%
(2015)



Diabetic Monitoring: Medicare Population

82.8%
(2015)



Health / Disabilities

Persons with a Cognitive Difficulty (5-year)

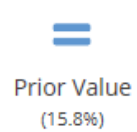
VALUE
7.2%
(2012-2016)

COMPARED TO:



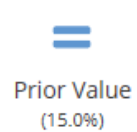
Persons with a Disability

16.2%
(2016)














Persons with a Disability (5-year)





15.5%
(2012-2016)



St. Louis City Health Dashboard www.thinkhealthstl.org

Persons with a Hearing Difficulty (5-year)	3.0% (2012-2016)	 MO Value (4.1%)	 US Value (3.5%)	
Persons with a Self-Care Difficulty (5-year)	3.4% (2012-2016)	 MO Value (2.8%)	 US Value (2.7%)	
Persons with a Vision Difficulty (5-year)	3.3% (2012-2016)	 MO Value (2.5%)	 US Value (2.3%)	
Persons with an Ambulatory Difficulty (5-year)	9.2% (2012-2016)	 MO Value (8.2%)	 US Value (7.0%)	
Persons with Disability Living in Poverty (5-year)	41.1% (2012-2016)	 MO Counties	 MO Value (29.5%)	 US Value (27.6%)

Health / Exercise, Nutrition, & Weight

Adult Fruit and Vegetable Consumption	VALUE 12.2% (2011)	COMPARED TO:	 MO Counties	 MO Value (12.5%)	 US Value (23.4% in 2009)
			 Prior Value (26.8%)		

Appendix

St. Louis City Health Dashboard www.thinkhealthstl.org

Adults 20+ who are Sedentary

23.7%
(2014)



MO Counties



U.S. Counties



MO Value
(25.8%)



US Value
(23.0%)



Prior Value
(23.5%)



Trend



HP 2020 Target
(32.6%)

Adults who are Obese

31.1%
(2011)



MO Counties



MO Value
(30.0%)



US Value
(29.9% in 2016)



Prior Value
(31.3%)



HP 2020 Target
(30.5%)

Adults who are Overweight

32.5%
(2011)



MO Counties



MO Value
(34.3%)



US Value
(35.8%)



Prior Value
(33.4%)

Child Food Insecurity Rate

23.3%
(2016)



MO Counties



U.S. Counties



MO Value
(17.4%)



US Value
(17.9%)



Prior Value
(22.8%)

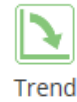


Trend

St. Louis City Health Dashboard www.thinkhealthstl.org

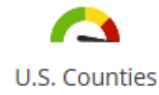
Food Insecure Children Likely Ineligible for Assistance

40%
(2016)



Food Insecurity Rate

25.1%
(2016)



Health / Heart Disease & Stroke

Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)

VALUE
48.4
Deaths per 100,000 population
(2011-2015)

COMPARED TO:



Prior Value
(46.8)



Trend



HP 2020 Target
(34.8)

Age-Adjusted Death Rate due to Heart Disease

232.4
Deaths per 100,000 population
(2011-2015)



Prior Value
(241.0)




Trend

Appendix

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Age-Adjusted ER Rate due to Heart Failure

5.9
ER visits per 10,000 population 18+ years (2012-2014)


St. Louis City Value (5.9)


Prior Value (6.4)

Age-Adjusted ER Rate due to Hypertension

46.7
ER visits per 10,000 population 18+ years (2012-2014)


St. Louis City Value (46.7)


Prior Value (48.5)

Age-Adjusted Hospitalization Rate due to Heart Failure


67.2
Hospitalizations per 10,000 population 18+ years (2012-2014)


St. Louis City Value (67.2)


Prior Value (68.1)

Age-Adjusted Hospitalization Rate due to Hypertension

16.9
Hospitalizations per 10,000 population 18+ years (2012-2014)



St. Louis City Value (16.9)



Prior Value (17.6)

Atrial Fibrillation: Medicare Population

5.9%
(2015)


MO Counties


U.S. Counties


MO Value (8.1%)


US Value (8.1%)


Prior Value (6.0%)


Trend

Heart Failure: Medicare Population

17.0%
(2015)


MO Counties


U.S. Counties


MO Value (13.7%)


US Value (13.5%)


Prior Value (17.0%)

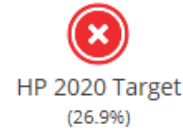

Trend

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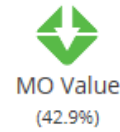
High Blood Pressure Prevalence

35.7%
(2011)



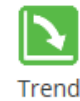
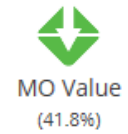
High Cholesterol Prevalence: Adults 35+

41.2%
(2011)



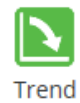
Hyperlipidemia: Medicare Population

36.2%
(2015)



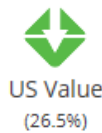
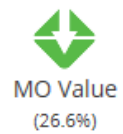
Hypertension: Medicare Population

55.2%
(2015)



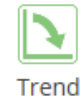
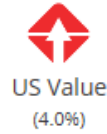
Ischemic Heart Disease: Medicare Population

23.8%
(2015)



Stroke: Medicare Population

4.4%
(2015)



Health / Immunizations & Infectious Diseases

Age-Adjusted Death Rate due to Influenza and Pneumonia

VALUE
18.7
Deaths per 100,000 population
(2011-2015)

COMPARED TO:



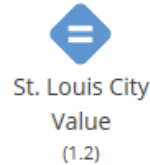
Age-Adjusted ER Rate due to Community Acquired Pneumonia

16.7
ER visits per 10,000 population 18+ years
(2012-2014)



Age-Adjusted ER Rate due to Hepatitis

1.2
ER visits per 10,000 population 18+ years
(2012-2014)



Age-Adjusted ER Rate due to Immunization-Preventable Pneumonia and Influenza

11.8
ER visits per 10,000 population 18+ years
(2012-2014)




St. Louis City Health Dashboard www.thinkhealthstl.org

Age-Adjusted Hospitalization Rate due to Community Acquired Pneumonia

<p>29.3</p> <p>Hospitalizations per 10,000 population 18+ years (2012-2014)</p>	 <p>St. Louis City Value (29.3)</p>	 <p>Prior Value (32.4)</p>
--	--	---






Age-Adjusted Hospitalization Rate due to Hepatitis

<p>5.6</p> <p>Hospitalizations per 10,000 population 18+ years (2012-2014)</p>	 <p>St. Louis City Value (5.6)</p>	 <p>Prior Value (5.2)</p>
---	---	--

Age-Adjusted Hospitalization Rate due to Immunization-Preventable Pneumonia and Influenza







<p>3.2</p> <p>Hospitalizations per 10,000 population 18+ years (2012-2014)</p>	 <p>St. Louis City Value (3.2)</p>	 <p>Prior Value (2.6)</p>
---	--	--

Chlamydia Incidence Rate: Females 15-19

<p>11,362.2</p> <p>Cases per 100,000 females aged 15-19 (2010-2014)</p>	 <p>MO Counties</p>	 <p>MO Value (3,607.0)</p>	 <p>US Value (3,229.0)</p>
	 <p>Prior Value (11,756.2)</p>	 <p>Trend</p>	

Health / Maternal, Fetal & Infant Health

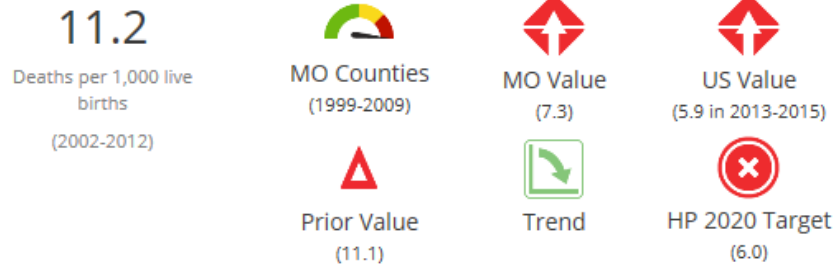
Babies with Low Birth Weight

<p>VALUE</p> <p>12.3%</p> <p>(2014)</p>	<p>COMPARED TO:</p>		
	 <p>MO Counties</p>	 <p>MO Value (8.2%)</p>	 <p>US Value (8.0%)</p>
	 <p>Prior Value (12.1%)</p>	 <p>Trend</p>	 <p>HP 2020 Target (7.8%)</p>

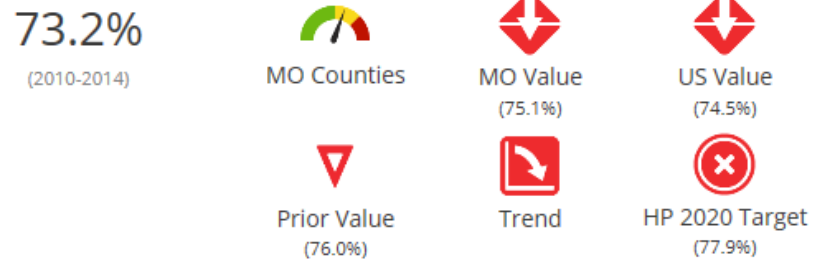
Appendix

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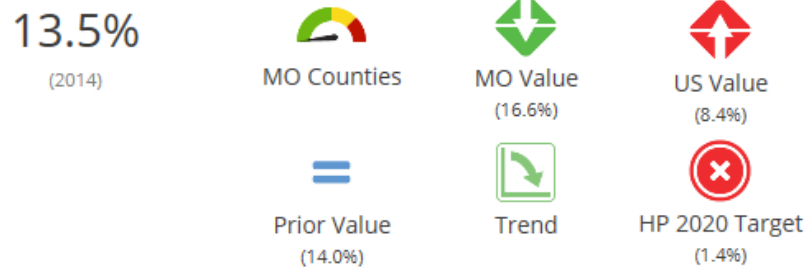
Infant Mortality Rate



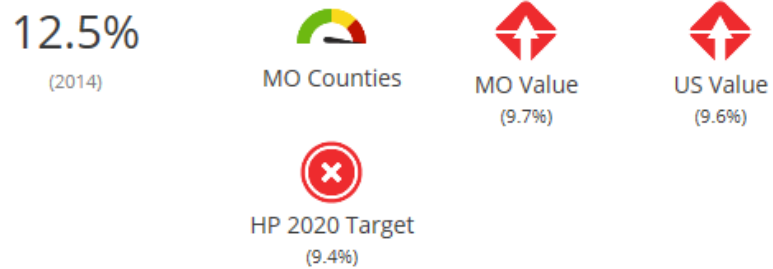
Mothers who Received Early Prenatal Care














Mothers who Smoked During Pregnancy



Preterm Births



Health / Mental Health & Mental Disorders

	VALUE	COMPARED TO:		
Age-Adjusted Death Rate due to Suicide	<p>11.2</p> <p>Deaths per 100,000 population (2011-2015)</p>	 MO Counties (2005-2009)	 MO Value (15.7)	 US Value (12.8)
		 Prior Value (11.5)	 Trend	 HP 2020 Target (10.2)
Age-Adjusted ER Rate due to Adolescent Suicide and Intentional Self-inflicted Injury	<p>57.2</p> <p>ER visits per 10,000 population aged 12-17 (2012-2014)</p>	 Prior Value (56.1)		
Age-Adjusted ER Rate due to Mental Health	<p>131.9</p> <p>ER visits per 10,000 population 18+ years (2012-2014)</p>	 Prior Value (138.8)		
Age-Adjusted ER Rate due to Pediatric Mental Health	<p>78.1</p> <p>ER visits per 10,000 population under 18 years (2012-2014)</p>	 Prior Value (72.6)		
Age-Adjusted ER Rate due to Suicide and Intentional Self-inflicted Injury	<p>48.5</p> <p>ER visits per 10,000 population 18+ years (2012-2014)</p>	 Prior Value (51.8)		
Age-Adjusted Hospitalization Rate due to Adolescent Suicide and Intentional Self-inflicted Injury	<p>61.2</p> <p>Hospitalizations per 10,000 population aged 12-17 (2012-2014)</p>	 Prior Value (50.4)		

Appendix

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Age-Adjusted Hospitalization Rate due to Mental Health

188.3

Hospitalizations per 10,000 population 18+ years
(2012-2014)



Prior Value
(184.1)

Age-Adjusted Hospitalization Rate due to Pediatric Mental Health

55.5

Hospitalizations per 10,000 population under 18 years
(2012-2014)



Prior Value
(51.5)

Age-Adjusted Hospitalization Rate due to Suicide and Intentional Self-inflicted Injury

103.8

Hospitalizations per 10,000 population 18+ years
(2012-2014)



Prior Value
(94.4)

Depression: Medicare Population

23.0%

(2015)



MO Counties



U.S. Counties



MO Value
(20.0%)



US Value
(16.7%)



Prior Value
(22.5%)



Trend

Frequent Mental Distress

15.1%

(2016)



MO Counties



U.S. Counties



MO Value
(13.8%)

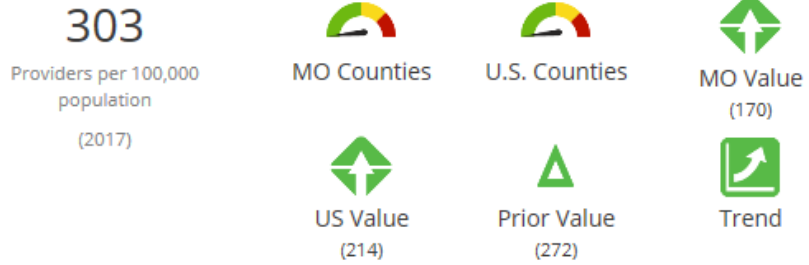


US Value
(15.0%)

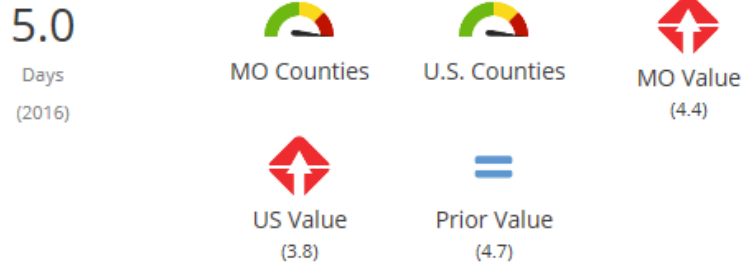


Prior Value
(14.7%)

Mental Health Provider Rate

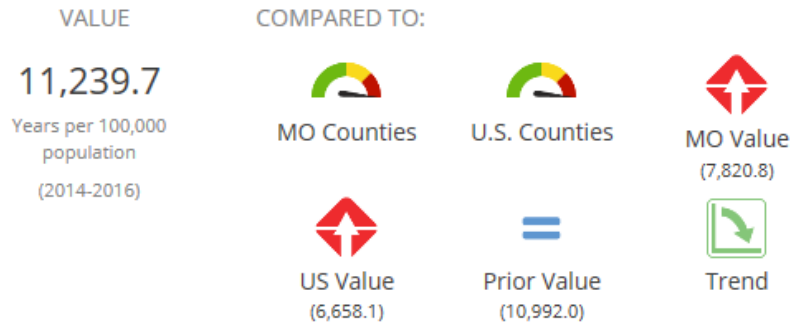


Poor Mental Health: Average Number of Days



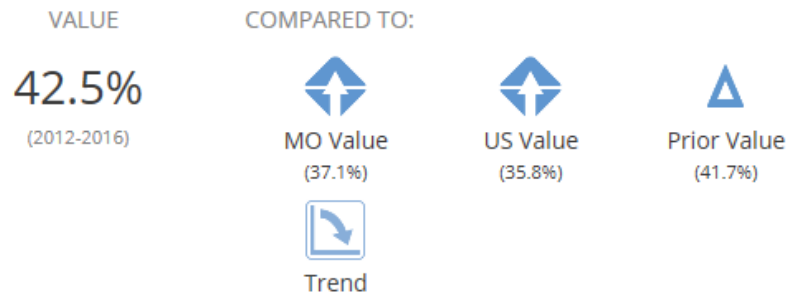
Health / Mortality Data

Premature Death



Health / Older Adults & Aging

Adults 65+ with a Disability




Appendix

St. Louis City Health Dashboard www.thinkhealthstl.org

Adults 65+ with a Hearing Difficulty

12.6%
(2012-2016)


MO Value
(16.0%)



US Value
(14.8%)


Prior Value
(12.9%)



Trend

Adults 65+ with a Self-Care Difficulty

10.8%
(2012-2016)


MO Value
(7.6%)


US Value
(8.4%)


Prior Value
(10.4%)



Trend

Adults 65+ with a Vision Difficulty

10.0%
(2012-2016)


MO Value
(6.7%)



US Value
(6.6%)


Prior Value
(9.4%)


Trend

Adults 65+ with an Independent Living Difficulty

20.0%
(2012-2016)


MO Value
(14.4%)


US Value
(15.2%)



Prior Value
(20.8%)


Trend

Age-Adjusted Death Rate due to Alzheimer's Disease

19.0
Deaths per 100,000
population
(2011-2015)


MO Counties










MO Value
(27.3)


US Value
(25.4)














Prior Value
(18.7)


Trend

Health / Oral Health

	VALUE	COMPARED TO:		
Age-Adjusted ER Rate due to Dental Problems	<p>123.7</p> <p>ER visits per 10,000 population (2012-2014)</p>	 St. Louis City Value (123.7)	 Prior Value (121.9)	
Dentist Rate	<p>52</p> <p>Dentists per 100,000 population (2016)</p>	 MO Counties	 U.S. Counties	 MO Value (55)
		 US Value (67)	 Prior Value (48)	 Trend

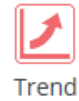
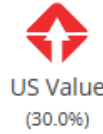
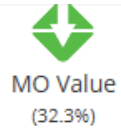
Health / Other Chronic Diseases

	VALUE	COMPARED TO:		
Chronic Kidney Disease: Medicare Population	<p>23.6%</p> <p>(2015)</p>	 MO Counties	 U.S. Counties	 MO Value (18.2%)
		 US Value (18.1%)	 Prior Value (22.3%)	 Trend
Osteoporosis: Medicare Population	<p>4.9%</p> <p>(2015)</p>	 MO Counties	 U.S. Counties	 MO Value (5.8%)
		 US Value (6.0%)	 Prior Value (5.0%)	 Trend

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Rheumatoid Arthritis or Osteoarthritis:
Medicare Population

30.4%
(2015)



Health / Other Conditions

Age-Adjusted ER Rate due to Dehydration

VALUE
13.8
ER visits per 10,000
population 18+ years
(2012-2014)


COMPARED TO:

St. Louis City
Value
(13.8)


Prior Value
(13.4)

Age-Adjusted ER Rate due to Urinary
Tract Infections


102.1
ER visits per 10,000
population 18+ years
(2012-2014)


St. Louis City
Value
(102.1)


Prior Value
(98.9)

Age-Adjusted Hospitalization Rate due to
Dehydration


22.2
Hospitalizations per
10,000 population 18+
years
(2012-2014)


St. Louis City
Value
(22.2)


Prior Value
(24.2)

Age-Adjusted Hospitalization Rate due to
Urinary Tract Infections

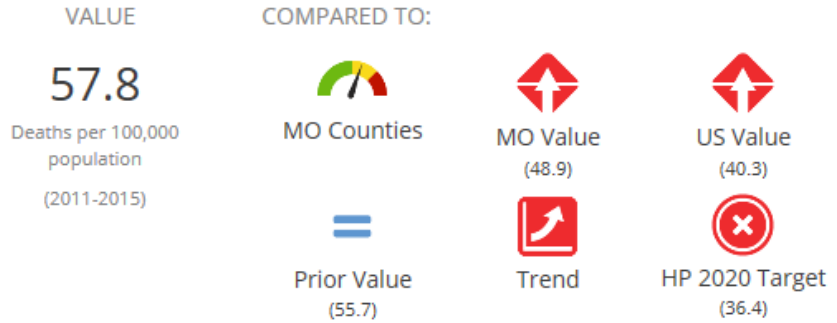
22.9
Hospitalizations per
10,000 population 18+
years
(2012-2014)


St. Louis City
Value
(22.9)


Prior Value
(25.3)

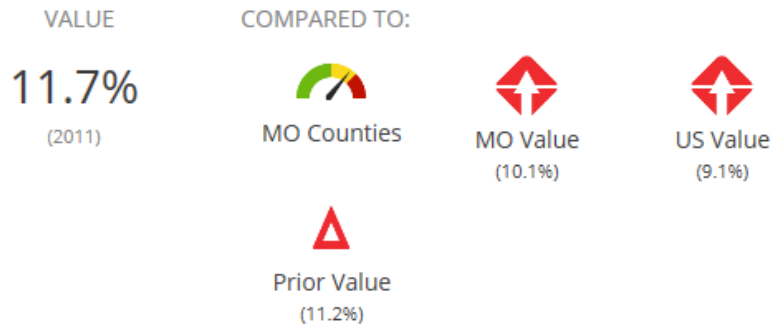
Health / Prevention & Safety

Age-Adjusted Death Rate due to Unintentional Injuries

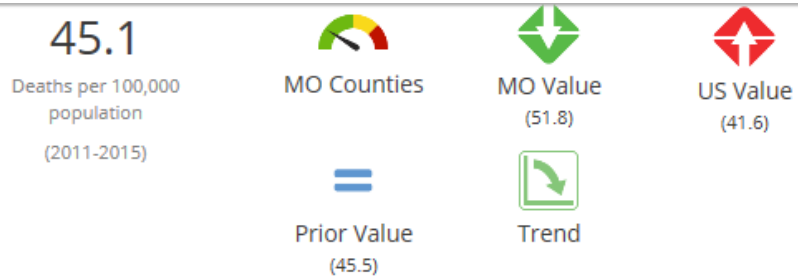


Health / Respiratory Diseases

Adults with Current Asthma



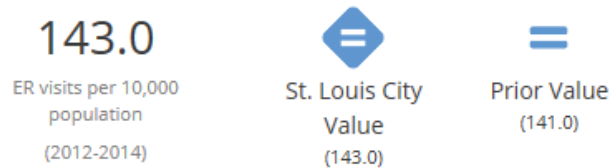
Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases



Age-Adjusted ER Rate due to Adult Asthma

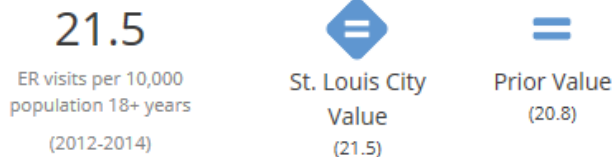


Age-Adjusted ER Rate due to Asthma

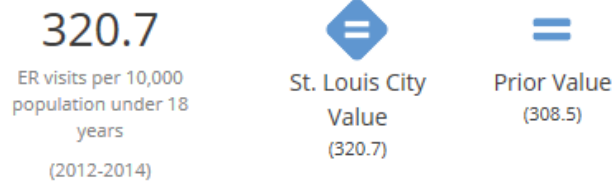


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Age-Adjusted ER Rate due to COPD



Age-Adjusted ER Rate due to Pediatric Asthma



Age-Adjusted Hospitalization Rate due to Adult Asthma



Age-Adjusted Hospitalization Rate due to Asthma



Age-Adjusted Hospitalization Rate due to COPD

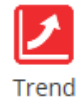
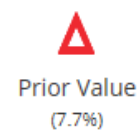
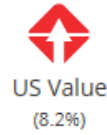
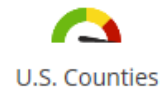


Age-Adjusted Hospitalization Rate due to Pediatric Asthma



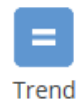
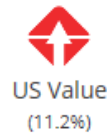
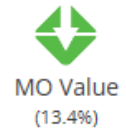
Asthma: Medicare Population

10.6%
(2015)



COPD: Medicare Population

12.0%
(2015)

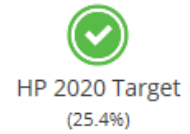
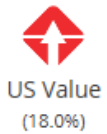


Health / Substance Abuse

Adults who Drink Excessively

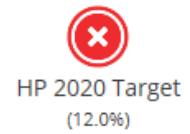
VALUE
20.6%
(2016)

COMPARED TO:



Adults who Smoke

24.7%
(2016)



Appendix

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Age-Adjusted ER Rate due to Alcohol Abuse



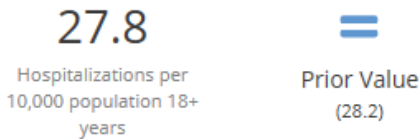
Age-Adjusted ER Rate due to Substance Abuse



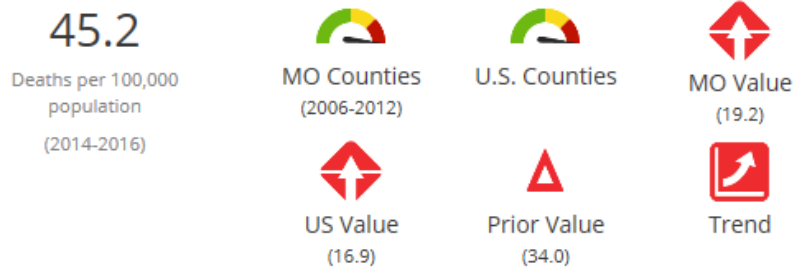
Age-Adjusted Hospitalization Rate due to Alcohol Abuse



Age-Adjusted Hospitalization Rate due to Substance Abuse

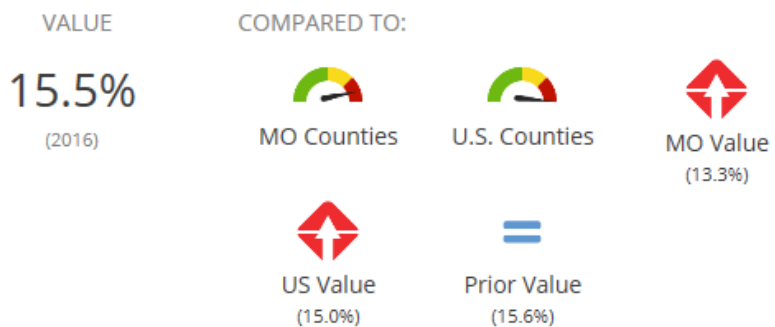


Death Rate due to Drug Poisoning



Health / Wellness & Lifestyle

Frequent Physical Distress

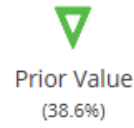
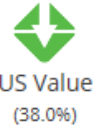
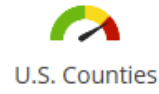


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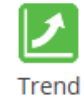
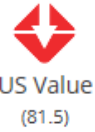
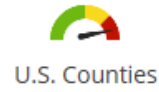
Insufficient Sleep

37.2%
(2016)



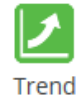
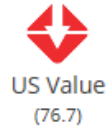
Life Expectancy for Females

77.7
Years
(2014)



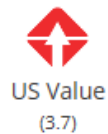
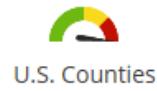
Life Expectancy for Males

70.6
Years
(2014)



Poor Physical Health: Average Number of Days

5.0
Days
(2016)

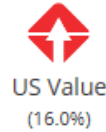
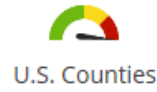


Appendix

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Self-Reported General Health Assessment: Poor or Fair

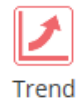
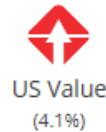
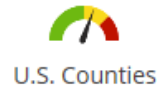
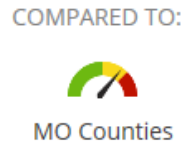
24.0%
(2016)



Economy / Employment

Unemployed Workers in Civilian Labor Force

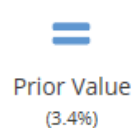
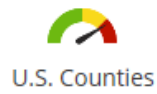
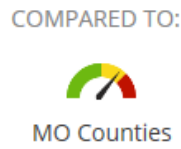
VALUE
4.6%
(July 2018)



Economy / Government Assistance Programs

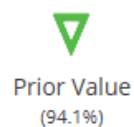
Households with Cash Public Assistance Income

VALUE
3.1%
(2012-2016)

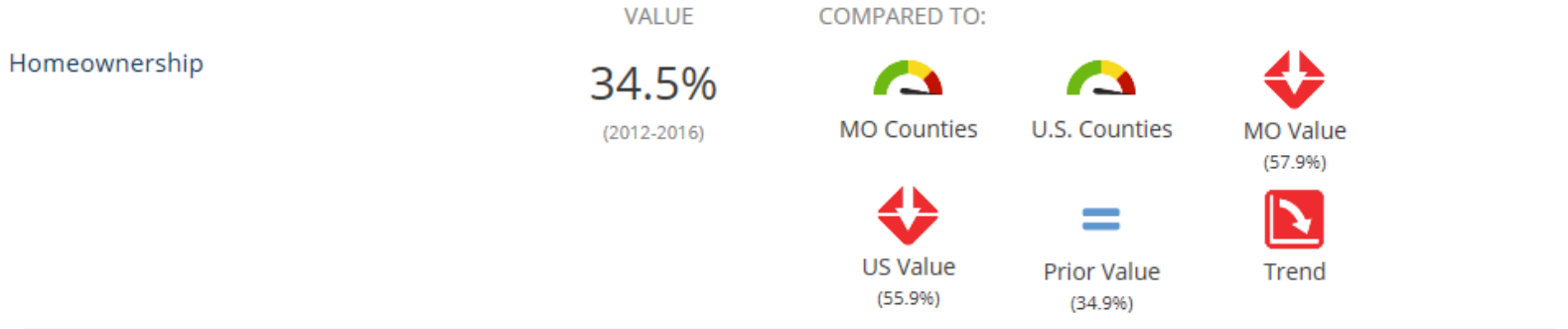


Students Eligible for the Free Lunch Program

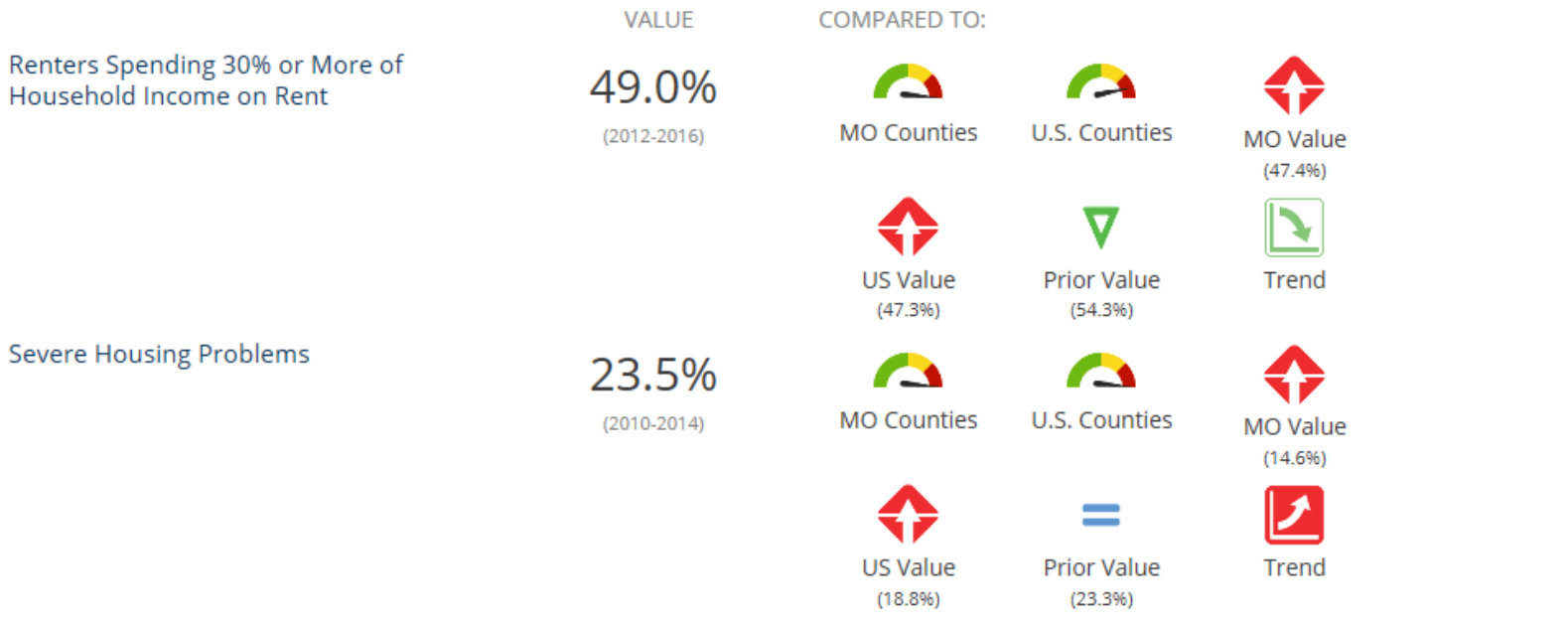
93.7%
(2015-2016)



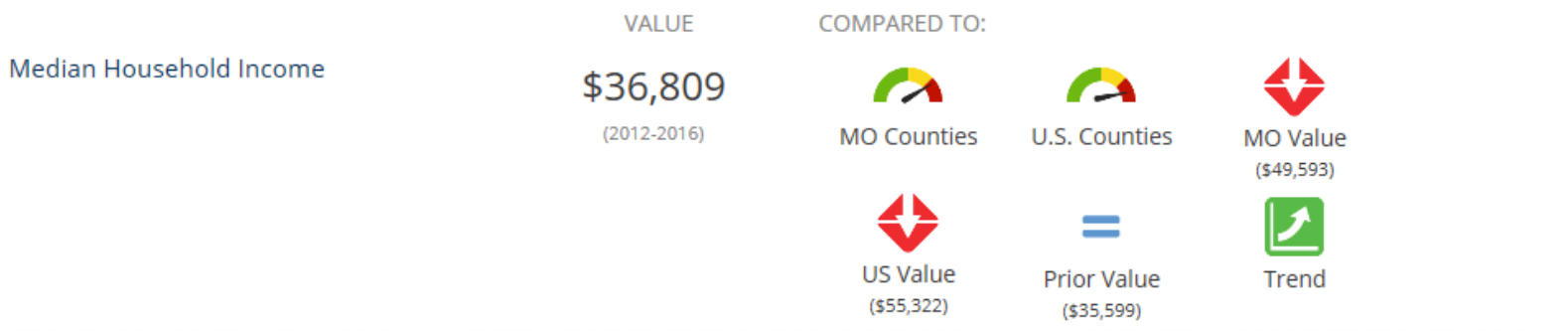
Economy / Homeownership



Economy / Housing Affordability & Supply



Economy / Income

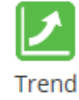
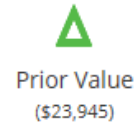
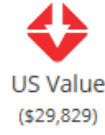
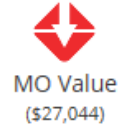


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Per Capita Income

\$25,434
(2012-2016)

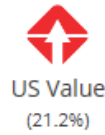
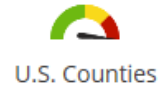


Economy / Poverty

Children Living Below Poverty Level

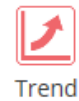
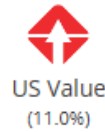
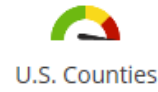
VALUE
42.4%
(2012-2016)

COMPARED TO:



Families Living Below Poverty Level

21.3%
(2012-2016)



CHNA collaborators

BJC Health System: St. Louis Children's Hospital, Barnes Jewish Hospital

Shriner's Children's Hospital

St. Louis Partnership for a Health Community – a collaboration of St. Louis County Department of Health, City of St. Louis Health Department and a broad range of public health stakeholders. www.thinkhealthstl.org