SSM Health St. Francis Hospital - Maryville

2016 South Main Street | Maryville, MO 64468

SSMHealth

2016-2018

Community Health Needs Assessment

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Message to Our Community

SSM Health St. Francis Hospital – Maryville has delivered exceptional, compassionate care to Nodaway County for many years. 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.

Consistent with our Mission, we will provide these services in collaboration with our medical staff, employees, and organizations within our communities. We rely on these relationships to help us identify and develop plans in order to address high-priority population health needs. We are grateful for the opportunity to partner with local organizations in our efforts to improve the health of our communities.

Over the last 12 months, in collaboration with our community partners, SSM Health St. Francis Hospital - Maryville conducted a Community Health Needs Assessment (CHNA) by gathering health-related information from Healthy Communities Institute (HCI) specific to Nodaway County. We have also interviewed key health officials and conducted community health surveys to identify concerns about the health of these communities, while assessing the number of area-based programs and organizations that exist to address the community's needs. The identified needs were prioritized based on the level of importance to community members and the hospital's ability to make a significant impact.

The priorities we will address over the next three years include:

- Heart Disease
- Obesity

During this time, SSM Health St. Francis Hospital – Maryville will further develop its community partnerships and deliver an exceptional experience through high-quality, accessible and affordable care. Please visit our website at ssmhealthstfrancis.com to learn more about how we will continue to make a difference in our community.

I welcome your thoughts on how we can create a healthier community together.

Sincerely,

Michael Baumgartner

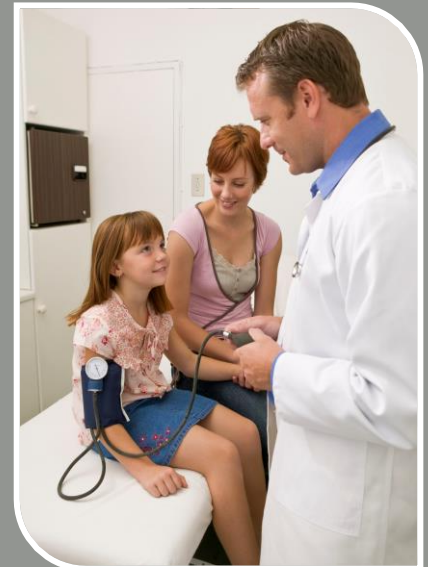President at SSM Health St. Francis Hospital - Maryville
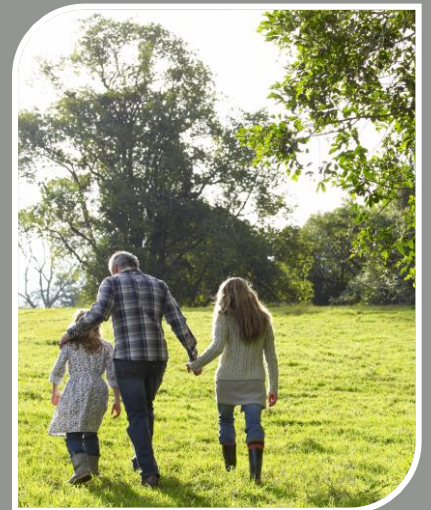
Contact us for more information or to take part in improving the health of our community by calling **660-562-7933** or visit our website at **ssmhealthstfrancis.com.**

Background

SSM Health St. Francis Hospital - Maryville is pleased to present the 2016 - 2018 (2016 Tax Year) Community Health Needs Assessment (CHNA). This CHNA 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 an implementation strategy to address evaluated needs. The SSM Health Maryville Board approved this CHNA on Nov. 19, 2015. SSM Health St. Francis Hospital - Maryville last conducted a CHNA in 2012.

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 St. Francis Hospital - Maryville held a meeting with local, regional, and system members to determine priorities for the 2016-2018 CHNA and strategic implementation plan. Priorities chosen were:

• Heart Disease: Resources include SSM Health St. Francis Hospital – Maryville and the SSM Health Medical Group.

• Obesity: Resources include SSM Health St. Francis Hospital – Maryville and the SSM Health Medical Group.

Goals

Heart Disease

• Reduce the age-adjusted death rate due to coronary heart disease in Nodaway County from 113.8 deaths per 100,000 persons reported in 2015 to 110 deaths per 100,000 persons by 2018

• Maintain the SSM Health St. Francis Hospital - Maryville congestive heart failure (CHF) 30-day readmission threshold at or below 7.41% between 2015 and 2018

• Reduce the percentage of Nodaway County adults who are not taking medication for their high blood pressure from 29.6% in 2015 to 25.7% or better by 2018 (reducing the gap between county and state by half)

Obesity

• Reduce the age-adjusted death rate due to diabetes in Nodaway County from 29.5 deaths per 100,000 persons in 2015 to 26.5 deaths per 100,000 persons by 2018

• Reduce the percentage of Nodaway County adults who are obese in Nodaway County from 23.6% in 2015 to 21.6% by 2018

• Reduce the percentage of Nodaway County adults who are overweight from 41.1% in 2015 to 40% by 2018

• Decrease the percentage of SSM Health St. Francis Hospital – Maryville clinic patients who are overweight (BMI >25) or obese (BMI >30) from 43.8% in 2015 to 40% in 2018

About SSM Health and
SSM Health St. Francis Hospital - Maryville

SSMHealth

SSM Health

SSM Health is a Catholic, not-for-profit health system that has provided exceptional care to community members regardless of their ability to pay for more than 140 years. Guided by its Mission and Values, SSM Health is one of the largest integrated care delivery systems in the nation, serving the comprehensive health needs of communities across the Midwest.

SSM Health strives to provide a consistently exceptional experience through excellent service and high-quality, accessible and affordable care.

The SSM Health system spans four states, with care delivery sites in Illinois, Missouri, Oklahoma and Wisconsin. SSM Health includes 20 hospitals, more than 60 outpatient care sites, a pharmacy benefit company, an insurance company, two nursing homes, comprehensive home care and hospice services, a telehealth and technology company and two Accountable Care Organizations. With more than 31,000 employees, 1,100 employed physicians and 8,500 medical staff physicians, SSM Health is one of the largest employers in every community it serves.

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

SSM Health St. Francis Hospital - Maryville

Highlight of services

SSM Health St. Francis Hospital – Maryville is an 81-bed, not-for-profit, acute care hospital located in the rural town of Maryville, Mo. We provide emergency care and acute treatment for residents of Nodaway County. Our services also reach into the surrounding rural Missouri counties of Andrew, Atchison, Holt, Gentry and Worth, as well as Taylor, Iowa. Primary health care delivery offerings include medical, surgical, obstetrical, behavioral health, emergency, medical clinic and rehabilitative services.

Physician specialties available through the SSM Health Medical Group include family and internal medicine, obstetrics/gynecology, pediatrics, orthopedic and general surgery, anesthesiology, ophthalmology and psychiatry.

Community benefit

In 2014, SSM Health St. Francis Hospital - Maryville provided $15.4 million in unreimbursed care and $0.4 million in other community benefits for a total of over $15.8 million.

Community affiliations and partnerships

SSM Health St. Francis Hospital – Maryville is proud collaborate with community partnerships that improve health outcomes in our community:

- Maryville Parks and Recreation
- Nodaway County Health Department
- Northwest Missouri State University
- Community Services, Inc.

2014
Hospital at a Glance

Admissions:	1,522
Outpatient Visits:	41,152
ER Visits:	7,924
Births:	309
Beds:	81
Employees:	434
Medical Staff:	130+
Volunteers:	N/A

About our Community

SSM Health St. Francis Hospital - Maryville defines its community as Nodaway County. In 2015, this service area had an estimated population of 23,000 people. The following pages of information include demographic and health indicator statistics specific to this community.
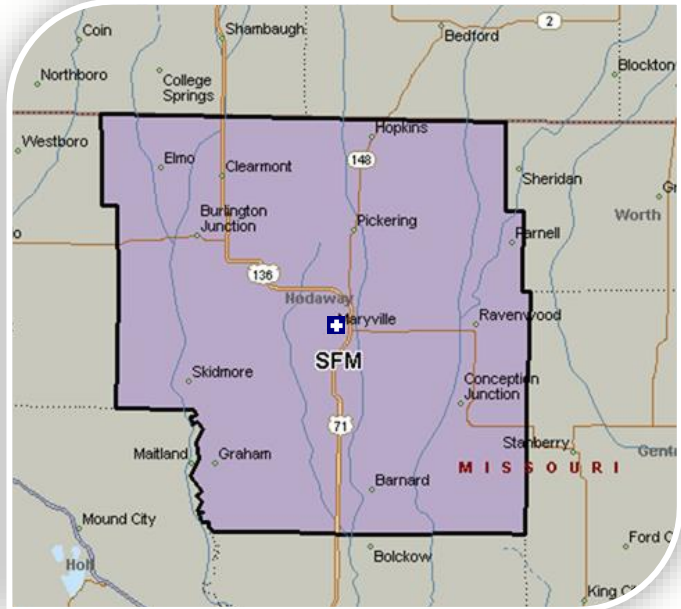
SSM Health St. Francis Hospital - Maryville

Our community by the numbers

Race/Ethnicity
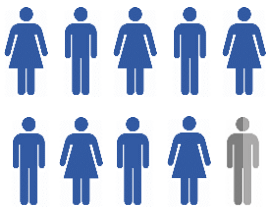
92.6% White/Non-Hispanic
4.4% African American and Hispanic
3.0% All Others

Education Levels

9.2% No High School Degree
42.6% High School Degree
24.8% Some College/Associates Degree
23.4% Bachelor's Degree or Greater

Income Levels

Age Groups

- 18% 0-17
- 27% 18-24
- 12% 25-34
- 19% 35-54
- 10% 55-64
- 14% 65+

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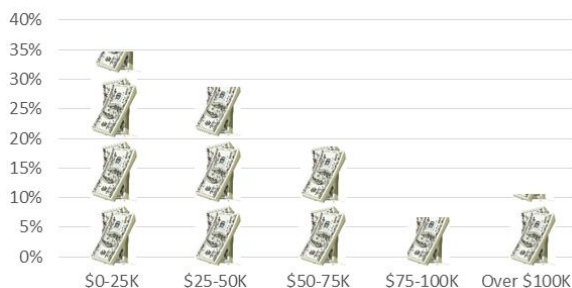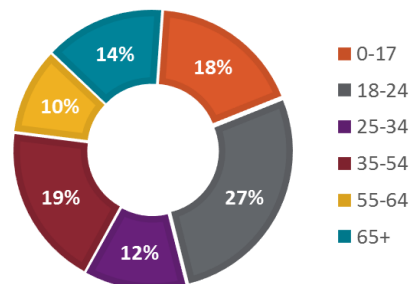
About the data

The data was derived from a variety of sources including the Healthy Communities Institute (HCI) and Community Commons analytic platforms. The HCI website includes the most up-to-date publicly available data for approximately 140 community indicators from over 20 sources and covering 20 topics in the areas of population health, determinants of health and quality of life. Below is a statistical overview of strengths and weaknesses within the community that factored into our discussions with local stakeholders regarding the priority health needs of the population within our service area.

Our community by the numbers

Poverty
28.4% of Nodaway County resident are living below the poverty level, which is almost 2 times the state average

Heart Disease
Ischemic (advanced) heart disease prevalence in Nodaway County is slightly above the state average

Obesity
41.1% of adults in Nodaway County are overweight and 23.6% of adults are obese

Low Teen Birth Rate
The teen birth rate in Nodaway County is almost 4 times less than the state rate

Smoking
14.7% of adults reported being smokers, which is significantly less than the state average

Driving Under the Influence
47.4% of all driving deaths in Nodaway County are alcohol-related, which is higher than the state average

Preventable Hospital Stays
Nodaway County has significantly less preventable hospital stays than the state average

Cancer
The all-cancer incidence rate in Nodaway County is notably better than both state and national averages. However, the age adjusted-death rate due to prostate cancer is significant

Life Expectancy
Overall life expectancy for males and females in Nodaway County is better than both state and national averages

Less Violent Crime
The violent crime rate in Nodaway County is almost 2.5 times less than the state average

Voice of the community

SSM Health St. Francis Hospital - Maryville took the opportunity to solicit 60 key community stakeholders at an annual meeting of the Maryville Citizens for Community Action. Additionally, SSM Health St. Francis Hospital – Maryville benefited from the input of Nodaway County residents through a paper survey. 1,000 of these surveys were randomly distributed, of which 97 were returned. A completed survey was received from nearly every zip code in Nodaway County. The results were collected, analyzed and reviewed by hospital leadership and a coalition of community leaders prior to identifying the top priorities to be addressed.

Issues identified and discussed include:

- Heart disease
- Obesity
- Drug/alcohol abuse
- Cancer
- Access to dental care
- Food insecurity
- Mental health/suicides
- Affordable housing
- Automotive accidents
- Access to care
- Health insurance
- HIV screening

Key priorities

Heart Disease

Heart disease was a common issue voiced in the community feedback and was verified by data research. Specific areas of concern included the death rate due to ischemic heart disease, atrial fibrillation and the percentage of the population struggling with unmanaged blood pressure.

Risk factors for heart disease include high blood pressure, high cholesterol, diabetes, obesity, poor nutrition and smoking. The negative effects of these risk factors can be prevented or reduced with healthy lifestyle behaviors and appropriate treatment.

Obesity

Obesity was identified as an issue in the community feedback and was verified by data research. The disease is also a contributing factor of cancer, heart disease and the root cause for numerous other health concerns within the region.

Lifestyles that can lead to increased risk of obesity mainly include physical inactivity combined with unhealthy diet and eating habits. In many cases, minorities and those living under financial distress are most affected by factors contributing to obesity.

Heart Disease

There are a number of deficiencies within our community that correlate to poor heart health. Some of these lifestyle behaviors that increase the risk of heart disease include:

- Smoking
- Uncontrolled blood pressure
- High cholesterol levels
- Uncontrolled diabetes
- Stress and depression
- Unhealthy food choices
- Lack of exercise

In some cases, minorities and those living under financial distress are often segments of the population who are most affected by factors contributing to heart disease.

SSM Health St. Francis Hospital - Maryville offers a cardiac and pulmonary rehab program that is designed for patients who have undergone heart surgery or suffered a heart attack. SSM Health St. Francis Hospital - Maryville also offers a cardiac maintenance program that assists members with an exercise plan, blood pressure, heart rate and oxygen saturation monitoring. Our goal is to help individuals maintain a healthy lifestyle that will reduce their risk of future heart events.

Additional facts and figures

- 8.3% of adults in Nodaway County have been diagnosed with atrial fibrillation (irregular heartbeat), which is higher than both state and national averages of 7.8% (state average is consistent with national average)

- 34.5% of adults in Nodaway County have high blood pressure, which is higher than both state and national averages of 32.6% and 30.8%, respectively

- 41% of the Medicare population in Nodaway County has hyperlipidemia

- The age-adjusted death rate due to heart disease in Nodaway County is 113.8 deaths per 100,000 persons, which is higher than the Healthy People 2020 goal of 103.4 deaths per 100,000 persons

Priority #1

Source: Healthy Communities Institute

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Priority #2

Obesity is defined as a life-long, progressive, life-threatening, genetically-related, and costly disease of excess fat storage. This disorder is associated with illnesses directly caused or worsened by significant weight. Morbid obesity (or clinically severe obesity) is defined as being over 200% of ideal weight, more than 100 pounds overweight, or a body mass index (BMI) of 40 or higher, at which serious medical conditions occur as a direct result of the obesity. Obesity and unhealthy weight management can also contribute to the development of other diseases such as diabetes and heart disease.

Lifestyles that can lead to increased risk of obesity mainly include physical inactivity combined with unhealthy diet and eating habits. In some cases, minorities and those living under financial distress are often segments of the population most affected by factors contributing to obesity.
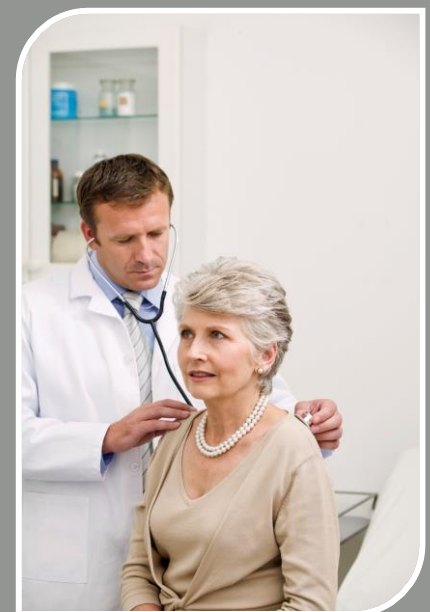
Overall weight management is an identified need for Nodaway County. The weight management program at SSM Health St. Francis Hospital – Maryville places a high importance on the development and maintenance of a healthy lifestyle.

Additional facts and figures

- 41.1% of adults in Nodaway County were recorded as being overweight, which was higher than both state and national averages of 34.3% and 35.7%, respectively [1]

- 23.6% of adults in Nodaway County are obese [1]

- 29.8% of adults in Nodaway County reported themselves as having sedentary lives [1]

- The age-adjusted death rate due to diabetes in Nodaway County is 29.5 deaths per 100,000 persons, which was higher than the state rate of 23.5 deaths per 100,000 persons [1]

- Non-Hispanic African Americans have the highest age-adjusted rates of obesity (47.8%) followed by Hispanics (42.5%), non-Hispanic whites (32.6%) and non-Hispanic Asians (10.8%) [2]

- Obesity is higher among middle-age adults, 40-59 years old (39.5%), than among younger adults, ages 20-39 (30.3%), or adults over 60 (35.4%) [2]

- Higher income women are less likely to suffer from obesity than low-income women [2]

- The prevalence of obesity among children between 2 and 5 years of age decreased significantly from 13.9% in 2003-2004 to 8.4% in 2011-2012 [2]

Source: [1] Healthy Communities Institute, [2] Center for Disease Control and Prevention

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Achieving our Goals, Now and in the Future

SSM Health is committed to improving the health of our communities through collaborative efforts to address unmet needs.

SSM Health

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Please visit ssmhealth.com/system for more information.

Explore Data

FIND HEALTH DATA

FIND DEMOGRAPHIC DATA

FIND HEALTH DISPARITIES

Healthy People 2020 Progress Tracker

The Healthy People 2020 progress tracker provides a platform for measuring improvement of population health metrics associated with the US Healthy People 2020 objectives. The health objectives and 2020 goals allow communities to assess their health status through a comprehensive set of key disease indicators and create action plans relative to key priorities.

Indicator	Current and Target	Data	Since Prior Period	Status
Access to Health Services				
Adults with Health Insurance MAP	Current: 78.1 Target: 100.0 percent	78.1 100.0 Current Target	=	TARGET NOT MET
Children with Health Insurance MAP	Current: 93.4 Target: 100.0 percent	93.4 100.0 Current Target	=	TARGET NOT MET

Contact us to learn more at 660-562-7933.

SSM Health St. Francis Hospital - Maryville

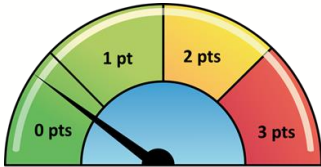2016 South Main Street | Maryville, MO 64468

2016-2018

Appendices

Additional demographic information

DEMOGRAPHIC CHARACTERISTICS			Selected Area	USA					2015	2020	% Change
2010 Total Population			23,165	308,745,538		Total Male Population			11,579	11,516	-0.5%
2015 Total Population			22,919	319,459,991		Total Female Population			11,340	11,269	-0.6%
2020 Total Population			22,785	330,689,365		Females, Child Bearing Age (15-44)			5,670	5,684	0.2%
% Change 2015 - 2020			-0.6%	3.5%							
Average Household Income			$47,037	$74,165							

POPULATION DISTRIBUTION — Age Distribution

Age Group	2015	% of Total	2020	% of Total	USA 2015 % of Total
0-14	3,310	14.4%	3,233	14.2%	19.1%
15-17	772	3.4%	763	3.3%	4.0%
18-24	6,232	27.2%	5,785	25.4%	9.9%
25-34	2,726	11.9%	3,066	13.5%	13.3%
35-54	4,354	19.0%	4,188	18.4%	26.3%
55-64	2,315	10.1%	2,309	10.1%	12.7%
65+	3,210	14.0%	3,441	15.1%	14.7%
Total	22,919	100.0%	22,785	100.0%	100.0%

HOUSEHOLD INCOME DISTRIBUTION — Income Distribution

2015 Household Income	HH Count	% of Total	USA % of Total
<$15K	1,691	20.2%	12.7%
$15-25K	1,251	14.9%	10.8%
$25-50K	2,444	29.1%	23.9%
$50-75K	1,571	18.7%	17.8%
$75-100K	625	7.5%	12.0%
Over $100K	805	9.6%	22.8%
Total	8,387	100.0%	100.0%

EDUCATION LEVEL — Education Level Distribution

2015 Adult Education Level	Pop Age 25+	% of Total	USA % of Total
Less than High School	391	3.1%	5.9%
Some High School	768	6.1%	8.0%
High School Degree	5,368	42.6%	28.1%
Some College/Assoc. Degree	3,123	24.8%	29.1%
Bachelor's Degree or Greater	2,955	23.4%	28.9%
Total	12,605	100.0%	100.0%

RACE/ETHNICITY — Race/Ethnicity Distribution

Race/Ethnicity	2015 Pop	% of Total	USA % of Total
White Non-Hispanic	21,232	92.6%	61.8%
Black Non-Hispanic	636	2.8%	12.3%
Hispanic	366	1.6%	17.6%
Asian & Pacific Is. Non-Hispanic	370	1.6%	5.3%
All Others	315	1.4%	3.1%
Total	22,919	100.0%	100.0%

Source: Truven Health Analytics 2015

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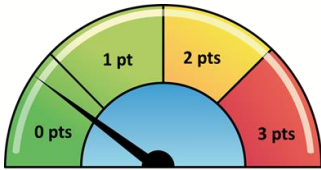## Healthy Communities Institute scorecard - Nodaway County

- SSM Health St. Francis Hospital - Maryville is pleased to make this source of community health and population data 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

- Indicators below are pre-sorted in order of decreasing severity

- Indicator HCI score correlates with severity gauge pictured

- Updated data can be found online at ssmhealth.com/system

HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
2.83	Homeownership	percent	50.5	59.5	56.9	
2.83	People 65+ Living Below Poverty Level	percent	14.2	8.9	9.4	
2.83	People Living Below Poverty Level	percent	28.4	15.5	15.4	
2.67	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)	deaths/100,000 population	46.5	42.1	37	34.8
2.67	People Living 200% Above Poverty Level	percent	54.7	64.7	65.8	
2.67	Renters Spending 30% or More of Household Income on Rent	percent	54.7	49.4	52.3	
2.67	Workers Commuting by Public Transportation	percent	0.1	1.5	5	5.5
2.61	Per Capita Income	dollars	18079	25649	28155	
2.5	Children Living Below Poverty Level	percent	26.2	21.6	21.6	
2.5	Food Insecurity Rate	percent	19.4	17	15.8	
2.44	Median Household Income	dollars	36641	47380	53046	
2.42	Age-Adjusted Death Rate due to Prostate Cancer	deaths/100,000 males	31.2	20.7	22.3	21.8
2.39	People 65+ Living Alone	percent	31.2	28.3	27	
2.25	Adults who are Overweight	percent	41.1	34.3	35.7	
2.25	Age-Adjusted Death Rate due to Kidney Disease	deaths/100,000 population	30.1	18.2	14.9	
2.25	Alcohol-Impaired Driving Deaths	percent	47.4	34.6		
2.25	Food Environment Index	(blank)	4.9	7		
2.25	Non-Physician Primary Care Provider Rate	providers/100,000 population	22	59		
2.22	Houses Built Prior to 1950	percent	29.8	20	18.9	
2.17	Atrial Fibrillation: Medicare Population	percent	8.3	7.8	7.8	
2.11	Grocery Store Density	stores/1,000 population	0			
2.11	Young Children Living Below Poverty Level	percent	30.1	26	24.7	
2.08	High Blood Pressure Prevalence	percent	34.5	32.6	30.8	26.9
2.03	Recreation and Fitness Facilities	facilities/1,000 population	0		0.1	
2	Children with Low Access to a Grocery Store	percent	7.9			
2	Households with No Car and Low Access to a Grocery Store	percent	4.8			
2	Low-Income and Low Access to a Grocery Store	percent	21.9			
2	People 65+ with Low Access to a Grocery Store	percent	5.7			
2	SNAP Certified Stores	stores/1,000 population	0.5			
1.97	Children with Health Insurance	percent	92.1	92.9		100
1.92	Dentist Rate	dentists/100,000 population	26	52		
1.92	Severe Housing Problems	percent	15.1	14.2		
1.83	Age-Adjusted Death Rate due to Diabetes	deaths/100,000 population	29.5	23.5		
1.83	Age-Adjusted Death Rate due to Influenza and Pneumonia	deaths/100,000 population	23	20.3		
1.83	Colon Cancer Screening	percent	57.8	66.6		

Source: Healthy Communities Institute

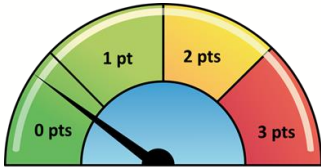## Healthy Communities Institute scorecard - Nodaway County (continued)

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- Indicators below are pre-sorted in order of decreasing severity
- Indicator HCI score correlates with severity gauge pictured
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HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
1.78	Chlamydia Incidence Rate	cases/100,000 population	409.9	453.8	446.6	
1.78	People 25+ with a Bachelor's Degree or Higher	percent	23.4	26.2	28.8	
1.75	Diabetic Screening: Medicare Population	percent	85.3	86		
1.67	Child Food Insecurity Rate	percent	23.3	21.6	21.4	
1.67	Depression: Medicare Population	percent	16.5	18.6	15.4	
1.67	Fast Food Restaurant Density	restaurants/1,000 population	0.6			
1.67	Hyperlipidemia: Medicare Population	percent	41	42.5	44.8	
1.58	Primary Care Provider Rate	providers/100,000 population	60	69		
1.58	Social Associations	membership associations/10,000 population	12.4	11.9		
1.53	Voter Turnout	percent	65	66	61.8	
1.5	Age-Adjusted Death Rate due to Alzheimer's Disease	deaths/100,000 population	29.1	26.9	24	
1.5	Alzheimer's Disease or Dementia: Medicare Population	percent	9.3	9.7	9.8	
1.5	Pap Test History	percent	73.7	74.9		
1.47	Babies with Low Birth Weight	percent	7.7	8	8	7.8
1.44	Adults who are Sedentary	percent	29.8			32.6
1.44	Mothers who Received Early Prenatal Care	percent	84.1	77.9		77.9
1.42	Mothers who Smoked During Pregnancy	percent	15.7	17.5	8.5	1.4
1.39	Cancer: Medicare Population	percent	7.4	7.9	7.9	
1.36	Mammography Screening: Medicare Population	percent	62.9	62		
1.33	Adult Fruit and Vegetable Consumption	percent	12.7	12.5		
1.33	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/100,000 population	113.8	123	105.7	103.4
1.33	Lung and Bronchus Cancer Incidence Rate	cases/100,000 population	65.6	76.1	64.9	
1.33	Syphilis Incidence Rate	cases/100,000 population	0	4.2	5.5	
1.31	Preterm Births	percent	10.6	11.5	11.4	11.4
1.28	Chlamydia Incidence Rate: Females 15-19	cases/100,000 females aged 15-19	1614.2	3607		
1.28	Gonorrhea Incidence Rate	cases/100,000 population	42.7	125.3	106.1	
1.28	Households with Cash Public Assistance Income	percent	2.3	2.5	2.8	
1.28	Households without a Vehicle	percent	6.4	7.3	9.1	
1.28	Hypertension: Medicare Population	percent	53	55.1	55.5	
1.28	Life Expectancy for Females	years	80.2	79.6	80.8	
1.28	Prostate Cancer Incidence Rate	cases/100,000 males	119.5	121.8	142.3	
1.28	Violent Crime Rate	crimes/100,000 population	184.8	452		
1.25	Access to Exercise Opportunities	percent	71.8	77.5		
1.25	Clinical Care Ranking	(blank)	13			
1.25	Drinking Water Violations	percent	1.2	4.4		
1.25	Health Behaviors Ranking	(blank)	9			
1.25	Morbidity Ranking	(blank)	3			
1.25	Mortality Ranking	(blank)	1			
1.25	Physical Environment Ranking	(blank)	9			

Source: Healthy Communities Institute

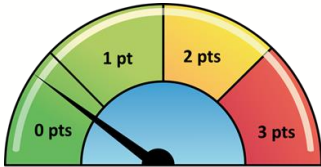## Healthy Communities Institute scorecard – Nodaway County (continued)

- SSM Health St. Francis Hospital - Maryville is pleased to make this source of community health and population data 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
- Indicators below are pre-sorted in order of decreasing severity
- Indicator HCI score correlates with severity gauge pictured
- Updated data can be found online at ssmhealth.com/system

HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
1.25	Social and Economic Factors Ranking	(blank)	19			
1.19	High School Graduation	percent	88.4	86	80	82.4
1.19	Poor Mental Health Days	days	3.2	3.8		
1.17	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/100,000 population	16.9	17.1	15.9	14.5
1.17	All Cancer Incidence Rate	cases/100,000 population	419.4	456.9	459.8	
1.17	Colorectal Cancer Incidence Rate	cases/100,000 population	43.9	45.6	43.3	38.6
1.17	Families Living Below Poverty Level	percent	10.5	11.1	11.3	
1.17	Ischemic Heart Disease: Medicare Population	percent	28.5	28.2	28.6	
1.17	Recognized Carcinogens Released into Air	pounds	6			
1.17	Rheumatoid Arthritis or Osteoarthritis: Medicare Population	percent	26.2	30.9	29	
1.14	Farmers Market Density	markets/1,000 population	0		0	
1.11	Stroke: Medicare Population	percent	3.4	3.8	3.8	
1.11	Unemployed Workers in Civilian Labor Force	percent	5.5	6.1	5.6	
1.08	Adults with Diabetes	percent	10	10.7		
1.08	Students Eligible for the Free Lunch Program	percent	26.9	38		
1.06	Adults with Health Insurance	percent	83.2	81.5	79.7	100
1.06	Workers who Drive Alone to Work	percent	76.8	81.5	76.3	
1.03	Poor Physical Health Days	days	3	3.7		
1	High Cholesterol Prevalence: Adults 35+	percent	35.3	42.9		
1	Life Expectancy for Males	years	76.2	74.6	76.1	
1	Low-Income Preschool Obesity	percent	12.7			
0.97	Adults who Drink Excessively	percent	15.6	17		25.4
0.94	Single-Parent Households	percent	27.4	33.6	33.3	
0.89	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/100,000 population	43.9	51.7	42.1	
0.83	Chronic Kidney Disease: Medicare Population	percent	10.6	15.4	15.5	
0.83	Diabetes: Medicare Population	percent	23.8	26.1	27	
0.83	Osteoporosis: Medicare Population	percent	4.5	6.1	6.4	
0.81	Adults who Smoke	percent	14.7	22.6		12
0.81	Self-Reported General Health Assessment: Poor or Fair	percent	13.9	16		
0.78	Age-Adjusted Death Rate due to Lung Cancer	deaths/100,000 population	47.3	57.7	48.4	45.5
0.78	Asthma: Medicare Population	percent	3.2	4.6	4.9	
0.75	Adults with Current Asthma	percent	4.8	10.1	9.1	
0.75	Solo Drivers with a Long Commute	percent	14.7	30.1		
0.75	Student-to-Teacher Ratio	students/teacher	10.9	14.3		
0.72	COPD: Medicare Population	percent	11.1	13.1	11.3	
0.67	Breast Cancer Incidence Rate	cases/100,000 females	97.9	122.6	122.7	
0.64	Premature Death	years/100,000 population	4895	7714		
0.64	Preventable Hospital Stays	discharges/1,000 Medicare enrollees	50	65		
0.64	Teen Birth Rate	live births/1,000 females aged 15-19	7.5	30	26.5	

Source: Healthy Communities Institute

Healthy Communities Institute scorecard - Nodaway County (continued)

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- Indicators below are pre-sorted in order of decreasing severity
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HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
0.58	Adults who are Obese	percent	23.6	30	27.8	30.5
0.5	Age-Adjusted Death Rate due to Cancer	deaths/100,000 population	158.7	185.9	173.8	161.4
0.5	People 25+ with a High School Degree or Higher	percent	91.1	87.6	86	
0.47	Babies with Very Low Birth Weight	percent	0.4	1.4	1.4	1.4
0.39	Mean Travel Time to Work	minutes	15.5	23.1	25.5	
0.33	Heart Failure: Medicare Population	percent	12.6	14.3	14.6	
0.22	Age-Adjusted Death Rate due to Unintentional Injuries	deaths/100,000 population	30.4	48.4	39.2	36.4
0.22	Workers who Walk to Work	percent	7.4	2	2.8	3.1

Source: Healthy Communities Institute

Appendix

The tax year the hospital last conducted a needs assessment

SSM Health St. Francis Hospital - Maryville last conducted a CHNA in 2012.

Existing health care facilities and resources within the community that are available to respond to the health needs of the community

SSM Health St. Francis Hospital - Maryville held a meeting with local, regional, and system members to determine priorities for the 2016-2018 CHNA and strategic implementation plan. Priorities chosen were:

• Heart Disease: Resources include SSM Health St. Francis Hospital – Maryville and the SSM Health Medical Group.

• Obesity: Resources include SSM Health St. Francis Hospital – Maryville and the SSM Health Medical Group.

How the data was obtained

A community perception survey, as well as a focus group including key stakeholders within the Nodaway County area, were both conducted to obtain community feedback. In total, 60 community stakeholders participated in the focus group. The community perception survey was mailed to a random sample of 1,000 households of Nodaway County residents and covered a wide range of topics from access to care, quality of life, chronic disease and lifestyle factors. 97 surveys were returned and evaluated for health and demographic trends. The full results were distributed to and discussed by the CHNA advisory council.

Health indicator statistics were derived from a variety of sources including the Healthy Communities Institute (HCI). The website platform includes the most up-to-date publicly available data for community indicators covering topics in the areas of demographics, social and economic factors, physical environment, clinical care, health behaviors and health outcomes. Additional demographic and health impact information were collected from:

• County Health Rankings

• Missouri Department of Health & Senior Services

• US Census Bureau (Quick Facts)

• Missouri Department of Mental Health

• Missouri to End Poverty Coalition

The health needs of the community

Please see "The Health of Our Community" and "The Health Needs of Our Community" sections for analysis of health indicators specific to the health of our community and the identified priorities to be addressed going forward.

Primary and chronic disease needs and other health issues of uninsured persons, low-income persons and minority groups

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

It is SSM Health's Vision that through our participation in the healing ministry of Jesus Christ, communities, especially those that are economically, physically and socially marginalized, will experience improved health in mind, body, spirit and environment within the financial limits of the system.

The process for identifying and prioritizing community health needs and services to meet the community health needs

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

• Health issues that impact a significant portion of the population, or for which disparities exist and which put a greater burden on some population groups

• Poor rankings for health issues within the service area as compared to other counties, state average, national average or Healthy People 2020 national health goals

• Health issues for which trends are worsening

The SSM Health St. Francis Hospital – Maryville CHNA team also considered indicators that relate to problems the Centers for Disease Control and other state agencies have identified through their own assessments In addition, the SSM Health St. Francis Hospital - Maryville team examined "social determinants of health," or factors in the community that can either contribute to poor health outcomes or, conversely, support a healthy community.

Persons representing the community with whom the hospital consulted

SSM Health St. Francis Hospital - Maryville benefited from input derived through consultation of numerous community leaders representing diverse constituencies. The leaders associated with primary data collection are listed with their affiliations below. Additionally, SSM Health St. Francis Hospital - Maryville benefited from guidance and input from individuals with expertise in public/population health.

Date	Solicitation Type	Panel Member Organization	Panel Member Name (Optional)
3/30/2015	Survey - 1,000 households in Nodaway County (~30 returned with inappropriate addresses); 97 responded = 10% return rate		
1/26/2015	Focus Group	Community Services	Norma Eckerson
1/26/2015	Focus Group	Community Services	Cathy Rybolt
1/26/2015	Focus Group	NW MO AAA	Melissa Steele
1/26/2015	Focus Group	Living Hope Church	Trevor Nashleanas
1/26/2015	Focus Group	Living Hope Church	Jordan Poe
1/26/2015	Focus Group	Maryville Garden Club	Carolyn Schroeder
1/26/2015	Focus Group	BBBS	Lynette Harbin
1/26/2015	Focus Group	Relay for Life	Kara Phillips
1/26/2015	Focus Group	NCHS	Illegible
1/26/2015	Focus Group	United Way	Kate Rollins
1/26/2015	Focus Group	HFH of Nodaway County	Joe Ford
1/26/2015	Focus Group	United Way	Chris Wiltfong
1/26/2015	Focus Group	NNHS	Victoria Kinder
1/26/2015	Focus Group	Nodaway County Health Department	Christy Tapps
1/26/2015	Focus Group	Catholic Charities	Amy Ward
1/26/2015	Focus Group	NTS	Lori Talin
1/26/2015	Focus Group	Nodaway Crusade Against Cancer	Sue (Illegible)
1/26/2015	Focus Group	Nodaway County Extension Office	Connie Neal
1/26/2015	Focus Group	Nodaway County Extension Office	Cody Green
1/26/2015	Focus Group	Mo Career Center	Amy Davis
1/26/2015	Focus Group	Life (Illegible)	Lary Rusio
1/26/2015	Focus Group	Boy Scouts of America	Casey Dupree
1/26/2015	Focus Group	Maryville Host Lions	Larry Wickerhsam
1/26/2015	Focus Group	Maryville Adult Education	Amanda Haile
1/26/2015	Focus Group	Catholic Charities	Karen (Illegible)

Persons representing the community with whom the hospital consulted (continued)

SSM Health St. Francis Hospital - Maryville benefited from input derived through consultation of numerous community leaders representing diverse constituencies. The leaders associated with primary data collection are listed with their affiliations below. Additionally, SSM Health St. Francis Hospital - Maryville benefited from guidance and input from individuals with expertise in public/population health.

Date	Solicitation Type	Panel Member Organization	Panel Member Name (Optional)
1/26/2015	Focus Group	Family Guidance	Mary K (Illegible)
1/26/2015	Focus Group	Northwest Technical School	Cory Jackson
1/26/2015	Focus Group	NNL	Kathyrn Rice
1/26/2015	Focus Group	Lettuce Dream	Wayne Pierson
1/26/2015	Focus Group	Maryville Downtown	Matt Garder
1/26/2015	Focus Group	MHS	Ashlee James
1/26/2015	Focus Group	MPL	Stephanie Patten
1/26/2015	Focus Group	Nodaway County Historical Society	Michael Steiner
1/26/2015	Focus Group	(Illegible)	(Illegible)
1/26/2015	Focus Group	(Illegible)	(Illegible)
1/26/2015	Focus Group	TCW	Steve Clevenger
1/26/2015	Focus Group	Children's Family Center	(Illegible) Holdes
1/26/2015	Focus Group	Maryville (Illegible)	Dr. (Illegible)
1/26/2015	Focus Group	City of Maryville	Janah Brown
1/26/2015	Focus Group	Second Harvest	Gayle Stowens
1/26/2015	Focus Group	Greif Care	Michelle Starke
1/26/2015	Focus Group	Ministerial Fellowship	David Oddi
1/26/2015	Focus Group	Children and Family Center	Meghan Kosman
1/26/2015	Focus Group	Crisis Pregnancy Center	Gwen Knowles
1/26/2015	Focus Group	Greater Southern Nodaway Co. Foundation	Sue (Illegible)
1/26/2015	Focus Group	Second Harvest	Michelle Fagerstowe
1/26/2015	Focus Group	RIKC Employment Services	Rita Wallinga
1/26/2015	Focus Group	Catholic Charities	Heather Hughes
1/26/2015	Focus Group	Children's Division	Victoria Lager
1/26/2015	Focus Group	Oak Pointe Assisted Living	Stephanie Gaa
1/26/2015	Focus Group	Trio Student Support Services	Margaret Sebastian
1/26/2015	Focus Group	Trio Student Support Services	Jackie Loghry

Information gaps that limit the hospital facility's ability to assess all of the community's health needs

SSM Health St. Francis Hospital – Maryville observes that, while many health status indicators for its service area might score above average, they may still represent problems that are above the medically preferable prevalence rate (i.e. nonexistent), place a heavy burden on our population, trends might be worsening and/or fall short of acceptable benchmarks. In addition, aggregate health data for the entire population often masks the unfair, heavy burdens on certain groups within the population. SSM Health St. Francis Hospital - Maryville made a conscious effort to reveal and acknowledge these disparities when possible.

The health needs of the community

Because SSM Health St. Francis Hospital - Maryville 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:

- Cancer: The Nodaway County Coalition Against Cancer leads efforts to promote cancer screenings and increase awareness of ways to prevent cancer.

- Poor dental health: At this point in time, the hospital does not employ the professionals necessary to implement a dental health program.

- Food insecurity/affordable healthy food: Several community organizations are working to make an impact in Nodaway County, including the Ministry Center (food bank), City of Maryville (farmers' market) and Lettuce Dream (a social enterprise engaged in hydroponic farming).

- Mental health/suicides: The behavioral health staff of both SSM Health St. Francis Hospital - Maryville and SSM Health Medical Group serve as resources and work with community groups to promote mental wellness and suicide prevention.

- Affordable housing/homelessness: Community Services Inc. of Northwest Missouri is currently tracking homeless individuals and families seeking services. A local church has begun to investigate the possibility of a homeless/transitional housing facility in Maryville.

- Access to care/long wait times: SSM Health St. Francis Hospital - Maryville along with SSM Health Medical Group are constantly assessing areas of physician need within our service areas and developing recruitment plans to increase access to primary care and other specialist providers in the region.

- HIV screening: As it was determined that there is not a high risk of HIV exposure in Nodaway County, screening was not identified as a priority at this time.

- Automobile crash deaths: While SSM Health St. Francis Hospital - Maryville provides care to those injured in motor vehicle accidents, state and local law enforcement agencies are best equipped to monitor and decrease the likelihood of accidents associated with unsafe driving practices.

- Affordable health insurance: SSM Health St. Francis Hospital - Maryville has two health insurance application specialists who are certified by the ACA and provide options for affordable health insurance.

Other hospital facilities who participated in SSM Health St. Francis Hospital - Maryville CHNA process

SSM Health St. Francis Hospital – Maryville did not participate with any other hospital facilities in the CHNA development process.

How SSM Health St. Francis Hospital - Maryville makes its needs assessment widely available to the public

SSM Health St. Francis Hospital - Maryville 2016 CHNA is available online at ssmhealth.com/system and upon request from the hospital facility at 660-562-7933. See section on "Going Forward" for more information.

2016-2018

Strategic Implementation Plan

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 many people or for which disparities exist and which put a greater burden on some population groups

- Health issues for which trends are worsening

- Poor rankings for health issues in Nodaway County as compared to the state average, other counties or Healthy People 2020 national health goals

The SSM Health St. Francis Hospital – Maryville CHNA team also considered indicators that relate to problems the Centers for Disease Control and Prevention and other state agencies have identified through their own assessments. In addition, the team examined "social determinants of health," or factors in the community that can either contribute to poor health outcomes or support a healthy community. These data elements are available on our website ssmhealth.com/system and in the County Health Rankings report for Nodaway County.

Priority #1 Heart Disease

Priority #2 Obesity

SSMHealth

Priority #1

There are a number of deficiencies within our community that correlate to poor heart health. Some of these lifestyle behaviors that increase the risk of heart disease include:

- Smoking
- Uncontrolled blood pressure
- High cholesterol levels
- Uncontrolled diabetes
- Stress and depression
- Unhealthy food choices
- Lack of exercise

In some cases, minorities and those living under financial distress are often segments of the population who are most affected by factors contributing to heart disease.

SSM Health St. Francis Hospital - Maryville offers a cardiac and pulmonary rehab program that is designed for patients who have undergone heart surgery or suffered a heart attack. SSM Health St. Francis Hospital - Maryville also offers a cardiac maintenance program that assists members with an exercise plan, blood pressure, heart rate and oxygen saturation monitoring. Our goal is to help individuals maintain a healthy lifestyle that will reduce their risk of future heart events.

Additional facts and figures

- 8.3% of adults in Nodaway County have been diagnosed with atrial fibrillation (irregular heartbeat), which is higher than both state and national averages of 7.8% (state average is consistent with national average)

- 34.5% of adults in Nodaway County have high blood pressure, which is higher than both state and national averages of 32.6% and 30.8%, respectively

- 41% of the Medicare population in Nodaway County has hyperlipidemia

- The age-adjusted death rate due to heart disease in Nodaway County is 113.8 deaths per 100,000 persons, which is higher than the Healthy People 2020 goal of 103.4 deaths per 100,000 persons

Source: Healthy Communities Institute
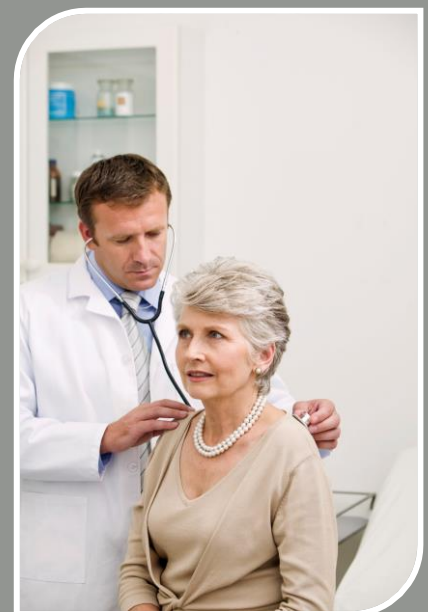
Strategic Implementation Plan
Heart Disease

Goals

- Reduce the age-adjusted death rate due to coronary heart disease in Nodaway County from 113.8 deaths per 100,000 persons reported in 2015 to 110 deaths per 100,000 persons by 2018 (HCI)

- Maintain the SSM Health St. Francis Hospital - Maryville congestive heart failure (CHF) 30-day readmission threshold at or below 7.41% between 2015 and 2018 (PIR)

- Reduce the percentage of Nodaway County adults who are not taking medication for their high blood pressure from 29.6% in 2015 to 25.7% or better by 2018 (reducing the gap between county and state by half) (Community Commons)
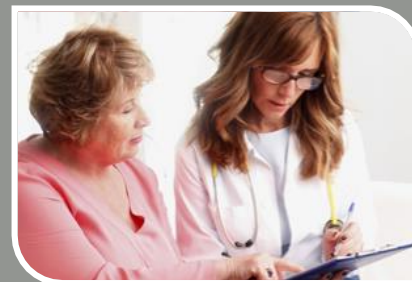
Action plan

- Recruit a full-time cardiologist by 2018

- Decrease the percentage of SSM Health St. Francis Hospital – Maryville clinic patients with above average blood pressure between 2015 and 2018 (internal reporting to be developed)

- Increase the percentage of SSM Health St. Francis Hospital – Maryville clinic patients with healthy LDL levels (less than 100mg/dL or optimal) between 2015 and 2018 (internal reporting to be developed)

- Conduct blood pressure clinics at local events and employers

- Offer community health presentations by nurses and dieticians at health fairs and other community events regarding blood pressure, heart disease and proper nutrition

- Continue support of activities encouraging healthy lifestyle behaviors, such as 5K walks and runs

- Monitor LDL blood tests of our clinic population

- Develop an educational campaign in combination with visiting cardiologists

- Offer community speaking engagements featuring visiting cardiologists

Community partners and supporting resources

- Nodaway County Health Department

- Maryville Parks and Recreation

- Local employers

- Ministry Center (local food pantry)

Obesity

Obesity is defined as a life-long, progressive, life-threatening, genetically-related, and costly disease of excess fat storage. This disorder is associated with illnesses directly caused or worsened by significant weight. Morbid obesity (or clinically severe obesity) is defined as being over 200% of ideal weight, more than 100 pounds overweight, or a body mass index (BMI) of 40 or higher, at which serious medical conditions occur as a direct result of the obesity. Obesity and unhealthy weight management can also contribute to the development of other diseases such as diabetes and heart disease.

Lifestyles that can lead to increased risk of obesity mainly include physical inactivity combined with unhealthy diet and eating habits. In some cases, minorities and those living under financial distress are often segments of the population most affected by factors contributing to obesity.

Overall weight management is an identified need for Nodaway County. The weight management program at SSM Health St. Francis Hospital – Maryville places a high importance on the development and maintenance of a healthy lifestyle.

Additional facts and figures

- 41.1% of adults in Nodaway County were recorded as being overweight, which was higher than both state and national averages of 34.3% and 35.7%, respectively [1]

- 23.6% of adults in Nodaway County are obese [1]

- 29.8% of adults in Nodaway County reported themselves as having sedentary lives [1]

- The age-adjusted death rate due to diabetes in Nodaway County is 29.5 deaths per 100,000 persons, which was higher than the state rate of 23.5 deaths per 100,000 persons [1]

- Non-Hispanic African Americans have the highest age-adjusted rates of obesity (47.8%) followed by Hispanics (42.5%), non-Hispanic whites (32.6%) and non-Hispanic Asians (10.8%) [2]

- Obesity is higher among middle-age adults, 40-59 years old (39.5%), than among younger adults, ages 20-39 (30.3%), or adults over 60 (35.4%) [2]

- Higher income women are less likely to suffer from obesity than low-income women [2]

- The prevalence of obesity among children between 2 and 5 years of age decreased significantly from 13.9% in 2003-2004 to 8.4% in 2011-2012 [2]

Source: [1] Healthy Communities Institute, [2] Center for Disease Control and Prevention

Strategic Implementation Plan
Obesity

Goals

- Reduce the age-adjusted death rate due to diabetes in Nodaway County from 29.5 deaths per 100,000 persons in 2015 to 26.5 deaths per 100,000 persons by 2018 (HCI)

- Reduce the percentage of Nodaway County adults who are obese in Nodaway County from 23.6% in 2015 to 21.6% by 2018 (HCI)

- Reduce the percentage of Nodaway County adults who are overweight from 41.1% in 2015 to 40% by 2018 (HCI)

- Decrease the percentage of SSM Health St. Francis Hospital – Maryville clinic patients who are overweight (BMI >25) or obese (BMI >30) from 43.8% in 2015 to 40% in 2018 (Reporting Workbench)

Action plan

- Plan for development of a comprehensive health and wellness center to expand upon the existing rehab program at SSM Health St. Francis Hospital - Maryville

- Continue to monitor body mass index (BMI) of our clinic population

- Develop initiatives to increase referrals to the Healthy Lifestyles program

- Establish partnerships with local fitness partners for clinic patients (potential financial support development)

- Community health nurse and dietician presentations at health fairs and other community events regarding proper nutrition

Community partners and supporting resources

- Local fitness and exercise programs

- Maryville Parks and Recreation

- Curves

- Get Fit 24

- Northwestern Missouri State University

SSMHealth

Achieving our Goals, Now and in the Future

SSM Health is committed to improving the health of our communities through collaborative efforts to address unmet needs.

SSM Health

SSM Health St. Francis Hospital - Maryville is pleased to make this source of reliable, current community health and population data 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.

Explore Data

FIND HEALTH DATA

FIND DEMOGRAPHIC DATA

FIND HEALTH DISPARITIES

Healthy People 2020 Progress Tracker

The Healthy People 2020 progress tracker provides a platform for measuring improvement of population health metrics associated with the US Healthy People 2020 objectives. The health objectives and 2020 goals allow communities to assess their health status through a comprehensive set of key disease indicators and create action plans relative to key priorities.

Indicator	Current and Target	Data	Since Prior Period	Status
Access to Health Services				
Adults with Health Insurance [MAP]	Current: 78.1 Target: 100.0 percent	78.1 100.0 Current Target	=	TARGET NOT MET
Children with Health Insurance [MAP]	Current: 93.4 Target: 100.0 percent	93.4 100.0 Current Target	=	TARGET NOT MET

Contact us to learn more at 660-562-7933.