2016-2018

Community Health Needs Assessment

Table of Contents

Message to Our Community

SSM Health St. Mary's Hospital - Jefferson City delivers exceptional, compassionate care to Cole, Miller, Moniteau and Osage Counties. 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 the 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. Mary's Hospital - Jefferson City conducted a Community Health Needs Assessment (CHNA) by gathering health-related information from Healthy Communities Institute (HCI) specific to Cole, Miller, Moniteau and Osage Counties. We have also interviewed key community leaders 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
- Cancer

During this time, SSM Health St. Mary's Hospital - Jefferson City will further develop its community partnerships and deliver an exceptional experience through high-quality, accessible and affordable care. Please visit our website at www.ssmhealthmidmo.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,

Brent VanConia

President at SSM Health St. Mary's Hospital – Jefferson City

and Mid-Missouri region

Contact us for more information or to take part in improving the health of our community by calling **573-681-3000** or visit our website at **ssmhealthmidmo.com.**

Background

SSM Health St. Mary's Hospital – Jefferson City 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 Mid Missouri Regional Board approved this CHNA on Nov. 18, 2015. SSM Health St. Mary's Hospital – Jefferson City 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.
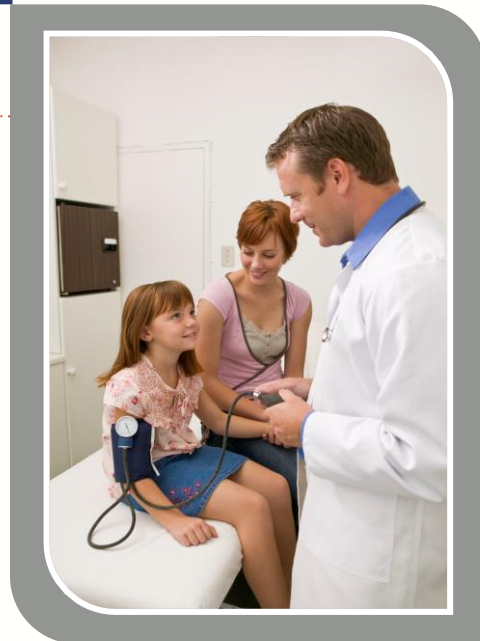
Priorities

SSM Health St. Mary's Hospital - Jefferson City held meetings 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 but are not limited to the congestive heart failure clinic at Jefferson City Medical Group, congestive heart failure (CHF) clinic collaboration with Lutheran Senior Services, St. Joseph Bluff and Stonebridge communities, Cole County Health Department WISEWOMAN program, SSM Health Medical Group, Jefferson City YMCA, SSM Health St. Mary's Hospital – Jefferson City cardiopulmonary support group, diabetes support group, stroke survivor support group and St. Mary's Mended Hearts program.

• Cancer: Resources include but are not limited to SSM Health St. Mary's Cancer Center at Jefferson City Medical Group (JCMG), Epic health notifications, Richard J. Wilson Cancer Resource Center, the American Cancer Society, Jefferson City YMCA, the Cole County Health Department ShowMe Healthy Women program and SSM Health Medical Group.

Goals

Heart Disease

• Reduce the age-adjusted death rate due to heart disease in our region from 190.7 deaths per 100,000 persons, as reported in 2015, to 185 deaths per 100,000 persons in 2018

• Decrease percentage of all-cause/all-location congestive heart failure (CHF) 30-day hospital readmission rate from 24.22% in 2015 to 15.3% by 2018 (Epic)

Cancer

• Reduce the age-adjusted death rate due to cancer in our region from 178.4 deaths per 100,000 persons, as reported in 2015, to 175 deaths per 100,000 persons by 2018 (MICA)

• Increase percentage of stage 1 breast cancer initial diagnosis' from 20% (hospital 5-year 2010-2014 baseline average) to 25% by 2018 (SSM Health St. Mary's Hospital - Jefferson City Cancer Registrar)

• Increase percentage of stage 1 lung cancer initial diagnosis' from 20% (hospital 5-year 2010-2014 baseline average) to 25% by 2018 (SSM Health St. Mary's Hospital - Jefferson City Cancer Registrar)

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. Mary's Hospital – Jefferson City

Highlight of services

SSM Health St. Mary's Hospital – Jefferson City is a 167-all private bed acute care hospital. Comprehensive services include emergency services, cardiology, orthopedic care, cancer care, surgical services, women's health, maternity care, and behavioral health services, along with an ambulatory network consisting of urgent care, primary care, rehabilitation and specialty providers in the area of cardiothoracic surgery, wound care, sleep disorders, spine surgery and pain management.

Community benefit

In 2014, SSM Health St. Mary's Hospital - Jefferson City provided $23.5 million in unreimbursed care and $0.35 million in other community benefits for a total of over $23.8 million.

Community affiliations and partnerships

SSM Health St. Mary's Hospital – Jefferson City is proud to be a part of a community that assists one another to improve health outcomes in our area.

The Central Community Health Assessment Partnership (CMCHAP) is a unique partnership of health care and social service providers sponsored by Capital Region Medical Center and SSM Health St. Mary's Hospital - Jefferson City and includes Community Health Center of Central Missouri; Jefferson City Medical Group; Missouri Primary Care Association; United Way of Central Missouri; and the Health Departments of Cole, Miller, Moniteau and Osage Counties.

2014
Hospital at a Glance

Admissions:	6,874
Outpatient Visits:	56,905
ER Visits:	31,861
Births:	704
Beds:	167
Employees:	992
Medical Staff:	260+
Volunteers:	502

About our Community

SSM Health St. Mary's Hospital - Jefferson City is located in Jefferson City, Mo. and defines its community as Cole, Miller, Moniteau and Osage Counties. In 2015, this service area had an estimated population of over 171,000 people. The following pages of information include demographic and health indicator statistics specific to this community.

✚ SSM Health St. Mary's Hospital - Jefferson City

Our community by the numbers

Race/Ethnicity

87.7% White/Non-Hispanic
6.8% African American/Non-Hispanic
5.5% All Others

Education Levels

12.3% No High School Degree
35.9% High School Degree
27.3% Some College/Associates Degree
24.5% Bachelor's Degree or Greater

Income Levels

| |
$0-25K | $25-50K | $50-75K | $75-100K | Over $100K

Age Groups

- 0-17 — 23%
- 18-24 — 10%
- 25-34 — 13%
- 35-54 — 26%
- 55-64 — 13%
- 65+ — 15%
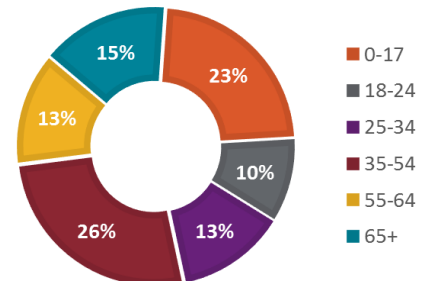
About the data

The data was derived from a variety of sources including the Healthy Communities Institute (HCI) analytics platform. The 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

Cancer

Cancer incidence rates within the four-county area are generally higher than both state and national averages

Heart Disease

Prevalence and death rates associated with heart disease are higher than both state and national averages

Access to Primary Care

The number of providers per 100,000 persons within the four-county area are generally higher than the state average

Excessive Drinking

The percentage of adults who drink excessively is significantly higher than the national average. Alcohol-impaired driving deaths are also above average

Healthy Birthweights

Babies are much less likely to be born with below average or "very low" birth weight, compared to both state and national averages

Dental Care

The number of dental providers available per 100,000 persons is significantly below the state average

Mental Health

Depression and the age–adjusted death rate due to suicide among the Medicare population are both notably unfavorable

Fitness Opportunities

Access to exercise equipment in the community is above both state and national averages

Senior Care

Specific areas of concern within the Medicare population include arthritis, osteoarthritis, osteoporosis, depression, diabetes and heart disease

Financial Status

Indicators related to financial status, such as the percentage of people living below the poverty level, are significantly better than both state and national averages

Voice of the community

SSM Health St. Mary's Hospital - Jefferson City, in partnership with the Central Community Health Assessment Partnership (CMCHAP), conducted a comprehensive community health assessment which measured perceptions, health risks, health factors, health outcomes and characteristics specific to the communities in Cole, Miller, Moniteau and Osage counties.

The needs assessment was conducted using data analysis, discussions with community groups, provider clients and surveys completed by community members, community leaders and local physicians. Throughout the process, more than 150 individuals participated in 9 different discussion groups and consumer interview sessions. The surveys were made available in physician offices, online and in community health departments.

SSM Health St. Mary's Hospital – Jefferson City administration reviewed community perception results and health data, prioritizing the top two needs based on the extent of the deficiency and the ability of the hospital to make an impact.

Issues identified and discussed include:

- Heart disease
- Cancer
- Obesity
- Diabetes
- Health literacy
- Childhood obesity
- Access to dental care
- Transportation
- Mental health
- Substance abuse
- Access to care
- Care coordination

Key priorities

Heart Disease

Heart disease is the leading cause of death within the service area. Additionally, there are a number of deficiencies within our community that lead to poor heart health and are exacerbated by numerous risk factors including 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.

Cancer

Cancer is second only to heart disease, as a leading cause of death in Cole, Miller, Moniteau and Osage Counties. The top five most common types of cancers in our region are breast, colon, lung, cervix and prostate.

Proactive screening for cancer provides a significant opportunity to reduce mortality and increase survival rates.

Heart Disease

Heart disease includes a range of conditions that affect the health of one's heart. 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.

Heart disease is the leading cause of death in Cole, Miller and Osage counties. It is also the top cause of inpatient hospitalizations for both men and women in the region. Further complicating the issue is a unfavorable prevalence of high blood pressure, high cholesterol, diabetes, obesity and smoking in the four counties, especially in Miller and Moniteau counties.

Additional facts and figures

- The age-adjusted death rate due to coronary heart disease is 137.10 and 137.9 deaths per 100,000 persons for Moniteau and Osage Counties, respectively, compared to rates of 123 and 105.7 deaths per 100,000 persons in the state and nation, respectively

- The Medicare population with a diagnosis of ischemic heart disease is 31.6% for Miller County, compared to state and national averages of 28.2% and 28.6%, respectively

- The Medicare population with a diagnosis of hyperlipidemia is 44.4% and 43.5% for Cole and Osage Counties, respectively, compared to state and national averages of 42.5% and 44.8%, respectively

- The Medicare population with a diagnosis of hypertension is 55.5% and 55.7% for Cole and Osage Counties, respectively, compared to state and national averages of 55.1% and 55.5%, respectively

- Counties mentioned were notably deficient out of the 4 counties included in the service area

Source: Healthy Communities Institute

Priority #1

Do you have a question about heart and vascular services at SSM Health?

Visit our website at **ssmhealthmidmo.com**

Cancer

Cancer is second only to heart disease as a leading cause of death in Cole, Miller, Moniteau and Osage Counties. The top five most common types of cancer in our region are breast, colon, lung, cervix and prostate. Specifically, breast cancer showed a significant increase of 14% in our region between 2008 – 2012.

There are a number of economic, environmental and lifestyle factors that contribute to this disparity, including agricultural processes that can potentially introduce harmful byproducts into the human system, which can lead to the development of cancer. The data also illustrates that use of tobacco products is significantly greater in our service area than most communities. While SSM Health St. Mary's Hospital - Jefferson City is not equipped to address all of these influencing factors, we are able to assist our community in providing cancer treatment options and promoting healthy lifestyle practices that are highly conducive to preventing the development of cancer. These include:

- Regular medical exams and screenings. By increasing the chances of discovering cancer early, the success rate of treating and ultimately overcoming a cancer diagnosis also increases

- Creation of a healthy diet and promoting physically active lifestyles

- The provision of smoking cessation programs

- Immunization to protect against viral infections that lead to the development of cancer

Additional facts and figures

- Cancer prevalence in the Medicare population averages 9.1% and 9.6% for Cole and Osage Counties, respectively, compared to averages of 7.9% and 7.9% in the state and nation, respectively

- The age-adjusted death rate due to lung cancer is 71.7 per 100,000 persons in Miller County, compared to rates of 57.5 and 48.4 deaths per 100,000 persons, in the state and nation, respectively

- The colorectal cancer incidence rate is 48.5 and 49.8 cases per 100,000 persons for Moniteau and Miller Counties, respectively, compared to rates of 45.6 and 43.3 cases per 100,000 persons in the state and nation, respectively

- Counties mentioned were notably deficient out of the 4 counties included in the service area

Source: Healthy Communities Institute

Priority #2

Do you have a question about oncology services at SSM Health?

Visit our website at **ssmhealthmidmo.com**

SSM Health

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. Mary's Hospital - Jefferson City 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
Adolescent Health				
High School Graduation MAP	Current: 62.3 Target: 82.4 percent	62.3 82.4 Current Target	⬆	TARGET NOT MET

Contact us to learn more at 573-681-3000.

SSM Health St. Mary's Hospital - Jefferson City

2505 Mission Drive | Jefferson City, MO 65109

SSMHealth

2016-2018

Appendices

Additional demographic information

DEMOGRAPHIC CHARACTERISTICS							2015	2020	% Change
		Selected Area	USA						
2010 Total Population		168,778	308,745,538		Total Male Population		86,534	87,490	1.1%
2015 Total Population		170,185	319,459,991		Total Female Population		83,651	84,631	1.2%
2020 Total Population		172,121	330,689,365		Females, Child Bearing Age (15-44)		31,059	31,254	0.6%
% Change 2015 - 2020		1.1%	3.5%						
Average Household Income		$60,928	$74,165						

POPULATION DISTRIBUTION

	Age Distribution					HOUSEHOLD INCOME DISTRIBUTION	Income Distribution		
Age Group	2015	% of Total	2020	% of Total	USA 2015 % of Total	2015 Household Income	HH Count	% of Total	USA % of Total
0-14	32,290	19.0%	31,481	18.3%	19.1%	<$15K	8,171	12.5%	12.7%
15-17	6,779	4.0%	7,076	4.1%	4.0%	$15-25K	7,622	11.6%	10.8%
18-24	16,612	9.8%	17,473	10.2%	9.9%	$25-50K	17,311	26.4%	23.9%
25-34	21,795	12.8%	21,377	12.4%	13.3%	$50-75K	13,623	20.8%	17.8%
35-54	44,846	26.4%	42,481	24.7%	26.3%	$75-100K	8,058	12.3%	12.0%
55-64	22,416	13.2%	22,701	13.2%	12.7%	Over $100K	10,673	16.3%	22.8%
65+	25,447	15.0%	29,532	17.2%	14.7%				
Total	170,185	100.0%	172,121	100.0%	100.0%	Total	65,458	100.0%	100.0%

EDUCATION LEVEL / RACE/ETHNICITY

	Education Level Distribution			RACE/ETHNICITY	Race/Ethnicity Distribution		
2015 Adult Education Level	Pop Age 25+	% of Total	USA % of Total	Race/Ethnicity	2015 Pop	% of Total	USA % of Total
Less than High School	4,608	4.0%	5.9%	White Non-Hispanic	149,250	87.7%	61.8%
Some High School	9,456	8.3%	8.0%	Black Non-Hispanic	11,575	6.8%	12.3%
High School Degree	41,085	35.9%	28.1%	Hispanic	4,417	2.6%	17.6%
Some College/Assoc. Degree	31,258	27.3%	29.1%	Asian & Pacific Is. Non-Hispanic	1,347	0.8%	5.3%
Bachelor's Degree or Greater	28,097	24.5%	28.9%	All Others	3,596	2.1%	3.1%
Total	114,504	100.0%	100.0%	Total	170,185	100.0%	100.0%

Source: Truven Health Analytics 2015

SSM Health

Healthy Communities Institute scorecard - Cole County

- SSM Health St. Mary's Hospital - Jefferson City 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	Osteoporosis: Medicare Population	percent	8.9	6.1	6.4	
2.83	People 65+ Living Alone	percent	32.1	28.3	27	
2.61	Cancer: Medicare Population	percent	9.1	7.9	7.9	
2.61	Chlamydia Incidence Rate	cases/100,000 population	555.2	453.8	446.6	
2.5	Depression: Medicare Population	percent	18.7	18.6	15.4	
2.42	Age-Adjusted Death Rate due to Diabetes	deaths/100,000 population	24.3	20.3	21.3	
2.42	Age-Adjusted Death Rate due to Suicide	deaths/100,000 population	16	15.3	12.5	10.2
2.36	Oral Cavity and Pharynx Cancer Incidence Rate	cases/100,000 population	14.3	11.5	11.2	
2.33	Chlamydia Incidence Rate: Females 15-19	cases/100,000 females aged 15-19	4040.7	3607		
2.33	Single-Parent Households	percent	36.2	33.6	33.3	
2.28	Age-Adjusted Death Rate due to Alzheimer's Disease	deaths/100,000 population	37.2	26.9	24	
2.28	Gonorrhea Incidence Rate	cases/100,000 population	119.2	125.3	106.1	
2.28	Workers Commuting by Public Transportation	percent	0.3	1.5	5	5.5
2.25	High School Graduation	percent	72.1	86	80	82.4
2.22	Prostate Cancer Incidence Rate	cases/100,000 males	154.3	121.8	142.3	
2.22	Workers who Walk to Work	percent	1.6	2	2.8	3.1
2.08	Adults who are Overweight	percent	39.1	34.3	35.7	
2.06	Mothers who Received Early Prenatal Care	percent	74	77.9		77.9
2	Fast Food Restaurant Density	restaurants/1,000 population	0.8			
2	Rheumatoid Arthritis or Osteoarthritis: Medicare Population	percent	33.9	30.9	29	
2	SNAP Certified Stores	stores/1,000 population	0.6			
2	Workers who Drive Alone to Work	percent	82.3	81.5	76.3	
1.94	Hyperlipidemia: Medicare Population	percent	44.4	42.5	44.8	
1.94	Infant Mortality Rate	deaths/1,000 live births	7.7	7.3		6
1.89	Stroke: Medicare Population	percent	3.9	3.8	3.8	
1.83	Alzheimer's Disease or Dementia: Medicare Population	percent	10.5	9.7	9.8	
1.83	Breast Cancer Incidence Rate	cases/100,000 females	129.2	122.6	122.7	
1.83	Young Children Living Below Poverty Level	percent	26.1	26	24.7	
1.78	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)	deaths/100,000 population	40.8	42.1	37	34.8
1.78	COPD: Medicare Population	percent	12.9	13.1	11.3	
1.78	Diabetes: Medicare Population	percent	26.6	26.1	27	
1.75	Adults who Drink Excessively	percent	20.5	17		25.4
1.72	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/100,000 population	53.6	51.7	42.1	
1.67	Children with Low Access to a Grocery Store	percent	6			
1.67	Households without a Vehicle	percent	6.8	7.3	9.1	
1.67	Hypertension: Medicare Population	percent	55.5	55.1	55.5	
1.58	Age-Adjusted Death Rate due to Prostate Cancer	deaths/100,000 males	22.3	20.7	22.3	21.8
1.58	Student-to-Teacher Ratio	students/teacher	14.2	14.3		
1.56	Grocery Store Density	stores/1,000 population	0.2			
1.5	All Cancer Incidence Rate	cases/100,000 population	470.2	456.9	459.8	
1.5	Atrial Fibrillation: Medicare Population	percent	8.3	7.8	7.8	
1.5	Children Living Below Poverty Level	percent	20.1	21.6	21.6	
1.5	Pap Test History	percent	73.4	74.9		
1.5	People 65+ with Low Access to a Grocery Store	percent	2.7			
1.5	Violent Crime Rate	crimes/100,000 population	387.5	452		

Source: Healthy Communities Institute

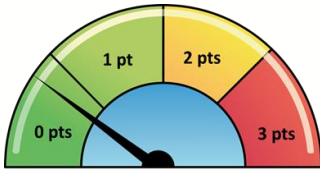## Healthy Communities Institute scorecard - Cole County (continued)

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- 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
1.44	Syphilis Incidence Rate	cases/100,000 population	1.3	4.2	5.5	
1.42	Diabetic Screening: Medicare Population	percent	85.3	86		
1.42	Non-Physician Primary Care Provider Rate	providers/100,000 population	59	59		
1.42	Social and Economic Factors Ranking	(blank)	29			
1.33	Adult Fruit and Vegetable Consumption	percent	13.6	12.5		
1.33	Colorectal Cancer Incidence Rate	cases/100,000 population	45.2	45.6	43.3	38.6
1.33	Food Insecurity Rate	percent	15.4	17	15.8	
1.33	Low-Income and Low Access to a Grocery Store	percent	6			
1.31	Mothers who Smoked During Pregnancy	percent	14.9	17.5	8.5	1.4
1.28	Homeownership	percent	60.4	59.5	56.9	
1.28	Life Expectancy for Males	years	75.8	74.6	76.1	
1.25	Access to Exercise Opportunities	percent	73.7	77.5		
1.25	Children with Health Insurance	percent	93.4	92.9		100
1.25	Clinical Care Ranking	(blank)	6			
1.25	Food Environment Index	(blank)	7.4	7		
1.25	Health Behaviors Ranking	(blank)	14			
1.25	Morbidity Ranking	(blank)	26			
1.25	Mortality Ranking	(blank)	22			
1.25	Physical Environment Ranking	(blank)	19			
1.25	Preventable Hospital Stays	discharges/1,000 Medicare enrollees	59	65		
1.22	Ischemic Heart Disease: Medicare Population	percent	27.8	28.2	28.6	
1.19	Students Eligible for the Free Lunch Program	percent	35.1	38		
1.17	Age-Adjusted Death Rate due to Cancer	deaths/100,000 population	177.9	185.9	173.8	161.4
1.17	Households with No Car and Low Access to a Grocery Store	percent	1.9			
1.17	People Living 200% Above Poverty Level	percent	70.7	64.7	65.8	
1.17	Recognized Carcinogens Released into Air	pounds	306			
1.14	Age-Adjusted Death Rate due to Kidney Disease	deaths/100,000 population	13.7	17.9	13.3	
1.11	Adults with Health Insurance	percent	85	81.5	79.7	100
1.11	Asthma: Medicare Population	percent	3.7	4.6	4.9	
1.08	Adults with Diabetes	percent	10.2	10.7		
1.08	Dentist Rate	dentists/100,000 population	54	52		
1.08	Drinking Water Violations	percent	0.4	4.4		
1.08	Mammography Screening: Medicare Population	percent	68.8	62		
1.08	Premature Death	years/100,000 population	6961.1	7714		
1.06	Age-Adjusted Death Rate due to Breast Cancer	deaths/100,000 females	22.5	23.8	22.2	20.7
1.06	Households with Cash Public Assistance Income	percent	2.4	2.5	2.8	
1.06	Per Capita Income	dollars	26160	25649	28155	
1	Chronic Kidney Disease: Medicare Population	percent	12.3	15.4	15.5	
1	Colon Cancer Screening	percent	75.6	66.6		
1	Families Living Below Poverty Level	percent	9.2	11.1	11.3	
1	High Cholesterol Prevalence: Adults 35+	percent	36.6	42.9		
1	Liquor Store Density	stores/100,000 population	5.2	6.4	10.4	
1	People Living Below Poverty Level	percent	13.3	15.5	15.4	

Source: Healthy Communities Institute

Healthy Communities Institute scorecard - Cole County (continued)
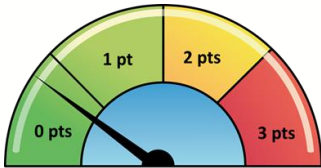

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HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
0.97	Farmers Market Density	markets/1,000 population	0.1		0	
0.97	High Blood Pressure Prevalence	percent	28.2	32.6	30.8	26.9
0.92	Death Rate due to Drug Poisoning	deaths/100,000 population	10.6	14.4		
0.92	Persons with Disability Living in Poverty	percent	23.1	30.1	28.2	
0.92	Poor Physical Health Days	days	3.3	3.7		
0.92	Self-Reported General Health Assessment: Poor or Fair	percent	13.7	16		
0.89	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/100,000 population	15.9	17.1	15.9	14.5
0.89	Low-Income Preschool Obesity	percent	10.9			
0.86	Poor Mental Health Days	days	2.5	3.8		
0.86	Preterm Births	percent	10.7	11.5	11.4	11.4
0.86	Recreation and Fitness Facilities	facilities/1,000 population	0.1		0.1	
0.83	Adults who are Sedentary	percent	22.9			32.6
0.83	Age-Adjusted Death Rate due to Lung Cancer	deaths/100,000 population	50.7	57.7	48.4	45.5
0.83	Child Food Insecurity Rate	percent	19.8	21.6	21.4	
0.83	Heart Failure: Medicare Population	percent	13.8	14.3	14.6	
0.83	Life Expectancy for Females	years	80.6	79.6	80.8	
0.83	Renters Spending 30% or More of Household Income on Rent	percent	38.7	49.4	52.3	
0.81	Voter Turnout	percent	69.6	66	61.8	
0.78	Unemployed Workers in Civilian Labor Force	percent	4.9	6.1	5.6	
0.75	Adults who are Obese	percent	25.7	30	27.8	30.5
0.75	Adults who Smoke	percent	18	22.6		12
0.75	Adults with Current Asthma	percent	5.9	10.1	9.1	
0.75	Age-Adjusted Death Rate due to Influenza and Pneumonia	deaths/100,000 population	14.3	17.6	15.4	
0.75	Alcohol-Impaired Driving Deaths	percent	22	34.6		
0.75	Babies with Low Birth Weight	percent	7.1	8	8	7.8
0.75	Babies with Very Low Birth Weight	percent	1	1.4	1.4	1.4
0.75	Primary Care Provider Rate	providers/100,000 population	84	69		
0.75	Severe Housing Problems	percent	9	14.2		
0.75	Social Associations	membership associations/10,000 population	23.7	11.9		
0.75	Solo Drivers with a Long Commute	percent	13.2	30.1		
0.75	Teen Birth Rate	live births/1,000 females aged 15-19	25.4	30	26.5	
0.67	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/100,000 population	101.9	123	105.7	103.4
0.67	Median Household Income	dollars	53931	47380	53046	
0.58	Child Abuse Rate	cases/1,000 children	1.4	4.2	9.2	8.5
0.56	People 25+ with a Bachelor's Degree or Higher	percent	30.8	26.2	28.8	
0.5	Houses Built Prior to 1950	percent	14.7	20	18.9	
0.5	Lung and Bronchus Cancer Incidence Rate	cases/100,000 population	64.5	76.1	64.9	
0.5	People 25+ with a High School Degree or Higher	percent	90.4	87.6	86	
0.42	Age-Adjusted Death Rate due to Motor Vehicle Traffic Collisions	deaths/100,000 population	9.8	13.7	10.8	12.4
0.33	Age-Adjusted Death Rate due to Unintentional Injuries	deaths/100,000 population	34.5	48.4	39.2	36.4
0.17	Mean Travel Time to Work	minutes	16.9	23.1	25.5	
0.17	People 65+ Living Below Poverty Level	percent	6.2	8.9	9.4	

Source: Healthy Communities Institute

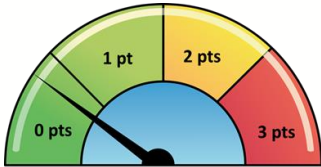## Healthy Communities Institute scorecard - Miller County

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HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
2.83	Children Living Below Poverty Level	percent	31.4	21.6	21.6	
2.83	Mean Travel Time to Work	minutes	28.8	23.1	25.5	
2.83	Single-Parent Households	percent	38.4	33.6	33.3	
2.67	People Living Below Poverty Level	percent	20.9	15.5	15.4	
2.61	Age-Adjusted Death Rate due to Unintentional Injuries	deaths/100,000 population	61.8	48.4	39.2	36.4
2.61	Households with Cash Public Assistance Income	percent	3.9	2.5	2.8	
2.61	Median Household Income	dollars	35507	47380	53046	
2.61	People Living 200% Above Poverty Level	percent	52.5	64.7	65.8	
2.61	Unemployed Workers in Civilian Labor Force	percent	8.1	6.1	5.6	
2.56	Age-Adjusted Death Rate due to Lung Cancer	deaths/100,000 population	71.7	57.7	48.4	45.5
2.5	Cancer: Medicare Population	percent	8.1	7.9	7.9	
2.5	Families Living Below Poverty Level	percent	14.8	11.1	11.3	
2.44	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/100,000 population	69.7	51.7	42.1	
2.44	Young Children Living Below Poverty Level	percent	35.3	26	24.7	
2.42	Age-Adjusted Death Rate due to Motor Vehicle Traffic Collisions	deaths/100,000 population	41.1	13.2	10.7	12.4
2.39	Ischemic Heart Disease: Medicare Population	percent	31.6	28.2	28.6	
2.39	Lung and Bronchus Cancer Incidence Rate	cases/100,000 population	90.1	76.1	64.9	
2.33	Child Food Insecurity Rate	percent	26.3	21.6	21.4	
2.28	Colorectal Cancer Incidence Rate	cases/100,000 population	49.8	45.6	43.3	38.6
2.25	Age-Adjusted Death Rate due to Influenza and Pneumonia	deaths/100,000 population	24.6	18.1	15.8	
2.25	Age-Adjusted Death Rate due to Prostate Cancer	deaths/100,000 males	26.4	20.7	22.3	21.8
2.25	Drinking Water Violations	percent	44.9	4.4		
2.25	Non-Physician Primary Care Provider Rate	providers/100,000 population	16	59		
2.25	Primary Care Provider Rate	providers/100,000 population	20	69		
2.25	Students Eligible for the Free Lunch Program	percent	46.7	38		
2.19	Age-Adjusted Death Rate due to Diabetes	deaths/100,000 population	24.6	20.3	21.3	
2.17	People 65+ Living Below Poverty Level	percent	14.2	8.9	9.4	
2.14	Adults who Smoke	percent	27.6	22.6		12
2.14	Self-Reported General Health Assessment: Poor or Fair	percent	22.1	16		
2.11	Depression: Medicare Population	percent	17	18.6	15.4	
2.11	Workers Commuting by Public Transportation	percent	0.4	1.5	5	5.5
2.08	Alcohol-Impaired Driving Deaths	percent	39.3	34.6		
2.08	Dentist Rate	dentists/100,000 population	24	52		
2.08	Diabetic Screening: Medicare Population	percent	84.8	86		
2.08	High Blood Pressure Prevalence	percent	35.8	32.6	30.8	26.9
2.08	Mothers who Smoked During Pregnancy	percent	23.1	17.5	8.5	1.4
2.08	Oral Cavity and Pharynx Cancer Incidence Rate	cases/100,000 population	13.1	11.5	11.2	
2.08	Teen Birth Rate	live births/1,000 females aged 15-19	42.6	30	26.5	
2.06	Age-Adjusted Death Rate due to Cancer	deaths/100,000 population	193.7	185.9	173.8	161.4
2.06	Workers who Walk to Work	percent	1.8	2	2.8	3.1
2	Adult Fruit and Vegetable Consumption	percent	6.7	12.5		
2	High Cholesterol Prevalence: Adults 35+	percent	47.9	42.9		
2	Life Expectancy for Males	years	73.4	74.6	76.1	
2	Per Capita Income	dollars	19385	25649	28155	

Source: Healthy Communities Institute

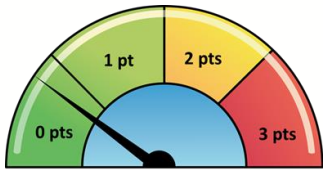## Healthy Communities Institute scorecard – Miller County (continued)

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HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
1.97	Poor Physical Health Days	days	4.4	3.7		
1.94	COPD: Medicare Population	percent	13.5	13.1	11.3	
1.92	Access to Exercise Opportunities	percent	55.2	77.5		
1.92	Adults with Diabetes	percent	11.9	10.7		
1.92	Children with Health Insurance	percent	91.3	92.9		100
1.92	Solo Drivers with a Long Commute	percent	37.8	30.1		
1.89	Adults with Health Insurance	percent	77.8	81.5	79.7	100
1.83	Atrial Fibrillation: Medicare Population	percent	7.9	7.8	7.8	
1.83	Fast Food Restaurant Density	restaurants/1,000 population	0.7			
1.83	Households with No Car and Low Access to a Grocery Store	percent	3.8			
1.83	People 25+ with a Bachelor's Degree or Higher	percent	14.5	26.2	28.8	
1.83	Renters Spending 30% or More of Household Income on Rent	percent	48.5	49.4	52.3	
1.81	Adults who are Obese	percent	31.8	30	27.8	30.5
1.75	Adults who are Overweight	percent	36.3	34.3	35.7	
1.75	Health Behaviors Ranking	(blank)	88			
1.75	Physical Environment Ranking	(blank)	97			
1.75	Social and Economic Factors Ranking	(blank)	92			
1.72	Life Expectancy for Females	years	79.2	79.6	80.8	
1.67	Chlamydia Incidence Rate: Females 15-19	cases/100,000 females aged 15-19	2128.8	3607		
1.67	Colon Cancer Screening	percent	59.5	66.6		
1.67	Food Insecurity Rate	percent	16.8	17	15.8	
1.61	Mothers who Received Early Prenatal Care	percent	75	77.9		77.9
1.58	Babies with Low Birth Weight	percent	7.9	8	8	7.8
1.58	Clinical Care Ranking	(blank)	74			
1.58	Preventable Hospital Stays	discharges/1,000 Medicare enrollees	69	65		
1.58	Severe Housing Problems	percent	14.2	14.2		
1.56	People 25+ with a High School Degree or Higher	percent	84.8	87.6	86	
1.5	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/100,000 population	110.9	123	105.7	103.4
1.5	Hypertension: Medicare Population	percent	53	55.1	55.5	
1.5	People 65+ Living Alone	percent	29.4	28.3	27	
1.47	Mammography Screening: Medicare Population	percent	59.6	62		
1.47	Voter Turnout	percent	62.4	66	61.8	
1.44	Grocery Store Density	stores/1,000 population	0.2			
1.42	Child Abuse Rate	cases/1,000 children	5.8	4.4	9.1	8.5
1.42	Morbidity Ranking	(blank)	44			
1.42	Mortality Ranking	(blank)	47			
1.42	Student-to-Teacher Ratio	students/teacher	13.2	14.3		
1.33	Adults who are Sedentary	percent	28.8			32.6
1.33	Syphilis Incidence Rate	cases/100,000 population	0	4.2	5.5	
1.28	Age-Adjusted Death Rate due to Breast Cancer	deaths/100,000 females	22.5	23.8	22.2	20.7
1.28	Asthma: Medicare Population	percent	4.1	4.6	4.9	
1.28	Chlamydia Incidence Rate	cases/100,000 population	286.1	453.8	446.6	
1.28	Homeownership	percent	60.8	59.5	56.9	
1.28	Infant Mortality Rate	deaths/1,000 live births	6.6	7.3		6

Source: Healthy Communities Institute

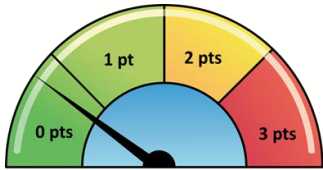## Healthy Communities Institute scorecard - Miller County (continued)

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HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
1.25	Food Environment Index	(blank)	7.5	7		
1.25	Premature Death	years/100,000 population	7772.6	7714		
1.25	Social Associations	membership associations/10,000 population	13.3	11.9		
1.22	Low-Income Preschool Obesity	percent	13.1			
1.22	SNAP Certified Stores	stores/1,000 population	1			
1.17	All Cancer Incidence Rate	cases/100,000 population	424	456.9	459.8	
1.17	Pap Test History	percent	75.1	74.9		
1.17	Workers who Drive Alone to Work	percent	75.9	81.5	76.3	
1.11	Hyperlipidemia: Medicare Population	percent	39.5	42.5	44.8	
1.11	Osteoporosis: Medicare Population	percent	5.2	6.1	6.4	
1.06	Households without a Vehicle	percent	6	7.3	9.1	
1.03	High School Graduation	percent	90.5	86	80	82.4
1	Children with Low Access to a Grocery Store	percent	1.1			
1	Low-Income and Low Access to a Grocery Store	percent	1.4			
1	People 65+ with Low Access to a Grocery Store	percent	0.7			
1	Violent Crime Rate	crimes/100,000 population	264.8	452		
0.92	Death Rate due to Drug Poisoning	deaths/100,000 population	10.4	14.4		
0.89	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/100,000 population	14.9	17.1	15.9	14.5
0.83	Age-Adjusted Death Rate due to Alzheimer's Disease	deaths/100,000 population	23.5	26.9	24	
0.83	Chronic Kidney Disease: Medicare Population	percent	10.7	15.4	15.5	
0.83	Gonorrhea Incidence Rate	cases/100,000 population	20.1	125.3	106.1	
0.81	Farmers Market Density	markets/1,000 population	0.1		0	
0.75	Adults with Current Asthma	percent	5.8	10.1	9.1	
0.72	Rheumatoid Arthritis or Osteoarthritis: Medicare Population	percent	27.4	30.9	29	
0.64	Preterm Births	percent	10.2	11.5	11.4	11.4
0.64	Recreation and Fitness Facilities	facilities/1,000 population	0.1		0.1	
0.58	Babies with Very Low Birth Weight	percent	0	1.4	1.4	1.4
0.56	Diabetes: Medicare Population	percent	23.3	26.1	27	
0.56	Houses Built Prior to 1950	percent	14.1	20	18.9	
0.56	Prostate Cancer Incidence Rate	cases/100,000 males	98	121.8	142.3	
0.5	Breast Cancer Incidence Rate	cases/100,000 females	94.8	122.6	122.7	
0.5	Stroke: Medicare Population	percent	3.3	3.8	3.8	
0.42	Adults who Drink Excessively	percent	13.5	17		25.4
0.42	Poor Mental Health Days	days	2.8	3.8		
0.22	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)	deaths/100,000 population	29.4	42.1	37	34.8
0.17	Alzheimer's Disease or Dementia: Medicare Population	percent	6.5	9.7	9.8	
0.17	Heart Failure: Medicare Population	percent	12.5	14.3	14.6	

Source: Healthy Communities Institute

Healthy Communities Institute scorecard - Moniteau County
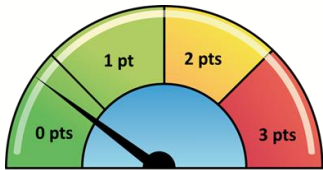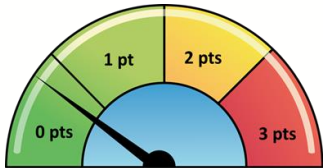

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2.83	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/100,000 population	71.8	51.7	42.1	
2.78	Workers who Walk to Work	percent	1.1	2	2.8	3.1
2.67	Workers Commuting by Public Transportation	percent	0	1.5	5	5.5
2.5	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/100,000 population	137.1	123	105.7	103.4
2.5	Mothers who Received Early Prenatal Care	percent	68.8	77.9		77.9
2.44	People 65+ Living Below Poverty Level	percent	12.8	8.9	9.4	
2.42	Age-Adjusted Death Rate due to Prostate Cancer	deaths/100,000 males	51.9	21.8	23	21.8
2.33	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/100,000 population	19.9	17.1	15.9	14.5
2.28	Colorectal Cancer Incidence Rate	cases/100,000 population	48.5	45.6	43.3	38.6
2.25	Access to Exercise Opportunities	percent	37.3	77.5		
2.25	Adults with Current Asthma	percent	13.7	10.1	9.1	
2.25	Age-Adjusted Death Rate due to Diabetes	deaths/100,000 population	72.3	20.3	21.3	
2.25	Alcohol-Impaired Driving Deaths	percent	45.5	34.6		
2.25	Farmers Market Density	markets/1,000 population	0		0	
2.25	Non-Physician Primary Care Provider Rate	providers/100,000 population	13	59		
2.22	Per Capita Income	dollars	19451	25649	28155	
2.19	Children with Health Insurance	percent	89.7	92.9		100
2.19	Teen Birth Rate	live births/1,000 females aged 15-19	43.8	30	26.5	
2.11	SNAP Certified Stores	stores/1,000 population	0.6			
2.08	Mothers who Smoked During Pregnancy	percent	20.5	17.5	8.5	1.4
2.08	Primary Care Provider Rate	providers/100,000 population	32	69		
2.06	Cancer: Medicare Population	percent	8.3	7.9	7.9	
2.06	Houses Built Prior to 1950	percent	23.4	20	18.9	
2.06	Osteoporosis: Medicare Population	percent	6.5	6.1	6.4	
2	Mean Travel Time to Work	minutes	25.8	23.1	25.5	
1.94	Life Expectancy for Females	years	79.3	79.6	80.8	
1.94	Unemployed Workers in Civilian Labor Force	percent	6.2	6.1	5.6	
1.92	Dentist Rate	dentists/100,000 population	25	52		
1.92	Solo Drivers with a Long Commute	percent	36.8	30.1		
1.89	Adults with Health Insurance	percent	78	81.5	79.7	100
1.81	Adults who are Obese	percent	32.1	30	27.8	30.5
1.78	COPD: Medicare Population	percent	13	13.1	11.3	
1.78	Grocery Store Density	stores/1,000 population	0.2			
1.75	Adults who are Overweight	percent	36	34.3	35.7	
1.72	People 25+ with a Bachelor's Degree or Higher	percent	18.1	26.2	28.8	
1.72	People 25+ with a High School Degree or Higher	percent	82.3	87.6	86	
1.67	Chlamydia Incidence Rate: Females 15-19	cases/100,000 females aged 15-19	1959.2	3607		
1.61	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)	deaths/100,000 population	41.3	44.1	38.9	34.8
1.61	Median Household Income	dollars	47118	47380	53046	

Source: Healthy Communities Institute

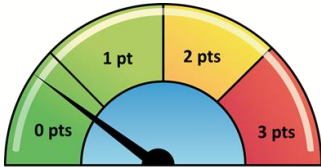## Healthy Communities Institute scorecard - Moniteau County (continued)

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HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
1.5	Breast Cancer Incidence Rate	cases/100,000 females	113.9	122.6	122.7	
1.5	Colon Cancer Screening	percent	60.4	66.6		
1.5	Fast Food Restaurant Density	restaurants/1,000 population	0.5			
1.5	Households with No Car and Low Access to a Grocery Store	percent	2.7			
1.5	Pap Test History	percent	74.3	74.9		
1.5	Rheumatoid Arthritis or Osteoarthritis: Medicare Population	percent	29.4	30.9	29	
1.47	Babies with Very Low Birth Weight	percent	1.4	1.4	1.4	1.4
1.42	Child Abuse Rate	cases/1,000 children	5.5	4.4	9.1	8.5
1.42	Clinical Care Ranking	(blank)	41			
1.42	Drinking Water Violations	percent	2	4.4		
1.42	Health Behaviors Ranking	(blank)	46			
1.39	Life Expectancy for Males	years	75	74.6	76.1	
1.36	Preventable Hospital Stays	discharges/1,000 Medicare enrollees	60	65		
1.33	Adult Fruit and Vegetable Consumption	percent	12.8	12.5		
1.33	Children with Low Access to a Grocery Store	percent	2.5			
1.33	Syphilis Incidence Rate	cases/100,000 population	0	4.2	5.5	
1.31	Diabetic Screening: Medicare Population	percent	85.9	86		
1.28	Age-Adjusted Death Rate due to Cancer	deaths/100,000 population	177.4	185.9	173.8	161.4
1.28	Households without a Vehicle	percent	6.4	7.3	9.1	
1.25	Morbidity Ranking	(blank)	6			
1.25	Mortality Ranking	(blank)	21			
1.25	Physical Environment Ranking	(blank)	23			
1.25	Social and Economic Factors Ranking	(blank)	18			
1.22	Atrial Fibrillation: Medicare Population	percent	7.7	7.8	7.8	
1.22	Diabetes: Medicare Population	percent	25.7	26.1	27	
1.22	Low-Income Preschool Obesity	percent	12.8			
1.19	High School Graduation	percent	89.2	86	80	82.4
1.19	Students Eligible for the Free Lunch Program	percent	36.3	38		
1.17	High Cholesterol Prevalence: Adults 35+	percent	39.1	42.9		
1.17	People 65+ Living Alone	percent	26.4	28.3	27	
1.11	Chlamydia Incidence Rate	cases/100,000 population	236.8	453.8	446.6	
1.08	Adults with Diabetes	percent	10.6	10.7		
1.06	Heart Failure: Medicare Population	percent	13.7	14.3	14.6	
1.03	Poor Mental Health Days	days	3	3.8		
1.03	Premature Death	years/100,000 population	6877.8	7714		
1	Adults who are Sedentary	percent	26.3			32.6
1	Low-Income and Low Access to a Grocery Store	percent	2.7			
1	People 65+ with Low Access to a Grocery Store	percent	1.3			

Source: Healthy Communities Institute

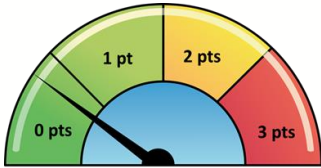## Healthy Communities Institute scorecard – Moniteau County (continued)

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- 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
0.97	Mammography Screening: Medicare Population	percent	63.6	62		
0.94	Prostate Cancer Incidence Rate	cases/100,000 males	109.3	121.8	142.3	
0.94	Workers who Drive Alone to Work	percent	76.1	81.5	76.3	
0.92	Food Environment Index	(blank)	7.9	7		
0.92	Student-to-Teacher Ratio	students/teacher	12.1	14.3		
0.89	Hypertension: Medicare Population	percent	50.6	55.1	55.5	
0.89	Liquor Store Density	stores/100,000 population	6.4	6.4	10.4	
0.89	People Living 200% Above Poverty Level	percent	67.6	64.7	65.8	
0.86	Recreation and Fitness Facilities	facilities/1,000 population	0.1		0.1	
0.83	Chronic Kidney Disease: Medicare Population	percent	10.1	15.4	15.5	
0.83	Depression: Medicare Population	percent	14.2	18.6	15.4	
0.83	Homeownership	percent	66.3	59.5	56.9	
0.81	Poor Physical Health Days	days	3	3.7		
0.81	Self-Reported General Health Assessment: Poor or Fair	percent	14	16		
0.81	Voter Turnout	percent	68	66	61.8	
0.78	Renters Spending 30% or More of Household Income on Rent	percent	40.9	49.4	52.3	
0.75	Severe Housing Problems	percent	10.4	14.2		
0.75	Social Associations	membership associations/10,000 population	18.6	11.9		
0.72	Gonorrhea Incidence Rate	cases/100,000 population	12.8	125.3	106.1	
0.72	Households with Cash Public Assistance Income	percent	2	2.5	2.8	
0.69	High Blood Pressure Prevalence	percent	26.6	32.6	30.8	26.9
0.67	Food Insecurity Rate	percent	14.1	17	15.8	
0.67	Violent Crime Rate	crimes/100,000 population	117	452		
0.61	All Cancer Incidence Rate	cases/100,000 population	406.1	456.9	459.8	
0.61	Asthma: Medicare Population	percent	2.8	4.6	4.9	
0.61	Lung and Bronchus Cancer Incidence Rate	cases/100,000 population	58.3	76.1	64.9	
0.58	Adults who Drink Excessively	percent	6.4	17.2		25.4
0.58	Babies with Low Birth Weight	percent	5	8	8	7.8
0.56	Families Living Below Poverty Level	percent	8.7	11.1	11.3	
0.5	Alzheimer's Disease or Dementia: Medicare Population	percent	8.5	9.7	9.8	
0.5	Child Food Insecurity Rate	percent	19	21.6	21.4	
0.5	People Living Below Poverty Level	percent	11.4	15.5	15.4	
0.47	Preterm Births	percent	8.6	11.5	11.4	11.4
0.39	Children Living Below Poverty Level	percent	13	21.6	21.6	
0.39	Single-Parent Households	percent	20.1	33.6	33.3	
0.39	Young Children Living Below Poverty Level	percent	12.3	26	24.7	
0.33	Hyperlipidemia: Medicare Population	percent	35.9	42.5	44.8	
0.33	Ischemic Heart Disease: Medicare Population	percent	25.3	28.2	28.6	
0.33	Stroke: Medicare Population	percent	3.1	3.8	3.8	
0.28	Age-Adjusted Death Rate due to Lung Cancer	deaths/100,000 population	44.6	57.7	48.4	45.5

Source: Healthy Communities Institute

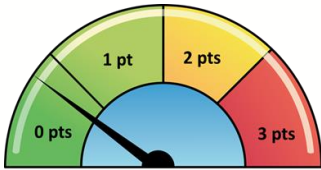## Healthy Communities Institute scorecard - Osage County

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HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
2.78	Workers who Walk to Work	percent	1.4	2	2.8	3.1
2.61	Cancer: Medicare Population	percent	9.6	7.9	7.9	
2.56	Workers Commuting by Public Transportation	percent	0.1	1.5	5	5.5
2.53	Babies with Very Low Birth Weight	percent	2.7	1.4	1.4	1.4
2.5	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/100,000 population	137.9	123	105.7	103.4
2.42	Adults who Drink Excessively	percent	32.2	17		25.4
2.39	Atrial Fibrillation: Medicare Population	percent	8.7	7.8	7.8	
2.39	Osteoporosis: Medicare Population	percent	7.7	6.1	6.4	
2.39	Rheumatoid Arthritis or Osteoarthritis: Medicare Population	percent	34.3	30.9	29	
2.25	Access to Exercise Opportunities	percent	30.1	77.5		
2.25	Adults who are Overweight	percent	39.9	34.3	35.7	
2.25	Non-Physician Primary Care Provider Rate	providers/100,000 population	15	59		
2.25	Primary Care Provider Rate	providers/100,000 population	7	69		
2.25	Recreation and Fitness Facilities	facilities/1,000 population	0		0.1	
2.25	Solo Drivers with a Long Commute	percent	39.6	30.1		
2.17	Diabetes: Medicare Population	percent	27.5	26.1	27	
2.08	Dentist Rate	dentists/100,000 population	22	52		
2	Age-Adjusted Death Rate due to Unintentional Injuries	deaths/100,000 population	52.9	48.4	39.2	36.4
2	Prostate Cancer Incidence Rate	cases/100,000 males	139.2	121.8	142.3	
1.92	Children with Health Insurance	percent	90.8	92.9		100
1.92	Social Associations	membership associations/10,000 population	10.8	11.9		
1.89	Low-Income Preschool Obesity	percent	17.2			
1.89	Mean Travel Time to Work	minutes	26	23.1	25.5	
1.89	Per Capita Income	dollars	22629	25649	28155	
1.89	SNAP Certified Stores	stores/1,000 population	0.6			
1.89	Stroke: Medicare Population	percent	3.9	3.8	3.8	
1.86	Mothers who Smoked During Pregnancy	percent	18	17.5	8.5	1.4
1.83	Adult Fruit and Vegetable Consumption	percent	10.6	12.5		
1.83	Hypertension: Medicare Population	percent	55.7	55.1	55.5	
1.78	Hyperlipidemia: Medicare Population	percent	43.5	42.5	44.8	
1.72	Heart Failure: Medicare Population	percent	15.2	14.3	14.6	
1.67	Houses Built Prior to 1950	percent	21.6	20	18.9	
1.67	People 25+ with a Bachelor's Degree or Higher	percent	15.4	26.2	28.8	
1.64	Diabetic Screening: Medicare Population	percent	83.9	86		
1.61	Mothers who Received Early Prenatal Care	percent	80.3	77.9		77.9
1.58	Adults with Current Asthma	percent	10	10.1	9.1	
1.58	Adults with Diabetes	percent	11.3	10.7		
1.58	Self-Reported General Health Assessment: Poor or Fair	percent	15.1	16		

Source: Healthy Communities Institute

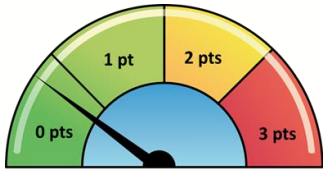## Healthy Communities Institute scorecard – Osage County (continued)

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HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
1.5	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)	deaths/100,000 population	42.5	46	40.2	34.8
1.5	Breast Cancer Incidence Rate	cases/100,000 females	117.8	122.6	122.7	
1.5	Colon Cancer Screening	percent	65.9	66.6		
1.5	Colorectal Cancer Incidence Rate	cases/100,000 population	44.1	45.6	43.3	38.6
1.5	Households with No Car and Low Access to a Grocery Store	percent	2.7			
1.44	COPD: Medicare Population	percent	12.3	13.1	11.3	
1.42	Alcohol-Impaired Driving Deaths	percent	31.3	34.6		
1.42	Mortality Ranking	(blank)	34			
1.39	PBT Released	pounds	25			
1.39	Recognized Carcinogens Released into Air	pounds	17			
1.36	Poor Physical Health Days	days	3.4	3.7		
1.36	Premature Death	years/100,000 population	7343.2	7714		
1.33	Children with Low Access to a Grocery Store	percent	3.9			
1.33	Chlamydia Incidence Rate: Females 15-19	cases/100,000 females aged 15-19	1279.6	3607		
1.33	High Cholesterol Prevalence: Adults 35+	percent	42.7	42.9		
1.33	Ischemic Heart Disease: Medicare Population	percent	28.8	28.2	28.6	
1.33	Low-Income and Low Access to a Grocery Store	percent	4.4			
1.33	People 65+ with Low Access to a Grocery Store	percent	2.4			
1.33	Syphilis Incidence Rate	cases/100,000 population	0	4.2	5.5	
1.28	All Cancer Incidence Rate	cases/100,000 population	428.2	456.9	459.8	
1.28	Lung and Bronchus Cancer Incidence Rate	cases/100,000 population	67.6	76.1	64.9	
1.28	Violent Crime Rate	crimes/100,000 population	172.6	452		
1.25	Clinical Care Ranking	(blank)	21			
1.25	Drinking Water Violations	percent	1.8	4.4		
1.25	Health Behaviors Ranking	(blank)	10			
1.25	Morbidity Ranking	(blank)	9			
1.25	Physical Environment Ranking	(blank)	7			
1.25	Social and Economic Factors Ranking	(blank)	4			
1.17	Alzheimer's Disease or Dementia: Medicare Population	percent	9.4	9.7	9.8	
1.17	Homeownership	percent	64.8	59.5	56.9	
1.17	Households without a Vehicle	percent	5.3	7.3	9.1	
1.17	Pap Test History	percent	75.7	74.9		
1.17	Workers who Drive Alone to Work	percent	73.7	81.5	76.3	
1.08	Students Eligible for the Free Lunch Program	percent	24.5	38		
1.06	Adults with Health Insurance	percent	82.2	81.5	79.7	100
1.06	Life Expectancy for Females	years	80.4	79.6	80.8	
1.06	Life Expectancy for Males	years	75.7	74.6	76.1	
1	Adults who are Sedentary	percent	25.8			32.6
1	Fast Food Restaurant Density	restaurants/1,000 population	0.1			

Source: Healthy Communities Institute

Healthy Communities Institute scorecard - Osage 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
0.97	Farmers Market Density	markets/1,000 population	0.1		0	
0.94	Gonorrhea Incidence Rate	cases/100,000 population	14.4	125.3	106.1	
0.94	Households with Cash Public Assistance Income	percent	2.1	2.5	2.8	
0.94	People Living 200% Above Poverty Level	percent	69.4	64.7	65.8	
0.92	Adults who are Obese	percent	27.1	30	27.8	30.5
0.92	Death Rate due to Drug Poisoning	deaths/100,000 population	10.3	14.4		
0.92	Student-to-Teacher Ratio	students/teacher	12.7	14.3		
0.89	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/100,000 population	43	51.7	42.1	
0.89	Grocery Store Density	stores/1,000 population	0.4			
0.81	Voter Turnout	percent	72.4	66	61.8	
0.78	Age-Adjusted Death Rate due to Lung Cancer	deaths/100,000 population	47.4	57.7	48.4	45.5
0.78	Chronic Kidney Disease: Medicare Population	percent	11.8	15.4	15.5	
0.78	Unemployed Workers in Civilian Labor Force	percent	4.6	6.1	5.6	
0.75	Food Environment Index	(blank)	8.2	7		
0.75	High School Graduation	percent	93	86	80	82.4
0.75	Mammography Screening: Medicare Population	percent	70.9	62		
0.75	Severe Housing Problems	percent	6.9	14.2		
0.72	Depression: Medicare Population	percent	14.3	18.6	15.4	
0.72	People 65+ Living Below Poverty Level	percent	8.1	8.9	9.4	
0.69	High Blood Pressure Prevalence	percent	25.2	32.6	30.8	26.9
0.67	Median Household Income	dollars	51408	47380	53046	
0.67	People 25+ with a High School Degree or Higher	percent	88.6	87.6	86	
0.64	Babies with Low Birth Weight	percent	6.7	8	8	7.8
0.64	Preventable Hospital Stays	discharges/1,000 Medicare enrollees	44	65		
0.64	Teen Birth Rate	live births/1,000 females aged 15-19	9.7	30	26.5	
0.61	Chlamydia Incidence Rate	cases/100,000 population	108.2	453.8	446.6	
0.61	Single-Parent Households	percent	21.3	33.6	33.3	
0.5	Child Food Insecurity Rate	percent	16.6	21.6	21.4	
0.5	Food Insecurity Rate	percent	12.3	17	15.8	
0.47	Adults who Smoke	percent	12.1	22.6		12
0.42	Poor Mental Health Days	days	2.3	3.8		
0.39	Asthma: Medicare Population	percent	2.3	4.6	4.9	
0.39	Renters Spending 30% or More of Household Income on Rent	percent	38.6	49.4	52.3	
0.25	Preterm Births	percent	8	11.5	11.4	11.4
0.17	Children Living Below Poverty Level	percent	7.3	21.6	21.6	
0.17	Families Living Below Poverty Level	percent	5.9	11.1	11.3	
0.17	People 65+ Living Alone	percent	21	28.3	27	
0.17	People Living Below Poverty Level	percent	8.7	15.5	15.4	
0.17	Young Children Living Below Poverty Level	percent	10.4	26	24.7	
0.11	Age-Adjusted Death Rate due to Cancer	deaths/100,000 population	148	185.9	173.8	161.4

Source: Healthy Communities Institute

Additional supporting data

Table 1	Top 5 Risk Factors					
		Cole	Miller	Moniteau	Osage	Missouri
	1	Obese (>30 BMI)	Obese (>30 BMI)	Obese (>30 BMI)	Smoking	Mother Overweight
	2	No Exercise	No Exercise	No Exercise	No Mammography Age 40+	Obese (>30 BMI)
	3	Smoking	No Mammography Age 40+	Smoking	High Cholesterol Age 55+	No Exercise
	4	No Cervical Cancer Screening Age 18+	Mother Overweight	No Mammography Age 40+	Mother Overweight	Smoking
	5	Mother Overweight	Smoking	Mother Overweight	High Blood Pressure	No Cervical Cancer Screening Age 18+

Table 2	Top 5 Diseases/Conditions					
		Cole	Miller	Moniteau	Osage	Missouri
	1	COPD	COPD		Heart Diseas	Diabetes
	2	Diabetes	Heart Disease	Heart Disease	Motor Vehicle Accidents	Heart Disease
	3	Heart Disease	Motor Vehicle Accidents	Motor Vehicle Accidents	COPD	Alcohol & Substance Abuse
	4	Infant Health Problems	Diabetes	Diabetes	Diabetes	Arthritis/Lupis
	5	Alcohol & Substance Abuse	Lung Cancer	Lung Cancer	Lung Cancer	COPD

Table 3	Top 5 Chronic Diseases-DEATHS					
		Cole	Miller	Moniteau	Osage	Missouri
	1	Heart Disease	Cancer	Heart Disease	Heart Disease	Heart Disease
	2	Cancer	Heart Disease	Cancer	Cancer	Cancer
	3	COPD	COPD	Essential Hypertension	COPD	COPD
	4	Stroke	Essential Hypertension	Diabetes	Diabetes	Stroke
	5	Alzheimer's Disease	Alzheimer's Disease	COPD	Chronic Liver Disease/Cirrhosis	Alzheimer's Disease

Source: MICA 2015

Additional supporting data (continued)

Table 4	Top 5 Causes for IP Hospitalizations					
		Cole	**Miller**	**Moniteau**	**Osage**	**Missouri**
	1	Heart and circulation	Heart and circulation	Heart and circulation	Pregnancy-childbirth-reproduction	Heart and circulation
	2	Pregnancy-childbirth-reproduction	Pregnancy-childbirth-reproduction	Pregnancy-childbirth-reproduction	Heart and circulation	Pregnancy-childbirth-reproduction
	3	Mental Disorders	Mental Disorders	Digestive system	Injury and poisoning	Mental Disorders
	4	Digestive system	Respiratory (throat and lung)	Injury and poisoning	Digestive system	Digestive system
	5	Respiratory (throat and lung)	Injury and poisoning	Respiratory (throat and lung)	Mental Disorders	Respiratory (throat and lung)

Table 5	Top 5 Causes of Death (2013 MICA Deaths)					
		Cole	**Miller**	**Moniteau**	**Osage**	**Missouri**
	1	Heart Disease	Heart Disease	Cancer	Heart Disease	Heart Disease
	2	Cancer	Cancer	Heart Disease	Cancer	Cancer
	3	Other diseases (residual)	Chronic lower Respiratory Disease	Diabetes	Other diseases (residual)	Other diseases (residual)
	4	Chronic lower Respiratory Disease	Other diseases (residual)	Essential Hypertension	Pneumonia and influenza	Chronic lower Respiratory Disease
	5	Stroke	Essential Hypertension	Chronic lower Respiratory Disease	Alzheimer's Disease	Stroke

Table 6	Prevalence of Health Problems					
		Cole	**Miller**	**Moniteau**	**Osage**	**Missouri**
	Ever been told had high blood pressure	16.5%	25.3%	21.2%	19.8%	**19.6%**
	high cholesterol (age 35+)	38.1%	50.8%	39.6%	41.6%	**44.8%**
	Ever been told had diabetes	8.2%	13.2%	9.1%	7.5%	**10.7%**

Table 7	County Health Rankings, Teen Births					
		Cole	**Miller**	**Moniteau**	**Osage**	**Missouri**
	Age 15-19 (2006-2012) rate per 1,000 female population	35	50	40	23	**40**

Source: MICA 2015

Additional supporting data (continued)

Table 8	**Top 5 Preventable Hospitalizations**					
		Cole	**Miller**	**Moniteau**	**Osage**	**Missouri**
	1	Dehydration	Dehydration	Dehydration	Dehydration	Dehydration
	2	Bacterial PN	COPD	Bacterial PN	Bacterial PN	Bacterial PN
	3	Congestive Heart Failure	Bacterial PN	Cellulitis	Cellulitis	Cellulitis
	4	Cellulitis	Congestive Heart Failure	COPD	COPD	COPD
	5	COPD	Cellulitis	Kidney/Urinary Infection	Diabetes	Asthma

Table 9	**Women Preventive Care**					
		Cole	**Miller**	**Moniteau**	**Osage**	**Missouri**
	(never had a mammogram (age 40+)	4.0%	16.6%	15.5%	5.0%	**9.9%**
	(no mammogram in last year (age 40+)	27.7%	41.2%	36.8%	19.3%	**30.5%**
	(never had a pap smear (age 18+)	11.1%	6.7%	3.3%	10.9%	**7.5%**
	(no pap smear in last 3 yrs (age 18+)	26.1%	26.2%	26.7%	24.4%	**26.4%**

Table 10	**Preventive Care**					
		Cole	**Miller**	**Moniteau**	**Osage**	**Missouri**
	never had blood stool test (age 50+)	69.0%	70.5%	80.0%	70.8%	**66.1%**
	never had a sigmoid or colonoscopy (age 50+)	24.7%	38.4%	38.8%	36.8%	**33.8%**
	never had blood cholesteral checked (age 35+)	89.2%	94.3%	83.3%	85.2%	**89.5%**
	no blood stool test last year (age 50+)	94.3%	91.3%	95.7%	93.2%	**90.4%**
	no sigmoid or colonoscopy in last 10 yrs (age 50+)	29.8%	40.9%	43.0%	39.4%	**39.0%**

Source: MICA 2015

The tax year the hospital last conducted a needs assessment

SSM Health St. Mary's Hospital - Jefferson City 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. Mary's Hospital - Jefferson City held meetings 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 but are not limited to the congestive heart failure clinic at Jefferson City Medical Group, congestive heart failure (CHF) clinic collaboration with Lutheran Senior Services, St. Joseph Bluff and Stonebridge communities, Cole County Health Department WISEWOMAN program, SSM Health Medical Group, Jefferson City YMCA, SSM Health St. Mary's Hospital – Jefferson City cardiopulmonary support group, diabetes support group, stroke survivor support group and St. Mary's Mended Hearts program.

- Cancer: Resources include but are not limited to SSM Health St. Mary's Cancer Center at Jefferson City Medical Group (JCMG), Epic health notifications, Richard J. Wilson Cancer Resource Center, the American Cancer Society, Jefferson City YMCA, the Cole County Health Department ShowMe Healthy Women program and SSM Health Medical Group.

How the data was obtained

The Central Community Health Assessment Partnership (CMCHAP) conducted a comprehensive community health assessment using publicly available data and community feedback- which allowed for the assessment of community perception- as well as current health risks and health outcomes specific to Jefferson, Cole, Moniteau and Osage Counties.

Data collected by various organizations, such as the US Census, Centers for Disease Control and Prevention, the Robert Wood Johnson Foundation and the Healthy Communities Institute, were vital to this assessment. Valuable input from community members added depth and quality to the data. The objectives were to identify factors influencing health status, determine and prioritize issues of greatest concern, identify unmet health needs and produce a source of reliable information to support the development of goals and action plans.

Additional demographic and health impact factors were collected through SSM Health's data analytics platforms and included but were not limited to county demographic profiles, cancer registrar, CHSI Summary Comparison Report, population, education, literacy rates and disparities.

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. Mary's Hospital - Jefferson City 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

The Central Community Health Assessment Partnership (CMCHAP) is a unique partnership of health care and social service providers sponsored by Capital Region Medical Center and SSM Health St. Mary's Hospital - Jefferson City. Partnerships also include Community Health Center of Central Missouri; Jefferson City Medical Group; Missouri Primary Care Association; United Way of Central Missouri; and the Health Departments of Cole, Miller, Moniteau and Osage Counties.

The needs assessment was conducted using data analysis, discussions with community groups, provider clients and surveys completed by community members, community leaders and local physicians. Throughout the process, more than 150 individuals participated in nine different discussion groups and consumer interview sessions. The surveys were made available in physician offices, online and in community health departments. Valuable input from community members was used to supplement the data.

The objectives were to identify factors influencing health status, determine and prioritize issues of greatest concern, identify unmet health needs and produce a source of reliable information that will support the development of solutions. SSM Health St. Mary's Hospital – Jefferson City administration reviewed community perception results and health data, prioritizing the top two needs based on the extent of the deficiency and the ability of the hospital to make an impact.

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

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. Mary's Hospital - Jefferson City 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. Mary's Hospital - Jefferson City 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. This data is available on our website ssmhealth.com/system and in the County Health Rankings Report.

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

SSM Health St. Mary's Hospital - Jefferson City 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. Mary's Hospital - Jefferson City made a conscious effort to reveal and acknowledge these disparities when possible.

Which needs the hospital will not address and the reasons

Because SSM Health St. Mary's Hospital - Jefferson City has limited resources and to avoid duplication of efforts, not every health indicator with an identified need for improvement could be addressed. Those community needs identified but not "prioritized" for improvement included the following:

- Health literacy: Our input sessions revealed that there is not so much an issue with obtaining health information, as there is a need to help people process and understand basic health information, including the services available to assist them in making appropriate health and wellness decisions. SSM Health St. Mary's Hospital - Jefferson City provides education and awareness offerings on many health issues that affect the surrounding communities.

- Access to care is an ongoing priority at SSM Health St. Mary's Hospital - Jefferson City. SSM Health is 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.

- Dental services: At this point in time, the SSM Health Medical Group is not equipped to provide dental services, but relies on and collaborates with other independent dental care providers within the community to provide associated services.

- Substance abuse: Our community leaders pointed to drug and alcohol use as a significant issue and expressed specific concern for the region's youth. The challenge is that our region does not have a facility that provides detox or treatment. The increasing use of E-cigarettes and the misconception that they are a healthy alternative to regular cigarette smoking is concerning. SSM Heath and SSM Health St. Mary's Hospital – Jefferson City both offer awareness and education opportunities regarding the risk factors of smoking.

Appendix

Persons representing the community with whom the hospital consulted

SSM Health St. Mary's Hospital - Jefferson City 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. Mary's Hospital - Jefferson City benefited from guidance and input from individuals with expertise in public/population health.

Date	Solicitation Type	Panel Member Title	Panel Member Organization	Panel Member Name (Optional)
5/15-6/5	Survey	Providers	SSM Health	Anonymous (35)
5/18-6/15/2015	Survey	Patients	Unknown	Anonymous (528)
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	DHSS	Sharon Coonce
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	Mo Hospital Association	Leslie Porth
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	Faith Lutheran	Tony Alter
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	JCPS	Amy Berendzen
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	DHSS	William Koebel
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	DHSS	Lana Wong
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	DHSS	Pam Fisher
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	JCPD	Jason Payne
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	JCPD	Doug Shoemaker
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	Retired	Bill Anthony
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	Pathways	Jeanna Powers
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	DHSS	Wyndy Chambers
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	Agape Clinic Belle	Margie Lance
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	Osage County	Mary Burhorst
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	CMAAA	Trish Lutrell
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	Prenger	Tanya Alm
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	Cole County Juvenile	Kurt Valentine
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	St Peters JC	Alice Kuehn
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	DHSS	Cathy Galloway
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	DHSS	Angela Duvall
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	CRMC	Tom Weaver
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	LFCS	Eileen Long
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	CRMC	Anne Lock
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	CRMC	Jack Pletz
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	Cole County Commission	Jeff Hoelscher
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	1st UMC	Rev. Jeannie Martin Dudenhoeffer
5/18-6/15/2015	Focus Group	1st Community Leadership Meeting	City of Jefferson	Steve Crowell
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	JCPS-SW ECC	Lisa Dierking
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	JCPS-PAT	Katie Epema
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	SSM Health BHS	Brandon Farris
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Salvation Army	Chris White
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Salvation Army	Rachel White
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	American Red Cross	Dave Griffith
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	EMD/CERT	Bruce Breseman
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Common Ground	Kristen Hilty

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

Date	Solicitation Type	Panel Member Title	Panel Member Organization	Panel Member Name (Optional)
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Girl Scouts	Angie Sullivan
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Cole County Health	Shalon Schonhardt
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Bridges of MO	April McNail
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Bridges of MO	Cheryl Fultz
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Big Brothers Big Sisters	Lee Knernschield
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Senior Nutrition	Frankie Reams
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Central MO Community Action	Lisa Goldschmidt
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Council for Drug Free Youth	Joy Sweeney
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	1st Choice Employment	Carol Rothove
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	ABLE	Felicia Poettgen
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	BOPAT	Shawna Kerperin
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	CMCA Head Start	Tammy Hawk
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	American Red Cross	Don Barnett
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Homemaker Health Care	Bill Tannehill
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Special Learning Center	Debbie Hamler
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	4-H	Jenny Fiatt
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Dreams to Reality	Liz Lehmann
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	DMH	Edwin Coope
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	United Way 211 MO/IL	Kate Rollins
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	1st Choice Employment	Ryan Jimenez
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Samaritan Center	Lindsey Lecuru
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Boy Scouts	Byron Haverstick
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Boy Scouts	Kelsey Huston
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	CHCCMO	Lorna Cockran
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Faith Lutheran Church	Jodi Bates
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Osage Co. Special Services	Megan Reichart
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Boys & Girls Club	Stephanie Johnson
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Cole County EMA	Bill Farr
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	ILRC	Melinda Cardone
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	City of Jefferson	Laura Henry
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Food Bank	Travis Sappington
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	JCDCC	Kristal Longstreet
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Salvation Army	Tyreka Brandon
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Food Bank	Melissa Schulte
5/18-6/15/2015	Focus Group	Unmet Needs Meeting	Rape & Abuse Crisis Services	Alden Henrickson
5/18-6/15/2015	Focus Group	Moniteau County	Moniteau Case Center	Rhonda Ware
5/18-6/15/2015	Focus Group	Moniteau County	California Ministerial Association	Dan Rowlison
5/18-6/15/2015	Focus Group	Moniteau County	Moniteau CO R-1	Daniel Williams
5/18-6/15/2015	Focus Group	Moniteau County	You Turn Inc	William Wallace

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

Date	Solicitation Type	Panel Member Title	Panel Member Organization	Panel Member Name (Optional)
5/18-6/15/2015	Focus Group	Moniteau County	Moniteau CO Health Center	Avis Boles
5/18-6/15/2015	Focus Group	Moniteau County	Moniteau CO Assessor	Melissa Hentges
5/18-6/15/2015	Focus Group	Moniteau County	Moniteau CO Clerk	Roberta Elliott
5/18-6/15/2015	Focus Group	Moniteau County	St Paul's Lutheran	Peter Kurowski
5/18-6/15/2015	Focus Group	Moniteau County	Burger's Smokehouse	Sandra Ratcliff
5/18-6/15/2015	Focus Group	Moniteau County	Retired	C. Roll
5/18-6/15/2015	Focus Group	Moniteau County	California Schools	Dwight Sanders
5/18-6/15/2015	Focus Group	Moniteau County	CMCA	Stefani Thompson
5/18-6/15/2015	Focus Group	Moniteau County	CMCA	Sallie Humphrey
5/18-6/15/2015	Focus Group	Moniteau County	California Middle School	Matt Abernathy
5/18-6/15/2015	Focus Group	Moniteau County	Public Administrator	Cher Caudel
5/18-6/15/2015	Focus Group	Moniteau County	Burrell BH	Cecilia Peterson
5/18-6/15/2015	Focus Group	Moniteau County	MCMC	Barry
5/18-6/15/2015	Focus Group	Moniteau County	El Puente	Sr. Guadalupe Ruiz
5/18-6/15/2015	Focus Group	Moniteau County	Moniteau Care	Tonya Weaver
5/18-6/15/2015	Focus Group	Moniteau County	Cargill	Shallie Witt
5/18-6/15/2015	Focus Group	Moniteau County	VW 211 MO/IL	Kate Rollins
5/18-6/15/2015	Focus Group	Moniteau County	Vision Health Eyecare Center	Dou Vandorfeltz
5/18-6/15/2015	Focus Group	Osage County	Central Missouri Community Action	Kevin Wehner
5/18-6/15/2015	Focus Group	Osage County	Central Missouri Community Action	Brittany Hotmer
5/18-6/15/2015	Focus Group	Osage County	University Extension Office	Kathy Dothage
5/18-6/15/2015	Focus Group	Osage County	Community Action	Charlotte Bellsmith
5/18-6/15/2015	Focus Group	Osage County	Retired	Joan Kurtzeborn R.N.
5/18-6/15/2015	Focus Group	Osage County	Osage County Community Living	Megan Reichart
5/18-6/15/2015	Focus Group	Osage County	Faith Community Nursing	Lucy Brenner
5/18-6/15/2015	Focus Group	Osage County	nurse at Fatima	Wanda Rehagen
5/18-6/15/2015	Focus Group	Osage County	Linn R-II school district	Corina Henderson
5/18-6/15/2015	Focus Group	Osage County	Linn Elementary School	Lorie Winslow
5/18-6/15/2015	Focus Group	Osage County	Community at large	Shawn Poyser
5/18-6/15/2015	Focus Group	Osage County	Osage County Health Department	Susan Long
5/18-6/15/2015	Focus Group	Osage County	United Way of Central Missouri	Theresa Verslues
5/18-6/15/2015	Focus Group	Osage County	United Way 2-1-1	Kate Rollins
5/18-6/15/2015	Focus Group	Osage County	Osage Ambulance Services	Joshua Krull
5/18-6/15/2015	Focus Group	Osage County	United Way of Central Missouri	Ann Bax
5/18-6/15/2015	Focus Group	Miller County	Healthy Schools	Terry Atterberry
5/18-6/15/2015	Focus Group	Miller County	Healthy Community	Michele Griswold
5/18-6/15/2015	Focus Group	Miller County	Miller County HD	Bruce Jenkins
5/18-6/15/2015	Focus Group	Miller County	Eldon Schools	Scott Davis
5/18-6/15/2015	Focus Group	Miller County	Eldon Schools	Ashley Calvino

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

Date	Solicitation Type	Panel Member Title	Panel Member Organization	Panel Member Name (Optional)
5/18-6/15/2015	Focus Group	Miller County	Eldon Schools	Lindsey Williams
5/18-6/15/2015	Focus Group	Miller County	Advocate	Maureen Qualiheim
5/18-6/15/2015	Focus Group	Miller County	RACS	Alden Henrichson
5/18-6/15/2015	Focus Group	Miller County	Eldon Schools	Shirley Koch
5/18-6/15/2015	Focus Group	Miller County	Lake Regional	Jill Williams
5/18-6/15/2015	Focus Group	Miller County	Pave Americorp	Sasha Seaton
5/18-6/15/2015	Focus Group	Miller County	Pave Americorp	Cassandra Marks
5/18-6/15/2015	Focus Group	Miller County	Pave Americorp	Terry Potchell
5/18-6/15/2015	Focus Group	Miller County	Eldon Parks and Rec	Brenda Caine
5/18-6/15/2015	Focus Group	Miller County	Eldon Chamber	Dee Spalding
5/18-6/15/2015	Focus Group	Miller County	Pave Americorp	Amaris Paramo
5/18-6/15/2015	Focus Group	Miller County	Lake Regional	Tom Williams
5/18-6/15/2015	Focus Group	Miller County	EHS	Michel Varner
5/18-6/15/2015	Focus Group	Miller County	CRMC	Michael Griswold

How SSM Health St. Mary's Hospital – Jefferson City makes its needs assessment widely available to the public

SSM Health St. Mary's Hospital - Jefferson City 2016 CHNA is available online at ssmhealth.com/system and upon request from the hospital facility at 573-681-3000 . See section on "Going Forward" for more information.

Others who participated in SSM Health St. Mary's - Jefferson City CHNA process

The CHNA was conducted in partnership with the Central Missouri Community Health Needs Assessment Partnership consisting of the following organizations and their representatives, who formed the Steering Team and contributed much time and effort to this project.

- Capital Region Medical Center, www.crmc.org
    - Paula Burnett
    - Lindsay Huhman
    - Tiffany Rutledge
    - Janet Weckenborg
- Cole County Health Department, www.colehealth.org
    - Kristi Campbell
    - Mike Sapp
    - Mary Telthorst
- Community Health Center of Central Missouri, www.chccmo.org
    - Lorna Cockrum
    - Jeff Davis
- Jefferson City Medical Group, www.jcmg.org
    - Emily Mantle
- Miller County Health Department, www.milercountyhealth.com
    - Bruce Jenkins
- Moniteau County Health Department, www.Moniteaucountyhealth.org
    - Andrea Kincaid
- Osage County Health Department, www.osagecountyhd.org
    - Susan Long
- Missouri Primary Care Association, www.Mo-pca.org
    - Michael Felix
- SSM St. Mary's Hospital Jefferson City, www.ssmhelathmidmo.com
    - Tracy O'Rourke
    - Beverly Stafford
    - Janet Wear-Enloe
    - Susan Treloar
- United Way of Central Missouri, www.unitedwaycemo.org
    - Ann Bax

In addition, special thanks to the individuals, organizations and community leaders who helped organize discussion groups, hosted meetings and provided their candid opinions.

SSMHealth

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:
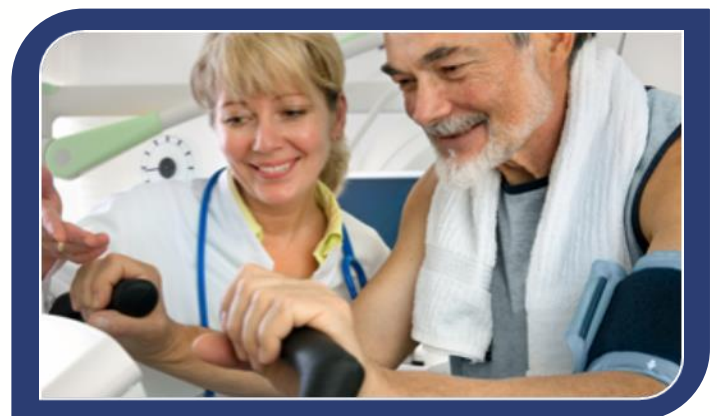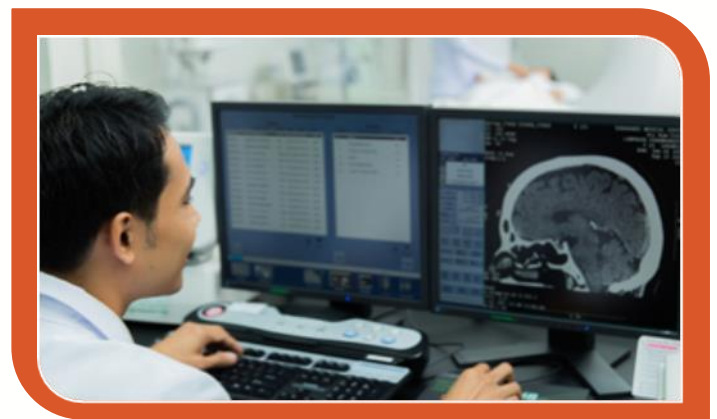
• Health issues that impact many people or for which disparities exist and which put a greater burden on some population groups

• Health issues for which trends are worsening

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

The SSM Health St. Mary's Hospital - Jefferson City 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 Cole, Miller, Moniteau and Osage Counties.

Priority #1 Heart Disease

Priority #2 Cancer Care

Heart Disease

Heart disease includes a range of conditions that affect the health of one's heart. 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.

Heart disease is the leading cause of death in Cole, Miller and Osage counties. It is also the top cause of inpatient hospitalizations for both men and women in the region. Further complicating the issue is a unfavorable prevalence of high blood pressure, high cholesterol, diabetes, obesity and smoking in the four counties, especially in Miller and Moniteau counties.

Additional facts and figures

- The age-adjusted death rate due to coronary heart disease is 137.10 and 137.9 deaths per 100,000 persons for Moniteau and Osage Counties, respectively, compared to rates of 123 and 105.7 deaths per 100,000 persons in the state and nation, respectively

- The Medicare population with a diagnosis of ischemic heart disease is 31.6% for Miller County, compared to state and national averages of 28.2% and 28.6%, respectively

- The Medicare population with a diagnosis of hyperlipidemia is 44.4% and 43.5% for Cole and Osage Counties, respectively, compared to state and national averages of 42.5% and 44.8%, respectively

- The Medicare population with a diagnosis of hypertension is 55.5% and 55.7% for Cole and Osage Counties, respectively, compared to state and national averages of 55.1% and 55.5%, respectively

- Counties mentioned were notably deficient out of the 4 counties included in the service area

Source: Healthy Communities Institute

Priority #1

Do you have a question about heart and vascular services at SSM Health?

Visit our website at **ssmhealthmidmo.com**

Strategic Implementation Plan
Heart Disease

Goals

The goals of SSM Health St. Mary's Hospital - Jefferson City include:

- Reduce the age-adjusted death rate due to heart disease in our region from 190.7 deaths per 100,000 persons, as reported in 2015, to 185 deaths per 100,000 persons in 2018 (MICA)

- Decrease percentage of all-cause/all-location congestive heart failure (CHF) 30-day hospital readmission rate from 24.22% in 2015 to 15.3% by 2018 (Epic)

Action plan

- Create heart failure clinic with Jefferson City Medical Group (JCMG)

- CHF nursing home collaboration: Visits to high-risk patients in nursing homes (Lutheran Senior Services and Stonebridge Communities)

- High-risk screening: Implement a high-risk screening criteria tool involving mortality and post-acute committees

- Transitional care coordination: Improve post-discharge care and coordination of support for patients

- Focus on and improve hemoglobin A1C testing within the SSM Health Medical Group, in an effort to keep diabetic patients' respective levels in control

- STEMI Center designation: SSM Health St. Mary's Hospital – Jefferson City has applied for STEMI Center designation and is currently awaiting certification review

- Stroke Center designation: SSM Health St. Mary's Hospital – Jefferson City will prepare to apply for Stroke Center designation by 2017

- Expand nutrition and dietary counseling services: Increase dietary counseling referrals from SSM Health Medical Group (primary care) to promote healthy diet in adults with BMI >30; provide dietician assistance to the Jefferson City YMCA; and provide sponsorship funding for Boys & Girls Club Triple Play program to provide nutrition counseling services

- Assessments and screenings: Continue community and or worksite risk assessments and screenings and education at least twice a year

- Provider education: Increase referrals to the Cole County Health Department for WISEWOMAN screenings by increasing provider education on eligibility and referrals to program

- Community education and awareness: Provide education on prevention and signs and symptoms awareness and implement at least one public awareness campaign such as "Know Your Numbers" or "Health Fest." In collaboration with the Jefferson City Chamber of Commerce's Partners in Education Program, refocus education outreach on cardiovascular disease prevention and awareness of risk factors. Develop Parish Nurse educational and support partnership focused on cardiovascular disease prevention and awareness of risk factors by 2017

- Support groups for patients and families to improve self-management of chronic disease: Cardiopulmonary, cardiac nutrition, diabetes, stroke survivor support groups and St. Mary's Mended Hearts

Community partners and supporting resources

- Jefferson City Medical Group
- Lutheran Senior Services and Stonebridge communities
- SSM Health Medical Group
- Cole County Health Department
- Boys & Girls Club of the Capital City
- Jefferson City Chamber of Commerce Partners in Education
- St. Mary's Mended Hearts
- Ministerial Alliance and Diocese of Jefferson City
- The American Heart Association

SSMHealth

Priority #2

Cancer is second only to heart disease as a leading cause of death in Cole, Miller, Moniteau and Osage Counties. The top five most common types of cancer in our region are breast, colon, lung, cervix and prostate. Specifically, breast cancer showed a significant increase of 14% in our region between 2008 – 2012.

There are a number of economic, environmental and lifestyle factors that contribute to this disparity, including agricultural processes that can potentially introduce harmful byproducts into the human system, which can lead to the development of cancer. The data also illustrates that use of tobacco products is significantly greater in our service area than most communities. While SSM Health St. Mary's Hospital - Jefferson City is not equipped to address all of these influencing factors, we are able to assist our community in providing cancer treatment options and promoting healthy lifestyle practices that are highly conducive to preventing the development of cancer. These include:

- Regular medical exams and screenings. By increasing the chances of discovering cancer early, the success rate of treating and ultimately overcoming a cancer diagnosis also increases

- Creation of a healthy diet and promoting physically active lifestyles

- The provision of smoking cessation programs

- Immunization to protect against viral infections that lead to the development of cancer

Additional facts and figures

- Cancer prevalence in the Medicare population averages 9.1% and 9.6% for Cole and Osage Counties, respectively, compared to averages of 7.9% and 7.9% in the state and nation, respectively

- The age-adjusted death rate due to lung cancer is 71.7 per 100,000 persons in Miller County, compared to rates of 57.5 and 48.4 deaths per 100,000 persons, in the state and nation, respectively

- The colorectal cancer incidence rate is 48.5 and 49.8 cases per 100,000 persons for Moniteau and Miller Counties, respectively, compared to rates of 45.6 and 43.3 cases per 100,000 persons in the state and nation, respectively

- Counties mentioned were notably deficient out of the 4 counties included in the service area

Do you have a question about oncology services at SSM Health?

Visit our website at ssmhealthmidmo.com

Source: Healthy Communities Institute

Strategic Implementation Plan
Cancer

Goals

The goals of SSM Health St. Mary's Hospital - Jefferson City include:

- Reduce the age-adjusted death rate due to cancer in our region from 178.4 deaths per 100,000 persons, as reported in 2015, to 175 deaths per 100,000 persons by 2018 (MICA)

- Increase percentage of stage 1 breast cancer initial diagnosis' from 20% (hospital 5-year 2010-2014 baseline average) to 25% by 2018 (SSM Health St. Mary's Hospital - Jefferson City Cancer Registrar)

- Increase percentage of stage 1 lung cancer initial diagnosis' from 20% (hospital 5-year 2010-2014 baseline average) to 25% by 2018 (SSM Health St. Mary's Hospital - Jefferson City Cancer Registrar)

Action plan

- Preventive mammograms: Increase referrals to Cole County Health Department for ShowMe Healthy Women program by implementing provider education for SSM Health Medical Group to increase awareness and referrals. St. Mary's Women's imaging center to provide flexible and easy scheduling and convenient hours of operations for screenings at least twice each year (i.e. Mammathon event). Increase the proportion of SSM Health Medical Group female patients 50-74 years of age who have had one or more mammograms performed during the measurement period of 24 months

- Patient and provider reminders: Maximize use of Epic health maintenance notifications to increase preventive screenings and kept appointments. Explore Epic reporting for health maintenance notifications for breast and lung cancer screenings that result in preventive screenings and kept appointments. Evaluate and monitor screening performance and referrals within SSM Health Medical Group and give feedback to clinic providers that can boost screening rates

- Low-dose CT scan for lung cancer screening program: Develop low-cost screening program in 2016

- St. Mary's Cancer Center at Jefferson City Medical Group (JCMG): Identify alternative funding to support implementation of a nurse navigator and introduce cancer wellness program model in Jefferson City

- Expand patient support services provided through Richard J. Wilson Cancer Resource Center: Increase access and enrollment in LiveStrong in partnership with the Jefferson City YMCA, and introduce "I Can Cope" patient support program in collaboration with JCMG and the American Cancer Society to provide one-on-one and group education and support

- Education/awareness: Increase reach of awareness/education offerings on risk factors and important preventative screenings for breast and lung cancer prevention, diagnosis and treatment. Implement cancer screening public service/awareness campaign and educational materials that align with cancer prevention months

Community partners and supporting resources

- Jefferson City Medical Group
- SSM Health Medical Group
- St. Mary's Cancer Center at JCMG

- Richard J. Wilson Cancer Resource Center
- Cole County Health Department

- American Cancer Society
- Jefferson City YMCA

SSM Health

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. Mary's Hospital - Jefferson City 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
Adolescent Health				
High School Graduation MAP	Current: 62.3 Target: 82.4 percent	62.3 / 82.4 Current Target	⬆	TARGET NOT MET

Contact us to learn more at 573-681-3000.