

SSM Health St. Mary's Hospital – St. Louis

6420 Clayton Rd. | St. Louis, MO 63117



2016-2018

Community Health Needs Assessment



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Message to Our Community



SSM Health St. Mary's Hospital – St. Louis has delivered exceptional, compassionate care to the St. Louis City and surrounding areas for many years. Inspired by our founding Franciscan Sisters of Mary and guided by our Mission – Through our exceptional health care services, we reveal the healing presence of God – we cherish the sacredness and dignity of each person as demonstrated through our Values of compassion, respect, excellence, stewardship and community.

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

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

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

- Diabetes
- High-Risk Pregnancy and Substance Abuse
- Access to Care

During this time, SSM Health St. Mary's Hospital – St. Louis will further develop its community partnerships and deliver an exceptional experience through high-quality, accessible and affordable care. Please visit our website at ssmhealth.com/stmarys 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 St. Louis together.

Sincerely,

A handwritten signature in blue ink that reads "Candace Jennings".

Candace Jennings

Region President, Hospital Operations - St. Louis

Interim President, SSM Health St. Mary's Hospital – St. Louis



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

Background

SSM Health St. Mary's Hospital – St. Louis 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 St. Louis Regional Board approved this CHNA on Nov. 23, 2015. SSM Health St. Mary's Hospital – St. Louis 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 – St. Louis held a meeting with local, regional, and corporate members to determine priorities for the 2016-2018 CHNA and strategic implementation plan. Priorities chosen included:

- **Diabetes:** Resources include the nursing director of medical acute care, diabetic educators and the nursing administration at SSM Health St. Mary's Hospital – St. Louis.
- **High-Risk Pregnancy/Substance Abuse:** Resources include the Project Connect grant, Women and Infants Substance Help (WISH) Clinic, the director of maternal and fetal outpatient services, Saint Louis University's research division for the department of obstetrics, gynecology and women's health, and Nurses for Newborns.
- **Access to Care:** Resources include the SSM Health Medical Group, St. Louis Integrated Health Network (IHN) and the lead referral coordinator and community referral coordinator for inpatients at SSM Health St. Mary's Hospital – St. Louis. Additional partners include Federally Qualified Health Centers (FQHC): Family Care Health Center, Myrtle Hilliard Davis Comprehensive Health Center, Grace Hill Neighborhood Health Centers and People's Health Centers, Inc.

Goals

Diabetes

- Decrease the age-adjusted death rate due to diabetes in St. Louis County from 16.5 deaths per 100,000 persons, as reported in 2015, to 15 deaths per 100,000 persons by 2018
- Increase the percentage of St. Louis Medicare patients screened for diabetes from 83.3%, as reported in 2015, to the state average of 86.6% by 2018
- Reduce the average hemoglobin A1C for patients seen in the SSM Health St. Mary's Hospital – St. Louis Internal Medicine Clinic from 10.1% in 2015 to 9.1% by 2018

High-Risk Pregnancy and Substance Abuse

- Reduce the percentage of preterm births in St. Louis County from 12.4% reported in 2015 to the Healthy People 2020 goal of 11.4% by 2018
- Reduce the length of stay for Women and Infants Substance Help (WISH) program neonates (high-risk neonate) from 14.88 days in 2015 to 13 days by 2018

Access to Care

- Decrease the number of preventable hospital stays in St. Louis County from 52 cases per 1,000 Medicare enrollees, as reported in 2015, to 45 cases per 1,000 Medicare enrollees by 2018
- Reduce overall readmission rate at SSM Health St. Mary's Hospital – St. Louis from 10.2% (Aug. YTD 2015) to 9.1% by 2018
- Improve overall Health Behaviors Ranking of St. Louis County from 7, as reported in 2015, to 6 by 2018



About SSM Health and SSM Health St. Mary's Hospital – St. Louis



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 – St. Louis

Highlight of services

SSM Health St. Mary's Hospital – St. Louis offers a comprehensive array of acute inpatient services, along with an ambulatory network consisting of urgent care, primary care and specialist providers.

Affiliated with SSM Health Cardinal Glennon Children's Hospital and partnered with SLUCare Physician Group, SSM Health St. Mary's Hospital – St. Louis is the most comprehensive mother-baby program in the region. The Family Birthplace at SSM Health St. Mary's is the regional hub for maternal services and high-risk obstetrics. SSM Health St. Mary's Hospital – St. Louis is fully equipped with a Level III Neonatal ICU, a perinatal center and a satellite location for the SSM Health Cardinal Glennon St. Louis Fetal Care Institute.

Community benefit

In 2014, SSM Health St. Mary's Hospital – St. Louis provided \$40.5 million in unreimbursed care and \$3.6 million in other community benefits for a total of over \$44.5 million.

Additional affiliations and partnerships

SSM Health St. Mary's Hospital – St. Louis is proud to be part of community projects that improve health outcomes in our community. Partners include:

- St. Louis University
- St. Louis Integrated Health Network

2014

Hospital at a Glance

Admissions: 18,554

Outpatient Visits: 143,511

ER Visits: 63,365

Births: 3,386

Beds: 527

Employees: 1,929

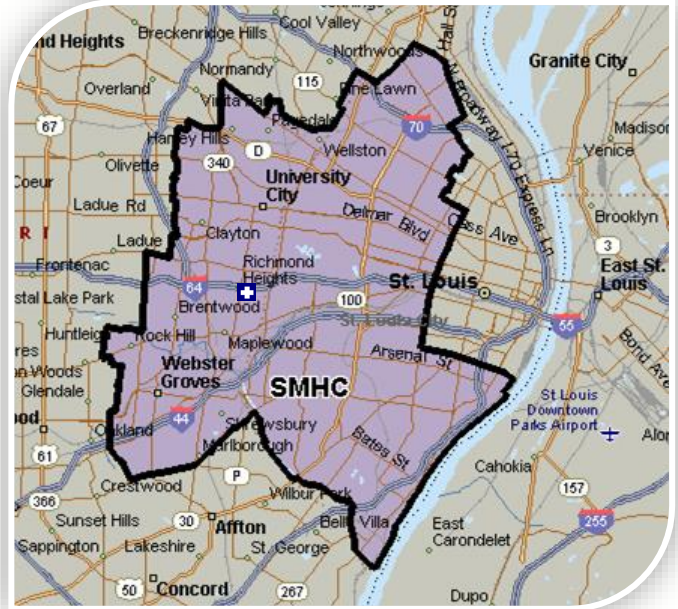
Medical Staff: 975+

Volunteers: 193

About our Community



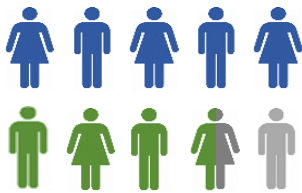
SSM Health St. Mary's Hospital - St. Louis is located in St. Louis, Mo. and defines its community as St. Louis City and adjacent municipalities within St. Louis County. In 2015, this service area had an estimated population of 356,207 people. The following pages of information include demographic and health indicator statistics specific to this community.



SSM Health St. Mary's Hospital - St. Louis

Our community by the numbers

Race/Ethnicity



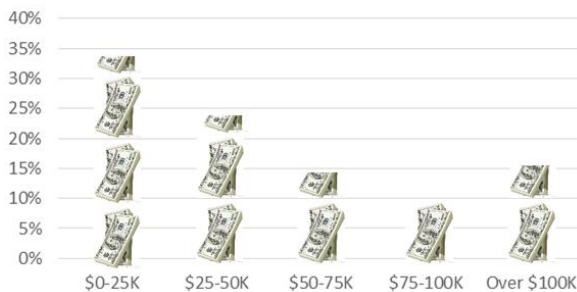
54.3% White/Non-Hispanic
 35.0% African American/Non-Hispanic
 4.0% Hispanic
 6.7% All Others

Education Levels

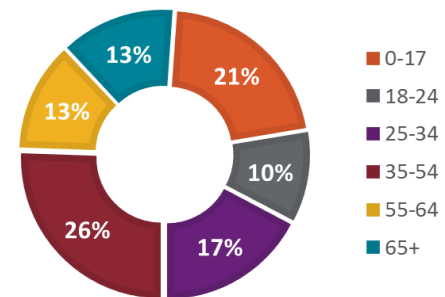


13.8% No High School Degree
 21.3% High School Degree
 27.0% Some College/Associates Degree
 37.9% Bachelor's Degree or Greater

Income Levels



Age Groups



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

	<p>Cancer</p> <p>The age-adjusted death rate due to cancer is 22% greater than the national average. Areas of specific concern include breast, colorectal, lung/bronchus, prostate and oral cancers</p>		<p>Poverty</p> <p>The poverty rates associated with individuals, families, children, seniors and the disabled are generally at least 2x greater than the national average</p>
<p>Sexually Transmitted Infections</p> <p>The prevalence of syphilis, chlamydia and gonorrhea are significantly above both state and national averages</p>		<p>Transportation</p> <p>The percentage of households without a vehicle is 15% above the state average</p>	
	<p>Diabetes</p> <p>While the percentage of individuals with diabetes is close to the national average, the age-adjusted death rate associated with diabetes in St. Louis is 12% higher than the national average</p>		<p>Access to Primary Care</p> <p>The number of primary care physicians per 100,000 persons living within the city is notably better than the state average</p>
<p>Exercise Opportunities</p> <p>98.3% of St. Louis residents reported having access to exercise opportunities, which is 22% higher than the state average</p>		<p>Newborn Health</p> <p>Infant mortality rates along with the number of babies born pre-term and/or significantly below average weight are notably above both state and national averages</p>	
	<p>Drug Poisoning</p> <p>The death rate associated with drug poisoning in St. Louis is significantly greater than the state average</p>		<p>Heart Disease</p> <p>The age-adjusted death rate due to heart disease in St. Louis is significantly above both state and national rates</p>

The Health Needs of Our Community



Voice of the community

SSM Health St. Mary's Hospital – St. Louis conducted a focus group that represented the broad interest and diversity of mid-St. Louis County and St. Louis City. This included representatives from St. Louis County and St. Louis City Health Departments (see appendix page 21).

Participants were asked to identify the primary health issues affecting the constituents which they represent. After exhausting individual concerns, the focus was shifted towards issues identified in the 2012 CHNA cycle. Items not previously discussed were re-evaluated by the participants. After all discussion had concluded, a survey inclusive of all topics discussed was distributed. Participants were asked to score each health issue in terms of their perception of its importance and the ability of SSM Health St. Mary's Hospital – St. Louis to make a significant impact. The results were collected, analyzed and reviewed by senior hospital leadership prior to identifying the top priorities to be addressed.

Issues identified and discussed include:

- Diabetes
- High-risk pregnancy
- Access to care
- Price/quality transparency
- Trauma/stress informed care
- Cardiovascular disease
- Sexually transmitted diseases
- Pediatric neglect/abuse
- ED visits and capacity constraints
- Continuity of care
- Cancer
- Access to dental care
- Tobacco use
- Cerebrovascular disease
- Obesity

Key priorities



Diabetes

Diabetes was a significant issue expressed in the community feedback and was verified by data research.

Diabetes is a leading cause of death in the US. This disease can have harmful effects on most organ systems in the human body. The disease disproportionately affects minority populations, in addition to the elderly. Its incidence is likely to increase as minority populations grow and the US population ages.



High - Risk Pregnancy

High-risk pregnancy, attributed to substance abuse, was a common issue among participant feedback and was verified by data research.

Perinatal substance abuse is associated with serious negative maternal and neonatal outcomes. SSM Health St. Mary's Hospital – St. Louis has the only substance abuse treatment program focusing on maternal patients in the St. Louis region. However, the need is great and additional support is needed.



Access to Care

Access to care was discussed at length and while the data appears to indicate that provider access is adequate, the public perception indicated otherwise.

At its heart, the entire CHNA process is about improving access to care. The initiative was developed as part of the health care reform movement, in order to hold health care entities accountable for ensuring the communities which they serve are able to access the care they need.

Diabetes is a leading cause of death in the US and can have a harmful effect on most of the organ systems in the human body. It is a frequent cause of end-stage renal disease, non-traumatic lower-extremity amputation and a leading cause of blindness. Individuals with diabetes are also at increased risk for ischemic heart disease, neuropathy and stroke. The disease disproportionately affects minority populations, in addition to the elderly. Its incidence is likely to increase as minority populations grow and the US population ages.

Diabetes can be treated and managed by healthy eating, regular physical activity and medications to lower blood-glucose levels. Patient education and self-care practices also are important aspects of disease management that help people with diabetes stay healthy. By working together, people diagnosed with diabetes, their support network and their health care providers can reduce the prevalence of diabetes and related complications.

The SSM Health St. Mary's Hospital – St. Louis Diabetes Education Program is designed to provide education to individuals living with diabetes. The qualified educators on staff provide guidance to diabetic patients in an effort to encourage healthy lifestyle behaviors and disease management.

Additional facts and figures

- An estimated 27.8% of people living with diabetes are undiagnosed ¹
- African Americans are 1.7 times as likely to develop diabetes as whites ¹
- Death rates for African Americans with diabetes are 27% higher than for Caucasians ¹
- 13.6% of men and 11.2% of women have diabetes ¹
- The direct medical expenditures attributable to diabetes in 2012 exceeded \$116 billion ¹
- 30.1% of the St. Louis Medicare population is affected by diabetes, which is greater than the state rate of 26.1% ²
- While the prevalence of diabetes is somewhat close to the state average, the age-adjusted death rate due to diabetes in St. Louis is 32.8 deaths per 100,000 persons, compared to the state rate of 20.3 deaths per 100,000 persons ²

Sources: ¹Centers for Disease Control and Prevention. ²Healthy Communities Institute

Priority
#1



For information about our diabetes education program, visit our website at ssmhealth.com/stmarys.

High-Risk Pregnancy and Substance Abuse



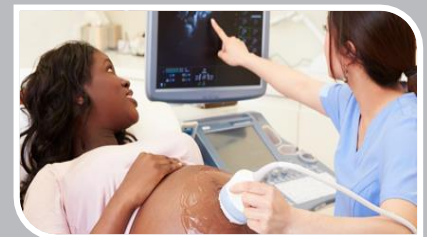
Substance abuse among pregnant women is a significant problem in St. Louis, Mo. Opioid use, such as heroin, during pregnancy is extremely detrimental both to mothers and their infants. Babies born to heroin-addicted moms are typically affected by neonatal abstinence syndrome (NAS), which is characterized by central nervous system hyperirritability and autonomic nervous system dysfunction. Other problems include birth defects, placental abruption, premature birth, low birthweight and sudden infant death syndrome. Pregnancy can be a window of opportunity to approach and intervene with substance-using women.

SSM Health St. Mary's Hospital – St. Louis has the only substance abuse treatment program focusing on maternal patients in the St. Louis region. A review of primary, secondary and tertiary diagnosis in maternal patients seen in the Maternal and Fetal Care Center at St. Mary's Health Center shows that 11.6% of maternal patients are included in this category. Based on the 2014 delivery data, it is estimated that SSM Health treats 392 opioid-abusing maternal patients annually at St. Mary's, and 885 across the St. Louis network (sample consisted of 3,386 deliveries at SSM Health St. Mary's Hospital – St. Louis and 7,632 deliveries across the SSM Health St. Louis network).

Additional facts and figures

- The national average for maternal patients abusing opioids is 5.5% ¹
- Of 1.1 million pregnant women enrolled in Medicaid nationally, nearly 23% filled an opioid prescription in 2007, up from 18.5 percent in 2000, according to a study published in the journal *Obstetrics & Gynecology* ²
- In Feb. 2015, a study of 500,000 privately insured women found that 14% were dispensed opioid painkillers at least once during pregnancy according to Dr. Brian T. Bateman, an anesthesiologist at Massachusetts General Hospital ³
- 15.1% of births in St. Louis are preterm, which is greater than both state and national rates of 8% (state is consistent with national average) ⁴
- The St. Louis infant mortality rate is reported as 11.2 deaths per 1,000 live births, which is greater than state rate of 7.3 deaths per 1,000 live births ⁴
- 24% of St. Louis mothers do not seek early prenatal care ⁴

Priority
#2



For information about our Women and Infants Substance Help (WISH) program, visit our website at ssmhealth.com/stmarys.

Source: ¹March of Dimes. ²*Obstetrics and Gynecology* 2014, Issue 5.

³Anesthesiology, May 2014. ⁴Healthy Communities Institute

Access to Care



Priority #3

At its heart, the entire Community Health Needs Assessment process is about improving access to care. The initiative was developed as part of the health care reform movement, in order to hold health care entities accountable for ensuring the communities which they serve are able to access the care they need.

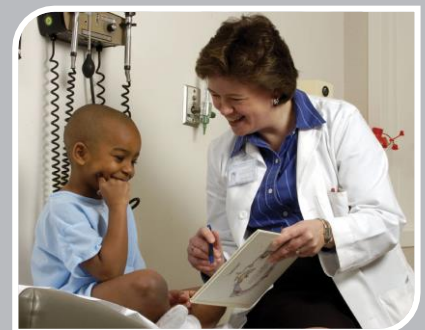
SSM Health realizes that each community has unique barriers to care that in some cases go beyond the supply of physicians available to serve their associated populations. These barriers include, but are not limited to:

- Health literacy or the ability of persons within the community to comprehend the health care services available to them
- Inadequate insurance coverage, affordability of services and transportation issues
- The ability of persons within the community to understand the importance of regular health assessments with medical providers

In addition to the significant investment of primary care and specialty providers within the St. Louis region, SSM Health and the SSM Health Medical Group are continuously developing initiatives to increase the convenience, access, value and quality of our services available to the communities we serve.

Additional facts and figures

- 21.9% of adults in St. Louis do not have insurance, which is higher than both state and national uninsured rates of 18.5% and 20.3%, respectively ¹
- 27.4% of the St. Louis population are living below the poverty level, which is almost double both state and national rates ¹
- 41.5% of children in St. Louis are reported as living below the poverty level, which is almost double both state and national rates ¹
- In May 2012, the Centers for Disease Control and Prevention (CDC) cited a National Health Interview Survey (NHIS) report that found almost 80% of adults who visited emergency departments over a 12-month period reported doing so because of a lack of access to other health care providers ²
- In 2014, the CDC cited a NHIS report which found 5.3% of the US population failed to obtain necessary medical care due to cost ²
- 7% of families in the US who live below the poverty threshold are unable to obtain or delayed obtaining necessary medical care ²



For information about our providers, visit our website at ssmhealth.com/stmarys.

Source: ¹Healthy Communities Institute, ²Centers for Disease Control and Prevention

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 – St. Louis 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 <small>MAP</small>	Current: 78.1 percent Target: 100.0	78.1 100.0 Current Target	↔	TARGET NOT MET
Children with Health Insurance <small>MAP</small>	Current: 93.4 percent Target: 100.0	93.4 100.0 Current Target	↔	TARGET NOT MET
Adolescent Health				
High School Graduation <small>MAP</small>	Current: 62.3 percent Target: 82.4	62.3 82.4 Current Target	↑	TARGET NOT MET

SSM Health St. Mary's Hospital – St. Louis

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2016-2018

Appendices

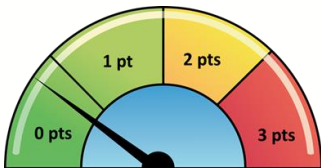


Additional demographic information

DEMOGRAPHIC CHARACTERISTICS											
		Selected Area		USA							
								2015	2020	% Change	
2010 Total Population		359,727		308,745,538		Total Male Population		171,389	171,395	0.0%	
2015 Total Population		356,207		319,459,991		Total Female Population		184,818	183,533	-0.7%	
2020 Total Population		354,928		330,689,365		Females, Child Bearing Age (15-44)		80,064	76,383	-4.6%	
% Change 2015 - 2020		-0.4%		3.5%							
Average Household Income		\$60,643		\$74,165							
POPULATION DISTRIBUTION						HOUSEHOLD INCOME DISTRIBUTION					
Age Distribution						Income Distribution					
Age Group		2015	% of Total	2020	% of Total	USA 2015	2015 Household Income		HH Count	% of Total	USA
						% of Total				% of Total	% of Total
0-14		63,547	17.8%	64,741	18.2%	19.1%	<\$15K	33,691	21.1%	12.7%	
15-17		12,148	3.4%	12,406	3.5%	4.0%	\$15-25K	20,782	13.0%	10.8%	
18-24		36,957	10.4%	33,598	9.5%	9.9%	\$25-50K	39,536	24.7%	23.9%	
25-34		61,499	17.3%	54,576	15.4%	13.3%	\$50-75K	24,227	15.1%	17.8%	
35-54		90,991	25.5%	91,745	25.8%	26.3%	\$75-100K	15,589	9.7%	12.0%	
55-64		44,520	12.5%	43,818	12.3%	12.7%	Over \$100K	26,110	16.3%	22.8%	
65+		46,545	13.1%	54,044	15.2%	14.7%					
Total		356,207	100.0%	354,928	100.0%	100.0%	Total	159,935	100.0%	100.0%	
EDUCATION LEVEL						RACE/ETHNICITY					
Education Level Distribution						Race/Ethnicity Distribution					
2015 Adult Education Level		Pop Age 25+		USA		Race/Ethnicity		2015 Pop		USA	
			% of Total		% of Total				% of Total		% of Total
Less than High School		11,019		4.5%		White Non-Hispanic		193,269		54.3%	
Some High School		22,578		9.3%		Black Non-Hispanic		124,816		35.0%	
High School Degree		51,953		21.3%		Hispanic		14,197		4.0%	
Some College/Assoc. Degree		65,657		27.0%		Asian & Pacific Is. Non-Hispanic		14,126		4.0%	
Bachelor's Degree or Greater		92,348		37.9%		All Others		9,799		2.8%	
Total		243,555		100.0%		Total		356,207		100.0%	

Source: Truven Health Analytics 2015

Healthy Communities Institute scorecard – St. Louis City

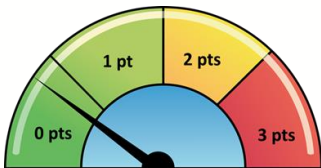


- SSM Health St. Mary’s Hospital – St. Louis is pleased to make this source of community health and population data available to our community. We invite community organizations, planners, policy makers, educational institutions and residents to use this site as a tool to understand and track community 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	Asthma: Medicare Population	percent	7.4	4.6	4.9	
2.83	Chronic Kidney Disease: Medicare Population	percent	21.7	15.4	15.5	
2.83	Depression: Medicare Population	percent	21.6	18.6	15.4	
2.83	Diabetes: Medicare Population	percent	30.1	26.1	27	
2.83	Homeownership	percent	35.7	59.5	56.9	
2.78	Age-Adjusted Death Rate due to Breast Cancer	deaths/100,000 females	27.9	23.8	22.2	20.7
2.78	Age-Adjusted Death Rate due to Cancer	deaths/100,000 population	224	185.9	173.8	161.4
2.78	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/100,000 population	22.8	17.1	15.9	14.5
2.61	Age-Adjusted Death Rate due to Lung Cancer	deaths/100,000 population	66.6	57.7	48.4	45.5
2.61	Children Living Below Poverty Level	percent	41.5	21.6	21.6	
2.61	Colorectal Cancer Incidence Rate	cases/100,000 population	51.6	45.6	43.3	38.6
2.61	Families Living Below Poverty Level	percent	22.1	11.1	11.3	
2.61	Households with Cash Public Assistance Income	percent	3.7	2.5	2.8	
2.61	Households without a Vehicle	percent	22.1	7.3	9.1	
2.61	People 65+ Living Alone	percent	41.7	28.3	27	
2.61	People Living 200% Above Poverty Level	percent	50.8	64.7	65.8	
2.61	People Living Below Poverty Level	percent	27.4	15.5	15.4	
2.61	Syphilis Incidence Rate	cases/100,000 population	18.9	4.2	5.5	
2.61	Young Children Living Below Poverty Level	percent	41.5	26	24.7	
2.53	Adults who Drink Excessively	percent	23.1	17		25.4
2.53	Babies with Very Low Birth Weight	percent	2.5	1.4	1.4	1.4
2.5	Age-Adjusted Death Rate due to Unintentional Injuries	deaths/100,000 population	53.8	48.4	39.2	36.4
2.5	All Cancer Incidence Rate	cases/100,000 population	490.2	456.9	459.8	
2.5	Food Insecurity Rate	percent	25.8	17	15.8	
2.5	Gonorrhea Incidence Rate	cases/100,000 population	551.3	125.3	106.1	
2.5	Prostate Cancer Incidence Rate	cases/100,000 males	146.7	121.8	142.3	
2.44	Lung and Bronchus Cancer Incidence Rate	cases/100,000 population	88.2	76.1	64.9	
2.44	Renters Spending 30% or More of Household Income on Rent	percent	55.3	49.4	52.3	
2.42	Cervical Cancer Incidence Rate	cases/100,000 females	11.3	8.1	7.8	7.1
2.42	High School Graduation	percent	62.3	86	80	82.4
2.39	Chlamydia Incidence Rate	cases/100,000 population	1297.4	453.8	446.6	
2.39	Heart Failure: Medicare Population	percent	18	14.3	14.6	
2.39	Median Household Income	dollars	34582	47380	53046	
2.39	People 65+ Living Below Poverty Level	percent	17.4	8.9	9.4	
2.39	Stroke: Medicare Population	percent	4.2	3.8	3.8	
2.36	Adults who Smoke	percent	27	22.6		12
2.36	Age-Adjusted Death Rate due to Kidney Disease	deaths/100,000 population	21	17.9	13.3	
2.36	Persons with Disability Living in Poverty	percent	40.2	30.1	28.2	
2.33	Unemployed Workers in Civilian Labor Force	percent	7.3	6.1	5.6	
2.31	Babies with Low Birth Weight	percent	12.1	8	8	7.8
2.31	Preterm Births	percent	15.1	11.5	11.4	11.4
2.25	Adults with Current Asthma	percent	11.7	10.1	9.1	
2.25	Age-Adjusted Death Rate due to Diabetes	deaths/100,000 population	32.8	20.3	21.3	
2.25	Death Rate due to Drug Poisoning	deaths/100,000 population	22.4	14.4		

Source: Healthy Communities Institute

Healthy Communities Institute scorecard – St. Louis City (continued)

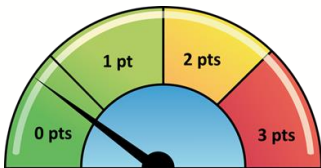


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- Indicators below are pre-sorted in order of decreasing severity
- Indicator HCI score correlates with severity gauge pictured
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HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
2.31	Preterm Births	percent	15.1	11.5	11.4	11.4
2.25	Adults with Current Asthma	percent	11.7	10.1	9.1	
2.25	Age-Adjusted Death Rate due to Diabetes	deaths/100,000 population	32.8	20.3	21.3	
2.25	Death Rate due to Drug Poisoning	deaths/100,000 population	22.4	14.4		
2.25	Food Environment Index	(blank)	5	7		
2.25	Premature Death	years/100,000 population	11146	7714		
2.25	Severe Housing Problems	percent	23.2	14.2		
2.25	Students Eligible for the Free Lunch Program	percent	66.8	38		
2.19	Oral Cavity and Pharynx Cancer Incidence Rate	cases/100,000 population	13.4	11.5	11.2	
2.19	Poor Mental Health Days	days	4.5	3.8		
2.17	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/100,000 population	149.1	123	105.7	103.4
2.17	Alzheimer’s Disease or Dementia: Medicare Population	percent	11	9.7	9.8	
2.17	Child Food Insecurity Rate	percent	24.6	21.6	21.4	
2.17	Houses Built Prior to 1950	percent	64.8	20	18.9	
2.17	Single-Parent Households	percent	61.6	33.6	33.3	
2.08	Adults with Diabetes	percent	12.4	10.7		
2.08	Age-Adjusted Death Rate due to Prostate Cancer	deaths/100,000 males	31	20.7	22.3	21.8
2.08	High Blood Pressure Prevalence	percent	35.7	32.6	30.8	26.9
2.08	Mammography Screening: Medicare Population	percent	57	62		
2.08	Student-to-Teacher Ratio	students/teacher	15.8	14.3		
2.06	Infant Mortality Rate	deaths/1,000 live births	11.2	7.3		6
2.06	Life Expectancy for Females	years	77	79.6	80.8	
2.06	Mothers who Received Early Prenatal Care	percent	76	77.9		77.9
2	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)	deaths/100,000 population	47	42.1	37	34.8
2	Fast Food Restaurant Density	restaurants/1,000 population	0.9			
1.97	Teen Birth Rate	live births/1,000 females aged 15-19	46.6	30	26.5	
1.94	Breast Cancer Incidence Rate	cases/100,000 females	124.1	122.6	122.7	
1.89	Adults with Health Insurance	percent	78.1	81.5	79.7	100
1.89	Hypertension: Medicare Population	percent	58.2	55.1	55.5	
1.86	Annual Ozone Air Quality	(blank)	5			
1.83	Age-Adjusted Death Rate due to HIV	deaths/100,000 population	4.3	1.2	2.2	3.3
1.83	Life Expectancy for Males	years	69.7	74.6	76.1	
1.83	Rheumatoid Arthritis or Osteoarthritis: Medicare Population	percent	30.2	30.9	29	
1.81	Adults who are Obese	percent	31.1	30	27.8	30.5
1.81	Self-Reported General Health Assessment: Poor or Fair	percent	18.2	16		
1.75	Age-Adjusted Death Rate due to Influenza and Pneumonia	deaths/100,000 population	20.1	17.6	15.4	
1.75	Health Behaviors Ranking	(blank)	112			
1.75	Morbidity Ranking	(blank)	107			
1.75	Mortality Ranking	(blank)	106			
1.75	Physical Environment Ranking	(blank)	103			
1.75	Social and Economic Factors Ranking	(blank)	114			
1.67	Chlamydia Incidence Rate: Females 15-19	cases/100,000 females aged 15-19	11362.2	3607		
1.67	COPD: Medicare Population	percent	12.2	13.1	11.3	

Source: Healthy Communities Institute

Healthy Communities Institute scorecard – St. Louis City (continued)

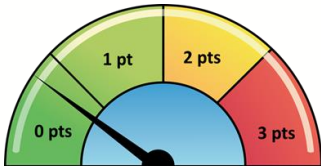


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HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
1.67	Violent Crime Rate	crimes/100,000 population	1885.3	452		
1.64	Annual Particle Pollution	(blank)	2			
1.64	Diabetic Screening: Medicare Population	percent	83.3	86		
1.64	Poor Physical Health Days	days	4	3.7		
1.61	Cancer: Medicare Population	percent	7.6	7.9	7.9	
1.58	Voter Turnout	percent	61.7	66	61.8	
1.5	Adult Fruit and Vegetable Consumption	percent	12.2	12.5		
1.5	Colon Cancer Screening	percent	66.3	66.6		
1.5	People 25+ with a High School Degree or Higher	percent	82.9	87.6	86	
1.47	Farmers Market Density	markets/1,000 population	0		0	
1.42	Alcohol-Impaired Driving Deaths	percent	32.7	34.6		
1.42	Clinical Care Ranking	(blank)	34			
1.42	Dentist Rate	dentists/100,000 population	44	52		
1.39	Liquor Store Density	stores/100,000 population	7.5	6.4	10.4	
1.39	PBT Released	pounds	3691			
1.39	Recognized Carcinogens Released into Air	pounds	43541			
1.33	High Cholesterol Prevalence: Adults 35+	percent	41.2	42.9		
1.33	Low-Income and Low Access to a Grocery Store	percent	4.7			
1.33	Mean Travel Time to Work	minutes	23.9	23.1	25.5	
1.33	Osteoporosis: Medicare Population	percent	5.6	6.1	6.4	
1.33	Per Capita Income	dollars	23048	25649	28155	
1.31	Mothers who Smoked During Pregnancy	percent	14	17.5	8.5	1.4
1.25	Adults who are Overweight	percent	32.5	34.3	35.7	
1.25	Preventable Hospital Stays	discharges/1,000 Medicare enrollees	67	65		
1.22	Low-Income Preschool Obesity	percent	13.2			
1.17	Households with No Car and Low Access to a Grocery Store	percent	1.9			
1.17	Hyperlipidemia: Medicare Population	percent	38.1	42.5	44.8	
1.17	Pap Test History	percent	78.6	74.9		
1.14	Age-Adjusted Death Rate due to Suicide	deaths/100,000 population	12.1	15.3	12.5	10.2
1.14	Children with Health Insurance	percent	93.4	92.9		100
1.08	Social Associations	membership associations/10,000 population	14.2	11.9		
1.08	Solo Drivers with a Long Commute	percent	25.3	30.1		
1.06	SNAP Certified Stores	stores/1,000 population	1.1			
1	Adults who are Sedentary	percent	25.2			32.6
1	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/100,000 population	45.2	51.7	42.1	
1	Children with Low Access to a Grocery Store	percent	2			
1	People 65+ with Low Access to a Grocery Store	percent	1.1			
1	Workers who Drive Alone to Work	percent	71.1	81.5	76.3	

Source: Healthy Communities Institute

Healthy Communities Institute scorecard – St. Louis City (continued)



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HCI Score	Indicator	Units	County Value	State Value	National Value	HP2020 Value
0.83	Age-Adjusted Death Rate due to Alzheimer’s Disease	deaths/100,000 population	19.7	26.9	24	
0.75	Access to Exercise Opportunities	percent	98.3	77.5		
0.75	Age-Adjusted Death Rate due to Falls	deaths/100,000 population	6.8	9	8.3	7.2
0.75	Non-Physician Primary Care Provider Rate	providers/100,000 population	128	59		
0.75	Primary Care Provider Rate	providers/100,000 population	80	69		
0.67	Grocery Store Density	stores/1,000 population	0.4			
0.67	Ischemic Heart Disease: Medicare Population	percent	26.1	28.2	28.6	
0.61	Atrial Fibrillation: Medicare Population	percent	5.9	7.8	7.8	
0.58	Child Abuse Rate	cases/1,000 children	3.3	4.4	9.1	8.5
0.47	Age-Adjusted Death Rate due to Motor Vehicle Traffic Collisions	deaths/100,000 population	9.5	13.2	10.7	12.4
0.44	Workers Commuting by Public Transportation	percent	9.8	1.5	5	5.5
0.42	Recreation and Fitness Facilities	facilities/1,000 population	0.1		0.1	
0.33	People 25+ with a Bachelor’s Degree or Higher	percent	29.6	26.2	28.8	
0.22	Workers who Walk to Work	percent	4.3	2	2.8	3.1

Source: Healthy Communities Institute

The tax year the hospital last conducted a needs assessment

SSM Health St. Mary's Hospital – St. Louis 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 – St. Louis held a meeting with local, regional, and corporate members to determine priorities for the 2016-2018 CHNA and strategic implementation plan. Priorities chosen included:

- **Diabetes:** Resources include the nursing director of medical acute care, diabetic educators and the nursing administration at SSM Health St. Mary's Hospital – St. Louis.
- **High-Risk Pregnancy/Substance Abuse:** Resources include the Project Connect grant, Women and Infants Substance Help (WISH) Clinic, the director of maternal and fetal outpatient services, Saint Louis University's research division for the department of obstetrics, gynecology and women's health, and Nurses for Newborns.
- **Access to Care:** Resources include the SSM Health Medical Group, St. Louis Integrated Health Network (IHN) and the lead referral coordinator and community referral coordinator for inpatients at SSM Health St. Mary's Hospital – St. Louis. Additional partners include Federally Qualified Health Centers (FQHC): Family Care Health Center, Myrtle Hilliard Davis Comprehensive Health Center, Grace Hill Neighborhood Health Centers and People's Health Centers, Inc.

How the data was obtained

In Sept. 2015, SSM Health St. Mary's Hospital – St. Louis conducted a focus group that represented the broad interest and diversity of mid-St. Louis County and St. Louis City. This included representatives from the St. Louis County and St. Louis City Health Departments. In total, the hospital had 15 representatives who participated in the discussion. Participants were asked to identify the primary health issues affecting the constituents which they represent. After exhausting individual concerns, the focus was shifted towards topics of concern identified in the 2012 CHNA cycle. Items not previously discussed were re-evaluated by the participants. After all discussion had concluded, a survey inclusive of all topics discussed was distributed. Participants were asked to score each health issue in terms of their perception of its importance and the ability of SSM Health St. Mary's Hospital – St. Louis to make a significant impact. The results were collected, analyzed and reviewed by senior hospital leadership, prior to identifying the top priorities to be addressed.

Health indicator 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.

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

The Mission of SSM Health is to continue the healing ministry of Jesus Christ by providing regional, cost-effective, high-quality health services for everyone with a special concern for the poor and vulnerable. The strongest cultural influences ensuring constancy of purpose and goal achievement are reflected in our Mission, Vision and Values.

Toward that end and 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 – St. Louis acknowledges the populations for which disparities exist and the unique burdens associated with their demographic status.

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

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

- Health issues that impact a significant portion of the population, or for which disparities exist and which put a greater burden on some population groups
- Poor rankings for health issues within the service area as compared to other counties, state average, national average or Healthy People 2020 national health goals
- Health issues for which trends are worsening

The SSM Health St. Mary's Hospital – St. Louis campus executive team also considered indicators that relate to problems which public health departments have already identified through their own assessments, such as mental illness/substance abuse, access to care, diabetes, obesity, sexually transmitted diseases, cardiovascular disease, domestic violence, high-risk pregnancy, cancer, dental care, respiratory disease, tobacco use and chronic kidney disease.

In addition, SSM Health St. Mary's Hospital – St. Louis examined "social determinants of health," or factors in the community that can either contribute to poor health outcomes or support a healthy community. This data is available on our website ssmhealth.com and in the County Health Rankings report for St. Louis City and St. Louis County.

The process for consulting with persons representing the community's interests

SSM Health St. Mary's Hospital – St. Louis sought input from community stakeholders who represent the broad interest and diversity of mid-St. Louis County and St. Louis City, including representatives from the St. Louis County and St. Louis City Health Departments. Participants were invited to the aforementioned focus group session, where discussion was centered around top areas of existing health concerns.

Persons representing the community with whom the hospital consulted

SSM Health St. Mary's Hospital – St. Louis benefited from input derived through consultation of numerous community leaders representing diverse constituencies. The leaders associated with community feedback are listed with their affiliations below. Additionally, SSM Health St. Mary's Hospital – St. Louis 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)
9/2/2015	Focus Group	Director of Consulting Practice, SLUCOR	SLU/Little Flower	Eric Armbrrecht
	Focus Group	Lead Referral Coordinator	St. Louis Integrated Health Network	Karen Bradshaw
	Focus Group	City Manager at City of Richmond Heights	City of Richmond Heights	Amy Hamilton
	Focus Group	Community Advocate	YWCA of Metropolitan St. Louis	Kathleen Hanrahan
	Focus Group	Chief	Richmond Heights Fire Dept.	Kerry Hogan
	Focus Group	Strategic Manager	Family Health Care Centers	Lynn Kersting
	Focus Group	Department of Obstetrics, Gynecology and Women's Health	Saint Louis University	Dr. Katherine Mathews
	Focus Group	Director/Commissioner of Health	St. Louis City Department of Health	Melba Moore
	Focus Group	Rev	New Horizon Seven Day Christian Church	Rev. B.T Rice
	Focus Group	Director	Casa de Salud	Jorge Rioperde
	Focus Group	Development Coordinator	Casa de Salud	Seiko Shastri
	Focus Group	Division Director, Health Promotion and Public Health Research	St. Louis County Department of Health	Spring Schmidt
	Focus Group	Chief Nursing Officer	Nurses for Newborns	Ron Tompkins
	Focus Group	Director of Student Services	MRH School District	Vince Estrada
Focus Group	Executive Director	Places for People	Joe Yancey	

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

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

Needs the hospital will not address and the reasons

Because SSM Health St. Mary's Hospital – St. Louis has limited resources, not every health indicator which has an identified need for improvement could be addressed. Those community needs identified but not “prioritized” for improvement included the following:

- Continuity of care: The hospital is already facilitating transitions in care for the congestive heart failure and chronic obstructive pulmonary disease populations through the use of transitional care nurse navigators. Although this was not chosen as a “top” priority, it will be included throughout in the access to care component of the strategic implementation plan.
 - Price/quality transparency: The hospital currently publishes quality data publically. SSM Health efforts are in progress to identify and publish pricing information for health services.
 - Trauma/stress informed care: The hospital is not a trauma center. The hospital does provide emotional and psychosocial support to patients with traumatic illness seen in the emergency department.
 - Obesity: While the hospital does not have resources to focus on obesity as a community goal, the disease is managed through individual disease-based programs.
 - Cardiovascular disease: The hospital continues to provide care related to cardiovascular disease. Care is provided across the continuum from identification and risk reduction to clinical management.
 - Sexually transmitted diseases: The hospital does not have resources to focus on reduction of sexually transmitted diseases in the community. Additionally, as a Catholic health system, SSM Health is bound by certain Ethical and Religious Directives (ERD's) that limit the extent to which this initiative can be pursued effectively. The hospital does provide screening and treatment for those presenting to the emergency department and perinatal services.
 - Violence (primarily against women): The hospital currently provides training for Sexual Assault Nurse Examiners (SANE) in the emergency department. The hospital further partners with the WYCA in efforts to reduce domestic violence.
 - Pediatric neglect/abuse: The hospital identifies pediatric abuse and neglect during episodes of care and collaborates with SSM Health Cardinal Glennon Children's Hospital for resources and management of pediatric neglect and abuse.
 - Emergency department visits/capacity: The hospital recognizes and is working to improve the capacity challenges in the emergency department. Through partnership with the Integrated Health Network, patient access to primary care is being facilitated.
 - High-risk pregnancy and c-sections: As a high-risk obstetrical center, the hospital provides service across the maternal and fetal continuum of care. This will be addressed as a sub-component of high-risk pregnancy and substance abuse.
 - Cancer: The hospital currently provides numerous oncology services through SSM Cancer Care.
 - Dental: The hospital does not employ resources necessary to implement a dental program.
 - Tobacco use: SSM Health is committed to a tobacco free environment. As such, the hospital provides education on smoking cessation.
 - Cerebrovascular disease: The hospital is designated as a primary stroke center and provides care to patients having experienced a stroke, including medical care and education. Although this was not chosen as a “top” priority, it will be addressed in the access to care component of the strategic implementation plan.
-



Other hospital facilities who participated in SSM Health St. Mary’s Hospital – St. Louis CHNA process

While SSM St. Mary’s Hospital - St. Louis conducted its CHNA process independently, the hospital will continue to partner with other SSM Health St. Louis hospitals to address identified needs.

How SSM Health St. Mary’s Hospital – St. Louis makes its needs assessment widely available to the public

SSM Health St. Mary’s Hospital – St. Louis 2016 CHNA is available online at ssmhealth.com/system. See section on “Going Forward” for more information.

SSM Health St. Mary's Hospital – St. Louis

6420 Clayton Rd. | St. Louis, MO 63117



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



The SSM Health St. Mary's Hospital – St. Louis 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 St. Louis City and St. Louis County.

Priority #1 Diabetes

Priority #2 High-Risk Pregnancy and Substance Abuse

Priority #3 Access to Care



Diabetes



Priority
#1



For information about our diabetes education program, visit our website at ssmhealth.com/stmarys.

Diabetes is a leading cause of death in the US and can have a harmful effect on most of the organ systems in the human body. It is a frequent cause of end-stage renal disease, non-traumatic lower-extremity amputation and a leading cause of blindness. Individuals with diabetes are also at increased risk for ischemic heart disease, neuropathy and stroke. The disease disproportionately affects minority populations, in addition to the elderly. Its incidence is likely to increase as minority populations grow and the US population ages.

Diabetes can be treated and managed by healthy eating, regular physical activity and medications to lower blood-glucose levels. Patient education and self-care practices also are important aspects of disease management that help people with diabetes stay healthy. By working together, people diagnosed with diabetes, their support network and their health care providers can reduce the prevalence of diabetes and related complications.

The SSM Health St. Mary's Hospital – St. Louis Diabetes Education Program is designed to provide education to individuals living with diabetes. The qualified educators on staff provide guidance to diabetic patients in an effort to encourage healthy lifestyle behaviors and disease management.

Additional facts and figures

- An estimated 27.8% of people living with diabetes are undiagnosed ¹
- African Americans are 1.7 times as likely to develop diabetes as whites ¹
- Death rates for African Americans with diabetes are 27% higher than for Caucasians ¹
- 13.6% of men and 11.2% of women have diabetes ¹
- The direct medical expenditures attributable to diabetes in 2012 exceeded \$116 billion ¹
- 30.1% of the St. Louis Medicare population is affected by diabetes, which is greater than the state rate of 26.1% ²
- While the prevalence of diabetes is somewhat close to the state average, the age-adjusted death rate due to diabetes in St. Louis is 32.8 deaths per 100,000 persons, compared to the state rate of 20.3 deaths per 100,000 persons ²

Sources: ¹Centers for Disease Control and Prevention. ²Healthy Communities Institute

Strategic Implementation Plan Diabetes



Goals

The goals of SSM Health St. Mary's Hospital – St. Louis include:

- Decrease the age-adjusted death rate due to diabetes in St. Louis County from 16.5 deaths per 100,000 persons, as reported in 2015, to 15 deaths per 100,000 persons by 2018 (HCI)
- Increase the percentage of St. Louis Medicare patients screened for diabetes from 83.3%, as reported in 2015, to the state average of 86.6% by 2018 (HCI)
- Reduce the average hemoglobin A1C for patients seen in the SSM Health St. Mary's Hospital – St. Louis Internal Medicine Clinic from 10.1% in 2015 to 9.1% by 2018 (Epic)



Action plan

- SSM Health St. Mary's Hospital – St. Louis will partner with area churches to provide community education and screening opportunities for diabetes
- Hospital diabetic educators will continue to collaborate with the interdisciplinary internal medicine providers to provide patient centered education and support with the goal of increasing patient knowledge and decreasing hemoglobin A1C levels
- Hospital diabetic educators will provide ongoing education to hospitalists and internal medicine residents
- SSM Health St. Mary's Hospital – St. Louis will evaluate the potential for promoting diabetic awareness education to the community through social media and local events

Community partners and supporting resources

- SSM Health Medical Group

High-Risk Pregnancy and Substance Abuse



Substance abuse among pregnant women is a significant problem in St. Louis, Mo. Opioid use, such as heroin, during pregnancy is extremely detrimental both to mothers and their infants. Babies born to heroin-addicted moms are typically affected by neonatal abstinence syndrome (NAS), which is characterized by central nervous system hyperirritability and autonomic nervous system dysfunction. Other problems include birth defects, placental abruption, premature birth, low birthweight and sudden infant death syndrome. Pregnancy can be a window of opportunity to approach and intervene with substance-using women.

SSM Health St. Mary's Hospital – St. Louis has the only substance abuse treatment program focusing on maternal patients in the St. Louis region. A review of primary, secondary and tertiary diagnosis in maternal patients seen in the Maternal and Fetal Care Center at St. Mary's Health Center shows that 11.6% of maternal patients are included in this category. Based on the 2014 delivery data, it is estimated that SSM Health treats 392 opioid-abusing maternal patients annually at St. Mary's, and 885 across the St. Louis network (sample consisted of 3,386 deliveries at SSM Health St. Mary's Hospital – St. Louis and 7,632 deliveries across the SSM Health St. Louis network).

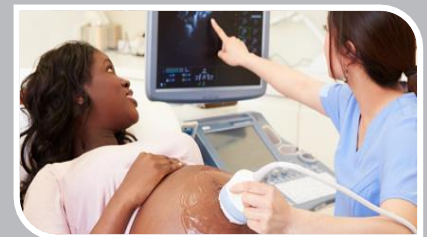
Additional facts and figures

- The national average for maternal patients abusing opioids is 5.5% ¹
- Of 1.1 million pregnant women enrolled in Medicaid nationally, nearly 23% filled an opioid prescription in 2007, up from 18.5 percent in 2000, according to a study published in the journal *Obstetrics & Gynecology* ²
- In Feb. 2015, a study of 500,000 privately insured women found that 14% were dispensed opioid painkillers at least once during pregnancy according to Dr. Brian T. Bateman, an anesthesiologist at Massachusetts General Hospital ³
- 15.1% of births in St. Louis are preterm, which is greater than both state and national rates of 8% (state is consistent with national average) ⁴
- The St. Louis infant mortality rate is reported as 11.2 deaths per 1,000 live births, which is greater than state rate of 7.3 deaths per 1,000 live births ⁴
- 24% of St. Louis mothers do not seek early prenatal care ⁴

Source: ¹March of Dimes. ²*Obstetrics and Gynecology* 2014, Issue 5.

³Anesthesiology, May 2014. ⁴Healthy Communities Institute

Priority
#2



For information about our Women and Infants Substance Help (WISH) program, visit our website at ssmhealth.com/stmarys.

Strategic Implementation Plan High-Risk Pregnancy and Substance Abuse



Goals

The goals of SSM Health St. Mary's Hospital – St. Louis include:

- Reduce the percentage of preterm births in St. Louis County from 12.4% reported in 2015 to the Healthy People 2020 goal of 11.4% by 2018 (HCI)
- Reduce the length of stay for Women and Infants Substance Help (WISH) program neonates (high-risk neonate) from 14.88 days in 2015 to 13 days by 2018 (Epic/WISH reporting)



Action plan

- Increase the WISH Clinic's enrollment by 20%
- Attain a threshold of 50% of patients being illicit-drug free, at the time of delivery, for those enrolled in the WISH program
- Improve data reporting capabilities on drug status of WISH program participant deliveries

Community partners and supporting resources

- SSM Health Maternal Services
- St. Louis University Division of Maternal Fetal Medicine
- SSM Health Cardinal Glennon Children's Hospital

Access to Care



Priority #3

At its heart, the entire Community Health Needs Assessment process is about improving access to care. The initiative was developed as part of the health care reform movement, in order to hold health care entities accountable for ensuring the communities which they serve are able to access the care they need.

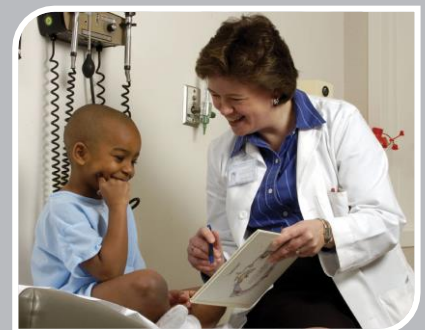
SSM Health realizes that each community has unique barriers to care that in some cases go beyond the supply of physicians available to serve their associated populations. These barriers include, but are not limited to:

- Health literacy or the ability of persons within the community to comprehend the health care services available to them
- Inadequate insurance coverage, affordability of services and transportation issues
- The ability of persons within the community to understand the importance of regular health assessments with medical providers

In addition to the significant investment of primary care and specialty providers within the St. Louis region, SSM Health and the SSM Health Medical Group are continuously developing initiatives to increase the convenience, access, value and quality of our services available to the communities we serve.

Additional facts and figures

- 21.9% of adults in St. Louis do not have insurance, which is higher than both state and national uninsured rates of 18.5% and 20.3%, respectively ¹
- 27.4% of the St. Louis population are living below the poverty level, which is almost double both state and national rates ¹
- 41.5% of children in St. Louis are reported as living below the poverty level, which is almost double both state and national rates ¹
- In May 2012, the Centers for Disease Control and Prevention (CDC) cited a National Health Interview Survey (NHIS) report that found almost 80% of adults who visited emergency departments over a 12-month period reported doing so because of a lack of access to other health care providers ²
- In 2014, the CDC cited a NHIS report which found 5.3% of the US population failed to obtain necessary medical care due to cost ²
- 7% of families in the US who live below the poverty threshold are unable to obtain or delayed obtaining necessary medical care ²



For information about our providers, visit our website at ssmhealth.com/stmarys.

Source: ¹Healthy Communities Institute, ²Centers for Disease Control and Prevention

Strategic Implementation Plan

Access to Care



Goals

The goals of SSM Health St. Mary's Hospital – St. Louis include:

- Decrease the number of preventable hospital stays in St. Louis County from 52 cases per 1,000 Medicare enrollees, as reported in 2015, to 45 cases per 1,000 Medicare enrollees by 2018 (HCI)
- Reduce overall readmission rate at SSM Health St. Mary's Hospital – St. Louis from 10.2% (Aug. YTD 2015) to 9.1% by 2018 (Readmissions Report)
- Improve overall Health Behaviors Ranking of St. Louis County from 7, as reported in 2015, to 6 by 2018 (HCI)



Action plan

- Increase the percent of appointments kept for patients referred by the Community Referral Coordinator (CRC) from 47% in 2015 to 49% by 2018
- Increase the number of CRC encounters with emergency department and inpatients needing medical care post hospitalization to primary care providers or clinics (for continuum of care) from an average of 2,700 per quarter in 2015 to an average of 2,732 per quarter by 2016
- Combined with the efforts of other SSM Health St. Louis Hospitals and the SSM Health Medical Group, increase the primary care physician rate in St. Louis County from of 120 providers per 100,000 persons, as reported in 2015, to 124 providers per 100,000 persons by 2018 (HCI)
- SSM Health St. Mary's Hospital – St. Louis will collaborate with St. Louis Integrated Health Network to develop referral and continuum of care relationships with area federally qualified health centers
- Establish an urgent care clinic to provide access for less acute patients outside of the hospital's emergency room
- Improve CRC staffing in the emergency department and inpatient services area to assist patients in finding a primary care provider
- Develop additional appointment compliance initiatives for patients referred by CRC

Community partners and supporting resources

- SSM Health Medical Group
- Integrated Health Network

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 – St. Louis 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 <small>MAP</small>	Current: 78.1 percent Target: 100.0 percent	78.1 100.0 Current Target	↔	TARGET NOT MET
Children with Health Insurance <small>MAP</small>	Current: 93.4 percent Target: 100.0 percent	93.4 100.0 Current Target	↔	TARGET NOT MET
Adolescent Health				
High School Graduation <small>MAP</small>	Current: 62.3 percent Target: 82.4 percent	62.3 82.4 Current Target	↑	TARGET NOT MET