Introduction

Excelsior Springs City Hospital has conducted a community health needs assessment (CHNA) pursuant to the requirement of Section 501 (r) of the Internal Revenue Code.

Excelsior Springs Hospital conducted the CHNA for the service area beginning in April 2013. The CHNA was conducted by the Excelsior Springs Hospital CHNA committee.

The following document summarizes the CHNA for Excelsior Springs Hospital, completed in the Clay, Ray and the surrounding service area.

Excelsior Springs City Hospital Mission Statement

Excelsior Springs Hospital is a not-for-profit government entity serving the people of Excelsior Springs and surrounding communities by providing quality health care across a continuum of care.

Service Area

Excelsior Springs Hospital serves the health care needs of residents in Clay, Ray and portions of Clinton and Caldwell counties. The below map depicts the Excelsior Springs Hospital service area with the main concentration in the circled area. All four counties are federally designated as Health Professional Shortage Areas (HPSA) for either primary care (Caldwell, Clinton and Ray) or mental health services (Clay and Ray). Two counties include Medically Underserved Areas (MUA), Caldwell County and Ray County (Crooked River Township). The statistics and documented barriers to care outlined in this needs assessment highlight the need for financially and geographically accessible primary care services in the four-county area.
Identification of Community Health Needs

The following are the ten most prevalent conditions reported by survey respondents:

1. Alcohol/Drug Abuse
2. Obesity
3. Diabetes
4. Heart Disease
5. Cancer
6. High Blood Pressure
7. Tobacco Use
8. Mental Health Problems
9. Dementia and Alzheimer’s Issues

The CHNA data was reviewed by a Strategic Planning Committee consisting of key community leaders and hospital personnel, and the following needs were identified as priority community health needs to be addressed as part of the Excelsior Springs Hospital Community Health Implementation Plan:

- Obesity and Sedentary lifestyle
- Management of Chronic Conditions (focusing on diabetes, heart disease and high blood pressure)
- Cancer Screening and Support Services
The implementation strategies for each of these priority areas will include steps to improve and coordinate communication to assure seamless continuum of services.

**Explanation for needs not being addressed:**

The following priority areas will not be addressed as part of the Excelsior Springs Hospital Community Health Implementation Plan.

Expansion of recreational and cultural activities will continue to be addressed by partnering organizations such as the City of Excelsior Springs, City of Excelsior Springs Parks and Rec Board and the surrounding communities as they determine the best way to meet the needs of their residents. Excelsior Springs Hospital will work with these partner organizations to promote their efforts.

Services for the growing elderly population will continue to be addressed by the Area Agency on Aging, Meals on Wheels, local faith based organizations, senior centers and senior housing organizations. Excelsior Springs Hospital will support the efforts of these organizations by participating in collaborating meetings to address this priority area.

Excelsior Springs Hospital will continue to partner with local governments, the Chamber of Commerce of Excelsior Springs, relevant agencies as well as our service area communities to begin to explore opportunities relating to community and economic development to address the alcohol/tobacco and mental health requirements of our service area.

**Community Resources**

Excelsior Springs Hospital has identified the following agencies and programs as potential collaborators for the Community Health Implementation Plan:

- Area public health centers
- City of Excelsior Springs
- Excelsior Springs Parks and Rec
- American Association of Diabetes Educators
- Tobacco Free Missouri
- Excelsior Springs Public Library
- New Beginnings
- Child Development Corporation
- Maternal and Family Health Services
- American Diabetes Association
- Local restaurants and businesses
- County Drug and Alcohol Commissions
- Local faith based organizations
- Excelsior Springs Standard
CHNA Executive Summary

Excelsior Springs Hospital has a strong commitment to the health of our community. Through our hospital and long term care facilities, we impact the health of patients and residents every day. Beyond delivering inpatient and outpatient care, we care for the residents who call our facility home 24 hours a day 7 days a week. Additionally, we offer access to health education and screenings to the community through health fairs and special events such as our annual Ladies Night Out.

As part of the Patient Protection and Affordable Care Act all non-profit hospitals are conducting Community Health Needs Assessments to evaluate the community needs and ensure we are offering programming and services to meet these needs. Based on our analysis from survey data and feedback from health experts and the community, the primary areas of focus for our implementation plan include:

- Obesity and Sedentary Lifestyle
- Management of Chronic Conditions to include:
  - Diabetes
  - Heart Disease
  - High Blood Pressure
- Cancer Screenings and Support Services

In the Patient Protection and Affordable Care Act (PPACA) passed in March 2010, non-profit hospitals were mandated to conduct a community-based needs assessment every three years. As a part of that process, each hospital is required to solicit input from those who represent the broad interests of the community served by the hospital as well as those who have special knowledge and expertise in the area of public health.

The Excelsior Springs Hospital’s Community Health Needs Assessment is the product of an 18-month process to identify and assess the scope of the needs of our service area through input solicited from area health experts and community leaders, and selected primary and secondary survey sources of input to identify target areas for improvement.

The needs assessment document provides details about the data collection, community input and resources to meet identified community needs.
Methodology

A variety of data collection methods were used to identify community assets, community concerns and individual health status. Information gathered from the assessment can later serve as baseline measures for community health status improvement efforts. Data was collected from the following sources:

**Secondary data** – Social and demographic data were collected and analyzed for the service area when available from the following sources:

- Clay County Public Health Center
- 2010 U.S. Census
- Missouri Department of Education
- Department of Public Welfare

**Community Needs Survey** – Surveys were administered to a convenience sample of 233 community members living within the service area. They were administered at local community agencies, churches, senior living facilities and within the general community. Respondents were asked to complete survey questions to the best of their ability. Staff was available to provide assistance with reading and interpreting questions when requested. The survey collected data pertaining to individual health status, access to medical care and social and health needs.

Access to Service Area

**Educational Opportunities**

- Public school system
  - Substance abuse treatment program, DARE program
  - Immunizations, counseling

**Excelsior Springs Public Library**

- Internet access
- Diabetes reference information
- Children’s story time

**Excelsior Springs City Hospital**

- Knowledgeable doctors
- Good emergency department
- Financial assistance program
- 2 family practice offices

Community Outreach Organizations
Salvation Army
- Financial assistance during the holidays, community programming

Chamber of Commerce
- Excelsior Springs Area Community Partnership
- Social service referrals and assistance

Markets and festivals
Hometown Farmer’s Markets
- Fresh, local produce
Annual Festivals held locally in each community

Recreation
- Youth and adult sports leagues
- Estimated 70% student participation rate in school extracurricular activities
- Proximity to Watkins Mill recreational area
- Various State Parks
- Smithville Lake

Access to Health Care

Respondents were asked questions regarding where they currently seek health care, health insurance type and reason for lack of access to health care. The following data pertains to access to health care:
- 89.3% currently have insurance
- 69.2% of those without insurance say it is because of cost
- 85.7% access routine care through a physician’s office
- 53.0% said that out of pocket costs have stopped them from accessing the care they need
- 52.8% access health related information from a Physician/NP/Pharmacist with 43.3% accessing health information via the internet

Barriers to Accessing Health Care

Four of the top five barriers to accessing health care highlight financial issues. This is supported by the high unemployment rates and struggling economy. The top five barriers to accessing health care as identified by agency key informants are as follows:
1. Cost of health insurance
2. The number of under/uninsured
3. Community does not practice healthy lifestyles
4. Limited funding for health services
5. Cost of health services
Demographic Trends

Excelsior Springs is located in eastern Clay and western Ray Counties in Missouri. The city is located 12 miles northeast of Liberty, 7 miles east of Kearny and approximately 23 miles northeast of Kansas City.

The total population for Excelsior Springs from the 2010 U.S. Census Data was 11,084. The estimated 2012 population is 11,665.

Population Change

The state of Missouri has continued to experience a steady population increase (+7.0%) since 2000. Below is listed the population change information between 2000 and 2010.

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**Age Groups**

In general, the service area has a larger percent of middle aged residents. This population difference is most notable in the category of residents 19-64 at 56% for Clay County and 53.8% for Ray County.

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<td>18 &amp; Over</td>
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<td>65 &amp; Over</td>
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**Ethnic and Racial Profiles**

Predominately white, non-Hispanic residents live within Clay County (87.5%), as well as Ray County (96.3%). The counties continue to report very low numbers of Black and African Americans (5.2% and 1.2% respectively) in comparison to the state of Missouri (11.6%).

<table>
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<tr>
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<th>Black</th>
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<td>Clay County</td>
<td>87.5%</td>
<td>5.2%</td>
<td>5.9%</td>
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<tr>
<td>Ray County</td>
<td>96.3%</td>
<td>1.2%</td>
<td>1.8%</td>
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</table>

**Socioeconomic Status**

Unemployment rates in Missouri and our service area are right in line with the national average. Below is information about the employment environment for the past three years in the Kansas City Metropolitan area that encompasses our service area and directly southwest of our service area. This is followed by the consumer price index information for the Kansas City Metropolitan area.
## Yearly Employment and Unemployment Data

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Below is listed the information for our service areas consumer price index according to the U.S. Bureau of Labor Statistics.
Food

Food prices rose 1.9 percent from the first half of 2012 to the first half of 2013, considerably less than the 4.4 percent gain registered in the same period one year ago. Within the food index, costs for food away from home led the advance with an increase of 3.3 percent and prices for food at home were up 1.0 percent. These compared with increases of 4.7 percent and 4.0 percent, respectively, in the 12-month period that ended in the first half of 2012.

Energy

The energy index, which includes motor fuel and household fuels, advanced 4.2 percent from the first half of 2012 to the first half of 2013, following an increase of 0.4 percent in the same period one year ago. The utility (piped) gas service index increased 16.0 percent, reversing the downward trend that began in 2009, and accounted for over half of the increase in the energy component. Higher prices for electricity
and motor fuel, up 6.7 and 0.4 percent, respectively, also contributed to the increase in energy costs over the period.

**All items less food and energy**
The index for all items less food and energy rose 1.9 percent from the first half of 2012 to the first half of 2013. The increase was led by a 2.3-percent advance in shelter costs. Medical care costs had the next largest impact on the index with a 4.3-percent rise over the year, though the rate of increase slowed during the most recent six months of the period.

The Kansas City CPI-U stood at 222.057 for the first half of 2013. This means that a market basket of goods and services that cost $100.00 in 1982-84 cost $222.06 in the first half of 2013. Because metropolitan area CPI data are not adjusted for seasonal price variation, consumers and businesses should be cautious in drawing conclusions about long-term retail price trends from short-term changes in the metropolitan area indexes.

**CPI-W**
The Consumer Price Index for Urban Wage Earners and Clerical Workers (CPI-W) for the Kansas City, Mo.-Kan., metropolitan area for the first half of 2013 was 214.173. The CPI-W increased 2.1 percent from the first half of 2012 to the first half of 2013.
Community Health Needs Assessment Survey
Year: 2013
Excelsior Springs Hospital

The following section presents data from 233 individuals living in the service area who completed the Community Needs Survey. The survey question/number is listed beside each heading below.

Total Number of Surveys: 233

**Question Number 1** (227 answered this question):
*Your 5 digit zip code.*

Number of Zip Codes represented in Survey: 35

- Top 5 Zip Codes represented: 64024 (53.3%), 64062 (13.2%), 64429 (4.8%), 64048 (3.1%), & 64084 (3.1%)

- Other Zip Codes: 64053, 64055, 64060, 64065, 64067, 64077, 64085, 64115, 64116, 64117, 64118, 64119, 64151, 64157, 64158, 64229, 64454, 64465, 64474, 64477, 64490, 64493, 64620, 64640, 64650, 64657, 64671, 66106

**Question Number 2** (233 answers for this question):
*Do you currently have health insurance of some kind? Yes or No. If Yes, what kind?*

208 participants said YES (89.3%) & 25 participants said NO (10.7%)

Variety of insurance companies that were given (179 surveyors inserted their insurance):
UMR, CIGNA, BCBS, Medicare Part B, PPO, Medicare/Medicaid, Aetna, Medicare D limited Health, United Health Care, Mutual of Omaha, Golden Rule, Rever National, AARP, , TriCare, Coventry, Humana, MO Health net, Bankers Fidelity, Missouri Care, First Health, Triwest, Cerner Corp, HMO, Health Care USA, KC, Mo-Kan, Union, Company, Private, Employer.

- Top 5 Insurances represented: BCBS (23.5%), UMR (15.7%), Medicare/Medicaid (15.1%), United Health Care (9.9%), & CIGNA (5.8%)

**Question Number 3** (26 answers for this question):
*If you do not have health insurance, why not (check all that apply).*

Cannot afford: 18 (69.2%)
Employer does not offer it: 5 (19.2%)
Do not qualify for government assistance: 3 (11.5%)
Not qualified for the plan where I work: 0
I feel I do not need it: 0
Other Comments:
- I am in the process of setting up a plan now.
- Under parents.
- Haven’t looked into it yet.

**Question Number 4** (790 answers for this question):
*Select any of the following preventative procedures you have had in the last year (check all that apply).*

Blood Pressure: 144 (61.8%)
Flu shot: 116 (49.8%)
Blood Sugar: 88 (37.8%)
Vision/Hearing screen: 83 (35.6%)
Cholesterol screen: 81 (34.8%)
Pap smear: 66 (28.3%)
Mammogram: 61 (26.2%)
Cardio screen: 34 (14.6%)
Colon/Rectal Exam: 27 (11.6%)
Prostate screen: 21 (9.0%)
Bone Density test: 14 (6.0%)
STD screen: 14 (6.0%)
Skin Cancer screen: 12 (5.2%)

Didn’t Answer: 32 out of the 233 total surveyors (13.7%)

**Question Number 5** (245 answers for this question):
*Where do you go for routine care (check all that apply).*

Physician’s office: 210 (85.7%)
Urgent Care/Walk-in Clinic: 23 (9.4%)
Hospital E.R: 9 (3.7%)
Health Department Clinic: 3 (1.2%)

Other Comments:
- I don’t
- None
- Samuels Roger
- VA
- Hospital Seminar.
- No routine Care
- Liberty Observation

Didn’t Answer: 6 out of the 233 total participants (2.6%)
Questions Number 6 (83 total answers for this question):
The Follow have stopped you from getting the health care that you need.

My health insurance did not cover, approve, or pay for what I needed or the out of pocket was too high: 44 (53.0%)
No insurance: 22 (26.5%)
Lack of transportation, distance too far, no child or elder care: 8 (9.6%)
Health care provider will not take my insurance: 6 (7.2%)
Could not get an appointment: 5 (6.0%)

Other Comments:
- Deductible to high
- No money for copay
- Unable to afford co-insurance
- Hard to find Doctors who take Medicaid that I am well enough to drive to
- Finding a Doctor I like, trust, and who actually listens to me instead of being on his computer.
- Unable to take off work
- On family healthcare
- Small business owner
- Feel unnecessary to go since I have to fix it myself
- All of the above

Didn’t Answer: 149 out of the 233 total participants (63.9%)

Question Number 7 (242 total answers from this question):
What is the best way to improve access to address the health needs of our Community (check One).

Availability of Health Screen/health fairs: 74 (30.6%)
More access to primary care/family medicine doctor/expanded hours: 64 (26.4%)
More access to specialty providers: 35 (14.5%)
Healthy lifestyle classes: 28 (11.6%)
Nutrition education/dietary needs: 27 (11.2%)
Diabetes management classes: 14 (5.8%)

Other Comments:
- Providing resources when someone can’t afford health care at ESH.
- Not enough providers for those on Medicare/Medicaid
- Transportation
- Expanded hours

Didn’t Answer: 60 out of 233 total participants (25.7%)
Questions Number 8 (427 total answers for this question):
Sources where you obtain most health-related information or local health events (check all that apply).

Doctor/Nurse/Pharmacist: 123 (52.8%)
Internet: 101 (43.3%)
Excelsior Springs Hospital: 71 (30.2%)
Newspaper/Magazine/TV/Radio: 53 (22.7%)
Family/Friends: 47 (20.2%)
School/Church/Work/Library: 29 (12.4%)
Health Department: 9 (3.9%)

Other Comments:
- Mail order
- Chamber Calendar
- Isogenic
- Cameron Hospital
Didn’t Answer: 18 out of the 233 participants (7.7%)

Question Number 9 (1,025 total answers for this question):
In the following list please mark what you think are the 5 most important “HEALTH PROBLEMS” in our community. Please check FIVE.

Alcohol/Drug abuse: 136 (58.4%)
Obesity: 128 (54.9%)
Diabetes: 117 (50.2%)
Heart Disease: 99 (42.5%)
Cancer: 99 (42.5%)
High Blood Pressure: 85 (36.5%)
Tobacco Use: 78 (33.5%)
Mental health problems: 63 (27.0%)
Issues that come with age: 60 (25.8%)
Dementia/Alzheimer’s: 36 (15.5%)
Teen pregnancy/Poor birth outcomes: 28 (12.0%)
Respiratory/Lung disease: 27 (11.6%)
Stroke: 24 (10.3%)
Child/Elder/Domestic abuse: 20 (8.6%)
Infectious Disease: 9 (3.9%)
Suicide: 7 (3.0%)
Rape/Sexual assault: 5 (2.1%)
Other: Dental care: 1 (0.4%)
Other: MRSA wound: 1 (0.4%)
Other: STD: 1 (0.4%)
Dialysis: 0
Didn’t Answer: 22 out of the 233 participants (9.4%)
**Question Number 10** (126 total answers for this question):

*If you have children, what is your primary resource for obtaining childhood immunizations (check one).*

- Doctor’s office: 80 (63.5%)
- County health department: 44 (34.9%)
- Free clinic: 2 (1.6%)

Other Comments:
- CVS
- DNA

Didn’t Answer: 112 out of 233 participants (48.1%)

**Questions Number 11:**

*What other factors related to health care should Excelsior Springs Hospital consider in planning for the next three years.*

**SPECIALITIES:**
- More outpatient clinics
- Expand specialty clinics
- Eye care
- Rape aftercare program
- PTSD workshop
- Mental health care
- Smoke cessation (multiple times)
- Dialysis Center (multiple times)
- More alternative health care education (chiropractors etc.)
- Lithotripsy trailer (weekly, biweekly or monthly)
- Pediatrics
- Crohn’s Disease clinic

**EMERGENCY DEPARTMENT:**
- Develop better ER department
- Eliminate ER visits that could be handled at Urgent Care

**FINANCES:**
- More affordable health care
- Budget cuts
- Low cost exams

**LOGISTICS:**
- Get more businesses (ex: EMTs) to take patients to ESH rather than Liberty
- Classes to be available for working class (after hours)
- Increasing advertising of services
NUTRITION/WELLNESS:
- Offer nutrition/wellness classes
- Educate school district on healthier menu selections
- Weight loss
- Create an area for fitness classes/cardio/weights (multiple times)
- Classes for obesity
- Nutrition education
- Physical activity-sport availability
- Increase nutrition counseling
- Healthier meals & less fried foods in cafeteria (multiple times)
- Encourage exercise & healthy eating

PHARMACY:
- Benefits for OTC medications

PHYSICIANS:
- Keep buying more physicians’ practices
- Give access to Doctors in-house for routine care.

SAFETY:
- Disaster Prep & Relief, basic first aid.

Comments:
- The number of citizens that are aging and the needs of those seniors.
- The number of children/elderly that doctors will not take because they are Medicare/Medicaid
- Keep having free/low cost fairs & classes
- Need to educate the community what a good hospital ESH is.
Out of the 115 Counties in Missouri

County 90th out of 115 counties in Missouri for its health status as determined by multiple health indicators.

<table>
<thead>
<tr>
<th>Out of the 115 Counties in Missouri</th>
<th>Missouri</th>
<th>Clay</th>
<th>Ray</th>
<th>Clinton</th>
<th>Caldwell</th>
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<tbody>
<tr>
<td><strong>Health Outcomes</strong></td>
<td></td>
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<tr>
<td>Mortality</td>
<td></td>
<td></td>
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<tr>
<td>Premature death</td>
<td>7,827</td>
<td>6,278</td>
<td>9,150</td>
<td>8,268</td>
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<tr>
<td>Morbidity</td>
<td>29</td>
<td>96</td>
<td>14</td>
<td>53</td>
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<tr>
<td>Poor or fair health</td>
<td>16%</td>
<td>14%</td>
<td>21%</td>
<td>12%</td>
<td>14%</td>
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<tr>
<td>Poor physical health days</td>
<td>3.7</td>
<td>3.4</td>
<td>4.3</td>
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<td>2.4</td>
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<td>Poor mental health days</td>
<td>3.8</td>
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<td>5.3</td>
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<td>Low birth weight</td>
<td>8.1%</td>
<td>6.8%</td>
<td>8.0%</td>
<td>6.7%</td>
<td>9.6%</td>
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<td><strong>Health Factors</strong></td>
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<td><strong>Health Behaviors</strong></td>
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<tr>
<td>Adult smoking</td>
<td>23%</td>
<td>22%</td>
<td>27%</td>
<td>21%</td>
<td>24%</td>
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<tr>
<td>Adult obesity</td>
<td>31%</td>
<td>28%</td>
<td>32%</td>
<td>31%</td>
<td>35%</td>
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<tr>
<td>Physical inactivity</td>
<td>28%</td>
<td>27%</td>
<td>32%</td>
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<td>Excessive drinking</td>
<td>17%</td>
<td>18%</td>
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<td>Motor vehicle crash death rate</td>
<td>17</td>
<td>13</td>
<td>31</td>
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<td>Sexually transmitted infections</td>
<td>435</td>
<td>310</td>
<td>255</td>
<td>289</td>
<td>191</td>
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<tr>
<td>Teen birth rate</td>
<td>42</td>
<td>32</td>
<td>43</td>
<td>40</td>
<td>49</td>
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<td><strong>Clinical Care</strong></td>
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<td></td>
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<tr>
<td>Uninsured</td>
<td>15%</td>
<td>11%</td>
<td>13%</td>
<td>14%</td>
<td>16%</td>
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<tr>
<td>Primary care physicians</td>
<td>1,495:1</td>
<td>1,767:1</td>
<td>2,346:1</td>
<td>1,596:1</td>
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<tr>
<td>Dentists</td>
<td>2,168:1</td>
<td>1,774:1</td>
<td>7,924:1</td>
<td>2,355:1</td>
<td>9,646:1</td>
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<tr>
<td>Preventable hospital stays</td>
<td>73</td>
<td>83</td>
<td>126</td>
<td>89</td>
<td>99</td>
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<td>Diabetic screening</td>
<td>85%</td>
<td>87%</td>
<td>83%</td>
<td>86%</td>
<td>83%</td>
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<tr>
<td>Mammography screening</td>
<td>64%</td>
<td>67%</td>
<td>57%</td>
<td>59%</td>
<td>50%</td>
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<tr>
<td>Social &amp; Economic Factors</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High school graduation</td>
<td>80%</td>
<td>86%</td>
<td>86%</td>
<td>83%</td>
<td>89%</td>
</tr>
<tr>
<td>Some college</td>
<td>62%</td>
<td>72%</td>
<td>48%</td>
<td>60%</td>
<td>49%</td>
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<tr>
<td>Unemployment</td>
<td>8.6%</td>
<td>7.7%</td>
<td>9.9%</td>
<td>10.0%</td>
<td>8.9%</td>
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<tr>
<td>Children in poverty</td>
<td>22%</td>
<td>12%</td>
<td>18%</td>
<td>18%</td>
<td>20%</td>
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<tr>
<td>Inadequate social support</td>
<td>19%</td>
<td>15%</td>
<td>20%</td>
<td></td>
<td>19%</td>
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<tr>
<td>Children in single-parent</td>
<td>33%</td>
<td>28%</td>
<td>27%</td>
<td>31%</td>
<td>24%</td>
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<tr>
<td>Violent crime rate</td>
<td>484</td>
<td>758</td>
<td>184</td>
<td>204</td>
<td>254</td>
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<tr>
<td>Physical Environment</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Daily fine particulate matter</td>
<td>10.6</td>
<td>9.2</td>
<td>9.6</td>
<td>9.2</td>
<td>9.6</td>
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<tr>
<td>Drinking water safety</td>
<td>5%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>23%</td>
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<tr>
<td>Access to recreational facilities</td>
<td>10</td>
<td>8</td>
<td>4</td>
<td>5</td>
<td>0</td>
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<tr>
<td>Limited access to healthy foods</td>
<td>6%</td>
<td>6%</td>
<td>3%</td>
<td>3%</td>
<td>8%</td>
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<tr>
<td>Fast food restaurants</td>
<td>47%</td>
<td>51%</td>
<td>42%</td>
<td>29%</td>
<td>20%</td>
</tr>
</tbody>
</table>
Where Do We Go From Here?

The data from the CHNA will only find its value in practical application through work of the Excelsior Springs City Hospital, as well as in other community settings that can use the data for planning and evaluation purposes. The hospital must work to develop strategies for both disseminating the information gathered by the assessment and initiating action based on these findings. It is recommended that the hospital continue to build and strengthen partnerships with community agencies, school districts, medical providers and community leaders to focus efforts on the following priorities listed in no particular order:

- Chronic Disease Management
- Wellness and Chronic Disease Prevention
- Obesity Prevention
- Substance Abuse including tobacco, illegal drugs and alcohol
- Access to Care for Under/Uninsured for Medical, Dental and Mental Health Services
- Strong Health Education Programs to Disseminate Targeted Health Messages
- Expansion of Recreational and Cultural Activities
- Services for the Growing Elderly Population
- Community and Economic Development to Address the High Rates of Poverty and Unemployment

Questions pertaining to the assessment and above report can be directed to Excelsior Springs City Hospital 1-816-630-6081.

Below please see a few of the offerings that our facility puts on for the benefit of our service area and that allows us to address some of the issues discovered in the Community Health Needs Assessment.
Excelsior Springs Hospital Community Health Fair

Who: All residents of Excelsior Springs and surrounding areas

When: Saturday, September 14, 2013 from 8am to 11am

Where: Main patient entrance at 1700 Rainbow Blvd, Excelsior Springs MO

What: Community Health Fair with many free and low cost health screenings and all service area members are welcome. The following screenings have been scheduled but are subject to change.

Free Screenings & Other Services:

- Vital signs: includes pulse, respirations, blood pressure, pulse ox
- Height, weight and BMI checks
- Blood sugar test: a simple screening to check blood sugar levels that will help determine whether an A1C test is needed to screen for diabetes
- Cholesterol screening
- Colorectal blood screening (detecting fecal occult blood which may be indicative of gastrointestinal disease)
- EKG screening to check for heart irregularities courtesy of ESH & Meritas
- Cardiology with a Cardiologist and Nurse available to answer questions
- Ask the Nurse Practitioner courtesy of Teresa Short, NP
- Podiatry screenings courtesy of Dr. Robert A. Shemwell
- Dental screenings courtesy of Dr. Kent Powell
- Urology screenings/information courtesy of Dr. Thomas Herrick
- Carotid artery checks to screen for plaque in the arteries
- Information on Spider and Varicose Vein treatment options courtesy of The Vein Doctor
- Balance screening to check for fall risks
- Speech Therapist to offer consultations
- Lymphedema Information/Screening
- Advance Directives with notary available
- Dementia Education courtesy of Senior Helpers
- Excelsior Springs Parks and Recreation information booth
- Information on services offered to the uninsured

A1C: Screening for diabetes. Fasting is required for this test. See http://diabetes.webmd.com/guide/glycated-hemoglobin-test-hba1c for more information as to why this screening is important.

Lipids: Screening for total cholesterol and triglycerides. Fasting is required. See http://www.webmd.com/cholesterol-management/tests-for-high-cholesterol-lipid-panel for more information as to why you might want to get this screening.
PSA: Screening for prostate cancer. Visit [http://www.webmd.com/prostate-cancer/guide/psa](http://www.webmd.com/prostate-cancer/guide/psa) to see if you are a good candidate for this screening.

Vitamin D Deficiency: See [http://www.webmd.com/diet/vitamin-d-deficiency](http://www.webmd.com/diet/vitamin-d-deficiency) for more information as to why this screening is important.


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**EXCELSIOR SPRINGS HOSPITAL PRESENTS**

**LADIES NIGHT OUT**

When: Thursday, October 24, 2013

- **FREE** Blood Pressure Screenings
- **DISCOUNTED** Mammogram Screening Vouchers
- **FREE** Carotid Ultrasound Screenings
- Cholesterol & Blood Glucose Screening Vouchers for **ONLY $5.00**
- Information on Breast, Lung & Cervical Cancer
- **FREE** Information on Smoking Cessation & Support
- **FREE** Tote Bag
- Door Prizes
- **FREE** Refreshments

**Enjoy a variety of informational booths**
The Vein Doctor, Total Wellness Center (Massage Chair), Power of Pink and many more.

**FREE** Refreshments Donated by Price Chopper

Guest Speaker at 7 pm

Excelsior Springs Hospital Community Room Enter through Main Lobby take elevator to the 2nd Floor Doors open at 5:30 pm

RSVP at 816-629-3588 email mwallace@esmc.org

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A **FREE** Event Presented by **Excelsior Springs Hospital**