



**Community Health Needs Assessment - 2017
Cooper County Memorial Hospital &
Cooper County Public Health Center – Boonville, MO**



September 2017

**VVV Consultants LLC
Olathe, KS**

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I. Executive Summary

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I. Executive Summary

Cooper County Memorial Hospital (Primary Service Area) - 2017 Community Health Needs Assessment (CHNA)

Creating healthy communities requires a high level of mutual understanding and collaboration among community leaders. The development of this assessment brings together community health leaders and providers, along with local residents, to research and prioritize county health needs and document community health delivery successes. The Community Health Needs Assessment is not only a requirement for accreditation, but it is also a vital part of the Public Health role. This health assessment will serve as the foundation for community health improvement efforts for the next three years. The last CHNA for Cooper County Memorial Hospital (Primary Service Area) was published in July 2014.

The new 2017 assessment was coordinated and produced by VVV Consultants LLC (Olathe, Kansas) under the direction of Vince Vandehaar, MBA. The CHNA provides benefits to local health service organizations, the hospital, the public health department, as well as the community, in the following ways: 1) Increases knowledge of community health needs and resources; 2) Creates a common understanding of the priorities of the community's health needs; 3) Enhances relationships and mutual understanding between and among stakeholders; 4) Provides a basis upon which community stakeholders can make decisions about how they can contribute to improving the health of the community; 5) Provides rationale for current and potential funders to support efforts to improve the health of the community; 6) Creates opportunities for collaboration in delivery of services to the community; and 7) Provides guidance to the hospital and local health department for how they can align their services and community benefit programs to best meet needs.

Town Hall “Community Health Strengths” cited for Cooper County Memorial Hospital's Primary Service Area are as follows:

Cooper County Memorial Hospital (Primary Service Area) "Community Health Strengths"			
#	Topic	#	Topic
1	Community energy	6	Local ED with the ability to quickly transfer
2	YMCA	7	Community Action Teams / Services Clubs
3	Communication between healthcare providers	8	Tax levies supporting health causes
4	Private health groups delivering health education	9	Access to the Katy Trail
5	NAMI (National Alliance for Mental Illness)	10	Education opportunities regardless of economic status

Town Hall “Community Health Changes and/or Improvements” cited for Cooper County Memorial Hospital’s Primary Service Area are as follows:

Community Health Needs 2017 - Cooper County, MO				
Cooper County Memorial Hospital - Primary Service Area				
Town Hall Priorities (27 Attendees, 113 Votes)				
#	Community Health Needs to Change and/or Improve	Votes	%	Accum
1	Mental Health (Diagnosis, Placement, Aftercare)	19	16.8%	16.8%
2	Tobacco Use	13	11.5%	28.3%
3	Economic Development	11	9.7%	38.1%
4	Add Providers (Pediatrics, Gerontology, Orthopedics, Obstetrics, Ophthalmology)	11	9.7%	47.8%
5	Healthcare Transportation	10	8.8%	56.6%
6	Utilization of Local Hospital Services	10	8.8%	65.5%
7	Domestic Violence	9	8.0%	73.5%
8	Drug / Alcohol Rehab	9	8.0%	81.4%
Other Items Noted: Community Health Policy, Access to Affordable Child Care, Dentists Accepting Medicaid, Health Ownership, Community Health Education / Wellness, Ministerial Alliance Support, Access to Organic Produce and Emergency Room.				

Key Community Health Needs Assessment Conclusions from secondary research for Cooper County Memorial Hospital’s Primary Service Area are as follows:

MISSOURI HEALTH RANKINGS: Per the 2017 RWJ County Health Rankings study, Cooper County Memorial Hospital’s Primary Service Area (Cooper County, Missouri) had the highest State of Missouri ranking (of 115 counties) in Clinical Care.

TAB 1. Demographic Profile
TAB 2. Economic/Business Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospitalization / Providers Profile
TAB 6. Behavioral Health Profile
TAB 7. Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

- TAB 1: Cooper County has a population of 17,712 residents as of July 1, 2016, higher than the Missouri Rural Norm of 17,324. The percent change in population in Cooper County from April 1, 2010 to July 1, 2016 is 0.6%, lower than the Missouri Rural Norm of -1.3%. The percent of persons 65 years and over in Cooper County is 16.9%, lower than the Missouri Rural Norm of 19.3%. The percent of female persons in Cooper County is 47.3%, lower than the Missouri Rural Norm of 49.7%. The percent of white alone persons in Cooper County is 89.5%, lower than the Missouri Rural Norm of 94.1%. The percent of black or African American alone persons in Cooper County is 7.3%, higher than the Missouri Rural Norm of 3.2%. The percent of children in poverty in Cooper County is 29.0%, higher than the Missouri Rural Norm of 29.8%. The percent of person in poverty in Cooper County is 14.4%, lower than the Missouri Rural Norm of 16.0%. The percent of seniors in Cooper County with low access to stores is 4.3%, higher than the Missouri Rural Norm of 2.6%.
- TAB 2: The per capita income in the past 12 months (in 2015 dollars) in Cooper County is \$23,252, higher than the Missouri Rural Norm of \$21,171. The total retail sales per capita in Cooper County is \$17,194, higher than the Missouri Rural Norm of \$10,493. The percent of grocery stores in Cooper County per 1,000 population (percent change) is -33.2%, lower than the Missouri Rural Norm of -17.1%. The percent of low income and low access to grocery stores in Cooper County is 7.8%, higher than the Missouri Rural Norm of 5.0%. The mean travel time to work in Cooper County is 22.5 minutes, lower than the Missouri Rural Norm of 24.4 minutes.
- TAB 3: The percent of persons age 25 years+ in Cooper County who are a high school graduate or higher is 88.1%, higher than the Missouri Rural Norm of 86.0%. The percent of persons age 25+ years in Cooper County with a Bachelor's degree or higher is 19.5%, higher than the Missouri Rural Norm of 15.5%.
- TAB 4: The percent of preterm births (less than 37 weeks gestation) in Cooper County is 13.0%, higher than the Missouri Rural Norm of 11.9%. The percent of births with a low birth weight in Cooper County is 10.3%, higher than the Missouri Rural Norm of 7.7%. The percent of infants participating in WIC in Cooper County is 53.4%, lower than the Missouri Rural Norm of 62.7%. The percent of teen pregnancies age 15-17 in Cooper County is 14.7%, lower than the Missouri Rural Norm 16.2%. The percent of mothers who smoked during pregnancy is 20.0%, lower than the Missouri Rural Norm of 25.0%.
- TAB 5: The ratio of the population in Cooper County to primary care physicians is 2,510:1, lower than the Missouri Rural Norm of 4,053:1. The number of preventable hospital stays in Cooper County is 57, lower than the Missouri Rural Norm of 63. The percent of patients in Cooper County who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest) is 73.0%, higher than the Missouri Rural Norm of 71.0%. The average time patients spent in the emergency department in Cooper County before they were seen by a healthcare professional is 16.0 minutes, higher than the Missouri Rural Norm of 14.3 minutes.
- TAB 6: The percent of Medicare beneficiaries with Depression in Cooper County is 15.9%, lower than the Missouri Rural Norm of 17.0%. The percent of alcohol impaired driving deaths in Cooper County is 23.0%, lower than the Missouri Rural Norm of 31.7%.

- TAB 7: The percent of adult obesity in Cooper County is 35.0%, higher than the Missouri Rural Norm of 32.6%. The percent of excessive drinking in Cooper County is 17.0%, higher than the Missouri Rural Norm of 15.7%. The rate of sexually transmitted infections per 100,000 in Cooper County is 340.0, higher than the Missouri Rural Norm of 256.3. The percent of Medicare beneficiaries in Cooper County with Hypertension is 45.1%, lower than the Missouri Rural Norm of 52.9%. The percent of Medicare beneficiaries in Cooper County with Hyperlipidemia is 30/1%, lower than the Missouri Rural Norm of 38.7%. The percent of Medicare beneficiaries in Cooper County with Chronic Kidney Disease is 12.7%, lower than the Missouri Rural Norm of 14.2%. The percent of Medicare beneficiaries in Cooper County with COPD is 11.0%, lower than the Missouri Rural Norm of 13.7%. The percent of Medicare beneficiaries with Asthma in Cooper County is 5.9%, lower than the Missouri Rural Norm of 7.8%.
- TAB 8: The percent of residents uninsured in Cooper County is 14.0%, lower than the Missouri Rural Norm of 16.1%.
- TAB 9: The rate of Heart Disease mortality in Cooper County is 252.7.0, higher than the Missouri Rural Norm of 233.8. The rate of Chronic Lower Respiratory Disease mortality in Cooper County is 47.7, lower than the Missouri Rural Norm of 52.9. The rate of suicide in Cooper County is 15.1, higher than the Missouri Rural Norm of 13.0.
- TAB 10: The percent of access to exercise opportunities in Cooper County is 45.0%, higher than the Missouri Rural Norm of 41.4%

Key 2017 Community Feedback Conclusions

In August 2017, Cooper County Memorial Hospital collected stakeholder feedback from their primary service area consumers, community leaders and groups, public and other organizations, and other providers. These stakeholders (N=210) provided the following community feedback insights via an online perception survey:

- 61.4% of Cooper County stakeholders would rate the overall quality of healthcare delivery in their community as either Very Good or Good, with Very Good being the highest ranking.
- Cooper County stakeholders are satisfied with the following services: Eye Doctor / Optometrist and Pharmacy.
- Cooper County stakeholders are not satisfied with the following services: Child Care, Emergency Room, Family Planning Services, Inpatient Services, Mental Health services, Nursing Home and Outpatient Services.
- 78.9% of Cooper County stakeholders have received healthcare services outside of their community over the past two years.
- Cooper County stakeholders perceive the following causes of disease or disability a problem in their community: Abuse / Violence, Drugs / Substance Abuse, Mental Illness, Obesity, Poverty, Water Quality and Wellness Education.

As seen below, the community still senses a health need for Economic Development and Obesity (Specifically for Children).

Cooper County Memorial Hospital - Primary Service Area N=210						
3. From our 2014 CHNA, a number of health needs were identified as priorities. Are any of these previous CHNA needs still an "Ongoing Problem" in the Cooper County Memorial Hospital Primary Service Area?						
Answer Options	Not a Problem Anymore	Somewhat of a Problem	Major Problem	Problem %	Response Count	Most Pressing Rank
Economic Development	20	88	41	86.6%	149	1
Obesity (Specifically for Children)	20	87	39	86.3%	146	3
Smoking	30	79	38	79.6%	147	6
Provider Shortage / Availability	33	78	41	78.3%	152	2
Education / Information Classes	33	98	16	77.6%	147	8
Promote a Culture of Healthy Lifestyles	34	92	22	77.0%	148	5
Wellness Programs	39	89	20	73.6%	148	7
Awareness of Care Available	42	90	18	72.0%	150	4
Support Groups	47	84	16	68.0%	147	9

II. Methodology

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II. Methodology

a) Scope and Purpose

For health departments that are preparing to apply for accreditation, the Public Health Accreditation Board (PHAB) recommends working diligently on a Community Health Assessment and Community Health Improvement Plan. The Community Health Needs Assessment is not only a requirement for accreditation, but it is a vital part of the Public Health role. (NOTE: The new federal Patient Protection and Affordable Care Act (ACA) also requires charitable hospitals to conduct a CHNA at least once every three years and adopt a strategy to meet community health needs).

JOB #1: Report PHAB / ACA Required CHNA Documentation

1. Appoint an Accreditation Coordinator
2. Review PHAB's Online Orientation to Public Health Department Accreditation
3. Review the documentation requirements for the measures
4. Begin/refine work on the prerequisites
 - a. **Community health assessment**
 - b. **Community health improvement plan**
 - c. Health department strategic plan
5. Prepare documentation

ACA Detail Regulations

1. A description of the process and methods used to conduct the CHNA;
2. The identity of any and all organizations with which the organization collaborated with and third parties that it engaged to assist with the CHNA;
3. A description of how the organization considered the input of persons representing the community (*e.g., through meetings, focus groups, interviews, etc.*), who those persons are, and their qualifications;
4. A prioritized description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs;
5. A description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA; and
6. A prioritized description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing.

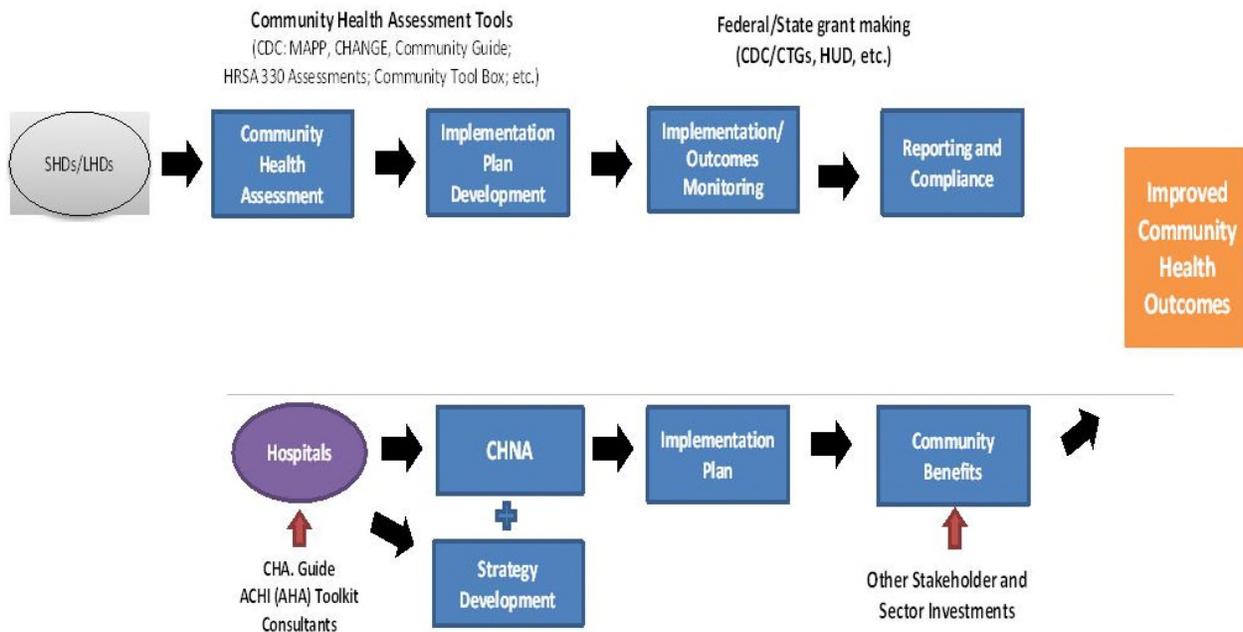
JOB #2: Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be "conducted" in the taxable year that the written report of the CHNA findings is made widely available to the public. *Accordingly, an organization would make a facility's written report widely available by posting the final report on its website either in the form of (1) the report itself, in a readily accessible format, or (2) a link to another organization's website, along with instructions for accessing the report on that website. The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.*

JOB #3: Adopt an Implementation Strategy

The PHAB and the ACA both require an organization to adopt an implementation strategy to meet the needs identified through each CHNA. The Notice defines an “implementation strategy” as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need, or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it.

Great emphasis has been given to work hand-in-hand with leaders from hospitals, the state health department and the local health department. A common approach has been adopted to create the CHNA, leading to aligned implementation plans and community reporting.



IRS Notice 2011-52 Overview

Notice and Request for Comments Regarding the Community Health Needs Assessment Requirements for Tax-exempt Hospitals:

Applicability of CHNA Requirements to “Hospital Organizations”

The CHNA requirements apply to “hospital organizations,” which are defined in Section 501(r) to include (1) organizations that operate one or more state-licensed hospital facilities, and (2) any other organization that the Treasury Secretary determines is providing hospital care as its principal function or basis for exemption.

How and When to Conduct a CHNA

Under Section 501(r), a hospital organization is required to conduct a CHNA for each of its hospital facilities once every three taxable years. ***The CHNA must take into account input from persons representing the community served by the hospital facility and must be made widely available to the public. The CHNA requirements are effective for taxable years beginning after March 23, 2012.*** As a result, a hospital organization with a June 30 fiscal year end must conduct an initial CHNA for each of its hospital facilities by June 30, 2013, either during the fiscal year ending June 30, 2015 or during either of the two previous fiscal years.

Determining the Community Served

A CHNA must identify and assess the health needs of the **community served** by the hospital facility. Although the Notice suggests that geographic location should be the primary basis for defining the community served, it provides that the organization may also take into account the target populations served by the facility (e.g., children, women, or the aged) and/or the facility’s principal functions (e.g., specialty area or targeted disease). *A hospital organization, however, will not be permitted to define the community served in a way that would effectively circumvent the CHNA requirements (e.g., by excluding medically underserved populations, low-income persons, minority groups, or those with chronic disease needs).*

Persons Representing the Community Served

Section 501(r) provides that a CHNA must take into account input from **persons who represent the broad interests of the community** served by the hospital facility, including individuals with special knowledge of or expertise in public health. Under the Notice, the persons consulted must also include: (1) government agencies with current information relevant to the health needs of the community and (2) representatives or members of medically underserved, low-income, and minority populations, and populations with chronic disease needs, in the community. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility’s defined community (e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc.).

Required Documentation

The Notice provides that a hospital organization will be required to separately document the CHNA for each of its hospital facilities in a **written report** that includes the following information: 1) a description of the community served by the facility and how the community was determined; 2) a description of the process and methods used to conduct the CHNA; 3) the identity of any and all organizations with which the organization collaborated and third parties that it engaged to assist with the CHNA; 4) a description of how the organization considered the input of persons representing the community (e.g., through meetings, focus groups, interviews, etc.), who those persons are, and their qualifications; 5) a prioritized description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and 6) a description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

Making a CHNA Widely Available to the Public

The Notice provides that a CHNA will be considered to be “conducted” in the taxable year that the written report of the CHNA findings is made **widely available to the public**. The Notice also indicates that the IRS intends to pattern its rules for making a CHNA “widely available to the public” after the rules currently in effect for Forms 990. Accordingly, an organization would make a facility’s written report widely available by posting on its website either (1) the report itself, in a readily accessible format, or (2) a link to another organization’s website, along with instructions for accessing the report on that website. The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.

How and When to Adopt an Implementation Strategy

Section 501(r) requires a hospital organization to adopt an implementation strategy to meet the needs identified through each CHNA. **The Notice defines an “implementation strategy” as a written plan that addresses each of the needs identified in a CHNA by either (1) describing how the facility plans to meet the health need, or (2) identifying the health need as one that the facility does not intend to meet and explaining why the facility does not intend to meet it.** A hospital organization may develop an implementation strategy in collaboration with other organizations, which must be identified in the implementation strategy. As with the CHNA, a hospital organization that operates multiple hospital facilities must have a separate written implementation strategy for each of its facilities.

Under the Notice, an implementation strategy is considered to be “adopted” on the date the strategy is approved by the organization’s board of directors or by a committee of the board or other parties legally authorized by the board to act on its behalf. Further, the formal adoption of the implementation strategy must occur by the end of the same taxable year in which the written report of the CHNA findings was made available to the public. For hospital organizations with a June 30 fiscal year end, that effectively means that the organization must complete and appropriately post its first CHNA no later than its fiscal year ending June 30, 2013, and formally adopt a related implementation strategy by the end of the same tax year. This final requirement may come as a surprise to many charitable hospitals, considering Section 501(r) contains no deadline for the adoption of the implementation strategy.

Year 2015 - IRS and Treasury Finalize Patient Protection Rules for Tax-Exempt Hospitals

ACCOUNTING TODAY 1/2/15

The Internal Revenue Service and the Treasury Department have issued **final regulations** under the Affordable Care Act to protect patients in tax-exempt hospitals from aggressive debt collection practices and to provide other rules for charitable hospitals.

Under the **final regulations**, each Section 501(c)(3) hospital organization is required to meet four general requirements on a facility-by-facility basis: establish written financial assistance and emergency medical care policies; limit the amounts charged for emergency or other medically necessary care to individuals eligible for assistance under the hospital's financial assistance policy; make reasonable efforts to determine whether an individual is eligible for assistance under the hospital's financial assistance policy before engaging in extraordinary collection actions against the individual; and conduct a community health needs assessment, or CHNA, and adopt an implementation strategy at least once every three years. The first three requirements are effective for tax years beginning after March 23, 2010 and the CHNA requirements are effective for tax years beginning after March 23, 2012.

The ACA also added a new Section 4959, which imposes an excise tax for failure to meet the CHNA requirements, and added reporting requirements. These final regulations provide guidance on the entities that must meet these requirements, the reporting obligations relating to these requirements and the consequences for failing to satisfy the requirements.

“Charitable hospitals represent more than half of the nation’s hospitals and play a key role in improving the health of the communities they serve,” wrote Emily McMahon, Deputy Assistant Secretary for Tax Policy at the U.S. Department of the Treasury, in a **blog post** Monday explaining the requirements. “But reports that some charitable hospitals have used aggressive debt collection practices, including allowing debt collectors to pursue collections in emergency rooms, have highlighted the need for clear rules to protect patients. For hospitals to be tax-exempt, they should be held to a higher standard. That is why the Affordable Care Act included additional consumer protection requirements for charitable hospitals, so that patients are protected from abusive collections practices and have access to information about financial assistance at all tax-exempt hospitals.”

She noted that as a condition of their tax-exempt status, charitable hospitals must take an active role in improving the health of the communities they serve, establish billing and collections protections for patients eligible for financial assistance, and provide patients with the information they need to apply for such assistance. “These final rules adopt the same framework of proposed regulations but simplify the compliance process for charitable hospitals, while continuing to provide meaningful guidance on protections for patients and requirements to assess community health needs,” she added.

Under the new rules, hospitals cannot charge individuals eligible for financial assistance more for emergency or other medically necessary care than the amounts generally billed to patients with insurance (including Medicare, Medicaid, or private commercial insurance). In addition, every tax-exempt hospital must establish and widely publicize a financial assistance policy that clearly describes to patients the eligibility criteria for obtaining financial assistance and the method for applying for financial assistance.

Charitable hospitals are also prohibited from engaging in certain collection methods (for example, reporting a debt to a credit agency or garnishing wages) until they make reasonable efforts to determine whether an individual is eligible for assistance under the hospital's financial assistance policy.

In addition, each charitable hospital needs to conduct and publish a community health needs assessment at least once every three years and disclose on the tax form that it files on an annual basis the steps it is taking to address the health needs identified in the assessment.

Many of the requirements have been in place since the Affordable Care Act passed in 2010, but in response to comments on the proposed regulations, the final rules also expand access to translations for patients, by lowering the threshold for having translations of financial assistance policies available from 10 percent of the community served as proposed, to five percent of the community served or population expected to be encountered by the hospital facility, or 1000 persons, whichever is less, according to McMahon. "The final rules also revise the notification requirements to maintain important protections for patients while making it easier for hospitals to comply with them," she wrote. "General notifications regarding a hospital's financial assistance policy must appear on bills and in the hospital. However, individual written and oral notifications of the hospital's financial assistance policy are now only required when a hospital plans to use extraordinary collections actions, such as reporting a debt to a credit bureau, selling the debt to a third party or garnishing wages."

While charitable hospitals must continue to make a good-faith effort to comply, the rules provide charitable hospitals with time to fully update their policies and programming to implement the changes. But if a charitable hospital fails to meet the consumer protection provisions required by the law, the hospital could have its tax-exempt status revoked. If a hospital fails to properly conduct a community health needs assessment or adopt an implementation strategy, an excise tax will apply, McMahon noted. "However, if a hospital fails to meet a requirement, but the failure is neither willful nor egregious, the hospital can correct and publicly disclose the error to have it excused, thus avoiding revocation of tax-exempt status, but the excise tax would still apply," she wrote.

Domain 1: Conduct and disseminate assessments focused on population health status and public health issues facing the community.

Domain 1 focuses on the assessment of the health of the population in the jurisdiction served by the health department. The domain includes: systematic monitoring of health status; collection, analysis, and dissemination of data; use of data to inform public health policies, processes, and interventions; and participation in a process for the development of a shared, comprehensive health assessment of the community.

DOMAIN 1 INCLUDES FOUR STANDARDS:

- **Standard 1.1** - Participate in or Conduct a Collaborative Process Resulting in a Comprehensive Community Health Assessment
- **Standard 1.2** - Collect and Maintain Reliable, Comparable, and Valid Data That Provide Information on Conditions of Public Health Importance and on the Health Status of the Population
- **Standard 1.3** - Analyze Public Health Data to Identify Trends in Health Problems, Environmental Public Health Hazards, and Social and Economic Factors That Affect the Public's Health
- **Standard 1.4** - Provide and Use the Results of Health Data Analysis to Develop Recommendations Regarding Public Health Policy, Processes, Programs, or Interventions

Seven Steps of Public Health Department Accreditation (PHAB):

1. Pre-Application
2. Application
3. Document Selection and Submission
4. Site Visit
5. Accreditation Decision
6. Reports
7. Reaccreditation

II. Methodology

b) Collaborating CHNA Parties

Working together to improve community health takes collaboration. Listed below is an in-depth profile of the local hospital and health department CHNA partners:

Cooper County Memorial Hospital Profile

17651 Hwy B, Boonville, MO 65233

Interim CEO: Mark Hirshberg

Committed to Elevating the Health of Our Community: Cooper County Memorial Hospital is committed to the people it serves and the communities in which they live. To continue and further our organization's commitment to community health improvement, our hospital recently undertook a comprehensive Community Health Needs Assessment (CHNA). We'll utilize the findings from the assessment to guide various community initiatives and engage appropriate partners to address the various needs that were identified. Through this process, the hospital will strengthen its partnership in the community and elevate the health of those in the surrounding neighborhoods.

Vision: To improve the health of the citizens of the Boonslick Area and surrounding communities by providing personalized healthcare with a commitment to excellence.

Mission: To position Cooper County Memorial Hospital for the future by improving the quality of care we offer in a patient-centered environment while exercising fiscal responsibility and establishing Cooper County Memorial Hospital as an employer of choice.

History: Soon after the turn of the century, a new era began in Cooper County healthcare with the establishment of the area's first organized hospital, St. Joseph's Sanitarium, on the southeast corner of 6th and Locust Streets. This hospital was the idea of Dr. C.H. Van Ravenswaay, a well-educated and experienced Dutch surgeon who came to Boonville in the late 1880's and first established himself at the northeast corner of 6th and Spring. Wanting to expand his business and the quality of healthcare in the area, he talked to the Benedictine Sisters of St. Joseph's Convent in Pilot Grove and encouraged them to help him open a hospital in Boonville in 1905.

By 1911, the success of this venture and the need for more space and better facilities prompted Van Ravenswaay and the Benedictine Sisters to buy the historic plot of land on the edge of town which had been the location of Hannah Cole's fort, the first Missouri State Fair and the Second Battle of Boonville. Here in 1918 was erected St. Joseph's Hospital, a facility that would serve as the center for healthcare in the Boonslick area for more than fifty years. Dr. C.H. Van Ravenswaay was soon joined in Boonville by his brother, Dr. Alex Van Ravenswaay, and he established his own clinic in downtown Boonville on the south side of Spring just east of Main.

Despite several expansions and extensive remodeling of St. Joseph's Hospital in 1927 and in the late 1950's, it became apparent in the mid 1960's that a new facility would have to be built to provide the area with the kind of health care that would be required in the last decades of the 20th century. A special Cooper County Hospital Board Committee consisting of Benton W. Smith, Thomas Miller, R.O. Herfurth, Jim Marshall, Milton Sieckman, and Martin Roedel was appointed to oversee the proposed expansion, and Board Chairman Smith campaigned heavily in 1968-69 to get support for a bond issue that was presented to the people of Cooper County.

The \$1,000,000 bond issue, along with \$1,000,000 federal funds, obtained under the Hill-Burton Act, and private gifts resulted in construction of the present modern one-story facility with its staff of well-trained doctors, nurses, and technicians. On August 5, 1973, the new Cooper County Memorial Hospital was dedicated in a ceremony presided over by Missouri Governor Kit Bond. Further development of the campus through numerous gifts including the Windsor, Redman, Harned, and Smith trusts/estates has enabled CCMH to add medical office buildings to its campus to provide for physician offices, rehabilitation, and renal dialysis.

Services: Cooper County Memorial Hospital takes great pride in giving patients throughout central Missouri access to a wide range of care. We have established relationships with physicians in various specialties so that our patients can be easily referred for necessary additional treatment when their care requires it. These physicians and specialty practices utilize office spaces, surgical areas, or other hospital equipment as part of our partnership so that they are here on-site to provide the care that our patients need, close to home.

- Cardiology
- Cardiopulmonary
- Dermatology
- Ear/Nose/Throat
- Emergency
- Extended Care
- Eye Care (Ophthalmology)
- Family Practice
- Foot Care (Podiatry)
- Gastroenterology
- Infusion Therapies
- Inpatient Services
- Laboratory
- Nephrology
- Neurology
- Occupational Medicine
- Orthopedic Care
- Pain Management
- Physical Therapy
- Radiology
- Rehabilitation
- Respiratory Therapy
- Rheumatology
- Skilled Services
- Sleep Studies
- Speech Therapy
- Sports Medicine
- Surgical Care
- Wellness Center
- Women's Health

Cooper County Public Health Center Profile

17040 Klinton Dr, Boonville, MO 65233

Administrator: Melanie Hutton

About The Cooper County Public Health Center: Cooper County Public Health Center is governed by a five member Board of Trustees. The Cooper County Commission governed the Public Health Center for the first 75 years. In August of 2006 the Citizens of Cooper County voted to pass a separate tax dedicated to only public health. In January of 2007, the Health Center officially transferred away from the Cooper County Commission. The current elected Board of Trustees are as follows: Patty Dick, Cyndi Waller, Janet Harris and John Ward.

The earliest history of any public health nursing in Cooper County was that of the Red Cross Nursing Service, which originated in 1928. It was supported by the Red Cross and a nurse, Miss Smith, was supplied by this organization. At this time there was 105 schools in the county and representatives from the Red Cross did vision and hearing in these schools. Mrs. Ben Stammerjohn, chairman of the Junior Red Cross, visited the schools with the nurse and gave out first aid information. During this time the Rotary Club held a crippled children and eye clinic in Boonville in cooperation with the University of Missouri.

The Red Cross Nursing Service was discontinued for a period of time, then the Cooper County Nursing Service was established in March 1931. The first nurse employed was Miss Dorothy Willis.

Through the history that was given to us by Mrs. Dorothy (Willis) Mansager, who now lives in Richmond, Missouri, we learned that the cost of the Nursing service was shared by the county court and the State Board of Health. The State Board of Health supplied all material for immunization clinics that were held throughout the county. Dr. G. A. Russell, County Health Officer, assisted by the county nurse held these clinics. There was a charge of ten cents (10¢) per child for these immunizations.

Health Care Services

- Immunizations Adult/Child/Travel
- Communicable Disease Investigation
- Reproductive Sexual Health/Pregnancy/Medicaid
- Tuberculosis Testing and Treatment
- Animal Bites and Recommendations
- Blood Pressure/Blood Sugar
- Lead (Blood) Testing

Nutrition Services

- WIC – Women, Infant and Children Program
- Nutrition Education

Environmental Public Service Program

- Information for Food Services Providers
- Cooper County Food Handling/Safety Classes
- Water, Sewer, & Wastewater Information

- Water, Sewer, & Wastewater FAQs
- Health & Safety Inspections
- Flooding Preparation & Recovery
- Recreational Water Illnesses (RWI's)

Emergency Preparedness

- Local, State & Federal
- Planning Summary

- Medical Reserve Corp

Vital Records

- Birth & Death Certificates

II. Methodology

b) Collaborating CHNA Parties Continued

Consultant Qualifications



VVV Consultants LLC

Company Profile: 601 N. Mahaffie, Olathe, KS 66061 (913) 302-7264

VINCE VANDEHAAR, MBA

Principal Consultant and Owner of VVV Consultants LLC

VVV Consultants LLC was incorporated on May 28, 2009. With over 30 years of business and faculty experience in helping providers, payors and financial service firms obtain their strategic planning and research and development needs, Vince brings in-depth health industry knowledge, research aptitude, planning expertise and energy. VVV Consultants LLC services are organized, formal processes of listening to the voice of the customer. Vince started his consulting business after working for Saint Luke's Health System (SLHS) of Kansas City for 16 years. *(Note: Saint Luke's Hospital of Kansas City, SLHS's largest hospital, won the Malcolm Baldrige National Quality Award in March of 2003. The Baldrige examiners cited Vince's department as "Best Practice" in the areas of customer satisfaction, market research and evaluation efforts <Kansas City Star 3/10/04>).*

VVV Consultants LLC consultants has in-depth experience helping hospitals work with local health departments to engage community residents and leaders to identify gaps between existing health community resources and needs and construct detailed strategies to meet those needs, while still adhering to the hospital's mission and budget. Over the past 20 years, Vandehaar has completed eight comprehensive Baldrige aligned Community Health Needs Assessments for Saint Luke's of Kansas City System facilities (three campuses) and was contracted to conduct two additional independent department of health consulting projects (prior to IRS 990 regs). To date, VVV has completed 75 CHNA IRS-aligned assessments for Iowa, Kansas, Missouri and Nebraska hospitals and health departments.

Vince Vandehaar, MBA is actively involved in the Kansas City community. He is a member the Greater Kansas City Employee Benefits Association, the Society for Healthcare Strategy and Market Development, and the American Marketing Association Kansas City Chapter. In addition to these roles, from 2000 to 2008, Vince served as the state chairman for MHA's Data Committee and was a member of KHA's Data Taskforce.

Collaborating Consultants

Alexa Backman, MBA - VVV Consultants LLC
Associate Consultant

II. Methodology

c) CHNA and Town Hall Research Process

Cooper County Memorial Hospital's Community Health Needs Assessment (CHNA) process began in June 2017. At that time, an inquiry was made by Mark Hirshberg, Interim CEO to VVV Consultants LLC to explore the possibility of conducting a comprehensive CHNA. VVV Consultants LLC then reviewed the CHNA experience, in-depth ACA and PHAB CHNA requirements and regulations, CHNA development options to meet ACA and PHAB requirements and next steps after option approval.

VVV CHNA Deliverables:

- Confirm CCMH's Primary Service Area meets the 80-20 Patient Origin Rule.
- Uncover / document basic secondary research and health of the county, organized by 10 tabs.
- Conduct a Town Hall meeting to discuss secondary data and uncover / prioritize county health needs.
- Conduct and report CHNA primary research (with valid N).
- Prepare and publish CHNA report that meets ACA and PHAB requirements.

To ensure proper CCMH Town Hall representation that meets the 80-20 Patient Origin Rule, a patient origin three-year summary was generated and documented the zip codes below as CCMH's Primary Service Area.

Source: Hospital Internal Records							29,437		
Cooper County Memorial Hospital - PSA									
#	ZIP	City	County	Pop14	Pop19	3yr(IEO)	Accum	%	
1	65233	Boonville	COOPER	11,730	11,877	17,677	60.1%	60.1%	
2	65274	New Franklin	HOWARD	1,953	1,998	1,976	66.8%	6.7%	
3	65276	Pilot Grove	COOPER	1,616	1,617	1,456	71.7%	4.9%	
4	65248	Fayette	HOWARD	4,663	4,723	1,284	76.1%	4.4%	
5	65237	Bunceton	COOPER	966	1,005	944	79.3%	3.2%	
6	65250	Franklin	HOWARD	519	543	703	81.7%	2.4%	
7	65322	Blackwater	COOPER	667	673	616	83.8%	2.1%	
8	65068	Prairie Home	COOPER	781	800	556	85.6%	1.9%	
9	65254	Glasgow	HOWARD	1,778	1,807	536	87.5%	1.8%	
10	65287	Wooldridge	COOPER	397	405	225	88.2%	0.8%	
11	65348	Otterville	COOPER	1,353	1,397	119	88.6%	0.4%	

Cooper County Memorial Hospital - CHNA Work Plan

Project Timeline and Roles 2017 (Draft)

Step	Date	Lead	Task
1	5/18/2017	VVV	Sent VVV quote for hospital client's review.
2	5/23/2017	Hosp	Selected CHNA Option C. Approved / signed VVV CHNA quote.
3	5/24/2017	VVV	Send out REQCommInvite Excel file. Hospital client to fill in PSA key stakeholder names, addresses and e-mail addresses.
4	5/24/2017	VVV	Request hospital client to send MHA Patient Origin reports for Cooper Co to document service area for FFY 14, 15, 16. In addition, request hospital client to complete three year historical PSA IP / OP / ED / Clinic Patient Origin file (use ZipPSA_3yrPOrigin.xls).
5	On or before 5/31/2017	VVV	Prepare CHNA stakeholder feedback online link. Send text link for hospital client to review.
6	6/06/2017	ALL	Conduct on site KickOff meeting - 10am at CCMH
7	On or before 6/15/2017	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming CHNA work / online survey for hospital client to place. Request public to participate.
8	6/15/2017	VVV	Launch online survey to stakeholders. Hospital client will e-mail invite to participate to all stakeholders.
9	On or before 6/30/2017	VVV	Assemble and complete secondary research. Find and populate 10 TABS. Create Town Hall PowerPoint for presentation.
10	7/1/2017	Hosp	Prepare and send out community Town Hall invite letter and place local advertisement.
11	7/1/2017	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming Town Hall. VVV will mock up PR release to media sources.
12	On or before 7/31/2017	All	Conduct conference call with hospital client to review Town Hall data and flow.
13	8/29/2017	VVV	Conduct CHNA Town Hall from 5:30-7:00pm at CCBC. Review and discuss basic health data and rank health needs.
14	On or before 8/21/2017	VVV	Complete analysis. Release draft one and seek feedback from leaders at hospital client.
15	On or before 9/4/2017	VVV	Produce and release final CHNA report. Hospital client will post CHNA online.
16	On or before 9/15/2017	TBD	Conduct hospital client Implementation Plan meeting with PSA leadership.
17	30 days prior to end of hospital fiscal year	Hosp	Hold board meetings to discuss CHNA needs, create and adopt an Implementation Plan. Communicate CHNA plan to community.

The Community Health Needs Assessment is not only a requirement for accreditation, but it is a vital part of the Public Health role. To meet ACA and PHAB CHNA requirements, a four-phase methodology was reviewed and approved as follows:

Phase I—Discovery:

Conduct a 30-minute conference call with the CHNA county health department and hospital clients. Review / confirm CHNA calendar of events, explain / coach clients to complete required participant database and schedule / organize all Phase II activities.

Phase II—Qualify Community Need:

A) Conduct secondary research to uncover the following historical community health status for the primary service area. Use Missouri Hospital Association (MHA), Vital Statistics, Robert Wood Johnson County Health Rankings, etc. to document current state of county health organized as follows:

TAB 1. Demographic Profile
TAB 2. Economic/Business Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospitalization / Providers Profile
TAB 6. Behavioral Health Profile
TAB 7. Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

B) Gather historical primary research to uncover public health needs, practices and perceptions for county health department and hospital primary service areas.

Phase III—Quantify Community Need:

Conduct a 90-minute Town Hall meeting with required county primary service area residents. At each Town Hall meeting, CHNA secondary data will be reviewed, facilitated group discussion will occur and a group ranking activity to determine the most important community health needs will be administered.

Phase IV—Complete Data Analysis and Create Comprehensive Community Health Needs Assessment:

Post CHNA report findings to meet ACA and PHAB CHNA criteria.

After consideration of CHNA stakeholders (sponsoring county health department and hospital), the CHNA Option C was selected with the following project schedule:

Phase I: Discovery.....	June 2017
Phase II: Secondary / Primary Research.....	Jul - Aug 2017
Phase III: Town Hall Meeting.....	August 29, 2017
Phase IV: Prepare / Release CHNA report.....	October 2017

Detail CHNA Development Steps Include:

Steps to Conduct Community Health Needs Assessment	
	Development Steps
Step #1 Commitment	<i>Determine interest level of area healthcare leaders (Health Department, Hospital, Mental Health Centers, Schools, Churches and Physicians, etc.) and hold community meeting.</i>
Step #2 Planning	<i>Prepare brief Community Health Needs Assessment plan. List goals, objectives, purpose, outcome, roles, community involvement, etc. Hold community kick-off meeting.</i>
Step #3 Secondary Research	<i>Collect and report community health published facts. Gather health practice data from published secondary research sources (i.e. census, county health records, behavioral risk factors surveillance, etc.).</i>
Step #4a Primary Research	<i>Conduct Community Roundtable (qualitative research). Review secondary research (Step #3) with community stakeholders. Gather current opinions and identify health needs.</i>
Step #4b Primary Research <Optional>	<i>Collect community opinions (quantitative research). Gather current opinions (valid sample size) regarding community health needs and healthcare practices. If appropriate, conduct Physician Manpower Assessment to determine FTE physician need by specialty.</i>
Steps #5 Reporting	<i>Prepare / present comprehensive Community Health Needs Assessment report to community leaders with recommended actions to improve health. (Note: Formal report will follow PHAB regulations).</i>
<p>VVV Consultants LLC (913) 302-7264</p>	

Overview of Town Hall Community Priority Setting Process

Each community has a wealth of expertise to be tapped for CHNA development. For this reason, a Town Hall is the perfect forum to gather community insight and provide an atmosphere to objectively consensus build and prioritize county health issues.

All Town Hall priority-setting and scoring processes involve the input of key stakeholders in attendance. Individuals and organizations attending the Town Halls were critically important to the success of the CHNA. The following list outlines partners invited to the Town Hall: local hospital, public health community, mental health community, free clinics, community-based clinics, service providers, local residents, community leaders, opinion leaders, school leaders, business leaders, local government, faith-based organizations and persons (or organizations serving them), people with chronic conditions, uninsured community members, low income residents and minority groups.

The Cooper County Memorial Hospital PSA Town Hall was held on Tuesday, August 29, 2016 at CCBC. Vince Vandehaar and Alexa Backman facilitated this 1½ hour session with 27 attendees. (Note: a detailed roster of all Town Hall attendees is listed in Section V.)

The following Town Hall agenda was conducted:

1. Welcome and introductions.
2. Review purpose for the CHNA Town Hall and roles in the process.
3. Presentation / review of historical county health indicators (10 Tabs).
4. Facilitate Town Hall participant discussion of data by probing health strengths / concerns. Reflect on size and seriousness of any health concerns cited and discuss current community health strengths.
5. Engage Town Hall participants to rank health needs using four dots to cast votes on priority issues. Tally and rank top community health concerns cited.
6. Close meeting by reflecting on the health needs / community voting results. Inform participants on next steps.

At the end of the Town Hall session, VVV encouraged all community members to continue to contribute ideas to both hospital and health department leaders via e-mail or personal conversations.

(NOTE: To review detail Town Hall discussion content, please turn to Section V for detailed notes of session and activity card content reporting of open-end comments.)

II. Methodology

d) Community Profile (A Description of Community Served)

Cooper County, Missouri Community Profile



Demographics

The population of Cooper County was estimated to be 17,712 on July 1, 2016, and had a 0.6% change in population from April 1, 2010–July 1, 2016.¹ According to the United States Census Bureau, its county seat is Boonville. The county has a total area of 569 square miles, of which 565 square miles is land and 4.4 square miles is water.² Cooper County's population density is 31 persons per square mile and its industries providing employment are Educational (health and social services) (33.4%), Agriculture (forestry, fishing and hunting, and mining) (21.1%), and Finance (insurance, real estate, and rental and leasing) (14.9%).³

The major highway transportation is by Interstate 70, U.S. Route 40, Route 5, Route 41, Route 87, Route 98, Route 135 and Route 179.⁴

¹ <https://www.census.gov/quickfacts/fact/table/coopercountymissouri,US/PST045216>

² U.S. Census Bureau

³ http://www.city-data.com/county/Cooper_County-MO.html

⁴ U.S. Census Bureau

Cooper County Memorial Hospital - PSA Detail Demographic Profile

Zip	Name	County	Population			Households		HH Avg. Size	Per Capita Income 14
			YR 2014	YR 2019	Chg.	YR 2014	YR 2019		
65233	Boonville	COOPER	11,730	11,877	1.3%	4,273	4,334	2.4	\$20,186
65274	New Franklin	HOWARD	1,953	1,998	2.3%	864	888	2.3	\$20,000
65276	Pilot Grove	COOPER	1,616	1,617	0.1%	629	628	2.5	\$20,988
65248	Fayette	HOWARD	4,663	4,723	1.3%	1,738	1,770	2.3	\$18,601
65237	Bunceton	COOPER	966	1,005	4.0%	393	408	2.5	\$20,322
65250	Franklin	HOWARD	519	543	4.6%	200	211	2.6	\$18,865
65322	Blackwater	COOPER	667	673	0.9%	261	264	2.5	\$22,906
65068	Prairie Home	COOPER	781	800	2.4%	310	317	2.5	\$24,375
65254	Glasgow	HOWARD	1,778	1,807	1.6%	738	756	2.4	\$21,689
65287	Wooldridge	COOPER	397	405	2.0%	174	178	2.3	\$29,890
65348	Otterville	COOPER	1,353	1,397	3.3%	538	557	2.5	\$20,022
Totals			26,423	26,845	23.8%	10,118	10,311	2.4	\$21,622

Zip	Name	County	Population				YR 2014		Females Age 20_35
			YR 2014	Pop. 65+	Kids <18	Gen. Y	Males	Females	
65233	Boonville	COOPER	11,730	1,864	2,717	4,122	6,329	5,401	928
65274	New Franklin	HOWARD	1,953	365	471	577	956	997	179
65276	Pilot Grove	COOPER	1,616	316	414	449	791	825	133
65248	Fayette	HOWARD	4,663	766	1,187	1,548	2,315	2,348	554
65237	Bunceton	COOPER	966	128	272	279	490	476	79
65250	Franklin	HOWARD	519	87	133	143	275	244	40
65322	Blackwater	COOPER	667	129	169	173	337	330	40
65068	Prairie Home	COOPER	781	123	217	208	399	382	56
65254	Glasgow	HOWARD	1,778	341	473	478	865	913	154
65287	Wooldridge	COOPER	397	66	88	98	203	194	26
65348	Otterville	COOPER	1,353	222	347	387	675	678	127
Totals			26,423	4,407	6,488	8,462	13,635	12,788	2,316

Zip	Name	County	Population				Aver HH Inc. 14	HH YR 2014	HH \$50K+
			White	Black	Amer. Ind.	Hisp.			
65233	Boonville	COOPER	10,087	1,227	44	209	\$52,385	4,273	1,915
65274	New Franklin	HOWARD	1,846	27	21	28	\$45,208	864	315
65276	Pilot Grove	COOPER	1,569	16	5	18	\$53,507	629	317
65248	Fayette	HOWARD	4,119	387	12	80	\$46,078	1,738	609
65237	Bunceton	COOPER	922	18	2	8	\$49,952	393	165
65250	Franklin	HOWARD	500	5	2	7	\$48,955	200	79
65322	Blackwater	COOPER	656	4	1	6	\$57,583	261	145
65068	Prairie Home	COOPER	747	9	3	9	\$61,410	310	152
65254	Glasgow	HOWARD	1,638	98	6	21	\$51,731	738	268
65287	Wooldridge	COOPER	385	3	1	5	\$68,198	174	99
65348	Otterville	COOPER	1,302	11	5	21	\$50,354	538	245
Totals			23,771	1,805	102	412	\$53,215	10,118	4,309

Source: ERSA Demographics

III. Community Health Status

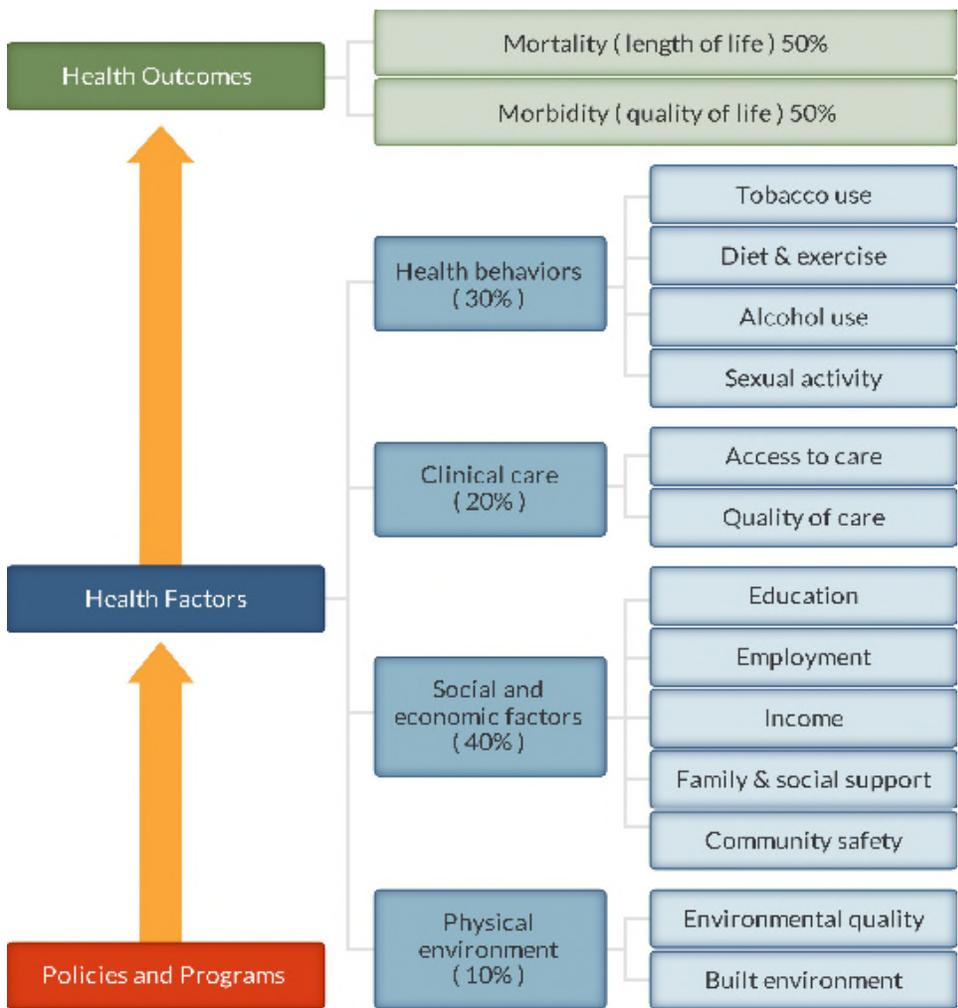
[VVV Consultants LLC]

III. Community Health Status

a) Historical Health Statistics

Health Status Profile

This section of the CHNA reviews published quantitative community health indicators and results of our recent CHNA Town Hall. To produce this profile, VVV Consultants LLC staff analyzed data from multiple sources. This analysis focuses on a set of published health indicators organized by 10 areas of focus (10 Tabs), results from the 2015 County Health Rankings and conversations from Town Hall primary research. **Each table reflects a trend column, with Green denoting growing / high performance indicators, Yellow denoting minimal change / average performance indicators and Red denoting declining / low performance indicators.** (Note: The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to release annual *County Health Rankings*. As seen below in model, these rankings are based on a number of health factors.)



County Health Rankings model ©2012 UWPHI

Secondary Research

2017 State Health Rankings for Cooper County, Missouri

#	MO Rankings - 115 Counties (including St. Louis City)	Definitions	CCMH PSA	TREND	MO RURAL NORM (N=15)
1	Health Outcomes		58		53
2	Mortality	Length of Life	40		52
3	Morbidity	Quality of Life	79		55
4	Health Factors		53		56
5	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	77		52
6	Clinical Care	Access to care / Quality of Care	34		61
7	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	54		58
8	Physical Environment	Environmental quality	70		46
http://www.countyhealthrankings.org , released 2017					
Missouri Rural Norm (N=15) includes the following counties: Cooper, Bates, Moniteau, Howard, Saline, Randolph, Ray, Benton, Morgan, Miller, Monroe, Audrain, Chariton, Carroll and Osage.					

When considering the state of community health, it's important to review published health data by topic area. Below is a summary of key tabs of information collected:

Tab 1 Demographic Profile

Tab		Health Indicator	Cooper Co	Trend	State of MO	MO Rural Norm (15)	Source
1a	a	Population estimates, July 1, 2016, (V2016)	17,712		6,093,000	17,324	People Quick Facts
1a	b	Population, percent change - April 1, 2010 (estimates base) to July 1, 2016, (V2016)	0.6%		1.7%	-1.3%	People Quick Facts
1a	c	Population, Census, April 1, 2010	17,601		5,988,927	17,495	People Quick Facts
1a	d	Persons under 5 years, percent, July 1, 2015, (V2015)	5.6%		6.2%	5.8%	People Quick Facts
1a	e	Persons under 18 years, percent, July 1, 2015, (V2015)	21.8%		22.9%	22.6%	People Quick Facts
1a	f	Persons 65 years and over, percent, July 1, 2015, (V2015)	16.9%		15.7%	19.3%	People Quick Facts
1a	g	Female persons, percent, July 1, 2015, (V2015)	47.3%		50.9%	49.7%	People Quick Facts
1a	h	White alone, percent, July 1, 2015, (V2015) (a)	89.5%		83.3%	94.1%	People Quick Facts
1a	i	Black or African American alone, percent, July 1, 2015, (V2015) (a)	7.3%		11.8%	3.2%	People Quick Facts
1a	j	Hispanic or Latino, percent, July 1, 2015, (V2015) (b)	1.6%		4.1%	2.5%	People Quick Facts
1a	k	Foreign born persons, percent, 2011-2015	1.1%		3.9%	1.3%	People Quick Facts
1a	l	Language other than English spoken at home, percent of persons age 5 years+, 2011-2015	2.5%		6.0%	3.4%	People Quick Facts
1a	m	Living in same house 1 year ago, percent of persons age 1 year+, 2011-2015	85.3%		83.9%	86.3%	People Quick Facts

Tab		Health Indicator	Cooper Co	Trend	State of MO	MO Rural Norm (15)	Source
1b	a	Total Veterans, 2011-2015	1,300		451,342	1,451	People Quick Facts
1b	b	Population per square mile, 2010	31.2		87.1	29.11	Geography Quick Facts
1b	c	Children in single-parent households, percent, 2011-2015	31.0%		34.0%	29.8%	County Health Rankings
1b	d	Persons in poverty, percent	14.4%		14.8%	16.0%	People Quick Facts
1b	e	Limited access to healthy foods, percent, 2010	2.0%		6.0%	0.1%	County Health Rankings
1b	f	Seniors, low access to store, percent, 2010	4.3%		NA	2.6%	U.S. Department of Agriculture - Food Environment Atlas
1b	g	Total Registered Voters in Missouri, 2012	11,433		4,190,936	11,962	Missouri Secretary of State

Tab 2 Economic / Business Profile

Tab	Health Indicator	Cooper Co	Trend	State of MO	MO Rural Norm (15)	Source
2	a Per capita income in past 12 months (in 2015 dollars), 2011-2015	\$23,252		\$26,259	\$21,171	People Quick Facts
2	b Total Housing units, July 1, 2016, (V2016)	7,435		2,760,084	8,642	People Quick Facts
2	c Total Persons per household, 2011-2015	2.5		2.5	2.5	People Quick Facts
2	d Severe housing problems, percent, 2009-2013	11.0%		15.0%	12.0%	County Health Rankings
2	e Total retail sales per capita, 2012 (c)	\$17,194		\$15,036	\$10,493	Business Quick Facts
2	f Total of All firms, 2012	1,062		491,606	1,346	Business Quick Facts
2	g Unemployment, percent, 2015	5.8%		5.8%	5.4%	County Health Rankings
2	h Food insecurity, percent, 2014	16.0%		17.0%	15.5%	County Health Rankings
2	i Grocery stores/1,000 pop (percent change), 2007-2012	-33.2%		NA	-17.1%	U.S. Department of Agriculture - Food Environment Atlas
2	j Low income and low access to store, percent, 2010	7.8%		NA	5.0%	U.S. Department of Agriculture - Food Environment Atlas
2	k SNAP participants (percent eligible population), 2010	89.0%		NA	89.0%	U.S. Department of Agriculture - Food Environment Atlas
2	l Mean travel time to work (minutes), workers age 16 years+, 2011-2015	22.5		23.2	24.4	People Quick Facts
2	m Long commute - driving alone, percent, 2011-2015	36.0%		31.0%	35.7%	County Health Rankings

Tab 3 Educational Profile

Currently, school districts are providing on-site primary health screenings and basic care.

Tab	Health Indicator	Cooper Co	Trend	State of MO	MO Rural Norm (15)	Source
3	a Students Eligible for Free Lunch, percent, 2010	38.1%		38.0%	39.5%	U.S. Department of Agriculture - Food Environment Atlas
3	b High school graduate or higher, percent of persons age 25 years+, 2011-2015	88.1%		88.0%	86.0%	People Quick Facts
3	c Bachelor's degree or higher, percent of persons age 25 years+, 2011-2015	19.5%		27.1%	15.5%	People Quick Facts

TAB 4 Maternal / Infant Health Profile

Tracking maternal and infant care patterns are vital in understanding the foundation of family health.

Tab	Health Indicator	Cooper Co	Trend	State of MO	MO Rural Norm (15)	Source
4	a Care Began First Trimester, percent, 2013	74.8%		74.5%	74.0%	Missouri Department of Health and Senior Services
4	b Preterm Births (less than 37 Weeks Gestation), percent, 2008-2012	13.0%		12.2%	11.9%	Missouri Department of Health and Senior Services
4	c Low Birth Weight, percent, 2008-2012	10.3%		8.0%	7.7%	Missouri Department of Health and Senior Services
4	d Infants Participating in WIC, percent, 2012	53.4%		58.1%	62.7%	Missouri Department of Health and Senior Services
4	e Teen Pregnancy Age 15-17, percent, 2009-2013	14.7%		19.2%	16.2%	Missouri Department of Health and Senior Services
4	f Out-of-Wedlock Births, percent, 2009-2013	36.5%		40.3%	37.4%	Missouri Department of Health and Senior Services
4	g Mother Smoked During Pregnancy, percent, 2013	20.0%		17.5%	25.0%	Missouri Department of Health and Senior Services

Tab	Missouri Department of Health and Senior Services, Vital Statistics	Cooper County	Trend	State of MO
4	a Total Live Births, 2010	187		76,718
4	b Total Live Births, 2011	202		76,069
4	c Total Live Births, 2012	191		75,400
4	d Total Live Births, 2013	205		75,244
4	e Total Live Births, 2014	199		75,104

TAB 5 Hospitalization / Providers Profile

Understanding provider access and disease patterns are fundamental in healthcare delivery. Listed below are several vital county statistics.

Tab	Health Indicator	Cooper Co	Trend	State of MO	MO Rural Norm (15)	Source
5	a Primary care physicians, 2014	2,510:1		1,420:1	4,053:1	County Health Rankings
5	b Preventable hospital stays, 2014	57		57	63	County Health Rankings
5	c Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)	73.0%		72.0%	71.0%	CMS Hospital Compare, 7/1/2015-6/30/2016
5	d Patients Who Reported Yes, They Would Definitely Recommend the Hospital	67.0%		70.0%	66.3%	CMS Hospital Compare, 7/1/2015-6/30/2016
5	e Average Time Patients Spent in the Emergency Dept. Before They Were Seen by a Healthcare Professional (in Minutes)	16.0		21.0	14.3	CMS Hospital Compare, 7/1/2015-6/30/2016

TAB 5 Hospitalization / Providers Profile

#	MHA HIDI PO103	Cooper County, MO			Trend
		FFY14	FFY15	FFY16	
1	Total Discharges	2,037	2,075	2,067	
2	Total IP Discharges-Age 0-17 Ped	60	83	87	
3	Total IP Discharges-Age 18-44	176	201	193	
4	Total IP Discharges-Age 45-64	469	438	431	
5	Total IP Discharges-Age 65-74	318	346	335	
6	Total IP Discharges-Age 75+	464	537	525	
7	Psychiatric	187	129	150	
8	Obstetric	189	170	178	
9	Sug %	25.9%	24.8%	27.5%	
#	MHA HIDI PO103	CCMH Only			Trend
		FFY14	FFY15	FFY16	
1	Total Discharges	202	274	228	
2	Total IP Discharges-Age 0-17 Ped	0	0	0	
3	Total IP Discharges-Age 18-44	4	17	8	
4	Total IP Discharges-Age 45-64	32	47	20	
5	Total IP Discharges-Age 65-74	42	43	37	
6	Total IP Discharges-Age 75+	122	163	158	
7	Psychiatric	2	4	5	
8	Obstetric	0	0	0	
9	Sug %	0.0%	0.0%	0.0%	
#	MHA TOT223E	FFY14	FFY15	FFY16	Trend
1	CCMH Emergency Visits	6,129	5,781	5,328	
2	CCMH OP Surgeries	157	541	915	
3	CCMH OP Total Visits	19,585	18,075	17,812	

TAB 6 Behavioral Health Profile

Behavioral healthcare provides another important indicator of community health status.

Tab	Health Indicator	Cooper Co	Trend	State of MO	MO Rural Norm (15)	Source
6 a	Depression: Medicare Population, percent, 2015	15.9%		20.0%	17.0%	Centers for Medicare and Medicaid Services
6 b	Alcohol-impaired driving deaths, percent, 2011-2015	23.0%		32.0%	31.7%	County Health Rankings
6 c	Poor mental health days, 2015	4.1		4.2	4.2	County Health Rankings

TAB 6 Behavioral Health Profile

Tab		Individuals who received psychiatric services had the following types of disorders. The total number of diagnoses is larger than the number served because some individuals had more than one type of disorder.	CCMH PSA			Trend	Source
			2015	2014	2013		
Diagnosis Category			2015	2014	2013		
6	a	Adjustment Disorder	11	13	0		Missouri Department of Mental Health
6	b	Anxiety Disorder	95	79	67		Missouri Department of Mental Health
6	c	Dementia	0	0	0		Missouri Department of Mental Health
6	d	Developmental Disorder	NA	NA	NA		Missouri Department of Mental Health
6	e	Impulse Control Disorder	21	15	11		Missouri Department of Mental Health
6	f	Mood Disorder	119	98	88		Missouri Department of Mental Health
6	g	Personality Disorder	11	7	9		Missouri Department of Mental Health
6	h	Psychotic Disorder	33	23	23		Missouri Department of Mental Health
6	i	Sexual Disorder	NA	NA	NA		Missouri Department of Mental Health

TAB 7 Risk Indicators / Factors Profile

Knowing community health risk factors and disease patterns can aid in the understanding of next steps to improve health. Being overweight / obese, smoking, drinking in excess, not exercising, etc. can lead to poor health.

Tab		Health Indicator	Cooper Co	Trend	State of MO	MO Rural Norm (15)	Source
7a	a	Adult obesity, percent, 2013	35.0%		31.0%	32.6%	County Health Rankings
7a	b	Adult smoking, percent, 2015	22.0%		22.0%	21.5%	County Health Rankings
7a	c	Excessive drinking, percent, 2015	17.0%		18.0%	15.7%	County Health Rankings
7a	d	Physical inactivity, percent, 2013	27.0%		25.0%	28.0%	County Health Rankings
7a	e	Poor physical health days, 2015	4.2		4.1	4.3	County Health Rankings
7a	f	Sexually transmitted infections, rate, 2014	340.0		462.9	256.3	County Health Rankings

TAB 7 Risk Indicators / Factors Profile

Tab	Health Indicator	Cooper Co	Trend	State of MO	MO Rural Norm (15)	Source
7b a	% Hypertension: Medicare Population, 2015	45.1		54.6	52.9	Centers for Medicare and Medicaid Services
7b b	% Hyperlipidemia: Medicare Population, 2015	30.1		41.8	38.7	Centers for Medicare and Medicaid Services
7b c	% Heart Failure: Medicare Population, 2015	13.0		13.7	14.0	Centers for Medicare and Medicaid Services
7b d	% Chronic Kidney Disease: Medicare Pop, 2015	12.7		18.2	14.2	Centers for Medicare and Medicaid Services
7b e	% COPD: Medicare Population, 2015	11.0		13.4	13.7	Centers for Medicare and Medicaid Services
7b f	% Atrial Fibrillation: Medicare Population, 2015	8.4		8.1	8.5	Centers for Medicare and Medicaid Services
7b g	% Cancer: Medicare Population, 2015	7.3		7.8	7.6	Centers for Medicare and Medicaid Services
7b h	% Osteoporosis: Medicare Population, 2015	5.2		5.8	5.3	Centers for Medicare and Medicaid Services
7b i	% Asthma: Medicare Population, 2015	5.9		8.6	7.8	Centers for Medicare and Medicaid Services
7b j	% Stroke: Medicare Population, 2015	4.2		3.9	4.0	Centers for Medicare and Medicaid Services

TAB 8 Uninsured Profile

Based on state estimations, the number of insured is documented below. Also, the amount of charity care from area providers is trended below.

Tab	Health Indicator	Cooper Co	Trend	State of MO	MO Rural Norm (15)	Source
8 a	Uninsured, percent, 2014	14.0%		14.0%	16.1%	County Health Rankings

	Cooper County Memorial Hospital	YR 2014	YR 2015	YR 2016	Trend
1	Bad Debt	\$2,401,954	\$2,369,488	\$2,207,183	
2	Charity Care	\$543,000	\$514,000	\$411,002	

Source: Internal DOH Records

	Cooper County Public Health Center	YR 2014	YR 2015	YR 2016	Trend
1	Core Public Health	\$208,722	\$208,191	\$197,051	
2	MCH	\$24,555	\$24,493	\$23,183	
3	WIC Administration	\$36,833	\$36,740	\$34,774	
4	Child Care Inspections	\$12,278	\$12,246	\$11,591	
5	Child Care Nurse Consultant	\$12,278	\$12,246	\$11,591	
6	PHEP	\$24,555	\$24,493	\$23,183	
7	Immunizations/Vaccine	\$24,555	\$24,493	\$23,183	

TAB 9 Mortality Profile

The leading causes of county deaths are listed below. Areas of higher than expected are so noted.

Tab	Health Indicator	Cooper Co	Trend	State of MO	MO Rural Norm (15)	Source
9 a	Life Expectancy for Males, 2004-2012	75.3		74.6	74.6	Missouri Department of Health and Senior Services
9 b	Life Expectancy for Females, 2004-2012	79.4		79.7	79.5	Missouri Department of Health and Senior Services
9 c	Heart Disease Mortality (rate), 2003-2013	252.7		216.7	233.8	Missouri Department of Health and Senior Services
9 d	Chronic Lower Respiratory Disease Mortality (rate), 2003-2013	47.7		50.3	52.9	Missouri Department of Health and Senior Services
9 e	Suicide (rate), 2014	15.1		13.7	13.0	Missouri Department of Health and Senior Services

#	Causes of Death by County of Residence, Missouri Department of Health and Senior Services, 2015	Cooper County	%	Trend	State of MO	%
1	Total for selection	190	100.0%	0.0%	59,810	100.0%
2	Heart disease: All other forms of heart disease	31	16.3%	10.9%	3,264	5.5%
3	Other diseases/conditions: All other diseases	22	11.6%	2.9%	5,197	8.7%
4	Cancer: Malignant neoplasm of trachea/bronchus/lung	14	7.4%	0.9%	3,864	6.5%
5	Heart disease: All other forms of chronic ischemic heart disease	12	6.3%	-0.5%	4,105	6.9%
6	Heart disease: Heart failure	11	5.8%	2.1%	2,195	3.7%
7	Chronic lower respiratory diseases: Other chronic lower resp diseases	10	5.3%	-0.8%	3,648	6.1%
8	Alzheimer's disease	7	3.7%	0.1%	2,169	3.6%
9	Diabetes	7	3.7%	1.2%	1,464	2.4%
10	Other respiratory diseases: Other diseases of respiratory system	6	3.2%	1.5%	971	1.6%
11	Stroke (cerebrovascular diseases)	6	3.2%	-1.9%	3,021	5.1%

TAB 10 Preventive Quality Measures Profile

The following table reflects the future health of the county. This information also is an indicator of community awareness of preventative measures.

Tab	Health Indicator	Cooper Co	Trend	State of MO	MO Rural Norm (15)	Source
10	a Access to exercise opportunities, percent, 2014	45.0%		76.0%	41.4%	County Health Rankings
10	b Diabetes monitoring, percent, 2014	86.0%		86.0%	85.2%	County Health Rankings
10	c Mammography screening, percent, 2014	58.0%		63.0%	59.0%	County Health Rankings
10	d Percent Annual Check-Up Visit with PCP	NA		NA	NA	TBD
10	e Percent Annual Check-Up Visit with Dentist	NA		NA	NA	TBD
10	f Percent Annual Check-Up Visit with Eye Doctor	NA		NA	NA	TBD

Community Feedback Research

For a CHNA, it's also important to gather community perspective from key stakeholders on their views of progress to address the baseline CHNA needs documented three years ago. Below are findings of this online community primary research:

Question 1—Overall Quality of Healthcare Delivery

Cooper County Memorial Hospital - Primary Service Area N=210						
1. How do you rate the "Overall Quality" of healthcare delivery in our community?						
Answer Options	Very Good	Good	Fair	Poor	Very Poor	Valid N
Cooper County Memorial Hospital PSA N=210	16	113	61	15	5	210
Top 2 Boxes (Very Good / Good)	61.4%		29.0%	7.1%	2.4%	
Option C Stakeholders	1,312	3,007	1,300	210	46	5,875
Top 2 Boxes (Very Good / Good)	73.5%		22.1%	3.6%	0.8%	

Question 9—Requested Discussion Items for Town Hall Agenda

Cooper County Memorial Hospital - Primary Service Area N=210			
9. Are there any other health needs from the list below that need to be discussed at our upcoming CHNA Town Hall meeting?	Option C Stakeholders Bottom 2 Boxes	CCMH PSA N=210	Trend
Abuse / Violence	4.8%	5.3%	
Alcohol	4.8%	4.1%	
Breast Feeding Friendly Workplace	0.1%	1.8%	
Cancer	4.5%	3.4%	
Diabetes	4.8%	4.1%	
Drugs / Substance Abuse	9.0%	10.2%	
Family Planning	2.8%	2.7%	
Heart Disease	3.6%	3.4%	
Lead Exposure	0.7%	0.7%	
Mental Illness	9.1%	8.8%	
Nutrition	4.8%	3.2%	
Obesity	7.7%	7.3%	
Ozone	4.7%	0.1%	
Physical Exercise	5.4%	5.0%	
Poverty	3.0%	5.7%	
Respiratory Disease	2.2%	1.4%	
Sexual Transmitted Infections	4.7%	2.9%	
Smoke-Free Workplace	0.1%	3.5%	
Suicide	4.1%	4.8%	
Teen Pregnancy	4.0%	3.1%	
Tobacco Use	3.8%	5.0%	
Vaccinations	2.9%	2.2%	
Water Quality	5.6%	6.0%	
Wellness Education	2.0%	5.3%	
Other (please specify)	1.0%	1.7%	
TOTAL	100.0%	100.0%	

Questions 5-6—Rating of Healthcare Services

Cooper County Memorial Hospital - Primary Service Area N=210			
5. How would Cooper County area residents rate each of the following health services?	Option C Stakeholders Bottom 2 Boxes	CCMH PSA N=210	Trend
Ambulance Services	5.7%	9.9%	Yellow
Child Care	18.0%	13.9%	Red
Chiropractors	6.0%	7.4%	Yellow
Dentists	6.6%	5.7%	Yellow
Emergency Room	11.6%	20.1%	Red
Eye Doctor / Optometrist	7.3%	4.4%	Green
Family Planning Services	12.7%	23.8%	Red
Home Health	8.0%	9.9%	Yellow
Hospice	4.3%	7.6%	Yellow
Inpatient Services	4.9%	16.7%	Red
Mental Health Services	10.0%	45.2%	Red
Nursing Home	15.0%	15.6%	Red
Outpatient Services	5.1%	11.3%	Red
Pharmacy	5.2%	2.1%	Green
Primary Care	10.9%	9.0%	Yellow
Public Health Department	29.2%	6.6%	Yellow
School Nurse	10.9%	7.9%	Yellow
Visiting Specialists	6.9%	5.1%	Yellow

Question 7—Rating of Public Health Service

Cooper County Memorial Hospital - Primary Service Area N=210		
7. How would Cooper County area residents rate each of the following Cooper County Public Health services?	CCMH PSA N=210	Trend
Immunizations	7.1%	Yellow
WIC Nutrition Program	3.9%	Green
Communicable Disease Investigations	11.1%	Red
Health Education offerings	15.3%	Red
Sexually Transmitted Disease Testing	12.0%	Red
Health Inspections	12.2%	Red
Emergency Preparedness	8.0%	Yellow
Birth and Death Certificates issue	1.8%	Green
Breastfeeding Education	6.3%	Yellow

Question 8—Healthcare Services Outside of PSA

Cooper County Memorial Hospital - Primary Service Area N=210			
8. Throughout the past two years, did you or someone you know receive healthcare services outside of the Cooper County Memorial Hospital Primary Service Area?	Option C Stakeholders Bottom 2 Boxes	CCMH PSA N=210	Trend
Yes	79.2%	78.9%	
No	14.4%	14.5%	
Don't know	6.4%	6.6%	
TOTALS	100.0%	100.0%	

IV. Inventory of Community Health Resources

[VVV Consultants LLC]

Inventory of Healthcare Services - CCMH PSA

Cat	Healthcare Services Offered in County: Yes / No	Hospital	Health Dept.	Other
Clinic	Primary Care	x		x
Hosp	Alzheimer Center			x
Hosp	Ambulatory Surgery Centers			
Hosp	Arthritis Treatment Center			
Hosp	Bariatric / Weight Control Services			
Hosp	Birthing / LDR / LDRP Room			
Hosp	Breast Cancer Services			
Hosp	Burn Care			
Hosp	Cardiac Rehabilitation			
Hosp	Cardiac Surgery			
Hosp	Cardiology Services	x		
Hosp	Case Management	x		x
Hosp	Chaplaincy / Pastoral Care			
Hosp	Chemotherapy			
Hosp	Colonoscopy	x		
Hosp	Crisis Prevention			x
Hosp	CT Scanner	x		
Hosp	Diagnostic Radioisotope Facility			
Hosp	Diagnostic / Invasive Catheterization			
Hosp	Electron Beam Computed Tomography (EBCT)			
Hosp	Enrollment Assistance	x	x	x
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)			
Hosp	Fertility Clinic			
Hosp	Full Field Digital Mammography (FFDM)			x
Hosp	Genetic Testing / Counseling			
Hosp	Geriatric Services		x	x
Hosp	Heart Services			
Hosp	Hemodialysis			x
Hosp	HIV / AIDS Services			
Hosp	Image-Guided Radiation Therapy (IGRT)			
Hosp	Inpatient Acute Care Services	x		
Hosp	Intensity-Modulated Radiation Therapy (IMRT) 161			
Hosp	Intensive Care Unit			
Hosp	Intermediate Care Unit			
Hosp	Interventional Cardiac Catheterization			
Hosp	Isolation Room	x		
Hosp	Kidney Services			x
Hosp	Liver Services			
Hosp	Lung Services	x		
Hosp	Magnetic Resonance Imaging (MRI)	x		
Hosp	Mammograms			x
Hosp	Mobile Health Services			
Hosp	Multi-slice Spiral Computed Tomography (<64 Slice CT)	x		
Hosp	Multi-slice Spiral Computed Tomography (64+ Slice CT)			
Hosp	Neonatal Services			
Hosp	Neurological services			
Hosp	Obstetrics Services			

Inventory of Healthcare Services - CCMH PSA

Cat	Healthcare Services Offered in County: Yes / No	Hospital	Health Dept.	Other
Hosp	Occupational Health Services			
Hosp	Oncology Services			
Hosp	Orthopedic Services			
Hosp	Outpatient Surgery	x		
Hosp	Pain Management	x		
Hosp	Palliative Care Program			x
Hosp	Pediatric Services			x
Hosp	Physical Rehabilitation	x		
Hosp	Positron Emission Tomography (PET)			
Hosp	Positron Emission Tomography / CT (PET / CT)			
Hosp	Psychiatric Services			x
Hosp	Radiology, Diagnostic	x		
Hosp	Radiology, Therapeutic			
Hosp	Reproductive Health			
Hosp	Robotic Surgery			
Hosp	Shaped Beam Radiation System 161			
Hosp	Single Photon Emission Computerized Tomography			
Hosp	Sleep Center			
Hosp	Social Work	x	x	x
Hosp	Sports Medicine			
Hosp	Stereotactic Radiosurgery			
Hosp	Swing Bed Services	x		
Hosp	Transplant Services			
Hosp	Trauma Center -Level IV			
Hosp	Ultrasound	x		x
Hosp	Women's Health Services			x
Hosp	Wound Care			
SR	Adult Day Care Program			x
SR	Assisted Living			x
SR	Home Health			x
SR	Hospice			x
SR	Long-term Care	x		x
SR	Nursing Home	x		x
SR	Retirement Housing			x
SR	Skilled Nursing Care	x		x
ER	Emergency Services	x		
ER	Urgent Care Center			
ER	Ambulance Services			x
SERV	Alcoholism-Drug Abuse Services			x
SERV	Blood Donor Center			
SERV	Chiropractic Services			x
SERV	Complementary Medicine Services		x	x
SERV	Dental Services			x
SERV	Fitness Center	x		x
SERV	Health Education Classes	x	x	x
SERV	Health Fair		x	x

Inventory of Healthcare Services - CCMH PSA

Cat	Healthcare Services Offered in County: Yes / No	Hospital	Health Dept.	Other
SERV	Health Information Center		x	x
SERV	Health Screenings		x	x
SERV	Meals on Wheels			x
SERV	Nutrition Program	x	x	x
SERV	Patient Education Center		x	x
SERV	Support Groups	x		x
SERV	Teen Outreach Services			x
SERV	Tobacco Treatment / Cessation Program		x	x
SERV	Transportation to Health Facilities			x
SERV	Wellness Program	x		x

Providers Delivering Care			
Cooper County Memorial Hospital - Primary Service Area			
FTE Providers Working in PSA	FTE Physicians		FTE Allied Staff
	FTE MD / DO	Visiting DR*	FTE NP / PA
Primary Care:			
Family Practice	3.0		2.0
Internal Medicine / Geriatrics			
Obstetrics / Gynecology			
Pediatrics			
Medicine Specialists:			
Allergy / Immunology			
Cardiology			
Dermatology			
Endocrinology			
Gastroenterology			
Oncology / Radiology			
Infectious Disease			
Nephrology			
Neurology			
Psychiatry			
Pulmonary			
Rheumatology			
Surgery Specialists:			
General Surgery / Colon / Oral			
Neurosurgery			
Ophthalmology			
Orthopedics			
Otolaryngology			
Plastic / Reconstructive Surgery			
Thoracic / Cardiovascular / Vascular Surgery			
Urology			
Hospital Based:			
Anesthesia / Pain Management			
Emergency Medicine		See note below	See note below
Radiology		See note below	See note below
Pathology		See note below	See note below
Hospitalist			
Neonatology / Perinatology			
Physical Medicine / Rehabilitation			
Occupational Medicine			
Podiatry			
Chiropractic			
Optometry			
Dental			
TOTALS	3.0	0.0	2.0

*FTE Specialists serving the community who office outside the PSA

Emergency Medicine-CCMH has 6 part time physicians and 2 part time mid levels and 1 full time mid level who was just hired but hasn't started in the ER yet. The amount of shifts that each of the part time providers works varies by month and can't be easily quantified into an FTE count.

Radiology-CCMH contracts with a radiology group that reads all images remotely.

Pathology-CCMH contracts with a pathology group in Columbia. One of their pathologists usually comes to CCMH maybe one time per week.

Visiting Specialists to Cooper County Memorial Hospital

Specialty	Physician Name	Office Location	Schedule	Days per Month
Cardiology	William Fay, M.D.	Columbia, MO	1 day per week	
Nephrology	Ramesh Khanna, M.D.	Columbia, MO	3 days per month	
Podiatry	Jonathan Fallis, DPM	Moberly, MO	4 days per month	
ENT	Kirk Wanless, M.D.	Moberly, MO	2 days per month	
Dermatology	Luke Welch, M.D.	Columbia, MO	1 day per week	
Pain Mgmt.	Richard Wolkowitz, M.D.	Columbia, MO	1 day per month	
Pulmonology	Christine Monti, M.D.	Columbia, MO	2 days per month	
Podiatry	R. Scott Foster, DPM	Columbia, MO	2 days per month	
General Surgery	Reggie Vaden, M.D.	Columbia, MO	2 days per month	
Rheumatology	Daniel Jost, M.D.	Columbia, MO	1 day per month	
GI	Donald Gerhardt, M.D.	Columbia, MO	2 days per month	
OB/GYN	Michael Jones, M.D.	Mexico, MO	1 day per month	

Cooper County, Missouri Healthcare Resources Directory

Emergency Numbers

Police/Sheriff	911
Fire	911
Ambulance	911

Non-Emergency Numbers

	<i>Police</i>	<i>Ambulance</i>
Blackwater	(660) 882-2771	(660) 882-7461
Boonville	(660) 882-2727	(660) 882-7461
Bunceton	(660) 888-3766	(660) 882-7461
Otterville	(660) 366-4411	(660) 882-7461
Pilot Grove	(660) 834-4300	(660) 882-7461
Prairie Home	(660) 841-5254	(660) 882-7461

Hot Lines and Help Lines

Emergency Information

In Case of Emergency
911

Boonville Police Department
660-882-2727

Cooper County Fire Protection District
660-882-6111

Cooper County Sheriff's Office
660-882-2771

(800) Information
1-800-555-1212 or 411

Central Missouri Community Action
Cooper County Family Resource Center
660-882-5601

Missouri State Highway Patrol
Troop F
573-751-1000

Salvation Army
660-882-5601

United Way 211
Information and Referral
211

Relay Missouri
711

Abuse Intervention

Child Abuse and Neglect Hotline
Missouri: 1-800-392-3738
National: 1-800-422-4453

Division of Senior Services
1-800-392-0210

Domestic Violence Hotline
WINGS Boonville: 660-537-4511
National Hotline: 1-800-799-SAFE (7233)
or 1-800-787-3224 (TTY)

National Teen Dating Abuse Helpline
1-866-331-9474
1-866-331-8453 (TTY)

Addictions/Crisis Support

Alcohol and Drug Abuse Hotline
1-800-234-0420

Alcohol and Drug Treatment Referral
1-800-454-8966

Alcohol Treatment Referral Hotline
1-800-252-6465

Celebrate Recovery
Santa Fe Trail Baptist Church
660-882-5452

National Helpline for Mental and/or
Substance Abuse Disorders
1-800-662-HELP (4357)

Cocaine Abuse 24 Hour Hotline
1-800-262-2463

Crisis Help Line-for any kind of crisis
1-800-233-4357

Drug Free Workplace Hotline
1-800-967-5752

Eating Disorder Hotline
1-800-931-2237

National Problem Gambling Help Line
Network
1-800-522-4700

MADD (Mothers Against Drunk Driving)
1-800-438-6233

SATOP OMU OEP WIP of Mid-Missouri
Substance Abuse Traffic Offenders
Program
1-660-263-7552

Aging/Disabled Information

American Association of Retired Persons
(AARP)
1-800-424-3410

Central Missouri Area Agency on Aging
660-882-3444

CLAIM-Medicare and Medicaid Questions
1-800-390-3330

Division of Senior Services
1-800-392-0210

Elder Care Locator
1-800-677-1116

Hearing Aid Helpline
1-800-521-5247

Medicaid Fraud Hotline
1-800-286-3932

Medicare Fraud and Information Hotline
1-800-633-4227

Missouri Division of Senior and Disability
Services
Department of Health and Senior Services
912 Wildwood
Jefferson City, MO 65109
(573) 751-6001
(800) 235-5503 (Toll-Free)

Missouri Protection and Advocacy for the
Disabled
1-800-392-8667

Missouri Senior's Legal Helpline
1-800-235-5503

Rehabilitation Services for the Blind
1-800-592-6004

Senior Medicare Patrol (SMP)
1-888-515-6565

Social Security Information Line
1-800-772-1213

Social Security-Sedalia Office
1-877-405-5459

Consumer Protection

Consumer Protection Hotline
1-800-392-8222

Utility Complaints
1-800-392-4211
1-866-735-2460 (TTY)

Counseling/Mental Health

Access Crisis Intervention Hotline Missouri
Department of Mental Health
1-800-395-2132

Crisis Counselor Text Hotline
Text: 741741

Deafline Missouri
1-800-380-3323

Depression and Bipolar Support Alliance
(DBSA)
1-800-826-3632

Mid-Missouri Crisis Line
1-888-761-4357

Missouri Department of Mental Health
1-800-364-9687

National Alliance on Mental Illness
1-800-950-6264 or
1-800-374-2138

Pastoral Counseling Services
1-573-443-4422

Crime Victim Support

Arson Alert Program
1-800-392-7766

Crime Stoppers
1-573-875-8477

Identity Theft Resource Center
1-888-400-5530

Missouri Department of Public Safety
Crime Victim Services Unit
1-866-334-6682

Missouri School Violence Hotline
1-866-748-7047

National Center for Missing and Exploited
Children
1-800-843-5678

Sexual Assault Hotline
1-800-656-4673

Sexually Transmitted Disease Hotline
1-800-227-8922

Victim Connect
National Hotline for Crime Victims
1-855-4-VICTIM (1-855-484-2846)

Disaster Assistance

American Red Cross
1-800-733-2767

Disaster Distress Helpline
1-800-985-5990
1-800-846-8517 (TTY)

Toxic Chemical and Oil Spills
1-800-424-8802

Government Programs

Environmental Protection Agency
1-800-223-0425

Immigration and Naturalization
1-800-375-5283
1-800-767-1833 (TTY)

Internal Revenue Service
1-800-829-1040

Missouri Department of Economic
Development
1-800-523-1434

Missouri Department of Revenue
1-573-751-3505
1-800-735-2966 (TTY)

Missouri No Call
1-866-662-2551

Missouri Public Service Commission
1-800-392-4211
1-866-735-2460 (TTY)

OSHA (Occupational Safety and Health
Administration) Hotline
1-800-321-6742
1-877-889-5627 (TTY)

Volunteer Income Tax Association (VITA)
1-800-906-9887

Legal Assistance

Insurance Consumer Hotline
1-800-726-7390

Mid-Missouri Legal Services Corporation
1-800-568-4931

Missouri Attorney General's Office
1-573-751-3321

Missouri Senior's Legal Helpline
1-800-235-5503

LGBTQ Resources

The Cooper County LGBTQ Alliance
LGBTQ Helpline
The Trevor Project
1-866-488-7386

The Center Project
573-449-1188

Medical Information

ALS Association
1-888-386-1200

Alzheimer Association 24/7 Helpline
1-800-272-3900

Alzheimer's Association of Mid-Missouri
1-800-693-8665

American Cancer Society Helpline
1-800-227-2345

American Diabetes Association
1-800-342-2383

American Heart Association
1-800-242-8721

American Lung Association
1-800-586-4872

American Stroke Association
1-800-478-7653

Autism Spectrum Disorder Foundation
(ASDF)
1-877-806-0635

Childhood Lead Poisoning Protection
Missouri Department of Health and Senior
Services
1-866-628-9891

Division of Environmental Quality
MO Department of Natural Resources
1-800-361-4827

Epilepsy Foundation of St. Louis Region
1-800-332-1000

Home Health and Hospice Hotline
1-800-392-0210

Immunization Information Hotline
1-800-232-2522
1-800-232-0233 (Spanish)

International Hearing Society Hearing Aid
Helpline
1-800-521-5247

Missouri Radon Hotline
1-800-669-7236

Missouri Tobacco Quitline
1-800-784-8669

Multiple Sclerosis Society
1-800-628-1753

Poison Help Line
1-800-222-1222

Parent Issues

Child Support Customer Relations Help Line
1-800-859-7999

Depression after Delivery
1-800-944-4773

Missouri Foster Care/Adoption Line
1-800-554-2222

Parental Stress Helpline (Crisis)
1-800-367-2543

Parent Link
1-800-552-8522 or 573-882-7323
Text: 585-FAMILY1 (585-326-4591)

Sudden Infant Death Syndrome Resource,
Inc.
1-800-421-3511

Suicide Prevention

LGBTQ Helpline The Trevor Project
1-866-488-7386

Missouri Suicide Hotline
Behavior Health Crisis Hotline
1-800-395-2132

National Suicide Prevention Lifeline
1-800-273-8255
1-888-628-9454 (Spanish)
1-800-799-4889 (TTY)

Veteran's Suicide Prevention Lifeline
1-800-273-8255, then press 1

Veterans Assistance

Stop Veteran Homelessness 24/7
1-877-424-3838

Veterans Administration
1-800-827-1000

Veteran's Suicide Prevention Lifeline
1-800-273-8255, then press 1

Welcome Home, Inc.
Serving Homeless Veterans
1-573-443-8001 ext. 103

Youth Crisis

Girls and Boys Town National Hotline
1-800-448-3000

National Center for Missing and Exploited
Children
1-800-843-5678

National Runaway Switchboard
1-800-786-2929

National Youth Crisis Hotline
1-800-448-4663

Teen Crisis Hotline
1-800-999-9999

Food Resources

American Red Cross - Columbia North and
Central Missouri
1511 S. Providence Road
Columbia, MO 65203
573-499-2656

Boonslick Senior Center - Meals on Wheels/
Home Delivered Program
512 Jackson Road
Boonville, MO 65233
660-882-2344

Cooper County Public Health Center – WIC
17040 Klinton Drive
Boonville, Missouri 65233
660-882-2626

Division of Family Services – SNAP
409 High Street
Boonville, MO 65233
660-882-5311

Mother's Cupboard (As the River Flows)
1111 Rural Street
Boonville, MO 65233
660-882-9699

Neighbors Helping Neighbors
509 Water Street
Boonville, MO 65233
660-888-9750

New Franklin Cares Food Pantry
105 E. Broadway
New Franklin, MO 65274

Otterville Presbyterian Church
101 Grover Street
Otterville, MO 65348
660-336-4280

Prairie Home United Methodist Church
540 Hwy Drive, Hwy 87
Prairie Home, MO 65069

Tiger Packs - Pilot Grove C-4 Schools
107 School Street
Pilot Grove, MO 65276
660-834-6915

Clothing Resources

American Red Cross
1511 S. Providence Road
Columbia, MO 65203
1-573-449-2656

Baby Grace
407 E Spring St
Boonville, MO 65233
660-888-201

Central Missouri Community Action-
Community Clothing Closet
401 East High Street
Boonville, MO
660-882-5601

Central Missouri Community Action-
Business/Professional Clothing Closet
401 East High Street
Boonville, MO
660-882-5601

Nelson Memorial Methodist Church
407 E Spring St
Boonville, MO 65233
660-882-6223

The Attic
108 N Church St
Fayette, MO 65248
660-248-2693

Bethel Purim Ministries - The Hope Chest
1111 Rural St
Boonville, MO 65233
660-882-9699

Salvation Army
1108 West Ash
Columbia, MO
(573) 442-3229

Savvy Seconds
1620 W. Ashley Rd.
Boonville, MO 65233
660-882-3948

Shelter Resources

Harvest House
PO Box 223 or 1224 Rural Street
Boonville, MO 65233
660-537-4278 or
660-672-0176

Boonville Housing Authority
506 Powell Court
Boonville, MO
660-882-7332

Village Meadow
1400 Village Dr.
Boonville, Missouri 65233
660-882-2020

Women in Need of Getting Shelter (WINGS)
1640 Radio Hill Road
Boonville, MO
(660) 537-4511
or 660-882-5202

Boonslick Habitat for Humanity
PO Box 123
Boonville, MO 65233
660-474-0265

TReSAP
P.O. Box 332
Boonville, MO 65233
314-329-8586

Health/Pharmacy

Boone Medical Group
606 East Spring
Boonville, MO 65233
660-882-3955

BTC Healthcare
17110 Hwy 87
Boonville, MO 65233
660-882-3145

Central Missouri Health Care Associates,
LLC
1417 Bingham Rd
Boonville, MO 65233
660-882-8018

Cooper County Memorial Hospital
17601 B Hwy
Boonville, MO 65233
660-882-7461

Cooper County Public Health Center
17040 Klinton Dr
Boonville, MO 65233
660-882-2626

Cooper County Rural Health Clinic
17601 B Hwy
Boonville, MO 65233
660-882-2121

Family Health Center
1001 W. Worley
Columbia, MO 65203
(573) 214-2314
(877) 677-4342

Fitzgibbon Family Health
600 W. Morrison, Suite 5
Fayette, MO 65248
660-248-290

MU Family Medicine-Fayette Clinic
308 S Church
Fayette, MO 65248
660-248-2217

Pilot Grove Rural Health Clinic
212 College St
Pilot Grove, MO 65276
660-834-5100

MO HealthNet
615 Howerton Ct
Jefferson City, MO, 65109
573-751-3425
855-373-4636

Boone Home Care & Hospice
1605 E. Broadway, Suite 250
Columbia, MO 65201
573-875-0555

Four Seasons In-Home Services
1801 S Limit
Sedalia, MO 65301
866-746-2600

Help at Home
1900 N Providence Rd, Ste 105
Columbia, MO 65202
573-256-8337
or 573-823-7785

Hometown Homecare
101 Furr St
Fayette, MO 65248
660-248-2100
Toll Free: 866-748-2100

Hospice Compassus
3050 I-70 Dr SE, Suite 100
Columbia, MO 65201
1 (573) 355-5180

Integrity Home Care + Hospice
905 Safari Dr #105
Columbia, MO 65202
(855) 442-4968

Oxford Healthcare
1400 Heriford Rd., Suite 104
Columbia, MO 65202
573-474-1530

Medical Arts Pharmacy
800 Main St
Boonville, MO 65233
660-882-5208

Wal-Mart Pharmacy
2150 S Hwy B
Boonville, MO 65233
660-882-6552

Community Medical
Colonel Sanders Ln
Boonville, MO 65233
660-882-9270

Mental Health Services

Bonnie Riley & Associates
413 E Spring St
Boonville, MO 65233
(660) 882-6400

Celebrate Recovery Ministry (Santa Fe Trail
Baptist Church)
17752 Boonslick Rd
Boonville, MO 65233
(660) 882-5452

Center for Women's Ministries
660-888-8410
573-220-1184

Family Counseling Center
319 Main St
Boonville, MO 65233
(660) 882-2400

Laura McMurry, MSW, LCSW
323 E Morgan St, Ste D
Boonville, MO 65233
(573) 447-8388

Sandi Rahm, LPC
323 E Morgan St, Ste D
Boonville, MO 65233
(660) 537-5228

Valley Hope
1415 W Ashley Rd
Boonville, MO 65233
(660) 882-6547

Disability Services

Cooper County Board of Sheltered Services
1620 Ashley Rd
Boonville, MO 65233
(660) 882-5112

Endless Options
222 East Davis
Fayette, MO 65248
(660) 248-5233

Services for Independent Living (SIL)
1401 Hathman Place
Columbia, Missouri 65201
573-874-1646

Unlimited Opportunities
1620 West Ashley Rd
Boonville, MO 65233
660-882-5576

Civic Organizations

4-H Clubs
520 Jackson Road, Suite A
Boonville, MO 65233
660-882-5661

American Legion Auxiliary - Pilot Grove
573-636-9133

American Legion Post 266
Pilot Grove, MO 65276
800-846-9023

Boonslick Shrine Club
PO Box 52
Boonville, MO 65233
660-537-0231

Boonville Kiwanis Club
416 East Spring Street
Boonville, MO 65233
573-874-8100

Boonville Lions Club
P.O. Box 52
Boonville, MO 65233

Boy Scouts of America, Great Rivers
Council
1203 Fay Street
Columbia, MO 65201
(573) 449-2561
1-800-SCOUTLAW

Central Missouri Community Action
(Community Action Teams)
401 East High Street
Boonville, MO 65233
660-882-5601

Fraternal Order of Eagles
708 11th Street
Boonville, MO 65233
660-882-9970
614-883-2200

Knights of Columbus, 1061
1515 Radio Hill Road
Boonville, MO 65233
660-882-9910

Knights of Columbus-Pilot Grove
Pilot Grove, MO 65276

Operation Round Up
29868 Highway 5
Tipton, MO 65081
(800) 781-0157
(660) 433-5521

Prairie Home Lions Club
517 Main Street
Prairie Home, MO

Pilot Grove Lions Club
660-834-4115

Red Hatters Society
866-386-2850

Rotary Club of Boonville
501 High St. #A
Boonville, MO 65233
660-882-9898

Transportation

Central Missouri Area Agency on Aging
PO Box 281, 401 E. High St
Boonville, MO 65233
660-882-3444

Katy Flyer
City Hall 401 Main Street
Boonville, MO 65233
660-882-2366

Logisticare
1807 Park 270 Drive, Suite 518
St. Louis, MO 63146
866-269-5927

Missouri River Taxi
1214 Commercial St Apt A
Boonville, MO 65233
660-882-7070

OATS
Blackwater (660) 834-4223
Boonville (660) 882-2366
Bunceton (660) 427-5329
Pilot Grove (660) 834-4223
Prairie Home (660) 427-5514

Services for Independent Living (SIL)
1401 Hathman Place
Columbia, Missouri 65201
573-874-1646

YMCA & CMCA Ride Program and CMCA
and BCE Ride Program
401 E High St
Boonville, MO
660-882-5601

Education

Blackwater Public Schools
300 Doddridge, PO Box 117
Blackwater, MO 65322
660-846-2461

Boonville Public Schools - Administrative
Offices
736 Main Street
Boonville, MO 65233
660-882-7474

Boonville Public Schools - Hannah Cole
Primary
1700 West Ashley Road
Boonville, MO 65233
660-882-2744

Boonville Public Schools - David Barton
Elementary
814 Locust
Boonville, MO 65233
660-882-6527

Boonville Public Schools - LSE Middle
School
700 Main Street
Boonville, MO 65233
660-882-6649

Boonville Public Schools - Boonville High
School
1 Pirate Drive
Boonville, MO 65233
660-882-7426

Boonslick Regional Library
618 Main Street
Boonville, MO 65276
660-882-5864

Boonslick Technical Education Center
1694 West Ashley Road
Boonville, MO 65233
660-882-5306

Bunceton Public School
500 E. Main Street
Bunceton, MO 65237
660-427-5415

Otterville Public Schools
101 W. Georgetown Street
Otterville, MO 65348
660-366-4391

Pilot Grove Public Schools
107 School Street
Pilot Grove, MO 65276
660-834-4415

Milestones Daycare
1640 Radio Hill Rd.
Boonville, MO
660-882-3510

Prairie Home Public Schools
301 Hwy Drive
Prairie Home, MO 65068
660-841-5296

Stepping Stones School
16711 Oak Ridge Rd.
Boonville, MO
660-882-3070

State Fair Community College - Boonville
The Kemper Campus
701 W. Third Street
Boonville, MO 65233
660-882-3090

Pilot Grove C-4 District Preschool
107 School St.
Pilot Grove, MO
660-834-4115

Employment

Otterville R-VI District Preschool
101 E. Georgetown St.
Otterville, MO
660-366-4621

Central Missouri Community Action
(Missouri Work Assistance Program)
401 E. High St.
Boonville, MO 65233
660-882-5601

Department of Labor
421 East Dunklin P.O. Box 59
Jefferson City, MO 65102
800-320-2519
573-751-9040

Child Care/Preschool

Boonville R-1 Preschool
1700 W. Ashley Rd.
Boonville, MO 65233
660-882-2744

Immanuel Lutheran Preschool
1001 Immanuel Dr.
Boonville, MO
660-882-2208

Clubhouse Head Start
385 W. Ashley Rd.
Boonville, MO
660-882-7510

Imagination Station Preschool
1000 6th St.
Boonville, MO
660-882-0101

General Online Healthcare Resources

Doctors and Dentists--General

[AMA Physician Select: Online Doctor Finder](#) (American Medical Association) [DocFinder](#) (Administrators in Medicine) [Find a Dentist](#) (Academy of General Dentistry) [Find a Dentist: ADA Member Directory](#) (American Dental Association) [Physician Compare](#) (Centers for Medicare & Medicaid Services)

Hospitals and Clinics--General

[Find a Health Center](#) (Health Resources and Services Administration) [Find a Provider: TRICARE Provider Directories](#) (TRICARE Management Activity) [Hospital Quality Compare](#) (Centers for Medicare & Medicaid Services)

Doctors and Dentists--Specialists

[ACOG's Physician Directory](#) (American College of Obstetricians and Gynecologists) [ACR: Geographic Membership Directory](#) (American College of Rheumatology) [American College of Surgeons Membership Directory](#) (American College of Surgeons) [American Osteopathic Association D.O. Database](#) (American Osteopathic Association) [ASGE: Find a Doctor](#) (American Society for Gastrointestinal Endoscopy) [Cancer Genetics Services Directory](#) (National Cancer Institute) [Child and Adolescent Psychiatrist Finder](#) (American Academy of Child and Adolescent Psychiatry) [Dystonia: Find a Health Care Professional](#) (Dystonia Medical Research Foundation) [Expert Locator: Immunologists](#) (Jeffrey Modell Foundation) [Find a Dermatologic Surgeon](#) (American Society for Dermatologic Surgery) [Find a Dermatologist](#) (American Academy of Dermatology) [Find a Gastroenterologist](#) (American College of Gastroenterology) [Find a Gynecologic Oncologist](#) (Society of Gynecologic Oncologists) [Find a Hand Surgeon](#) (American Society for Surgery of the Hand) [Find a Hematologist](#) (American Society of Hematology) [Find a Neurologist](#) (American Academy of Neurology) [Find a Pediatric Dentist](#) (American Academy of Pediatric Dentistry) [Find a Pediatrician or Pediatric Specialist](#) (American Academy of Pediatrics) [Find a Periodontist](#) (American Academy of Periodontology) [Find a Physical Medicine & Rehabilitation Physician](#) (American Academy of Physical Medicine and Rehabilitation) [Find a Plastic Surgeon](#) (American Society of Plastic Surgeons) [Find a Podiatrist](#) (American Podiatric Medical Association) [Find a Thyroid Specialist](#) (American Thyroid Association) [Find a Urologist](#) (American Urological Association) [Find an ACFAS Physician](#) (American College of Foot and Ankle Surgeons) [Find an Allergist/Immunologist: Search](#) (American Academy of Allergy, Asthma, and Immunology) [Find an Endocrinologist](#) (Hormone Health Network) [Find an Eye M.D.](#) (American Academy of Ophthalmology) [Find an Interventional Radiologist](#) (Society of Interventional Radiology) [Find an Oncologist](#) (American Society of Clinical Oncology) [Find an Oral and Maxillofacial Surgeon](#) (American Association of Oral and Maxillofacial Surgeons) [Find an Orthopaedic Foot and Ankle MD](#) (American Orthopaedic Foot and Ankle Society) [Find an Otolaryngologist \(ENT\)](#) (American Academy of Otolaryngology--Head and Neck Surgery) [Finding an Eye Care Professional](#) (National Eye Institute) [GI Locator Service](#) (American Gastroenterological Association)

Other Healthcare Providers

[AMTA's Find a Massage Therapist](#) (American Massage Therapy Association) [Cancer Genetics Services Directory](#) (National Cancer Institute) [Find a Diabetes Educator](#) (American Association of Diabetes Educators) [Find a Genetic Counselor](#) (National Society of Genetic Counselors) [Find a Midwife](#) (American College of Nurse-Midwives) [Find a Nurse Practitioner](#) (American Academy of Nurse Practitioners) [Find a Physical Therapist](#) (American Physical Therapy Association) [Find a Professional: Online Directory of Audiology and Speech-Language Pathology Programs](#) (American Speech-Language-Hearing Association) [Find a Registered Dietitian](#) (Academy of Nutrition and Dietetics) [Find a Therapist](#) (Anxiety Disorders Association of America) [Find an Audiologist](#) (American Academy of Audiology) [Manual Lymphatic Drainage Therapists](#) (National Lymphedema Network) [National Register of Health Service Providers in Psychology](#) (National Register of Health Service Providers in Psychology) [NCCAOM: Find Nationally Certified Practitioners](#) (National Certification Commission for Acupuncture and Oriental Medicine) [Search for an Emergency Contraception Provider in the United States](#) (Princeton University, Office of Population Research)

Hospitals and Clinics--Specialized

[Accredited Birth Centers](#) (Commission for the Accreditation of Birth Centers) [Alzheimer's Disease Research Centers](#) (National Institute on Aging) [Cystic Fibrosis Foundation: Find a Chapter](#) (Cystic Fibrosis Foundation) [Cystic Fibrosis Foundation: Find an Accredited Care Center](#) (Cystic Fibrosis Foundation) [Dialysis Facility Compare](#) (Centers for Medicare & Medicaid Services) [FDA Certified Mammography Facilities](#) (Food and Drug Administration) [Find a Free Clinic](#) (National Association of Free Clinics) [Find an Indian Health Service Facility](#) (Indian Health Service) [Find Treatment Centers](#) (American Cancer Society) [Genetics Clinic Directory Search](#) (University of Washington) [Locate a Sleep Center in the United States by Zip Code](#) (American Academy of Sleep Medicine) [MDA ALS Centers](#) (Muscular Dystrophy Association) [Mental Health Services Locator](#) (Substance Abuse and Mental Health Services Administration) [NCI Designated Cancer Centers](#) (National Cancer Institute) [Neurofibromatosis Specialists](#) (Children's Tumor Foundation) [Post-Polio Directory 2011: Post-Polio Clinics, Health Professionals, Support Groups](#) (Post-Polio Health International including International Ventilator Users Network) [Spina Bifida Clinic Directory](#) (Spina Bifida Association of America) [Substance Abuse Treatment Facility Locator](#) (Substance Abuse and Mental Health Services Administration) [Transplant Center Search Form](#) (BMT InfoNet) [U.S. NMDP Transplant Centers](#) (National Marrow Donor Program) [VA Health Care Facilities Locator & Directory](#) (Veterans Health Administration) [Where to Donate Blood](#) (AABB) [Where to Donate Cord Blood](#) (National Marrow Donor Program)

Other Healthcare Facilities and Services

[Alzheimer's Disease Resource Locator](#) (Fisher Center for Alzheimer's Research Foundation) [American College of Radiology Accredited Facility Search](#) (American College of Radiology) [APA District Branch / State Association Directory](#) (American Psychiatric Association) [Directory of Organizations \(Deafness and Communication Disorders\)](#) (National Institute on Deafness and Other Communication Disorders) [Dog Guide Schools in the United States](#) (American Foundation for the Blind) [Eldercare Locator](#) (Dept. of Health and Human Services) [Find a Hospice or Palliative Care Program](#) (National Hospice and Palliative Care Organization) [Find Services \(for People with Vision Loss\)](#) (American Foundation for the Blind) [Find Urgent Care Centers by State](#) (Urgent Care Association of America) [Genetic Testing Laboratory Directory](#) (University of Washington) [Home Health Compare](#) (Centers for Medicare & Medicaid Services) [Medicare: Helpful Contacts](#) (Centers for Medicare & Medicaid Services) [Muscular Dystrophy Association Clinics and Services](#) (Muscular Dystrophy Association) [National Foster Care and Adoption Directory Search](#) (Children's Bureau) [Nursing Home Compare](#) (Centers for Medicare & Medicaid Services) [Organizations That Offer Support Services](#) (National Cancer Institute) [Poison Control Centers](#) (American Association of Poison Control Centers) [Resources and Information for Parents about Braille](#) (American Foundation for the Blind) [State-Based Physical Activity Program Directory](#) (Centers for Disease Control and Prevention) [TSA Chapters in the USA](#) (Tourette Syndrome Association) [Violence against Women: Resources by State](#) (Dept. of Health and Human Services, Office on Women's Health) [Where to Find Hair Loss Accessories and Breast Cancer Products](#) (American Cancer Society)

SOURCE: MedlinePlus provides links to directories to help you find libraries, health professionals, services and facilities. National Library of Medicine (NLM) does not endorse or recommend the organizations that produce these directories, nor the individuals or organizations that are included in the directories.

V. Detail Exhibits

[VVV Consultants LLC]

Patient Origin and Access

[VVV Consultants LLC]

V. Detail Exhibits

a) Patient Origin and Access to Care



Patient Origin by Region - Inpatient
 Cooper, MO Residents Treated in HIDI Reporting Area
 Federal Fiscal Year: 2014
 Kansas Discharge Data Available From 2012 Q 1 through 2017 Q 1

Hospital	Total Discharges		Pediatric		Adult Medical/Surgical				Psychiatric	Obstetric	Newborn	Surp %							
	Cases	%	Age 0 - 17	%	Age 18 - 44	Age 45 - 64	Age 65 - 74	Age 75+											
University of Missouri Health Care - Columbia, MO	530	40.7%	49	9.3%	109	13.1%	214	25.8%	104	12.5%	95	11.4%	87	10.6%	79	9.5%	29.3%		
Boone Hospital Center - Columbia, MO	680	33.4%	3	0.4%	36	5.3%	147	21.6%	128	18.8%	197	29.0%	2	0.3%	85	12.5%	82	12.1%	33.1%
Cooper County Memorial Hospital - Booneville, MO	202	9.9%	0	0%	4	2.0%	32	15.8%	42	20.8%	122	60.4%	2	1.0%	0	0%	0	0%	0%
Bothwell Regional Health Center - Sedalia, MO	78	3.8%	1	1.3%	7	9.0%	17	21.8%	13	16.7%	23	29.5%	2	2.6%	8	10.3%	7	9.0%	26.9%
Howard A. Rusk Rehabilitation Center - Columbia, MO	38	1.9%	1	2.6%	6	21.1%	14	36.8%	6	15.8%	9	23.7%	0	0%	0	0%	0	0%	0%
SSM Health St. Mary's Hospital - Jefferson City, MO	23	1.1%	0	0%	3	13.0%	4	17.4%	5	21.7%	1	4.3%	8	34.8%	1	4.3%	1	4.3%	21.7%
Moberly Regional Medical Center - Moberly, MO	20	1.0%	0	0%	0	0%	0	0%	1	5.0%	0	0%	19	95.0%	0	0%	0	0%	0%
Royal Oaks Hospital - Windsor, MO	20	1.0%	0	0%	0	0%	0	0%	0	0%	0	0%	20	100.0%	0	0%	0	0%	0%
Barnes-Jewish Hospital - St. Louis, MO	17	0.8%	0	0%	1	5.9%	12	70.6%	4	23.5%	0	0%	0	0%	0	0%	0	0%	52.9%
Fitzgibbon Hospital - Marshall, MO	16	0.8%	0	0%	1	6.3%	2	12.5%	0	0%	3	18.8%	4	25.0%	4	25.0%	2	12.5%	6.3%
Landmark Hospital of Columbia - Columbia, MO	9	0.4%	0	0%	0	0%	4	44.4%	3	33.3%	2	22.2%	0	0%	0	0%	0	0%	0%
Capital Region Medical Center - Jefferson City, MO	8	0.4%	0	0%	0	0%	2	25.0%	2	25.0%	4	50.0%	0	0%	0	0%	0	0%	25.0%
University of Kansas Health System - Kansas City, KS	6	0.3%	0	0%	0	0%	4	66.7%	1	16.7%	1	16.7%	0	0%	0	0%	0	0%	66.7%
Crittendon - Kansas City, MO	6	0.3%	0	0%	0	0%	0	0%	0	0%	0	0%	6	100.0%	0	0%	0	0%	0%
Fulton Medical Center - Fulton, MO	5	0.2%	0	0%	0	0%	0	0%	1	20.0%	1	20.0%	3	60.0%	0	0%	0	0%	0%
CenterPointe Hospital - St. Charles, MO	5	0.2%	0	0%	0	0%	0	0%	0	0%	0	0%	5	100.0%	0	0%	0	0%	0%
Research Medical Center - Kansas City, MO	5	0.2%	0	0%	0	0%	0	0%	0	0%	0	0%	3	60.0%	1	20.0%	1	20.0%	0%
Other Hospitals	69	3.4%	6	8.7%	7	10.1%	17	24.6%	8	11.6%	6	8.7%	20	29.0%	3	4.3%	2	2.9%	24.6%
Hospital Total	2,037	100.0%	60	2.9%	176	8.6%	469	23.0%	318	15.6%	464	22.8%	187	9.2%	189	9.3%	174	8.5%	25.9%

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 Jun 7, 2017



Patient Origin by Region - Inpatient
 Cooper, MO Residents Treated in HIDI Reporting Area
 Federal Fiscal Year: 2015
 Kansas Discharge Data Available From 2012 Q 1 through 2017 Q 1

Hospital	Total Discharges		Pediatric		Adult Medical/Surgical				Psychiatric	Obstetric	Newborn	Surp %							
	Cases	%	Age 0 - 17	%	Age 18 - 44	Age 45 - 64	Age 65 - 74	Age 75+											
University of Missouri Health Care - Columbia, MO	545	40.8%	70	8.3%	121	14.3%	193	22.8%	114	13.5%	103	12.2%	87	10.3%	80	9.5%	78	9.2%	29.0%
Boone Hospital Center - Columbia, MO	684	33.0%	5	0.7%	33	4.8%	143	20.9%	144	21.1%	205	30.0%	3	0.4%	74	10.8%	77	11.3%	30.4%
Cooper County Memorial Hospital - Booneville, MO	274	13.2%	0	0%	17	6.2%	47	17.2%	43	15.7%	163	59.5%	4	1.5%	0	0%	0	0%	0%
Bothwell Regional Health Center - Sedalia, MO	83	4.0%	1	1.2%	5	6.0%	9	10.8%	18	21.7%	38	45.8%	0	0%	6	7.2%	6	7.2%	31.3%
SSM Health St. Mary's Hospital - Jefferson City, MO	45	2.2%	0	0%	8	17.8%	11	24.4%	3	6.7%	7	15.6%	2	4.4%	7	15.6%	7	15.6%	33.3%
Howard A. Rusk Rehabilitation Center - Columbia, MO	27	1.3%	2	7.4%	3	11.1%	5	18.5%	8	29.6%	9	33.3%	0	0%	0	0%	0	0%	0%
Fulton Medical Center - Fulton, MO	12	0.6%	0	0%	0	0%	0	0%	0	0%	4	33.3%	8	66.7%	0	0%	0	0%	0%
Barnes-Jewish Hospital - St. Louis, MO	10	0.5%	0	0%	0	0%	7	70.0%	2	20.0%	1	10.0%	0	0%	0	0%	0	0%	40.0%
Moberly Regional Medical Center - Moberly, MO	6	0.3%	0	0%	0	0%	0	0%	2	33.3%	0	0%	4	66.7%	0	0%	0	0%	0%
Capital Region Medical Center - Jefferson City, MO	6	0.3%	0	0%	0	0%	3	50.0%	1	16.7%	0	0%	1	16.7%	1	16.7%	1	16.7%	50.0%
Fitzgibbon Hospital - Marshall, MO	6	0.3%	0	0%	0	0%	1	16.7%	0	0%	0	0%	1	16.7%	2	33.3%	2	33.3%	16.7%
Landmark Hospital of Columbia - Columbia, MO	6	0.3%	0	0%	1	16.7%	2	33.3%	2	33.3%	1	16.7%	0	0%	0	0%	0	0%	0%
Missouri Residents/Tennessee Hospitals	5	0.2%	0	0%	0	0%	5	100.0%	0	0%	0	0%	0	0%	0	0%	0	0%	20.0%
Royal Oaks Hospital - Windsor, MO	5	0.2%	0	0%	0	0%	0	0%	0	0%	0	0%	5	100.0%	0	0%	0	0%	0%
Centerpoint Medical Center - Independence, MO	5	0.2%	0	0%	1	20.0%	1	20.0%	2	40.0%	1	20.0%	0	0%	0	0%	0	0%	20.0%
Saint Luke's Hospital of Kansas City - Kansas City, MO	5	0.2%	0	0%	1	20.0%	1	20.0%	3	60.0%	1	20.0%	0	0%	0	0%	0	0%	20.0%
Other Hospitals	50	2.4%	5	10.0%	12	24.0%	10	20.0%	4	8.0%	4	8.0%	15	30.0%	0	0%	0	0%	20.0%
Hospital Total	2,075	100.0%	83	4.0%	201	9.7%	438	21.1%	346	16.7%	537	25.9%	129	6.2%	170	8.2%	171	8.2%	24.8%

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Patient Origin by Region - Inpatient
 Cooper, MO Residents Treated in HIDI Reporting Area
 Federal Fiscal Year: 2016
 Kansas Discharge Data Available From 2012 Q 1 through 2017 Q 1

Hospital	Total Discharges		Pediatric		Adult Medical/Surgical				Psychiatric	Obstetric	Newborn	Surp %							
	Cases	%	Age 0 - 17	%	Age 18 - 44	Age 45 - 64	Age 65 - 74	Age 75+											
University of Missouri Health Care - Columbia, MO	656	41.4%	71	8.3%	116	13.6%	196	22.9%	117	13.7%	101	11.8%	97	11.3%	83	9.7%	75	8.8%	29.7%
Boone Hospital Center - Columbia, MO	658	31.8%	3	0.5%	27	4.1%	141	21.4%	135	20.5%	201	30.5%	2	0.3%	75	11.6%	73	11.1%	36.0%
Cooper County Memorial Hospital - Booneville, MO	226	11.0%	0	0%	8	3.5%	20	8.8%	37	16.2%	158	69.3%	5	2.2%	0	0%	0	0%	0%
Bothwell Regional Health Center - Sedalia, MO	90	4.4%	2	2.2%	5	5.6%	10	11.1%	15	16.7%	40	44.4%	0	0%	9	10.0%	9	10.0%	25.6%
SSM Health St. Mary's Hospital - Jefferson City, MO	42	2.0%	0	0%	2	4.8%	17	40.5%	5	11.9%	5	11.9%	5	11.9%	4	9.5%	4	9.5%	28.6%
Howard A. Rusk Rehabilitation Center - Columbia, MO	23	1.1%	1	4.3%	6	26.1%	10	43.5%	4	17.4%	2	8.7%	0	0%	0	0%	0	0%	0%
Barnes-Jewish Hospital - St. Louis, MO	17	0.8%	0	0%	5	29.4%	5	29.4%	5	29.4%	2	11.8%	0	0%	0	0%	0	0%	41.2%
Landmark Hospital of Columbia - Columbia, MO	15	0.7%	0	0%	10	66.7%	2	13.3%	2	13.3%	1	6.7%	0	0%	0	0%	0	0%	20.0%
Fulton Medical Center - Fulton, MO	14	0.7%	0	0%	0	0%	0	0%	0	0%	6	42.9%	8	57.1%	0	0%	0	0%	0%
Moberly Regional Medical Center - Moberly, MO	9	0.4%	0	0%	0	0%	0	0%	0	0%	3	33.3%	6	66.7%	0	0%	0	0%	0%
Royal Oaks Hospital - Windsor, MO	8	0.4%	0	0%	0	0%	0	0%	0	0%	0	0%	8	100.0%	0	0%	0	0%	0%
Capital Region Medical Center - Jefferson City, MO	8	0.4%	0	0%	0	0%	3	37.5%	1	12.5%	0	0%	0	0%	2	25.0%	2	25.0%	37.5%
Children's Mercy Kansas City - Kansas City, MO	8	0.4%	8	100.0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	75.0%
SSM Health St. Mary's Hospital - Audrain - Mexico, MO	6	0.3%	0	0%	1	16.7%	1	16.7%	1	16.7%	1	16.7%	0	0%	1	16.7%	1	16.7%	33.3%
Fitzgibbon Hospital - Marshall, MO	6	0.3%	0	0%	2	33.3%	0	0%	1	16.7%	0	0%	2	33.3%	0	0%	1	16.7%	33.3%
Landmark Hospital of Columbia - Columbia, MO	6	0.3%	0	0%	1	16.7%	1	16.7%	4	66.7%	0	0%	0	0%	0	0%	0	0%	50.0%
Missouri Residents/Other Illinois Hospitals	5	0.2%	0	0%	0	0%	5	100.0%	0	0%	0	0%	0	0%	0	0%	0	0%	40.0%
Other Hospitals	68	3.3%	2	2.9%	10	14.7%	20	29.4%	8	11.8%	5	7.4%	17	25.0%	3	4.4%	3	4.4%	23.5%
Hospital Total	2,067	100.0%	87	4.2%	193	9.3%	431	20.9%	335	16.2%	525	25.4%	150	7.3%	178	8.6%	168	8.1%	27.5%

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Town Hall Attendees Notes and Feedback

[VVV Consultants LLC]

Cooper County Memorial Hospital PSA - CHNA Town Hall Roster 8/29/17 N=27

#	Type	First Name	Last Name	Firm	Address	City	Zip
1	Business	Don	Baragary	Don Baragary	15789 Sunrise Valley Drive	Boonville	65233
2	Business	Tawny	Brown	CCBC, Inc.	813 E Morgan St	Boonville	65233
3	Business	Myrna	Bruce	First State Community Bank	412 Main Street	Boonville	65233
4	Business	Logan	Comegys	Logan Comegys	10 Oak Valley Drive	Boonville	65233
5	Business	Paul	Davis		19367 Hwy 98	Boonville	65233
6	Gov	Patty	Dick		3595 T Hwy	Bureetor	65237
7	Business	Velma	Flippin		1404 Jefferson Dr	Boonville	65233
8	Business	Nancy	Frederich		3 Pinecrest Unit B	Boonville	65233
9	Business	Shannon	Griffy		1113 Lori Dr	Boonville	65233
10	Business	Jackie	Hickam		513 Sonya Dr	Boonville	65233
11	Business	Mark	Hirshberg	Cooper County Memorial Hospital	17651 B Hwy	Boonville	65233
12	Health	Pastor Joshua	Ketelson	Immanuel Lutheran Church	1001 Immanuel Dr	Boonville	65233
13	Business	Laura	Mauzey		19982 Hwy 98	Boonville	65233
14	Business	Kelly	McManus		12656 125th Trl	Sweet Springs	65351
15	Business	Charlie	Melkersman	Eastern District County Commissioner	PO Box 251	Boonville	65233
16	Business	Evan	Melkersman	Central Missouri Community Action	401 East High Street	Boonville	65233
17	Business	Matthew	Nusbaum		4360 E. Lang Dr	Columbia	65202
18	Business	Karen	Ratay		1435 W Ashley Rd	Boonville	65233
19	Business	Jennifer	Skanes		916 7th St	Boonville	65233
20	Business	Connie	Welbern		104 W Sulphur St Apt D	New Franklin	65274
21	Business	Juanita	White		708 Carla Dr	Boonville	65233
22	Business	Kim	Wienholt		26840 Highway 179	Wooldridge	65287
23	Business	Julie	Doerr	Julie Doerr	909 Windsor Street	Boonville	65233
24	Business	Joan	Read		1000 Riveria Dr	Boonville	65233
25	Business	Bobby	Welliver	City of Boonville Police Department	401 East Morgan Street	Boonville	65233
26	Business	Thomas	White		708 Carla Dr	Boonville	65233
27	Business	Melanie	Hutton	Cooper County Public Health Center	17040 Klinton Drive	Boonville	65233

Cooper County Memorial Hospital (Primary Service Area) - Community Health Needs Assessment Meeting

8.29.17

N=27

Tab 1:

- Casino and prison causing population growth

Tab 2:

- Kids don't like the newer healthy options, they miss the old lunches

Tab 3:

- 3-4 licensed school nurses, but have more aids

Tab 4:

- DOH is administering WIC
- Smoking is causing low birth weight and early gestational birthing

Tab 5:

- Have a walk-in clinic as part of the hospital, people aren't going because they can't afford it

Tab 6:

- Two sliding scale facilities for behavioral health services
- Outpatient services may be adequate here, but inpatient services are difficult to find

Tab 7:

- Lacking in treatment for drinking and substance abuse

Tab 10:

- The south part of the county is lacking in exercise opportunities

Survey

- PPS, not CAH
- Encouraging the city to increase the tobacco age to 21 – "Tobacco 21"
- Child care changes, all staff has to go through 10 hours of training

Strengths

- Community energy
- YMCA
- Communication between health care providers
- Private health groups delivering health education
- NAMI (National Alliance for Mental Illness)
- Local ED with the ability to quickly transfer

- Community Action Teams / Services Clubs
- Tax levies supporting health causes
- Access to the Katy Trail
- Education opportunities regardless of economic status

Weaknesses

- Inpatient Geriatric Psychology
- Tobacco Use
- Economic Development
- Providers (Pediatrics, Gerontology, Orthopedics, Obstetrics, Ophthalmology)
- Healthcare Transportation
- Utilization of Local Hospital Services
- Domestic Violence
- Drug / Alcohol Rehab Centers
- Community Health Policy
- Access to Affordable Child Care
- Dentists Accepting Medicaid
- Health Ownership
- Community Health Education / Wellness
- Ministerial Alliance Support
- Access to Organic Produce
- Emergency Room

Cooper County Memorial Hospital (PSA) Community Health Needs Assessment

Town Hall Conversation 8/29/17 - Strengths (Colored Cards) N=27

#	C1	C2	C3	Today: What are the strengths of our community that contribute to health?
1	ACC			Access
2	ACC			Access to care
3	ACC			Access to food
4	CAC			CCBC
5	CAC			Civic group support - i.e. Kiwanis, Lions, Women's Club - very community minded
6	CAC			CMCA
7	CAC			Community action committees
8	CAC			Community energy
9	CAC			Community events / energy
10	CAC			Groups assisting with schools that help behavioral health - NAMI / LBGTQ groups
11	CAC			Many community events - energy
12	CAC			Many helpful benefits for those in need
13	CAC			Service clubs
14	CAC			Social services, CMCA, Wings, Milestone Human Agency
15	CAC			Strong connections between human services organizations
16	CAC			Variety of non profit and civic groups
17	CAC			Variety of non profit entities
18	COL	SPEC	TRAU	Proximity to Columbia specialized medicine and trauma care
19	COL	SPEC		Close to Columbia specialists
20	COL	SPEC		Columbia specialists
21	COL			Close to Columbia for services
22	COL			Close to tertiary care centers
23	COMM	HH	PROV	Communication among local health providers - ex. Home health / CCRHC
24	COMM	HH	PROV	Communication excellent between health providers and home health
25	COMM	PROV		Providers work together
26	CRIM			Low violent crime
27	CRIM			Low violent crime rate
28	DEV			Committees w/ CA to improve information access for economic development and poverty
29	DIV			Diver
30	DOH	TAX		Public health tax
31	DOH	TAX		Public health tax
32	DOH	VAC		Health department here to provide vac's needed
33	DOH			Access to health department
34	DOH			Good public health department
35	DOH			Public health
36	DOH			Public health access
37	DOH			Public health department
38	DOH			Public health department
39	DOH			Well staffed health department
40	ED	DOH	DAY	Offer child care classes for day care providers - health department, online, Extension, CMCA
41	ED			Education opportunities - K-12
42	ED			Education opportunities - K-12 - same opportunity despite economic status
43	ED			Great education system
44	ED			Preschool

Cooper County Memorial Hospital (PSA) Community Health Needs Assessment

Town Hall Conversation 8/29/17 - Strengths (Colored Cards) N=27

#	C1	C2	C3	Today: What are the strengths of our community that contribute to health?
45	ED			Private group education messages
46	ED			Provide health education
47	ED			School system
48	ER	CLIN		Good ER and health clinics
49	ER			Access to ER services
50	FIT			Excellent opportunity for health and wellness - YMCA, Excel 24/day, Katy Trail, CCMH Wellness Center
51	FIT			Excellent YMCA
52	FIT			Exercise / wellness access
53	FIT			Exercise opportunities
54	FIT			Good exercise opportunities
55	FIT			Katy Trail
56	FIT			Katy Trail
57	FIT			Katy Trail
58	FIT			Success YMCA
59	FIT			Walking trails
60	FIT			YMCA
61	FIT			YMCA
62	FIT			YMCA
63	FIT			YMCA / Excel
64	HOS	DOH		Cooperative hospital / health department
65	HOS	SPEC	PRIM	Acute care, primary care, specialty care hospital
66	HOS			Hospital Co. still a float
67	HOS			Improved perception of CCMH
68	HOS			Small town care at hospital - more one-on-one
69	IP	ER	SPEC	Have an acute care hospital that provides emergency, primary care and specialty care services
70	IP			Inpatient care
71	LAW			CIT trained law enforcement
72	LAW			Law enforcement
73	MED			Providers that accept Medicare / Medicaid
74	MU			MU Extension
75	MU			MU Extension
76	NUT	ED		Nutrition education
77	PRIM			Primary care
78	PRIM			Primary care physicians
79	PROV	COL		Doctors from Columbia come out at least once a month
80	PROV			Diversity of family care medical providers - i.e. Medical, Dental, Eye, Chiropractor
81	PROV			Qualified and invested providers
82	REH			Rehab - recovery group
83	SPEC	COL		Are close to a market that can provide high quality specialty services not available or feasible to have in Cooper County
84	SPEC	OP	CLIN	Specialty outpatient clinics at CCMH
85	SPEC			Offer specialty services but not enough advertisement
86	TAX	DOH		Tax levy provides funding for health department
87	TAX	HOS		Taxes help support hospital
88	VAC			Resources - i.e. vaccinations, etc.
89	WIC			Several services for citizens (WIC)
90	WIC			WIC - breastfeeding lactation consultants

**Cooper County Memorial Hospital (PSA)
Community Health Needs Assessment**

Town Hall Conversation 8/29/17 - Weakness (White Cards) N=27

#	C1	C2	C3	Today: What are the weaknesses of our community that contribute to health?
1	ALC	DRG		Alcohol and drug abuse
2	ALC			Alcohol deaths
3	BOON	COL		More people stay in Boonville for health needs instead of going to Columbia
4	BOON	SMOK		Boonville needs to go smoke free
5	CAC			CMCA workgroup examining issues
6	CHIR			Chiropractors
7	CLIN			Walk-in clinic
8	COL			Fair - as compared to Columbia
9	COMM			Disengaged / disenfranchised community
10	COST			Not enough money
11	DAY			Access to child care
12	DAY			Access to quality day care
13	DAY			Child care
14	DAY			Child care (accessible / affordable)
15	DAY			Child care regulations
16	DAY			Provide more child care in community
17	DENT	MED		Dental health - sliding scale / accepts Medicaid
18	DENT	MED		Dental providers - accept Medicaid
19	DENT			Dental at an early age
20	DENT			Dentists
21	DEV	YTH		Underemployment - youth engagement
22	DEV			Bad debt higher than accounted for
23	DEV			Economic development
24	DEV			Economic development
25	DEV			Economic development
26	DEV			Higher paying jobs
27	DEV			Loss of jobs has created some issues
28	DEV			Underemployment
29	DRG	VIOL		Abuse drugs / violence
30	DRG	YTH		Find way to lower drug use - especially young people
31	DRG			Drugs
32	DRG			Drugs
33	DRG			Drugs
34	DRG			Overall drug use
35	ED	PROV		Educate the community of doctors that come to the hospital
36	ED			Community health education
37	ED			Community health education
38	ED			Public education - school - abstinence
39	ED			Wellness education
40	ER	URG		ER vs urgent care
41	ER			Emergency
42	ER			Emergency room
43	ER			ER
44	FIT	ED		Wellness - education
45	FIT			Wellness / exercise services
46	FIT			Wellness opportunities
47	FIT			Wellness opportunities - poor or no sidewalks
48	GERO	PEDS		Get Gerontologist, pediatrician
49	GERO			Gerontology
50	HH			Home visits
51	HH			Increase home bound visits

**Cooper County Memorial Hospital (PSA)
Community Health Needs Assessment**

Town Hall Conversation 8/29/17 - Weakness (White Cards) N=27

#	C1	C2	C3	Today: What are the weaknesses of our community that contribute to health?
52	HLTH			Attitude change (it will be alright) not look down
53	HLTH			Health
54	HLTH			Healthy lifestyle
55	HLTH			Ownership of health
56	HLTH			Willingness to change - or for me
57	HOS	BILL	PROV	Hospital - billing, changing docs
58	HOS	PROV		Getting population to use hospital and doctors for what they can
59	HOS			Better hospital facilities
60	HOS			New facility (need) - hospital
61	HOS			Update current hospital
62	IP	MH		Inpatient senior behavioral health services - resource is scarce
63	IP			Inpatient care
64	MH	ED		In schools - need mental health screenings and education for parents
65	MH			Add mental health facility
66	MH			Behavioral health
67	MH			Mental health
68	MH			Mental health
69	MH			Mental health
70	MH			Mental health assessment
71	MH			Mental health services
72	MH			Mental health services
73	MH			Mental health services / behavioral health
74	MH			Mental health treatment
75	MH			Mental health treatment
76	MH			Minimal to no mental / behavioral health
77	MH			No residential treatment within 100 miles
78	MIN			More support from county ministerial alliance
79	OBES	ED		Obesity education and action plan
80	OBES	PREN		OBGYN services not available for prenatal visits - no delivery services
81	OBES	PROD		Obesity / healthy food
82	OBES			Obesity
83	OBES			Obesity
84	OBES			Obesity
85	OFF	HLTH		Apathy by elected officials for health issues
86	PEDS	PREN		Access to pediatrician and/or prenatal care
87	PEDS	PROV		Pediatrician plus several other physicians
88	PEDS			Pediatric care
89	PEDS			Pediatrician
90	PHAR			Pharmacies work better together
91	PHAR			Pharmacy
92	POV			Greater collaboration on poverty issue - believe that is greater than most communities
93	POV			Poverty
94	POV			Poverty
95	POV			Poverty
96	PREN			Prenatal care
97	PRIM			Primary care accessibility
98	PRIM			Primary care physician
99	PRIM			Yes may need family practitioners
100	PROD			Better fresh fruits and vegetables
101	PROD			Fresh food / vegetables

**Cooper County Memorial Hospital (PSA)
Community Health Needs Assessment**

Town Hall Conversation 8/29/17 - Weakness (White Cards) N=27

#	C1	C2	C3	Today: What are the weaknesses of our community that contribute to health?
102	PROD			Healthy food access in rural county towns for 50% of population
103	PROD			Lack of healthy food options
104	PROD			More fresh vegetables and fruit
105	PROD			Organic produce sources needed
106	PROV	PRIM		Doctors - not enough Primary Care
107	PROV			Dwindling number of healthcare providers
108	PROV			Not enough doctors
109	PROV			Provider shortage
110	PSYC			No licensed psychiatric in Cooper County
111	REH			Drug / alcohol rehab
112	REH			Drugs / alcohol rehab center
113	SMOK	OBES	DEV	Smoking / obesity - economic development
114	SMOK	YTH		Youth tobacco use
115	SMOK			Adult smoking
116	SMOK			Need non-smoking public establishments
117	SMOK			Raise age to purchase tobacco
118	SMOK			Raise the age 21 to buy tobacco
119	SMOK			Smoke
120	SMOK			Smoke-free workplace
121	SMOK			Smoke-free workplace
122	SMOK			Smoke-free workplace - no policy to address
123	SMOK			Smoke-free workplace / Tobacco 21 - smoking / tobacco use
124	SMOK			Smoking
125	SMOK			Smoking
126	SMOK			Tobacco
127	SMOK			Tobacco 21 - need for City and County
128	SPEC	CLIN		Specialty clinics
129	SPEC			Specialists
130	SPEC			Specialized health care
131	SPEC			Specialty care
132	STD			Sexually transmitted
133	STD			STDs
134	STD			STDs
135	SUIC	MH		Suicide rates - mental health
136	SUIC			Suicide
137	TRAN	COL		Transportation for doctor appointments in Columbia
138	TRAN	SEN		Improved transportation for low income / seniors
139	TRAN	SEN		Transportation for seniors / meal-on-wheels to grocery store
140	TRAN			Increase transportation opportunities for elderly
141	TRAN			Public transportation
142	TRAN			Transportation
143	TRAN			Transportation services
144	URG	CLIN		Urgent care - somewhat provided by clinic after hours
145	VIOL			Abuse
146	VIOL			Abuse / neglect
147	VIOL			Domestic violence
148	VIOL			Violence
149	WAT			Water quality
150	WAT			Water quality
151	WAT			Water quality
152	WIC			Increase enrollment for WIC program

Public Notice and Invitation

[VVV Consultants LLC]

Cooper County Memorial Hospital Community Health Needs Assessment Round #2 Work to Begin

Media Release: 06/19/2017

Contact: Melanie Hutton (660) 882-2626 or Mark Hirshberg (660) 882-7461

Over the next three months, Cooper County Memorial Hospital will be partnering with the Cooper County Public Health Center and other community health providers to update the 2014 Cooper County Memorial Hospital Community Health Needs Assessment (CHNA).

The goal of this assessment update is to understand progress in addressing community health needs cited in the 2014 CHNA report and to collect up-to-date community health perceptions. To accomplish this work, a short online survey has been developed: https://www.surveymonkey.com/r/CCMH_2017.

All community residents and business leaders are encouraged to **complete the 2017 CHNA Round #2 online survey by Tuesday, August 8.**

“This work is key to determine the health direction for our county,” said Melanie Hutton, Administrator at the Cooper County Public Health Center. “We hope that all community stakeholders will take advantage of this opportunity to provide input into the future of healthcare delivery in our community,” said Mark Hirshberg, Interim CEO at Cooper County Memorial Hospital.

Vince Vandelaar, MBA (VVV Consultants LLC, an independent research firm from Olathe, KS) has been retained to conduct this countywide research. If you have any questions about CHNA activities, please call Melanie Hutton at (660) 882-2626 or Mark Hirshberg at (660)882-7461.

Cooper County Memorial Hospital is partnering with the Cooper County Public Health Center and other community health providers to update the 2014 Cooper County Memorial Hospital Community Health Needs Assessment (CHNA).

With this required update, we need your feedback and suggestions regarding healthcare delivery in our community. To accomplish this work, a short online survey has been developed to review the 2014 needs cited: https://www.surveymonkey.com/r/CCMH_2017.

All 2017 CHNA Round #2 online feedback is due by
Tuesday, August 8.

All responses will be confidential. Thank you in advance for your time and support by participating in this important request.

**Please hold Tuesday, August 29 to attend the
2017 CHNA Round #2 Town Hall
from 5:30-7:00pm at
CCBC located at 1111 Rural St. Boonville.**

A light dinner will be provided starting at 5 p.m.

From: Mark Hirshberg, CCMH Interim CEO and/or Melanie Hutton, CCPHC Administrator
Date: June 20, 2017
To: Community Leaders, Providers and Hospital Board and Staff
Subject: Community Health Needs Assessment Round #2 Online Survey 2017

REMINDER:

Cooper County Memorial Hospital is partnering with the **Cooper County Public Health Center** and other community health providers to update the 2014 Cooper County Memorial Hospital Community Health Needs Assessment (CHNA).

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Sincerely,

Mark Hirshberg, CCMH Interim CEO and/or
Melanie Hutton, CCPHC Administrator

Invite E-mail
Cooper County Community Health Needs Assessment
Town Halls Reminder – Tuesday August 29th 2017

Subject: Hold the Date

Cooper County Memorial Hospital and Cooper County Public Health Center are partnering to create their 2017 Cooper County Community Health Needs Assessment (CHNA) report. The goal of this assessment is to understand progress in addressing community healthcare needs and to collect up-to-date community health perceptions.

To continue this county-wide work, Cooper County Memorial Hospital and Cooper County Public Health Center will host a **Town Hall meeting on Tuesday 8/29 from 5:30-7 p.m. at CCBC.**

Please plan to attend this important community meeting to share your thoughts. Vince Vandehaar MBA, Principal Consultant at VVV Consultants LLC from Olathe, Kansas will facilitate session.

Detail Primary Research Primary Service Area

[VVV Consultants LLC]

Community Health Needs Assessment Round #2 Community Feedback

Methodology

A community feedback survey was created on behalf of the CHNA client to gather primary service area stakeholder feedback on health perceptions and progress in addressing previous CHNA community needs. All community residents were encouraged to take the survey online by entering the following address into their personal browser:
https://www.surveymonkey.com/r/CCMH_2017.

In addition, an invite letter was sent to all primary service area stakeholders (i.e. Schools, County, City, Clergy, Public Health Leaders).

Below is a summary of public response:

Cooper County Memorial Hospital - Primary Service Area N=210		
11. For reporting purposes, are you involved in or are you a ...?	Option C Stakeholders Bottom 2 Boxes	CCMH PSA N=210
Board Member (Hospital / Public Health)	4.2%	3.6%
Business / Merchant	6.3%	4.0%
Case Manager / Discharge Planner	0.8%	1.6%
Civic Club / Chamber	3.0%	6.0%
Charitable Foundation	5.2%	1.6%
Clergy / Congregational Leader	1.5%	2.4%
College / University	2.4%	2.4%
Consumer Advocate	1.2%	0.4%
Consumers of Health Care	9.3%	7.7%
Dentist	0.3%	0.0%
Economic Development	1.4%	0.4%
Education Official / Teacher	5.5%	8.1%
Elected Official (City / County)	1.6%	2.0%
EMS / Emergency	1.4%	0.8%
Farmer / Rancher	4.5%	8.1%
Health Department	1.7%	3.2%
Hospital	11.7%	7.7%
Housing / Builder	0.5%	1.2%
Insurance	1.1%	0.0%
Labor	1.2%	0.8%
Law Enforcement	0.6%	0.8%
Low Income / Free Clinics	0.8%	1.6%
Mental Health	3.5%	1.6%
Nursing	8.1%	11.3%
Other Health Professional	9.2%	3.6%
Parent / Caregiver	1.5%	8.9%
Pharmacy	1.0%	0.4%
Physician (MD / DO)	1.3%	0.0%
Physician Clinic	1.3%	1.2%
Media (Paper, TV, Radio)	0.6%	0.0%
Senior Care / Nursing Home	1.3%	4.4%
Social Worker	1.8%	1.2%
Veteran	1.0%	1.6%
Welfare / Social Service	3.3%	1.2%
Other (please specify)	7.2%	6.9%
TOTAL	100.0%	100.0%

KEY - CHNA Open End Comments

Code	Healthcare Themes	Code	Healthcare Themes
VIO	Abuse/Violence	NURSE	More Nurse Availability
ACC	Access to Care	NEG	Neglect
AGE	Aging (Senior Care/Assistance)	NH	Nursing Home
AIR	Air Quality	NUTR	Nutrition
ALC	Alcohol	OBES	Obesity
ALT	Alternative Medicine	ORAL	Oral Surgery
ALZ	Alzheimer's	ORTHOD	Orthodontist
AMB	Ambulance Service	OTHR	Other
ASLV	Assisted Living	OP	Outpatient Services/Surgeries
AUD	Auditory	OZON	Ozone
BACK	Back/Spine	PAIN	Pain Management
BD	Blood Drive	PARK	Parking
BRST	Breastfeeding	PHAR	Pharmacy
CANC	Cancer	DOCS	Physicians
CHEM	Chemotherapy	FLU	Pneumonia / Flu
KID	Child Care	FOOT	Podiatrist
CHIR	Chiropractor	POD	Podiatrist
CHRON	Chronic Diseases	POV	Poverty
CLIN	Clinics (Walk-In, etc.)	PNEO	Prenatal
COMM	Communication	PREV	Preventative Healthcare
CORP	Community Lead Healthcare	PRIM	Primary Care:
CONF	Confidentiality	PROS	Prostate
DENT	Dentists	DOH	Public Health Department
DIAB	Diabetes	QUAL	Quality of care
DIAL	Dialysis	REC	Recreation
DUP	Duplication of Services	RESP	Respiratory Disease
ECON	Economic Development	NO	Response "No Changes," etc.
EMER	Emergency Room	SANI	Sanitary Facilities
EMS	EMS	SNUR	School Nurse
EYE	Eye Doctor/Optomtrist	STD	Sexually Transmitted Diseases
FAC	Facility	SMOK	Smoking
FAM	Family Planning Services	SS	Social Services
FEM	Female (OBG)	SPEC	Specialist Physician care
FINA	Financial Aid	SPEE	Speech Therapy
FIT	Fitness/Exercise	STRK	Stroke
ALL	General Healthcare Improvement	DRUG	Substance Abuse (Drugs/Rx)
GEN	General Practice	SUIC	Suicide
GOV	Government	TPRG	Teen Pregnancy
HRT	Heart Care	THY	Thyroid
HIV	HIV/AIDS	TOB	Tobacco Use
HH	Home Health	TRAN	Transportation
HSP	Hospice	TRAU	Trauma
HOSP	Hospital	TRAV	Travel

KEY - CHNA Open End Comments				
Code	Healthcare Themes		Code	Healthcare Themes
MAN	Hospital Management		ALCU	Underage Drinking
INFD	Infidelity		INSU	Uninsured/Underinsured
IP	Inpatient Services		URG	Urgent Care/After Hours Clinic
LEAD	Lead Exposure		VACC	Vaccinations
BIRT	Low Birth Weight		VETS	Veteran Care
LOY	Loyalty		WAG	Wages
MAMO	Mammogram		WAIT	Wait Times
MRKT	Marketing		H2O	Water Quality
STFF	Medical Staff		WELL	Wellness Education/Health Fair
BH	Mental Health Services		WIC	WIC Program

Specialty KEY - CHNA Open End Comments				
CODE	Physician Specialty		CODE	Physician Specialty
ALLER	Allergy/Immunology		ONC	Oncology/Radiation Oncology
AES	Anesthesia/Pain		OPHTH	Ophthalmology
CARD	Cardiology		ORTH	Orthopedics
DERM	Dermatology		ENT	Otolaryngology (ENT)
EMER	Emergency		PATA	Pathology
ENDO	Endocrinology		PEDS	Pediatrics
FP	Family Practice (General)		PHY	Physical Medicine/Rehabilitation
GAS	Gastroenterology		PLAS	Plastic/Reconstructive
SUR	General Surgery		PSY	Psychiatry
GER	Gerontology		PUL	Pulmonary
HEM	Hematology		RAD	Radiology
IFD	Infectious Diseases		RHE	Rheumatology
IM	Internal Medicine		VAST	Thoracic/Cardiovascular/Vascular
NEO	Neonatal/Perinatal		URL	Urology
NEP	Nephrology		MDLV	Mid-Level
NEU	Neurology		SURG	Surgery
NEUS	Neurosurgery		TEL	Telemedicine
OBG	Obstetrics/Gynecology (Delivery)			

CHNA Community Feedback 2017

Cooper County Memorial Hospital (Primary Service Area) N=210

ID	Zip	Overall HC Rating	c1	c2	c3	Are there healthcare services in the Cooper County Memorial Hospital Primary Service Area that you feel need to be improved and/or changed?
1071	65233	Very Poor	ACC	CLIN		It is very difficult to get an appointment at the Rural Health Clinic.
1013	65233	Poor	ACC	COST	FAC	Increased services available at the hospital; more access for low-income families at a facility more centrally located; updated facilities
1031	65233	Fair	ACC	COST	PRIM	more affordable and available primary care physicians more affordable blood work and x-ray services, currently, they are way overpriced when compared with Boyce and Bynum and Advanced Radiology
1061	65233	Fair	ACC	EQUIP	STAFF	Many patients are transferred to Columbia where they can receive care Cooper County cannot provide related to lack of monitoring equipment and staff knowledge.
1084	65233	Fair	ACC	PRIM	CLIN	With the University of Missouri Columbia healthcare facilities in reasonably close proximity to Boonville, I switched my primary care to a physician at one of the clinics there. Since the majority of the more complicated procedures are referred to Columbia anyway, it seemed pointless to be seen in Boonville simply to be referred elsewhere. I lack confidence in the local facility because its equipment is not state of the art and my health is too important to risk a misdiagnosis due to outmoded equipment. Dr. John Ward was my primary care physician for a good many years. When he retired, my comfort level vanished. I didn't find anyone on staff who gave me the sense of competence and confidence I felt while being treated by Dr. Ward.
1107	65237	Fair	ACC	QUAL		Unsure of competent care. It seems that most cases are sent to Columbia.
1129	65276	Poor	ACC	TECH	WAIT	I use healthcare providers in Columbia due to the fact of the advances in technology and availability of those advances in Columbia and not having to wait to obtain those services.
1102	65233	Poor	ACC			A complaint I hear repeatedly is that the Cooper County hospital is not capable of handling anything. If you have the flu, they send you to Columbia.
1014	65233	Good	ACC			have as many out patient services as possible without having to go to Columbia.
1032	65233	Fair	ACC			I have never used the hospital services, but from what I hear Cooper County Memorial Hospital isn't a place that can help individuals needing specialized care. Most cases have to be sent to Columbia to have proper care.
1091	65233	Very Good	ACC			I think with the growing community and how far away the next health care is and the time it would take to get there, it would be nice if there was more services offered.
1147	65351	Very Good	ACC			Not for the type of services they are able to provide in a rural community.
1070	65233	Good	ACC			We are too close to good Hospitals in Columbia for the Cooper County Hospital to be duplicating services short of routine tests and things that people cannot travel for.
1143	65301	Good	ACC			We have Cooper county residents from the Otterville area receiving care in Pettis county, which is to be expected as Sedalia is a little closer than Boonville and may offer a few more services.
1015	65233	Poor	ACC			Yes need to work more on helping the ones in need
1138	65203	Good	AMB	INSUR		The ambulance service needs to accept District insurance.
1139	65203	Good	BH	ACC		Mental health access
1092	65233	Poor	BILL	EMER		billing and emergency room

CHNA Community Feedback 2017

Cooper County Memorial Hospital (Primary Service Area) N=210

ID	Zip	Overall HC Rating	c1	c2	c3	Are there healthcare services in the Cooper County Memorial Hospital Primary Service Area that you feel need to be improved and/or changed?
1087	65233	Fair	BILL			Hospital needs a more efficient billing service.
1044	65233	Good	BILL			There billing department
1026	65233	Poor	CLIN	DOCS	NP	Services at hospital are totally outdated. Clinic needs more doctors who keep current. Clinic needs to rely less on nurse practitioners for primary care. If I have to pay what they cost, I want to see a physician!
1079	65233	Good	CLIN	SURG	MRKT	Specialty clinics and surgical services need to be advertised more. Public is unaware of the types of services we offer.
1012	65233	Poor	DOCS	ED	WELL	Need providers educated and practiced in holistic / wellness approach to healthcare, ideally who are equally educated and practiced in traditional medicine as well, to be able to offer a client centered approach to WELLNESS and health.
1041	65233	Good	DOCS	EMER		Need to always have an experienced M.D. in the ER.
1090	65233	Very Good	DOCS	FP		More Family Drs available in this area.
1049	65233	Poor	DOCS	STAFF	BOARD	Yes. We need good quality physicians and nurses. We need new board members who are up to speed on managing quality people.
1128	65276	Fair	DOCS			More providers
1018	65233	Fair	DOCS			Need more doctors like Dr. Brownfield so she isn't so swamped and we have other good choices.
1004	65233	Good	ED	STAFF	PAIN	More education for nursing on pain management of hospice patients.
1132	65068	Fair	EMER	DOCS	XRAY	ER is staff by doctors who are not skilled in ER issues, X-rays are poor in quality - had a series of 6 X-Rays done. Brought them to a specialist in Columbia who could not make out detail, so had to do another set. He showed me his next to CCMH and it was like elementary vs college in clarity and focus. Lastly, referrals to specialists in Columbia are extremely slow to be made. Had to go to another doctor to get a referral (and got the apt within 4 days - after waiting 2 weeks for a referral from my Primary Care Physician and still not getting one)
1056	65233	Good	EMER	DOCS		emergency room doctors
1098	65233	Good	EMER	DOCS		ER drs.
1073	65233	Fair	EMER	EMT	AMB	Emergency Care, more qualified EMT services, ambulance services on health care plans
1121	65276	Good	EMER	FAC		I feel that the services need improved I think maybe the ER could use some updates.
1034	65233	Good	EMER	STAFF		Th ER needs a total staff overhaul
1123	65276	Good	EMER	WAIT		Emergency Room is sometimes very slow.
1045	65233	Very Poor	EMER			Emergency department
1006	65233	Fair	EMER			Emergency room
1057	65233	Fair	EQUIP	FAC		update equipment, beds, and decorations to properly care for patients and improve their stays
1010	65233	Good	EQUIP			new equipment
1077	65233	Good	FAC	GRANT		Is there a grant available to build an entirely new facility or improve the present facility?
1054	65233	Fair	FAC	URG		The Hospital is dirty and old - updates would be nice. Urgent care center would be great too.

CHNA Community Feedback 2017

Cooper County Memorial Hospital (Primary Service Area) N=210

ID	Zip	Overall HC Rating	c1	c2	c3	Are there healthcare services in the Cooper County Memorial Hospital Primary Service Area that you feel need to be improved and/or changed?
1119	65274	Good	FAC			I hear many complaints about the dripping of faucets and not having hot water in the patient rooms. I know this is a huge complaint and I'm not sure how this can be fixed. I'm sure that it has been looked into but I know that is not a good image to have in the community.
1083	65233	Fair	IMMUN	DAY	FOOD	YES immunizations, daycare food service support appts for doctor visit when sick not to wait several days.
1009	65233	Good	INSUR			need to accept all insurances
1146	65349	Good	LAB	FAC	CLIN	The lab within the hospital needs adequate supplies to function and to perform testing(s). The Hospital could use some renovation(s) and a lot of updating. The clinic needs to be seeing double the amount of patients daily. There is no urgent after hours place to go for minor accidents or illnesses. etc.
1028	65233	Good	LAB			Several people, myself included, have trouble getting lab results in a timely manner. Sometimes even after numerous phone calls. Billing has improved some, but not much.
1036	65233	Good	MH	OBES		Programs for children with special needs. Programs to address childhood obesity.
1108	65237	Fair	MRKT	ACC	DOCS	Try not to use Cooper County Hospital, due to their poor reputation. If we need anything we go on to Columbia, Mo. Better doctors, services etc.
1017	65233	Good	MRKT	WELL	OBG	promoting services that the community many not be aware of: well women check, prostate exam for men, well child checks, wellness/preventative exams
1137	65078	Good	MRKT			Advertise your services more to the public.
1039	65233	Fair	NP	DOCCS		I don't like always being referred to the nurse practitioner instead of my doctor.
1035	65233	Good	OP	SURG	ICU	I would like to see more outpatient surgeries, surgeries which don't need an ICU, performed at the Hospital.
1038	65233	Poor	OP			Outpatient Help could be friendlier.
1122	65276	Good	OPH	SURG		Eye surgery such as cataracts, etc.
1089	65233	Very Good	ORTHO	SURG		Our community needs an orthopedic surgeon
1058	65233	Fair	PRIM	DOCS		Need more primary care doctors
1072	65233	Very Poor	QUAL	FOOD		Yes. Everything from patient care to food service
1002	65233	Very Good	QUAL			I am very satisfied with all of the care etc. that we have at Cooper County Hosp. Thank you for all you do.
1130	65276	Good	QUAL			I think the hospital service is very good
1145	65347	Good	QUAL			Improved
1094	65233	Good	QUAL			They have provided everything I have needed.
1037	65233	Good	STAFF	BILL		The nurses/caregivers are kind of hateful. Lots of NICE people would love to have their jobs! Billing issues.
1023	65233	Good	STAFF	CLIN	DOCS	Our experience with the hospital is limited. Because of the poor customer experiences over the last few years in the health clinic we moved our primary care from the Drs. at the clinic to Kathy Lenz. Kathy sends us to Columbia for testing to include sleep studies, CT Scan, Lab's etc. Our lack of using the hospital is a direct cause from the clinic. The clinic lost focus on customers. Several times standing behind the glass window waiting to be acknowledged to a clinic that calls on Saturday to check on your progress. Night and day.

CHNA Community Feedback 2017

Cooper County Memorial Hospital (Primary Service Area) N=210

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1040	65233	Fair	STAFF	EMER	DOCS	Quality of technicians need to be improved. Quality of ER Physicians need to be improved.
1133	65287	Good	STAFF	QUAL	EMER	Nursing care is good. Services offered inadequate. Emergency care is poor.
1117	65250	Good	STAFF			Level of nursing care- nurse competence in taking individuals with more complex cases.
1135	65010	Fair	ULTRA	DVT	OBG	Ultrasound needs to be available 24/7 or at least on an on call basis. We can do very little for pts with possible DVT or pregnancy issues.
1125	65276	Poor	URG	ACC	DOCS	Need urgent care as you must go to Columbia for these services and local physicians direct you there, so why even stop or call Cooper County providers.
1047	65233	Good	URG	DOCS	STAFF	Need an urgent care, but good doctors and staff at hospital and offices.
1055	65233	Good	URG	HOME		urgent care needs to be provided home services after hospitalization
1113	65248	Good	URG			I would like this community to have an urgent care facility.
1106	65233	Good	URG			More flexible urgent care.
1126	65276	Poor	URG			Need urgent care facility.
1033	65233	Fair	WAIT	EMER	DOCS	Waiting times in the ER and doctors visits
1103	65233	Fair	WAIT	EMER		Wait time is ridiculous and would not go there in an emergency

CHNA Community Feedback 2017

Cooper County Memorial Hospital (Primary Service Area) N=210

ID	Zip	Overall HC Rating	c1	c2	c3	Throughout the past two years, did you or someone you know receive healthcare services outside of the Cooper County Memorial Hospital Primary Service Area?
1012	65233	Poor	ACUP	NUTR	COLUM	Acupuncture and nutrition by Medical Doctor in Columbia MO
1040	65233	Fair	BOONE	GAST		admission to Boone Hospital for Mechanical Ileus
1037	65233	Good	BOONE	OP	IP	Boone Hospital outpatient and inpatient
1114	65250	Good	BOONE			Boone
1007	65233	Good	BOONE			boone hospital
1073	65233	Fair	BOONE			Boone Hospital
1094	65233	Good	CANC			Cancer treatment
1109	65237	Good	CARD	WELL	UROL	Cardio wellness; urology; surgery
1104	65233	Good	CHRON			Chronic disease
1049	65233	Poor	COLON	CARD		Colonostomy and heart related visits
1103	65233	Fair	COLUM	ORTHO	CHIRO	Columbia orthopedic Group, chiropractic
1145	65347	Good	COLUM	ORTHO		Columbia Orthopedic
1050	65233	Fair	COLUM	PEDS	OPT	Many, in Columbia, from pediatrics to eye care to breast exams & more.
1056	65233	Good	COLUM			care in Columbia
1039	65233	Fair	COLUM			Columbia
1017	65233	Good	COLUM			columbia, mo
1065	65233	Good	DENT	MAMM	PRIM	Dental, Mammogram, primary care
1048	65233	Fair	DENT			Dental
1036	65233	Good	DENT			Dentist
1130	65276	Good	DERM	ORTHO	ONC	dermatologist-orthopedic-oncologist
1099	65233	Fair	DERM			Skin checks/spot removals
1013	65233	Poor	EMER	CLIN	IP	Emergency services; specialty clinics; inpatient care
1006	65233	Fair	EMER	ORTHO	SURG	Emergency room - broken ribs
1047	65233	Good	EMER	PRIM	CLIN	Emergency Room and use of hospital. Also family member has primary care doctor at clinic.
1141	65279	Good	EMER			ER
1089	65233	Very Good	EMER			Spouse was in emergency room and transferred because we did not offer the invasive service
1136	65046	Good	FP	DERM	EMER	Family Meds, Derm, Emergency Care, Surg
1011	65233	Good	GALL	SURG		gallbladder surgery
1061	65233	Fair	GAST			GI procedures
1144	65301	Good	GAST			intestinal
1111	65237	Good	HH			Home nursing care
1016	65233	Good	HOSP	COLUM		hospitalization at Columbia hospital
1032	65233	Fair	HOSP			Hospice Care
1101	65233	Good	HOSP			hospitalization

CHNA Community Feedback 2017

Cooper County Memorial Hospital (Primary Service Area) N=210

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1146	65349	Good	ICU	SURG		ICU, Surgery, over night stay
1082	65233	Fair	IP	MU	OBG	Inpatient stay at University Hospital and OBGYN at Boone.
1083	65233	Fair	IP	SPEC		hospital and specialist dr.
1087	65233	Fair	IP			Impatient
1018	65233	Fair	KATY	BOONE	HHC	Katy Manor, Boone Hospital (BJC), Hometown Health Care
1075	65233	Good	KID			kidney stones
1041	65233	Good	MAMM	OBG	OPT	Mammogram, Gynecological check up and therapy, optometrist, ophthalmologist, psychiatric care, endoscopy, spinal stenosis
1057	65233	Fair	MAMM	ULTRA		Mammogram, ultrasound on breast
1132	65068	Fair	MU	BOONE		University Hospital and Boone Hospital
1059	65233	Fair	MU	CLIN		University of Missouri Physicians Clinics
1091	65233	Very Good	MU	EMER		university of missouri physicians and er department
1084	65233	Fair	MU	OBG	NEUR	University of Missouri Columbia Healthcare System -- Gynecology, Medicine Specialty, Neurology, Neurosurgery, Nephrology
1093	65233	Very Good	MU	PEDS	CLIN	University of Missouri; pediatrics specialty clinic
1033	65233	Fair	NEUR			Head injury
1121	65276	Good	OBG			gave birth
1005	65233	Fair	OBG			OBGYN
1029	65233	Good	OP	ORTHO	SURG	outpatient back surgery
1035	65233	Good	OP	SURG	UROL	Outpatient Surgery Urologist for Kidney Stone
1148	66233	Very Poor	OP			Outpatient staff was rude
1134	65287	Good	OPT	BOONE		everything but eye care is done in Boone county
1054	65233	Fair	ORTHO	CHIRO	OBG	orthopedic, chiropractic, specialty gyn
1030	65233	Good	ORTHO	SURG		Hip replacement
1138	65203	Good	ORTHO	SURG		My daughter has a broken ankle.
1019	65233	Fair	ORTHO	UROL	DIAB	Orthopedics, urology, diabetic care
1045	65233	Very Poor	ORTHO			Back and spine specialist
1086	65233	Good	ORTHO			Orthopedic
1055	65233	Good	ORTHO			orthopedic
1066	65233	Good	ORTHO			ORTHOPEDICS
1117	65250	Good	PEDS	OBG	EMER	Pediatrics, OBGYN, Pediatric Emergency/Urgent Care
1034	65233	Good	PEDS			pediatric services
1119	65274	Good	POD	SURG	OPT	Foot surgery, Eye Dr. Kidney specialist
1067	65233	Fair	PRIM	DENT		Primary care and dental
1026	65233	Poor	PRIM	LAB	XRAY	Primary care physician visit, labs, x-rays
1131	65276	Good	PRIM	ONC	OP	primary care physician, oncologists, outpatient services all in Columbia, MO. Booneville only utilized dental and pharmacy services.

CHNA Community Feedback 2017

Cooper County Memorial Hospital (Primary Service Area) N=210

ID	Zip	Overall HC Rating	c1	c2	c3	Throughout the past two years, did you or someone you know receive healthcare services outside of the Cooper County Memorial Hospital Primary Service Area?
1124	65276	Good	PRIM	SPEC		Routine Care, specialty care.
1126	65276	Poor	PRIM	SURG		Primary care and surgery.
1001	65322	Good	PRIM			general healthcare
1023	65233	Good	PRIM			Health tests
1024	65233	Good	PRIM			Physicals
1043	65233	Fair	PRIM			Primary care
1025	65233	Good	PRIM			Tests
1042	65233	Fair	PRIM			tests that couldn't be done
1133	65287	Good	PT	OP		Physical Therapy and Outpatient services
1052	65233	Fair	PT			Physical Therapy
1028	65233	Good	SPEC	COLUM	STL	Specialist in Columbia and St. Louis
1070	65233	Good	SPEC	EMER		Specialist Visits, Emergency Room
1095	65233	Good	SPEC	NEUR	UROL	Medial specialties, i.e. neurology, urology
1058	65233	Fair	SPEC	ORTHO		Specialty orthopedic services
1085	65233	Good	SPEC			specialty doctors
1106	65233	Good	STRK			Transferred out due to stroke.
1120	65274	Good	SURG	DENT	PRIM	surgical, dental, primary health care,
1077	65233	Good	SURG	HH	NH	Surgical, Home Health, and Nursing Home
1078	65233	Fair	SURG	MH		Surgery, mental health
1108	65237	Fair	SURG	PRIM		Surgery, stress test.
1071	65233	Very Poor	SURG			Surgery
1140	65270	Good	SURG			Surgery
1107	65237	Fair	SURG			Surgery;
1079	65233	Good	SURG			Surgical
1081	65233	Good	URG	DERM	ALL	Urgent care, dermatology, allergist
1068	65233	Fair	UROL	ORTHO		Urology and orthopedics
1020	65233	Fair	WCH			Women's & Children's Hospital

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

Let Your Voice Be Heard!

Cooper County Memorial Hospital, in collaboration with the Cooper County Public Health Center, is updating its 2014 Community Health Needs Assessment (CHNA). Your feedback from this survey will help us identify the current health issues in our community. While your participation is voluntary, we would greatly appreciate your input. All answers will be kept confidential.

All 2017 Community Health Needs Assessment feedback is due by Tuesday, August 8. Thank you for your participation.

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

Part I: Introduction

1. How do you rate the "Overall Quality" of healthcare delivery in our community?

	Very Good	Good	Fair	Poor	Very Poor
Health Rating:	<input type="radio"/>				

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

2. Are there healthcare services in the Cooper County Memorial Hospital Primary Service Area that you feel need to be improved and/or changed? (Please be specific.)

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

3. From our 2014 CHNA, a number of health needs were identified as priorities. Are any of these previous CHNA needs still an "Ongoing Problem" in the Cooper County Memorial Hospital Primary Service Area?

	Not a Problem Anymore	Somewhat of a Problem	Major Problem
Smoking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provider Shortage / Availability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Awareness of Care Available	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wellness Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Support Groups	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Economic Development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obesity (Specifically for Children)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Promote a Culture of Healthy Lifestyles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Education / Information Classes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

4. Please select the top three most pressing 2014 health needs that need improvement.

- | | |
|---|--|
| <input type="checkbox"/> Smoking | <input type="checkbox"/> Economic Development |
| <input type="checkbox"/> Provider Shortage / Availability | <input type="checkbox"/> Obesity (Specifically for Children) |
| <input type="checkbox"/> Awareness of Care Available | <input type="checkbox"/> Promote a Culture of Healthy Lifestyles |
| <input type="checkbox"/> Wellness Programs | <input type="checkbox"/> Education / Information Classes |
| <input type="checkbox"/> Support Groups | |

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

5. How would Cooper County area residents rate each of the following health services? (Please select one answer per row.)

	Very Good	Good	Fair	Poor	Very Poor	N/A
Ambulance Services	<input type="radio"/>					
Child Care	<input type="radio"/>					
Chiropractors	<input type="radio"/>					
Dentists	<input type="radio"/>					
Emergency Room	<input type="radio"/>					
Eye Doctor / Optometrist	<input type="radio"/>					
Family Planning Services	<input type="radio"/>					
Home Health	<input type="radio"/>					
Hospice	<input type="radio"/>					

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

6. Continue.... How would Cooper County area residents rate the following healthcare services?

	Very Good	Good	Fair	Poor	Very Poor	N/A
Inpatient Services	<input type="radio"/>					
Mental Health Services	<input type="radio"/>					
Nursing Home	<input type="radio"/>					
Outpatient Services	<input type="radio"/>					
Pharmacy	<input type="radio"/>					
Primary Care	<input type="radio"/>					
Public Health Department	<input type="radio"/>					
School Nurse	<input type="radio"/>					
Visiting Specialists	<input type="radio"/>					

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

7. How would Cooper County area residents rate each of the following Cooper Co. Public Health services?
(Please select one answer per row.)

	Very Good	Good	Fair	Poor	Very Poor	N/A
Immunizations	<input type="radio"/>					
WIC Nutrition Program	<input type="radio"/>					
Communicable Disease Investigations	<input type="radio"/>					
Health Education offerings	<input type="radio"/>					
Sexually Transmitted Disease Testing	<input type="radio"/>					
Health Inspections	<input type="radio"/>					
Emergency Preparedness	<input type="radio"/>					
Birth and Death Certificates issue	<input type="radio"/>					
Breastfeeding Education	<input type="radio"/>					

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

8. Throughout the past two years, did you or someone you know receive healthcare services outside of the Cooper County Memorial Hospital Primary Service Area?

- Yes Don't know
 No

If yes, please specify the healthcare services received.

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

9. Are there any other health needs from the list below that need to be discussed at our upcoming CHNA Town Hall meeting? (Please select all that need to be on our agenda.)

- | | | |
|--|--|--|
| <input type="checkbox"/> Abuse / Violence | <input type="checkbox"/> Lead Exposure | <input type="checkbox"/> Sexually Transmitted Infections |
| <input type="checkbox"/> Alcohol | <input type="checkbox"/> Mental Illness | <input type="checkbox"/> Smoke-Free Workplace |
| <input type="checkbox"/> Breast Feeding Friendly Workplace | <input type="checkbox"/> Nutrition | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Obesity | <input type="checkbox"/> Teen Pregnancy |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Ozone | <input type="checkbox"/> Tobacco Use |
| <input type="checkbox"/> Drugs / Substance Abuse | <input type="checkbox"/> Physical Exercise | <input type="checkbox"/> Vaccinations |
| <input type="checkbox"/> Family Planning | <input type="checkbox"/> Poverty | <input type="checkbox"/> Water Quality |
| <input type="checkbox"/> Heart Disease | <input type="checkbox"/> Respiratory Disease | <input type="checkbox"/> Wellness Education |
| <input type="checkbox"/> Other (please specify) | | |

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

10. What is your home zip code?

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

Demographics

11. For reporting purposes, are you involved in or are you a ...? (Please select all that apply).

- | | | |
|---|---|---|
| <input type="checkbox"/> Board Member | <input type="checkbox"/> Elected Official - City / County | <input type="checkbox"/> Other Health Professional |
| <input type="checkbox"/> Business / Merchant | <input type="checkbox"/> EMS / Emergency | <input type="checkbox"/> Parent / Caregiver |
| <input type="checkbox"/> Case Manager / Discharge Planner | <input type="checkbox"/> Farmer / Rancher | <input type="checkbox"/> Pharmacy |
| <input type="checkbox"/> Civic Club / Chamber | <input type="checkbox"/> Health Department | <input type="checkbox"/> Physician (MD / DO) |
| <input type="checkbox"/> Charitable Foundation | <input type="checkbox"/> Hospital | <input type="checkbox"/> Physician Clinic |
| <input type="checkbox"/> Clergy / Congregational Leader | <input type="checkbox"/> Housing / Builder | <input type="checkbox"/> Media (Paper, TV, Radio) |
| <input type="checkbox"/> College / University | <input type="checkbox"/> Insurance | <input type="checkbox"/> Senior Care / Nursing Home |
| <input type="checkbox"/> Consumer Advocate | <input type="checkbox"/> Labor | <input type="checkbox"/> Social Worker |
| <input type="checkbox"/> Consumers of Healthcare | <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Veteran |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Low Income / Free Clinics | <input type="checkbox"/> Welfare / Social Service |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Mental Health | |
| <input type="checkbox"/> Education Official / Teacher | <input type="checkbox"/> Nursing | |
| <input type="checkbox"/> Other (please specify) | | |

Community Health Needs Assessment 2017 - Cooper County Memorial Hospital (Primary Service Area)

You have just completed the 2017 Community Health Needs Assessment Survey. Thank you for your participation.

By selecting "Done", you are submitting your responses and giving others an opportunity to complete the same survey .

CHNA Report Contact :



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