

MISSION: TO IMPROVE THE HEALTH OF THE PEOPLE AND COMMUNITIES WE SERVE.



# Community Health Needs Assessment and Implementation Plan 2022



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## Executive Summary

Parkland Health Center (PHC) includes a full-service hospital located in Farmington, Missouri, and a primary care facility in Bonne Terre, Missouri. Parkland Health Center, between its combined entities, has delivered high quality health care services to patients in the St. Francois County region for more than 100 years. The hospital has also established effective partnerships towards the goal of improving the health of the community.

Like all nonprofit hospitals, PHC is required by the Patient Protection and Affordable Care Act (PPACA) to conduct a community health needs assessment (CHNA) and create an implementation plan every three years. PHC completed its first CHNA and implementation plan in 2013 and again in 2016 and 2019. Reports were posted to the hospital's website to ensure easy access to the public.

As part of this assessment, each hospital is required to define its community. Once the community is defined, input must be solicited from those who represent the broad interests of the community served by the hospital, as well as those who have special knowledge and expertise in the area of public health. This process occurred in two phases.

In the past, community stakeholder health needs assessments were conducted in person via a moderated discussion. Due to COVID-19, BJC HealthCare, along with collaborative health system and hospital partners, conducted an online survey for the safety of community stakeholders. The survey provided stakeholders an opportunity to rank community health needs compiled by these partners.

During phase two, findings from the stakeholder survey were reviewed and analyzed by an internal work group from PHC and the St. Francois County Health Department. Using multiple sources, including Conduent Healthy Communities Institute, a secondary data analysis was conducted to further assess the identified needs. This analysis identified unique health disparities and trends evident in St. Francois County when compared to the state.

At the conclusion of the comprehensive assessment process, it was concluded that PHC will focus on Mental Health/Drug Abuse and the health department will primarily focus on diabetes.

The analysis and conclusions were reviewed by Community Benefit committee of the Parkland Health Center Board of Directors and presented and approved by the Parkland Health Center Board of Directors.

## Community Description

PHC is a member of BJC HealthCare, one of the largest, nonprofit health care organizations in the country. BJC HealthCare hospitals serve urban, suburban, and rural communities through 15 hospitals and multiple community health locations primarily in the greater St. Louis, southern Illinois and mid-Missouri regions.

Parkland Health Center – Bonne Terre, located on Highway 67, is a primary-care facility and critical access hospital and Parkland Health Center – Farmington, east of Highway 67 on Liberty Street, is a 130-bed, full- service facility.

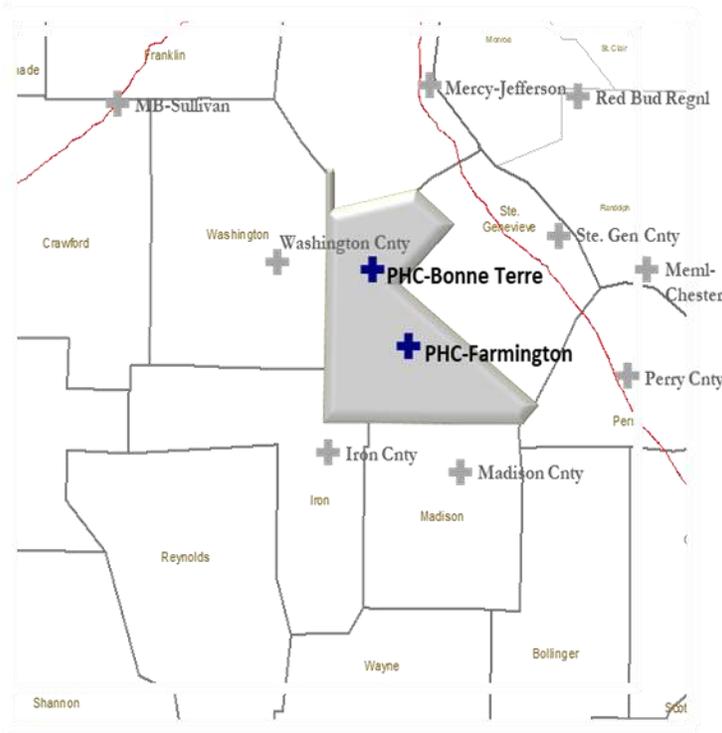
St. Francois County Health Center (SFCHC) is a non-profit local public health agency governed by an elected five-member board of trustees located in Park Hills, Missouri, and serving the citizens of St. Francois County. The Health Center is supported financially by county tax dollars, state and federal contracts and grants.

SFCHC’s mission is to promote and protect the health and welfare of the citizens of St. Francois County. SFCHC seeks to reduce or prevent the incidence of disease or injury in our community through the Women, Infants, and Children (WIC) program; emergency preparedness; immunization services; lead testing; communicable disease surveillance; environmental public health services; STD testing and treatment; vital records; HIV/AIDS Case Management; and other health education services.

For the CHNA, these organizations defined their community as St. Francois County, which is located in southeast Missouri and includes a land area of 451.89 square miles.



## PHC's Primary Service Area: St. Francois County



### Parkland Health Center PSA Zip Codes

#### St. Francois MO

63036  
63087  
63601  
63624  
63628  
63637  
63640  
63653

PHC's primary service area is represented by the shaded grey area of the map.

### POPULATION

Population data are necessary to understand the health of the community and plan for future needs. St. Francois County has a population of 67,215 (2019 Census estimate). The population experienced an increase of 2.8 percent from 2010 to 2019.

### INCOME

St. Francois County's median household income totaled \$46,466 (2015-2019) compared to Missouri (\$55,461). Persons living below the poverty level in St. Francois County totaled 15.5 percent compared to 13.7 percent in the state.

### AGE

The age structure of a community is an important determinant of its health and the health services it will need. St. Francois County reported 16.6 percent of persons 65 years and over compared to 17.3 percent in the state.

TABLE 1: ST FRANCOIS COUNTY VS. MISSOURI POPULATION BY GENDER AND RACE/ETHNICITY

	ST. FRANCOIS COUNTY	MISSOURI
TOTAL POPULATION	67,215	6,137,428
PERCENT POPULATION BY GENDER		
GENDER	ST. FRANCOIS COUNTY	MISSOURI
Female	46.6	50.9
Male	53.5	49.1
PERCENT POPULATION BY RACE/ETHNICITY		
RACE/ETHNICITY	ST. FRANCOIS COUNTY	MISSOURI
White, not Hispanic or Latino)	91.6	79.1
African American	4.6	11.8
Hispanic or Latino	1.7	4.4
Two or More Races	1.4	2.4
American Indian & Alaska Native	0.4	0.6
Asian	0.4	2.2
Native Hawaiian & other Pacific Islander	0.1	0.2

## EDUCATION

Individuals who do not finish high school are more likely than people who finish high school to lack the basic skills required to function in an increasingly complicated job market and society. Adults with limited education levels are more likely to be unemployed, on government assistance or involved in crime. The Healthy People 2020 national health target is to increase the proportion of students who graduate high school within four years of their first enrollment in ninth grade to 82.4 percent.

In St. Francois County, 84.8 percent of the population age 25 and older had a high school diploma compared to 89.9 percent in the state. Additionally, 14.3 percent of the population age 25 and older had a bachelor's degree or higher compared to 29.2 percent in the state.

For many, having a bachelor's degree is the key to a better life. The college experience develops cognitive skills, and allows learning about a wide range of subjects, people, cultures and communities. Having a degree also opens up career opportunities in a variety of fields and is often the prerequisite to a higher-paying job. It is estimated that college graduates earn about \$1 million more per lifetime than their non-graduate peers. (Conduent Healthy Communities Institute)

## Previous (2019) CHNA Measurement and Outcomes Results

At the completion of the 2019 CHNA, PHC identified the top priority health needs as Diabetes/Diabetes Self-Management and Substance Abuse where focus was most needed to improve the health of the community served by the hospital. The following table details goals and objectives to address these community health needs. Due to COVID-19, PHC decided to suspend implementation strategies for these health needs for the safety and health of the community and staff.

TABLE 2: PARKLAND HEALTH CENTER'S 2019 MEASURES OF SUCCESS BY PRIORITY

DIABETES-DIABETES SELF MANAGEMENT		SUBSTANCE ABUSE	
PROGRAM GOAL		PROGRAM GOAL	
Reduce the disease burden of diabetes mellitus (DM) and improve the quality of life for all persons who have, or are at risk for DM		Reduce the morbidity and mortality associated with illicit and prescription opioid overdoses in St. Francois County	
PROGRAM OBJECTIVES		PROGRAM OBJECTIVES	
<p>a) Increase the proportion of individuals living in St. Francois County with diagnosed diabetes who receive formal diabetes education by 10 percent from the baseline from 2019 and thereafter</p> <p>b) Through pre and post-tests, increase the knowledge level of lifestyle change through diet and physical activity of individuals at high risk for diabetes with pre-diabetes living in St. Francois County by 10 percent at the end of the educational session</p>		<p>a) Increase access to Narcan in populations at risk for overdose by December 31, 2020 and increase by five percent thereafter until December 31 2022</p> <p>b) Prevent misuse of opioid substances by reducing access to prescribed controlled medications by December 31, 2020 and decrease by five percent thereafter until December 31 2022</p> <p>c) Reduce transmission of hepatitis C by increasing access to proper testing and treatment by December 31, 2020 and increase by five percent thereafter until December 31 2022</p> <p>d) Implement a peer-to-peer learning program to improve prescribing practices and prescriber knowledge around academic detailing campaign messages</p> <p>e) Increase utilization of prenatal care among women with Opioid Use Disorder (OUD) by December 31, 2020 and increase by five percent thereafter until December 31 2022</p> <p>f) Enhance individual and community knowledge of risks and side effects on signs and symptoms of an overdose, what opioids are and the Good Samaritan law associated with OUD by five percent from December 2020 and thereafter until December 31 2022</p>	
CURRENT STATUS		CURRENT STATUS	
<p><b>January - December 2020 (Pre-COVID 19)</b> Total of 60 participants were enrolled in the diabetes-self management program: The pre-test result was 20 percent and post-test was 84 percent; That is an increase of 123.1 percent from the pre-to-post test result.</p> <p><b>March -December 2021</b> Starting March, 2021, the self mangement program was implemented virtually. Total of 13 participants enrolled. The result of the pre-test was 20 percent and post-test result was 75 percent, an increase of 115.8 percent from the pre-to-post test.</p>		<p>Due to the COVID-19 pandemic during 2020 and 2021, all activities related to opioid abuse had been stalled. The department had also been informed by the MORE Project that funding related to free Naloxone units have been depleted. St Francois County Health Center has been seeking other alternatives for funding. Recently we were made aware by the MORE Project that a new funding opportunity to continue efforts have been identified through Missouri Institute of Mental Health. St. Francois County has been identified as one of 18 high priority counties in Missouri.</p>	

## Conducting the 2022 CHNA

Due to COVID-19, BJC HealthCare, along with collaborative partners SSM Health; Mercy Hospital St. Louis and Mercy Hospital South; and the St. Luke's network of care, which includes St. Luke's Hospital and St. Luke's Des Peres Hospital, conducted online surveys for the safety of our employees and of our community stakeholders who represent the broad interests of the community served by each hospital and those with special knowledge or expertise in public health. In the past, community stakeholder health needs assessments were conducted in person via a moderated discussion. (See Appendix D for the Stakeholder Assessment Report and Appendix E for the list of Participating Community Stakeholders)

### **Summary: Stakeholder Key Findings**

Mental health and substance abuse were consistently identified as the areas of greatest in need in St. Francois County. A lack of services for these conditions is a major obstacle to improving the health of the community.

Low-income populations and the homeless are the groups identified at greatest risk of poor health, along with those suffering from substance abuse.

Poverty and exposure to drug use are the social factors that put this community at the greatest risk, along with transportation issues.

COVID-19 has only made these issues worse, increasing the need for mental health services and an affordable wage.

Stakeholders identified the largest gaps in health resources in mental health services, along with drug treatment services and transportation. New needs and concerns have arisen in these areas, along with COVID-19 (vaccine hesitancy and the Delta variant), employment and vaping.

The local parks were most often recognized as the asset that supports a healthy community, along with the community agencies and health services that many may not be aware of.

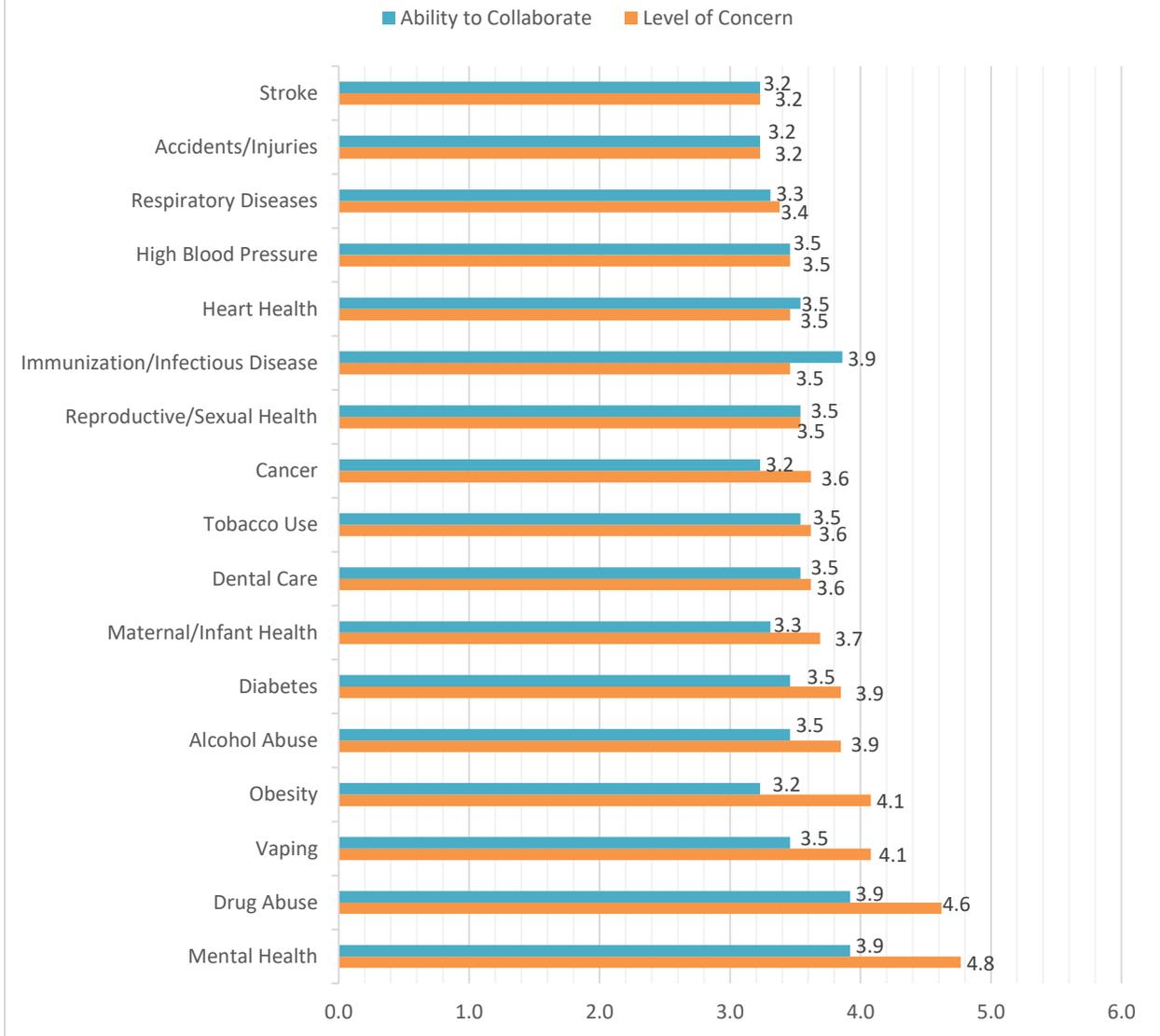
A single idea was proposed to address these issues: the formation of a community workgroup including all those who work in health and human services to collaborate and develop a county-wide plan to prioritize issues and develop strategies to address them.

Park Hills was noted as the community especially vulnerable or at-risk.

### **RATING OF NEEDS**

Community stakeholders were given the list of community health needs compiled by survey partners using results from the previous CHNA. Stakeholders were directed to rank these needs on a scale of 1 (low) to 5 (high), based on their perceived level of community concern and the ability of community organizations to collaborate in addressing.

St. Francois County Stakeholders Focus Group Ranking of the Health Needs



Mental Health rated highest in terms of level of concern. Immunization/Infectious Disease, Drug Abuse and Mental Health rated highest in ability to collaborate.

## Secondary Data Summary

Based on the needs reviewed by community stakeholders (see graph on previous page), key areas were identified for a secondary data analysis. These areas represent the most prevailing issues identified by the stakeholders.

The majority of the analysis was completed comparing St. Francois County and Missouri. In order to provide a comprehensive overview (analysis of disparity and trend) the most up-to-date secondary data from Conduent Healthy Communities Institute (HCI) was included for the needs listed below.

Conduent Healthy Communities Institute (HCI), an online dashboard of health indicators for St. Francois County, offers the ability to evaluate and track the information against state and national data and Healthy People 2020 goals. Sources of data include the National Cancer Institute, Environmental Protection Agency, U.S. Census Bureau, U.S. Department of Education, and other national, state, and regional sources. <http://www.healthycommunitiesinstitute.com/>

Other data sources include the Missouri Department of Mental Health and the Missouri Department of Health and Senior Services.

Community Health Needs:

- Cancer
- Diabetes
- Heart Disease and Stroke
- High Blood Pressure
- Maternal/Infant Health
- Mental Health/Behavioral Health
- Obesity
- Substance Use and Abuse

While PHC has will focus on Mental Health/Drug Abuse and the health department will primarily focus on diabetes, the following needs will continue to be appropriately addressed by the hospital and other organizations in St. Francois County.

### **CANCER**

Cancer is a leading cause of death in the United States, with more than 100 different types of the disease. According to the National Cancer Institute, lung, colon and rectal, breast, pancreatic and prostate cancer lead in the greatest number of annual deaths.

For the four-year period ending in 2018, St. Francois County saw a 4.3 percent increase in the All-Cancer Incident Rate vs. the four-year period ending 2017, while Missouri had a slight decline of 0.5 percent.

For the four-year period ending in 2019, whites in St. Francois County had a significantly higher Cancer Incident Rate of 527.9 per 100,000 population compared to whites in Missouri at 455.6.

## **DIABETES**

Diabetes is a leading cause of death in the U.S. This disease can have harmful effects on most of the organ systems in the human body. It is a frequent cause of end-stage renal disease, non-traumatic lower-extremity amputation, and a leading cause of blindness among working-age adults. Persons with diabetes are also at increased risk for coronary heart disease, neuropathy, and stroke. Diabetes disproportionately affects minority populations and the elderly, and its incidence is likely to increase as minority populations grow and the U.S. population becomes older.

For 2018, St. Francois County continued to have a diabetes rate among the Medicare population above the state (31.6 percent vs 26.4 percent).

## **HEART DISEASE AND STROKE**

Heart disease and stroke are among the most preventable disease in the U.S. yet are the most widespread and costly health conditions facing the nation today. Heart disease and stroke are the first and third leading causes of death for both women and men.

While St. Francois County saw a nearly eight percent decline in its age-adjusted death rate due to heart disease for the five-year period ending 2019 versus 2015, the county had 54.8 more deaths per 100,000 populations than the state rate.

High blood pressure is the No. 1 modifiable risk factor for stroke. In addition to stroke, high blood pressure also contributes to heart attacks, heart failure, kidney failure and atherosclerosis. The higher the blood pressure, the greater the risk of heart attack, heart failure, stroke, and kidney disease. In the United States, one in three adults has high blood pressure, and nearly one-third of these people are not aware they have the disease. It is particularly prevalent in African Americans, older adults, obese people, heavy drinkers, and women who take birth control pills. Blood pressure can be controlled through lifestyle changes, including eating a heart-healthy diet, limiting alcohol, avoiding tobacco, controlling your weight, and staying physically active.

For 2018, St. Francois County experienced an increase in its stroke rate among the Medicare population from 3.3 percent to 3.5 percent compared to 2017, while the state saw a decrease from 3.5 percent to 3.4 percent.

## **HIGH BLOOD PRESSURE**

High blood pressure is the number one modifiable risk factor for stroke. In addition to stroke, high blood pressure also contributes to heart attacks, heart failure, kidney failure and atherosclerosis. In the United States, one in three adults has high blood pressure, and nearly one-third of these people are not aware that they have it. It is particularly prevalent in African Americans, older adults, obese people, heavy drinkers, and women taking birth control pills. Blood pressure can be controlled through lifestyle changes, including eating a heart-healthy diet, limiting alcohol, avoiding tobacco, controlling your weight, and staying physically active.

While St. Francois County has maintained a fairly level hypertension rate among the Medicare population (2014 to 2018), the county continues to have a rate nearly 5 points higher than the Missouri.

## **MATERNAL / INFANT HEALTH**

Infant mortality rate continues to be one of the most widely used indicators of the overall health status of a community. The leading causes of death among infants are birth defects, preterm delivery, low birth weight, sudden infant death syndrome (SIDS), and maternal complications during pregnancy. This is a Healthy People 2030 Leading Health Indicator. The Healthy People 2030 national health target is to reduce the rate of infant deaths to 5.0 deaths per 1,000 live births.

Babies born premature are likely to require specialized medical care, and oftentimes must stay in intensive care nurseries. While there have been many medical advances enabling premature infants to survive, there is still risk of infant death or long-term disability. The most important things an expectant mother can do to prevent prematurity and low birth weight are to take prenatal vitamins, stop smoking, stop drinking alcohol and using drugs, and get prenatal care. The Healthy People 2020 national health target is to reduce the proportion of infants who are born preterm to 11.4 percent.

St. Francois County had a 9.6 percent decline in the infant mortality rate for the 11-year-period ending in 2019 versus the 11-year-period ending in 2016. This compared to the state decline of 5.9 percent for the same time period.

## **MENTAL HEALTH**

More than 33,000 people kill themselves each year according to the Centers for Disease Control and Prevention, but suicide deaths only account for part of the problem. An estimated 25 attempted suicides occur per every suicide death, and those who survive suicide may have serious injuries, in addition to having depression and other mental problems.

For the five-year period ending in 2019, St. Francois County had a 30.7 percent increase in the age-adjusted death rate due to suicide compared to the five-year period ending in 2015. The increase is significantly higher than the state rate increase of 16.5 percent.

## **OBESITY**

The percentage of obese adults is an indicator of the overall health and lifestyle of a community. Obesity increases the risk of many diseases and health conditions including heart disease, type 2 diabetes, cancer, hypertension, stroke, liver and gallbladder disease, respiratory problems, and osteoarthritis.

From 2007 to 2016, adults in St. Francois County who were considered obese increased over 10 percentage points (38.1 percent vs. 27.8 percent), compared to adults in Missouri overall that increased 2 points.

## **SUBSTANCE USE AND ABUSE**

The majority of drug overdose deaths involve an opioid, and at least half of all opioid overdose deaths involve a prescription opioid. Since 1999, the rate of overdose deaths involving opioids (including prescription opioid pain relievers) has nearly quadrupled. According to the CDC,

overdoses from prescription opioid pain relievers are a driving factor in the increase in opioid overdose deaths.

Drug overdose deaths are the leading cause of injury death in the United States, with over 100 drug overdose deaths occurring every day. The death rate due to drug overdose has been increasing over the last few decades. The majority of deaths due to pharmaceutical overdose involve opioid analgesics (prescription painkillers). Those who die from drug overdose are more likely to be male, Caucasian, or between the ages of 45 and 49. Although the majority of drug overdose deaths are accidental, they may also be intentional or of undetermined intent. (Conduent Healthy Communities Institute)

For 2019, St. Francois County saw a significant increase in individuals admitted to substance abuse treatment programs due to primary drug problems.

In 2020, St. Francois County continued to experience a high fatal drug overdose level. Non-opioids and non-heroin opioids were the main sources of those fatal drug overdoses.

For 2020, 48 percent of drug overdoses were 15-34 years of age; this is a decline from 56 percent in 2019.

## Work Group Prioritization Meetings

PHC and the St. Francois County Health Department chose eight staff members to participate on a CHNA internal work group comprised of staff from the health department and various hospital departments. (See Appendix F)

The work group met twice to analyze the primary and secondary data and to complete the priority ranking for the CHNA.

### MEETING 1

The work group met Feb. 15, 2022, and reviewed the purpose for the CHNA, role of the group and goals for the project. The team reviewed the 2019 plan, needs and outcomes. Diabetes and Substance Abuse were the main focal points for the 2019 CHNA between the implementation team and the stakeholders.

The team reviewed the community stakeholders' feedback and response rate. Key findings were related to Mental Health and Substance Abuse. COVID-19 factors were included when completing this survey. (Table 3)

TABLE 3: COMMUNITY STAKEHOLDERS FOCUS GROUP: PRIMARY HEALTH NEEDS DATA

Accidents/Injuries	Heart Health	Reproductive/Sexual Health
Alcohol Abuse	High Blood Pressure	Respiratory Diseases
Cancer	Immunization/Infectious Diseases	Stroke
Dental Care	Maternal/Infant Health	Tobacco Use
Diabetes	Mental Health	Vaping
Drug Abuse	Obesity	

The team then compared the 2019 findings versus the 2021 findings. The team reviewed the 2021 needs prioritizations and then ranked and weighted the different areas.

TABLE 4 : CRITERIA FOR PRIORITY SETTING

	RATING	WEIGHT	SCORE
How many people are affected by the problem?			
What are the consequences of not addressing this problem?			
Are existing programs addressing this issue?			
How important is this problem to community members?			
How does this problem affect vulnerable populations?			
TOTAL SCORE			

*Source: Catholic Health Association*

The work group used a ranking process to assign weight to criteria by using the established criteria for priority setting. Criteria of overriding importance were weighted as “3,” important criteria were weighted as “2,” and criteria worthy of consideration, but not a major factor, were weighted as “1.” Health needs were then assigned a rating ranging from “1” (low need) to “5” (high need) for each criteria. The total score for each need was calculated by multiplying weights by rating. This process was done individually.

TABLE 5: PARKLAND HEALTH CENTER & ST. FRANCOIS COUNTY HEALTH CENTER WORK GROUP RANKING

RANK	COMMUNITY HEALTH NEEDS: HIGHEST TO LOWEST	TOTAL RANKING: 75 POSSIBLE POINTS
1	Mental Health	75
2	Vaping	72
3	Drug Abuse	66
4	Reproductive/Sexual Health	66
5	Diabetes	57
6	Immunization/Infectious Diseases	57
7	Obesity	57
8	Tobacco Use	53
9	Cancer	50
10	Respiratory Diseases	48
11	Heart Health	44
12	High Blood Pressure	42
13	Alcohol Abuse	40
14	Stroke	38
15	Dental Care	37
16	Maternal/Infant Health	36
17	Accidents/Injuries	9

## MEETING 2

The work group gathered again February 18, 2022. The team continued the CHNA discussion by reviewing results of the ranking by community stakeholders and the ranking of the secondary data using the Conduent Healthy Communities Institute Data Scoring Tool, which compares data from similar communities in the nation. The tool provides a systematic ranking of indicators for St. Francois County and helps prioritize the needs. The scoring is based on how a county compared to other similar counties within the state, U.S. and Healthy People 2020 targets. The work group reviewed the scores by indicators.

TABLE 6: COMMUNITY HEALTH NEEDS: PRIMARY AND SECONDARY DATA RANKING COMPARISON: HIGHEST TO LOWEST

RANKING	CONDUENT HEALTHY COMMUNITIES INSTITUTE	ST. FRANCOIS COUNTY COMMUNITY STAKEHOLDERS
1	Diabetes	Mental Health
2	Respiratory Diseases	Drug Abuse
3	Maternal, Fetal & Infant Health	Vaping
4	Mental Health & Mental Disorders	Obesity
5	Oral Health	Alcohol Abuse
6	Cancer	Diabetes
7	Alcohol & Drug Use	Maternal/Infant Health
8	Education	Dental Care
9	Wellness & Lifestyle	Tobacco Use
10	Heart Disease & Stroke	Cancer
11	Women's Health	Reproductive/Sexual Health
12	Prevention & Safety	Immunization/Infectious Diseases
13	Physical Activity	Heart Health
14	Immunizations/Infectious Diseases	High Blood Pressure
15	Environmental Health	Respiratory Diseases
16	Health Care Access & Quality	Accidents/Injuries
17	Children's Health	Stroke

When reviewing the data there were certain categories of concern that were combined in the secondary data but broken out into separate categories for the stakeholders and internal workgroup. This was due to the online survey for the stakeholders and internal workgroup that previously was held as in person discussion.

There was specific discussion on the significant difference in rankings of Maternal/Infant Health between stakeholders and the implementation team. The stakeholders identified this as a top priority whereas the implementation team ranked the need second to last in primary areas of concern. It was noted that the implementation team may be more aware of resources and assistance for Maternal/Infant Health than the stakeholder group. A similar discussion was held

related to Immunizations/Infectious Diseases with the implementation team ranking higher, which is due to the awareness of the implementation team for COVID-19, flu, etc.

The table below shows:

- Results of the secondary data using Conduent Healthy Communities Institute scoring tools that compared data from similar communities in the nation
- Primary data from the community stakeholder ranking
- Needs identified by the work group ranking

TABLE 7: COMMUNITY HEALTH NEEDS: PRIMARY AND SECONDARY DATA RANKING COMPARISON: HIGHEST TO LOWEST

RANKING	CONDUENT HEALTHY COMMUNITIES INSTITUTE	ST. FRANCOIS COUNTY COMMUNITY STAKEHOLDERS	PARKLAND HEALTH CENTER & ST. FRANCOIS COUNTY HEALTH CENTER
1	Diabetes	Mental Health	Mental Health
2	Respiratory Diseases	Drug Abuse	Vaping
3	Maternal, Fetal & Infant Health	Vaping	Drug Abuse
4	Mental Health & Mental Disorders	Obesity	Reproductive/Sexual Health
5	Oral Health	Alcohol Abuse	Diabetes
6	Cancer	Diabetes	Immunization/Infectious Diseases
7	Alcohol & Drug Use	Maternal/Infant Health	Obesity
8	Education	Dental Care	Tobacco Use
9	Wellness & Lifestyle	Tobacco Use	Cancer
10	Heart Disease & Stroke	Cancer	Respiratory Diseases
11	Women's Health	Reproductive/Sexual Health	Heart Health
12	Prevention & Safety	Immunization/Infectious Diseases	High Blood Pressure
13	Physical Activity	Heart Health	Alcohol Abuse
14	Immunizations/Infectious Diseases	High Blood Pressure	Stroke
15	Environmental Health	Respiratory Diseases	Dental Care
16	Health Care Access & Quality	Accidents/Injuries	Maternal/Infant Health
17	Children's Health	Stroke	Accidents/Injuries

- Mental Health and Diabetes were ranked as top needs by all three groups.
- Stakeholders and the internal groups also ranked Drug Abuse as a top need while the Conduent Healthy Communities scoring ranked this need 10<sup>th</sup>.

There was discussion when reviewing the different categories and their rankings. Overall, there were similar findings across the board for primary areas of concern. There were slight fluctuations between the two groups versus the secondary data, but the consensus was that the umbrella of Mental Health/Drug Abuse and Diabetes are two of the main issues within the communities we serve.

PHC is working with the East Missouri Action Agency in the Dream Big coalition for mental health services/drug abuse/homelessness etc. and it was determined this partnership should be included in the action plan for improvements related to mental health. The hospital is currently providing support to its current initiatives. There are conversations underway with the coalition about the hospital's role for inpatient services and convenient care.

### **SUMMARY**

At the conclusion of the comprehensive assessment process to determine the most critical needs in St. Francois County, the group concluded that PHC will focus on: 1) Mental Health/Drug Abuse and the health department will primarily focus on diabetes.

### Appendix A: ABOUT PARKLAND HEALTH CENTER

As part of BJC HealthCare, PHC offers a unique combination of world-class medicine along with the deep local roots and rich history of its three predecessors – Bonne Terre Hospital (opened in 1911), Mineral Area Regional Medical Center (1952), and Farmington Community Hospital (1969). PHC has two locations in St. Francois County, Missouri – a full-service acute care hospital in Farmington as well as a three-bed critical access hospital in Bonne Terre. PHC provides quality primary and secondary level inpatient and outpatient services to the people of St. Francois County and surrounding areas in southeastern Missouri.

PHC offers a full continuum of inpatient medical-surgical and intensive care, obstetrics, geriatric psychiatry and 24/7 emergency services, along with a wide variety of outpatient services including a wound care center, cancer center, cardiac and pulmonary rehabilitation, inpatient and outpatient surgery, diagnostic radiology, therapy services, infusion center and a sleep disorder center.

In 2020, PHC provided \$10,403,210 in financial assistance and programs providing 64,856 individual service. This total includes:

- \$8,032,537 financial assistance at no cost serving 15,522 individuals
- 26,512 individuals on Medicaid at a total net benefit of \$991,002.

PHC also provided a total of \$1,379,661 to 22,822 individual services in other community benefits including, community health improvement services, subsidized health services, and in-kind donations. (See Appendix B for Community Benefit Expenses)

## ABOUT ST. FRANCOIS COUNTY HEALTH CENTER

St. Francois County Health Center began in 1975 as a nursing service. It was located in a room in the county courthouse, with a staff of two nurses. The St. Francois County Court endorsed the establishment of a full-time county health center supported by a tax levy in April 1976 and governed by a five-member board of trustees. A county sanitarian was added to the staff. The health center moved from the courthouse to a rented building located on the grounds of the southeast mental health center. In 1982, the board purchased a building in Park Hills, Missouri, to house the health center where it continues to operate today.

Services at the health center have changed overtime. Home health services were offered with the opening of the center and then phased out in 1994. A lead blood level study was conducted in 1997. A two-year pilot project, issuing computer-generated birth and death certificates, was conducted for the Missouri Department of Health and Senior Services in 1997. By September 2002, family planning services, a prenatal clinic, emergency planning and the addition of a bio-terrorism planner were added to the services provided by the health center. In 2007, a dental clinic for underprivileged children's preventative services was added but has since moved to its own location.

With a twenty-six-member staff, the health center continues to monitor and address community needs through the Women, Infants, and Children (WIC) program; emergency preparedness; immunization services; lead testing; communicable disease surveillance; environmental public health services; STD testing and treatment; vital records; HIV/AIDS Case Management; and other health education services.

## Appendix B: NET COMMUNITY BENEFIT EXPENSES

PARKLAND HEALTH CENTER: 2020 TOTAL NET COMMUNITY BENEFIT EXPENSES		
CATEGORY	PERSONS SERVED	TOTAL NET BENEFIT
<b>FINANCIAL ASSISTANCE AND MEANS-TESTED PROGRAMS</b>		
Financial Assistance at Cost	15,522	\$ 8,032,547
Medicaid	26,512	\$ 991,002
<b>TOTAL FINANCIAL ASSISTANCE AND MEANS-TESTED PROGRAMS</b>	<b>42,034</b>	<b>\$ 9,023,549</b>
<b>OTHER COMMUNITY BENEFITS</b>		
Community Health Improvement Services	14,408	\$ 263,004
Health Professional	0	\$ -
Subsidized Health Services	8,414	\$ 1,104,827
In-Kind Donation		\$ 11,830
<b>TOTAL OTHER COMMUNITY BENEFITS</b>	<b>22,822</b>	<b>\$ 1,379,661</b>
<b>GRAND TOTAL</b>	<b>64,856</b>	<b>\$ 10,403,210</b>

## Appendix C: ST. FRANCOIS COUNTY DEMOGRAPHIC

DEMOGRAPHIC OF ST. FRANCOIS COUNTY VS. MISSOURI		
	ST. FRANCOIS COUNTY	MISSOURI
<b>GEOGRAPHY</b>		
Land area in square miles, 2010	451.89	68,741.52
Persons per square mile, 2010	144.6	87.1
<b>POPULATION</b>		
Population, July 1, 2019, Percent estimate	67,215	6,137,428
Population, Percent, 2010	65,359	5,988,923
Population, Percent change - April 1, 2010 to July 1, 2019	2.8	2.08
<b>RACE / ETHNICITY</b>		
White alone, Percent, 2019	92.9	82.9
White alone, not Hispanic or Latino, Percent, 2019	91.6	79.1
African American alone, Percent, 2019	4.6	11.8
Hispanic or Latino, Percent, 2019	1.7	4.4
Two or More Races, Percent, 2019	1.4	2.4
American Indian and Alaska Native alone, Percent, 2019	0.5	0.6
Asian alone, Percent, 2019	0.5	2.2
Native Hawaiian and Other Pacific Islander alone, Percent, 2019	0.1	0.2
<b>LANGUAGE</b>		
Foreign Born Persons, Percent, 2011-2015	0.8	4.2
<b>AGE</b>		
Persons Under 5 Years, Percent, 2019	5.4	6
Persons Under 18 Years, Percent, 2019	21	22.3
Persons 65 Years and over, Percent, 2019	16.6	17.3
<b>GENDER</b>		
Male Person, Percent, 2019	53.4	49.1
Female Persons, Percent, 2019	46.6	50.9

Source: Conduent Healthy Communities Institute

DEMOGRAPHIC OF ST. FRANCOIS COUNTY INCLUDING EDUCATION / INCOME / HOUSING		
	ST. FRANCOIS COUNTY	MISSOURI
<b>EDUCATION</b>		
High School Graduate or Higher, Percent of Persons Age 25+, 2015-2019	84.8	89.9
Bachelor's Degree or Higher, Percent of Persons Age 25+, 2015-2019	14.3	29.2
<b>INCOME</b>		
Per Capita Income, Income, Dolars, 2015-2019	\$22,578	\$30,810
Median Household Income, Dollars, 2015-2019	\$46,466	\$55,461
People Living Below Poverty Level, Percent, 2015-2019	15.5	13.7
<b>HOUSING</b>		
Housing Units, 2019	30,442	2,819,383
Homeownership Rate, percent, 2015-2019	56.7	57.8
Median Housing Units, Dollars, 2015-2019	121,000	157,200
Households, 2015-2019	24,898	2,414,521
Average Household Size, 2015-2019	2.4	2.5

Source: Conduent Healthy Communities Institute

# Appendix D: STAKEHOLDER ASSESSMENT REPORT

Stakeholder Assessment of the Health Needs of St. Francois County

Prepared by:  
BJC Market Research  
Revised August 23, 2021

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## Background

The Patient Protection and Affordable Care Act (PPACA) was passed in March 2010. It required that

Each 501(c)3 hospital must conduct a Community Health Need Assessment (CHNA) every three years.

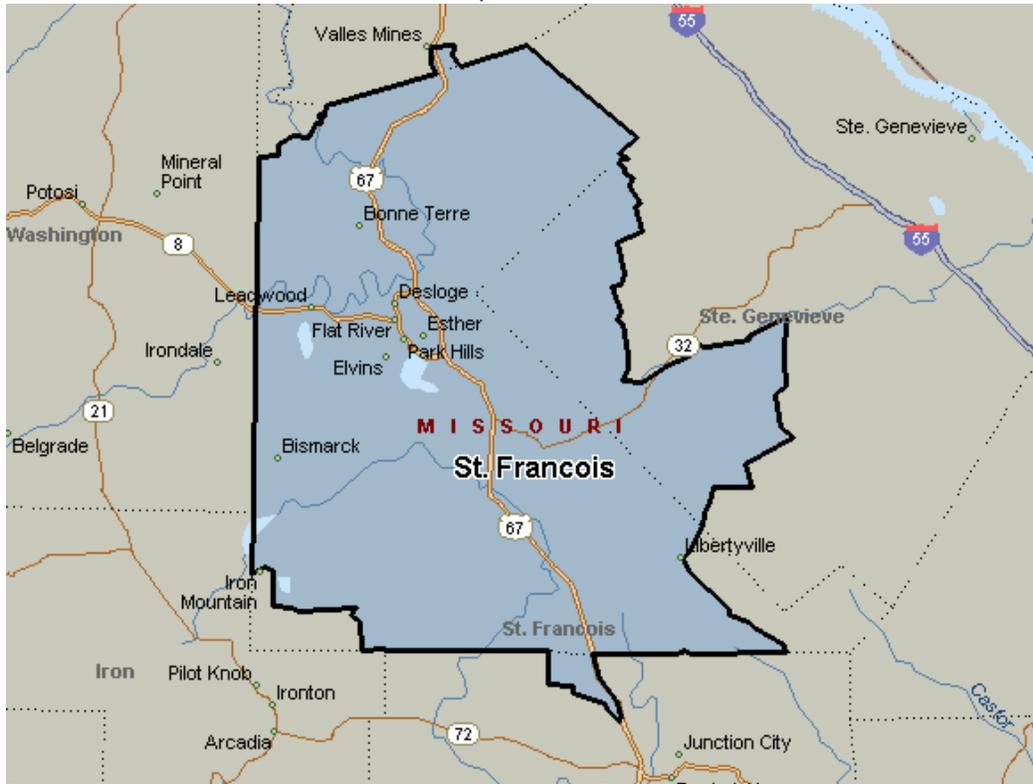
- Each hospital must adopt an implementation strategy to meet the community health needs identified in the CHNA
- The CHNA and Implementation Plan must be widely available to the public.

The assessment is required to consider **input from those who represent the broad interests of the community served by the hospital**, including those with special knowledge or expertise in public health.

## Methodology

- In the past, community stakeholder health needs assessments were conducted in person via a moderated discussion.
- Due to COVID-19, BJC HealthCare, along with its collaborative partners, decided to conduct an online survey for the safety of our community stakeholders. In St. Francois County, PHC worked with the St. Francois County Health Center.
- An email invitation was sent out by Parkland Health Center president Annette Schnabel on June 7th to 21 St. Francois County community stakeholders. Several reminders were sent out before the survey was closed for analysis on June 30th.
- 13 community stakeholders completed the survey for a 62% response rate.

## Market Definition: St. Francois County



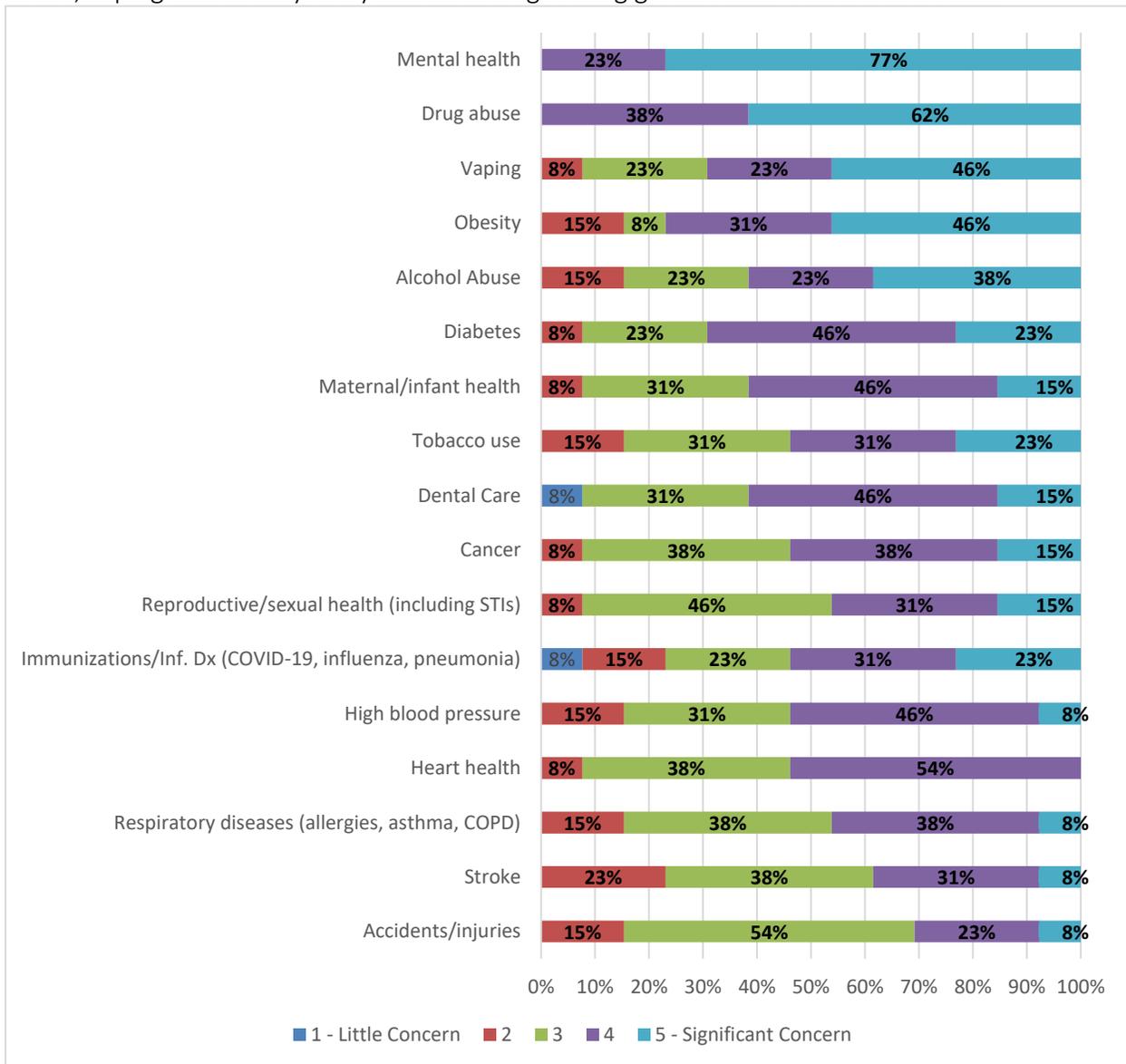
## Key Findings

- **Mental health** and **substance abuse** are consistently identified as the area of greatest in need in St. Francois County.
- **Lack of services** for these conditions is a major obstacle to improving the health of the community.
- **Low-income populations** and the **homeless** are the groups at greatest risk of poor health, along with those suffering from **substance abuse**.
- Not surprisingly, **poverty** and **exposure to drug use** are the social factors that put this community at the greatest risk, along with **transportation** issues.
- COVID-19 has only made these issues worse, increasing the need for **mental health services** and an **affordable wage**.
- Stakeholders identified the largest gaps in health resources in **mental health services**, along with **drug treatment services** and **transportation**.
- New needs and concerns have arisen in these areas, along with COVID-19 (**vaccine hesitancy** and the **Delta variant**), **employment** and **vaping**.
- The **local parks** were most often recognized as the asset that supports a healthy community, along with the **community agencies** and **health services** that many may not be aware of.
- A **single idea** was proposed to address these issues: the formation of a community workgroup including all those who work in health and human services to collaborate and develop a county-wide plan to prioritize issues and develop strategies to address them.

- When asked which communities are especially vulnerable or at-risk, three stakeholders identified **Park Hills** as being the most at-risk community in St. Francois County. **Bismark/Iron Mountain Lake** was mentioned twice. **Bonne Terre, French Village, Leadwood** and **Valle Mines** were mentioned once each.

## Priority Health Needs for St. Francois County

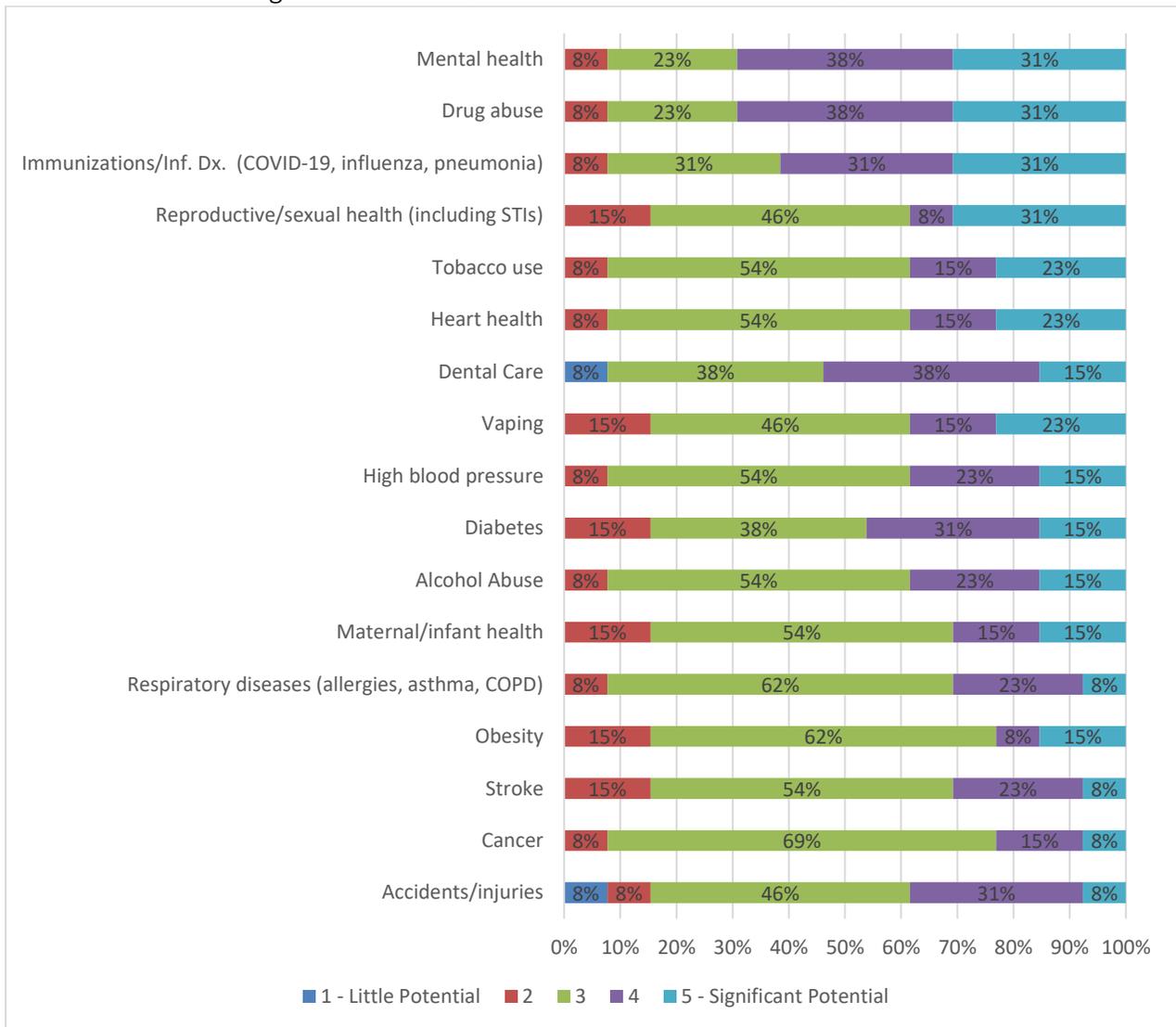
There are four needs that are of greatest concern in St. Francois County: mental health, drug abuse, vaping and obesity. They had an average rating greater than 4 on a 1 to 5 scale.



**Q3 & Q4:** Thinking about St. Francois County, please rate your level of concern about each of these health needs on a scale 1 (little concern) to 5 (significant concern).

## Needs with Greats Potential for Collaboration in St. Francois County

Stakeholders feel that there is the greatest potential to work together around the issues of mental health and drug abuse. Immunizations and infectious diseases are close behind.

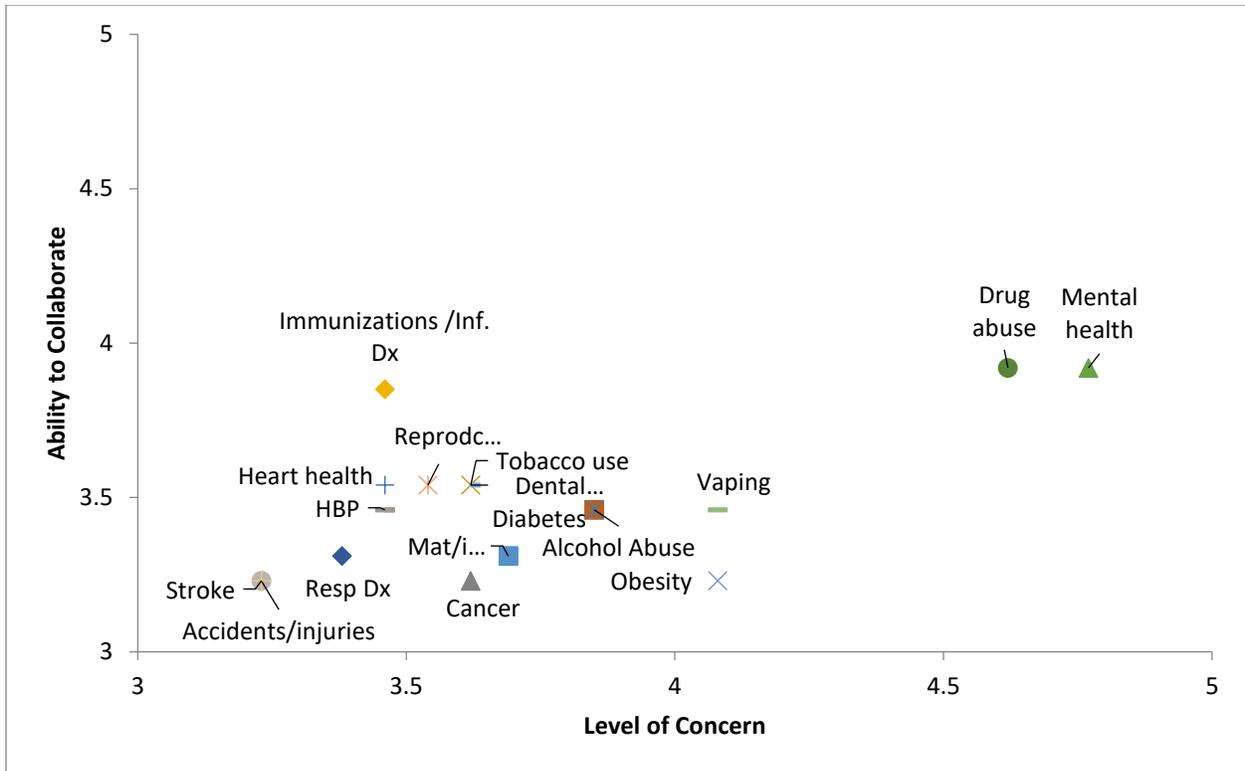


**Q5 & Q6:** How would you rate the potential of community partners in St. Francois County to work together to address each of these health needs? Please rate each on a scale 1 (little potential) – 5 (significant potential).

## Level of Concern by Ability to Collaborate

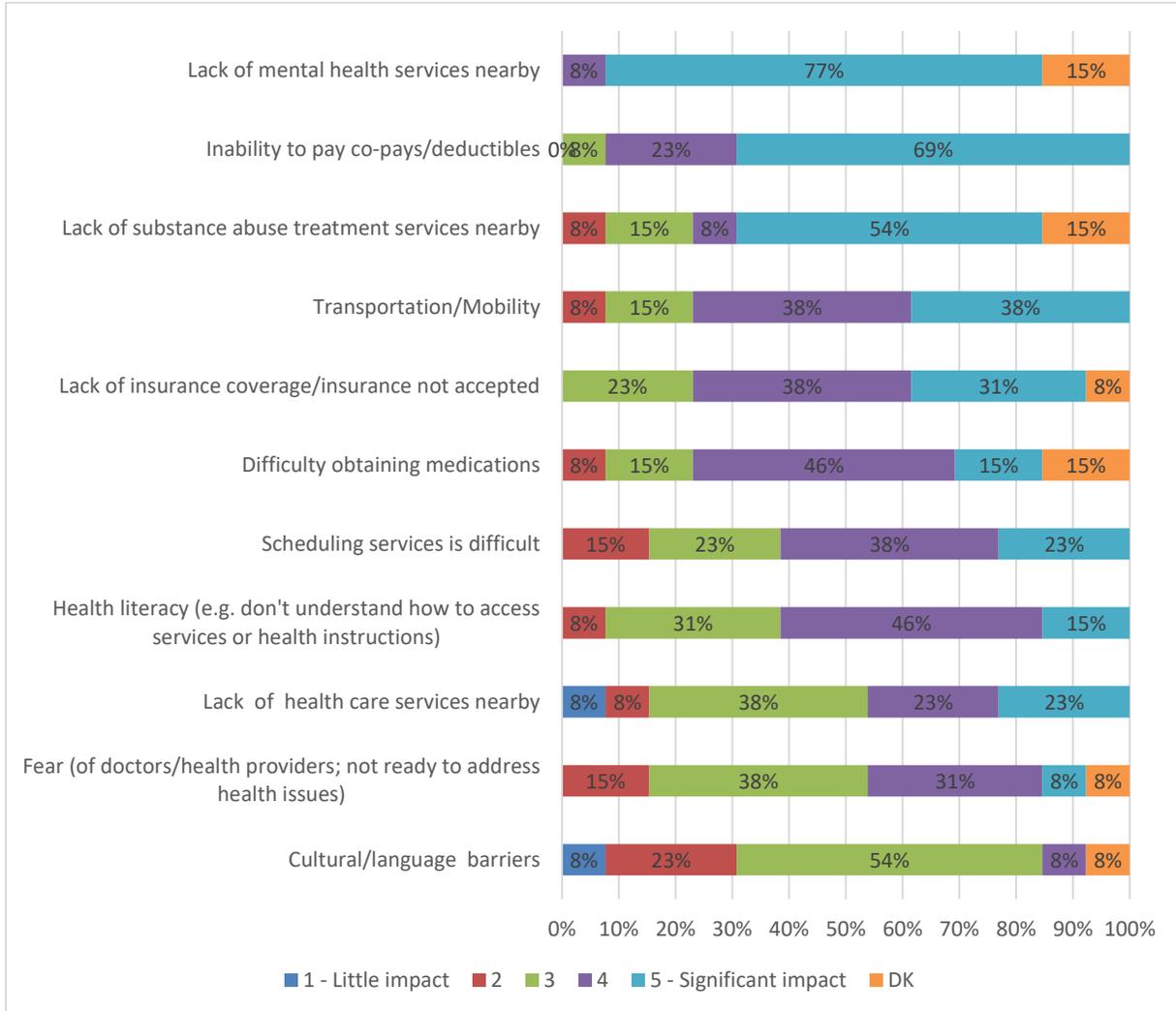
Stakeholders rate mental health and drug abuse highest in both level of concern and ability to collaborate. Immunizations and infectious disease have the next highest potential for collaboration. Vaping and obesity are next highest in level of concern.

Health Needs	Level of Concern	Ability to Collaborate
Mental Health	4.8	3.9
Drug Abuse	4.6	3.9
Vaping	4.1	3.5
Obesity	4.1	3.2
Alcohol Abuse	3.9	3.5
Diabetes	3.9	3.5
Maternal/Infant Health	3.7	3.3
Dental Care	3.6	3.5
Tobacco Use	3.6	3.5
Cancer	3.6	3.2
Reproductive/Sexual Health	3.5	3.5
Immunization/Infectious Disease	3.5	3.9
Heart Health	3.5	3.5
High Blood Pressure	3.5	3.5
Respiratory Diseases	3.4	3.3
Accidents/Injuries	3.2	3.2
Stroke	3.2	3.2



## Greatest Barriers to Access in St. Francois County

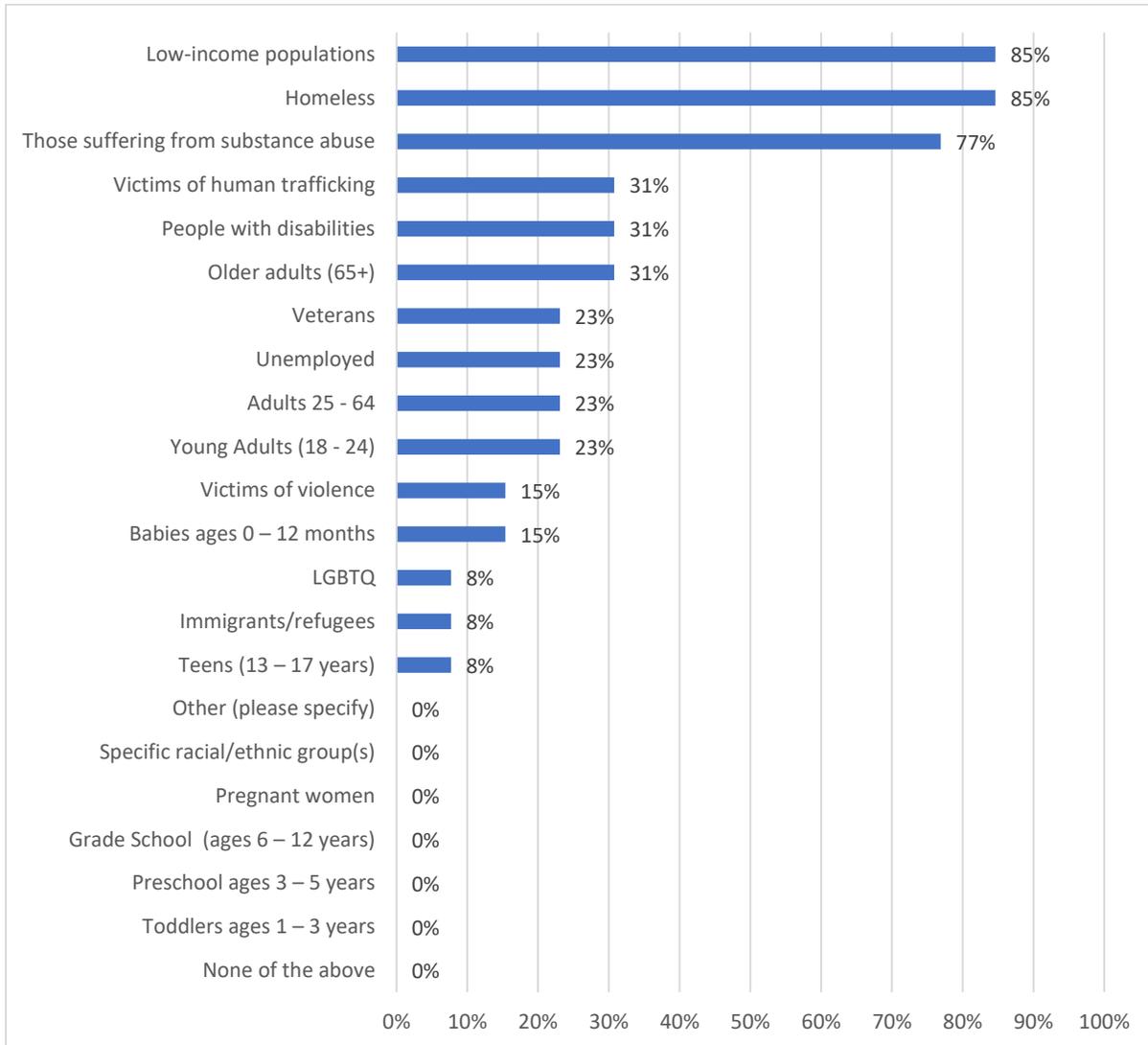
Stakeholders feel that the lack of local mental health services is the greatest barrier to access in St. Francois County. The financial aspect of paying for health care services (co-pays and deductibles) is perceived as the next greatest challenge.



**Q7:** How impactful are each of the following barriers in St. Francois County to accessing health care? Rate each on a scale of 1 (little impact) – 5 (significant impact).

## Populations at Greatest Risk in St. Francois County

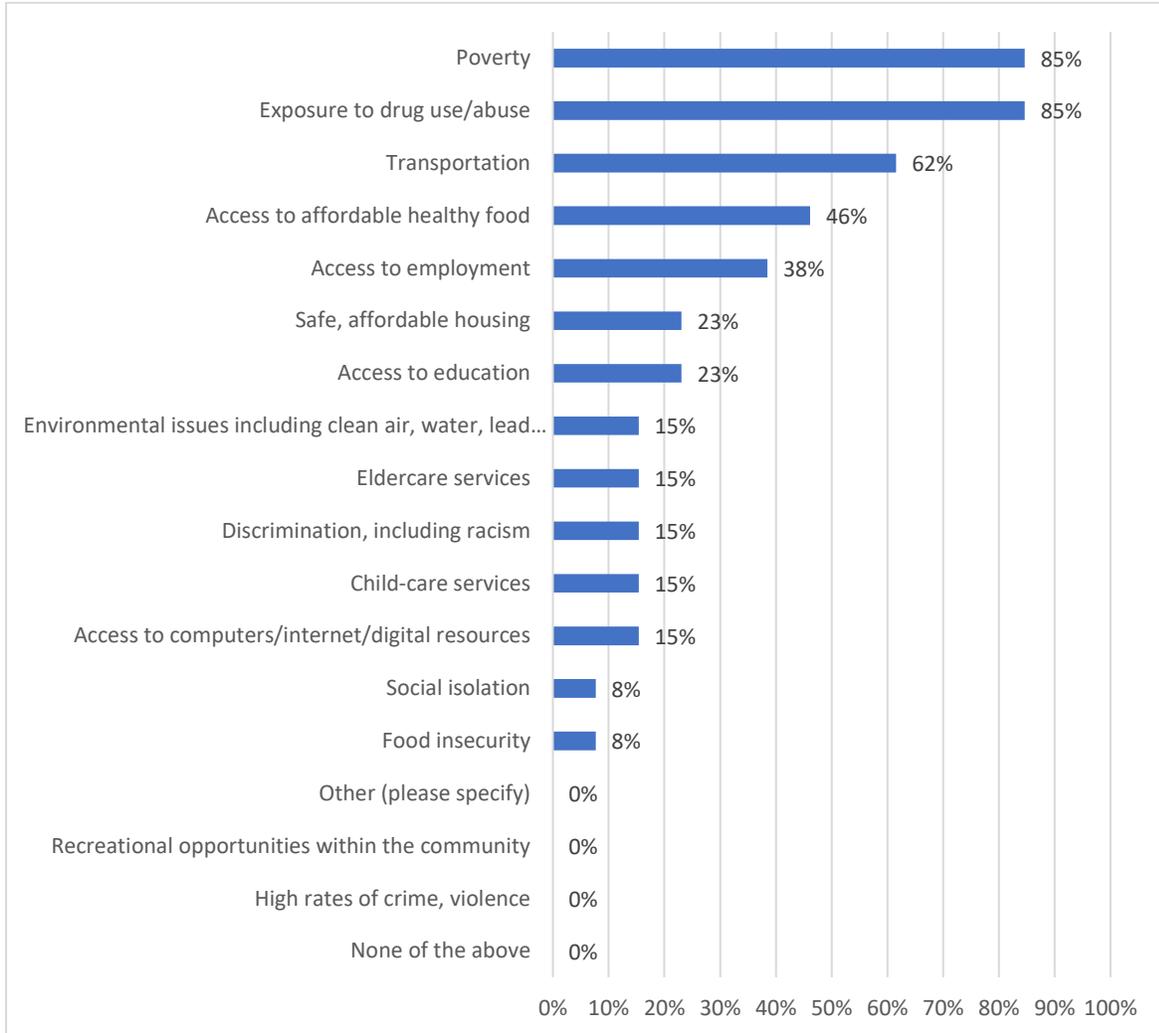
Most stakeholders identify low-income populations and the homeless as being at greatest risk for poor health outcomes in St. Francois County. Those suffering from substance abuse are not far behind.



**Q8:** Among those you serve in St. Francois County, which of the following populations are most at risk for poor health outcomes? Pick no more than five.

## Social Factors Impacting St. Francois County

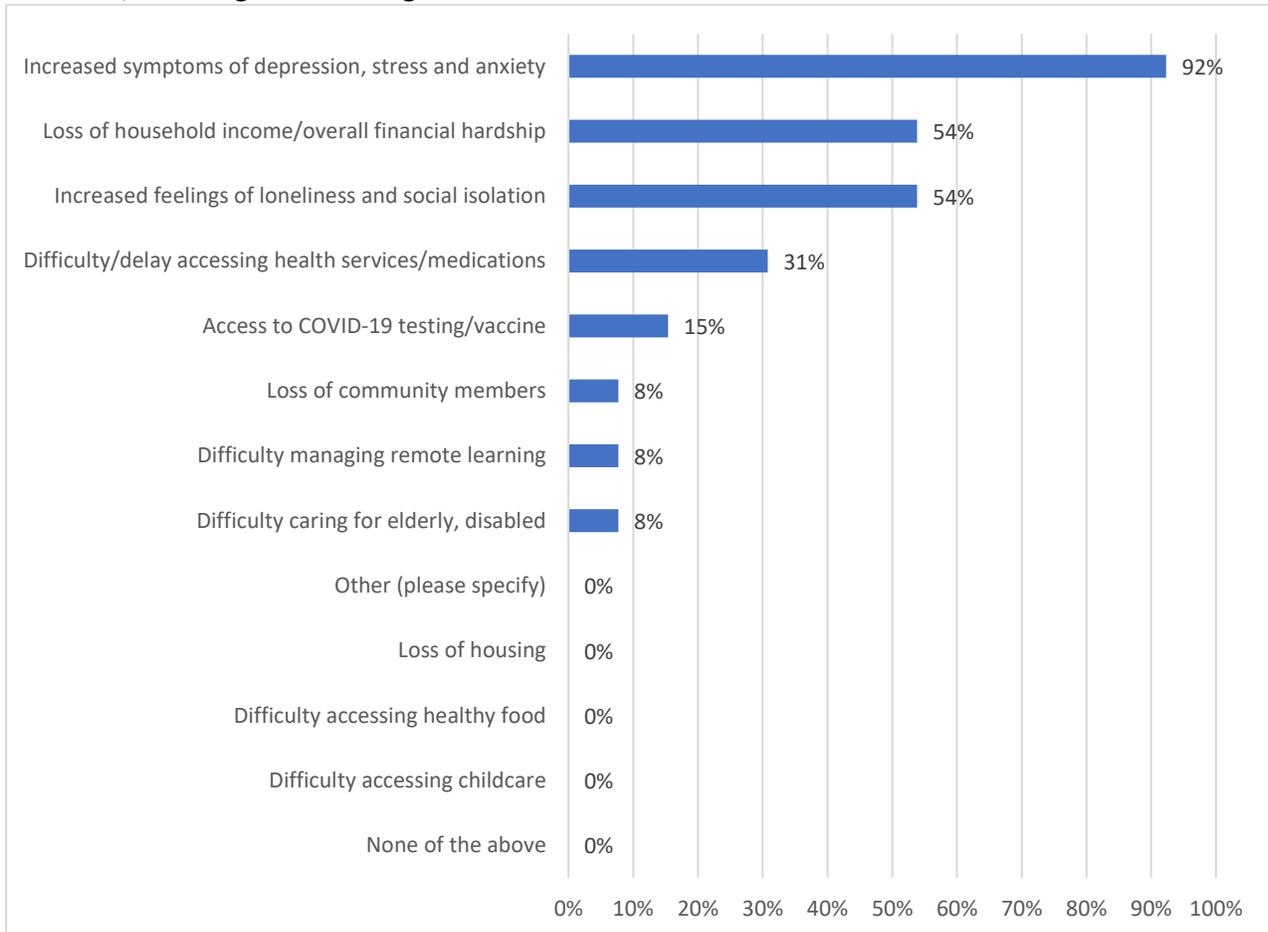
Most stakeholders agree that poverty and exposure to drugs/drug abuse have had the greatest impact on the health of those living in St. Francois County. They also identify access to transportation as a contributing factor.



**Q9:** Which of the following social factors have historically had the greatest impact on the health of the communities you serve in St. Francois County. Pick no more than five.

## COVID-19's Impact on St. Francois County

Stakeholders strongly agree that the greatest impact of COVID-19 has been on the mental health of St. Francois County residents. The pandemic has also created financial hardship for area residents, resulting in loss of regular income.



**Q10:** Thinking about the COVID-19 pandemic and its impact on St. Francois County, which of the following have had the greatest impact on the health of the community? Pick no more than three.

## BIGGEST GAPS IN RESOURCES

Stakeholders identified the largest gaps around mental health services, followed by substance abuse treatment.

NEED	GAP
Mental Health Services (10 comments)	Limited access to mental health providers (2)
	Limited number of mental health providers
	Lack of treatment facilities
	Lack of emergency or urgent care services
	Limited long-term care services
	How to access/use insurance for mental health services
	Inadequate resources to meet the needs of the community
	Services in rural locations
	On-site in person mental health services
Substance Abuse (5 comments)	Treatment for adolescents and adults (2)
	Strongly linked to homelessness as well as unsafe and unhealthy living conditions
	Substance misuse resources
	Remedy plans
Transportation (3 comments)	Access to consistent reliable transportation
	Ability to afford vehicles as well as needed repairs and insurance
	SMTS does not cover all needs
Dental Care (1 comment)	There is still a need despite the number of dentists in the county
Employment (1 comment)	Lack of jobs that provide a living wage
Obesity (1 comment)	Education

**Q11:** What are the biggest gaps in resources within this community to address the needs that you have identified? Please mention the need along with the missing resources.

## NEW/ADDITIONAL HEALTH/SOCIAL ISSUES

Stakeholders identified additional needs around mental health/substance abuse, homelessness, COVID-19 and employment.

NEED	DESCRIPTION
Mental Health/Substance Abuse (3 COMMENTS)	<p>Unrest, anxiety, substance abuse, lack of trust in "the system" reduced communication, anger, dysregulation and inability to regulate feelings or thoughts (listed above) This is leading to additional needs and supports</p> <p>Criminal justice response to mental health (including substance use.)</p> <p>Drug and alcohol abuse and mental health issues. None available in the area or it's outpatient and insurance is not taken</p>
Homelessness (2 comments)	<p>Homelessness is a high health and social issue that our community is working to address, however the need is greater than most in our community realize.</p> <p>Increase in homeless population with substance abuse and/or mental health related issues.</p> <p>Substance misuse resources</p> <p>Remedy plans</p>
COVID-19 (2)	<p>I am concerned with people not being vaccinated and the influx of the Delta variant.</p> <p>Vaccine hesitancy</p>
Employment (2)	<p>There is also a lack of good jobs that people can count on to help provide for their family, as well as access to reliable childcare to hold on to jobs or even the ability to cover for the cost of childcare.</p> <p>Costs of housing, food and household items are on the rise and some families are still not be working or are working at minimum wage. These are known, but a concern for what I am seeing.</p>
Vaping (1)	Vaping is an ever-increasing problem for our youth.

**Q12:** What new/additional health or social issues are you aware of in this community that may not be widely known, yet are a concern for the future?

## COMMUNITY ASSETS THAT PROMOTE COMMUNITY HEALTH

Stakeholders most frequently mentioned the state parks and other recreational opportunities as local assets for promoting health. There was also mention of local community agencies providing services to area residents.

RESOURCE TYPE	GAP
Recreational Opportunities (4 comments)	Recreational opportunities
	Parks and area recreational opportunities
	Our area has amazing parks, trails and rivers to supply recreation for individuals at little to no cost. There are opportunities for our youth in city baseball leagues, soccer and basketball.
	State parks, bike and horse trails.
Community Agencies	There are many assets in our community that people are unaware of. Social service agencies like PCHAS, EMAA, Community Partnership, Food Pantries even.
	The community resources/partners need to break down silos and work together to provide wrap around services. There is a lot agencies competing for the same client, while many people go unserved.
	Home delivered meals for seniors as well as congregate dining for seniors 60 and over at the senior center. No charge. Just a voluntary donation.
	Available transportation through SMTS, and adult access to substance abuse locally.
Health Services	Community Paramedic resources under utilized, tele-health medicine could be a program to reach people that feel they have no resources or help
	We have a county health department...and adult access to substance abuse locally. A VA CLINIC for veterans, access to mental health care in the counseling offices in the area... SFC has their own mental health board who help to increase awareness and bring new ideas to the table!
Employment Opportunities	There are two prison systems in the county for available work... There are multiple recruiter stations in the county to allow individuals to join the military in order to serve our country and provide income for their families. This can also provide part time employment with lifetime benefits offered through the MO NATIONAL GUARD AND ARMY RESERVE.
Other Community Partners	This is a community of professionals who are willing to support one another and partner for the betterment of our citizens.
	There are ample churches in the community who go above and beyond to supply for the needs of others through the food pantries, thrift stores and by providing support with gas cards and financial assistance help with rent and electric.

**Q13:** *Think about health assets or resources as people, institutions, services, supports built resources (i.e. parks) or natural resources that promote a culture or health. What are the health assets or resources in St. Francois County that we may not be aware of?*

## IDEAS FOR IMPROVING THE HEALTH OF THE COMMUNITY

Stakeholders suggested forming a task force (or working through the SFC Mental Health Board) to create a plan for the community that included all service providers and health care services to identify area priorities, establish goals and tactics to address current needs.

NEED	DESCRIPTION
Create a Community Work Group	Stakeholder groups should come together encompassing all who work with health and human services. Goals should be set and a strategic plan created, implemented, communicated and evaluated to adapt to current needs.
	The community needs to come together as one for the good of our community. The need is so great, and working together, collaborating, and serving the people instead of focusing on the profit will benefit our community and their health.
	Routine networking
	Form joint task force units and include police in some cases
	Regular collaboration and implementation of a county-wide strategic healthcare plan that includes all service providers and integrates healthcare services, mental health services, and NGO/Faith-Based networks.
	Through the use of the SFC Mental Health Board
	Break down silos and form collaborative efforts.
	Work on strategic plan together and work on 1 task at a time from priority 1 to the last priority as what is the specific issue once that problem has solution move to the next priority.

**Q14:** *How can community stakeholders in St. Francois County work together to use their collective strengths to improve the health of the community?*

## COMMUNITIES AT GREATEST RISK

Three stakeholders identified Park Hills as being the most at-risk community in St. Francois County. Bismark/Iron Mountain Lake was mentioned twice. Bonne Terre, French Village, Leadwood and Valle Mines were mentioned once each.

NEED	DESCRIPTION
Park Hills (3 mentions)	63601
Bismark/Iron Mountain Lake (2 Mentions)	63624
Bonne Terre (1 Mention)	63628
French Village (1Mention)	63036
Leadwood (1 Mention)	63653
Valles Mines (1 Mention)	63087

*Q15: Within St. Francois County, which communities, neighborhoods or ZIP codes are especially vulnerable or at risk?*

### NEXT STEPS

Using the input received from community stakeholders, Parkland Health Center will consult with its internal workgroup to evaluate this feedback. They will also consider other secondary data and determine whether/how their priorities should change. The final needs assessment and implementation plan is due by December 31, 2022.

## Appendix E: PARTICIPATING STAKEHOLDERS

ONLINE SURVEY PARTICIPATING STAKEHOLDERS				
LAST NAME	FIRST NAME	ORGANIZATION	Title	City
Beavers	Gregory S.	City of Farmington	City Administrator	Farmington
Bunch	William	St. Francois County Community Partnership	Executive Director	Bonne Terre
Cook	Kevin	N/A	Retired	Bonne Terre
Deason	Ashley	Bismarck R-5 School District	Elementary School Counselor	Bismarck
Hahn	Nicole	East Missouri Action Agency	Community Services Programs Directors	Park Hills
Krause	Ashley	Farmington R7 School District	Associate Superintendent	Farmington
Massey	Christopher	Presbyterian Children's Homes & Services (PCHAS)	Community Resource Coordinator/Therapist	Farmington
Mattina	Mark A.	Farmington Fire Department	Fire Captain	Farmington
Moore	Tess	My Turning Point Counseling, LLC	License Professional Counselor	Farmington
Pigg	Kendra	Central R3 School District	School-Based Service Worker	Farmington
Ragsdale	Linda	St. Francois County Health Center	Director	Park Hills
Tetrault	David W.	St. Francois County Ambulance District	Administrator/Chief Executive Officer	Park Hills
Warren	Ursula	Farmington Senior Nutrition Center	Administrator	Farmington

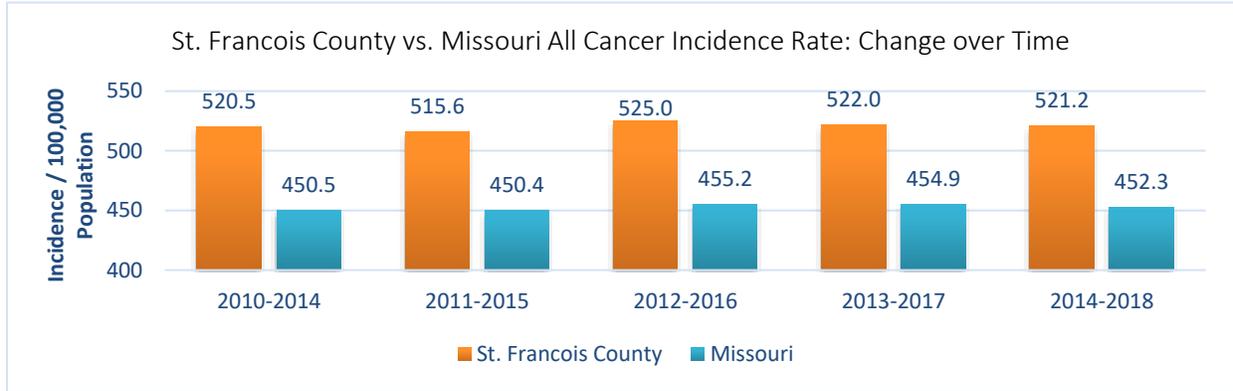
## Appendix F: INTERNAL STAFF WORK GROUP

### PARKLAND HEALTH CENTER AND ST. FRANCOIS COUNTY HEALTH CENTER INTERNAL STAFF WORK GROUP

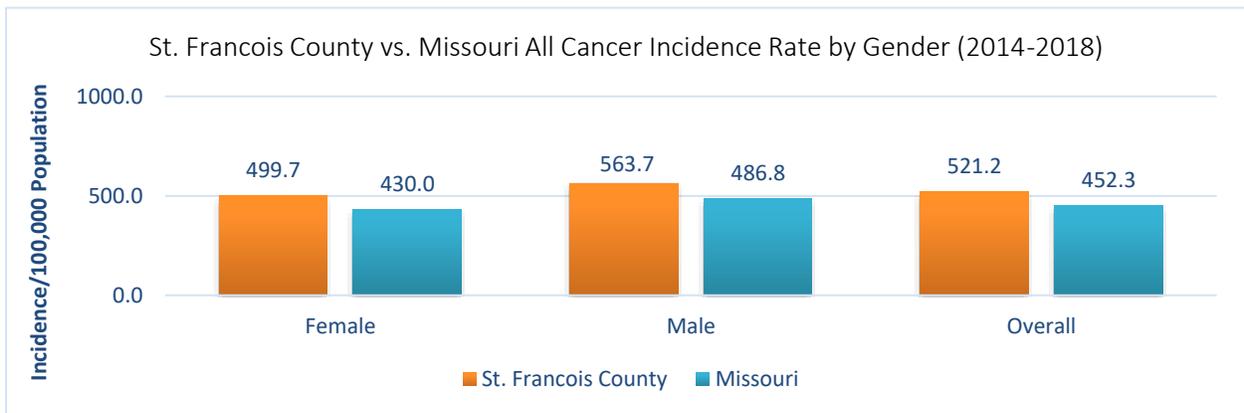
LAST NAME	FIRST NAME	TITLE	ORGANIZATION
Davis	Ashley	Senior Consultant	Communication & Marketing
King	Karley	Program Manager	Corporate Communication & Marketing
Ledbetter	Holli	Manager	Foundation & Community Relation
Ragsdale	Linda	Director	St. Francois County Health Center
Robinson	Kimberly	Administrator	Medical Services
Schnabel	Annette	President	Executive Administration
Taliaferro	Heather	VP/Chief Nursing Officer	Executive Administration
Westrich	Christie	Vice President	Executive Administration

## Appendix G: SECONDARY DATA

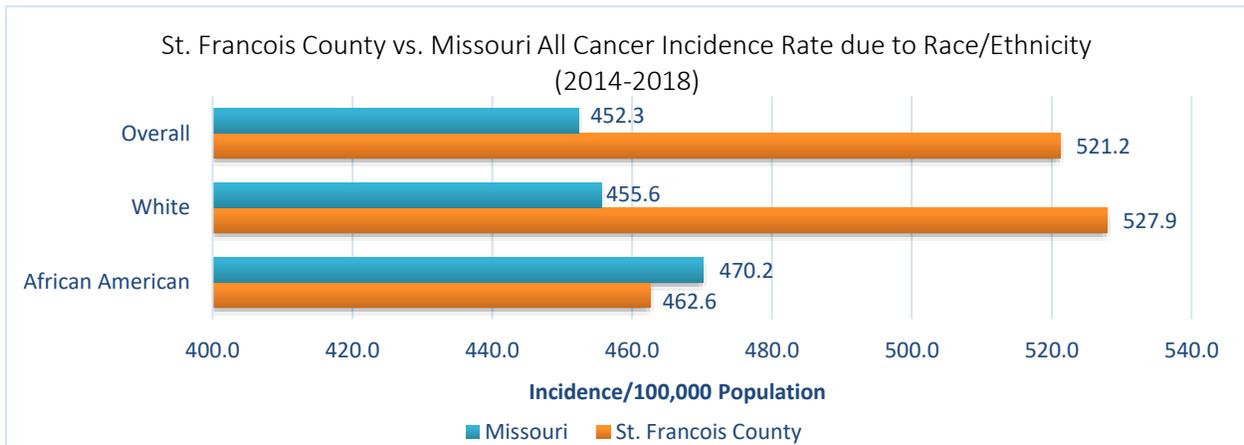
### CANCER



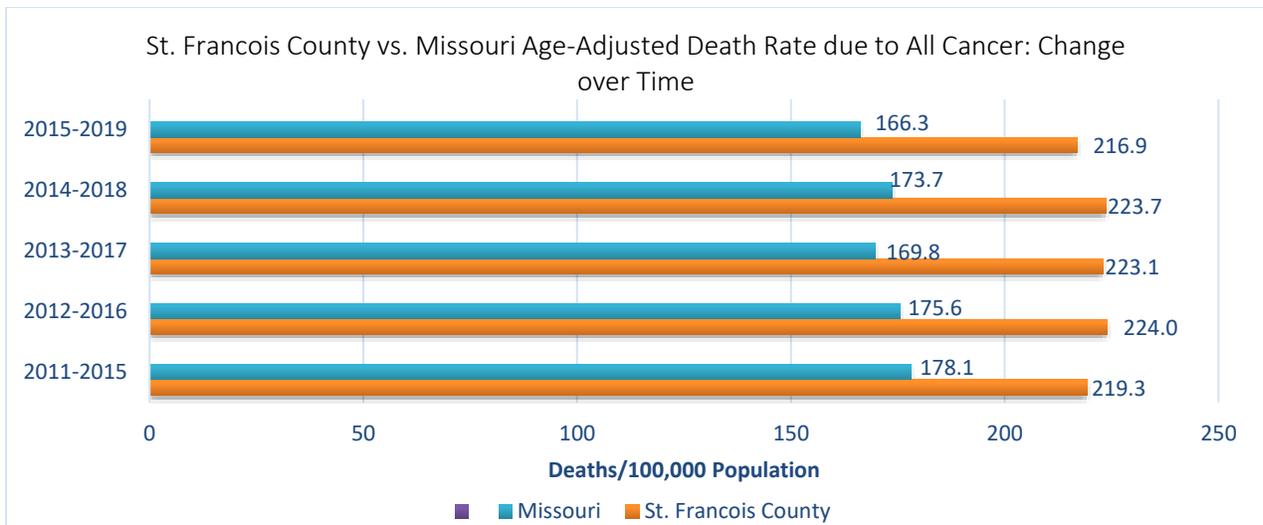
Source: Conduent Healthy Communities Institute



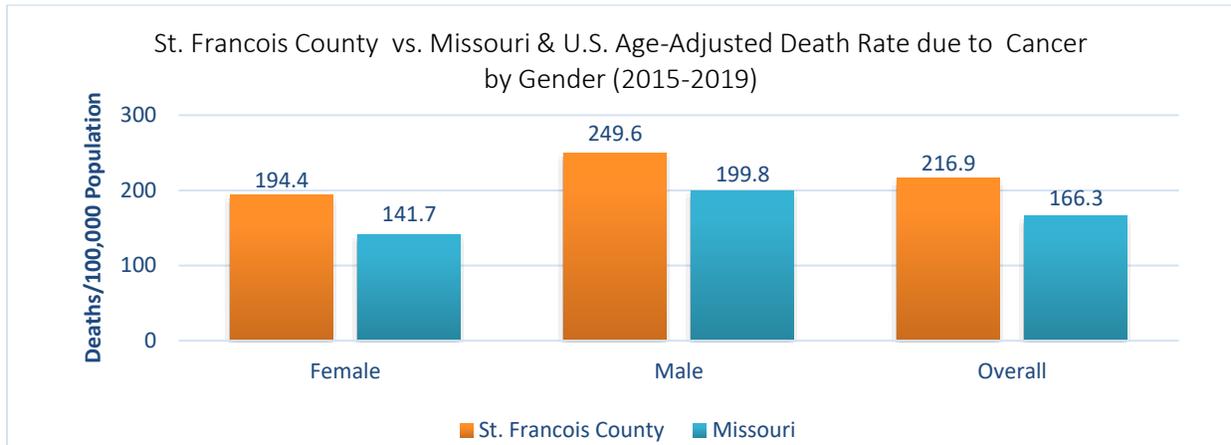
Source: Conduent Healthy Communities Institute



Source: Conduent Healthy Communities Institute

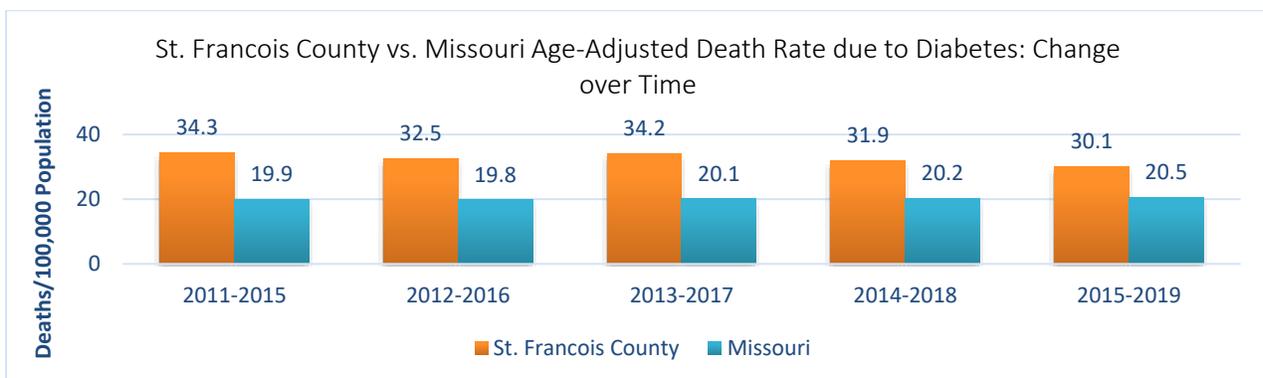


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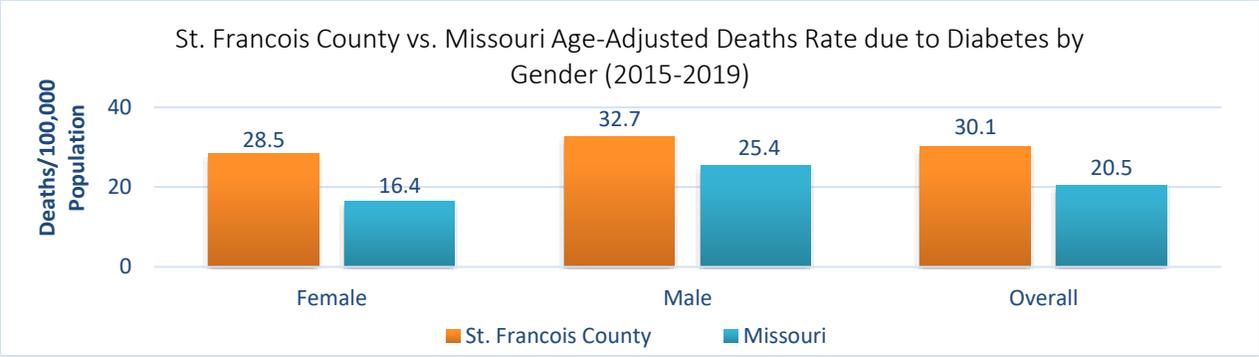


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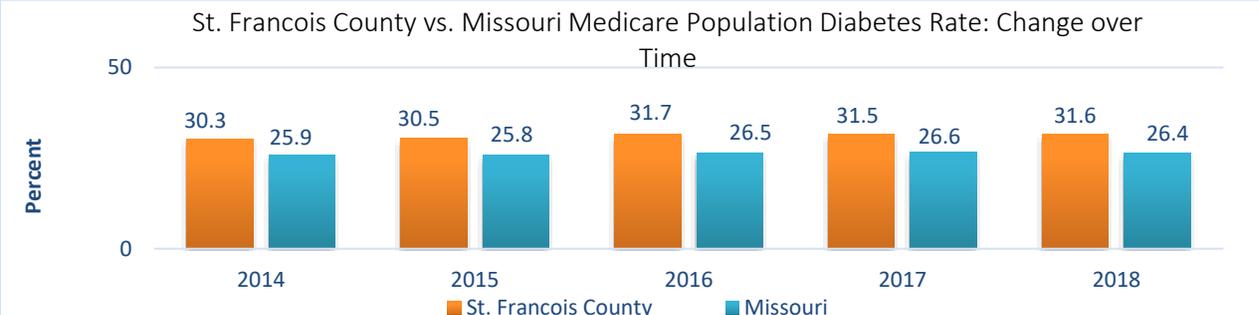
## DIABETES



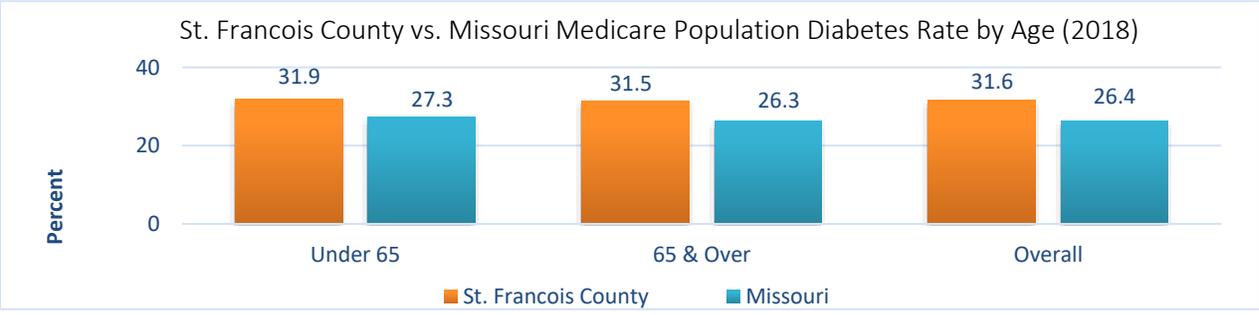
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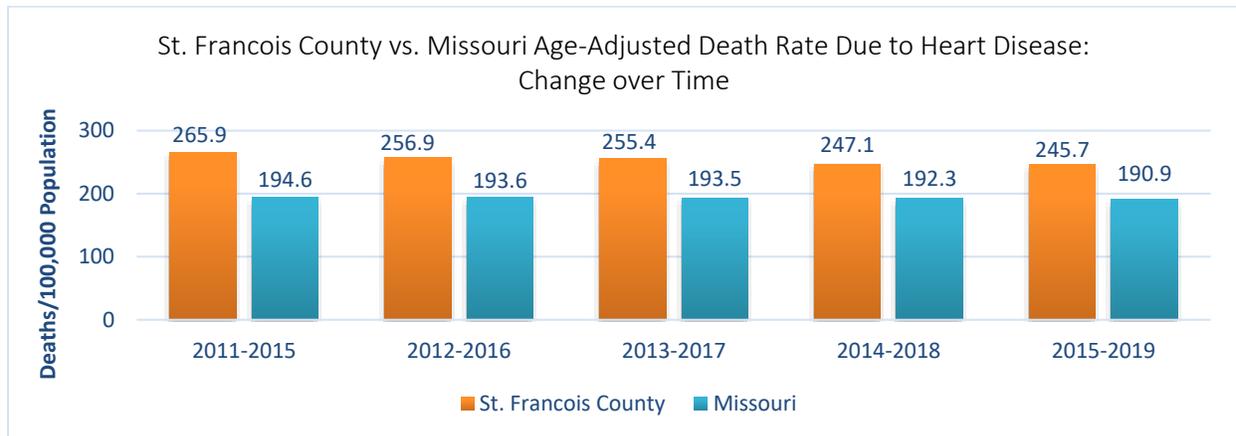


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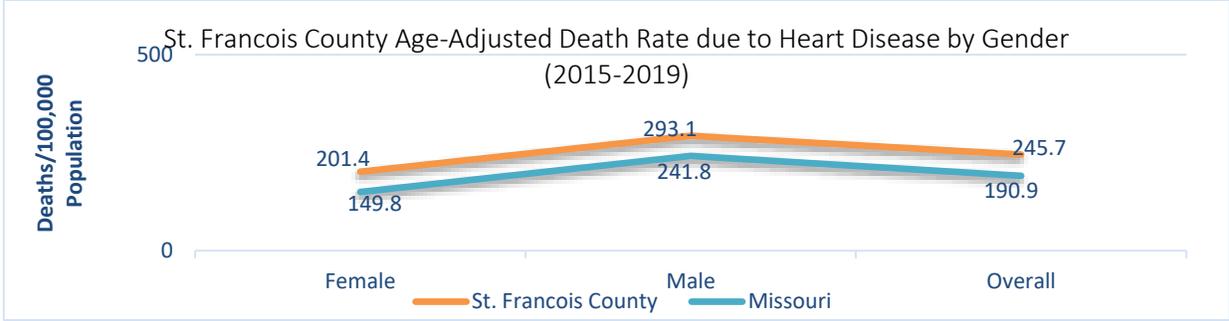
## HEART DISEASE AND STROKE

ST. FRANCOIS COUNTY VS. MISSOURI HEART DISEASE & STROKE AGE-ADJUSTED DEATH RATE		
HEALTH TOPICS	ST. FRANCOIS COUNTY	MISSOURI
<b>HEART DISEASE</b>		
Deaths / 100,000 Population (2009-2019)	251.97	193.95
Hospitalizations / 10,000 Population (2011-2015)	155.33	109.46
ER Visits / 1,000 Population (2011-2015)	23.31	15.12
<b>ISCHEMIC HEART DISEASE</b>		
Deaths / 100,000 Population (2009-2019)	158.46	115.62
Hospitalizations / 10,000 Population (2011-2015)	56.85	32.53
ER Visits / 1,000 Population (2011-2015)	3.16	0.57
<b>STROKE / OTHER CEREBROVASCULAR DISEASE</b>		
Deaths / 100,000 Population (2009-2019)	43.12	41.02
Hospitalizations / 10,000 Population(2011-2015)	34.62	27.85
ER Visits / 1,000 Population (2011-2015)	2.29	0.77

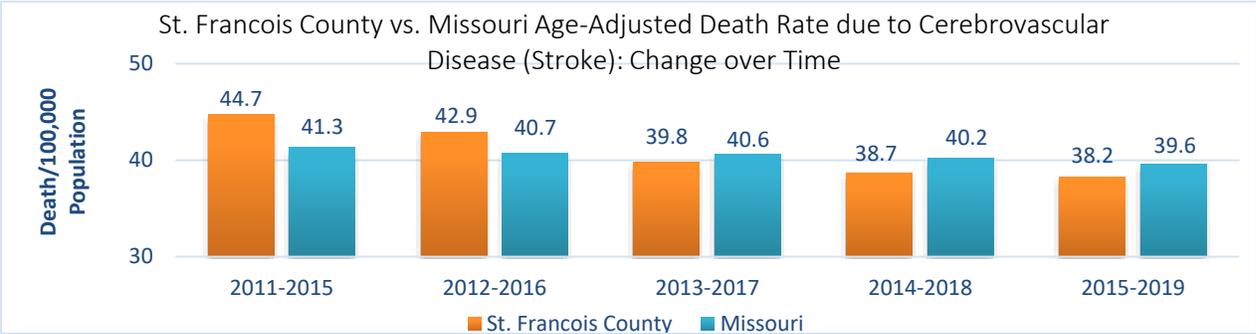
Source: Missouri Department of Health and Senior Services



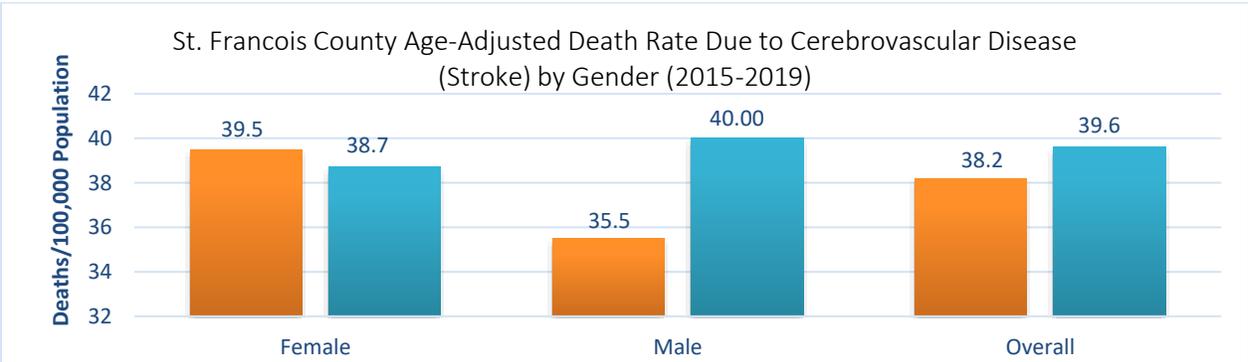
Source: Conduent Health Communities Institute



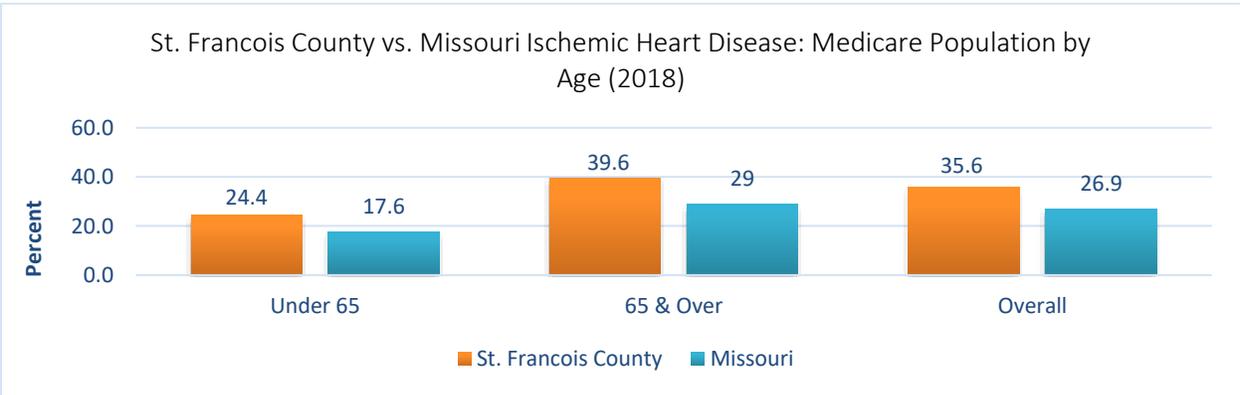
Source: Conduent Health Communities Institute



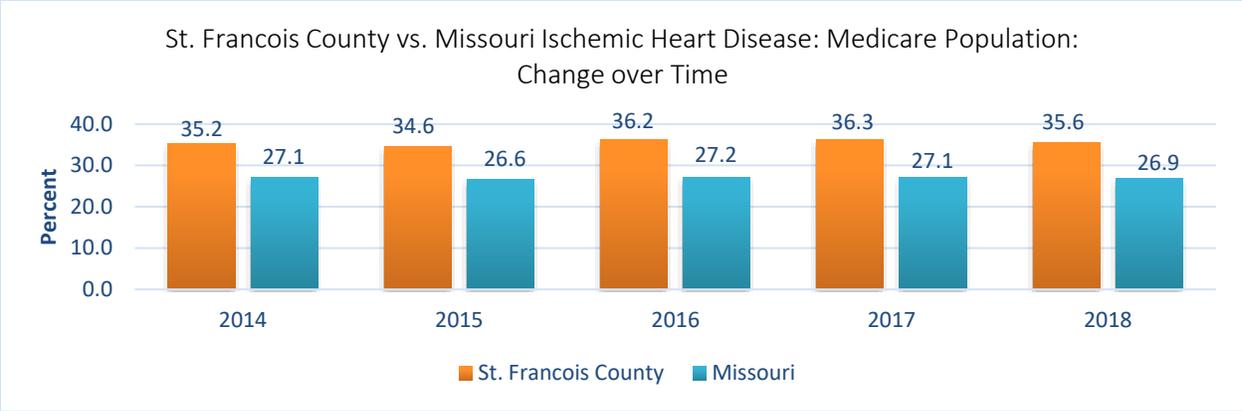
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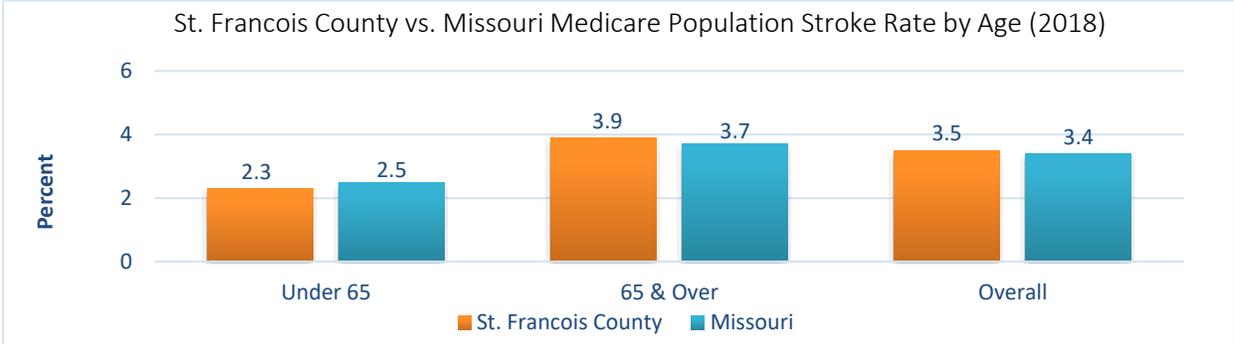
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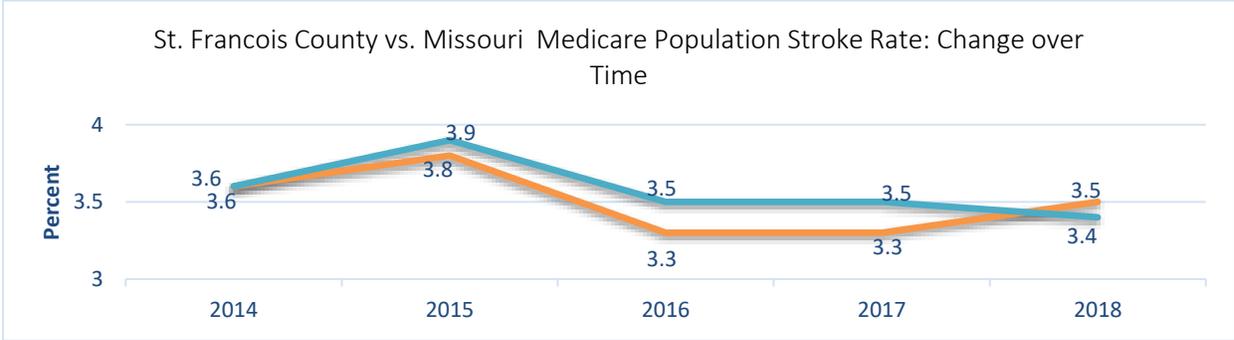
Source: Conduent Healthy Communities Institute



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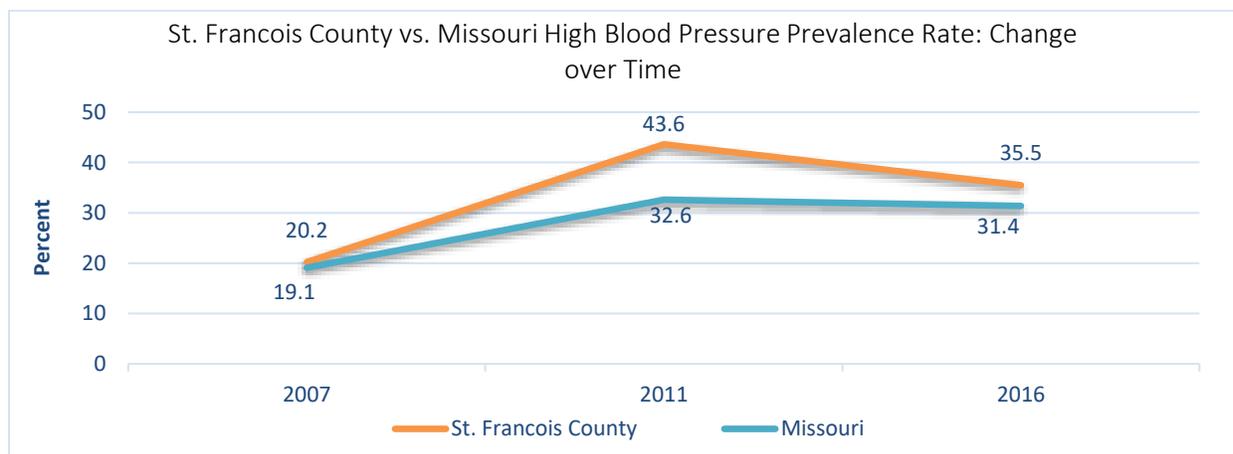


Source: Conduent Healthy Communities Institute

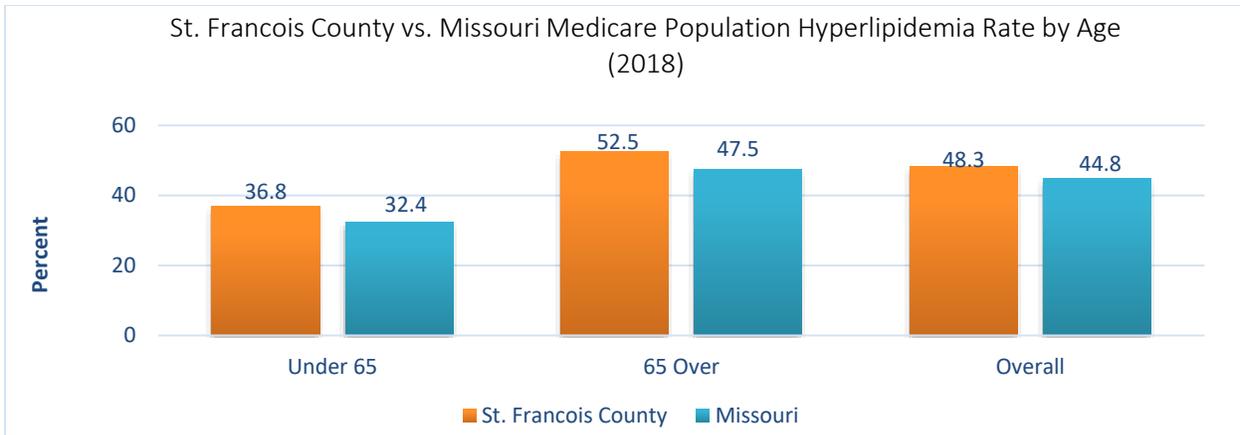
ST. FRANCOIS COUNTY VS. MISSOURI HEART DISEASE AND STROKE THREE YEAR MOVING AVERAGE RATES						
HEALTH TOPICS	ST. FRANCOIS COUNTY	MISSOURI	ST. FRANCOIS COUNTY	MISSOURI	ST. FRANCOIS COUNTY	MISSOURI
YEAR	2015-2017		2016-2018		2017-2019	
DEATHS / 100,000 POPULATION						
Heart Disease	261.21	193.5	241.52	190.44	239.36	188.49
Ischemic Heart Disease	151.75	108.36	134.51	105.2	131.46	102.31
Stroke / Other Cerebrovascular Disease	36.38	40.65	33.69	39.94	36.31	39.00
YEAR	2011-2013		2012-2014		2013-2015	
HOSPITALIZATION / 10,000 POPULATION						
Heart Disease	172.31	115.58	151.97	108.12	137.53	102.68
Ischemic Heart Disease	64.22	34.89	55.81	31.91	49.7	30.04
Stroke / Other Cerebrovascular Disease	36.16	28.44	33.66	27.47	32.73	27.16
YEAR	2011-2013		2012-2014		2013-2015	
EMERGENCY ROOM VISITS / 1,000 POPULATION						
Heart Disease	23.5	15.25	22.95	15.1	22.99	14.97
Ischemic Heart Disease	3.57	0.6	3.23	0.57	2.83	0.54
Stroke / Other Cerebrovascular Disease	2.13	0.78	2.36	0.76	2.43	0.75

Source: Missouri Department of Health and Senior Services

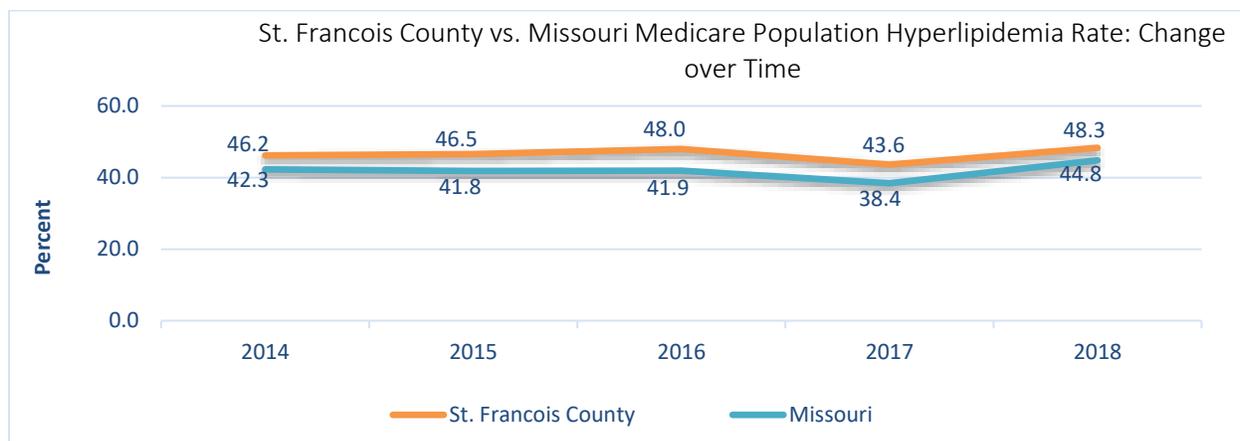
## HIGH BLOOD PRESSURE



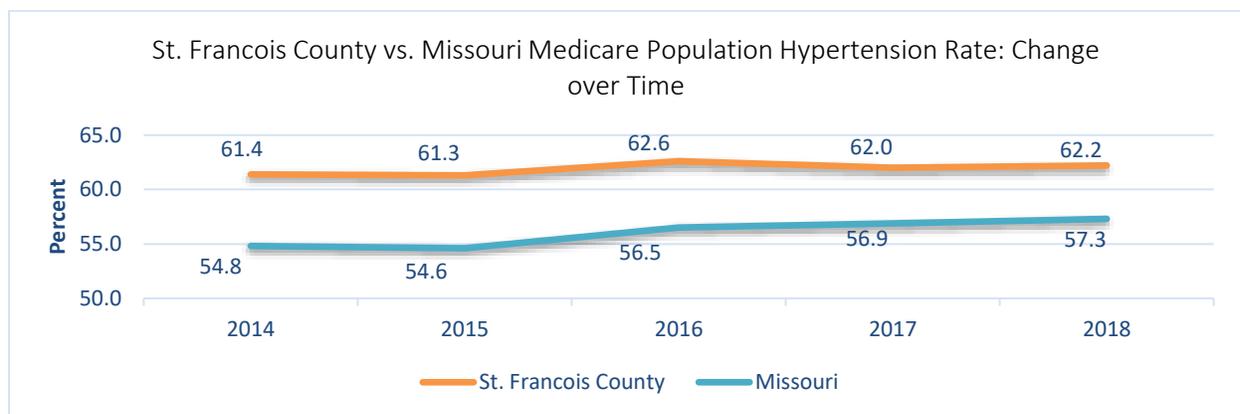
Source: Conduent Healthy Communities Institute



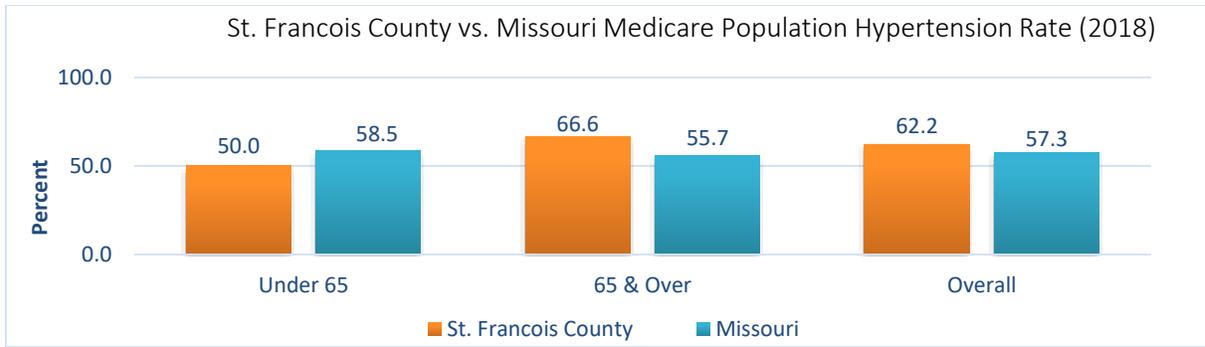
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Source: Conduent Healthy Communities Institute

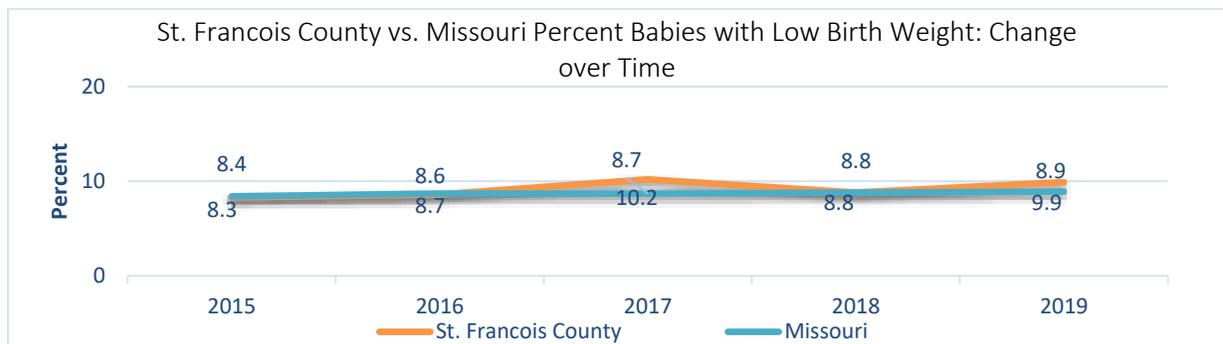


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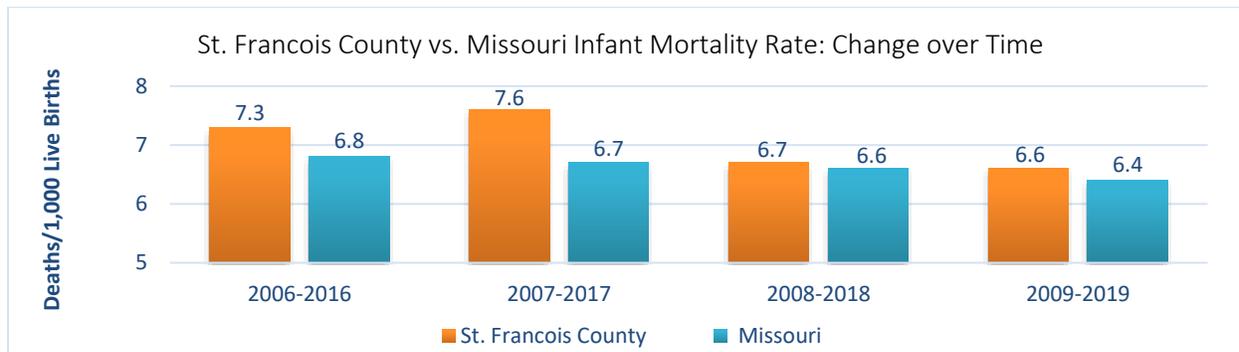


Source: Conduent Healthy Communities Institute

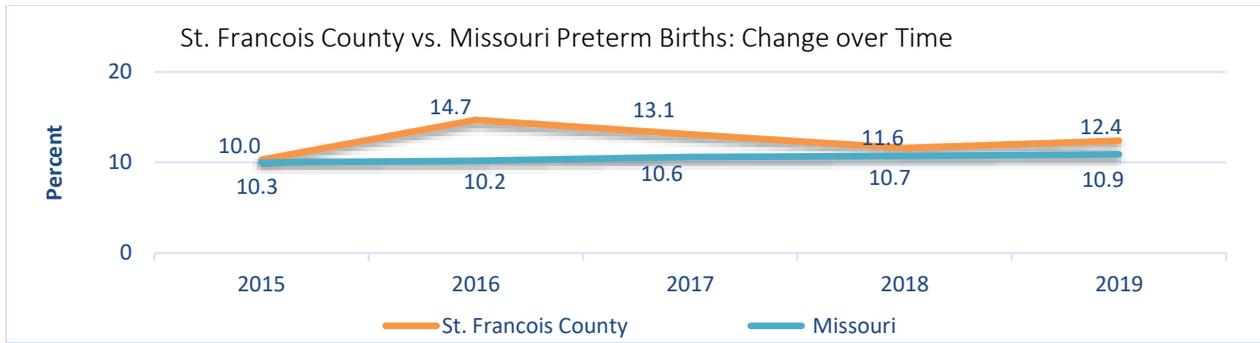
## MATERNAL / INFANT HEALTH



Source: Conduent Healthy Communities Institute

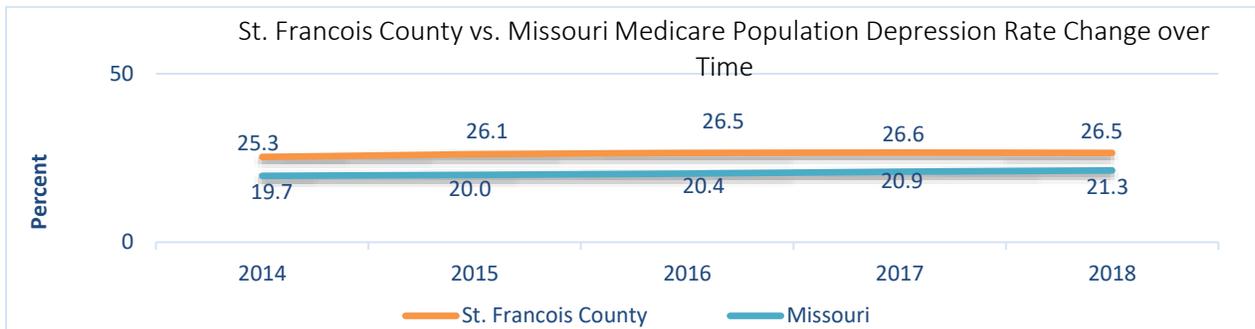


Source: Conduent Healthy Communities Institute

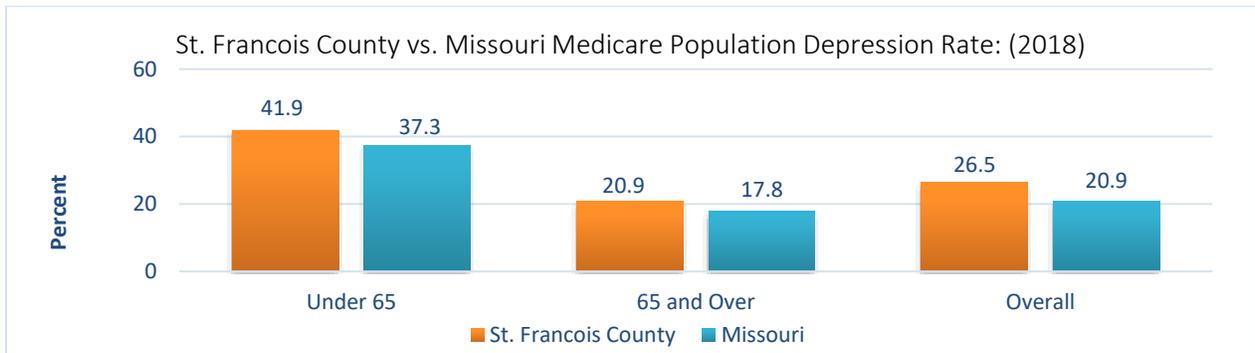


Source: Conduent Healthy Communities Institute

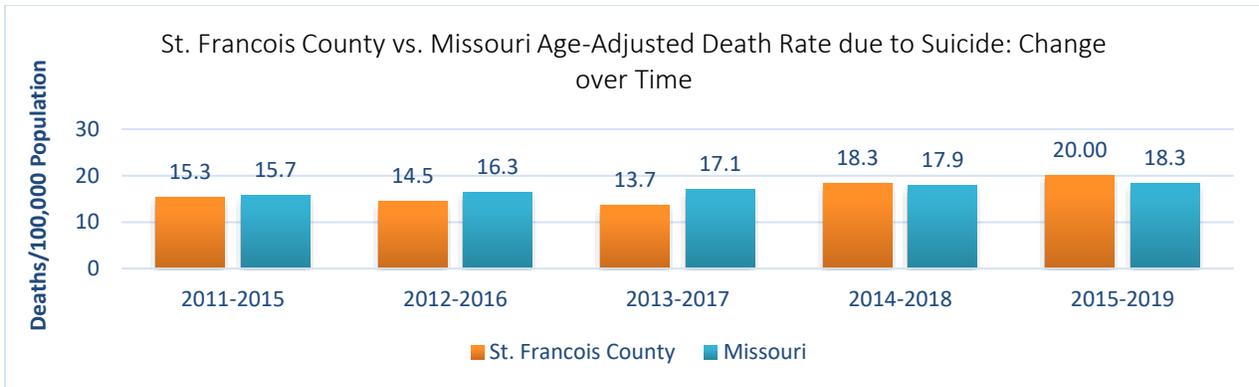
### MENTAL/BEHAVIORAL HEALTH: MENTAL HEALTH



Source: Missouri Department of Mental Health

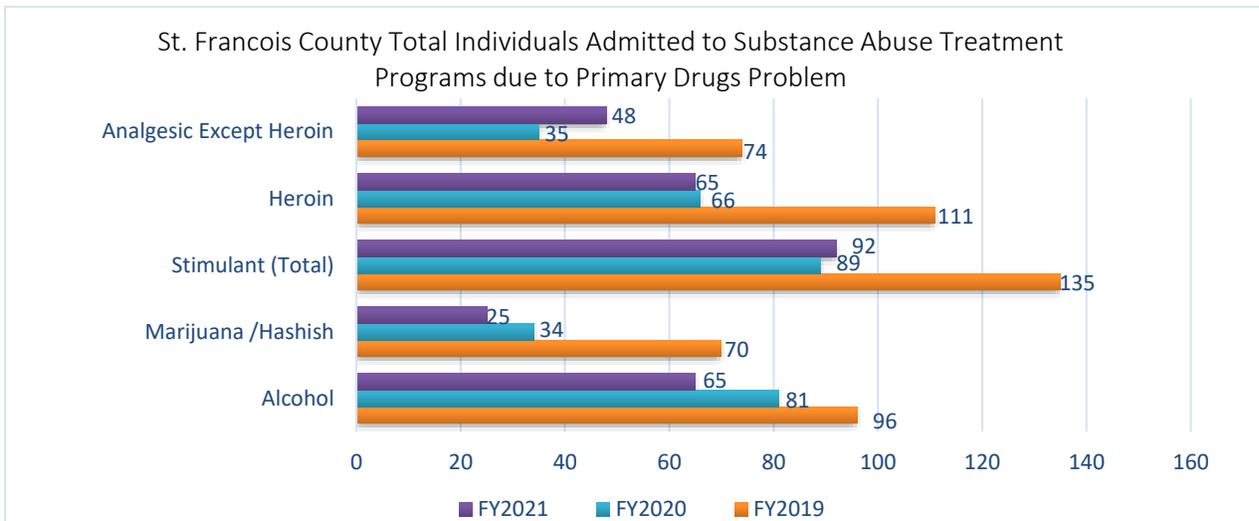


Source: Conduent Healthy Communities Institute

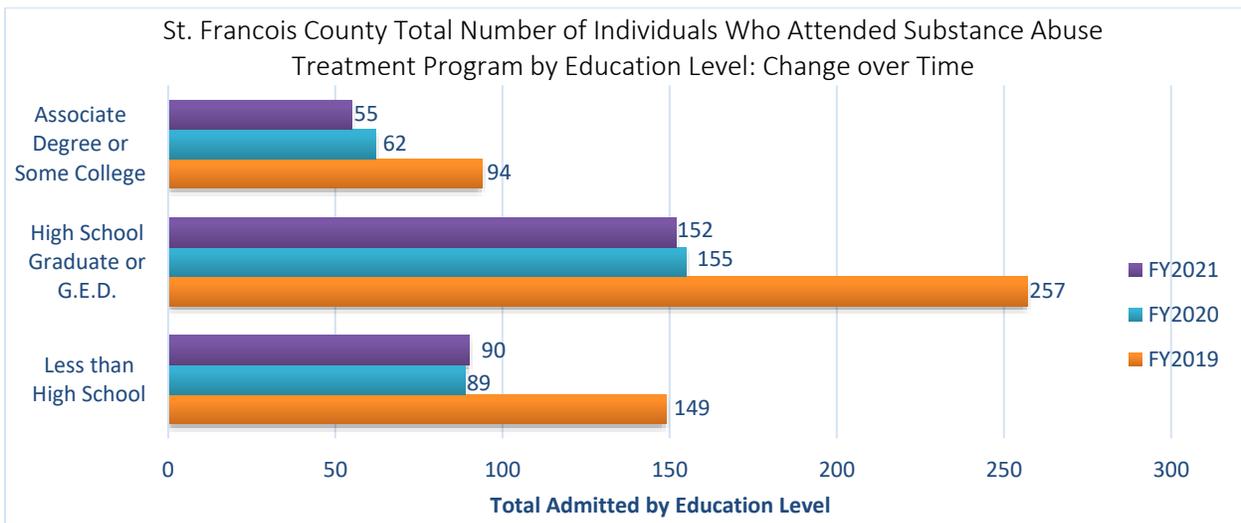


Source: Conduent Healthy Communities Institute

### MENTAL/BEHAVIORAL HEALTH: SUBSTANCE USE AND ABUSE



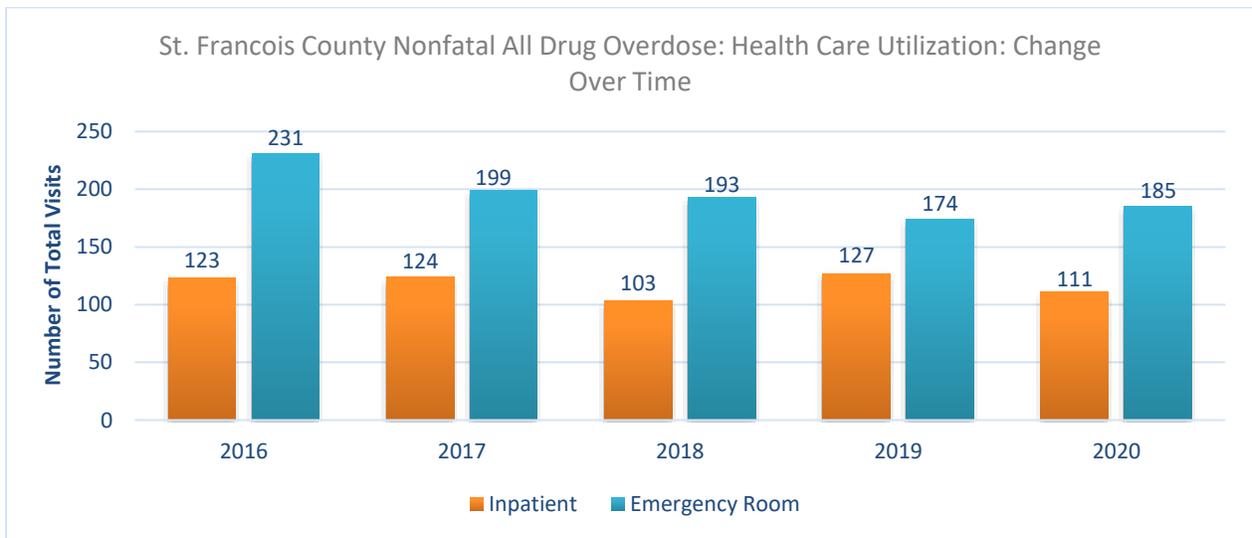
Source: Missouri Department of Mental Health



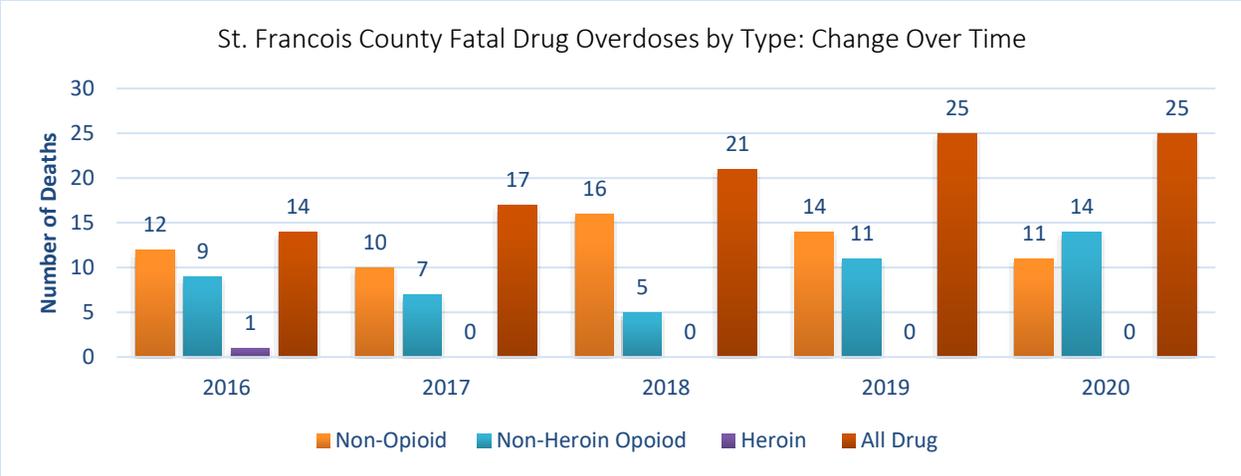
Source: Missouri Department of Mental Health

ER VISITS DUE TO HEROIN ABUSE BY THE JURISDICTION COUNTY / CITY (2018)		
COUNTY	COUNT	RATE / 100,000 POPULATION
St. Louis City	1,663	1.06
Jefferson County	694	0.062
Franklin County	282	0.55
St. Louis County	2,091	0.42
St. Francois County	136	0.41
Warren County	66	0.39
Gasconade County	26	0.35
St. Charles County	642	0.33
Marion County	36	0.32
Iron County	16	0.31*
Lincoln County	85	0.31

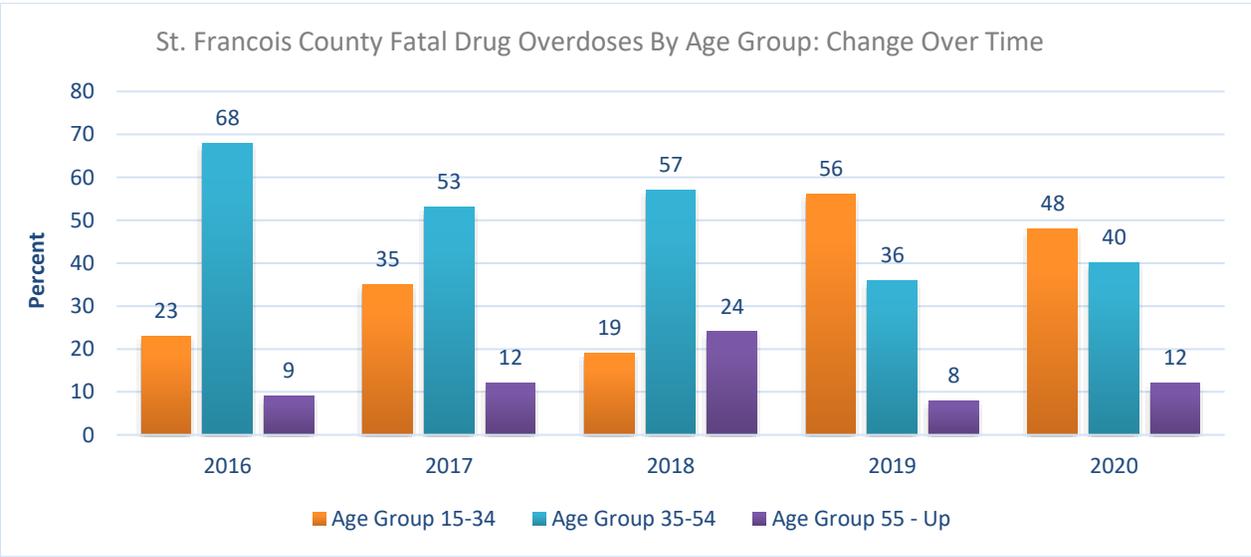
Source: Missouri Department of Health and Senior Services, Bureau of Vital Statistics  
*Rate with \* means that there is not enough cases. Therefore, value should be interpreted with caution.*



Source: Missouri Department of Health and Senior Services, Bureau of Vital Statistics



*Source: Missouri Department of Health and Senior Services, Bureau of Vital Statistics*



*Source: Missouri Department of Health and Senior Services, Bureau of Vital Statistics*

DEATHS DUE TO HEROIN OVERDOSE BY THE JURISDICTION COUNTY / CITY (2018)

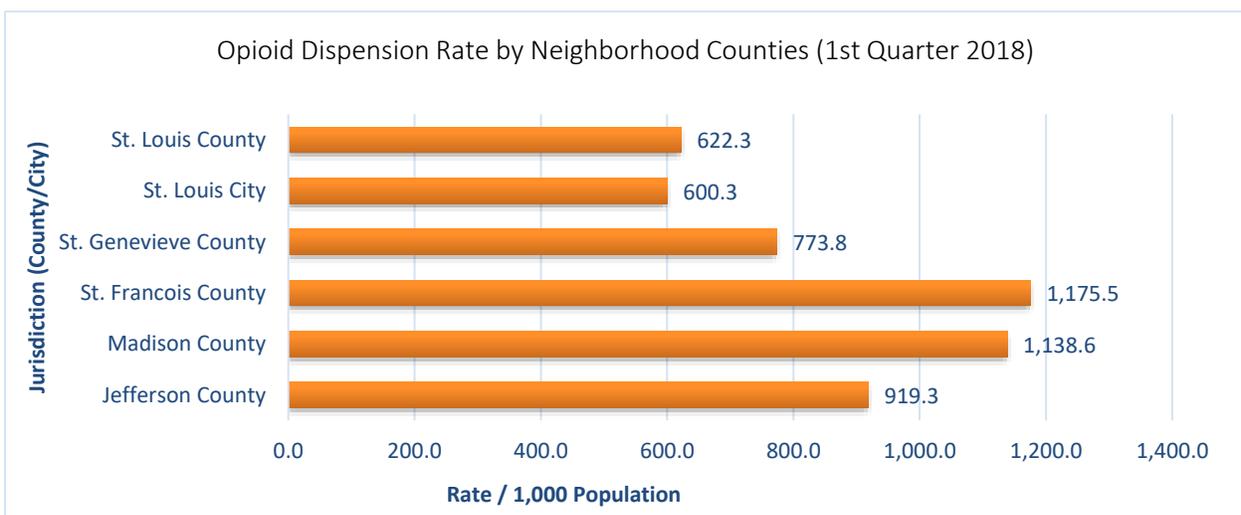
COUNTY	COUNT	RATE / 100,000 POPULATION
St. Louis City	380	24.14
Jefferson County	137	12.31
Franklin County	52	10.15
St. Louis County	481	9.62
Maries County	4	8.93*
Lincoln County	24	8.76
Pulaski County	22	8.28
St. Charles County	139	7.22
Marion County	9	6.27*
Warren County	10	5.96*
Crawford County	7	5.74*
Gasconade County	4	5.42*
Montgomery County	3	5.16*
St. Francois County	17	5.13*
Phelps County	11	4.9*

Source: Missouri Department of Health and Senior Services, Bureau of Vital Statistics  
*Rate with \* means that there is not enough cases. Therefore, value should be interpreted with caution.*

### ER VISITS DUE TO OPIOID USE BY THE JURISDICTION COUNTY / CITY (2018)

COUNTY	COUNTS	RATE / 100,000 POPULATION
St. Louis City	7,227	4.59
St. Francois County	1,203	3.63
Iron County	168	3.27
Franklin County	1,166	2.28
Madison County	102	2.28
Crawford County	252	2.07
Barton County	113	1.89
Warren County	293	1.75
Jefferson County	1,941	1.74
Phelps County	389	1.73
Lincoln County	468	1.71
St. Louis County	7,888	1.58
Taney County	418	1.54
Marion County	163	1.43

Source: Missouri Department of Health and Senior Services, Bureau of Vital Statistics



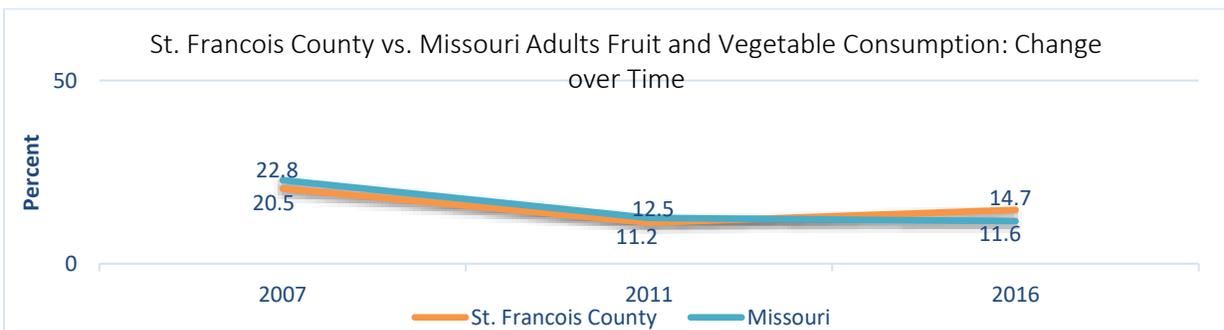
Source: Missouri Department of Health and Senior Services, Bureau of Vital Statistics

DEATHS DUE TO OPIOID OVERDOSE BY THE JURISDICTION COUNTY / CITY (2018)		
COUNTY	COUNT	RATE / 100,000 POPULATION
St. Louis City	658	41.80
Jefferson County	324	29.11
Franklin County	114	22.26
Worth County	2	19.48*
St. Louis County	931	18.63
Crawford County	22	18.04
Lincoln County	49	17.88
Hickory County	8	17.11*
Washington County	21	16.82
Pulaski County	43	16.19
St. Francois County	53	16.00
St. Charles County	301	15.63
Maries County	7	15.63*
Dent County	12	15.42*
Livingston County	11	14.64*

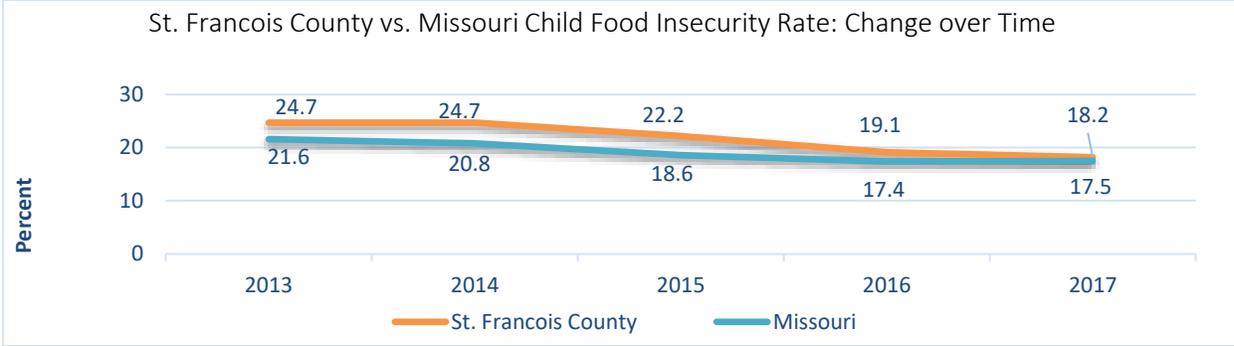
Source: Missouri Department of Health and Senior Services, Bureau of Vital Statistics

Rate with \* means that there is not enough cases. Therefore, value should be interpreted with caution.

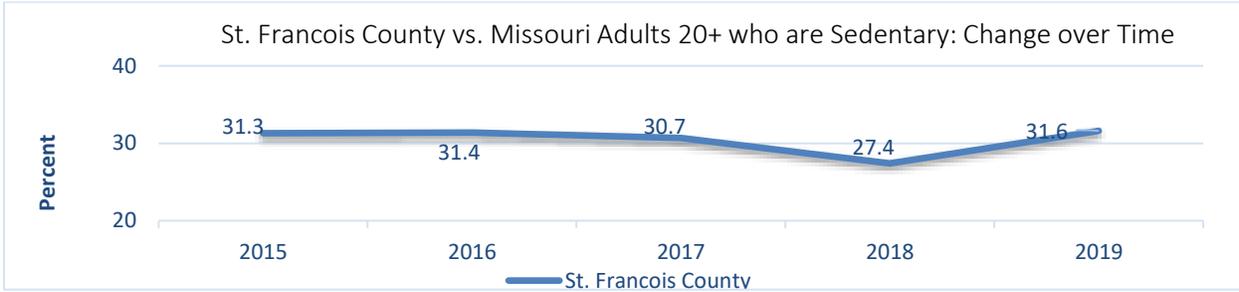
## OBESITY



Source: Conduent Healthy Communities Institute



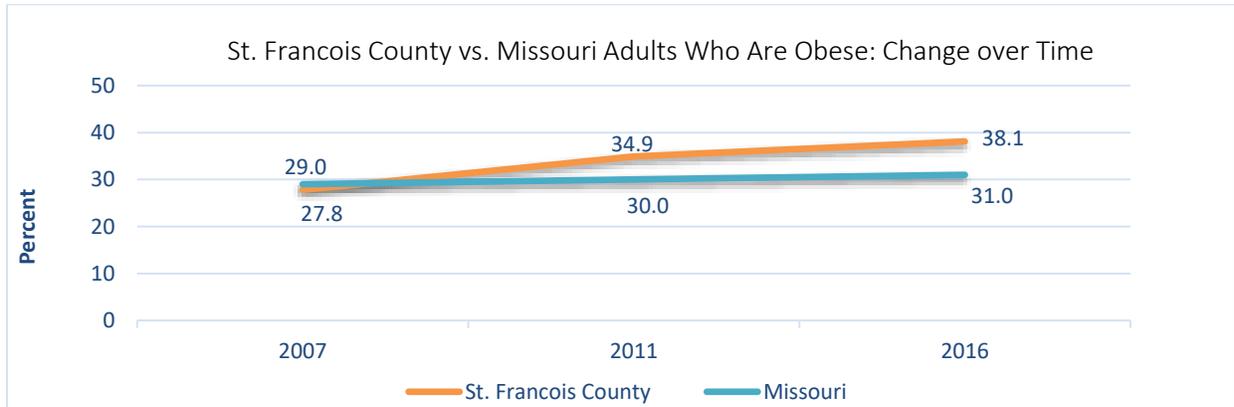
Source: Conduent Healthy Communities Institute



Source: Conduent Healthy Communities Institute



Source: Conduent Healthy Communities Institute



Source: Conduent Healthy Communities Institute

PERCENT ST. FRANCOIS COUNTY TOP FIVE CITIES WITH HIGHEST RATE OF ADULTS WHO ARE OBESE

CENSUS PLACE	2018 RATE	CENSUS PLACE	2019 RATE
Bonne Terre	42.1	Bonne Terre	40.3
Wortham	41.3	Iron Mountain Lake	39
Iron Mountain Lake	41.2	Bismarck	38.5
Francklay	40.8	Desloge	39
Bismarck	40.6	Frankclay	37.4

Source: Conduent Healthy Communities Institute

# Implementation Strategy



## Community Health Needs to be Addressed

### I. MENTAL HEALTH AND SUBSTANCE USE DISORDER

#### **RATIONALE:** (HEALTHY PEOPLE 2030)

About half of all people in the United States will be diagnosed with a mental disorder at some point in their lifetime. The Mental Health and Mental Disorders objectives also aim to improve health and quality of life for people affected by these conditions.

Mental disorders affect people of all age and racial/ethnic groups, but some populations are disproportionately affected. And estimates suggest that only half of all people with mental disorders get the treatment they need.

In addition, mental health and physical health are closely connected. Mental disorders like depression and anxiety can affect people's ability to take part in healthy behaviors. Similarly, physical health problems can make it harder for people to get treatment for mental disorders. Increasing screening for mental disorders can help people get the treatment they need.

**GOAL I:** *Increase the number of patients who attend referred counseling services at SEMO Behavioral Health and BJC Behavioral Health while being prescribed suboxone for substance use disorder from PHC.*

#### **OBJECTIVES:**

- I. Increase treatment services from the 2021 baseline by individuals 18+ years old in St. Francois County to 5-10% for FY23, FY24 & FY25 who receive services for mental health and substance use disorder.
- II. 5% of individuals treated during the suggested timeframe in St. Francois County who receive services for mental health and substance use disorder change their behavior based off the treatment services received. Increase this percentage by 5-10% each fiscal year.

#### **ACTION PLAN / STEPS TO TAKE TO MEET THE OBJECTIVES:**

- I. Collect data from BJC Medical Group for patients who are prescribed suboxone and referred to treatment services at SEMO Behavioral Health (SEMO BH) and BJC Behavioral Health (BJC BH).
- II. Provide patients and family members education on the importance of treatment services after prescribing suboxone.
- III. Collaborate w/ Clif Johnson at SEMO BH and Kristi Pierce at BJC BH on counseling referrals and ability to carry out the treatment plan for referred patients.
- IV. Implement strategies community wide to increase participation in treatment for both mental health care and substance abuse disorders through multiple outlets.

**OUTCOMES:** Increase the number of patients who attend treatment services after being prescribed suboxone and have successful outcomes.

**OUTCOMES MEASUREMENT:**

- Each participant will be provided a calendar to log their attendance for treatment sessions post suboxone prescription.
- Each week the Qualified Mental Health Professional (QMHP) at SEMO BH and BJC BH will document the participants progress at the session will remove any personal identifiers.
- Each participant will have a weekly check-in from the first week of their session as a baseline, and the data will be collected and analyze to monitor change in behavior. This will be measured at the beginning as a pre- and at the end of the program as post-measurement.

**GOAL II:** *Decrease the rate of infants delivered who test positive for drug use by using medication assisted treatment (MAT) for mothers during prenatal care.*

**OBJECTIVES:**

1. Increase the number of providers who prescribe MAT to mothers pre and post pregnancy by 50% over the next 3 years.
2. Increase MAT services from the 2021 baseline by individuals who receive a positive drug screen during a prenatal visit to 10-15% for FY23, FY24 & FY25.

**ACTION PLAN / STEPS TO TAKE TO MEET THE OBJECTIVES:**

- Collect data from OB director, Lisa Helvey on current statistics for providers who are actively using MAT services for mothers pre and post pregnancy to determine a baseline.
- Support education and certification of new and current OB providers who are not certified to prescribe MAT to aid in future treatments of patients who test positive for drug use during a prenatal visit.
- Collaborate w/ OB director Lisa Helvey to track patients who deliver successfully after being prescribed MAT through FY23, FY24 and FY25.

**OUTCOMES:** Increase the number of healthy births that are predisposed to substance use by using MAT.

**OUTCOME MEASUREMENT:**

- Track the number of providers who successfully complete their education and gain certification for MAT prescribing.
- Track the number of patients receiving MAT who have a healthy delivery.

## II. DIABETES

### **RATIONALE:** (HEALTHY PEOPLE 2030)

More than 30 million people in the United States have diabetes, and it's the seventh leading cause of death. Some racial/ethnic minorities are more likely to have diabetes. And many people with diabetes don't know they have it.

Poorly controlled or untreated diabetes can lead to leg or foot amputations, vision loss, and kidney damage. Diabetes may make it harder to control blood pressure and cholesterol. This can lead to heart attack, stroke, and other problems. But interventions to help people manage diabetes can help reduce the risk of complications. In addition, strategies to help people who don't have diabetes eat healthier, get physical activity, and lose weight can help prevent new cases. Therefore, Parkland Health Center partners with St. Francois County Health Center to increase knowledge level of healthy lifestyle of the community they serve.

**GOAL:** *Increase the number of people with diabetes who receive formal education.*

### **OBJECTIVES:**

- I. Increase the proportion of individuals living in St. Francois County with diagnosed diabetes who receive formal education by 10% from the 2022 baseline and increase 10% annually for FY23, FY24 & FY25.
- II. Through pre and post-tests, increase the knowledge level of lifestyle change through diet and physical activity of individuals at high risk for diabetes with pre-diabetes living in St. Francois County by 10% at the end of each educational session.

### **ACTION PLAN / STEPS TO TAKE TO MEET THE OBJECTIVES:**

St. Francois County Health Center Diabetes educator will hold diabetes education classes for 6-week sessions, 3-4 times per year. The class will involve individuals living in the St. Francois County community. The participants are part of hospital referral system by providers and walk-ins to the health center.

Registered dietitians will follow a weekly agenda as described below:

- **Week I:** Program Overview and Pre-test assessment
- **Week II:** Menu Planning Instruction, Part I
- **Week III:** Disease symptoms identifications and ways and appropriate maintenance tips.
- **Week IV:** Menu Planning instruction, Part II
- **Week V:** Self-Management Tools, Part I
- **Week VI:** Self- Management Tools, Part II and Post-test assessment

### **EXPECTED OUTCOMES:**

- I. Increase participation in diabetes education by individuals diagnosed by pre-diabetes and diabetes in St. Francois County
- II. Improve knowledge of healthy lifestyle change among individuals with pre-diabetes and diabetes through diabetes education classes

#### **OUTCOMES MEASUREMENT:**

- I.* Number of participants in the class will be tracked by the registered dietician and documented as a baseline. After the baseline is obtained, registered dietitians will try to increase the number of participants by 10 percent each year after.
- II.* Attendance will be tracked on a spread sheet with patient information excluding any personal identifier.
- III.* The results of the pre and post-test will also be documented on an excel sheet and analyzed to determine if a patients' knowledge level of healthy lifestyle change, including diet and physical activities, improve.

## Community Health Needs that Will Not be Addressed

### ACCIDENTS/INJURIES

The community works together as a whole to tend to accidents/injuries. Local EMS and Parkland Health Center (PHC) work triage patients in any instance to assure patients in these circumstances get the immediate care they need.

### ALCOHOL ABUSE

There are several Alcoholics Anonymous meetings and counselors in the St. Francois County who address alcohol abuse. Alcohol abuse is closely related to substance use for several individuals, PHC will be focusing on these patients as well w/ a two-fold approach if they meet the criteria for both substance use and alcohol abuse.

### CANCER

The data indicates that St. Francois County has a higher rate of instances of certain types of cancer, but not all types of cancer. The hospital will continue its ongoing support of other organizations that are addressing cancer locally, regionally, and nationally, including the American Cancer Society's Relay for Life.

### DENTAL CARE

The St. Francois County area has several dentists who tend to a variety of patients. There is an organization called Upward Smiles who serves pediatric patients on Medicaid and care for their dental needs. They will also provide urgent treatment if a child is experiencing severe pain and unable to afford care. There is a mobile dental clinic that serves the St. Francois County area and patients who are on Medicaid.

### HEART HEALTH

Parkland Health Center opened an outpatient Cardiac Cath Lab in the beginning of 2021 to help better care for the heart health in our community. PHC is currently onboarding a Cardiac Nurse Practitioner to help meet the heart health needs of the patients they serve.

### HIGH BLOOD PRESSURE

Parkland Health Center and all area providers focus on treatment and cause of high blood pressure when assessing patients. PHC participates in several local health fairs, where blood pressure is tracked and if it is high, they are called and referred to a primary care provider to address their health issue.

## **IMMUNIZATIONS/INFECTIOUS DISEASES**

PHC is working on the study of immunizations/infectious disease w/ an in-house specialist. PHC offers vaccines to employs and community members.

## **MATERNAL/INFANT HEALTH**

The St. Francois County community offers several resources through PHC OB Clinics, the health department, and the pregnancy resource center. There is an approach noted in the CHNA to aid mothers who struggle with substance use during pregnancy.

## **OBESITY**

Although obesity is not a primary area of focus, Parkland will focus on bringing awareness and education in St. Francois County about health risks of obesity and diabetes through radio shows, public service announcements, and other health events in which PHC participates. Through funding from the St. Francois County United Way and local business sponsorship, St. Francois County Health Center (SFCHC) began the Farmer's Market Voucher Program in 2019. Vouchers for over \$5,000 worth of free produce at the Farmington Farmer's Market were distributed to individuals aged 50 and older to increase access to healthy foods.

## **REPRODUCTIVE HEALTH / SEXUAL HEALTH**

Teen pregnancy, pre-term birth and low birth weights are issues within St. Francois County. PHC will continue its support and collaboration with the March of Dimes and the Parkland Pregnancy Resource Center. St. Francois County Health Center (SFCHC) will also continue to offer testing, treatment and counseling for gonorrhea, syphilis, and chlamydia, along with STD prevention education.

## **RESPIRATORY DISEASES**

Parkland Health Center offers comprehensive pulmonary services specializing in treating complications of the lungs and respiratory tract. PHC providers will refer their patients to pulmonary services testing depending on their condition.

## **STROKE**

Parkland Health Center is STEMI certified and capable of tending to stroke patients. Education is constantly evolving w/ stroke certification and the PHC team is staying current on ways to help, prevent and treat.

## **TOBACO USE**

The hospital will continue its ongoing support of other organizations that are addressing this area, such as the St. Francois County Smoke Free Coalition. SFCHC has staff members that are

trained to facilitate the “American Lung Association’s Freedom from Smoking” cessation program.

## **VAPING**

Vaping is an issue within the community, it is currently being addressed in the local school districts and with parent education. PHC will touch on vaping and its correlation with substance use through the CHNA.