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VVV Consultants LLC Olathe, KS

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I. Executive Summary

[VVV Consultants LLC]

I. Executive Summary

Cass Regional Medical Center (Primary Service Area) - 2016 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. This health assessment will serve as the foundation for community health improvement efforts for the next three years. The last CHNA for <u>Cass Regional Medical Center (Primary Service Area)</u> was published in 2013. The Patient Protection and Affordable Care Act (ACA) requires not-for-profit hospitals to conduct a CHNA every three years and adopt an implementation strategy to meet the needs identified by the CHNA. This 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. Below are CHNA themes.

	Cass Regional Medical Center (Primary Service Area) - Community Health Strengths									
#	Торіс	#	Торіс							
1	Increased access to specialists (Cardiology, Neurology)	6	Local and invested providers							
2	Greater number of access points for Primary Care	7	Good ambulance services							
3	Active farmer's market	8	Increased access to dental services for uninsured youth							
4	Good fitness centers (including Silver Sneakers options for seniors)	9	School nurses							
5	Good walking trails	10	Collaboration of community health partners							

Town Hall "**Community Health Strengths**" cited for <u>Cass Regional Medical Center's</u> Primary Service Area are as follows:

Town Hall "**Community Health Changes and/or Improvements**" cited for <u>Cass Regional</u> <u>Medical Center's</u> Primary Service Area are as follows:

	Cass Regional Medical Center - Primary Service Area									
	2016 Community Health Needs - Town Hall Priorities (7 A	Attendee	es, 84 Vo	otes)						
#	Health Needs to Change and/or Improve	Votes	%	Accum						
1	Mental Health (Access, Diagnosis, Placement)	14	16.7%	16.7%						
2	Access to Primary Care (Internal Medicine, Pediatrics, Obstetrics)	10	11.9%	39.3%						
3	Lack of Funding for Local Health Department	9	10.7%	27.4%						
4	Suicide	9	10.7%	50.0%						
5	Drug Abuse	7	8.3%	58.3%						
6	Healthcare Transportation	7	8.3%	66.7%						
7	Obesity (Nutrition, Fitness)	5	6.0%	72.6%						
8	Urgent Care Services (Southern Cass)	5	6.0%	78.6%						
	Total Town Hall Votes	84	100.0%							
	Other Items Noted: Communication of Healthcare Services, Eating Disorders, Sexually Transmitted Infections, Visiting Specialists (Pulmonology, Nephrology), Access to Dental Services for Uninsured Adults and Child Care.									

Other notable health data points, when comparing Cass County indicators to the Missouri Rural Norm (26 counties), are as follows: mean travel time to work (4.1 additional minutes); number of preterm births, low birth weights, teen pregnancies, out-of-wedlock births and mothers smoking during pregnancy; population ratio to primary care physicians (820 to 1 higher); alcohol-impaired driving deaths (8.3% higher); excessive drinking (1.6% higher); sexually transmitted infections (31.3 per 100,000 higher); Heart Disease mortality (124.2 more events); Chronic Lower Respiratory Disease (53.2 more events); and suicide (14.4 more events).

Detailed key Community Health Needs Assessment conclusions from secondary research for Cass Regional Medical Center's Primary Service Area are as follows:

MISSOURI HEALTH RANKINGS: Per the 2016 RWJ County Health Rankings study, <u>Cass</u> <u>Regional Medical Center's</u> Primary Service Area (Cass County, Missouri) had the highest State of Missouri ranking (of 115 counties) in Health Outcomes, Mortality, Morbidity, Health Factors, Health Behaviors, Clinical Care, and Social and Economic Factors. Secondary Data Tab Categories:

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: Cass County has a population of 101,603 residents as of July 1, 2015, higher than the Missouri Rural Norm of 22,768. The percent change in population in Cass County from April 1, 2010 to July 1, 2015 is 2.1%, higher than the Missouri Rural Norm of -1.6%. The percent of persons under 18 years in the Cass County is 25.0%, higher than the Missouri Rural Norm of 22.7%. The percent of persons 65 years and over in Cass County is 15.5%, lower than the Missouri Rural Norm of 18.5%. The percent of female persons in Cass County is 51.1%, higher than the Missouri Rural Norm of 49.5%. The percent of white alone persons in Cass County is 92.4%, lower than the Missouri Rural Norm of 94.4%. The percent of black or African American alone persons in Cass County is 4.0%, higher than the Missouri Rural Norm of 2.7%. The number of Veterans in Cass County is 8,647, higher than the Missouri Rural Norm of 2,066. The population per square mile in Cass County is 142.8, higher than the Missouri Rural Norm of 36.4. The percent of children in single-parent households in Cass County is 26.0%, lower than the Missouri Rural Norm of 28.2%. The percent of persons in poverty in Cass County is 10.5%, lower than the Missouri Rural Norm of 16.5%. The percent of persons with limited access to healthy foods is 3.0%, lower than the Missouri Rural Norm of 6.8%. The number of registered voters in Cass County is 73,160, higher than the Missouri Rural Norm of 15,503.
- TAB 2: The per capita income in the past twelve months in Cass County is \$28.013, higher than the Missouri Rural Norm of \$21,403. The number of housing units in Cass County is 40,488, higher than the Missouri Rural Norm of 10,243. The total number of all firms in Cass County is 7,025, higher than the Missouri Rural Norm of 1,818. The food insecurity rate in Cass County is 12.8%, lower than the Missouri Rural Norm of 15.1%. The mean travel time to work for workers age 16 years+ in Cass County is 27.6 minutes, higher than the Missouri Rural Norm of 23.5 minutes. The percent of Cass County residents with a long commute driving alone is 47.0%, higher than the Missouri Rural Norm of 33.1%.
- TAB 3: The percent of students eligible for free lunch in Cass County is 26.4%, lower than the Missouri Rural Norm of 37.4%. The percent of individual's age 25 years+ in Cass County who are a high school graduate or higher is 92.2%, higher than the Missouri Rural Norm of 86.5%. The percent of persons age 25+ years with a Bachelor's degree or higher in Cass County is 24.0%, higher than the Missouri Rural Norm of 15.8%.

- TAB 4: The number of births with care beginning in the first trimester in Cass County is 900.0, higher than the Missouri Rural Norm of 195.8. The number of preterm births (less than 37 weeks gestation) in Cass County is 659.0, higher than the Missouri Rural Norm of 153.0. The number of low birth weights in Cass County is 427.0, higher than the Missouri Rural Norm of 100.7. The number of infants participating in WIC in Cass County is 587.0, higher than the Missouri Rural Norm of 167.1. The teen pregnancy rate under age 18 in Cass County is 162.0, higher than the Missouri Rural Norm of 38.7. The number of out-of-wedlock births in Cass County is 1,989.0, higher than the Missouri Rural Norm of 505.2. The number of mothers who smoked during pregnancy in Cass County is 217.0, higher than the Missouri Rural Norm of 59.2
- TAB 5: The ratio of the population in Cass County to primary care physicians is 4,030:1, higher than the Missouri Rural Norm of 3,210:1. The rate of preventable hospital stays in Cass County is 73.0, higher than the Missouri Rural Norm of 70.5. The percent of patients in Cass County who gave their hospital a rating of nine or 10 on a scale from zero (lowest) to 10 (highest) is 71.0%, higher than the Missouri Rural Norm of 68.8%. The average time patients in Cass County spent in the Emergency Department before they were seen by a healthcare professional is 11.0 minutes, lower than the Missouri Rural Norm of 15.4 minutes.
- TAB 6: The percent of alcohol-impaired driving deaths in Cass County is 39.0%, higher than the Missouri Rural Norm of 29.7%.
- TAB 7: The percent of adult obesity in Cass County is 31.0%, lower than the Missouri Rural Norm of 33.1%. The percent of adult smoking in Cass County is 18.0%, lower than the Missouri Rural Norm of 20.3%. The percent of excessive drinking in Cass County is 17.0%, higher than the Missouri Rural Norm of 15.4%. The percent of physical inactivity in Cass County is 28.0%, lower than the Missouri Rural Norm of 30.3%. The rate of sexually transmitted infections per 100,000 in Cass County is 292.9, higher than the Missouri Rural Norm of 260.9. The percent of the Medicare population in Cass County with Hyperlipidemia is 42.9%, higher than the Missouri Rural Norm of 39.9%. The percent of the Medicare population in Cass County with heart failure is 12.0%, lower than the Missouri Rural Norm of 14.1%. The percent of the Medicare population in Cass County with Chronic Kidney Disease is 15.8%, higher than the Missouri Rural Norm of 13.9%. The percent of the Medicare population in Cass County with COPD is 11.0%, lower than the Missouri Rural Norm of 13.9%.
- TAB 8: The percent of residents uninsured in Cass County is 12.0%, lower than the Missouri Rural Norm of 17.0%.
- TAB 9: The Heart Disease mortality rate in Cass County is 187.0, higher than the Missouri Rural Norm of 62.8. The Chronic Lower Respiratory Disease mortality rate in Cass County is 72.0, higher than the Missouri Rural Norm of 18.8. The number of suicides in Cass County is 19.0, higher than the Missouri Rural Norm of 4.6.
- TAB 10: The percent of access to exercise opportunities in Cass County is 75.0%, higher than the Missouri Rural Norm of 46.4%. The percent of mammography screenings in Cass County is 64.0%, higher than the Missouri Rural Norm of 57.0%.

Key 2016 Primary Research Community Feedback Conclusions

In August 2016, Cass Regional Medical Center collected stakeholder feedback from their primary service area consumers, community leaders and groups, public and other organizations, and other providers. These stakeholders (N=254) provided the following community feedback insights via an online perception survey:

- 75.4% of Cass Regional primary service area 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.
- Cass Regional primary service area stakeholders are satisfied with the following services: Ambulance, Eye Doctor / Optometrist, Inpatient Services, Outpatient Services, Pharmacy, Primary Care and School Nurse.
- Cass Regional primary service area stakeholders are not satisfied with the following services: Child Care, Dentists, Family Planning Services, Home Health, Mental Health Services and Nursing Home.
- 70.6% of Cass Regional primary service area stakeholders have received healthcare services outside of their community over the past two years.
- Cass Regional primary service area stakeholders perceive the following causes of disease or disability a problem in their community: Alcohol, Drugs / Substance Abuse, Mental Illness, Obesity, Poverty, Suicide and Wellness.

As seen below, the community still senses a current health need for Drug Prevention, Obesity Rates – Need for Nutrition and Fitness, Lack of Mental Health Providers and Placement of Patients, Limited Local Health Department Funding and Transportation for Healthcare.

Cass Regional Medical Center (PSA) - Harrisonville, MO N=118										
. From our last CHNA (2013), a number of health needs were identified as priorities. Are any of these 2013 CHNA needs still an Ongoing Problem" in the Cass Regional Medical Center primary service area?										
Answer Options Not a Problem Somewhat of a Anymore Problem Problem Major Problem Response Count Rank										
Drug Prevention Resources	11	60	46	90.6%	117	4				
Obesity Rates - Need for Nutrition and Fitness	12	56	49	89.7%	117	3				
Lack of Mental Health Providers and Placement of Patients	15	54	45	86.8%	114	1				
Limited Local Health Department Funding	16	71	25	85.7%	112	7				
Transportation for Healthcare	17	52	45	85.1%	114	4				
Desire for Urgent Care	24	34	59	79.5%	117	2				
Access for Dental Treatment for Uninsured / Medicaid	30	53	30	73.5%	113	6				

II. Methodology

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II. Methodology a)Scope and Purpose

The new federal Patient Protection and Affordable Care Act requires that each registered 501(c)3 hospital conduct a Community Health Needs Assessment (CHNA) at least once every three years and adopt a strategy to meet community health needs. Any hospital who has filed a 990 is required to conduct a CHNA. IRS Notice 2011-52 was released in late fall of 2011 to give notice and request comments.

JOB #1: Meet/Report IRS 990 Required Documentation

- 1. A <u>description of the community served</u> by the facility and how the community was determined;
- 2. A description of the process and methods used to conduct the CHNA;
- 3. The <u>identity of any and all organizations</u> with which the organization collaborated and third parties that it engaged to assist with the CHNA;
- 4. A <u>description of how</u> 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 <u>prioritized description of all of the community needs</u> identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and
- 6. A <u>description of the existing health care facilities and other resources within the</u> <u>community</u> available to meet the needs identified through the CHNA.

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: Government agencies with current information relevant to the health needs of the community and representatives or members in the community that are medically underserved, low-income, minority populations, and populations with chronic disease needs. 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.).

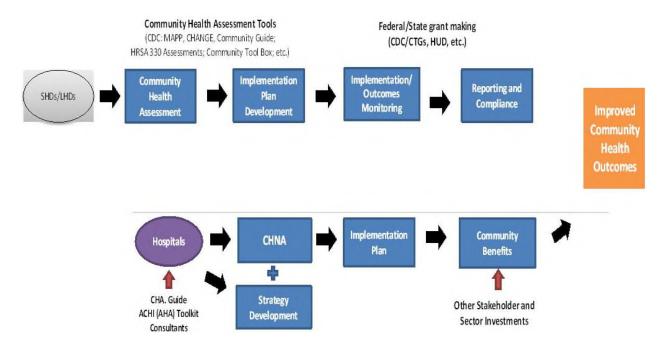
JOB #2: Making a CHNA Widely Available to the Public

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. 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 Form 990. 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 by Hospital

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.

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 <u>with special</u> <u>knowledge of or expertise in public health</u>. 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. <u>The Notice defines an "implementation strategy" as a written plan</u> 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.

<u>Under the Notice, an implementation strategy is considered to be "adopted" on the date the strategy is</u> <u>approved by the organization's board of directors or by a committee of the board or other parties legally</u> <u>authorized by the board to act on its behalf</u>. 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.

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:

Cass Regional Medical Center Profile

2800 Rock Haven Rd, Harrisonville, MO 64701 CEO: J. Christopher Lang

About Our Hospital and Clinics: Cass Regional Medical Center is a general, acute care facility located in Harrisonville, Missouri, that serves the residents of Cass County (population 100,000+) and the surrounding areas. As a critical access hospital, Cass Regional maintains a 21-bed medical/surgical unit, a four-bed intensive care unit and a 10-bed behavioral health unit.

In September 2009, Cass Regional Medical Center opened a new, 138,000-square-foot facility at 2800 East Rock Haven Road in Harrisonville. It replaced the former facility located at 1800 East Mechanic in Harrisonville, which housed the hospital for over 46 years.

Cass Regional offers state-of-the-art diagnostic equipment and a wide range of services. Our Specialists Clinic and the adjoining Rock Haven Medical Mall offer convenient access to some of the region's finest medical specialists. Our staff of dedicated employees works with our physicians to keep pace with the latest technology and works as a team to care for patients and their families. We maintain the prestigious accreditation of The Joint Commission.

Specialists in nearly 20 different areas treat patients on the Cass Regional campus in either the medical center or the adjoining Rock Haven Medical Mall, which is home to Cass Regional's Rock Haven Specialty Clinic, General Surgery Clinic; Ear, Nose and Throat Clinic and Cass Regional Orthopedics. The Wound Center at Rock Haven Specialty Clinic provides comprehensive treatment (including hyperbaric oxygen therapy) for chronic, slow-to-heal and serious wounds. Cass Regional also operates seven family practice clinics in the communities of Archie, Drexel, Garden City, Harrisonville, Kingsville, Peculiar and Pleasant Hill.

HCA Midwest Health System: While the hospital's board of trustees retains local governance and operating control, Cass Regional Medical Center is managed under contract by HCA Midwest Health. Since 2003, medical center administration and other valuable services have been provided through this arrangement.

HCA Midwest Health is a comprehensive health care system serving the Kansas City metropolitan area and the outlying region. How does HCA Midwest Health strengthen Cass Regional Medical Center? Like many businesses, health care can be provided more efficiently and cost-effectively when similar providers pool their resources. By working together, we have greater purchasing power and can provide our patients with a broader range of health care services.

Our Mission: Cass Regional Medical Center, a publicly owned health care organization, is committed to serving the communities of Cass County and the surrounding region with:

- compassionate;
- customer-focused; and
- professional health care services.

Our Vision: For every life we touch, Cass Regional Medical Center will be known for the passion of our people towards service excellence and our commitment to promoting wellness and expanding health care services for the communities we serve.

Our Values: At Cass Regional Medical Center, we believe in:

- **Family:** Our roots run deep in this region that we are proud to call home. We cherish our relationships with our families, friends and neighbors, and believe that every patient, visitor, volunteer, physician and employee is a member of Cass Regional's extended family. We join together as a team every day in both our hospital and our community-based clinics, where we share in each other's daily joys and struggles and are a source of encouragement and support for one another.
- **Stewardship:** We stand on the shoulders of many people who have worked hard to make us what we are today, and it is our privilege to preserve and grow the resources that have been entrusted to us so that future generations may also benefit. We believe that through wise stewardship of our resources human, financial, and environmental we are best equipped to accomplish our greater purpose, which is to promote wellness, ease suffering and heal the sick and injured.
- **Kindness:** We believe in the simple goodness of being nice to each other. We treasure the richness that our varied experiences, knowledge, skills and cultural backgrounds bring to our organization and our relationships with one another. We treat others as we want to be treated, and always try to see every situation from the other's perspective.
- **Respectfulness:** We believe that every person has worth and deserves to be treated with honesty, fairness and understanding. Everyone, no matter their role in the organization, takes time to listen and to care, and we uphold our integrity by keeping our word and making sure our actions match our intentions. We have pride in our conduct and in our professional appearance, and seek to build each other up through a spirit of camaraderie, mutual trust and friendship.
- **Dedication:** Delivering the highest quality care is of utmost importance, and we strive to consistently do our best for every patient, every time. We set high standards for ourselves, both in our personal and organizational codes of conduct. We can always be counted on to take pride and ownership in our work, and to lead by example, no matter the task.
- **Excellence:** We are committed to continual improvement, and embrace challenges with confidence and optimism. We believe that we are lifelong learners, and that new and better ways to support the delivery of health care can always be discovered. We are open to innovative ideas and solutions, and constantly pursue advanced knowledge and technology so that our patients receive the best care possible.

General and Specialty Services

- Concussion Management
- Behavioral Health Unit (BHU)
- Cardiac Rehabilitation
- Case Management/Social Services
- Cass Regional Orthopedics
- Community Health
- Diabetes Education
- Ear, Nose and Throat Clinic
- Emergency Department
- Family Practice Clinics
- General Surgery Clinic
- GI/Endoscopy
- Infusion Therapy
- Intensive Care Unit (ICU)
- Laboratory
- Medical Imaging
- Medical / Surgical Unit

- Nurse Practitioners
- Nutrition Counseling
- Occupational Health
- Occupational Therapy
- Pain Management
- Pharmacy
- Physical Therapy
- Pulmonary Rehabilitation
- Respiratory Therapy
- Sleep Lab
- Specialists
- Speech Therapy
- Surgery
- Weight Management / Bariatric Surgery
- The Wound Center

Cass County Health Department Profile

300 S Main St, Harrisonville, MO 64701 Health Director: Tiffany Klassen

About Us

Establishment and Growth: The Cass County Health Department was established in 1938. Today, with 13 staff members, the Cass County Health Department serves a combined population of approximately 99,478 people. The Cass County Health Department, along with community and state partnerships, carry out the Three Core Public Health Functions and the 10 Essential Public Health Services.

Mission: To protect, promote and improve the health of all people in Cass County through integrated community efforts.

Vision: Empowering all people living in Cass County to live healthier lives.

Values:

- **Collaboration:** We work collaboratively with our community partners, sharing knowledge and resources to enhance access to services and improve the health and well-being of all residents in Cass County.
- **Integrity:** We honor the public's trust and are committed to the highest standards of excellence, professional ethics and personal integrity in all that we do.
- **Diversity:** We value and respect diversity and recognize the benefits it brings in understanding and serving all people.
- **Empowerment:** Our organizational culture supports staff in their initiative to take actions that support our goals. We strive to be a high performance organization by promoting a culture of continuous improvement and foster employees that are competent, motivated, engaged and empowered.
- Customer Centered: Cass County Health Department staff will treat all customers with dignity and respect while being adaptive and flexible to listen, meet and exceed all the expectations of the community we serve.

What is Public Health?

Public health encompasses a variety of functions and services that protect the health of the community and help citizens live longer, healthier, happier lives. This includes:

- Connecting citizens to community health services
- Developing policies to promote a healthy community
- Educating our community about public health issues
- Enforcing city ordinances
- Evaluating current community health programs
- Monitoring, identifying and investigating potential health threats
- Partnering with other community organizations to address local health issues

Organization: The Health Department is organized into seven divisions which carry out the 10 Essential Public Health Functions.

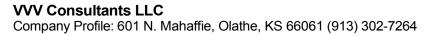
- Administration
- Communicable Disease Surveillance
- Environmental Health
- Nursing
- Emergency Preparedness Planning
- Women, Infants and Children WIC
- Health Education

Programs and Services

- Missouri Birth and Death Certificates
- Immunizations
- Food Handler Classes
- Women, Infants and Children WIC
- Environmental Health
- Resource Directory
- Pregnancy Testing
- Tuberculosis (TB) Skin Testing
- Communicable Disease Surveillance
- Emergency Preparedness Planning
- Health Education
- Nursing

II. Methodology b) Collaborating CHNA Parties Continued

Consultant Qualifications



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 have 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, the American Marketing Association Kansas City Chapter and Co-Chair of the AMA Kansas City Healthcare Special Interest Group. 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

Alexa supports all aspects of VVV Consultants LLC healthcare consulting services and is proficient in Microsoft Word, Surveymonkey, Excel and PowerPoint. Alexa is client focused with a special interest in quality patient health delivery to meet customer needs. Alexa graduated from the University of Kansas with a Bachelor's Degree in Community Health Education in May of 2013. After graduation, Alexa started her career at Cerner Corporation as a Delivery Consultant. In 2015, Alexa received her MBA with a Health Care Management emphasis from RU's Helzberg School of Management.



II. Methodology c) CHNA and Town Hall Research Process

Cass Regional Medical Center's Community Health Needs Assessment (CHNA) process began in January 2016. At that time, an inquiry was made by J. Christopher Lang, CEO to VVV Consultants LLC to explore the possibility of conducting a comprehensive IRSaligned CHNA. VVV Consultants LLC then reviewed CHNA experience, in-depth IRS CHNA requirements and regulations, CHNA development options to meet IRS requirements and next steps after option approval.

VVV CHNA Deliverables:

- Confirm Cass Regional 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 IRS-aligned CHNA report that meets requirements.

To ensure proper Cass Regional 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 Cass Regional's Primary Service Area.

Ca	ss Regio	onal Medical Center		5 YR IP/OP		
#	ZIP	City	County	Total	%	
				224,704	100.0%	
1	64701	Harrisonville	Cass	83,746	37.3%	
2	64078	Peculiar	Cass	18,778	8.4%	
3	64747	Garden City	Cass	18,391	8.2%	
4	64080	Pleasant Hill	Cass	17,249	7.7%	
5	64720	Archie	Cass	9,479	4.2%	
6	64012	Belton	Cass	8,823	3.9%	
7	64083	Raymore	Cass	6,292	2.8%	
8	64746	Freeman	Cass	5,393	2.4%	
9	64093	Creighton	Cass	2,289	1.0%	
10	64788	Cleveland	Cass	1,577	0.7%	

	Cass Regional Medical Center CHNA Work Plan									
		Projec	t Timeline and Roles 2016							
Step	Date (Start-Finish)	Lead	Task							
1	2/1/2016	VVV	Sent VVV quote for review.							
2	2/19/2016	Hosp	Select CHNA Option A/B/C. Approve and sign VVV CHNA quote.							
3	8/1/2016	VVV	Send out REQCommInvite Excel file. Hospital and health department to fill in PSA stakeholders names, addresses and e- mails.							
4	8/1/2016	VVV	Request hospital client to send MHA PO101, PO103 and TOT223E Reports to document service area for FFY 15, 14 and 13. In addition, request hospital to complete three year historical PSA IP/OP/ER/Clinic patient origin file (Use ZipPSA_3yrPOrigin.xls).							
5	8/8/2016	VVV	Prepare CHNA Round #2 stakeholder feedback online link. Send text link for hospital review.							
6	8/15/2016	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming CHNA work. Hospital to place.							
7	8/15/2016	vvv	Launch and conduct online survey to stakeholders. Hospital will e- mail invite to participate to all stakeholders.							
8	8/22/2016	VVV / Hosp	Prepare and send out PR story to local media CHNA survey announcing online CHNA Round #2 feedback. Request public to participate.							
9	8/29/2016	vvv	Assemble and complete secondary research. Find and populate 10 Tabs. Create Town Hall PowerPoint for presentation.							
10	8/29/2016	Hosp	Prepare and send out community Town Hall invite letter and place local advertisement.							
11	9/5/2016	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 9/23/2016	All	Conduct conference call with hospital and health department to review Town Hall data and flow.							
13	9/27/2016	VVV	Conduct CHNA Town Hall from 5:30-7:00pm at Harrisonville Area Chamber of Commerce. Review and discuss basic health data plus rank health needs.							
14	On or before 11/1/16	VVV	Complete analysis. Release draft one and seek feedback from leaders at hospital and health department.							
15	On or before 11/23/2016	VVV	Produce and release final CHNA report. Hospital will post CHNA online.							
16	11/30/16	Hosp	Conduct client Implementation Plan PSA leadership meeting.							
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.							

To meet IRS CHNA requirements, a four-phase methodology was reviewed and approved as follows:

Phase I—Discovery:

Conduct a 30-minute conference call with the CHNA hospital and county health department clients. Review / confirm CHNA calendar of events, explain / coach client 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 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 IRS-aligned CHNA criteria.

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

Phase I: Discovery	August 2016
Phase II: Secondary / Primary Research	September 2016
Phase III: Town Hall Meeting	September 27, 2016
Phase IV: Prepare / Release CHNA report	November 2016

Detail CHNA Development Steps Include:

Steps to Conduct (Steps to Conduct Community Health Needs Assessment						
	Development Steps						
Step #1 Commitment	Determine interest level of area healthcare leaders (Hospital, Health Department, Mental Health Centers, Schools, Churches and Physicians, etc.) and hold community meeting.						
Step #2 Planning	Prepare brief Community Health Needs Assessment plan. List goals, objectives, purpose, outcome, roles, community involvement, etc. Hold community kick-off meeting.						
Step #3 Secondary Research	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.).						
Step #4a Primary Research	Conduct Community Roundtable (qualitative research). Review secondary research (Step #3) with community stakeholders. Gather current opinions and identify health needs.						
Step #4b Primary Research <optional></optional>	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.						
Steps #5 Reporting	Prepare / Present comprehensive Community Health Needs Assessment report to community leaders with recommended actions to improve health. (Note: Formal report will follow IRS Notice 2011-52 regulations).						
VVV Consultants LLC	(913) 302-7264						

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.

Cass Regional Medical Center's Town Hall was held on Tuesday, September 27, 2016 at the Harrisonville Area Chamber of Commerce. Vince Vandehaar and Alexa Backman facilitated this 1½ hour session with seven 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 sited 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).



Community Health Needs Assessment (CHNA) Town Hall Discussion Agenda

- I. Opening / Introductions (10 mins)
- II. Review CHNA Purpose and Process (10 mins)
- III. Review Current County "Health Status" -Secondary Data by 10 TAB Categories -Review Community Feedback Research (35 mins)
- IV. Collect Community Health Perspectives
 -Hold Community Voting Activity: Determine Most Important Health Areas (30 mins)
- I. Close / Next Steps (5 mins)



I. Introductions: A Conversation with the Community

Community members and organizations invited to CHNA Town Hall

Consumers: Uninsured/underinsured people, Members of at-risk populations, Parents, caregivers and other consumers of health care in the community, and Consumer advocates.

Community leaders and groups: The hospital organization's board members, Local clergy and congregational leaders, Presidents or chairs of civic or service dubs - Chamber of Commerce, veteran' organizations, Lions, Rotary, etc., Representatives from businesse – owners/CEOS of large businesses (local or large corporations with local branches.]Business people & merchants (e.g., who sell tobacco, alcoho), or other drugs), Representatives from organized labor, Political, appointed and elected officials, Foundations, United Way organizations. And other "community leaders".

Public and other organizations: Public health officials, Directors or staff of health and human service organizations, CRy/Community planners and development officials, Individuals with business and economic development experience, Welfare and social service agency staff.Nousing advocates - administrators of housing programs: homeless shelters, low-income-family housing and senior housing.Education officials and staff - school superintendents, principals and teachers, Public safety officials, Staff from state and area agencies on aging.Law enforcement agencies - Chiefs of police, Local colleges and universities, Coalitions working on health or other issues.

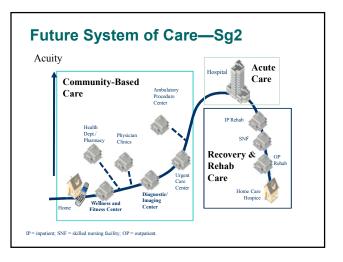
Other providers: Physicians, Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services, Leaders from Catholic Charities and other faith-based service providers, Mental health providers, Oral health providers, Health insurers, Parish and congregational nursing programs, Other health professionals

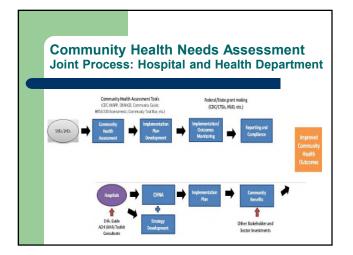
II. Purpose—Why Conduct a CHNA?

- To determine health-related trends and issues of the community
- To understand / evaluate health delivery programs in place.
- To develop strategies to address unmet health needs
- To meet Federal requirements both local hospital and health department

II. Review CHNA Definition

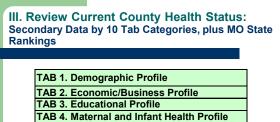
- A Community Health Needs Assessment (CHNA) is
 a systematic collection, assembly, analysis, and
 dissemination of information about the health of
 the community. (NOTE: Some the data has already been
 collected / published by Local, State and Federal public
 health organizations. Some data will be collected today.)
- A CHNA's role is to identify <u>factors</u> that affect the health of a population and <u>determine the</u> <u>availability of resources</u> to adequately address those factors.

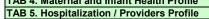




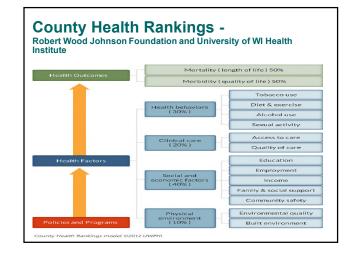
II. Required Written Report—IRS 990 Documentation

- a description of the community served
- a description of the CHNA process
- the identity of any and all organizations and third parties which collaborated to assist with the CHNA
- a <u>description of how</u> 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
- a prioritized description of all of the community needs identified by the CHNA and
- a <u>description of the existing health care facilities and other</u> resources within the community available to meet the needs identified through the CHNA





- TAB 6. Behavioral Health Profile
- TAB 7. Risk Indicators & Factors TAB 8. Uninsured Profile
- TAB 9. Mortality Profile
- TAB 10. Preventative Quality Measures



1		Physical Environment (10%)	2b	Social a	nd Economic Environment (40%)
Focus Area	Measure	Description	Focus Area	Measure	Description
Air and water		The average daily measure of fine particulate matter	Community	Violent crime	Violent crime rate per 100,000 population
quality (5%)	matter	in micrograms per cubic meter (PM2.5) in a county	safety (5%)		
	Drinking water violations	Percent of population potentially exposed to water		Injury deaths	injury mortality per 100,000
		exceeding a violation limit during the past year			
Housing and	Severe housing problems	Percent of households with at least 1 of 4 housing			
transit (5%)		problems: overcrowding, high housing costs, or lack			
		of kitchen or plumbing facilities			
	Driving alone to work	Percent of the workforce that drives alone to work	3		Health Outcomes (30%)
	Long commute - driving	Among workers who commute in their car alone, the	3a		Health Behaviors
	alone	percent that commute more than 30 minutes			
2a		Clinical Care (20%)	Focus Area	Measure	Description
Focus Area	Measure	Description	Tobac co use	Adult smoking	Percent of adults that report smoking >= 1
Access to care	Uninsured	Percent of population under age 65 without health	Diet and	Adult obesity	Percent of adults that report a BMI >= 30
(10%)		insurance	exercise (10%)		
	Primary care	Ratio of population to primary care physicians		Food	index of factors that contribute to a healt
	physicians			environment	food environment
				index	
	Dentists	Ratio of population to dentists		Physical inactivity	Percent of adults aged 20 and over report
	Mental health	Ratio of population to mental health providers		Access to exercise	Percent of the population with adequate
	providers			opportunities	access to locations for physical activity
Quality of care	Preventable hospital	Hospitalization rate for ambulatory-care sensitive	Alcohol and	Excessive drinking	Binge plus heavy drinking
(10%)	stays	conditions per 1,000 Medicare enrollees	drug use (5%)		
	Diabetic screening	Percent of diabetic Medicare enrollees that receive		Alcohol-impaired	Percent of driving deaths with alcohol
		HbA1c screening		driving deaths	involvement
	Mammography	Percent of female Medicare enrollees that receive	Sexual activity	Sexually	Chlamydia rate per 100,000 population
	screening	mammography screening	(5%)	transmitted	
				infections	
2b	Social	and Economic Environment (40%)		Teen births	Teen birth rate per 1,000 female population
					ages 15-19
Focus Area	Measure	Description	3b / 3c		Morbidity / Mortality
Education	High school	Percent of ninth grade cohort that graduates in 4	Focus Area	Measure	Description
(10%)	graduation	vears			
	Some college	Percent of adults aged 25-44 years with some post-	Quality of life	Poor or fair	Percent of adults reporting fair or poor he
		secondary education	(50%)	health	(age-adjusted)
Employment	Unemployment	Percent of population age 16+ unemployed but		Poor physical	Average number of physically unhealthy of
(10%)		seeking work		health days	reported in past 30 days (age-adjusted)
Income (10%)	Children in poverty	Percent of children under age 18 in poverty		Poor mental	Average number of mentally unhealthy da
				health days	reported in past 30 days (age-adjusted)
Family and	Inadequate social	Percent of adults without social/emotional support		Low birthweight	Percent of live births with low birthweight
social support	support				2500 grams)
(5%)	Children in single-	Percent of children that live in household headed by	Length of life	Premature death	Years of potential life lost before age 75
	parent households	single parent	(50%)		100.000 population (age-adjusted)

IV. Collect Community Health Perspectives Ask your opinion. Your thoughts?

- 1) <u>Tomorrow</u>: What is occurring or might occur that would affect the "health of our community?"
- 2) <u>Today</u>: What are the <u>strengths</u> of our community that contribute to health?
- 3) <u>Today</u>: Are there healthcare services in your community / neighborhood that you feel <u>need to be improved and / or changed</u>?

Have We Forgotten Anything ?

A.Aging Services

- **B.Chronic Pain Management**
- c.Dental Care/Oral Health D.Developmental Disabilities
- E.Domestic Violence,
- F.Early Detection & Screening
- G.Environmental Health
- Q.Exercise
- н.Family Planning
- .Food Safety
- J.Health Care Coverage K.Health Education
- L.Home Health

N.Hospital Services o.Maternal, Infant & Child Health P.Nutrition R.Pharmacy Services

- s.Primary Health Care
- T.Public Health
- u.School Health

м.Ноѕрісе

- v.Social Services
- w.Specialty Medical Care Clinics x.Substance Abuse
- Y.Transportation
- z. Other



II. Methodology d) Community Profile (A Description of Community Served)

Cass County, Missouri Community Profile



Demographics

The population of Cass County was estimated to be 101,603 on July 1, 2015, and had a 2.1% change in population from April 1, 2010–July 1, 2015.¹ According to the United States Census Bureau, its county seat is Harrisonville. Cass County is part of the Kansas City, Missouri Metropolitan Statistical Area. The county has a total area of 702 square miles, of which 697 square miles is land and 5.7 square miles is water.² Cass County's population density is 144 persons per square mile and its industries providing employment are Professional, (scientific, management, administrative and waste management services) (26.3%) and Educational (health and social services) (15.2%).³

The major highway transportation is by Interstate 49, U.S. Route 71, Route 2, Route 7, Route 58 and Route 291.⁴

¹ http://www.census.gov/quickfacts/table/PST045215/29037 ² U.S. Census Bureaus ³ http://www.city-data.com/county/Cass_County-MO.html ⁴ U.S. Census Bureaus

	Cass Regional Medical Center - PSA												
	Detail Demographic Profile												
			Population			Households		HH	Per Capita				
Zip	Name	County	YR 2014	YR 2019	Chg.	YR 2014	YR 2019	Avg. Size	Income 14				
64012	Belton	CASS	27,781	28,266	1.7%	10,539	10,746	2.6	\$24,109				
64078	Peculiar	CASS	8,712	8,889	2.0%	3,217	3,297	2.7	\$29,240				
64080	Pleasant Hill	CASS	13,677	14,067	2.9%	5,054	5,212	2.7	\$27,260				
64083	Raymore	CASS	21,746	22,659	4.2%	7,983	8,327	2.7	\$30,030				
64701	Harrisonville	CASS	14,869	14,932	0.4%	5,659	5,693	2.6	\$22,870				
64725	Archie	CASS	2,173	2,259	4.0%	812	845	2.7	\$22,189				
64734	Cleveland	CASS	1,970	2,021	2.6%	747	769	2.6	\$32,538				
64746	Freeman	CASS	1,325	1,368	3.2%	506	524	2.6	\$28,379				
64747	Garden City	CASS	3,930	3,924	-0.2%	1,517	1,522	2.6	\$23,531				
Totals			96,183	98,385	20.9%	36,034	36,935	2.6	\$26,683				

			Population				YR 2014		Females
Zip	Name	County	YR 2014	Pop. 65+	Kids <18	Gen. Y	Males	Females	Age 20_35
64012	Belton	CASS	27,781	3,830	7,766	9,071	13,513	14,268	2,809
64078	Peculiar	CASS	8,712	1,113	2,338	2,658	4,341	4,371	756
64080	Pleasant Hill	CASS	13,677	1,947	3,803	4,163	6,743	6,934	1,211
64083	Raymore	CASS	21,746	3,181	6,326	6,687	10,487	11,259	1,817
64701	Harrisonville	CASS	14,869	2,470	3,942	4,492	7,203	7,666	1,322
64725	Archie	CASS	2,173	319	627	668	1,078	1,095	194
64734	Cleveland	CASS	1,970	358	447	460	989	981	117
64746	Freeman	CASS	1,325	217	309	359	676	649	110
64747	Garden City	CASS	3,930	592	1,064	1,170	1,987	1,943	317
Totals			96,183	14,027	26,622	29,728	47,017	49,166	8,653

			Population				Aver	HH	
Zip	Name	County	White	Black	Amer. Ind.	Hisp.	HH Inc. 14	YR 2014	HH \$50K+
64012	Belton	CASS	23,840	1,571	174	2,375	\$63,340	10,539	5,609
64078	Peculiar	CASS	8,239	180	44	242	\$79,133	3,217	2,199
64080	Pleasant Hill	CASS	13,082	106	79	424	\$73,572	5,054	3,125
64083	Raymore	CASS	18,994	1,739	108	813	\$81,502	7,983	5,543
64701	Harrisonville	CASS	14,148	162	99	380	\$59,272	5,659	2,706
64725	Archie	CASS	2,098	10	12	45	\$59,381	812	387
64734	Cleveland	CASS	1,894	15	11	37	\$85,810	747	529
64746	Freeman	CASS	1,278	10	4	19	\$74,313	506	325
64747	Garden City	CASS	3,800	21	34	71	\$60,957	1,517	744
Totals			87,373	3,814	565	4,406	\$70,809	36,034	21,167

Source: ERSA Demographics

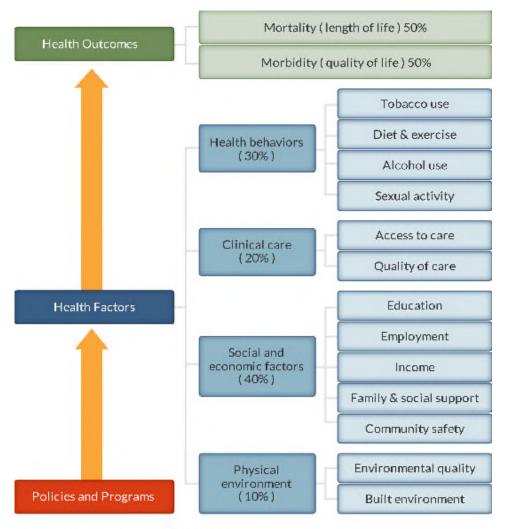
III. Community Health Status

[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 2016 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

#	MO Rank of 115 Counties (including St. Louis City)	Definitions	Cass Reg PSA	Trend	MO Rural Norm (26)	Cass County Rank to MO Rural Norm (26)		
1	Health Outcomes		7		51	1 of 26		
2	Mortality	Length of Life	14		50	3 of 26		
3	Morbidity	Quality of Life	8		51	2 of 26		
4	Health Factors		10		50	2 of 26		
5	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activitiy	10		48	2 of 26		
6	Clinical Care	Access to care / Quality of Care	30		63	4 of 26		
7	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	10		51	2 of 26		
8	Physical Environment	Environmental quality	60		39	21 of 26		
http	http://www.countyhealthrankings.org, released 2016							

Missouri Rural Norm (N=26) includes the following counties: Lewis, Marion, Monroe, Pike, Ralls, Shelby, Audrain, Bates, Benton, Henry, Johnson, Lafayette, Macon, Pettis, St. Clair, DeKalb, Sullivan, Ray, Caldwell, Daviess, Cass, Clinton, Andrew, Harrison, Phelps and Vernon.

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 1a Demographic Profile

Tab		Health Indicator	Cass Reg PSA	Trend	State of MO	MO Rural Norm (26)	Source
Tau			104	Tiena	mo	101111 (20)	Source
1a	а	Population estimates, July 1, 2015, (V2015)	101,603		6,083,672	22,763	People Quick Facts
1a		Population, percent change - April 1, 2010 (estimates base) to July 1, 2015, (V2015)			1.6%	-1.6%	People Quick Facts
1a	с	Population, Census, April 1, 2010	99,478		5,988,927	22,849	People Quick Facts
1a	d	Persons under 5 years, percent, July 1, 2014, (V2014)	6.0%		6.2%	5.7%	People Quick Facts
1a	e	Persons under 18 years, percent, July 1, 2014, (V2014)	25.0%		23.0%	22.7%	People Quick Facts
1a	f	Persons 65 years and over, percent, July 1, 2014, (V2014)	15.5%		15.4%	18.5%	People Quick Facts
1a	g	Female persons, percent, July 1, 2014, (V2014)	51.1%		50.9%	49.5%	People Quick Facts
1a	h	White alone, percent, July 1, 2014, (V2014) (a)	92.4%		83.5%	94.4%	People Quick Facts
1a		Black or African American alone, percent, July 1, 2014, (V2014) (a)	4.0%		11.8%	2.7%	People Quick Facts
1a	j	Hispanic or Latino, percent, July 1, 2014, (V2014) (b)	4.3%		4.0%	3.0%	People Quick Facts
1a	k	Foreign born persons, percent, 2010-2014	2.2%		3.9%	1.8%	People Quick Facts
1a		Language other than English spoken at home, percent of persons age 5 years+, 2010-2014	3.9%		6.1%	4.0%	People Quick Facts
1a		Living in same house 1 year ago, percent of persons age 1 year+, 2010-2014	86.9%		83.9%	85.4%	People Quick Facts

Tab 1b Demographic Profile

Tab		Health Indicator	Cass Reg PSA	Trend	State of MO	MO Rural Norm (26)	Source
1b	a	Veterans, 2010-2014	8,647		466,762	2,066	People Quick Facts
1b	b	Population per square mile, 2010	142.8		87.1	36.4	Geography Quick Facts
1b	c	Children in single-parent households, 2010-2014	26.0%		33.0%	28.2%	County Health Rankings
1b	d	Persons in poverty, percent	10.5%		15.5%	16.5%	People Quick Facts
1b	e	Limited access to healthy foods, 2010	3.0%		6.0%	6.8%	County Health Rankings
1b	f	Seniors, low access to store (%), 2010	4.2%		NA		U.S. Department of Agriculture - Food Environment Atlas
1b		Registered Voters in Missouri, 2012	73,160		4,190,936	15,503	Missouri Secretary of State

Tab 2 Economic / Business Profile

Tab		Health Indicator	Cass Reg PSA	Trend	State of MO	MO Rural Norm (26)	Source
		Per capita income in past 12 months (in 2014 dollars), 2010- 2014	\$28,013		\$26,006	\$21,403	People Quick Facts
2	b	Housing units, July 1, 2014, (V2014)	40,488		2,735,742	10,243	People Quick Facts
2	c	Persons per household, 2010-2014	2.7		2.5	2.5	People Quick Facts
2	d	Severe housing problems, 2008-2012	11.0%		15.0%	11.6%	County Health Rankings
2	e	Total retail sales per capita, 2012	\$9,810		\$15,036	\$10,104	Business Quick Facts
2	f	All firms, 2012	7,025		491,606	1,818	Business Quick Facts
2	g	Unemployment, 2016	5.7%		6.1%	6.0%	County Health Rankings
2	h	Food Insecurity Rate, 2013	12.8%		16.8%	15.1%	Feeding America
2	i	Grocery stores/1,000 pop, 2012	0.1		NA	0.2	U.S. Department of Agriculture - Food Environment Atlas
2	j	Low income & low access to store (%), 2010	7.9%		NA	7.2%	U.S. Department of Agriculture - Food Environment Atlas
2	k	SNAP participants (% eligible pop), 2010*	89.0%		NA	89.0%	U.S. Department of Agriculture - Food Environment Atlas
2		Mean travel time to work (minutes), workers age 16 years+, 2010-2014	27.6		23.1	23.5	People Quick Facts
		Long commute - driving alone, 2010-2014	47.0%		30.0%	33.1%	County Health Rankings

Tab 3 Educational Profile

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

Tab		Health Indicator	Cass Reg PSA	Trend	State of MO	MO Rural Norm (26)	
3	a	Students Eligible for Free Lunch (%), 2010	26.4%		NA		U.S. Department of Agriculture - Food Environment Atlas
3		High school graduate or higher, percent of persons age 25 years+, 2010-2014	92.2%		88.0%	86.5%	People Quick Facts
3		Bachelor's degree or higher, percent of persons age 25 years+, 2010-2014	24.0%		26.7%	15.8%	People Quick Facts

Tab 3 Educational Profile

#	Health Indictors	Archie R-V School District	Belton 124 School District	Drexel R-IV School District	East Lynne 40 School District	Harrisonville R-IX School District	Midway R-I School District	Pleasant Hill R-III School District	Raymore- Peculiar R-II School District	Sherwood Cass R-VIII School District	Strasburg C-3 School District
1	Total Public School Nurses	1	NA	NA	NA	NA	NA	NA	NA	NA	NA
	School Nurse Part of IEP										
2	Team	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
3	Active School Wellness Plan	NA	YES	NA	NA	YES	NA	NA	NA	NA	NA
	VISION: # Screened / Referred										
4	to Prof / Seen by Professional	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
	HEARING: # Screened /										
	Referred to Prof / Seen by				NO						
5	Professional	NA	NA	NA	SCREENING	NA	NA	NA	NA	NA	NA
	ORAL HEALTH: # Screened /						NO				NO
	Referred to Prof / Seen by		NO		NO		SCREENING	NO	NO		SCREENING
6	Professional	NA	SCREENING	NA	SCREENING	NA	ON SITE	SCREENING	SCREENING	NA	ON SITE
	SCOLIOSIS: # Screened /										
	Referred to Prof / Seen by		NO		NO	NO		NO	NO		NO
7	Professional	NA	SCREENING	NA	SCREENING	SCREENING	NA	SCREENING	SCREENING	NA	SCREENING
	Students Served with No										
	Identified Chronic Health										
8	Concerns	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
	School has Suicide										
9	Prevention Program	NO	YES	YES	NO	YES	NO	YES	YES	YES	NO
	Compliance on Required										
10	Vaccinations	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

TAB 4 Maternal / Infant Health Profile

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

Tab		Health Indicator	Cass	Trend	State of MO	MO Rural Norm (26)	Source
4	a	Care Began First Trimester, Number of Events, 2013	900.0		53,335	195.8	Missouri Department of Health and Senior Services
4		Preterm Births (less than 37 Weeks Gestation), Number of Events, 2008-2012	659.0		47,443	153.0	Missouri Department of Health and Senior Services
4	c	Low Birth Weight, Number of Events, 2008-2012	427.0		31,138	100.7	Missouri Department of Health and Senior Services
4	d	Infants Participating in WIC, Number of Events, 2012	587.0		43,767	167.1	Missouri Department of Health and Senior Services
4	e	Teen Pregnancy Rate Under Age 18, Number of Events, 2009- 2013	162.0		11,913	38.7	Missouri Department of Health and Senior Services
4	f	Out-of-Wedlock Births, Number of Events, 2009-2013	1,989.0		154,226	505.0	Missouri Department of Health and Senior Services
4	g	Mother Smoked During Pregnancy, Number of Events, 2013	217.0		13,155	59.2	Missouri Department of Health and Senior Services

TAB 4 Maternal / Infant Health Profile

Tab		Missouri Department of Health and Senior Services, Vital Statistics	Cass Reg PSA	Trend	State of MO
4	а	Total Live Births, Number of Events, 2010	1,265		76,718
4	b	Total Live Births, Number of Events, 2011	1,197		76,069
4	С	Total Live Births, Number of Events, 2012	1,154		75,400
4	d	Total Live Births, Number of Events, 2013	1,231		75,244
4	е	Total Live Births, Number of Events, 2014	1,178		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	Cass Reg PSA	Trend	State of MO	MO Rural Norm (26)	Source
5	a	Ratio of population to primary care physicians, 2013	4,030:1		1.420:1	3.210:1	County Health Rankings
5		Preventable hospital stays per 1,000, 2013	73.0		59.0	70.5	County Health Rankings
5		Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)	71.0%		71.0%		CMS Hospital Compare, 7/1/2014-6/30/2015
5		Patients Who Reported Yes, They Would Definitely Recommend the Hospital	66.0%		70.0%		CMS Hospital Compare, 7/1/2014-6/30/2015
5		Average Time Patients Spent in the Emergency Department Before They Were Seen by a Healthcare Professional (minutes)	11.0		20.0		CMS Hospital Compare, 7/1/2014-6/30/2015

TAB 5 Hospitalization / Providers Profile

Listed below is Patient Origin by Region – Inpatient and Market Penetration by Service Type – Outpatient data collected by the Missouri Hospital Association (MHA) through the Hospital Industry Data Institute (HIDI).

		Cas	ss County,		
#	MHA PO103	FFY13	FFY14	FFY15	Trend
1	Total Discharges	11,822	12,010	12,550	
2	Total IP Discharges-Age 0-17 Ped	513	515	470	
3	Total IP Discharges-Age 18-44	1,123	1,173	1,192	
4	Total IP Discharges-Age 45-64	2,555	2,719	2,878	
5	Total IP Discharges-Age 65-74	1,663	1,827	2,013	
6	Total IP Discharges-Age 75+	2,556	2,572	2,796	
7	Psychiatric	1,088	925	949	
8	Obstetric	1,200	1,191	1,160	
9	Surgical %	4.8%	5.7%	4.7%	
		(CRMC Only	1	
#	MHA PO103	FFY13	FFY14	FFY15	Trend
1	Total Discharges	1,229	1,117	1,004	
2	Total IP Discharges-Age 0-17 Ped	4	6	5	
3	Total IP Discharges-Age 18-44	107	117	73	
4	Total IP Discharges-Age 45-64	301	315	262	
5	Total IP Discharges-Age 65-74	238	228	217	
6	Total IP Discharges-Age 75+	470	394	383	
7	Psychiatric	106	55	60	
8	Obstetric	0	0	0	
#	MHA TOT223E - BCMH	FFY13	FFY14	FFY15	Trend
1	Emergency Market Share	26.9%	25.5%	24.6%	
2	Surgery Market Share	8.1%	7.9%	8.0%	
3	Observation Market Share	30.1%	28.9%	30.9%	

TAB 6 Behavioral Health Profile

Behavioral healthcare provides another important indicator of community health status.

Tab		Health Indicator	Cass Reg PSA	Trend	State of MO	MO Rural Norm (26)	Source
6	a	Depression: Medicare Population, 2012	16.1%		19.7%		Centers for Medicare and Medicaid Services
6	b	Alcohol-impaired driving deaths, 2010-2014	38.0%		33.0%	29.7%	County Health Rankings
6	c	Poor mental health days, 2014	3.6		3.7	3.8	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.	Cas	Cass Regional PSA 1			U U			0		Trend	Source
		Diagnosis Category	2015	2014	2013								
6	a	Adjustment Disorder, Number of Events	35	50	57		Missouri Department of Mental Health						
6	b	Anxiety Disorder, Number of Events	283	277	273		Missouri Department of Mental Health						
6	с	Dementia, Number of Events	NA	NA	0		Missouri Department of Mental Health						
6	d	Developmental Disorder, Number of Events	8	13	10		Missouri Department of Mental Health						
6	е	Impulse Control Disorder, Number of Events	125	138	148		Missouri Department of Mental Health						
6	f	Mood Disorder, Number of Events	350	374	410		Missouri Department of Mental Health						
6	g	Personality Disorder, Number of Events	47	41	40		Missouri Department of Mental Health						
6	h	Psychotic Disorder, Number of Events	90	88	93		Missouri Department of Mental Health						
6	i	Sexual Disorder, Number of Events	NA	NA	NA		Missouri Department of Mental Health						

TAB 7a 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	Cass Reg PSA	Trend	State of MO	MO Rural Norm (26)	Source
7a	а	Adult obesity, 2012	31.0%		31.0%	33.1%	County Health Rankings
7a	b	Adult smoking, 2014	18.0%		21.0%	20.3%	County Health Rankings
7a	с	Excessive drinking, 2014	17.0%		16.0%	15.4%	County Health Rankings
7a	d	Physical inactivity, 2012	28.0%		26.0%	30.3%	County Health Rankings
7a	е	Poor physical health days, 2014	4.6		4.1	4.1	County Health Rankings
7a	f	Sexually transmitted infections per 100,000, 2013	292.9		453.8	260.9	County Health Rankings

TAB 7b Risk Indicators / Factors Profile

			Cass Reg		State of	MO Rural	
Tab		Health Indicator	PSA	Trend	MO	Norm (26)	Source
7b	a	Hypertension: Medicare Population, 2012	52.9%		54.8%	53.7%	Centers for Medicare and Medicaid Services
7b	b	Hyperlipidemia: Medicare Population, 2012	42.9%		42.3%	39.9%	Centers for Medicare and Medicaid Services
7b	с	Heart Failure: Medicare Population, 2012	12.0%		13.7%	14.1%	Centers for Medicare and Medicaid Services
7b	d	Chronic Kidney Disease: Medicare Population, 2012	15.8%		16.4%	13.9%	Centers for Medicare and Medicaid Services
7b	e	COPD: Medicare Population, 2012	11.9%		13.2%	13.9%	Centers for Medicare and Medicaid Services
7b	f	Atrial Fibrillation: Medicare Population, 2012	9.9%		8.1%	8.7%	Centers for Medicare and Medicaid Services
7b	g	Cancer: Medicare Population, 2012	7.4%		7.8%	7.4%	Centers for Medicare and Medicaid Services
7b	h	Osteoporosis: Medicare Population, 2012	5.4%		5.9%	4.9%	Centers for Medicare and Medicaid Services
7b	i	Asthma: Medicare Population, 2012	4.1%		4.8%	3.8%	Centers for Medicare and Medicaid Services
7b	j	Stroke: Medicare Population, 2012	3.4%		3.6%	3.3%	Centers for Medicare and Medicaid Services

TAB 8 Uninsured Profile

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

Tab	Health Indicator	Cass Reg PSA	Trend	State of MO	MO Rural Norm (26)	Source
8 8	a Uninsured, 2013	12.0%		15.0%	17.0%	County Health Rankings

	Source Hospital Internal Records								
	Cass Regional Medical Center	YR 2013	YR 2014	YR 2015	Trend				
1	Bad Debt	\$11,605,271	\$14,698,333	\$14,599,800					
2	Charity Care	\$1,060,888	\$1,043,467	\$1,562,762					

TAB 9 Mortality Profile

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

Tab		Health Indicator	Cass Reg PSA	Trend	State of MO	MO Rural Norm (26)	Source
9	a	Life Expectancy for Males, 2004-2012	75.9		74.6		Missouri Department of Health and Senior Services
9	b	Life Expectancy for Females, 2004-2012	80.1		79.7		Missouri Department of Health and Senior Services
9	c	Heart Disease Mortality, Number of Events, 2014	187.0		14,210		Missouri Department of Health and Senior Services
9		Chronic Lower Respiratory Disease Mortality, Number of Events, 2014	72.0		3,739		Missouri Department of Health and Senior Services
9	e	Suicides, Number of Events, 2014	19.0		1,004		Missouri Department of Health and Senior Services

#	Causes of Death by County of Residence, Missouri Department of Health and Senior Services, 2014	Cass Reg PSA	%	Trend	State of MO	%
	All Causes	893	100.0%		58,141	100.0%
1	1 Cancer, Number of Events		25.3%	2.9%	13,009	22.4%
2	2 Heart disease, Number of Events		20.9%	-3.5%	14,210	24.4%
3	Other diseases (residual), Number of Events	136	15.2%	3.2%	6,983	12.0%
4	4 Chronic lower respiratory diseases, Number of Events		8.1%	1.6%	3,739	6.4%
5	Cerebrovascular disease (Stroke), Number of Events	45	5.0%	-0.1%	3,010	5.2%
6	Alzheimer's disease, Number of Events	31	3.5%	0.0%	2,047	3.5%
7	All other accidents and adverse effects, Number of Events	28	3.1%	-1.0%	2,377	4.1%
8	Suicide, Number of Events	19	2.1%	0.4%	1,004	1.7%
9	Diabetes, Number of Events	18	2.0%	-0.4%	1,413	2.4%
	Kidney disease (nephritis/nephrotic syndrome/nephrosis),					
10	Number of Events	18	2.0%	-0.5%	1,446	2.5%

TAB 10 Preventive Quality Measures Profile

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

Tab		Health Indicator	Cass Reg PSA	Trend	State of MO	MO Rural Norm (26)	Source
10	а	Access to exercise opportunities, 2014	75.0%		76.0%	46.4%	County Health Rankings
10		2-Year-Old Coverage of Individual Vaccines and Selected Vaccination Series, 2012	NA		NA	NA	NA
-		· ·					
10	с	Diabetic monitoring, 2013	85.0%		86.0%	84.4%	County Health Rankings
10	d	Mammography screening, 2013	64.0%		62.0%	57.0%	County Health Rankings
10	e	Percent Annual Check-Up Visit with PCP			NA	NA	TBD
10	f	Percent Annual Check-Up Visit with Dentist			NA	NA	TBD
10	g	Percent Annual Check-Up Visit with Eye Doctor			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

Cass Regional Medical Center (PSA) - Harrisonville, MO N=118

1. Three years ago, Cass Regional Medical Center completed a Community Health Needs Assessment (CHNA). This assessment identified a number of health needs for our community. Today, we are updating this assessment and would like to know how you rate the "Overall Quality" of healthcare delivery in our community?

Answer Options	Very Good	Good	Fair	Poor	Very Poor	Valid N
Cass Regional Medical Center PSA N=118	17	72	26	3	0	118
Top 2 Boxes (Very Good / Good)	75.4	1%	22.0%	2.5%	0.0%	
Option C Stakeholders Round #2	1,044	2,216	865	125	26	4,276
Top 2 Boxes (Very Good / Good)	76.2	2%	20.2%	2.9%	0.6%	

Question 8—Requested Discussion Items for Town Hall Agenda

Cass Regional Medical Center (PSA) - Harrisonville, MO N=118							
8. Are there any other health needs from	Option C						
the list below that need to be discussed	Stakeholders	Cass Reg	TREND				
at our upcoming CHNA Town Hall	Round #2	PSA N=118	IREND				
meeting?	Bottom 2 Boxes						
Abuse / Violence	4.8%	4.0%					
Alcohol	4.9%	6.6%					
Cancer	4.9%	3.1%					
Diabetes	5.0%	4.5%					
Drugs / Substance Abuse	8.3%	11.1%					
Family Planning	2.8%	3.8%					
Heart Disease	3.7%	2.4%					
Lead Exposure	0.7%	0.5%					
Mental Illness	8.8%	12.0%					
Nutrition	5.0%	2.4%					
Obesity	7.9%	8.5%					
Ozone	0.8%	0.0%					
Physical Exercise	5.6%	2.6%					
Poverty	5.4%	7.5%					
Respiratory Disease	2.2%	1.4%					
Sexual Transmitted Diseases	2.3%	1.7%					
Suicide	5.1%	6.6%					
Teen Pregnancy	3.6%	3.3%					
Tobacco Use	3.9%	3.1%					
Vaccinations	3.8%	3.1%					
Water Quality	3.2%	2.6%					
Wellness	5.9%	6.8%					
Other (please specify)	1.5%	2.6%					
TOTAL	100.0%	100.0%					

Cass Regional Medical Center (PSA) - Harrisonville, MO N=118							
5. How would Cass Regional Medical Center primary service area residents rate each of the following services?	Option C Stakeholders Round #2 Bottom 2 Boxes	Cass Reg PSA N=118	TREND				
Ambulance Services	3.3%	4.8%					
Child Care	13.6%	15.9%					
Chiropractors	5.1%	9.0%					
Dentists	11.6%	11.9%					
Emergency Room	7.9%	7.0%					
Eye Doctor / Optometrist	6.3%	2.7%					
Family Planning Services	15.7%	28.4%					
Home Health	9.5%	10.1%					
Hospice	5.9%	6.0%					
Inpatient Services	3.7%	3.7%					
Mental Health Services	33.4%	29.5%					
Nursing Home	11.5%	14.4%					
Outpatient Services	3.0%	3.7%					
Pharmacy	2.3%	0.9%					
Primary Care	4.1%	3.6%					
Public Health Department	4.4%	6.8%					
School Nurse	6.2%	3.4%					
Specialists	7.8%	5.6%					

Questions 5-6—Rating of Healthcare Services

Question 7—Healthcare Services Outside of PSA

Cass Regional Medical Center (PSA) - Harrisonville, MO N=118							
7. Throughout the past two years, did you or	Option C	Cass					
someone you know receive healthcare services	Stakeholders	Reg	TREND				
outside of the Cass Regional Medical	Round #2	PSA	IREND				
Center primary service area?	Bottom 2 Boxes	N=118					
Yes	77.9%	70.6%					
Νο	15.0%	21.8%					
Don't know	7.1%	7.6%					
TOTALS	100.0%	100.0%					

IV. Inventory of Community Health Resources

[VVV Consultants LLC]

	Inventory of Healthcare Services - Cas	s Coun	ty, MO	
Cat	Healthcare Services Offered in County: Yes / No	Hospital	Health Dept	Other
Clinic	Primary Care	yes	yes	yes
Hosp	Alzheimer Center	no	no	yes
Hosp	Ambulatory Surgery Centers	yes	no	no
Hosp	Arthritis Treatment Center	yes	no	no
Hosp	Bariatric / Weight Control Services	yes	no	yes
Hosp	Birthing / LDR / LDRP Room	no	no	no
Hosp	Breast Cancer Services	yes	no	no
Hosp	Burn Care	no	no	no
Hosp	Cardiac Rehabilitation	yes	no	no
Hosp	Cardiac Surgery	no	no	no
Hosp	Cardiology Services	yes	no	no
Hosp	Case Management	yes	no	no
Hosp	Chaplaincy / Pastoral Care Services	yes	no	yes
Hosp	Chemotherapy	yes	no	no
Hosp	Colonoscopy	yes	no	no
Hosp	Crisis Prevention CT Scanner	yes	no	yes
Hosp Hosp	Diagnostic Radioisotope Facility	yes	no	no
Hosp	Diagnostic Radioisotope Facility	yes yes	no no	no no
Hosp	Electron Beam Computed Tomography (EBCT)	no	no	no
Hosp	Enrollment Assistance Services	yes	no	yes
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)	no	no	no
Hosp	Fertility Clinic	no	no	no
Hosp	Full Field Digital Mammography (FFDM)	yes	no	no
Hosp	Genetic Testing / Counseling	yes	no	no
Hosp	Geriatric Services	yes	no	yes
Hosp	Heart Services	yes	no	no
Hosp	Hemodialysis	no	no	yes
Hosp	HIV / AIDS Services	yes	no	no
Hosp	Image-Guided Radiation Therapy (IGRT)	no	no	no
Hosp	Inpatient Acute Care - Hospital Services	yes	no	no
Hosp	Intensity-Modulated Radiation Therapy (IMRT) 161	no	no	no
Hosp	Intensive Care Unit	yes	no	no
Hosp	Intermediate Care Unit	no	no	no
Hosp	Interventional Cardiac Catheterization	yes	no	no
Hosp	Isolation Room	yes	no	no
Hosp	Kidney Services	yes	no	yes
Hosp	Liver Services	no	no	no
Hosp	Lung Services	yes	no	no
Hosp	Magnetic Resonance Imaging (MRI)	yes	no	no
Hosp	Mammograms	yes	no	yes
Hosp	Mobile Health Services Multislice Spiral Computed Tomography (<64 Slice CT)	no	no	no
Hosp Hosp	Multislice Spiral Computed Tomography (<64 Slice CT) Multislice Spiral Computed Tomography (64+ Slice CT)	yes yes	no no	no no
Hosp	Neonatal Services	no	no	no
Hosp	Neurological Services	yes	no	yes
Hosp	Obstetrics Services	yes	no	yes
Hosp	Occupational Health Services	yes	no	yes
Hosp	Oncology Services	yes	no	no
Hosp	Orthopedic Services	yes	no	yes
Hosp	Outpatient Surgery	yes	no	no
Hosp	Pain Management	yes	no	yes
Hosp	Palliative Care Program	yes	no	yes
Hosp	Pediatric Services	yes	no	yes
Hosp	Physical Rehabilitation	yes	no	yes
Hosp	Positron Emission Tomography (PET)	yes	no	no
Hosp	Positron Emission Tomography / CT (PET / CT)	yes	no	no

	Inventory of Healthcare Services - Cas	s Coun	ty, MO	
Cat	Healthcare Services Offered in County: Yes / No	Hospital	Health Dept	Other
Hosp	Psychiatric Services	yes	no	yes
Hosp	Radiology, Diagnostic	yes	no	yes
Hosp	Radiology, Therapeutic	yes	no	no
Hosp	Reproductive Health	yes	no	no
Hosp	Robotic Surgery	no	no	no
Hosp	Shaped Beam Radiation System 161	no	no	no
Hosp	Single Photon Emission Computerized Tomography	no	no	no
Hosp	Sleep Center	yes	no	no
Hosp	Social Work Services	yes	no	yes
Hosp	Sports Medicine	yes	no	yes
Hosp	Stereotactic Radiosurgery	no	no	no
Hosp	Swing Bed Services	yes	no	yes
	Transplant Services	no	no	no
Hosp	Trauma Center - Level III	yes	no	no
Hosp	Ultrasound	yes	no	yes
	Women's Health Services	yes	no	yes
Hosp	Wound Care Services	yes	no	no
SR	Adult Day Care Program	no	no	yes
SR	Assisted Living	no	no	yes
SR	Home Health Services	no	no	yes
SR	Hospice	no	no	yes
SR	Long-Term Care	no	no	yes
SR	Nursing Home Services	no	no	yes
SR	Retirement Housing	no	no	yes
SR	Skilled Nursing Care	yes	no	yes
ER	Emergency Services	yes	no	no
	Urgent Care Center	no	no	yes
ER	Ambulance Services	no	no	yes
SERV	Alcoholism-Drug Abuse	no	no	yes
	Blood Donor Center	no	no	no
	Chiropractic Services	no	no	yes
	Complementary Medicine Services	no	no	yes
	Dental Services	no	no	yes
	Fitness Center	no	no	yes
	Health Education Classes	yes	yes	yes
	Health Fair	yes	no	yes
	Health Information Center	yes	no	yes
	Health Screenings	yes	yes	yes
	Meals-on-Wheels	no	no	yes
SERV	Nutrition Programs	yes	yes	yes
SERV	Patient Education Center	yes	no	no
	Support Groups	yes	no	yes
SERV	Teen Outreach Services	no	no	yes
SERV	Tobacco Treatment / Cessation Program	yes	no	yes
SERV	Transportation to Health Facilities	no	no	yes
SERV	Wellness Program	yes	yes	yes

Providers Delivering Care								
Cass Regional Medical Center - Primary Service Area								
		FTE Physicians		FTE Allied Staff				
FTE Providers Working in County	County Based	County Based		PA / NP @				
	@ CRMC	@ Belton	Visting DRs*	CRMC				
Primary Care:								
Family Practice	9.0	9.0	0.0	14.0				
Internal Medicine / Geriatrics	1.0	4.0	0.0	1.0				
Obstetrics / Gynecology Pediatrics	0.2	0.3	0.1	0.4				
Pediatrics	0.0	0.0	3.0					
Medicine Specialists:								
Allergy / Immunology	0.0	0.1	0.0					
Cardiology	1.0	1.0	0.0	1.0				
Dermatology	0.6	0.0	0.0					
Endocrinology	0.1	0.1	0.0					
Gastroenterology	0.0	0.5	0.0					
Oncology / Radiology	0.4	0.4	0.0	1.0				
Infectious Diseases	0.0	0.0	0.0					
Nephrology	0.4	0.0	0.0					
Neurology	4.0	0.3	0.1					
Psychiatry	1.0	0.0	0.2					
Pulmonary	0.4	0.4	0.0					
Rheumatology	0.4	0.0	0.0					
Surgery Specialists:								
General Surgery / Colon / Oral	3.0	1.5	0.0					
Neurosurgery	0.0	0.0	0.0					
Ophthalmology	0.4	0.0	0.1					
Orthopedics	1.0	3.0	0.5	1.0				
Otolaryngology (ENT)	1.0	2.0	3.1					
Plastic / Reconstructive	0.0	1.0	2.1					
Thoracic / Cardiovascular / Vascular	0.0	0.0	0.0					
Urology	0.2	1.0	0.1					
Hospital Based:								
Anesthesia / Pain	0.9	1.2	0.0	4.0				
Emergency	5.2	8.0	0.0	2.0				
Urgent Care	0.0	0.0	2.0	2.0				
Radiology	1.0	1.0	0.0	2.0				
Pathology	1.0	1.0	0.0					
Hospitalist	3.0	3.0	0.0					
Neonatal / Perinatal	0.0	0.0	0.0					
Physical Medicine / Rehab	0.0	0.0	0.0					
Wound Care	0.6	0.0	0.0					
Podiatry	0.4	0.2	0.0					
TOTALS	36.2	39.0	11.3	26.4				

Providers Delivering Care

*Total FTE Specialists serving community who office outside Cass County.

Visi	ting Specialists	to Cass R	egional Medi	cal Center	
Specialty	Physician Name or Group	Specialist Office Location	At Hospital	At MOB	FTE
Audiology	Angela Wright	Harrisonville, Mo		Fridays	0.2
Cardiology	Midwest Cardiology	Harrisonville, Mo		5 Days per Week	1.0
Dermatology	Viseslav Tonkovic, MD	Harrisonville, Mo	2nd and 4th Friday Morning		0.05
Dermatology	Marija Tonkovic, MD	Harrisonville, Mo	2nd and 4th Wednesday		0.1
Dermatology	Marija Tonkovic, MD	Harrisonville, Mo	Mondays		0.2
Dermatology	Viseslav Tonkovic, MD	Harrisonville, Mo	Tuesday Afternoons		0.1
EMG	Michael Schwartzman, MD	Harrisonville, Mo	Fridays 2X per Month		0.1
Endocrinology	Madhavi Yarlagadda, MD	Harrisonville, Mo		2nd and 3rd Thursdays	0.1
Eye	Christopher Banning, MD	Harrisonville, Mo	1st and 3rd Wednesday		0.1
General Surgery	Jack Hudkins, MD, Michael Kohlman, MD & Walter Costner, MD	Harrisonville, Mo	Daily	Daily	3.0
Gynecology	Bradley Sullivan, MD	Harrisonville, Mo		3rd Tuesday Mornings	
Gynecology	Megan Sneed, MD	Harrisonville, Mo		Wednesdays	0.2
Infusion Clinic	Cass Regional Medical Center	Harrisonville, Mo	5 Days per Week		1.0
Nephrology	Robert Golder, MD & Subramanian Sivarajan, MD	Harrisonville, Mo	5 Days per Week	Mondays	0.2
Neurology	Susan Crandell, DO		Fridays 2X per Month		0.05
Neurology	Michael Schwartzman, MD	Harrisonville, Mo	Wednesdays		0.2
Neurology	lftekhar Ahmed. MD	Harrisonville, Mo	-	Wednesday Afternoons	0.1
Oncology	William Stephenson, MD	Harrisonville, Mo	Mondays and Thursdays	-	0.4
				Monday, Tuesday,	• •
Otolaryngology Orthopedics	Mary Luce, MD Ken Petersen. DO	Harrisonville, Mo	Monday-Wednesday and Fridays	Thursday and Fridays	0.8
Orthopedic	Danny Carroll, MD, James Queenan, DO	Harrisonville, Mo Harrisonville, Mo	Thursday Mornings	Thursdays	0.3
Pain Mgmt	James Johnson, DO	Harrisonville, Mo	Thursday	-	0.2
Pain Mgmt	Richard Morgan, MD	Harrisonville, Mo	Tuesday Afternoons		0.2
Podiatry	William Cruce DPM	Harrisonville, Mo	Mondays and Wednesdays		0.4
Pulmonary	Kansas City Pulmonary Practice	Harrisonville, Mo		Wednesdays	0.2
Rheumatology	Kevin Latinis, MD	Harrisonville, Mo	Wednesdays and Thursdavs		0.4
Urology	Billy Perry, MD	Harrisonville, Mo	Tuesday Mornings		0.1
Urology	Steven Nash, MD	Harrisonville, Mo		Thursday Mornings	0.1
Vein	Bangalore Deepak, MD	Harrisonville, Mo		1st Thursday Afternoons	0.025
Wound	William Cruce DPM	Harrisonville, Mo	Wednesday Mornings		0.1
Wound	Cass Regional Medical Center	Harrisonville, Mo	5 Days per Week		1.0
Wound	Michael Kohlman, MD	Harrisonville, Mo	Thursday Afternoons		0.1
Wound	Dale Chism	Harrisonville, Mo	Tuesday Afternoons		0.1
Wound	Walter Costner	Harrisonville, Mo	Thursday Mornings		0.1
Wound	Craig Ostrander	Harrisonville, Mo	Wednesday Mornings		0.1
Wound	Shaun Holden, MD	Harrisonville, Mo	Tuesday Mornings		0.1

Cass County, Missouri Area Healthcare Services

Emergency Numbers

Police/Sheriff	911
Fire	911
Ambulance	911

Non-Emergency Numbers

Bates County Sheriff816-380-5200Harrisonville Emergency Services816-380-8925

Adoption / Crisis Pregnancy

Aaron's House 816-380-4604

Birthright 444-7090 800-550-4900 (24 hr line) www.birthright.org

Catholic Charities 816-221-4377 Toll Free: 1-800-875-4377 www.catholiccharities-kcsj.org

Crisis Pregnancy Center 763-2020

Family Support Division / Children's Services (formerly DFS) 816-380-3597 www.dss.mo.gov

LDS Family Services 800-537-2229 816-461-5512 www.itsaboutlove.org

Life Choice Center for Women 887-5100 www.lifechoicecenter.org

Mother's Refuge (pregnant and homeless under age 20) 356-4797 ext. 2 www.mothersrefuge.org

The LIGHT House 816-361-2233 www.lighthousekc.org

Adult Daycare / Respite Care

Adult Care Health Center of Greater Kansas City 816-331-6565 www.adultcarekc.com

Birdella Jackson Senior Care 816-763-2484

Camden Health Center 816- 380-2622

Evergreen Adult Day Care 246-7007

Visiting Angels (senior homecare) 800-365-4189 www.visitingangels.com

West Central Missouri Community Action Agency 888-569-9936 www.wcmcaa.org

Alcohol / Drug Treatment (Substance Abuse)

Beaty Counseling Services 816-478-7766

Celebrate Recovery Church on the Rock 816-380-2428

Cass County Psychological Services (C-star program, age 18 and over) 816-380-4010 www.cmhconline.com

Gay Killian 213-5892

Life Issues 816-380-3003 free, drug court-approved drug addiction recovery program

Greater Kansas City Healthcare Directory www.healthkc.com

National Council on Alcohol and Drug Dependence (assessment and referral services) 361-5900 www.recoverycentral.org

Pathways Community Behavioral Healthcare Harrisonville (380-5167) Raymore (318-4430) www.pathwaysonline.org

Probation and Parole Office (for referrals) 322-1166

Child Abuse Reporting / Prevention

Child Abuse / Neglect Hotline 800-392-3738 http://www.dss.mo.gov/cd/can.htm Metropolitan Organization to Counter Sexual Assault (therapy for sexually-abused children) (MO) 816-531-0233 (KS) 913-642-0233 www.mocsa.org

National Center for Missing and Exploited Children 800-843-5678 913-469-5437 www.missingkids.com

Children's / Family Medical

Children's Mercy Hospital KCMO (234-3000) OPKS (913-696-8000) www.childrensmercy.org

Family Support Division / Children's Services (formerly DFS) 380-3597 http://dss.mo.gov/fsd/

Greater Kansas City Healthcare Directory www.healthkc.com

InfantSee (eye exams for infants 6-12 months @ participating providers) 888-396-3937 www.infantsee.org

Missouri Health Insurance Pool 1-800-821-2231

Shriners of North America 800-237-5055 www.shriners.com/hospitals

Child Support

Division of Child Support Enforcement 866-313-9960

Christmas Assistance

Angels on Call 816-810-0567 located in Belton (emphasis on teens and senior citizens)

Fishes and Loaves Food Pantry 816-322-1177 (must be Cass county resident) www.fishesandloavesfoodpantry.com Heart-n-Hand Ministries 816-322-1133 (Belton, Raymore, Peculiar residents only – will also provide Thanksgiving assistance) www.heartnhand.org

The Cass County Toy Shop 816-419-1254 (calls accepted in November)

West Central Missouri Community Action Agency Belton (816-322-0502) Harrisonville (816-380-6690) www.wcmcaa.org

Clothing Assistance

Angels on Call 816-810-0567

First Presbyterian Church of Pleasant Hill Clothes Closet 816-540-6179 www.1stpresbychurch.net

Fishes and Loaves, Raymore 816-322-1177 (must be Cass County resident) www.fishesandloavesfoodpantry.com

Good Shepherd Thrift Store (Garden City) 816-862-6100

Harrisonville Ministerial Alliance Thrift Store 816-884-2279

Heart-n-Hand Ministries Thrift Store 816-322-1133

Cass County residents www.heartnhand.org

Pleasant Hill Lay Clergy Thrift Store 816-987-3600 www.tlcphill.com

Dental Care

Cass County Dental Clinic 816- 322-7600 www.casscountydentalclinic.org (ages 1 through 20, accepts Medicaid; sliding scale fee for uninsured and underinsured) Elks Mobile Dental Program 800-876-1486 http://www.elksmobiledental.org/

Greater Kansas City Dental Directory www.dentalkc.com

Community Assistance Council 816-763-3277 (dental emergencies only) www.cackc.org

Kansas City Free Clinic (adults w/o insurance only) 816-777-2790 www.kcfree.org

The following dental programs accept Medicaid/MC+ when authorized:

Dr. Irene Broyles with Cass County Smiles 209 S Washington Raymore, MO 64083 816-331-3456

Indian Springs Dental Clinic 913-287-7977

Rogers Dental (Independence) 816-254-3382

Seton Center 816-231-3955

Swope Parkway Health Center 816-923-5800 www.swopehealth.org

Truman Medical Center, Lakewood 816-404-7000 www.trumed.org/lakewood

UMKC Dental School 816-235-2111 www.dentistry.umkc.edu

Disability Services – Adults

CASSCO Area Workshop (age 18 and over) 816-380-7359

Missouri Department of Health and Senior Services 816-350-54338 http://health.mo.gov/seniors/index.php Missouri Protection and Advocacy Services 800-393-8667 www.moadvocacy.org

Preferred Employment Services 816-884-3008 811 Westchester Ave., Harrisonville (Individualized employment services for persons with disabilities) www.pfh.org

Social Security Administration 800-772-1213 www.socialsecurity.gov

The Whole Person 816-561-0304 800-878-3037 www.thewholeperson.org

Vocational Rehab 816-325-1200 www.dese.mo.gov

Disability Services – Children

CASSCO Area Workshop (case management/referral services) 816- 380-7359

Children with Special Health Care Needs (0-21 years) 816-350-5433 www.health.mo.gov

Down Syndrome Guild of Greater KC office: 913-384-4848 24 hour info line: 913-384-9898 www.kcdsg.org

First Steps Program (0-3 years) 573-522-8762 www.dese.mo.gov

Heritage Preschool (for special needs children – sliding scale) 816-884-6438

Kansas City Regional Office (KCRO) 816-889-3400 (for early detection of mental retardation and developmental disabilities) www.dmh.mo.gov/kcro/ Local School Districts Special Services Office

Missouri Department of Elementary and Secondary Education www.dese.mo.gov

Missouri Department of Health and Senior Services www.dhss.mo.gov (A to Z)

Social Security Administration 800-772-1213 www.socialsecurity.gov

The Family Conservancy (child care referrals for special needs children) 913-342-1110 www.thefamilyconservancy.org

Domestic Violence

Hope Haven of Cass County (Emergency Shelter and Outreach programs for Domestic & Sexual Violence) 24-Hour Crisis Hotline: 816-380-4663 Administrative: 816-380-2833 www.hopehavenforcasscounty.org

Hope House for Battered Women 816-461-8188 www.hopehouse.net

Missouri Coalition Against Domestic and Sexual Violence 1-800-799-7233 www.mocadsv.org

Rose Brooks Center 816-861-6100 (Greater Kansas City) 1-800-779-7233 (National) 816-523-5550 (Office)

Education (Adult)

Cass Career Center 380-3253 www.casscareercenter.com

Independence Adult Education and Literacy Program (GED classes in Belton and Harrisonville) 816-521-5507 (press 1 then 5) 816-521-5300 (school district) www.indep.k12.mo.us Local school districts for GED class information

Longview Community College 672-2000 www.mcckc.edu

Missouri GED www.gedonlineclass.com

Educational Financial Assistance

Education Online Search www.education-online-search.com

Free Application for Federal Student Aid 1-800-433-3243 www.fafsa.ed.gov

MOSTARS Information Center 800-473-6757 www.mostars.com

Emergency Assistance

Community Assistance Council 660-476-2185

West Central Missouri Community Action Agency (Belton) 816-322-0502 816-322-0291 www.wcmcaa.org

Emergency Management / Disaster Preparedness

American Red Cross 816-380-4271 (KC) 816-931-8400 www.kcredcross.org

Cass County Emergency Management 816-380-8125 www.casscounty.com

Public Health Preparedness

Cass County Health Department 816-380-8441

Employment and Training

Full Employment Council / Missouri Career Center (Belton) 816-318-3922 (KC) 816-471-2330 www.feckc.org

Job Corps (age 16-25) 816-629- 3111 excelsiorsprings.jobcorps.gov

Missouri's Workforce Resource www.greathires.org

Preferred Employment Services 816-884-3008 811 Westchester Ave. Harrisonville (Individualized employment services for persons with disabilities) www.pfh.org

West Central Missouri Community Action Agency (Belton) 816-318-3922 (Harrisonville) 816-380-6690 www.wcmcaa.org

Family Counseling Services

Cass County Psychological Services 816-380-4010

Harrisonville Ministerial Alliance (family counseling – reduced rates) 816-380-3505

Pathways Community Behavioral Healthcare (Harrisonville) 816-380-5167 (Raymore) 816-318-4430 www.pathwaysonline.org

The Family Conservancy 913-342-1110 www.thefamilyconservancy.org

Turning American Families Around 913-449-3696 www.turningamericanfamiliesaround.org

Family Support Services

Family Support Division / Children's Services (formerly DFS) 816-380-3597 1-800-392-1261 www.dss.mo.gov

Harrisonville Ministerial Alliance (Harrisonville and small surrounding communities) 816-380-3505

Salvation Army 816-380-3505 www.salvationarmyusa.org

West Central Missouri Community Action Agency Belton (816-322-0502) Harrisonville (816-380-6690) www.wcmcaa.org

Food Assistance

Cass County Health Department (WIC) 816-380-8430 www.casscountyhealth.com

Cornerstone Community Church 816-380-2422

Fishes and Loaves Food Pantry (Raymore) 816-322-1177 www.fishesandloavesfoodpantry.com

Garden City Ministerial Alliance 816-773-8577 (Garden City and surrounding area)

Harvesters Community Food Network 816-929-3000 www.harvesters.org

Heart-n-Hand Ministries Food Pantry 816-322-1133 (Belton, Raymore, Peculiar residents only) www.heartnhand.org

Pleasant Hill Lay Clergy Thrift Store and Food Pantry 987-3600

Salvation Army 816-966-8300 www.salvationarmyusa.org Senior Centers (Belton) 816-348-7410 (Harrisonville) 816-380-8980

Senior meals delivered Belton (348-7410) Drexel (619-2434) Garden City (773-6262), Harrisonville (380-8980) Pleasant Hill, (987-3952)

Shepherd's Staff Food Pantry 816-380-3043

South Haven Baptist Church 816-322-0409 (Belton/Raymore residents by appointment) www.southhavenchurch.org

Grandparent Support / Kinship Care

American Association of Retired Persons (AARP) 1-888-687-2277 1-877-434-7598 (Spanish): 1-877-342-2277 www.aarp.org/grandparents

Children's Mercy Hospital Family Friend Program 816-234-3000 www.childrensmercy.org

Health Care / Urgent Care Clinic

Missouri Health Insurance Marketplace 1-800-318-2596 www.covermissouri.org www.healthcare.gov

Children's Mercy South 5808 W. 110th St. Overland Park, Ks. 66211 913-696-8000 www.childrensmercy.org

Kansas City CARE Clinic (adults w/o insurance only) 816-753-5144 www.kccareclinic.org

Mercy and Truth Medical Clinic 913-248-9965 www.mercyandtruth.com Minute Clinic CVS Pharmacy (Raymore) 1-866-389-2727 www.minuteclinic.com

Swope Health Services 816-599-5170 (Belton MO) 816-922-1050 (KCMO, Troost) 816-923-5800 (Central, Blue Parkway, KCMO) www.swopehealth.org

TakeCare Health Walgreen's Pharmacy 816-322-4177 (Belton) 816-554-0403 (Lee's Summit) 816-254-8748 (Independence) 1-866-825-3227 www.takecarehealth.com

Home Health Care

Visiting Nurse Association 816- 380-3654 www.vnakc.com

West Central Missouri Community Action Agency 660-476-2185 www.wcmcaa.org

American Home Care 816-728-0975 816-358-2477

Homeless / Transient Services

Harrisonville Ministerial Alliance 816-380-3505

City Union Mission 816-566-5085 www.cityunionmission.org

Hotline for the Homeless 816-474-4599

Hope Haven (for domestic violence victims only) 816-380-4663 www.hopehavenofcasscounty.org

Hospice Services

Crossroads Hospice of KC 333-9200 www.crossroadshospice.com Heartland Hospice 816-943-1798 (KCMO) 660-679-4300 (Butler)

Kansas City Hospice and Palliative Care 816-363-2600 www.kansascityhospice.org

Omega Health Care 816- 268-4130

St. Luke's Hospice 816-756-1160 www.saint-lukes.org

Turning Point Hospice Services 913-383-8700 www.turningpointkc.org

Twin Lakes Hospice (Clinton) 800-328-5446 www.twinlakeshospice.com

Hospitals

Cass Regional Medical Center 2800 Rock Haven Rd Harrisonville, MO 64701 816-380-3474 816-380-5888 www.cassregional.org

Children's Mercy Hospital and Clinics 2401 Gillham Rd. Kansas City, MO 64108 816-234-3000 www.childrensmercy.org

Greater Kansas City Healthcare Directory www.healthykc.org

Belton Regional Medical Center 17065 S. 71 Hwy Belton, MO 64012 816-348-1200 www.beltonregionalmedicalcenter.com

Note: Both Cass Regional and Belton Regional offer community education programs and Cass Regional operates family practice clinics throughout the county. Visit their respective websites for further information.

Hotlines / Helplines

Alcoholics Anonymous Helpline 471-7229 www.kc-aa.org

Breast Center at Menorah Medical Center 913-498-6266 www.menorahmedicalcenter.com/service/breast -care

Child Abuse / Neglect Hotline 800-392-3738 (Missouri only) www.dss.mo.gov/cd/can.htm

Child Support General Information 800-859-7999

Child Support Payment Enforcement 800-225-0530

Domestic Violence Hotline 800-799-7233 www.thehotline.org

Elder Abuse / Neglect Hotline 800-392-0210 www.dss.mo.gov

Food Stamp Case Information 800-392-1261 www.dss.mo.gov

Girls and Boys Town National Hotline 800-448-3000 (crisis resource and referral for parents and children) www.boystown.org/hotline

Homeless Hotline 816-474-4599

Hope Haven Crisis Line (domestic violence) 816- 380-4663 816-380-2833 www.hopehavenofcasscounty.org

Immunization Hotline (for clinic information) 380-8433

Medicare Info Hotline 800-MEDICARE www.medicare.gov Missouri School Violence Hotline 866-748-7047 www.schoolviolencehotline.com

Narcotics Anonymous Helpline 800-561-2250 www.na.org

National Center for Missing and Exploited Children 800-843-5678 www.missingkids.com

National Runaway Switchboard 800-786-2929 www.1800runaway.org

Parent Link Warmline 800-552-8522 extension.missouri.edu/parentlink

Poison Control Center

800-222-1222 www.aapcc.org

Research Psychiatric Crisis Line 816-444-8161 www.researchpsychiatriccenter.com

Royal Oaks Crisis Referral Line (mental health) 800-456-2634

Sexual Assault Hotline 800-656-4673

MOCSA 24-Hour Rape Crisis Line 816-531-0233

Social Security Information 800-772-1213 www.ssa.gov

STD / AIDS Hotline 800-227-8922

Suicide Prevention Lifeline 800-273-8255 www.suicidepreventionlifeline.org

United Way Assistance Line

"211" or 474-5112 www.unitedwaygkc.org

Housing Assistance / Home Ownership Counseling

West Central Missouri Community Action Agency 660-476-2185 www.wcmcaa.org

Immunizations

Cass County Health Department 816-380-8431 www.casscountyhealth.com

Independent Living

CASSCO Area Workshop 816-380-7359

The Whole Person 816-627-2220 www.thewholeperson.org

Heart-n-Hand Ministries Inc. L.I.F.T. Programs (Life Instruction for Today) 322-1133 www.heartnhand.org (Offers free classes in computer, job resume, cooking, finances)

Legal Aid / Advocacy Services

Legal Aid of Western Missouri 816-474-6750 www.lawmo.org

Missouri Bar Association www.mobar.org

Missouri Protection and Advocacy Services (for the disabled) 800-392-8667 www.moadvocacy.org

Libraries

Main Office Harrisonville (816-380-4600) www.casscolibrary.org Satellites Archie, 816-293-5579 Belton, 816-331-0049 Drexel, 816-657-4740 Garden City, 816-862-6611 Pleasant Hill, 816-987-2231 Bookmobile, 816-258-2244

Medical Lodging

Hope Lodge (American Cancer Society) 800-227-2345 www.cancer.org

Ronald McDonald House 816-842-7033 www.rmhckc.org

Mental Health Services

Catholic Charities 800-875-4377 www.catholiccharities-kcsj.org

Cornerstones of Care (Care for Children) 816-508-1700 www.cornerstonesofcare.org

Crittenton Children's Center (Behavioral Health) 816-765-6600 www.saint-lukes.com

Crisis Intervention Teams (Law Enforcement Crisis Response) contact local law enforcement dispatch or 9-1-1 and ask for CIT Deputy or officer-on-duty

Pathways Community Behavioral Healthcare Harrisonville: 816-380- 5167 Raymore: 816-318-4430 www.pathwaysonline.org

Preferred Family Healthcare 816-884-3008 811 Westchester Ave. Harrisonville www.pfh.org

Research Psychiatric Center 816-444-8161 crisis line: 816-235-8162 www.researchpsychiatriccenter.com Royal Oaks Hospital 888-403-1071 crisis line: 800-456-2634 www.royal-oaks-hospital.org

Sage Senior Behavioral Health Services (age 55 and over) 816-887-0793

Parenting Support / Child Development

Parents As Teachers Contact your local school district

The Family Conservancy 913-342-1110 www.thefamilyconservancy.org

University of Missouri Extension "Missouri Families" Program 573-882-7828 www.missourifamilies.org

University of Missouri Extension Parent Link 800-552-8522 www.extension.missouri.edu/parentlink

Paternity Testing

DNA Services of America 800-927-1635 www.dnasoa.com

Physician Clinics

Physician Clinics by specialty by location affiliated or housed in Cass County

Primary Care

Specialty

Family Practice

Archie Medical Clinic Teresa Gallagher-Calia, M.D. 709 East Pine Steet Archie, Mo. 64725 (816)430-5777

Christine Moore, DO 402 W. Pine #K Raymore, Mo. 64083 (816)334-0701 Drexel Medical Clinic Alberto Suar4ez, M.D. 210 East Main Street Drexel, Mo. 64742 (816)619-3000

Garden City Medical Clinic Richard Price, M.D. 101-B Old 7 Highway Garden City, Mo. 64747 (816)773-6203

Grandview Health Clinic Jeffrey Scott, M.D. 900 Main Street Grandview, Mo. 64030 (816)765-8900

Harrisonville Family Medicine Damon Travis, M.D. Shaun Holden, M.D. Christopher Maxwell, M.D. 2820 East Rock Haven Road, Suite 100 Harrisonville Mo. 64701 (816)380-3582

Harrisonville Medical Clinic Sam Brewster, M.D. Richard Price, M.D. Teresa Gallagher-Calia, M.D. 2820 East Rock Haven Road, Suite 210 Harrisonville, Mo. 64701 (816) 380-7470

Kingsville Medical Clinic Pamela Davis, M.D. 305 East Pacific Street Kingsville, Mo. 64061 (816)597-3500

Peculiar Medical Clinic Cassandra Brewster, M.D. Alberto Suarez, M.D. 300 South Main Street Peculiar, Mo. 64078 (816)779-1100

Pleasant Hill Medical Clinic Pamela Davis, D.O. 1601 North Highway 7 Pleasant Hill, Mo. 64080 (816)540-2111 Southland Primary Care Kirk Ridley, M.D. Kent Bogner, D.O. Douglas Bradley, M.D. Logan Kratt, M.D. David Williams, M.D. Pusnima Mohan, M.D. 17067 South 71 Highway, Suite 100 Belton, Mo. 64012 (816)331-4000

Internal Medicine

Grandview Health Clinic Kirk Barnett, M.D. 900 Main Street Grandview, Mo. 64030 (816)765-8900

Harrisonville Family Medicine Aaron Travis, D.O. 2820 East Rock Haven Road, Suite 100 Harrisonville Mo. 64701 (816)380-3582

Southland Primary Care Heather Savedra, M.D. 17067 South 71 Highway, Suite 100 Belton, Mo. 64012 (816)331-4000

OB/GYN

Midwest Women's Healtcare Specialist Amber Bledsoe, M.D. Bradley Sullivan, M.D. 17067 South 71 Highway, Suite 200 Belton, Mo. 64012 (816)444-6888

Midwest Women's Healtcare Specialist Bradley Sullivan, M.D. 2820 East Rock Haven Road, Suite 205 Harrisonville Mo. 64701 (816)444-6888

Women's Center at Lee's Summit Megan Sneed, M.D. 2820 East Rock Haven Road, Suite 200 Harrisonville Mo. 64701 (816)333-5005

Pediatrics

Cass County Pediatrics & Adolescents 523 North Scott Ave Belton, Mo. 64012 (816)322-4769

Specialty Care

Specialty

Allergy

Aggarwal Allergy Clinic Jag Aggerwall, M.D. 17067 South 71 Highway, Suite 200 Belton, Mo. 64012 (816)525-8400

Cardiology

Midwest Heart and Vascular Specialist Timothy Blackburn M.D. Elizabeth Dang, M.D. Carrie Totta, M.D. 17067 South 71 Highway, Suite 200 Belton, Mo. 64012 (816)348-4281

Midwest Heart and Vascular Specialist Carrie Totta, M.D. Lillard Ashley, M.D. 2820 East Rock Haven Road, Suite 200 Harrisonville Mo. 64701 (816)380-8088

Dermatology

Rock Haven Specialty Clinic Marija Tonkovic-Capin, M.D. Visesllave Tonkovic-Capin, M.D. 2820 East Rock Haven Road, Suite 150 Harrisonville Mo. 64701 (816)887-0312

Mark Fleischman, M.D. 17067 South 71 Highway, Suite 200 Belton, Mo. 64012 (913)451-7546

Dialysis Clinics

Dialysis Clinic, Inc 17045 South 71 Highway Belton, Mo. 64012 (816)322-4034 Davita Harrisonville 308 Galaxie Harrisonville, Mo. 64701 (866)544-6741 ext. 9610

Fersenius Kidney Care-Harrisonville 2820 East Rock Haven Road, Suite 160 Harrisonville Mo. 64701 (800)881-5110

Ear Nose and Throat

Cass Regional Medical Center ENT Clinic Mary Luce, MD 2820 East Rock Haven Road, Suite 220 Harrisonville Mo. 64701 (816)380-2446

ENT Associated of Greater KC Kelvin Walls, M.D. 17067 South 71 Highway, Suite 200 Belton, Mo. 64012 (816)478-4200

Endocrinology

Medical Group of Kansas City Madhavi Yarlagasdda, M.D. 17067 South 71 Highway, Suite 200 Belton, Mo. 64012 (816)276-7900

Medical Group of Kansas City Madhavi Yarlagasdda, M.D. 2820 East Rock Haven Road, Suite 200 Harrisonville Mo. 64701 (816)380-8088

Gastroenterology

Fedotin & Ginsberg MD, Inc Belton Regional Medical Center 17605 South 71 Highway Belton, Mo. 64012 (816)333-5424

General Surgery

Belton Surgical Associates Spenser Kirk, M.D. Robert Troiani, M.D. 17067 South 71 Highway, Suite 200 Belton, Mo. 64012 (816)348-4220 Cass Regional Medical Center General Surgery Clinic Jack Hudkins, M.D. Walter Costner, M.D. Michael Kohlman, M.D. 2820 East Rock Haven Road, Suite 220 Harrisonville Mo. 64701 (816)380-2446

Nephrology

Midwest Nephrology Consulants, PA 2820 East Rock Haven Road, Suite 205 Harrisonville Mo. 64701 (816)276-1700

Neurology

Rock Haven Specialty Clinic Michael Schwatzman, DO Suzanne Candall, DO 2820 East Rock Haven Road, Suite 150 Harrisonville Mo. 64701 (816)887-0312

Research Neurology Associates Sharron Kohake, M.D. 17067 South 71 Highway, Suite 200 Belton, Mo. 64012 (816)348-4267

Research Neurology Associates Iftekhar Ahmed, M.D. 2820 East Rock Haven Road, Suite 205 Harrisonville Mo. 64701 (816)380-8081

Oncology

Midwest Oncology Associates, LLC William Stephenson, M.D. Frank Slovick, M.D. Sarah Cannon @ BRMC 17053 South 71 Highway, Ste 204 Belton, Mo. 64012 (816)348-1900

Midwest Oncology Associates, LLC William Stephenson, M.D. Cass Regional Medical Center 2800 East Rock Haven Drive Harrisonville, Mo. 64701 (816)380-5888 ext. 7880 Ophthalmology

Cass County Eye Center 424 East North Avenue Belton, Mo. 64012 (816)322-6100

Cokington Eye Center Christopher Banning, M.D. 2820 East Rock Haven Road, Suite 150 Harrisonville Mo. 64701 (913)491-3737

Discover Vision Center-Harrisonville 670 South Commercial Street Harrisonville, Mo. 64701 (816)478-1230

Orthopedics

Bone and Joint Specialist Physician Group Danny Carroll, M.D. 17067 South 71 Highway, Suite 200 Belton, Mo. 64012 (816)348-4270 Bone and Joint Specialist Physician Group Danny Carroll, M.D. 2820 East Rock Haven Road, Suite 120 Harrisonville Mo. 64701 (816)348-4270

Cass Regional Orthopedics Ken Petersen, D.O. 2820 East Rock Haven Road, Suite 120 Harrisonville Mo. 64701 (816)380-7662

Carondelet Orthopedics 17067 South 71 Highway, Suite Belton, Mo. 64012

Orthopaedic Specialists John Gillen, MD 17067 South 71 Highway, Suite 300 Belton, Mo. 64012 (816)331-6700

Pain Management

SJA Pain Associated Richard Morgan, M.D. James Johnson, D.O. Cass Regional Medical Center 2800 East Rock Haven Road Harrisonville, Mo. 64701 (816)380-5888 Matthew Nadler, MD Belton Regional Medical Center 17605 South 71 Highway Belton, Mo. 64012 (913)754-2199

Pain Management Associates Thomas Laughlin, MD Belton Regional Medical Center 17605 South 71 Highway Belton, Mo. 64012 (816)331-6700

Plastic Surgery / Hand

Vik Zadoo, MDT 17067 South 71 Highway, Suite 200 Belton, Mo. 64012 (816)276-9100

Podiatry

Associated Podaitrists, PA Radmila Samardzija, DPM 17067 South 71 Highway, Suite 200 Belton, Mo. 64012 (913)321-0522

Rock Haven Specialty Clinic William Cruce, DPM 2820 East Rock Haven Road, Suite 150 Harrisonville Mo. 64701

Robert A & Laurel Bondi, DPM 115 Bradford Lane Belton, Missouri 64102 (816)322-3137

Pulmonology

Kansas City Pulmonary Practice JC Ireland, M.D. 17067 South 71 Highway, Suite 200 Belton, Mo. 64012 (816)348-4267

Kansas City Pulmonary Practice 2820 East Rock Haven Road, Suite 120 Harrisonville Mo. 64701 (816)333-1919

Rheumatology

Cass Regional Medical Center Specialist Clinic Kevin Latinis, M.D. Cass Regional Medical Center 2800 East Rock Haven Road Harrisonville, Mo 64701 (816)380-5888 ext. 7880

Urology

Rock Haven Specialty Clinic Billy Perry, M.D. 2820 East Rock Haven Road, Suite 150 Harrisonville Mo. 64701

Kansas City Urology Care Steven Nash, M.D. Belton Regional Medical Center 17605 South 71 Highway Belton, Mo. 64012 (816)348-4990

Kansas City Urology Care Steven Nash, M.D. 2820 East Rock Haven Road, Suite 205 Harrisonville Mo. 64701 (816) 444-5525

Wound Care

Cass Regional Medical Center Wound Clinic Shaun Holden, M.D. Dale Chism, D.O. Walter Costner, M.D. Michael Kohlmand, M.D. William Cruce, DPM 2820 East Rock Haven Road, Suite 150 Harrisonville Mo. 64701 (816)887-0309

Pregnancy Testing

Birthright of Greater KC (free testing) 800-550-4900 www.birthright.org

Cass County Health Department 816-380-8431 www.casscountyhealth.com

Life Choice Center for Women 816-887-5100 www.lifechoicecenter.org Saint Luke's Women's Health Care Clinic 816-932-6100 www.saintlukeshealthsystem.org

West Central Missouri Community Action Agency Belton Clinic: 816-322-5012 Harrisonville Clinic: 888-577-4640 www.wcmcaa.org

Prescription Assistance

Needy Meds 800-503-6897 www.needmeds.com

Community Assistance Council 816-763-3277 www.cackc.org

Medications Missouri RxPlan 1-800-375-1406 www.morx.mo.gov

School Supplies Assistance K-12

West Central Community Action Agency 816-322-0700 816-322-0502 (Belton, Raymore, Peculiar residents) 816-380-6690 (Harrisonville residents)

Senior Services

Aging Information and Referral 800-235-5503 www.dss.mo.gov

Angels on Call 816-810-0567 located in Belton

Belton Senior Center 816-348-7410

Eldercare Locator 816-474-4240 www.eldercare.gov

Experience Works, Inc. (employment for Seniors) 877-872-4740 www.experienceworks.org Harrisonville Senior Center 816-380-8980

Meals-on-Wheels 816-987-3952 Medications

Missouri RxPlan 1-800-375-1406 www.morx.mo.gov

Medicare Info 1-800-MEDICARE www.medicare.gov

Mid America Regional Council (info on aging services) 816-474-4240 www.marc.org/aging

Missouri Aging Information Network www.moaging.com

Missouri Senior Legal Helpline www.moaging.com/legalhelp 1-800-235-5503

Social Security Information 800-772-1213 www.ssa.gov

Visiting Angels (senior homecare) 800-365-4189 www.visitingangels.com

West Central Missouri Community Action Agency (Low Income Housing) Belton (816-331-4620) Raymore (816-331-2959) Harrisonville (816-380-6833) www.wcmcaa.org

Support Groups

Alcoholics Anonymous 816-471-7229 www.kc-aa.org

Alzheimer's Support Group 800-272-3900 (24 hour line) www.alz.org

COPD Support Group 816-380-5159 888-414-5126 Grief Support Group (suicide survivors) Pathways Raymore, 816-318-4430

Multiple Sclerosis Support Group 816-478-1578 Narcotics Anonymous 800-561-2250 www.na.org

Solace House (grief support children/adults) 913-341-0318 www.solacehouse.org

Survivors of Suicide 800-273-8255 www.afsp.org

Thrift Stores

Angels on Call 816-810-0567 located in Belton (emphasis on teens and senior citizens)

Good Shepherd Thrift Store (Garden City) 862-6100

Goodwill Missouri and Kansas 816-842-7425 www.mokangoodwill.org

Harrisonville Ministerial Alliance Thrift Store 816-380-3505

Heart-n-Hand Ministries 200 B St. Belton 816-322-1133 www.heartnhand.org

Pleasant Hill Lay Clergy Thrift Store and Food Pantry 816-987-3600 www.tlcphill.com

Transportation

Kansas City Area Transit Authority 816-221-0660 www.kcata.org

OATS 816-380-7433 www.oatstransit.org

Uninsured Families

Cass Regional Medical Center (Extended payment options) 888-233-8825

Family Support/Children's Division (formerly DFS) 816- 380-3597

MO HealthNet (formerly MC+) 888-275-5908 www.dss.mo.gov

Cover Missouri www.covermissouri.com

Veteran's Assistance

Missouri Veterans Commission, Harrisonville site 816-887-5710

VA Outpatient Clinic, Belton 816-922-2161

Vital Records (birth / death certificates, passports)

Cass County Health Department (birth / death certificates) 816-380-8425 www.casscountyhealth.com

Local Post Offices for passport applications

Voter Registration

Cass County Clerk's Office 816-380-8108 www.casscounty.com

License Bureaus, Belton and Harrisonville

Local City Halls

Local Libraries

Women's Health Services

Building Blocks of Missouri 816-513-6129 www.health.mo.gov Swope Health Belton www.swopehealth.org 816-599-5170

Greater Kansas City Healthcare Directory www.healthykc.org

Kansas City Free Clinic (adults w/o insurance only) www.kcfree.org

Life Choice Center for Women prenatal clinic (accepts Medicaid) 816-887-5100 www.lifechoicecenter.org

Medicaid for Pregnant Women Family Support Division and Children's Services (formerly DFS) 816-380-3597

Temporary Medicaid During Pregnancy Cass County Health Department 380-8431

Saint Luke's Women's Health Care Clinic 816-932-6100 www.saintlukeshealthsystem.org

Women's Health Services Clinics Belton (322-5012) Harrisonville (888-577-4640) (sliding scale fees, exams, STD testing/treatment, pregnancy testing) www.wcmcaa.org

Youth Programs

Boy Scouts 942-9333 www.hoac-bsa.org Bullying Prevention Information www.eyesonbullying.org

Community Centers Belton (348-7400) www.beltonparks.org Harrisonville (380-8980) www.ci.harrisonville.mo.us

4H University of Missouri Extension 380-8460 extension.missouri.edu

Early Headstart (ages 6weeks-3years) 779-8687 Girl Scouts 358-8750 www.girlscoutsksmo.org

Headstart (ages 3-5 years) Belton (322-0004) Harrisonville (380-1844) www.wcmcaa.org

Lifeguard Youth Development (character-based education about high-risk behaviors in youth plus resources for parents) 836-8336 www.guardyourself.org

Preferred Family Healthcare 816-884-3008 811 Westchester Ave. Harrisonville (youth services) www.pfh.org

Safe Sitters Training 816-654-7966 www.kcumb.edu

Youth Friends 816-842-7082 www.youthfriends.org

General Online Healthcare Resources

Doctors and Dentists--General

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

Hospitals and Clinics--General

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

Hospitals and Clinics--Specialized

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

Other Healthcare Facilities and Services

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



Hi	Historical Trends - Primary Service Area by County									
Pat	ient Origin Reports	3 YR I	IP/OP		lı	npatient	S	Outpatients		
Ca	ss Regional Medical Center	Total	%	Accum	2013	2014	2015	2013	2014	2015
#	CRMC Totals	134,514	100.0%		1,670	1,518	1,344	44,685	43,212	42,085
1	Cass County, MO	101,509	75.5%	75.5%	1,232	1,123	1,001	33,864	32,558	31,731
2	Bates County, MO	13,429	10.0%	85.4%	140	136	106	4,326	4,447	4,274
3	Henry County, MO	5,476	4.1%	89.5%	93	73	65	1,853	1,755	1,637
4	Johnson County, KS	4,450	3.3%	92.8%	68	59	64	1,471	1,387	1,401
5	Jackson County, MO	4,450	3.3%	96.1%	41	41	43	1,463	1,426	1,436
6	Other Counties	5,200	3.9%	100.0%	96	86	65	1,708	1,639	1,606
So	Source: HIDI MHA									

Historical Trends - Primary Service Area by Zip											
Cas		nal Medical Center		3 YR	IP/OP	<u> </u>	npatients	5	0	utpatien	ts
#	ZIP	City	County	Total	%	2013	2014	2015	2013	2014	2015
		CRMC Totals		134,514	100.0%	1,670	1,518	1,344	44,685	43,212	42,085
1	64701	Harrisonville	Cass	49,004	36.4%	685	597	569	16,223	15,590	15,340
2	64078	Peculiar	Cass	11,447	8.5%	111	124	97	3,734	3,782	3,599
3	64747	Garden City	Cass	10,989	8.2%	121	137	95	3,629	3,535	3,472
4	64080	Pleasant Hill	Cass	10,056	7.5%	131	101	87	3,587	3,275	2,875
5	64720	Archie	Cass	5,690	4.2%	47	46	47	1,969	1,823	1,758
6	64725	Adrian	Bates	5,595	4.2%	68	69	51	1,851	1,784	1,772
7	64012	Belton	Cass	5,300	3.9%	51	42	36	1,732	1,765	1,674
8	64083	Raymore	Cass	3,951	2.9%	43	34	36	1,313	1,218	1,307
9	64040	Butler	Bates	3,214	2.4%	26	24	24	1,053	1,110	977
10	64746	Freeman	Cass	3,428	2.5%	35	25	25	1,173	1,144	1,026
11	64730	Holden	Johnson	3,313	2.5%	22	29	31	1,003	1,074	1,154
12	64735	Clinton	Henry	2,478	1.8%	29	13	21	858	780	777
13	64742	Drexel	Bates	2,469	1.8%	36	30	20	831	802	750
14	64739	Warrensburg	Johnson	1,462	1.1%	19	12	15	505	436	475
15	64093	Creighton	Cass	1,481	1.1%	28	33	18	452	461	489
16	64061	Kingsville	Johnson	1,414	1.1%	17	12	14	446	469	456
17	64788	Cleveland	Cass	894	0.7%	9	17	9	295	284	280
18	64734	Urich	Henry	1,019	0.8%	18	21	11	305	349	315
19	64030	Amsterdam	Bates	607	0.5%	1	3	8	184	210	201
20	64723	Grandview	Jackson	500	0.4%	10	13	8	130	127	212
		Other Zips				163	136	122	3,412	3,194	3,176
Sou	urce: HIL	DIMHA									

Town Hall Attendees Notes and Feedback

[VVV Consultants LLC]

Cass Regiona	al Medical C	enter (Prima	ry Service Area)	- CHNA Round #2	Town Hall 9/27/2	016, N	=7	
Firstname	Firstname	Lastname	Organization	Address	City	State	Zip	Email
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Janelle	Biernbaum	Belton Regional Medical Center	17065 US-71	Belton	мо	64012	janelle.biernbaum@hcahealth care.com
Parents, caregivers and other consumers of health care in the community.	Dawn	Elmore-Fricke						deefricke@gmail.com
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Lea Ann	Gatzemeyer	West Central Community Action Agency	106 W 4th St	Appleton City	мо	64724	lgatzemeyer@wcmcaa.org
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Tiffany	Klassen	Cass County Health Department	300 S Main St	Harrisonville	мо	64701	tiffanyk@casscounty.com
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Chris	Lang	Cass Regional Medical Center	2800 Rock Haven Rd	Harrisonville	мо	64701	clang@cassregional.org
Parents, caregivers and other consumers of health care in the community.	Marie	Vallee		105 S Price Ave	64701	64701	64701	mlsvallee@hotmail.com
The hospital organization's board members.	Toni	Wiseman	CRMC Board of Trustees	3121 Prairie View Dr	64701	64701	64701	

Cass Regional Medical Center (Primary Service Area) - Community Health Needs Assessment Meeting 9.27.16 N=7

Community Members Present

- Providers
- Board
- Those taking care of Seniors

TAB 1: Demographic Profile

• Veterans going to VA hospital in Harrisonville or clinic in Belton

TAB 3: Educational Profile

- They have a Federal healthy food policy, whether or not the children are actually eating it is their choice
- Have at least one school nurse at each building

TAB 6: Behavioral Health Profile

• Depression numbers are higher, probably the 30-40% range

Tab 8: Uninsured Profile

• Have visiting cardiologists

Online Feedback Survey

• Have clinics and they just don't pick up traffic

STRENGTHS:

- Increased access to specialists (Cardiology, Neurology)
- Greater number of access points for Primary Care
- Active farmer's market
- Good fitness centers (including Silver Sneakers options for seniors)
- Good walking trails
- Local and invested providers
- Good ambulance services
- Increased access to dental services for uninsured youth
- School nurses
- Collaboration of community health partners

WEAKNESSES:

- Access to dental care for uninsured adults
- Communication of available healthcare services
- Mental health (access, diagnosis, placement)
- Suicide
- Eating disorders
- Healthcare transportation
- Urgent care services (Southern Cass)
- Access to Primary Care (IM, Peds, OB)
- Access to Visiting Specialists (Pulm, Neph)
- Obesity
- Sexually transmitted infections
- Drug abuse
- Limited local Health Department funding
- Child care

Public Notice and Invitation

[VVV Consultants LLC]

For Immediate Release: Aug. 19, 2016

For more information, contact: Alesha Miller Marketing and PR Coordinator amiller@cassregional.org (816) 380-3474

Hospital, Health Department invite feedback about health needs in Cass County

Cass Regional Medical Center, in partnership with the Cass County Health Department, invites all area residents to participate in the upcoming 2016 Community Health Needs Assessment, a blueprint created from data supplied by community members in order to improve medical care in the county.

Over the next three months, data will be examined to identify what progress was made since the 2013 countywide assessment. The goal of the new, 2016 assessment is to collect and report updated community health perceptions and opinions. Once the data is collected a community health improvement plan will be implemented in response to the top perceived health concerns.

All Cass County residents and business leaders are invited to submit their input by taking a short, online survey: https://www.surveymonkey.com/r/CassRegCHNA.

Community members are invited to attend a Town Hall meeting from 5:30 to 7 p.m., Tuesday, Sept. 27, at the Harrisonville Chamber of Commerce, located at 106 S. Independence Street in Harrisonville. At the meeting, secondary public health data will be reviewed, along with the results of the online survey.

"We hope that community members and health care professionals will take advantage of this opportunity in order to benefit the future of health care delivery in our county," Chris Lang, CEO of Cass Regional, said.

Vince Vandehaar, MBA, of VVV Consultants LLC, an independent research firm based in Olathe, Kan., is appointed to conduct the countywide research effort.

For questions about the Cass County Community Health Needs Assessment, please contact the Cass County Health Department at (816) 380-8427.

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Published: Pleasant Hill Times – Aug. 31, 2016; North Cass Herald – Aug 26, 2016; The Raymore Journal – Aug. 25, 2016

From: Chris LangSent: Thursday, August 18, 2016 4:32 PMTo: All UsersSubject: Community Health Needs Assessment Online Survey

To all:

Cass Regional Medical Center is partnering with Cass County Health Department to update the 2013 Community Health Needs Assessment which identified health needs within Cass County. This assessment is an IRS requirement for all 501(c)(3) hospitals, which includes Cass Regional, and mandate Cass Regional to conduct a Community Health Needs Assessment and adopt an implementation plan to meet selected and identified needs at least once every three years.

In the past, some of the data from this community health needs assessment was used to support the opening of a second site in Harrisonville for the Cass County Dental that services to the dental needs of children on Medicaid or without dental coverage. The Medical Center has contributed space and utilities within a building in owns as well as has made a significant financial contribution to purchase equipment to make this second location a reality.

As providers of care or those who support the provision of care within Cass County and the surround areas and for some of you as citizens within the county, your feedback and suggestions regarding improving the overall community health within Cass County are very important. In order accomplish this work, a short online survey has been developed and can be accessed at the following on line address:

https://www.surveymonkey.com/r/CassRegCHNA

We ask that you consider completing this confidential survey by **Monday**, **September 19**, **2016**. Your responses will be aggregated with others who have been asked to participate and will be used along with data from other sources in helping to identify and prioritize health care needs within the county. The Medial Center will then use this information in developing an actions plan to improve upon some of these needs over the next three years.

If interested, a community feedback session where data about the overall health within the community and results from this survey is planned for Tuesday, September 27th at 5:30 pm at the Harrisonville Chamber of Commerce Office.

Thank you in advance for your time and support in participating with this important request.

Sincerely,

J. Christopher Lang CEO

For Immediate Release: Aug. 29, 2016

For more information, contact: Alesha Miller Marketing and PR Coordinator amiller@cassregional.org (816) 380-3474

Public Invited to Attend Town Hall Meeting to Improve Community Health

Cass Regional Medical Center and the Cass County Health Department are co-hosting a town hall meeting to gather input from Cass County citizens to identify unmet community health needs and to improve the delivery of health care.

On Tuesday, Sept. 27, at the Harrisonville Chamber of Commerce, located at 106 S. Independence St, in Harrisonville, a light dinner will be provided starting at 5 p.m. Vince Vandehaar of VVV Consultants, LLC, will facilitate the meeting and discussion from 5:30 to 7 p.m.

To RSVP or for questions, please contact Tiffany Klassen at (816) 380-8427.

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Community Health Needs Assessment Community Town Hall Meeting

Cass Regional Medical Center and Cass County Health Department will sponsor a Town Hall Meeting from 5:30 to 7 p.m., Tuesday, September 27 at the Harrisonville Area Chamber of Commerce, located at 106 S. Independence St, in Harrisonville.

All Cass County residents are invited to attend. A light dinner will be provided starting at 5 p.m.

Please join us to share your opinions and suggestions to improve health care delivery in Cass County.

Thank you in advance for your participation







Cass Regional Medical Center

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/CassRegCHNA.

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:

10. For reporting purposes, are you involved in or are you a?	Option C Stakeholders Round #2 Bottom 2	Cass Reg PSA N=118
	Boxes	
Board Member	4.2%	3.3%
Business / Merchant	5.7%	4.1%
Case Manager / Discharge	0.7%	0.8%
Civic Club / Chamber	4.7%	4.1%
Charitable Foundation	2.5%	4.5%
Clergy / Congregational Leader	1.4%	0.8%
College / University	2.2%	2.0%
Consumer Advocate	1.2%	1.6%
Consumers of Health Care	8.5%	8.2%
Dentist	0.2%	0.0%
Economic Development	1.4%	0.8%
Education Official / Teacher	4.4%	4.5%
Elected Official (City / County)	1.5%	1.2%
EMS / Emergency	1.5%	1.2%
Farmer / Rancher	3.9%	2.5%
Health Department	1.7%	0.4%
Hospital	11.8%	19.7%
Housing / Builder	0.4%	0.8%
Insurance	1.2%	1.6%
Labor	1.2%	1.6%
Law Enforcement	0.6%	0.4%
Low Income / Free Clinics	0.7%	1.2%
Media (Paper, TV, Radio)	0.5%	1.2%
Mental Health	2.2%	10.7%
Nursing	8.4%	4.1%
Other Health Professional	6.7%	10.2%
Parent / Caregiver	9.7%	1.2%
Pharmacy	0.5%	0.4%
Physician (MD / DO)	0.9%	0.0%
Physician Clinic	1.4%	0.0%
Senior Care / Nursing Home	1.4%	0.4%
Social Worker	1.0%	0.8%
Veteran	1.8%	1.6%
Welfare / Social Service	0.7%	0.4%
Other (please specify)	3.6%	3.3%
TOTAL	100.0%	100.0%

	KEY - CHNA Op	en	End C	omments
CODE	Physician Specialty		CODE	Physician Specialty
ALLER	Allergy/Immunology		ONC	Oncology/Radiation Oncology
AES	Anesthesia/Pain		ОРТН	Ophthalmology
CARD	Cardiology		ORTH	Orthopedics
DERM	Dermatology		ENT	Otolaryngology (ENT)
EMER	Emergency		ΡΑΤΑ	Pathology
ENDO	Endocrinology		PEDS	Pediatrics
FP	Family Practice (General)		РНҮ	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
ІМ	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)			

	KEY - CHNA Op	en	End C	omments
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		ORTHD	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

	KEY - CHNA Op	en	End C	omments		
Code	Healthcare Themes		Code	Healthcare Themes		
СОММ	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/Optometrist		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		тов	Tobacco Use		
нн	Home Health		TRAN	Transportation		
HSP	Hospice		TRAU	Trauma		
HOSP	Hospital		TRAV	Travel		
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		

				CHNA		munity Feedback 2016
		Cass	Regior			enter (Primary Service Area) N=118
ID	Zip	Overall HC Rating	c1	c2	c3	Are there healthcare services in the Cass Regional Medical Center primary service area that you feel need to be improved and/or changed?
1027	64080	Good	ACC	DOCS	WAIT	Access to Health Professionals after normal working hours is difficult. Have to leave Cass County to get help due to offices being closed.
1007	64012	Very Good	ACC	FAC		Your front door to the hospital is very difficult for a handicap person to access, especially when they are in a wheelchair.
1017	64078	Fair	ACC	IMAG		More access to free standing imaging centers would be a plus.
1077	64701	Good	ASTD	ELD		we need assisted living places for the elderly
1029	64080	Fair	AWAR	SERV		Just not enough information about services and where other sites are if any
1069	64701	Poor	BILL	LAB	INSUR	Billing is horrible, which discourages people from coming back. Going for routine labs is supposed to be free if billed properly to insurance. This is not the case with Cass Regional.
1115	64747	Good	CARD			Cardiology
1016	64078	Fair	CLIN	LOC		More clinics available closer to patients.
1038	64080	Very Good	CLIN	WAIT	EMER	Would like to see a free-standing clinic (perhaps at the opposite end of town) to treat non-emergent situations, especially after hours and on weekends. I believe with no physicians in their offices after 5pm and never on weekends we are burdening our ER with unnecessary patients.
		,				Dental care for everyone based on sliding scale for lower incomes.
1083	64701	Fair	DENT	COST	INSUR	A lot of people 50,60,70 get no dental care if they are poor.
1031	64080	Good	DENT	INSUR	URG	I believe the community would benefit from having a dental office available to those who are under or uninsured. I also think the use of an urgent care facility would be very helpful!
1054	64701	Good	DENT	INSUR		Adult dental care for low income, Medicaid and Medicare patients.
1026	64078	Very Good	DENT	INSUR		I believe we still need more dental services for those without dental insurance.
1006	64012	Fair	DENT			More dental care and services in southern Cass County
	64083		DOCS			additional physicians
1035	64080	Good	DRUG	REHAB		drug rehabilitation services
1086	64701	Good	ELD	TRANS	SPEC	Need to be more aware of senior needs, transportation and specialists on campus.
1028	64080	Poor	EMER	AMB	BILL	ER capability NEEDS to be improved. Every time my grandma went there for help, they sent her to Research medical center by ambulance and she got stuck with four bills. One from pleasant hill fire, one from your retarded hospital, one from Harrisonville fire and one from research. Inexcusable and I will never send a family member there for anything ever. EVER.
1107	64734	Good	EMER	URG		we need a fast track system in the ER or an urgent care
1011	64012	Good	EMER	WAIT	CLIN	Emergency Room. There is no need to spend hours at a time as a patient. I appreciate the head to toe look over but address my pain or issue and send me on my way. Specialist clinic, MOB prompt on time, we as patients try to get here early but always end up waiting on our appointment. Keep on schedule.
1052	64701	Fair	EMER	WAIT	DOCS	I hear emergency room horror stories all the time. People sitting for hours when there are few people in the room. Unconcerned nurses and doctors. It doesn't seem to be an emergency for the people that take care of you.

				CHNA		nunity Feedback 2016
		Cass I	Regior			enter (Primary Service Area) N=118
ID	Zip	Overall HC Rating	c1	c2	c3	Are there healthcare services in the Cass Regional Medical Center primary service area that you feel need to be improved and/or changed?
1050	64083	Good	GI	NEUR	PULM	Additional specialty coverage (GI, neurology, pulmonary medicine) and primary care coverage (ex. peds and internal medicine), dental for adults without insurance, outpatient psychiatric and mental health services, drug and alcohol treatment services, community resources to tie (ex. community health workers) to tie identified population to resources within community to meet needs (healthcare, food, transportation assistance), etc.
1021	64078	Very Good	HOSP	SPEC		Seems the hospital is able to provide most specialists that a customer would need, to stay out of the city.
1106	64725	Fair	HOSPT	IP		a hospitalist for inpatients
1096	64701	Good	IMMUN	CLIN	OBG	More health physical and immunization clinics available for a low rate to help with lower income families around school time. More women's health services at a cheaper rate/ scale fee based on income.
1103	64701	Good	IMMUN	мн	ED	More information on child immunizations, current health concerns in the area and how to decrease the spread of infections, mental & physical wellness and resources. Maybe an article attached to the city of Harrisonville utility bills since they are being sent out anyway, regardless of the auto pay option. Knowing that they do not reach all of our Cass County area, maybe start there and survey if this is helpful?
1085	64701	Fair	INSUR	DENT	URG	There is a need for uninsured adult dental care, as well as an urgent care center.
1075	64701	Good	IP	STAFF		Better inpatient stays. Nurses sit around station and act like they are on a break with visiting about everything. Can't they wait for break! At least work and talk at the same time. How about acting like you serious about your job and look like you care instead of it being a good time around that nurses station. They give the appearance that they are lazy. If I have to have another overnight stay, it will not happen at Cass!! I could go on and on about their professionalism. It's a serious floor, so let's act the part!
1062	64701	Good	МН	DRUG	REHAB	Additional mental health services and drug rehab programs to both children and adults
1022	64078	Fair	МН	GER		More services addresses mental health (not just for geriatric patients) are sorely lacking in our area.
1101	64701	Fair	МН	SUBST	OBG	Psychiatry substance abuse Gyn
1117	64747	Very Good	МН			Behavioral Health
1051	64701	Fair	мн			There is a lack of mental health services.
1104	64701	Good	OBG	GI	PAIN	Gynecology and GI and more pain mgmt. for Medicaid
1074	64701	Good	OBG	LOC		with St Joseph Hospital losing their delivery services I believe it increases the need for delivery services in the outlying hospitals. Cass County does not have a hospital for delivery of babies and now patients will need to go to Blue Springs or Overland Park to get the services they need. In my opinion that is too far.
1072	64701	Good	OBG	NEPH	PULM	GYN, Nephrology, Pulmonology
1071	64701	Good	OBG			Cass County could really use an OBGYN. I hear from a tremendous amount of people looking for OBGYN's in our area and it is heartbreaking to have to suggest that they look elsewhere. I know the hospital is looking into this and I hope we continue the search it would be a greatly welcomed area of practice for our area.
1118	64747	Good	OBG			I would like to see an area for OB. there isn't anything close that handles pregnancy and delivery

				CHNA	Com	munity Feedback 2016
		Cass I	Regior	nal Mec	dical C	enter (Primary Service Area) N=118
ID		Overall HC Rating	c1	c2	c3	Are there healthcare services in the Cass Regional Medical Center primary service area that you feel need to be improved and/or changed?
1053	64701	Good	OBG			needs: obstetrics/gynecology
1082	64701	Fair	OBG			OB-GYN
1111	64739	Good	OBG			we really need OBOBYN here at all times.
1020	64078	Good	OBG			Women's health.
1015	64012	Good	PEDS	СНЕМО	OBG	Addition of pediatric, chemotherapy treatments and OB if possible
1080	64701	Good	PEDS	кс		Pediatrics or a Pediatric group from the city that has a satellite office in cass county.
1033	64080	Good	PEDS	мн	INSUR	Pediatrics, psych especially uninsured, gi
1102	64701	Good	PEDS	WAIT	PRIM	improved access to dental services for uninsured adults. pediatrician needed. expanded office hours for primary care offices
1095	64701	Very Good	PEDS			Pediatric healthcare services
1036	64080	Fair	PEDS			pediatrics
1025	64078	Good	PREV	NUTR	DIAB	more preventive services such as good nutrition classes, well child offerings, diabetes prevention programs, tobacco cessation, mental health services
1047	64083	Very Good	PRIM	QUAL		Better primary doctors

				CHNA	Com	nunity Feedback 2016
		Cass F	Region			enter (Primary Service Area) N=118
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 Cass Regional Medical Center primary service area?
1088	64701	Very Good	BLAD	ТИМ	BRMC	Bladder Scopes and Tumor removal had to be done at Belton Regional by Dr Nash and Lobectomy due to lung cancer
1044	64083	Good	CANC			breast cancer surgery and reconstruction
1035	64080	Good	CANC			cancer care
1004	64012	Good	CARD	STLK		Cardiolgy test at St Lukes
1006	64012	Fair	CARD	SURG		Cardiology surgery
1065	64701	Good	CARD	SURG		Heart bypass surgery
1025	64078	Good	CARD			cardiology
1115	64747	Good	CARD			Cardiology
1117	64747	Very Good	CARD			Cardiology
1092	64701	Good	CARD			heart
1068	64701	Fair	CARD			trans esoph echocardiogram
1085	64701	Fair	СМ	ORTHO	SURG	Children's Mercy Hospital-Orthopedic surgery
1059	64701	Good	COLON			colonoscopy that was done
1112	64742	Good	CYST			cyst removal
1054	64701	Good	DENT			Dental
1017	64078	Fair	DIAG			Diagnostic
1026	64078	Very Good	DRUG	REHAB		Drug Rehabilitation
1028	64080	Poor	EMER	BILL		My grandma started at Cass ER and just got sent somewhere else. Never should have stopped there if they weren't going to help. And we got a bill for nothing.
	64078		EMER	RET	SURG	Emergency retina surgery
	64083		EMER			Emergency Treatment due to toe being cut off
		Very Good		ОРН		
			ENDO			Endocrinologist, ophthalmologist
	64701		ENT	DERM		ENT, Dermatology
1072	64701	Good	GI	OBG		GI, GYN
1029	64080	Fair	HOSP			Hospice
1085	64730	Good	IMAG	PEDS	ORTHO	imaging, pediatric specialist, orthopedist
1058	64701	Good	INJ			Major Injuries

CHNA Community Feedback 2016								
Cass Regional Medical Center (Primary Service Area) N=118								
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 Cass Regional Medical Center primary service area?		
1012	64012	Good	IP	HYPGL	CONV	PE bilat inpt, hypoglycemic episode with convulsions		
1103	64701	Good	IP			Hosptial stays		
1119	64747	Good	IP			inpatient hospital stay		
1020	64078	Good	IP			Inpatient Services		
1053	64701	Good	KCBJ	STLKS		KC Bone and Joint; St Luke's South		
1030	64080	Poor	MED			ALL medical treatment outside Cass County		
1096	64701	Good	MH	OBG		Mental health; OB/GYN		
1118	64747	Good	MH	PEDS	OBG	Mental health for kids and OB services		
1002	64012	Good	MH			Mental health		
1223	64730	Very Good	MINCL	STREP		Used a Minute Clinic for quicker access for strep throat		
1031	64080	Good	NEUR	CARD		neurologist, cardiology		
1083	64701	Fair	NEUR	DENT		NEUROLOGY, DENTAL		
1033	64080	Good	OBG			gyn		
1034	64080	Good	OBG			Gyn services		
1077	64701	Good	OBG			ОВ		
1111	64739	Good	OBG			ob		
1023	64078	Very Good	OBG			ОВ		
1095	64701	Very Good	ONC	KU	MEN	oncology care at KU and Menorah		
1075	64701	Good	OP	IP		Outpatient services, Inpatient Services		
1099	64701	Good	OP	LAB	RAD	outpt labs, radiology, surgery		
1027	64080	Good	ORTHO	SURG	СР	Orthopedic Surgery at Centerpoint		
1022	64078	Fair	ORTHO	SURG	EMER	Orthopedic Surgery (emergency); Colonoscopy Screening		
1090	64701	Very Good	ORTHO	SURG	SPEC	Back Surgeon Specialist		
1062	64701	Good	ORTHO			Orthopaedic Services- adult		
1048	64083	Fair	PAIN	NEUR	SLEEP	pain clinic, neurosurgen, sleep study, inpatient icu crictical care,		

CHNA Community Feedback 2016								
Cass Regional Medical Center (Primary Service Area) N=118								
ID	Overall HC D Zip Rating c1 c2 c3			c2	c3	Throughout the past two years, did you or someone you know receive healthcare services outside of the Cass Regional Medical Center primary service area?		
1015	64012	Good	PEDS	ASTH	ALL	Pediatric asthma and allergy		
1084	64701	Good	PEDS	CARD	DERM	Pediatry, Cardiology, Dermatology		
1101	64701	Fair	PLAS	SURG		Plastic surgery		
1061	64701	Good	PRIM	MAMM		primary care physician visit & mammogram		
1218	64701	Good	PRIM	OPH	EMER	PCP, OP Specialty, ED		
1241	64730	Fair	PRIM	ORTHO	PHARM	Primary care, ortho, pharmacy.		
1149	64730	Good	PRIM	RAD	PT	Primary care, radiology, physical therapy		
1217	64730	Fair	PRIM	SPEC		primary and specialty care		
1052	64701	Fair	PRIM	SPEC		primary care and specialists		
1045	64083	Good	PULM	CARD	GI	pulmonary, cardiac, Gl		
1198	64730	Good	RAD	CARD		x-ray, echo cardio gram, ekg		
1074	64701	Good	RAD	RMC		Radiation from RMC		
1114	64747	Good	RMC	MEN	SURG	I was for muyself , my kidney specialist requested my to be in Research medical the other was for husband to have surgery in Menorha medical due to the neurological specialty		
1051	64701	Fair	RMC	TRAUM	REHAB	Trasferred to Research for trauma care and rehab		
1063	64701	Fair	RMC			research kansas city		
1036	64080	Fair	RMC			Research Medical Center		
1011	64724	Good	SPEC	CARD	ENDO	specialy cardiac care, endocrinology care		
1206	64730	Good	SPEC	ENDO		Speciality Physician-Endocrinologist		
1050	64083	Good	SPEC	EYE	PEDS	Speciality eye services and pediatrics		
1073	64730	Fair	SPEC	кс		Specialists in the city		
1046	64730	Good	SPEC	SURG		Specialist and surgeries		
1013	64730	Poor	SPEC	WELL		Saw a specialist and get a check up		
1079	64701	Good	SPEC			follow up with current specialists		
1135	64767	Very Good	SPEC			specialist		
1019	64078	Fair	SPEC			Specialists		

CHNA Community Feedback 2016									
	Cass Regional Medical Center (Primary Service Area) N=118								
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 Cass Regional Medical Center primary service area?			
1128	64730	Good	SPEC			speciality			
1013	64012	Good	SPEC			specialtists care			
1254	64730	Very Good	SPEC			specialty not available at BCMH			
1105	64701		SPEC			they visited their specialist, with whom they had a long term relationship.			
1039	64083	Fair	SPORT			Sports Medicine			
1055	64701	Fair	STLK			Saint Luke's Health System			
1239	64720	Fair	STLKS			tests St. Luke's South			
1252	64730	Fair	STRK	BLAD	CANC	stroke, bladder cancer, breast cancer, bone spur/knee, ob/gyn, dental,			
1037	64080	Good	STRK	мн	BLAD	stroke, mental help,blader			
1102	64701	Good	SURG	MAMM		breast surgeon follow up for abnormal mammogram			
1154	64720	Very Good	SURG	OP		surgery, outpatient procedure			
1038	64080	Very Good	SURG			Surgery			
1078	64730	Very Good	SURG			Surgery			
1094	64730	Very Good	SURG			Surgery			
1100	64701	Fair	SURG			Surgery			
1007	64720	Poor	SURG			Surgical services			
1028	64767	Very Good	TERT			tertiary center			
1109	64739	Good	URG	EMER		Urgent Care, Emergency services			
1153	64730	Fair	URG	PEDS		Urgent care and pediatric care			
1122	64730	Very Good	URG			My husband had to go to urgent care when we were out of town			
1032	64080	Good	WELL	МАММ	URG	Wellness, mammogram, urgent care. We don't utilize Cass County providers.			
1047	64083	Very Good	WELL	MAMM		Annual wellness check. Mammogram			
1195	64730	Fair	WELL	SURG		regular checkups and surgeries			
1012	64720	Poor	WELL			For a regular check up			
1162	64730	Fair	WOUN	EMER	ORTHO	wound care, ER, orthopedics, surgery, cardiology			

Community Health Needs Assessment 2016 - Cass Regional Medical Center (Primary Service Area)

Let Your Voice Be Heard!

Cass Regional Medical Center, in collaboration with Cass County Health Department, is updating its 2013 Community Health Needs Assessment (CHNA). Your feedback from this survey will help us identify the current health issues in our community and while your participation is voluntary, we would greatly appreciate your input. All answers will be kept confidential.

All 2016 Community Health Needs Assessment feedback is due by Monday, September 19. Thank you for your participation.

Community Health Needs Assessment 2016 - Cass Regional Medical Center (Primary Service Area)	
Part I: Introduction	

1. Three years ago, Cass Regional Medical Center completed a Community Health Needs Assessment (CHNA). This assessment identified a number of health needs for our community. Today, we are updating this assessment and would like to know how you rate the "Overall Quality" of healthcare delivery in our community?

	Very Good	Good	Fair	Poor	Very Poor
Health Rating:	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Community Health Needs Assessment 2016 - Cass Regional Medical Center (Primary Service Area)

2. Are there healthcare services in the Cass Regional Medical Center primary service area that you feel need to be improved and/or changed? (Please be specific.)

Community Health Needs Assessment 2016 - Cass Regional Medical Center (Primary Service Area)

3. From our last CHNA (2013), a number of health needs were identified as priorities. Are any of these 2013 CHNA needs still an "Ongoing Problem" in the Cass Regional Medical Center primary service area?

	Not a Problem Anymore	Somewhat of a Problem	Major Problem
Lack of Mental Health Providers and Placement of Patients	\bigcirc	\bigcirc	\bigcirc
Obesity Rates - Need for Nutrition and Fitness	\bigcirc	\bigcirc	\bigcirc
Transportation for Healthcare	\bigcirc	\bigcirc	\bigcirc
Drug Prevention Resources	\bigcirc	\bigcirc	\bigcirc
Access for Dental Treatment for Uninsured / Medicaid	\bigcirc	\bigcirc	\bigcirc
Limited Local Health Department Funding	\bigcirc	\bigcirc	\bigcirc
Desire for Urgent Care	\bigcirc	\bigcirc	\bigcirc

Community Health Needs Assessment 2016 - Cass Regional Medical Center (Primary Service Area)

4. Which 2013 CHNA health needs are most pressing today for improvement? (Please select top three needs.)

Lack of Mental Health Providers and Placement of Patients	Access for Dental Treatment for Uninsured / Medicaid
Obesity Rates - Need for Nutrition and Fitness	Limited Local Health Department Funding
Transportation for Healthcare	Desire for Urgent Care
Drug Prevention Resources	

Community Health Needs Assessment 2016 - Cass Regional Medical Center (Primary Service Area)

5. How would Cass Regional Medical Center primary service area residents rate each of the following services? (Please select one box per row.)

	Very Good	Good	Fair	Poor	Very Poor	N/A
Ambulance Services	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Child Care	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Chiropractors	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Dentists	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Emergency Room	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Eye Doctor / Optometrist	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Family Planning Services	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Home Health	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Hospice	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Community Health Needs Assessment 2016 - Cass Regional Medical Center (Primary Service Area)

6. How would Cass Reigonal Medical Center primary service area residents rate each of the following? (Please select one per row.)

	Very Good	Good	Fair	Poor	Very Poor	N/A
Inpatient Services	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Mental Health Services	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Nursing Home	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Outpatient Services	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Pharmacy	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Primary Care	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Public Health Department	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
School Nurse	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Specialists	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Community Health Needs Assessment 2016	- Cass Regional Medical Center (Primary
Service Area)	

7. Throughout the past two years, did you or someone you know receive healthcare services outside of the Cass Regional Medical Center primary service area?

Yes	On't Know
○ No	
If yes, please specify the healthcare services received.	

Community Health Needs Assessment 2016 - Cass Regional Medical Center (Primary Service Area)

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

Abuse / Violence	Mental Illness	Suicide
Alcohol	Nutrition	Teen Pregnancy
Cancer	Obesity	Tobacco Use
Diabetes	Ozone (Air)	Vaccinations
Drugs / Substance Abuse	Physical Exercise	Water Quality
Family Planning	Poverty	Wellness Education
Heart Disease	Respiratory Disease	
Lead Exposure	Sexually Transmitted Diseases	
Other (please specify)		

Community Health Needs Assessment 2016 - Cass Regional Medical Center (Primary Service Area)

9. What is your home zip code?

Community Health Needs Assessment 2016 - Cass Regional Medical Center (Primary Service Area)		
Demographics		
10. For reporting purposes, are you involved in or are you a? (Please select all that apply.)		
Board Member	Elected Official - City / County	Other Health Professional
Business / Merchant	EMS / Emergency	Parent / Caregiver
Case Manager / Discharge Planner	Farmer / Rancher	Pharmacy
Civic Club / Chamber	Health Department	Physician (MD / DO)
Charitable Foundation	Hospital	Physician Clinic
Clergy / Congregational Leader	Housing / Builder	Media (Paper, TV, Radio)
College / University	Insurance	Senior Care / Nursing Home
Consumer Advocate	Labor	Social Worker
Consumers of Healthcare	Law Enforcement	Veteran
Dentist	Low Income / Free Clinics	Welfare / Social Service
Economic Development	Mental Health	
Education Official / Teacher	Nursing	
Other (please specify)		

Community Health Needs Assessment 2016 - Cass Regional Medical Center (Primary Service Area)

You have just completed the 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 . Again, thank you for your participation.

CHNA Report Contact :



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