



**Community Health Needs Assessment**  
Cass County, MO  
On Cass Regional Medical Center



**October 2022**

VVV Consultants LLC  
Olathe, KS

# Community Health Needs Assessment

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# I. Executive Summary

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# I. Executive Summary

## Cass Regional Medical Center – Harrisonville, MO - 2022 Community Health Needs Assessment (CHNA) Wave #4

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 the local residents, to research and prioritize county health needs and document community health delivery success. This health assessment will serve as the foundation for community health improvement efforts for the next three years.

The previous Cass Regional Medical Center CHNA was completed in 2016 and 2019. (Note: The Patient Protection and Affordable Care Act (ACA) require not-for-profit hospitals to conduct a CHNA every three years and adopt an implementation strategy to meet the needs identified by the CHNA). Wave #4 Cass County, Missouri CHNA assessment began April 2022 and was facilitated / created by VVV Consultants, LLC (Olathe, KS) staff under the direction of Vince Vandehaar, MBA.

**Important community CHNA Benefits** for both the local hospital and the health department, are as follows: 1) Increases knowledge of community health needs and resources 2) Creates 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, and 8) fulfills Hospital “Mission” to deliver quality health care.

### County Health Area of Future Focus on Unmet Needs: Cass County, MO

<b>2022 CHNA Priorities - Unmet Needs</b>				
<b>Cass County MO On Behalf of Cass Regional Medical Center</b>				
<b>CHNA Wave #4 Town Hall - August 30, 2022</b>				
<b>Primary Service Area (10 Attendees / 40 votes)</b>				
<b>#</b>	<b>Community Health Needs to Change and/or Improve</b>	<b>Votes</b>	<b>%</b>	<b>Accum</b>
1	<b>Mental Health (Diagnosis, Treatment, Providers)</b>	11	27.5%	28%
2	<b>"Health as a Priority" - Lack of Community Leadership</b>	7	17.5%	45%
3	<b>Obesity (Nutrition / Exercise)</b>	4	10.0%	55%
4	<b>Awareness of Health Services</b>	4	10.0%	65%
5	<b>Visiting Specialists (Card, OBG, Pulm)</b>	3	7.5%	73%
6	<b>Healthcare Transportation</b>	3	7.5%	80%
<b>Total Votes</b>		<b>40</b>	<b>100%</b>	
Other needs receiving votes: Chronic Disease Management, Workforce Staffing, Homeless, Local Employment, and STI Treatment / Testing				

## Town Hall CHNA Findings: Areas of Strengths

Cass County, MO - Community Health Strengths Recalled			
#	Topic	#	Topic
1	Diversity of Locations for Primary Care	6	Diversity of Services Available
2	Financially Strong Hospital	7	Cass County Dental
3	Health Department in Cass County	8	Nursing Homes
4	Senior Enrichment Programs in Harrisionville	9	Pharmacy
5	Nursing Homes	10	Preventative Health / Wellness

## Key CHNA Wave #4 Secondary Research Conclusions found:

**MISSOURI HEALTH RANKINGS:** According to the 2022 Robert Woods Johnson County Health Rankings, the Cass County Primary Service Area (PSA) average rank is 39<sup>th</sup> in Health Outcomes, 65<sup>th</sup> in Health Factors, and 21<sup>st</sup> in Physical Environmental Quality out of the 115 Counties.

**TAB 1.** Cass County average for population is 70,491 (based on 2021). Roughly six percent (5.9%) of the population is under the age of 5, while the population that is over 65 years old is 17.3%. Citizens that speak a language other than English in their home make up 3.7% of the population. Children in single parent households make up a total of 18.3% compared to the rural norm of 20.3%, and 87.7% are living in the same house as one year ago.

**TAB 2.** In Cass County, the average per capita income is \$32,868 while 6.8% of the population is in poverty. The severe housing problem was recorded as 10.3% compared to the rural norm of 12.6%. The food insecurity is 10.6%, and limited access to healthy foods (store) is 9.0%.

**TAB 3.** Children eligible for a free or reduced-price lunch average is 36.1%. Roughly ninety-two percent (92.4%) of students graduated high school in compared to the rural norm of 88.4% and 26.3% have a bachelor's degree or higher.

**TAB 4.** The percent of births where prenatal care started in the first trimester is 77.5% and 7.5% of births have a low birth weight. Continually, 1.4% (compared to the rural norm of 1.7%) was the weighted average of teens who gave birth between 2015-2019. The percent of mothers who were reported as smoking during pregnancy was 12.5%.

**TAB 5.** Cass County average for primary care service coverage ratio is 1 provider (county based officed physician who is a MD and/or DO) to 4,373 residents. The preventable hospital rate per 100,000 (lower is better) for hospital stays with ambulatory-care sensitive conditions is 5,396. Patients who reported “Yes”, they would definitely recommend the hospital was 71.0%. The average time patients spent in the emergency room before being seen was 106 minutes.

**TAB 6.** Cass County average of the Medicare population that was recorded having depression was 19.3%. The age-adjusted suicide mortality rate per 100,000 was 17.2. The number of poor mental health days on average a week (7 days) was recorded as 4.5 days.

**TAB 7a – 7b.** The average of those being reported as obese in Cass County was 36.5%, and the physical inactivity percentage is 27.1%. The percentage of adults who smoke is 20.6%, while the excessive drinking percentage is 19.5% as of 2019. The Medicare hypertension percentage is 55.4%, while the heart failure percentage is 13.0%. The percentage of individuals who were recorded having COPD was 12.8%. Continually, a recorded 8.3% have cancer amongst their Medicare population and 3.6% of individuals who have had a stroke.

**TAB 8.** The adult uninsured rate for Cass County average is 10.2% (based on 2019) compared to the rural norm of only 15.1%.

**TAB 9.** The life expectancy for both males and females is roughly seventy-eight years of age (78.5). The age-adjusted cancer mortality rate per 100,000 recorded was 180.4. The alcohol impaired driving deaths recorded from 2016-2020 for Cass County is 28.4%

**TAB 10.** It was recorded (2021) that an average of 69.3% have access to exercise opportunities. There are 9.9% of the population that have diabetes and 46.0% on average of women seek annual mammography screenings.

## Key CHNA Wave #4 Primary Research Conclusions Found:

Community Feedback from residents, community leaders and providers (N=139) provided the following community insights via an online perception survey:

- Using a Likert scale, 56.5% of Cass County PSA stakeholders would rate the overall quality of healthcare delivery in their community as either Very Good or Good.
- These stakeholders are satisfied with some of the following services: Chiropractors and Pharmacy.
- When considering past CHNA needs, the following topics came up as the most pressing: Mental Health, Lack of Mental Health Providers and Patient Placement, Urgent Care Services, Drug Abuse / Drug Prevention Resources, Healthcare Transportation, Access to Dental Treatment for Uninsured / Medicaid, Access to Primary Care, Awareness of Healthcare Services, Obesity, and Domestic Violence.

<b>Cass County, MO - CHNA YR 2022</b>					
<b>Past CHNA Unmet Needs Identified</b>		<b>Ongoing Problem</b>			<b>Pressing</b>
<b>Rank</b>	<b>Ongoing Problem Area</b>	<b>Votes</b>	<b>%</b>	<b>Trend</b>	<b>Rank</b>
1	Lack of Mental Health Providers and Patient Placement	36	11.0%		2
2	Mental Health (Diagnosis, Treatment, Aftercare)	34	10.4%		1
3	Urgent Care Services (Southern Cass Co)	31	9.5%		3
4	Drug Abuse / Drug Prevention Resources	29	8.8%		4
5	Awareness of Healthcare Services	25	7.6%		8
6	Healthcare Transportation	25	7.6%		5
7	Access to Dental Treatment for Uninsured / Medicaid	21	6.4%		6
8	Obesity - Need for Nutrition & Fitness	20	6.1%		9
9	Suicides (Adolescence-focused)	17	5.2%		13
10	Domestic Violence	16	4.9%		10
11	Access to Primary Care (IM, PEDS, OBG)	15	4.6%		7
12	Poverty (Homelessness / Access to Dental Care)	15	4.6%		11
13	Senior Care Staffing	15	4.6%		12
14	Lack of Funding for Local Health Department	13	4.0%		14
15	Smoking (Vaping)	10	3.0%		16
16	Lack of Healthcare County-Wide Coalition	6	1.8%		15
<b>Totals</b>		<b>328</b>	<b>100.0%</b>		

# II. Methodology

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## II. Methodology

### a) CHNA Scope and Purpose

The federal Patient Protection and Affordable Care Act (ACA) 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 that 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 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.

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 who 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.*).

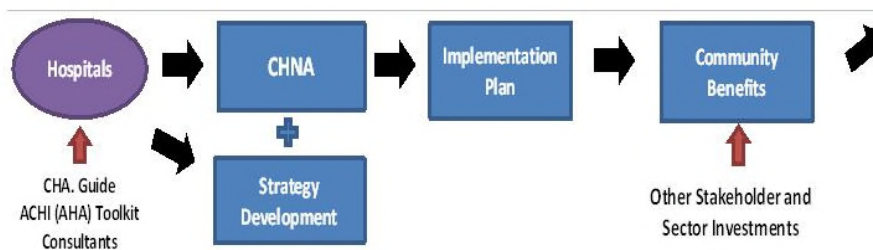
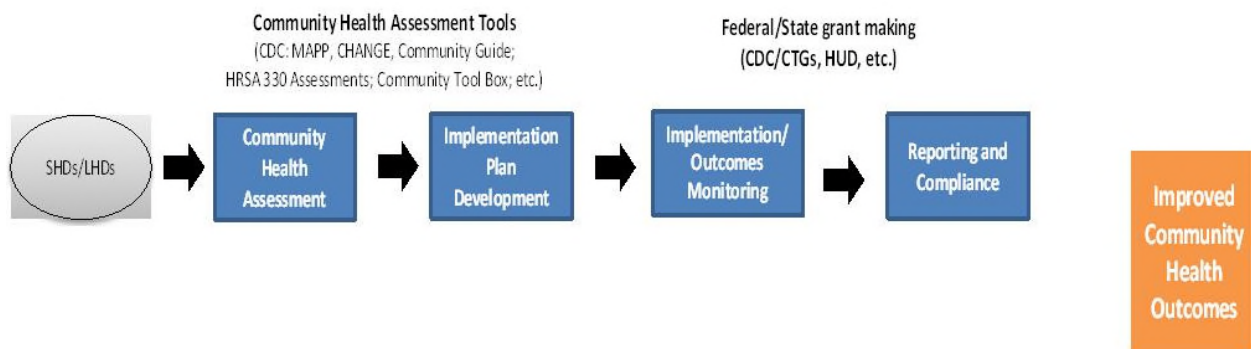
#### **JOB #2: Making a CHNA Widely Available to the Public**

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 Requirements Overview (Notice 2011-52)

### 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 complete a CHNA full report every 3 years for each of its hospital facilities by fiscal June 30th.

#### Determining the Community Served

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

#### Persons Representing the Community Served

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

#### Required Documentation

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

description of all of the community needs identified by the CHNA and an explanation of the process and criteria used in prioritizing such needs; and 6) a description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.

## **Making a CHNA Widely Available to the Public**

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

## **How and When to Adopt an Implementation Strategy**

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

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

## **IRS Community Health Needs Assessment for Charitable Hospital Organizations - Section 501(0)(3) Last Reviewed or Updated: 21-Aug-2020**

In addition to the general requirements for tax exemption under Section 501(c)(3) and Revenue Ruling 69-545 hospital organizations must meet the requirements imposed by Section 501(r) on a facility-by-facility basis in order to be treated as an organization described in Section 501(c)(3). These additional requirements are:

1. Community Health Needs Assessment (CHNA) - Section 501(r)(3),
2. Financial Assistance Policy and Emergency Medical Care Policy - Section 501(r)(4),
3. Limitation on Charges - Section 501(r)(5), and
4. Billing and Collections - Section 501(r)(6).

Medically underserved populations include populations experiencing health disparities or that are at risk of not receiving adequate medical care because of being uninsured or underinsured, or due to geographic, language, financial, or other barriers. Populations with language barriers include those with limited English proficiency. Medically underserved populations also include those living within a hospital facility’s service area but not receiving adequate medical care from the facility because of cost, transportation difficulties, stigma, or other barriers.

Additionally, in determining its patient populations for purposes of defining its community, a hospital facility must take into account all patients without regard to whether (or how much) they or their insurers pay for the care received or whether they are eligible for assistance under the hospital facility's financial assistance policy. If a hospital facility consists of multiple buildings that operate under a single state license and serve different geographic areas or populations, the community served by the hospital facility is the aggregate of these areas or populations.

### **Additional Sources of Input**

In addition to soliciting input from the three required sources, a hospital facility may solicit and take into account input received from a broad range of persons located in or serving its community. This includes, but is not limited to:

- Health care consumers and consumer advocates
- Nonprofit and community-based organizations
- Academic experts
- Local government officials
- Local school districts
- Health care providers and community health centers
- Health insurance and managed care organizations,
- Private businesses, and
- Labor and workforce representatives.

Although a hospital facility is not required to solicit input from additional persons, it must take into account input received from any person in the form of written comments on the most recently conducted CHNA or most recently adopted implementation strategy.

### **Collaboration on CHNA Reports**

A hospital facility is permitted to conduct its CHNA in collaboration with other organizations and facilities. This includes related and unrelated hospital organizations and facilities, for-profit and government hospitals, governmental departments, and nonprofit organizations.

In general, every hospital facility must document its CHNA in a separate CHNA report unless it adopts a joint CHNA report. However, if a hospital facility is collaborating with other facilities and organizations in conducting its CHNA, or if another organization has conducted a CHNA for all or part of the hospital facility's community, portions of a hospital facility's CHNA report may be substantively identical to portions of the CHNA reports of a collaborating hospital facility or other organization conducting a CHNA, if appropriate under the facts and circumstances.

If two hospital facilities with overlapping, but not identical, communities collaborate in conducting a CHNA, the portions of each hospital facility's CHNA report relevant to the shared areas of their communities might be identical. So, hospital facilities with different communities, including general and specialized hospitals, may collaborate and adopt substantively identical CHNA reports to the extent appropriate. However, the CHNA reports of collaborating hospital facilities should differ to reflect any material differences in the communities served by those hospital facilities. Additionally, if a governmental public health department has conducted a CHNA for all or part of a hospital facility's community, portions of the hospital facility's CHNA report may be substantively identical to those portions of the health department's CHNA report that address the hospital facility's community.

Collaborating hospital facilities may produce a joint CHNA report as long as all of the collaborating hospital facilities define their community to be the same and the joint CHNA report contains all of the same basic information that separate CHNA reports must contain. Additionally, the joint CHNA report must be clearly identified as applying to the hospital facility.

### **Joint Implementation Strategies**

As with the CHNA report, a hospital facility may develop an implementation strategy in collaboration with other hospital facilities or other organizations. This includes but is not limited to related and unrelated hospital organizations and facilities, for-profit and government hospitals, governmental departments, and nonprofit organizations. In general, a hospital facility that collaborates with other facilities or organizations

in developing its implementation strategy must still document its implementation strategy in a separate written plan that is tailored to the particular hospital facility, taking into account its specific resources. However, a hospital facility that adopts a joint CHNA report may also adopt a joint implementation strategy. With respect to each significant health need identified through the joint CHNA, the joint implementation strategy must either describes how one or more of the collaborating facilities or organizations plan to address the health need or identify the health need as one the collaborating facilities or organizations do not intend to address. It must also explain why they do not intend to address the health need.

A joint implementation strategy adopted for the hospital facility must also: Be clearly identified as applying to the hospital facility, Clearly identify the hospital facility's role and responsibilities in taking the actions described in the implementation strategy as well as the resources the hospital facility plans to commit to such actions, and Include a summary or other tool that helps the reader easily locate those portions of the joint implementation strategy that relate to the hospital facility.

### **Adoption of Implementation Strategy**

An authorized body of the hospital facility must adopt the implementation strategy. See the discussion of the Financial Assistance Policy below for the definition of an authorized body.· This must be done on or before the 15th day of the fifth month after the end of the taxable year in which the hospital facility finishes conducting the CHNA. This is the same due date (without extensions) of the Form 990.

**Acquired Facilities** A hospital organization that acquires a hospital facility (through merger or acquisition) must meet the requirements of Section 501(r)(3) with respect to the acquired hospital facility by the last day of the organization's second taxable year beginning after the date on which the hospital facility was acquired. In the case of a merger that results in the liquidation of one organization and survival of another, the hospital facilities formerly operated by the liquidated organization will be considered "acquired," meaning they will have until the last day of the second taxable year beginning after the date of the merger to meet the CHNA requirements. Thus, the final regulations treat mergers equivalently to acquisitions.

### **New Hospital Organizations**

An organization that becomes newly subject to the requirements of Section 501(r) because it is recognized as described in Section 501(c)(3) and is operating a hospital facility must meet the requirements of Section 501(r)(3) with respect to any hospital facility by the last day of the second taxable year beginning after the latter of: The effective date of the determination letter recognizing the organization as described in Section 501(c)(3), or · The first date that a facility operated by the organization was licensed, registered, or similarly recognized by a state as a hospital.

### **New Hospital Facilities**

A hospital organization must meet the requirements of Section 501(r)(3), with respect to a new hospital facility it operates by the last day of the second taxable year beginning after the date the facility was licensed, registered, or similarly recognized by its state as a hospital.

### **Transferred/Terminated Facilities**

A hospital organization is not required to meet the requirements of Section 501(r)(3) with respect to a hospital facility in a taxable year if the hospital organization transfers all ownership of the hospital facility to another organization or otherwise ceases its operation of the hospital facility before the end of the taxable year. The same rule applies if the hospital facility ceases to be licensed, registered, or similarly recognized as a hospital by a state during the taxable year. By extension, a government hospital organization that voluntarily terminates its Section 501(c)(3) recognition as described in Rev. Proc. 2018-5 (updated annually) is no longer considered a hospital organization for purposes of Section 501(r) and therefore is not required to meet the CHNA requirements during the taxable year of its termination.

## **Public Health Criteria:**

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

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

#### **DOMAIN 1 includes 4 STANDARDS:**

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

#### **Required CHNA Planning Process Requirements:**

- a. Participation by a wide range of community partners.
- b. Data / information provided to participants in CHNA planning process.
- c. Evidence of community / stakeholder discussions to identify issues & themes. Community definition of a "healthy community" included along with list of issues.
- d. Community assets & resources identified.
- e. A description of CHNA process used to set priority health issues.

#### **Seven Steps of Public Health Department Accreditation (PHAB):**

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

## MAPP Process Overview

**Mobilizing for Action through Planning and Partnerships (MAPP)** is a flexible strategic planning tool for improving the health and quality of life for the community. Like most strategic planning, MAPP involves organizing partners, creating a vision and shared values, collecting data, identifying areas for improvement, and developing goals and strategies to address them. Through collaboration with partners and the community, MAPP allows us to focus our efforts and work on issues to strengthen the local public health system.

**The MAPP process includes the following six phases.** It's important to note that MAPP has no set end point and will continue throughout the life cycle of the Community Health Improvement Plan (CHIP).

1. In this first phase, **Organize for Success/Partnership Development**, various sectors of the community with established relationships are reviewed, leading to the identification of areas for partnership development and creation of new relationships to enhance the MAPP process.
2. In the second phase, **Visioning**, a shared community vision and common values for the MAPP process are created.
3. In the third phase, **Four MAPP Assessments**, data is collected from existing and new sources about the health of our community, which results in a Community Health Assessment (CHA).
4. In the fourth phase, **Identify Strategic Issues**, community partners and health professionals select issues based on data collected from the third phase that are critical to the local public health system and align with the vision from the second phase.
5. In the fifth phase, **Formulate Goals and Strategies**, potential ways to address the strategic issues are identified by the community along with the setting of achievable goals. The final result is a Community Health Improvement Plan (CHIP).
6. The sixth and final phase of the MAPP process is the **Action Cycle**, which is where the work happens for meeting the objectives set in the previous phase. Through these collaborative efforts, the health of the community is improved.





## Drivers of Health Assessment & Improvement Planning

Different drivers have led health agencies and organizations to institutionalize community health assessment and community health improvement planning in recent years.

### National Voluntary Accreditation Requirements

In 2011, the Public Health Accreditation Board (PHAB), in partnership with key public health organizations, launched a new national voluntary accreditation program for state, tribal, local, and territorial health departments. The standards and measures encompass 12 domains of performance and include a comprehensive community health assessment (Domain 1, Standard 1.1) and a community health improvement plan (Domain 5, Standard 5.2). A documented community health assessment and improvement plan are two of the three prerequisites for applying to PHAB. PHAB requires that these processes be conducted collaboratively and that the documents be dated within the last five years. More information is available from [PHABexternal icon](#) and [CDC](#).

### CDC Grant Requirements

CDC grants often require or encourage completing a community health assessment or improvement plan. In some cases, these plans provide valuable information for identifying priority health issues or needs. Examples include ; [National Public Health Improvement Initiative \(NPHII\)](#); [Community Transformation Grants or REACH Core](#)

The Public Health Accreditation board defines *community health assessment* as a systematic examination of the health status indicators for a given population that is used to identify key problems and assets in a community. The ultimate goal of a community health assessment is to develop strategies to address the community's health needs and identified issues. A variety of tools and processes may be used to conduct a community health assessment; the essential ingredients are community engagement and collaborative participation. Turnock B. *Public Health: What It Is and How It Works*. Jones and Bartlett, 2009, as adapted in [Public Health Accreditation Board Acronyms and Glossary of Terms Version 1.0 Cdc-pdf\[PDF – 536KB\]External](#), July 2011.

The Catholic Health Association defines a *community health needs assessment* as a systematic process involving the community to identify and analyze community health needs and assets in order to prioritize these needs, and to plan and act upon unmet community health needs.” Catholic Health Association, [Guide to Assessing and Addressing Community Health Needs Cdc-pdf\[PDF-1.5MB\]External](#), June 2013.

## Social Determinants of Health

What Are Social Determinants of Health?



[Social determinants of health \(SDOH\)external icon](#) are defined as the conditions in which people are born, grow, live, work, and age. SDOH are shaped by the distribution of money, power, and resources throughout local communities, nations, and the world. Differences in these conditions lead to health inequities or the unfair and avoidable differences in health status seen within and between countries.

[Healthy People 2030external icon](#) includes SDOH among its leading health indicators. One of Healthy People 2030's five overarching goals is specifically related to SDOH: Create social, physical, and economic environments that promote attaining the full potential for health and well-being for all.

Through broader awareness of how to better incorporate SDOH throughout the multiple aspects of public health work and the [10 Essential Public Health Services](#), public health practitioners can transform and strengthen their capacity to advance health equity. Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health, such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

## 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**

**280 Rock Haven Rd, Harrisonville, MO 64701**

**Phone: (816) 380-3474**

**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

- Audiology
- Behavioral Health Unit (BHU)
- Cardiology (clinic and cardiac procedures include ECHO, Stress test, and Atrial Fibrillation)
- Cardiac Rehabilitation
- Case Management
- Dermatology
- Diabetes Education
- Ear, Nose and Throat Clinic
- Emergency Department
  - Level III Trauma Center
  - Acute Stroke Ready Hospital
  - Telemedicine Services (Psychiatric, Stroke and Neurology)
- Endocrinology
- Endoscopy
- Family Practice Clinics (7 Locations in Cass and Johnson Counties)
- Gastroenterology
- General Surgery Clinic
- Hematology
- Hospitalists Services
- Intensive Care Unit (ICU)
- Infusion Therapy
- Laboratory
- Medical Imaging (MRI, CT, Diagnostic, Mammography, Bone Density, Nuclear Medicine, Ultrasound – including ECHO and Vascular, and PET/CT)
- Medical / Surgical Unit
- Nephrology
- Neurology
- New Vision Drug & Alcohol Withdrawal Treatment
- Nutrition Counseling
- Obstetrics and Gynecology
- Oncology – Cancer Care
- Ophthalmology
- Orthopedics
- Pain Management
- Pharmacy
- Podiatry
- Pulmonary Rehabilitation
- Respiratory Services
- Sleep Lab
- Sports Medicine
- Surgical Services
- Therapy Services
  - Occupational Therapy
  - Physical Therapy (Lymphedema Therapy, Vestibular Rehabilitation Therapy, and Industrial Medicine)
  - Speech Therapy
- Urology
- Weight Management
- Wound Care

## **Cass County Health Department Profile**

**300 S Main St, Harrisonville, MO 64701**

**Health Director: Sarah Czech**

### **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:

VVV Consultants LLC 601 N. Mahaffie, Olathe, KS 66061 (913) 302-7264

VVV Consultants LLC is an Olathe, KS based "boutique" healthcare consulting firm specializing in Strategy, Research and Business Development services. To date we have completed 70 unique community CHNA's in KS, MO, IA and NE (references found on our website [VandehaarMarketing.com](http://VandehaarMarketing.com))

#### Introduction: Who We Are

Background and Experience



**Vince Vandehaar, MBA – Principal**  
VVV Consultants LLC – start 1/1/09 \*  
– Adjunct Full Professor @ Avila & Webster Universities  
– 35+ year veteran marketer, strategist and researcher  
– Saint Luke's Health System, BCBS of KC,  
– Hometown: Bondurant IA



**Cassandra Kahl, BHS – Director, Project Management – Nov 2020**  
University of Kansas – Health Sciences  
Park University - MHA  
Hometown: Maple, WI



**Hannah Foster MBA – Associate Consultant – April 2022**  
MO Southern State – Joplin, MO  
Avila University – MBA with HC  
Hometown: Lee's Summit, MO

VVV Consultants LLC (EIN 27-0253774) began as "VVV Research & Development INC" in early 2009 and converted to an LLC on 12/24/12. Web: [VandehaarMarketing.com](http://VandehaarMarketing.com)

**Our Mission:** to research, facilitate, train, and create processes to improve healthcare delivery and uncover strategic "critical success" initiatives.

**Our Vision:** meeting today's challenges with the voice of the market.

#### Our Values :

"Community" – Industry engagement...membership AMA KC, ACHE, EPBA, Forum and SHSMD.

"Stewardship" – Fair fees based on client, project scope, turnaround time, etc.

"Integrity" – Trustworthy delivery with numerous client recommendations / endorsements.

"Experience" – Skilled consulting; Marketing careers. We understand business because we have been there!

"Growth" – Process-driven; ongoing innovational delivery.



## II. Methodology

### c) CHNA and Town Hall Research Process

Wave #4 Community Health Needs Assessment (CHNA) process began in March of 2022 for Cass Regional Medical Center (CRMC) in Harrisonville, Missouri to meet Federal IRS CHNA requirements.

In early February 2022, a meeting was called amongst the CRMC leaders to review CHNA collaborative options. <Note: VVV Consultants LLC from Olathe, KS was asked to facilitate this discussion with the following agenda: VVV CHNA experience, review CHNA requirements (regulations) and discuss CHNA steps/options to meet IRS requirements and to discuss next steps.> Outcomes from discussion led to the CRMC to request VVV Consultants LLC to complete a CHNA IRS aligned comprehensive report.

#### VVV CHNA Deliverables:

- Document Hospital Primary Service Area - meets the 80-20 Patient Origin Rule.
- Uncover / document basic secondary research county health data, organized by 10 tabs.
- Conduct / report CHNA Community Check-in Feedback Findings (primary research).
- Conduct a Town Hall meeting to discuss with community secondary & primary data findings leading to determining (prioritizing) county health needs.
- Prepare & publish CHNA report which meets ACA requirements.

To ensure proper PSA Town Hall representation (that meets the 80-20 Patient Origin Rule), a patient origin three-year summary was generated documenting patient draw by zips as seen below:

Cass Regional Medical Center - Define PSA					Inpatients			ER			Clinic			Outpatients		
Source: MHA, FFY 2019 - 2021		244,163	Totals - IP/OP		786	764	710	11,591	10,015	9,980	19,798	37,358	54,206	32,421	31,267	35,267
Patient Zip Code	County	3YR TOT	%	Accum	FFY19	FFY20	FFY21	FFY19	FFY20	FFY21	FFY19	FFY20	FFY21	FFY19	FFY20	FFY21
64701	Cass	71,754	29.4%	29.4%	301	289	233	4846	3858	3929	4019	7746	11156	12,164	11,057	12,156
64080	Cass	26,565	10.9%	40.3%	45	50	41	567	529	545	3382	6180	9126	1,931	1,928	2,241
64078	Cass	20,584	8.4%	48.7%	43	63	44	980	830	844	1597	3061	4823	2,713	2,554	3,032
64747	Cass	19,586	8.0%	56.7%	57	41	58	1028	916	841	1462	3052	4408	2,276	2,570	2,877
64725	Cass	11,950	4.9%	61.6%	32	32	37	565	510	512	922	1779	2682	1,529	1,589	1,761
64012	Cass	9,848	4.0%	65.6%	22	32	33	838	333	335	753	1503	2126	1,189	1,233	1,451
64720	Bates	9,354	3.8%	69.5%	32	33	35	481	439	458	603	1184	1752	1,405	1,311	1,621
64040	Johnson	7,825	3.2%	72.7%	6	10	10	146	158	169	937	1758	2752	564	554	761
64083	Cass	7,511	3.1%	75.8%	20	11	10	210	243	231	593	1196	1717	921	1,083	1,276
64730	Bates	6,581	2.7%	78.5%	17	17	28	274	220	218	524	826	1175	969	1,068	1,245
64742	Bates	6,361	2.6%	81.1%	22	28	26	281	288	276	577	915	1339	823	843	943
64746	Cass	5,270	2.2%	83.2%	14	10	26	273	262	260	317	670	1027	763	762	886

**To meet IRS aligned CHNA requirements and meet Public Health accreditation criteria stated earlier, a four-phase methodology was followed:**

**Phase I—Discovery:**

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

**Phase II—Qualify Community Need:**

A) Conduct secondary research to uncover the following historical community health status for the primary service area. Use valid health indicator sources cited to document current state of county health organized as follows:

<b>Health Indicators - Secondary Research</b>
<b>TAB 1. Demographic Profile</b>
<b>TAB 2. Economic Profile</b>
<b>TAB 3. Educational Profile</b>
<b>TAB 4. Maternal and Infant Health Profile</b>
<b>TAB 5. Hospital / Provider Profile</b>
<b>TAB 6. Behavioral / Mental Health Profile</b>
<b>TAB 7. High-Risk Indicators &amp; Factors</b>
<b>TAB 8. Uninsured Profile</b>
<b>TAB 9. Mortality Profile</b>
<b>TAB 10. Preventative Quality Measures</b>

B) Survey Community Stakeholders to inquire about past CHNA unmet needs and obtain current health delivery trends and document on going health issues.

**Phase III—Quantify Community Need:**

Conduct a 90-minute Town Hall meeting with required community 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 unmet health needs was administered.

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

Complete full documentation to create each CHNA sections documented in Table of Contents. Publish hard copy reports (2) for client usage plus create a full CHNA report pdf to be posted on hospital website to meet government CHNA regulation criteria.

**Detail CHNA Development Steps Include:**

<b>Development Steps to Create Comprehensive Community Health Needs Assessment</b>	
<b>Step # 1 Commitment</b>	<i>Determine interest level of area healthcare leaders (Hospital, Health Dept., Mental Health Centers, Schools, Churches, Physicians etc.), prepare project quote.</i>
<b>Step # 2 Planning</b>	<i>Prepare brief CHNA Project Work Calendar - list goals, objectives, purpose, outcome, roles, community involvement, etc. Hold Community Kick-off meeting.</i>
<b>Step # 3 Secondary Research</b>	<i>Collect &amp; Report Community Health Published Facts. Gather data health practice data from published secondary research sources i.e. census, county health records, behavioral risk factors surveillance, etc.</i>
<b>Step # 4a Primary Research - Town Hall prep</b>	<i>Collect Community Opinions. (Quantitative Research). Gather Stakeholders / Community opinions regarding community health needs and healthcare practices.</i>
<b>Step # 4b Primary Research - Conduct Town Hall</b>	<i>Conduct "Conversation with Community" Town Hall (Qualitative Research). Review Secondary &amp; Primary Data findings. Facilitate community conversation to build consensus; discuss opinions / identify health needs.</i>
<b>Steps # 5 Reporting</b>	<i>Prepare/Present comprehensive CHNA report (to community leaders), facilitate development of CHNA Implementation Plan (Actions to improve health). &lt; Note: Formal report will follow IRS Notice 2011-52 regs &amp; PHAB requirements. &gt;</i>
VVV Consultants, LLC Olathe, KS 913 302-7264	

## Data & Benchmarks Review

Community health assessments typically use both primary and secondary data to characterize the health of the community:

- **Primary data** are collected first-hand through surveys, listening sessions, interviews, and observations.
- **Secondary data** are collected by another entity or for another purpose.
- **Indicators** are secondary data that have been analyzed and can be used to compare rates or trends of priority community health outcomes and determinants.

Data and indicator analyses provide descriptive information on demographic and socioeconomic characteristics; they can be used to monitor progress and determine whether actions have the desired effect. They also characterize important parts of health status and health determinants, such as behavior, social and physical environments, and healthcare use.

Community health assessment indicators should be.

- Methodologically sound (valid, reliable, and collected over time)
- Feasible (available or collectable)
- Meaningful (relevant, actionable, and ideally, linked to evidence-based interventions)
- Important (linked to significant disease burden or disparity in the target community)

Jurisdictions should consider using data and indicators for the smallest geographic locations possible (e.g., county-, census block-, or zip code-level data), to enhance the identification of local assets and gaps.

Local reporting (County specific) sources of community-health level indicators:


CHNA Detail Sources
Quick Facts - Business
Centers for Medicare and Medicaid Services
CMS Hospital Compare
County Health Rankings
Quick Facts - Geography
Kansas Health Matters
Kansas Hospital Association (KHA)
Quick Facts - People
U.S. Department of Agriculture - Food Environment Atlas
U.S. Center for Disease Control and Prevention

## Sources of community-health level indicators:

- [County Health Rankings and Roadmaps](#)  
The annual Rankings measure vital health factors, including high school graduation rates, obesity, smoking, unemployment, access to healthy foods, the quality of air and water, income inequality, and teen births in nearly every county in America. They provide a snapshot of how health is influenced by where we live, learn, work and play.
- [Prevention Status Reports \(PSRs\)](#)  
The PSRs highlight—for all 50 states and the District of Columbia—the status of public health policies and practices designed to prevent or reduce important public health problems.
- [Behavioral Risk Factor Surveillance System](#)  
The world's largest, ongoing telephone health survey system, tracking health conditions and risk behaviors in the United States yearly since 1984. Data are collected monthly in all 50 states, the District of Columbia, Puerto Rico, the US Virgin Islands, and Guam.
- The [Selected Metropolitan/ Micropolitan Area Risk Trends](#) project was an outgrowth of BRFSS from the increasing number of respondents who made it possible to produce prevalence estimates for smaller statistical areas.
- [CDC Wonder](#) Databases using a rich ad-hoc query system for the analysis of public health data. Reports and other query systems are also available.
- [Center for Applied Research and Engagement Systems external icon](#)  
Create customized interactive maps from a wide range of economic, demographic, physical and cultural data. Access a suite of analysis tools and maps for specialized topics.
- [Community Commons external icon](#)  
Interactive mapping, networking, and learning utility for the broad-based healthy, sustainable, and livable communities' movement.
- [Dartmouth Atlas of Health Care external icon](#)  
Documented variations in how medical resources are distributed and used in the United States. Medicare data used to provide information and analysis about national, regional, and local markets, as well as hospitals and their affiliated physicians.
- [Disability and Health Data System](#)  
Interactive system that quickly helps translate state-level, disability-specific data into valuable public health information.
- [Heart Disease and Stroke Prevention's Data Trends & Maps](#)  
View health indicators related to heart disease and stroke prevention by location or health indicator.
- [National Health Indicators Warehouse external icon](#)  
Indicators categorized by topic, geography, and initiative.
- [US Census Bureau external icon](#)  
Key source for population, housing, economic, and geographic information.
- [US Food Environment Atlas external icon](#)  
Assembled statistics on food environment indicators to stimulate research on the determinants of food choices and diet quality, and to provide a spatial overview of a community's ability to access healthy food and its success in doing so.
- [Centers for Medicare & Medicaid Services Research and Data Clearinghouse external icon](#)  
Research, statistics, data, and systems.
- [Environmental Public Health Tracking Network](#)  
System of integrated health, exposure, and hazard information and data from a variety of national, state, and city sources.
- [Health Research and Services Administration Data Warehouse external icon](#)  
Research, statistics, data, and systems.
- [Healthy People 2030 Leading Health Indicators external icon](#)  
Twenty-six leading health indicators organized under 12 topics.
- [Kids Count external icon](#)  
Profiles the status of children on a national and state-by-state basis and ranks states on 10 measures of well-being; includes a [mobile site external icon](#).
- [National Center for Health Statistics](#)  
Statistical information to guide actions and policies.
- [Pregnancy Risk Assessment and Monitoring System](#)  
State-specific, population-based data on maternal attitudes and experiences before, during, and shortly after pregnancy.
- [Web-based Injury Statistics Query and Reporting System \(WISQARS\)](#)  
Interactive database system with customized reports of injury-related data.
- [Youth Risk Behavior Surveillance System](#)  
Monitors six types of health-risk behaviors that contribute to the leading causes of death and disability among youth and adults.

Specific Project CHNA roles, responsibility and timelines are documented by the following calendar.

<b>Cass Regional Medical Center - Harrisonville, MO</b>			
<b>VVV CHNA Wave #4 Work Plan - Year 2022</b>			
<b>Project Timeline &amp; Roles - Working Draft as of 3/30/22</b>			
<b>Step</b>	<b>Timeframe</b>	<b>Lead</b>	<b>Task</b>
1	February 2022	VVV / Hosp	Sent Leadership information regarding CHNA Wave #4 for review.
2	2/25/2022	Hosp	Select CHNA Wave #4 Option B. Approve / Sign VVV CHNA quote
3	3/31/2022	VVV	Send out <b>REQCommInvite Excel</b> file. HOSP & HLTH Dept to fill in PSA Stakeholders Names /Address /Email
4	4/1/2022	VVV	Hold Kick-off Meeting & Request Hospital Client to send IHA PO reports for FFY 19, 20 and 21. In addition, request hospital to complete 3 year historical PSA IP/OP/ER/Clinic patient origin file (Use <b>ZipPSA_3yrPOorigin.xls</b> )
5	By 4/05/2022	VVV	Prepare CHNA Wave#4 Stakeholder Feedback "online link". Send link for hospital review.
6	April - May 2022	VVV	Assemble & complete Secondary Research - Find / populate 10 TABS. Create Town Hall ppt for presentation.
7	4/25/2022	VVV / Hosp	Prepare/send out PR story#1 / Email#1 Request announcing upcoming CHNA work to CEO to review/approve.
8	Before 5/2/2022	VVV / Hosp	Place PR #1 story to local media CHNA survey announcing "online CHNA Wave #4 feedback". Request public to participate. Send E Mail request to local stakeholders
9	<b>5/2/2022</b>	VVV	Launch / conduct online survey to stakeholders: Hospital will e-mail invite to participate to all stakeholders. <b>Cut-off 5/30/2022 for Online Survey</b>
10	5/27/2022	Hosp	Prepare/send out to leaders the PR#2 story / Email#2 Request announcing upcoming Community TOWN HALL invite letter and place local AD.
11	By 6/02/2022	VVV / Hosp	Place PR #2 story to local media / Send Email to local stakeholders announcing / requesting participation in upcoming Town Hall Event.
12	6/21/2022	ALL	Conduct conference call (time TBD) with Hospital / Public HLTH to review Town Hall data / flow
13	<b>6/23/2022</b>	VVV	Conduct CHNA Town Hall for a working <b>Lunch OR Dinner (TBD)</b> . Review & Discuss Basic health data plus RANK Health Needs.
14	On or Before 7/15/22	VVV	Complete Analysis - Release Draft 1- seek feedback from Leaders (Hospital & Health Dept.)
15	On or Before 7/30/22	VVV	Produce & Release final CHNA report. Hospital will post CHNA online (website).
16	On or Before 9/15/2022	VVV	Conduct Client Implementation Plan PSA Leadership meeting
17	On or Before 9/30/2022	VVV	Hold Board Meetings discuss CHNA needs, create & adopt an implementation plan. Communicate CHNA plan to community.



**Community Health Needs Assessment  
Town Hall Meeting – Cass County MO  
on behalf of Cass Regional Medical Center**

**VVV Consultants LLC**  
Olathe, Kansas 66061

VandehaarMarketing.com  
913-302-7264

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**TEAM Table Assignments**

Cass County, MO 2022 CHNA Town Hall - 8/30 (5:30-7pm)						
#	Team	Lead	Last Name	First Name	Organization	Title
1	A	##	Wiseman	Toni	CRMC	Trustee
2	A		Land	Patty	Cass Regional Medical Center	Admin Practice Man & Ancillaries
3	A		Pugh	Linnette		
4	B	##	Czech	Sarah	Cass County Health Dept	Director
5	B		Catron	Amy	Cass Regional Medical Center	Trustee
6	B		Johnson	Ruth	Raymore Peculiar schools	Board of Education
7	C	##	Lang	Chris	Cass Regional Medical Center	CEO
8	C		Hernandez	Emily	Western Governors University	Supervisor Clinical Operations
9	C		Johnson	Jerry	Cass Regional Medical Center	Board Trustee
10	C		Sebelien	Jay	Cass Regional Medical Center	CNO

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**Community Health Needs Assessment (CHNA)  
Onsite Town Hall Discussion Agenda**

- I. **Opening / Introductions** (5 mins)
- II. **Review CHNA Purpose and Process** (5 mins)
- III. **Review Current County "Health Status"**
  - Secondary Data by 10 TAB Categories
  - Review Community Feedback Research (40 mins)
- IV. **Collect Community Health Perspectives**
  - Hold Community Voting Activity
  - Determine Most Important Unmet Needs (35 mins)
- V. **Close / Next Steps** (5 mins)

3

**Introduction: Who We Are**  
Background and Experience





**Vince Vandehaar, MBA – Principal**  
VVV Consultants LLC – start 1/1/09 \*

- Adjunct Full Professor @ Avila & Webster Universities
- 35+ year veteran marketer, strategist and researcher
- Saint Luke's Health System, BCBS of KC,
- Tillinghast Towers Perrin, and Lutheran Mutual Life
- Hometown: Bondurant IA



**Hannah Foster – Associate Consultant**  
VVV Consultants LLC – April 2022

- MO Southern State – Joplin, MO
- Avila University – MBA with HC
- Hometown: Lee's Summit, MO



**Cassandra Kahl, BHS – Director, Project Management**  
VVV Consultants LLC – Nov 2020

- University of Kansas – Health Sciences
- Park University - MHA
- Hometown: Maple, WI

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## Town Hall Participation (You)

- ALL attendees practice “Safe Engagement”. We will work together - Table Teams
- ALL attendees welcome to share. Engaging Conversation (No right or wrong answer)
  - Parking Lot
- ALL Take Notes – Important Health Indicators
- Please give truthful responses – Serious Community Conversation. Here to Update Unmet Needs List.
- Have a little fun along the way

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## II. Review of a CHNA

- **A Community Health Needs Assessment (CHNA) is a....**
  - Systematic collection, assembly, analysis, and dissemination of information about the health of the community.
- **A CHNA's role is to....**
  - Identify factors that affect the health of a population and determine the availability of resources to adequately address those factors.
- **Purpose of a CHNA – Why Conduct One?**
  - Determine health-related trends and issues of the community
  - Understand / evaluate health delivery programs in place.
  - Meet Federal requirements – both local hospital and health department
  - Develop Implementation Plan strategies to address unmet health needs (4-6 weeks after Town Hall)

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## A Conversation with the Community & Stakeholders

*Community members and organizations invited to CHNA Town Hall*

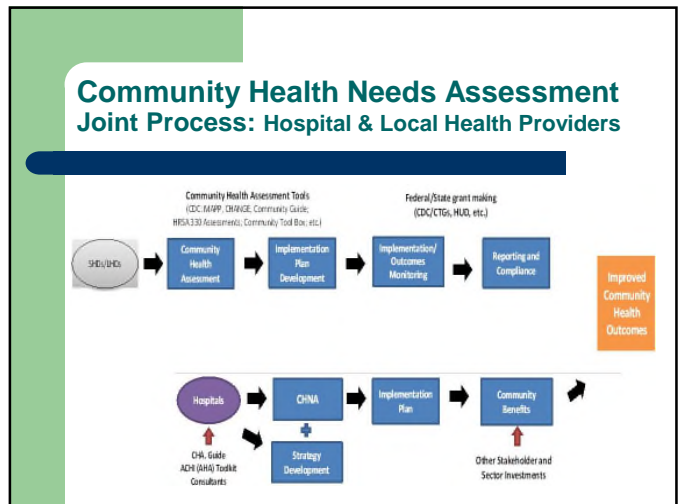
**Consumers:** Uninsured/underinsured people, Members of at-risk populations, Parents, caregivers and other consumers of health care in the community, and Consumer advocates.

**Community leaders and groups:** The hospital organization's board members, Local clergy and congregational leaders, Presidents or chairs of civic or service clubs – Chamber of Commerce, veterans' organizations, Lions, Rotary, etc., Representatives from businesses – owners/CEO's of large businesses (local or large corporations with local branches.), Business people & merchants (e.g., who sell tobacco, alcohol, 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, City/Community planners and development officials, Individuals with business and economic development experience, Welfare and social service agency staff, Housing 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.

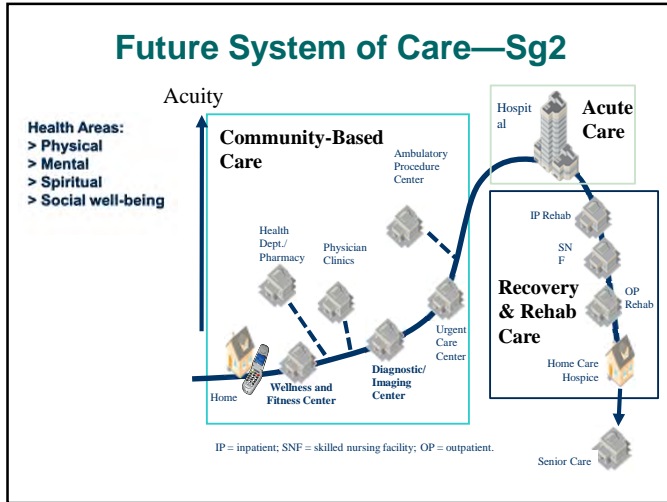
**Other providers:** Physicians, Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services, Leaders from Catholic Charities and other faith-based service providers, Mental health providers, Oral health providers, Health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

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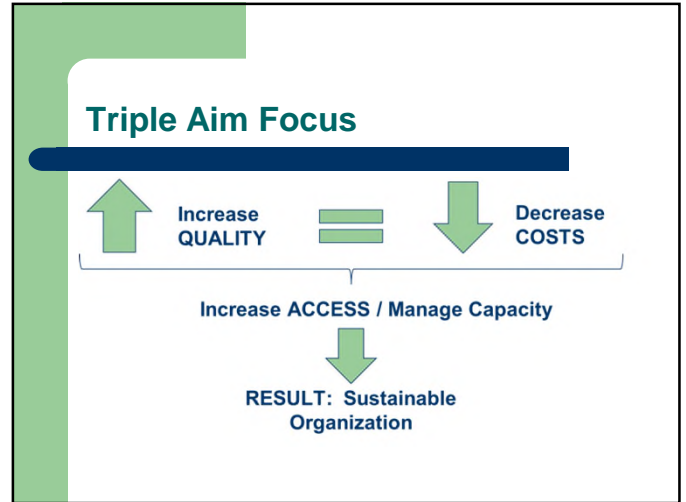


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## II. IRS Hospital CHNA Written Report Documentation – Table of Contents

- 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 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
- A **prioritized description of all of the community needs identified by the CHNA.**
- A description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA

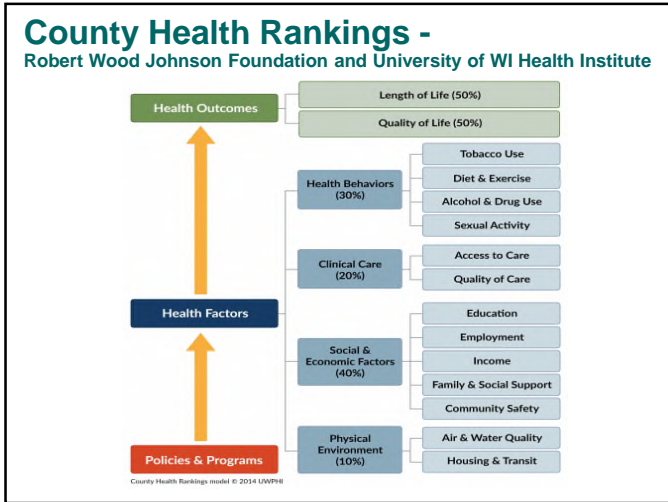
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## III. Review Current County Health Status: Secondary Data by 10 Tab Categories & State Rankings

Trends: Good Same Poor

Health Indicators - Secondary Research
TAB 1. Demographic Profile
TAB 2. Economic Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospital / Provider Profile
TAB 6. Behavioral / Mental Health Profile
TAB 7. High-Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

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

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### IV. Collect Community Health Perspectives Thoughts/Opinions?

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

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### Community Health Needs Assessment

## Questions? Next Steps?

VVV Consultants LLC  
601 N Mahaffie  
Olathe, KS 66061

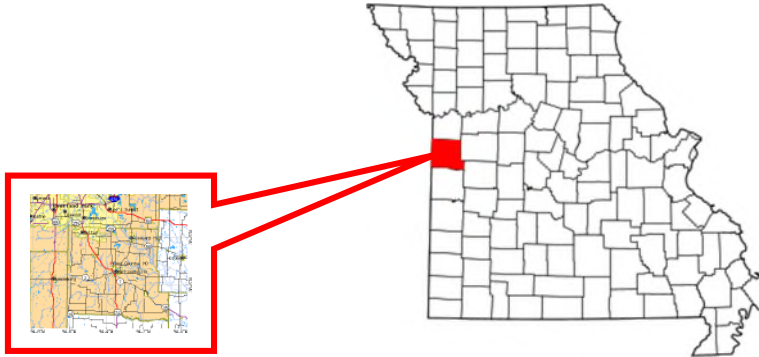
VVV@VandelaarMarketing.com  
HCF@VandelaarMarketing.com  
CJK@VandelaarMarketing.com  
(913) 302-7264

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## II. Methodology

### d) Community Profile (A Description of Community Served)

#### Cass County, Missouri Community Profile



The population of Cass County was estimated to be 107,709 citizens in 2019 and a population density of 155 persons per square mile. Cass County's major cities are Archie, Baldwin Park, Belton, Cleveland, Creighton, Drexel, East Lynne, Freeman, Garden City, Gunn City, Harrisonville, Kansas City, Lake Annette, Lake Winnebago, Lees Summit, Loch Lloyd, Peculiar, Pleasant Hill, Raymore, Riverview Estates, Strasburg and West Line.

#### **Cass County (MO) Public Airports<sup>1</sup>**

Name	USGS Topo Map
Bishop's Landing	Freeman
Falcon Helipad	Raymore
Flying G Airport	Quick City
Hilltop Airport	Freeman
Inter-State Airport	Pleasant Hill
Lawrence Smith Memorial Airport	Austin
McDonnell Airport	Main City
Research Belton Hospital Heliport	Belton
Richters Airport	Harrisonville
Ridgeview Ranch Airport	Peculiar
Riordan Airport	Pleasant Hill
Robinson Airport	Belton
Veach Field	West Line
Williams Airport	West Line

<sup>1</sup> <https://missouri.hometownlocator.com/features/countyfeatures,scfips,29037,c,cass.cfm>

## Cass County (MO): Public Schools<sup>2</sup>

Name	Address	Phone	Levels
Archie High	302 W State Rte A Archie, MO 64725	816-293-5312	6-12
Belton High	801 W North Ave Belton, MO 64012	816-489-7500	9-12
Belton Middle	107 W Pirate Parkway Belton, MO 64012	816-348-1040	7-8
Bridle Ridge Intermediate	900 E 195th St Raymore, MO 64083	816-892-1700	5-6
Cambridge Elem	109 W Cambridge Belton, MO 64012	816-348-1008	K-4
Cass Co Elem	302 W State Rte A Archie, MO 64725	816-293-5312	PK-5
Creekmoor Elem	1501 Creekmoor Dr Raymore, MO 64083	816-892-1675	PK-4
Drexel Elem	207 S Fourth St Drexel, MO 64742	816-619-2468	PK-6
Drexel High	207 S Fourth St Drexel, MO 64742	816-619-2287	7-12
Eagle Glen Intermediate	100 S Foxridge Dr Raymore, MO 64083	816-892-1750	5-6
Early Childhood Center	500 Polar Ln Harrisonville, MO 64701	816-380-4421	PK-K
East Lynne Elem	24706 S State Rte K East Lynne, MO 64743	816-626-3511	PK-8
Gladden Elem	405 Westover Rd Belton, MO 64012	816-489-7530	K-4
Grace Early Child Ed Center	614 W Mill Belton, MO 64012	816-348-1514	PK
Harrisonville Elem	101 Meghan Dr Harrisonville, MO 64701	816-380-4131	1-3
Harrisonville High	1504 E Elm Harrisonville, MO 64701	816-380-3273	9-12
Harrisonville Middle	601 S Highland Harrisonville, MO 64701	816-380-7654	6-8
Hilcrest Steam Academy	106 S Hillcrest Rd Belton, MO 64012	816-348-1130	K-6
Kentucky Trail Elem	8301 E 163rd St Belton, MO 64012	816-348-1100	K-4
Mceowen Elem	1901 S Halsey Ave Harrisonville, MO 64701	816-380-4545	4-5
Midway Elem	5801 E State Rte 2 Cleveland, MO 64734	816-250-2994	K-6
Midway High	5801 E State Rte 2 Cleveland, MO 64734	816-250-2994	7-12
Mill Creek Upper Elem	308 S Cleveland Belton, MO 64012	816-348-1576	5-6
Peculiar Elem	201 E 3rd St Peculiar, MO 64078	816-892-1650	K-4
Pleasant Hill Elem	327 N McKissock Pleasant Hill, MO 64080	816-540-2220	3-4
Pleasant Hill High	1 Rooster Way Pleasant Hill, MO 64080	816-540-3111	9-12

<sup>2</sup> <https://missouri.hometownlocator.com/mo/cass/>

## Cass County (MO): Public Schools (Continued)

Name	Address	Phone	Levels
Pleasant Hill Intermediate	1204 E 163rd St Pleasant Hill, MO 64080	816-540-3156	5-6
Pleasant Hill Middle	1301 Myrtle Pleasant Hill, MO 64080	816-540-2149	7-8
Pleasant Hill Primary	304 Eklund St Pleasant Hill, MO 64080	816-540-2119	PK-2
Raymore Elem	500 S Madison Raymore, MO 64083	816-892-1925	PK-4
Raymore-Peculiar East Middle	175 E State Rte 58 Raymore, MO 64083	816-388-4000	7-8
Raymore-Peculiar Sr High	20801 School Rd Peculiar, MO 64078	816-892-1400	9-12
Scott Elem	310 S Scott Belton, MO 64012	816-489-7040	K-4
Sherwood Elem	33300 S Sherwood Dr Creighton, MO 64739	660-499-2202	PK-5
Sherwood High	33300 S Sherwood Dr Creighton, MO 64739	660-499-2239	9-12
Sherwood Middle	33300 S Sherwood Dr Creighton, MO 64739	660-499-2239	6-8
Shull Elem	11706 E 211th St Peculiar, MO 64078	816-892-1600	K-4
Stonegate Elem	900 S Foxridge Dr Raymore, MO 64083	816-892-1900	K-4
Strasburg Elem	600 E State Rte E Strasburg, MO 64090	816-680-3333	K-8
Timber Creek Elem	310 E Calico Dr Raymore, MO 64083	816-892-1950	K-4

## Cass Co, MO - Detail Demographic Profile

#	ZIP	NAME	County	Population			Households		HH	Per Capita
				Year 2020	Year 2025	Change	YR 2020	YR 2025	Avg Size 2020	Income 2020
1	64012	Belton	CASS	29,517	30,687	4.0%	11,286	11,780	2.6	\$30,433
2	64078	Peculiar	CASS	9,910	10,448	5.4%	3,689	3,912	2.7	\$33,773
3	64080	Pleasant Hill	CASS	14,631	15,455	5.6%	5,425	5,752	2.7	\$34,501
4	64083	Raymore	CASS	24,630	26,394	7.2%	9,148	9,842	2.7	\$36,484
5	64092	Waldron	CASS	0	0	0.0%	0	0	0.0	\$0
6	64701	Harrisonville	CASS	15,661	16,090	2.7%	5,992	6,179	2.5	\$27,475
7	64725	Archie	CASS	2,159	2,237	3.6%	810	843	2.7	\$27,650
8	64734	Cleveland	CASS	2,205	2,289	3.8%	840	877	2.6	\$37,935
9	64746	Freeman	CASS	1,533	1,608	4.9%	583	615	2.6	\$31,444
10	64747	Garden City	CASS	4,149	4,272	3.0%	1,609	1,666	2.6	\$28,566
<b>Totals</b>				<b>104,395</b>	<b>109,480</b>	<b>4.9%</b>	<b>39,382</b>	<b>41,466</b>	<b>2.4</b>	<b>\$28,826</b>

#	ZIP	NAME	County	Population				Year 2020		Females
				Year 2020	Pop. 65+	Kids<18	Gen Y	Males	Females	Age 20-35
1	64012	Belton	CASS	29,517	4,649	9,701	4,083	37	15,180	3,948
2	64078	Peculiar	CASS	9,910	1,477	3,014	1,234	41	4,961	1,214
3	64080	Pleasant Hill	CASS	14,631	2,347	4,689	1,756	40	7,426	1,809
4	64083	Raymore	CASS	24,630	3,990	8,072	2,934	39	12,706	2,949
5	64092	Waldron	CASS	0	0	0	0	0	0	0
6	64701	Harrisonville	CASS	15,661	2,821	4,863	1,932	40	8,052	1,897
7	64725	Archie	CASS	2,159	344	708	260	39	1,094	261
8	64734	Cleveland	CASS	2,205	490	538	224	50	1,093	226
9	64746	Freeman	CASS	1,533	296	386	176	46	744	184
10	64747	Garden City	CASS	4,149	698	1,281	508	41	2,060	474
<b>Totals</b>				<b>104,395</b>	<b>17,112</b>	<b>33,252</b>	<b>13,107</b>	<b>373</b>	<b>53,316</b>	<b>12,962</b>

#	ZIP	NAME	County	Population 2020				Average Households 2020		
				Caucasian	African Amer	Amer Ind.	Hispanic	HH 2020	Med \$ HH	HH \$50K+
1	64012	Belton	CASS	83.3%	6.4%	0.7%	9.2%	11286	\$62,917.0	7,737
2	64078	Peculiar	CASS	93.1%	2.4%	0.6%	3.0%	3689	\$73,497.0	2,809
3	64080	Pleasant Hill	CASS	94.7%	0.8%	0.6%	3.3%	5425	\$75,684.0	4,211
4	64083	Raymore	CASS	85.1%	8.9%	0.6%	3.9%	9148	\$82,632.0	7,606
5	64092	Waldron	CASS	0.0%	0.0%	0.0%	0.0%	0	\$0.0	0
6	64701	Harrisonville	CASS	93.9%	1.3%	0.7%	2.8%	5992	\$55,384.0	3,641
7	64725	Archie	CASS	95.6%	0.5%	0.6%	2.3%	810	\$63,291.0	557
8	64734	Cleveland	CASS	94.7%	0.9%	0.7%	2.2%	840	\$80,346.0	678
9	64746	Freeman	CASS	95.6%	0.8%	0.3%	1.6%	583	\$68,092.0	446
10	64747	Garden City	CASS	95.9%	0.7%	0.9%	2.0%	1609	\$56,434.0	1,025
<b>Totals</b>				<b>83.2%</b>	<b>2.3%</b>	<b>0.6%</b>	<b>3.0%</b>	<b>39382</b>	<b>\$61,827.7</b>	<b>28,710</b>

Source: ERSI Demographics

# III. Community Health Status

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[VVV Consultants LLC]

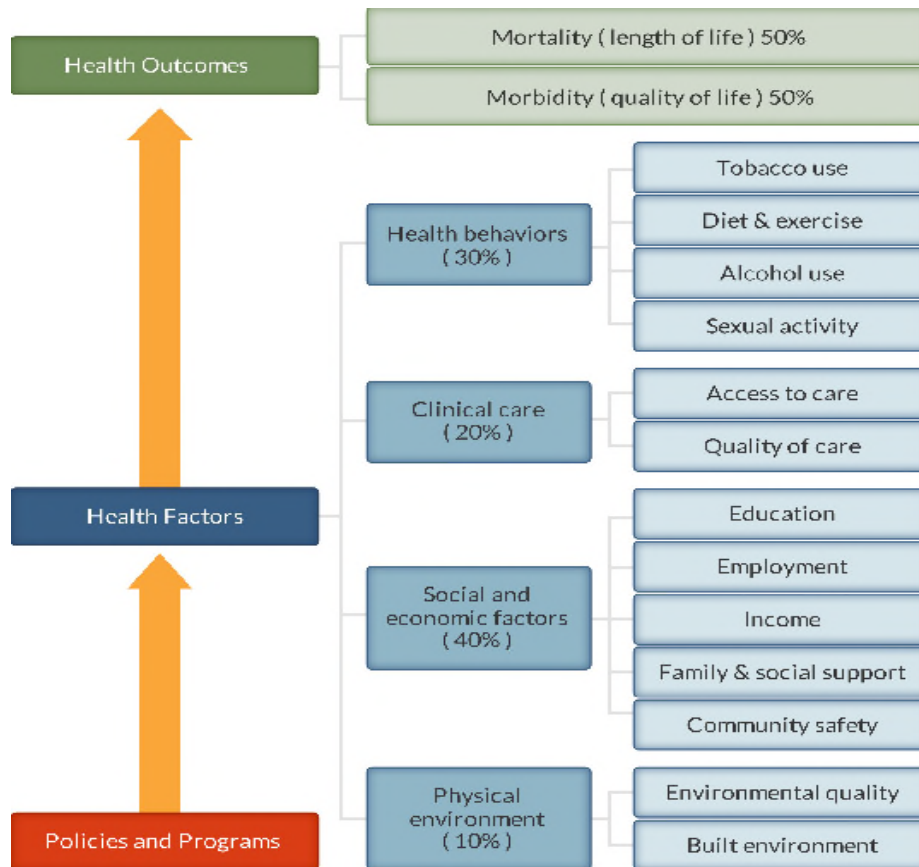
### III. Community Health Status

#### a) Historical Health Statistics- Secondary Research

##### Health Status Profile

This section of the CHNA reviews published quantitative community health indicators from public health sources and results of community primary research. To produce this profile, VVV Consultants LLC staff analyzed & trended data from multiple sources. This analysis focuses on a set of published health indicators organized by ten areas of focus (10 TABS), results from the 2020 RWJ County Health Rankings and conversations from Town Hall participates. Each table published 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, RWJ’s model use a number of health factors to rank each county.



County Health Rankings model ©2012 UWPHI



## National Research – Year 2022 RWJ Health Rankings:

#	2022 MO Rankings - 115 Counties	Definitions	Cass Co, MO	Trend	MO Norms (23)
1	<b>Health Outcomes</b>		13		27
	Mortality	Length of Life	23		17
	Morbidity	Quality of Life	7		54
2	<b>Health Factors</b>		24		57
	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activity	19		84
	Clinical Care	Access to care / Quality of Care	35		94
	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	9		92
3	<b>Physical Environment</b>	Environmental quality	43		95
<a href="http://www.countyhealthrankings.org">http://www.countyhealthrankings.org</a> , released 2022 MO Norms (23): Adair, Barton, Bates, Benton, Caldwell, Carroll, Cass, Cedar, Clinton, Dade, Henry, Hickory, Johnson, Lafayette, Livingston, Macon, Pettis, Polk, Randolph, Ray, Saline, St. Clair, Vernon.					

## PSA Secondary Research:

When studying community health, it's important to document health data by topical areas for primary service area (PSA). Below is a summary of key findings organized by subject area.

*Note: Each Tab has been trended to reflect County trends to NORM.*

Health Indicators - Secondary Research
TAB 1. Demographic Profile
TAB 2. Economic Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospital / Provider Profile
TAB 6. Behavioral / Mental Health Profile
TAB 7. High-Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

### Tab 1: Demographic Profile

Understanding population and household make-up is vital to start CHNA evaluation.

Tab	Health Indicator	Cass Co, MO	Trend	MO State	MO Norms (20)	Source
1a	Population Estimates, July 1 2021, (V2021)	70,491		4,150,049	19,115	County Health Rankings
d	Persons under 5 years, percent, July 1, 2021, (V2021)	5.9%		6.0%	5.7%	People Quick Facts
c	Persons 65 years and over, percent, July 1, 2021, (V2021)	17.3%		17.3%	20.8%	People Quick Facts
d	Female persons, percent, July 1, 2021, (V2021)	51.2%		50.9%	50.5%	People Quick Facts
e	White alone, percent, July 1, 2021, (V2021)	91.2%		82.9%	93.7%	People Quick Facts
f	Black or African American alone, percent, July 1, 2021, (V2021)	4.6%		11.8%	2.1%	People Quick Facts
g	Hispanic or Latino, percent, July 1, 2021, (V2021)	4.6%		4.4%	3.2%	People Quick Facts
h	Language other than English spoken at home, percent of persons age 5 years+, 2015-2019	3.7%		6.3%	3.6%	People Quick Facts
i	Living in same house 1 year ago, percent of persons age 1 year+, 2015-2019	87.7%		84.8%	86.2%	People Quick Facts
j	Children in single-parent households, percent, 2015-2019	18.3%		25.4%	20.3%	County Health Rankings
k	Total Veterans, 2015-2019	8,169		401,779	1,835	People Quick Facts

### Tab 2: Economic Profile

Monetary resources will (at times) drive health “access” and self-care.

Tab	Health Indicator	Cass Co, MO	Trend	MO State	MO Norms (20)	Source
2	a Per capita income in past 12 months (in dollars), 2015-2019	\$32,868		\$30,810	\$25,462	People Quick Facts
	b Persons in poverty, percent. 2021	6.8%		12.1%	14.0%	People Quick Facts
	c Total Housing units, July 1, 2019, (V2019)	42,878		2,819,383	11,121	People Quick Facts
	d Total Persons per household, 2015-2019	2.6		2.5	2.4	People Quick Facts
	e Severe housing problems, percent, 2013-2017	10.3%		13.3%	12.6%	County Health Rankings
	f Total of All firms, 2012	7,025		491,606	1,942	People Quick Facts
	g Unemployment, percent, 2019	3.0%		3.3%	4.3%	County Health Rankings
	h Food insecurity, percent, 2019	10.6%		13.3%	14.4%	County Health Rankings
	i Limited access to healthy foods, percent, 2019	9.0%		6.8%	7.6%	County Health Rankings
	j Long commute - driving alone, percent, 2019	49.3%		32.4%	34.7%	County Health Rankings

### Tab 3: Educational Profile

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

Tab	Health Indicator	Cass Co, MO	Trend	MO State	MO Norms (20)	Source
3	a Children eligible for free or reduced price lunch, percent, 2019	36.1%		50.2%	53.3%	County Health Rankings
	c High school graduate or higher, percent of persons age 25 years+, 2013-2017	92.4%		89.9%	88.4%	People Quick Facts
	d Bachelor's degree or higher, percent of persons age 25 years+, 2013-2017	26.3%		29.2%	18.5%	People Quick Facts

**Tab 4: Maternal / Infant Profile**

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

Tab	Health Indicator	Cass Co. MO	Trend	MO State	MO Norms (20)	Source
4	a Number of Births Where Prenatal Care began in First Trimester, 2019 (rate per 100)	77.5		71.2	71.4	MOPHIMS
	b Number of Preterm Births, 2015-2019 (rate per 100)	9.8		10.5	9.9	MOPHIMS
	c Number of Births with Low Birth Weight, 2015-2019 (rate per 100)	7.5		8.7	8.0	MOPHIMS
	d Number of all Births Occurring to Teens (15-17), 2015-2019 (rate per 100)	1.4		1.4	1.7	MOPHIMS
	e Number of births Where Mother Smoked During Pregnancy, 2019 (rate per 100)	12.5		12.8	17.8	MOPHIMS

Missouri Resident Births (MICA)				
County	2017	2018	2019	Trend
Cass County	1,117	1,150	1,165	
Missouri	73,017	73,281	72,103	

Source: DHSS - MOPHIMS - Birth MICA

**Tab 5: Hospitalization and Provider Profile**

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

Tab	Health Indicator	Cass Co. MO	Trend	MO State	MO Norms (20)	Source
5	a Primary care physicians (MD or DO with County office) (Pop Coverage per), 2019	4373:1		1422:1	3276:1	County Health Rankings
	b Preventable hospital stays - Rate of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees. (lower the better), 2018	5,396		4,638	4,498	County Health Rankings
	c Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)	79.0%		73.0%	70.8%	CMS Hospital Compare, 10/1/2015-9/30/2016
	d Patients Who Reported Yes, They Would Definitely Recommend the Hospital	71.0%		72.0%	66.8%	CMS Hospital Compare, 10/1/2015-9/30/2016
	e Average Time Patients Spent in the Emergency Dept. before seen by a Healthcare Professional (minutes)	106		NA	120	CMS Hospital Compare, 10/1/2015-9/30/2016

**Tab 6: Behavioral / Mental Profile**

Behavioral healthcare provides another important indicator of community health status.

Tab	Health Indicator	Cass Co. MO	Trend	MO State	MO Norms (20)	Source
6	a Depression: Medicare Population, percent, 2018	19.3%		21.3%	16.9%	Centers for Medicare and Medicaid
	b Age-adjusted Suicide Mortality Rate per 100,000 population, 2019 (lower is better)	17.2		18.2	16.7	World Bank
	c Poor mental health days, 2019	4.5		4.5	5.0	County Health Rankings

**Tab 7a: Risk Indicators & Factors Profile**

Knowing community health risk factors and disease patterns can aid in the understanding next steps to improve health.

Tab	Health Indicator	Cass Co, MO	Trend	MO State	MO Norms (20)	Source
7a	a Adult obesity, percent, 2019	36.5%	Red	32.5%	36.3%	County Health Rankings
	b Adult smoking, percent, 2019	20.6%	Yellow	20.1%	23.9%	County Health Rankings
	c Excessive drinking, percent, 2019	19.5%	Red	20.5%	18.3%	County Health Rankings
	d Physical inactivity, percent, 2019	27.1%	Yellow	25.5%	31.6%	County Health Rankings
	e Poor physical health days, 2019	4.0	Yellow	4.2	4.7	County Health Rankings
	f Sexually transmitted infections, rate per 100k, 2019	357.7	Yellow	568.1	307.7	County Health Rankings

**Tab 7b: Chronic Risk Profile**

Tab	Health Indicator	Cass Co, MO	Trend	MO State	MO Norms (20)	Source
7b	a Hypertension: Medicare Population, 2018	55.4%	Yellow	59.9%	56.1%	CMS
	b Hyperlipidemia: Medicare Population, 2018	45.6%	Red	47.5%	39.5%	CMS
	c Heart Failure: Medicare Population, 2018	13.0%	Yellow	15.3%	14.4%	CMS
	d Chronic Kidney Disease: Medicare Pop, 2018	24.0%	Red	25.2%	20.0%	CMS
	e COPD: Medicare Population, 2018	12.8%	Yellow	13.1%	14.0%	CMS
	f Atrial Fibrillation: Medicare Population, 2018	9.3%	Yellow	9.9%	9.0%	CMS
	g Cancer: Medicare Population, 2018	8.3%	Yellow	9.5%	8.0%	CMS
	h Osteoporosis: Medicare Population, 2018	5.6%	Yellow	7.2%	5.2%	CMS
	i Asthma: Medicare Population, 2018	4.7%	Red	3.9%	3.3%	CMS
	j Stroke: Medicare Population, 2018	3.6%	Yellow	3.6%	3.1%	CMS

**Tab 8 Uninsured Profile and Community Benefit**

Based on state estimations, the number of insured is documented below. Also, the amount of charity care (last three years of free care) from area providers is trended below.

Tab	Health Indicator	Cass Co, MO	Trend	MO State	MO Norms (20)	Source
8	a Uninsured, percent, 2019	10.2%	Red	11.4%	15.1%	County Health Rankings

#	Cass Regional Medical Center	YR 2019	YR 2020	YR 2021
1	Bad Debt - Write off	\$14,045,245	\$14,891,559	\$15,472,680
2	Charity Care - Free Care Given	\$1,377,452	\$938,660	\$783,623

**Tab 9: Mortality Profile**

The leading causes of county deaths from Vital Statistics are listed below.

Tab	Health Indicator	Cass Co, MO	Trend	MO State	MO Norms (20)	Source
9	a Life Expectancy (Males & Females) 2017-2019,	78.5		77.3	76.6	County Health Rankings
	Age-adjusted Cancer Mortality Rate per 100,000 population, 2019 (lower is better)	180.4		159.7	192.1	World Bank
	Age-adjusted Heart Disease Mortality Rate per 100,000 population, 2019 (lower is better)	185.0		187.0	229.1	World Bank
	c Alcohol-impaired driving deaths, percent, 2019	28.4%		27.1%	27.3%	County Health Rankings

Causes of Death by County of Residence, MO 2020	Cass Co, MO	%	Trend	MO Rural 20 Norm	%
<b>TOTAL</b>	<b>1016</b>	<b>100%</b>		<b>259</b>	<b>100%</b>
...Other malignant neoplasms	226	23.9%		56	16.1%
Septicemia	226	23.9%		63	18.2%
Pneumonitis due to solids and liquids	208	22.0%		43	12.4%
...Falls	72	7.6%		18	5.2%
Suicide	59	6.3%		16	4.7%
Chronic liver disease and cirrhosis	57	6.0%		16	4.5%
...Trachea, bronchus, and lung	54	5.7%		15	4.3%
Symptoms and ill-defined conditions	42	4.4%		13	3.7%
Enterocolitis due to Clostridium difficile	31	3.3%		6	1.6%

**Tab 10: Preventive Quality Measures Profile**

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

Tab	Health Indicator	Cass Co, MO	Trend	MO State	MO Norms (20)	Source
10	a Access to exercise opportunities, percent, 2019	69.3%		76.7%	46.7%	County Health Rankings
	b Diabetes monitoring, percent, 2019	9.9%		11.4%	11.9%	County Health Rankings
	c Mammography screening, percent, 2019	46.0%		44.0%	40.6%	County Health Rankings

## PSA Primary Research:

For each CHNA Wave # 4 evaluation, a community stakeholder survey has been created and administered to collect “current” healthcare information for Cass County, MO.

**Chart #1 – Cass County, MO Online Feedback Response (N=85)**

<b>Cass County MO - CHNA YR 2022</b>			
For reporting purposes, are you involved in or are you a ...? (Multiple)	Cass Co MO N=85	Trend	Wave 4 Norms N=7,542
Business / Merchant	10.7%	Green	12.3%
Community Board Member	6.7%	Yellow	10.8%
Case Manager / Discharge Planner	0.0%	White	1.1%
Clergy	4.0%	Yellow	1.7%
College / University	1.3%	White	3.3%
Consumer Advocate	0.0%	White	1.8%
Dentist / Eye Doctor / Chiropractor	1.3%	White	1.0%
Elected Official - City/County	4.0%	Yellow	2.4%
EMS / Emergency	5.3%	Yellow	3.0%
Farmer / Rancher	4.0%	Yellow	8.1%
Hospital / Health Dept	10.7%	Green	22.0%
Housing / Builder	0.0%	White	0.9%
Insurance	1.3%	White	1.4%
Labor	0.0%	White	2.8%
Law Enforcement	1.3%	White	1.4%
Mental Health	0.0%	White	2.3%
Other Health Professional	10.7%	Green	13.2%
Parent / Caregiver	13.3%	Green	19.4%
Pharmacy / Clinic	0.0%	White	2.7%
Media (Paper/TV/Radio)	0.0%	White	0.6%
Senior Care	1.3%	White	4.0%
Teacher / School Admin	12.0%	Green	7.9%
Veteran	5.3%	Yellow	3.7%
Other (please specify)	6.7%	Yellow	9.3%
<b>TOTAL</b>	<b>85</b>		<b>7013</b>
<small>Norms: <b>KS Counties:</b> Atchinson, Brown, Dickinson, Jackson, Marion, Montgomery, Cowley, Russell, Trego, Harper, Miami, Johnson, Nemaha, Ellis, Pawnee, Gove, Sheridan, Kiowa, Pratt, Ellsworth, Republic; <b>MO Counties:</b> Carroll, Caldwell, Clinton, Daviess, DeKalb, Lewis, Marion, Monroe, Pike, Ralls, Ray, Shelby Co; <b>IA Counties:</b> Cass, Cherokee, Fremont, Page, Appanoose, Carroll, Jasper, Clayton; <b>NE Counties:</b> Custer &amp; Furnis.</small>			

**Chart #2 - Quality of Healthcare Delivery Community Rating**

Cass County MO - CHNA YR 2022			
How would you rate the "Overall Quality" of healthcare delivery in our community?	Cass Co MO N=85	Trend	Wave 4 Norms N=7,542
Top Box %	14.1%		26.0%
Top 2 Boxes %	56.5%		68.7%
Very Good	14.1%		26.0%
Good	42.4%		42.7%
Average	34.1%		24.6%
Poor	5.9%		5.3%
Very Poor	3.5%		1.5%
Valid N	85		7,494
<small>Norms: <b>KS Counties:</b> Atchinson, Brown, Dickinson, Jackson, Marion, Montgomery, Cowley, Russell, Trego, Harper, Miami, Johnson, Nemaha, Ellis, Pawnee, Gove, Sheridan, Kiowa, Pratt, Ellsworth, Republic; <b>MO Counties:</b> Carroll, Caldwell, Clinton, Daviess, DeKalb, Lewis, Marion, Monroe, Pike, Ralls, Ray, Shelby Co; <b>IA Counties:</b> Cass, Cherokee, Fremont, Page, Appanoose, Carroll, Jasper, Clayton; <b>NE Counties:</b> Custer &amp; Furnis.</small>			

**Chart #3 – Overall Community Health Quality Trend**

Cass County MO - CHNA YR 2022			
When considering "overall community health quality", is it...	Cass Co MO N=85	Trend	Wave 4 Norms N=7,542
Increasing - moving up	38.3%		42.9%
Not really changing much	46.9%		45.4%
Decreasing - slipping	14.8%		11.7%
Valid N	85		6,775
<small>Norms: <b>KS Counties:</b> Atchinson, Brown, Dickinson, Jackson, Marion, Montgomery, Cowley, Russell, Trego, Harper, Miami, Johnson, Nemaha, Ellis, Pawnee, Gove, Sheridan, Kiowa, Pratt, Ellsworth, Republic; <b>MO Counties:</b> Carroll, Caldwell, Clinton, Daviess, DeKalb, Lewis, Marion, Monroe, Pike, Ralls, Ray, Shelby Co; <b>IA Counties:</b> Cass, Cherokee, Fremont, Page, Appanoose, Carroll, Jasper, Clayton; <b>NE Counties:</b> Custer &amp; Furnis.</small>			

**Chart #4 – Re-evaluate Past Community Health Needs Assessment Needs**

Cass County, MO - CHNA YR 2022					
Past CHNA Unmet Needs Identified		Ongoing Problem			Pressing
Rank	Ongoing Problem Area	Votes	%	Trend	Rank
1	Lack of Mental Health Providers and Patient Placement	36	11.0%		2
2	Mental Health (Diagnosis, Treatment, Aftercare)	34	10.4%		1
3	Urgent Care Services (Southern Cass Co)	31	9.5%		3
4	Drug Abuse / Drug Prevention Resources	29	8.8%		4
5	Awareness of Healthcare Services	25	7.6%		8
6	Healthcare Transportation	25	7.6%		5
7	Access to Dental Treatment for Uninsured / Medicaid	21	6.4%		6
8	Obesity - Need for Nutrition & Fitness	20	6.1%		9
9	Suicides (Adolescence-focused)	17	5.2%		13
10	Domestic Violence	16	4.9%		10
11	Access to Primary Care (IM, PEDS, OBG)	15	4.6%		7
12	Poverty (Homelessness / Access to Dental Care)	15	4.6%		11
13	Senior Care Staffing	15	4.6%		12
14	Lack of Funding for Local Health Department	13	4.0%		14
15	Smoking (Vaping)	10	3.0%		16
16	Lack of Healthcare County-Wide Coalition	6	1.8%		15
Totals		328	100.0%		

**Chart #5 - Community Health Needs Assessment “Causes of Poor Health”**

Cass County MO - CHNA YR 2022			
In your opinion, what are the root causes of "poor health" in our community?	Cass Co MO N=85	Trend	Wave 4 Norms N=7,542
Chronic disease prevention	10.7%	Yellow	11.7%
Lack of health & Wellness Education	16.7%	Red	14.8%
Lack of Nutrition / Exercise Services	12.0%	Yellow	11.2%
Limited Access to Primary Care	5.3%	Yellow	6.7%
Limited Access to Specialty Care	8.7%	Yellow	8.6%
Limited Access to Mental Health Assistance	19.3%	Red	19.5%
Family assistance programs	3.3%	Yellow	5.9%
Lack of health insurance	14.0%	Yellow	14.9%
Neglect	10.0%	Yellow	11.8%
<b>Total Votes</b>	<b>85</b>		<b>12,588</b>
<small>Norms: <b>KS Counties:</b> Atchinson, Brown, Dickinson, Jackson, Marion, Montgomery, Cowley, Russell, Trego, Harper, Miami, Johnson, Nemaha, Ellis, Pawnee, Gove, Sheridan, Kiowa, Pratt, Ellsworth, Republic; <b>MO Counties:</b> Carroll, Caldwell, Clinton, Davess, DeKalb, Lewis, Marion, Monroe, Pike, Ralls, Ray, Shelby Co; <b>IA Counties:</b> Cass, Cherokee, Fremont, Page, Appanoose, Carroll, Jasper, Clayton; <b>NE Counties:</b> Custer &amp; Furnis.</small>			

**Chart #6 – Community Rating of HC Delivery Services (Perceptions)**

Cass County MO - CHNA YR 2022	Cass Co MO N=85		Trend	Wave 4 Norms N=7,542	
	Top 2 boxes	Bottom 2 boxes		Top 2 boxes	Bottom 2 boxes
How would our community rate each of the following?					
Ambulance Services	76.8%	5.4%	Yellow	80.4%	7.2%
Child Care	36.5%	19.2%	Red	41.4%	17.2%
Chiropractors	81.1%	0.0%	Green	70.4%	6.9%
Dentists	71.4%	5.4%	Yellow	69.7%	11.2%
Emergency Room	75.0%	12.5%	Yellow	71.5%	10.1%
Eye Doctor/Optomtrist	67.3%	7.3%	Yellow	73.7%	9.1%
Family Planning Services	21.2%	28.8%	Red	36.5%	20.5%
Home Health	27.5%	21.6%	Red	53.9%	11.3%
Hospice	54.5%	7.3%	Yellow	63.2%	10.2%
Telehealth	32.0%	18.0%	Red	48.4%	13.7%
Inpatient Services	63.0%	9.3%	Yellow	74.4%	8.9%
Mental Health	11.5%	44.2%	Red	25.3%	38.4%
Nursing Home/Senior Living	17.3%	28.8%	Red	51.6%	15.1%
Outpatient Services	66.0%	11.3%	Yellow	73.3%	5.3%
Pharmacy	77.8%	1.9%	Green	85.2%	3.3%
Primary Care	70.4%	7.4%	Yellow	75.5%	7.1%
Public Health	47.2%	13.2%	Yellow	57.7%	10.3%
School Health	49.0%	13.7%	Yellow	59.9%	8.9%
Visiting Specialists	37.3%	15.7%	Yellow	67.4%	9.7%



**Chart #7 – Community Health Readiness**

Cass County MO - CHNA YR 2022		Bottom 2 boxes	
Community Health Readiness is vital. How would you rate each of the following? (% Poor / Very Poor)	Cass Co MO N=85	Trend	Wave 4 Norms N=7,542
Behavioral / Mental Health	50.9%		36.9%
Emergency Preparedness	17.0%		9.8%
Food and Nutrition Services/Education	26.4%		17.0%
Health Screenings (as asthma, hearing, vision, scoliosis)	17.3%		12.0%
Prenatal/Child Health Programs	26.9%		14.0%
Substance Use/Prevention	43.1%		36.6%
Suicide Prevention	39.2%		39.1%
Violence Prevention	35.3%		36.4%
Women's Wellness Programs	28.0%		19.4%

Norms: **KS Counties:** Atchinson, Brown, Dickinson, Jackson, Marion, Montgomery, Cowley, Russell, Trego, Harper, Miami, Johnson, Nemaha, Ellis, Pawnee, Gove, Sheridan, Kiowa, Pratt, Ellsworth, Republic; **MO Counties:** Carroll, Caldwell, Clinton, Daviess, DeKalb, Lewis, Marion, Monroe, Pike, Ralls, Ray, Shelby Co; **IA Counties:** Cass, Cherokee, Fremont, Page, Appanoose, Carroll, Jasper, Clayton; **NE Counties:** Custer & Furnis.

**Chart #8a – Healthcare Delivery “Outside our Community”**

Cass County MO - CHNA YR 2022			
In the past 2 years, did you or someone you know receive HC outside of our community?	Cass Co MO N=85	Trend	Wave 4 Norms N=7,542
Yes	76.9%		72.4%
No	23.1%		27.6%

Norms: **KS Counties:** Atchinson, Brown, Dickinson, Jackson, Marion, Montgomery, Cowley, Russell, Trego, Harper, Miami, Johnson, Nemaha, Ellis, Pawnee, Gove, Sheridan, Kiowa, Pratt, Ellsworth, Republic; **MO Counties:** Carroll, Caldwell, Clinton, Daviess, DeKalb, Lewis, Marion, Monroe, Pike, Ralls, Ray, Shelby Co; **IA Counties:** Cass, Cherokee, Fremont, Page, Appanoose, Carroll, Jasper, Clayton; **NE Counties:** Custer & Furnis.

**Specialties:**

Specialty	Counts
OBG	3
CARD	2
CLIN	2
ORTH	2
SERV	2
SURG	2

**Chart #8b – Healthcare Delivery “Outside our Community” (Continued)**

Cass County MO - CHNA YR 2022			
Access to care is vital. Are there enough providers / staff available at the right times to care for you and our community?	Cass Co MO N=85	Trend	Wave 4 Norms N=7,542
Yes	52.8%		57.8%
No	47.2%		42.2%

Norms: **KS Counties:** Atchinson, Brown, Dickinson, Jackson, Marion, Montgomery, Cowley, Russell, Trego, Harper, Miami, Johnson, Nemaha, Ellis, Pawnee, Gove, Sheridan, Kiowa, Pratt, Ellsworth, Republic; **MO Counties:** Carroll, Caldwell, Clinton, Daviess, DeKalb, Lewis, Marion, Monroe, Pike, Ralls, Ray, Shelby Co; **IA Counties:** Cass, Cherokee, Fremont, Page, Appanoose, Carroll, Jasper, Clayton; **NE Counties:** Custer & Furnis.

**Chart #9 – What HC topics need to be discussed in future Town Hall Meeting**

<b>Cass County MO - CHNA YR 2022</b>			
<b>What needs to be discussed further at our CHNA Town Hall meeting?</b>	<b>Cass Co MO N=85</b>	<b>Trend</b>	<b>Wave 4 Norms N=7,542</b>
Abuse/Violence	2.8%		4.0%
Alcohol	5.2%		3.8%
Alternative Medicine	1.7%		3.0%
Breast Feeding Friendly Workplace	2.8%		1.7%
Cancer	10.1%		4.4%
Care Coordination	2.1%		2.3%
Diabetes	1.4%		2.7%
Drugs/Substance Abuse	2.8%		5.5%
Family Planning	2.4%		2.3%
Heart Disease	5.9%		3.1%
Lack of Providers/Qualified Staff	4.2%		3.8%
Lead Exposure	2.4%		1.1%
Mental Illness	0.7%		6.9%
Neglect	2.4%		2.8%
Nutrition	4.9%		4.3%
Obesity	0.0%		4.2%
Occupational Medicine	1.0%		0.9%
Ozone (Air)	3.8%		1.4%
Physical Exercise	5.2%		4.4%
Poverty	1.7%		3.6%
Preventative Health / Wellness	0.0%		3.6%
Respiratory Disease	4.2%		1.3%
Sexually Transmitted Diseases	2.8%		2.2%
Smoke-Free Workplace	5.9%		1.6%
Suicide	1.0%		5.0%
Teen Pregnancy	5.9%		3.3%
Telehealth	2.8%		2.2%
Tobacco Use	2.1%		2.2%
Transporation	0.3%		2.6%
Vaccinations	4.2%		3.4%
Water Quality	1.4%		2.0%
Health Literacy	2.8%		2.9%
Other (please specify)	2.4%		1.5%
<b>TOTAL Votes</b>	<b>85</b>		<b>22,907</b>

# IV. Inventory of Community Health Resources

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[VVV Consultants LLC]

## 2022 Inventory of Health Services - Cass County, MO

Cat	Healthcare Services Offered in county: Yes / No	Hospital	Health Dept	Private
Clinic	Primary Care	yes		yes
Hosp	Alzheimer Center			
Hosp	Ambulatory Surgery Centers			
Hosp	Arthritis Treatment Center	yes		
Hosp	Bariatric/weight control services	yes		
Hosp	Birthing/LDR/LDRP Room			
Hosp	Breast Cancer	yes		
Hosp	Burn Care			
Hosp	Cardiac Rehabilitation	yes		
Hosp	Cardiac Surgery			
Hosp	Cardiology services	yes		
Hosp	Case Management	yes		yes
Hosp	Chaplaincy/pastoral care services	yes		yes
Hosp	Chemotherapy	yes		
Hosp	Colonoscopy	yes		
Hosp	Crisis Prevention	yes		yes
Hosp	CTScanner	yes		
Hosp	Diagnostic Radioisotope Facility			
Hosp	Diagnostic/Invasive Catheterization	yes		
Hosp	Electron Beam Computed Tomography (EBCT)			
Hosp	Enrollment Assistance Services	yes		yes
Hosp	Extracorporeal Shock Wave Lithotripter (ESWL)			
Hosp	Fertility Clinic			yes
Hosp	FullField Digital Mammography (FFDM)	yes		
Hosp	Genetic Testing/Counseling	yes		yes
Hosp	Geriatric Services	yes		yes
Hosp	Heart	yes		
Hosp	Hemodialysis	yes		yes
Hosp	HIV/AIDS Services	yes		
Hosp	Image-Guided Radiation Therapy (IGRT)			
Hosp	Inpatient Acute Care - Hospital services	yes		
Hosp	Intensity-Modulated Radiation Therapy (IMRT) 161			
Hosp	Intensive Care Unit	yes		
Hosp	Intermediate Care Unit	yes		
Hosp	Interventional Cardiac Catheterization			
Hosp	Isolation room	yes		yes
Hosp	Kidney	yes		
Hosp	Liver	yes		
Hosp	Lung	yes		
Hosp	Magnetic Resonance Imaging (MRI)	yes		
Hosp	Mammograms	yes		
Hosp	Mobile Health Services			yes
Hosp	Multislice Spiral Computed Tomography (<64 slice CT)	yes		
Hosp	Multislice Spiral Computed Tomography (<64+ slice CT)	yes		
Hosp	Neonatal			
Hosp	Neurological services	yes		
Hosp	Obstetrics	yes		
Hosp	Occupational Health Services	yes		
Hosp	Oncology Services	yes		yes
Hosp	Orthopedic services	yes		yes
Hosp	Outpatient Surgery	yes		
Hosp	Pain Management	yes		yes
Hosp	Palliative Care Program	yes		yes
Hosp	Pediatric			yes
Hosp	Physical Rehabilitation	yes		yes

## 2022 Inventory of Health Services - Cass County, MO

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

## Providers Delivering Care in Cass Regional PSA - YR 2022

# of FTE Providers Working in County	Physicians Counts				Allied Staff
	County Based @ CRMC	County Based @ Belton	Cass County Based	Visiting DRs *	PA / NP @ CRMC
<b>Primary Care:</b>					
Family Practice	5.0	5.0	3.4	0.0	18.0
Internal Medicine / Geriatrician	1.0	1.0	0.0	0.0	2.0
Obstetrics/Gynecology	0.2	0.6	0.0	0.0	2.0
Pediatrics	0.0	0.0	3.0	0.0	2.0
Functional Medicine	1.0	0.0	0	0.00	1.0
<b>Medicine Specialists:</b>					
Allergy/Immunology	0.0	0.2	0.0	0.0	0.0
Cardiology	1.0	1.4	0.0	0.0	2.0
Dermatology	0.5	0.1	0.0	0.0	0.2
Endocrinology	0.1	0.1	0.0	0.0	0.0
Gastroenterology	0.4	1.4	0.0	0.0	0.0
Oncology/RADO	0.3	1.0	0.0	0.0	1.6
Infectious Diseases	0.0	0.0	0.0	1.4	
Nephrology	0.3	0.0	0.0	1.4	0.0
Neurology	0.3	0.0	0.0	0.0	0.0
Psychiatry	0.6	0.0	0.0	0.2	
Pulmonary	0.4	1.4	0.0	0.0	0.4
Rheumatology	0.6	0.0	0.0	0.0	0.6
<b>Surgery Specialists:</b>					
General Surgery / Colon / Oral	3.0	2.0	0.0	0.0	0.0
Neurosurgery	0.0	0.0	0.0	0.0	0.0
Ophthalmology	0.0	0.0	3.0	0.0	0.0
Orthopedics	2.4	2.0	0.0	0.0	1.8
Otolaryngology (ENT)	0.8	0.8	0.0	0.0	1.0
Plastic/Reconstructive	0.0	0.0	0.0	0.0	0.0
Thoracic/Cardiovascular/Vass	0.0	0.0	0.0	0.0	0.0
Urology	0.3	1.4	0.0	0.0	0.0
<b>Hospital Based:</b>					
Anesthesia/Pain	1.5	3.0	0.0	0.0	7.5
Emergency	4.2	5.3	0.0	0.0	4.6
Urgent Care	0.0	2.1	3.0	0.0	4.0
Radiology	1.0	1.4	0.0	0.0	0.0
Pathology	1.0	1.0	0.0	0.0	0.0
Hospitalist	4.0	4.2	0.0	0.0	5.0
Neonatal/Perinatal	0.0	0.0	0.0	0.0	0.0
Physical Medicine/Rehab	0.0	0.0	0.0	0.0	0.0
Wound Care	0.2	0.0	0.0	0.0	0.4
Podiatry	0.3	1.2	2.0	0.0	0.0
<b>TOTALS</b>	30.4	36.6	14.4	3.0	54.1

\* Total # of FTE Specialists serving community whose office is outside Cass County.

## Visiting Specialists to Cass Regional Medical Center 2022

<b>Specialty</b>	<b>Physician Name or Group</b>	<b>Specialist Office Location (City)</b>	<b>At Hospital</b>	<b>At MOB</b>	<b>FTEs (240)</b>
Gynecology	Midwest Womens Healthcare (Dr. Keyes)	2820 E Rock Haven Road Ste 200		X	0.15
Cardiology	Midwest Heart & Vascluar Associates (Carrie Totta MD, Kiranmayi Chilappa, MD, Jennifer Parris, NP)	2820 E Rock Haven Road Ste 200		X	1.00
Dermatology	Maria Tonkovic-Capin, MD	Rock Haven Specialty Clinic		X	0.30
Dermatology	Viseslav Tonkovic-Cpain, MD	Rock Haven Specialty Clinic		X	0.20
Endocrinology	Harrisonville Specialist Group- Madhavi Yarlagadda, MD	2820 E Rock Haven Road Ste 205		X	0.10
Endoscopy	KC Gastroenterology and Hepatology Physicians Group (Drs. Grewal, Dailey & Elias)	GI Clinic	X		0.20
ENT	Brandon Johnson, MD	2820 E Rock Haven Rd Ste 220		X	0.40
ENT	Nicholas Wittz, MD	2820 E Rock Haven Rd Ste 220		X	0.40
Hematology / Oncology	MidAmerica Cancer Care Jaswinder, Singh	Mills Center	X		0.10
Hematology / Oncology	MidAmerica Cancer Care Katherine Collins, NP	Mills Center	X		
Hematology / Oncology	MidAmerica Cancer Care Nicholas Scheuller, DO	Mills Center	X		0.20
Neurology/stroke	Blue Sky Neurology	telestroke/neurology			
Psychiatry	Mindcare Solutions PC	telepsych			tele
Psychiatry	Psychiatry Associates of KC- Kevin Mays, MD	Harrisonville		X	0.20
Pulmonary	KC Pulmonary Practice (Drs. Alahsmi, Balmaceda, Beary, Chancy, Gaur, Ireland, Mieczkoski, Van Duyne, and Kincaid, NP)	2820 E Rock Haven Road Ste 200		X	0.40
Rheumatology	Latinis Rheumatology LLC Gina Accurso	Mills Center	X		0.60
Rheumatology	Latinis Rheumatology LLC Kevin Latinis, MD	Mills Center	X		0.60
Endoscopy / General Surgery	Clifton Seifert	2820 E Rock Haven Rd Ste 220 / 1601 N. Hwy 7, Pleasant Hill		X	.7/1
Endoscopy / General Surgery/ Bariatrics	William Costner	2820 E Rock Haven Rd Ste 220		X	0.75
Endoscopy / General Surgery/ Vein	Jack Hudkins	2820 E Rock Haven Rd Ste 220		X	0.80
Nephrology	Midwest Nephrology Consultants- Hemender, Vats, MD	2820 E Rock Haven Road Ste 205		X	0.10
Nephrology	Midwest Nephrology Consultants- Robert Golder, MD	2820 E Rock Haven Road Ste 205		X	0.10
Neurology/EMG	Michael Schwartzman, DO	Rock Haven Specialty Clinic		X	0.30
Orhtopedics	Bone & Joint Specialist PC; Danny Carroll	2820 E Rock Haven Road Ste 120		X	0.20
Orhtopedics	Bone & Joint Specialist PC; Kim Winkley, NP	2820 E Rock Haven Road Ste 120		X	0.20
Orthopedics	Ken Petersen	2820 E Rock Haven Rd Ste 220 / 1601 N. Hwy 7, Pleasant Hill		X	.8/1
Orthopedics	Tyson Travis	2820 E Rock Haven Road Ste 120		X	0.80
Urology	Todd Johnson, DO	Rock Haven Specialty Clinic		X	0.20
Urology	Corporate Lakes Urology Billy Perry, MD	Rock Haven Specialty Clinic		X	0.10
Audiology	Danielle Barton	2820 E Rock Haven Rd Ste 220		X	0.10
Audiology	Kelly Spliller	2820 E Rock Haven Rd Ste 220		X	0.10
Audiology	Lorann Bown	2820 E Rock Haven Rd Ste 220		X	0.10
Audiology	Sara Gabriel	2820 E Rock Haven Rd Ste 220		X	0.10
Chiropractic	KC Core (Rachel Porter, DC)	2820 E Rock Haven Rd Ste 170		X	1.00
Hospitalist	P&C Helathcare		X		4.20
Pain Mgmt	SJA Pain Associates Jim Johnson	Pain Clinic	x		0.50
Pain Mgmt	SJA Pain Associates Richard Morgan	Pain Clinic	X		0.40
Podiatry	William Cruce, DPM	Rock Haven Specialty Clinic		X	0.30
Wound	Molly Urton, NP	Rock Haven Specialty Clinic		X	0.40
Wound	Walter Costner, MD	Rock Haven Specialty Clinic		X	0.10
Wound	William Cruce, DPM	Rock Haven Specialty Clinic		X	0.10

# **Cass County, Missouri**

## **Area Healthcare Services – Year 2022**

### **Emergency Numbers**

<b>Police/Sheriff</b>	<b>911</b>
<b>Fire</b>	<b>911</b>
<b>Ambulance</b>	<b>911</b>

**Cass County Sheriff**  
**(816) 380-5200**

### **Non-Emergency Numbers**

	<b>Police</b>	<b>Fire</b>	<b>Ambulance</b>
<b>Harrisonville</b>	<b>(816) 380-8320</b>	<b>(816) 380-8592</b>	<b>(816) 380 8925</b>
<b>Belton</b>	<b>(816) 331-4331</b>	<b>(816) 331-7969</b>	<b>(816) 331-7969</b>
<b>Raymore</b>	<b>(816) 331-0350</b>	<b>(816) 331-3008</b>	<b>(816) 331-3008</b>
<b>Pleasant Hill</b>	<b>(816) 540-9109</b>	<b>(816) 540-9108</b>	<b>(816) 540-9109</b>
<b>Peculiar</b>	<b>(816) 779-5102</b>	<b>(816) 779-5766</b>	<b>(816) 779-5766</b>
<b>Archie</b>	<b>(816) 430-5242</b>	<b>(816) 380-6744</b>	<b>(816) 380-6744</b>
<b>Cleveland</b>	<b>(816) 618-3059</b>	<b>(816) 618-3998</b>	
<b>Freeman</b>	<b>(816) 250-2902</b>	<b>(816) 889-2550</b>	
<b>Garden City</b>	<b>(816) 773-8201</b>	<b>(816) 862-6366</b>	
<b>Drexel</b>	<b>(816) 380-5200</b>	<b>(816) 657-2662</b>	
<b>Creighton</b>	<b>(816) 499-2210</b>	<b>(816) 449-2313</b>	
<b>East Lynne</b>	<b>(816) 626-3521</b>	<b>(816) 869-3840</b>	
<b>Strasburg</b>	<b>(816) 866-3911</b>	<b>(816) 540-9108</b>	



## **Adoption / Crisis Pregnancy**

Birthright  
816-444-7090  
800-550-4900 (24 hr line)  
[www.birthright.org](http://www.birthright.org)

Catholic Charities  
816-221-4377  
Toll Free: 1-800-875-4377  
[www.catholiccharities-kcsj.org](http://www.catholiccharities-kcsj.org)

Crisis Pregnancy Center  
763-2020

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

LDS Family Services  
800-537-2229  
816-461-5512  
[www.itsaboutlove.org](http://www.itsaboutlove.org)

Life Choice Center for Women - Harrisonville  
816-887-5100  
[www.lifechoicecenter.org](http://www.lifechoicecenter.org)

Mother's Refuge (pregnant and homeless under  
age 20)  
816-356-4797 ext. 2  
[www.mothersrefuge.org](http://www.mothersrefuge.org)

Shiloh Center – Harrisonville  
816-925-4596

The LIGHT House  
816-361-2233  
[www.lighthousekc.org](http://www.lighthousekc.org)

## **Adult Daycare / Respite Care**

Adult Care Health Center of Greater Kansas City  
816-331-6565  
[www.adultcarekc.com](http://www.adultcarekc.com)

Birdella Jackson Senior Care - Grandview  
816- 763-2484

Meadow View Health and Rehabilitation  
- Harrisonville  
816- 380-2622

Visiting Angels (senior homecare)  
800-365-4189

[www.visitingangels.com](http://www.visitingangels.com)

West Central Missouri Community Action  
Agency  
888-569-9936  
[www.wcmcaa.org](http://www.wcmcaa.org)

## **Alcohol / Drug Treatment (Substance Abuse)**

Alcoholics Anonymous – AA  
- Harrisonville  
816-884-2001

Celebrate Recovery Church on the Rock  
- Harrisonville  
816-380-2428

Cass County Psychological Services (C-star  
program, age 18 and over) - Harrisonville  
816-380-4010  
[www.cmhconline.com](http://www.cmhconline.com)

Compass Health Network  
Harrisonville (816-380-5167)  
Raymore (816-318-4430)

Eric A Copeland, PsyD – Harrisonville  
816-380-4010

Fatino Counseling - Harrisonville  
816-361-1582

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

Greater Kansas City Healthcare Directory  
[www.healthkc.com](http://www.healthkc.com)

National Council on Alcohol and Drug  
Dependence (assessment and referral services)  
816-361-5900  
[www.recoverycentral.org](http://www.recoverycentral.org)

Probation and Parole Office (for referrals)  
816-322-1166

Scott A. Maid Behavioral Health Center, Inc.  
- Harrisonville  
816-884-5777

The Wellness Counseling Center, LLC  
- Harrisonville  
816-974-7378

## **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](http://www.mocsa.org)

National Center for Missing and Exploited Children  
800-843-5678  
913-469-5437  
[www.missingkids.com](http://www.missingkids.com)

## **Children's / Family Medical**

Family Support Division / Children's Services (formerly DFS)  
816-380-3597  
<http://dss.mo.gov/fsd/>

InfantSee (eye exams for infants 6-12 months @ participating providers) - Belton  
816-331-9590  
[www.infantsee.org](http://www.infantsee.org)

Missouri Health Insurance Pool  
1-800-821-2231

Shriners of North America  
800-237-5055  
[www.shriners.com/hospitals](http://www.shriners.com/hospitals)

## **Child Support**

Cass County Family Services Office  
- Harrisonville  
816-380-3597

## **Christmas Assistance**

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

Fishes and Loaves Food Pantry - Raymore  
816-501-6801  
(must be Cass county resident)  
[www.fishesandloavesfoodpantry.com](http://www.fishesandloavesfoodpantry.com)

Heart & Hand Ministries - Belton  
816-322-1133

(Belton, Raymore, Peculiar residents only – will also provide Thanksgiving assistance)  
[www.heartnhand.org](http://www.heartnhand.org)

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

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

## **Clothing Assistance**

Fishes and Loaves - Raymore  
816-322-1177  
(must be Cass County resident)  
[www.fishesandloavesfoodpantry.com](http://www.fishesandloavesfoodpantry.com)

Good Shepherd Thrift Store – Garden City  
816-862-6100

Harrisonville Ministerial Alliance - Harrisonville Thrift Store  
816-884-2279

Heart & Hand Ministries - Belton Thrift Store  
816-322-1133  
[www.heartnhand.org](http://www.heartnhand.org)

Pleasant Hill Thrift Store – Pleasant Hill  
816-987-3600  
[www.tlcp Hill.com](http://www.tlcp Hill.com)

## **Dental Care**

A World of Smiles - Harrisonville  
816-380-2222  
[www.aworldofsmiles.net](http://www.aworldofsmiles.net)

Belton Family Dental Care - Belton  
816-331-1900  
[www.beltonfamilydentalcare.com](http://www.beltonfamilydentalcare.com)

Belton Modern Dentistry - Belton  
816-322-3506  
[www.beltonmoderndentistry.com](http://www.beltonmoderndentistry.com)

Braces By Billings - Belton  
Billings Steven P DDS  
(816) 331-1902  
[bracesbybillings.com](http://bracesbybillings.com)

Burleson Orthodontics & Pediatric Dentistry  
- Raymore  
(816) 318-8820  
raypecsmiles.com

Cass County Dental Clinic - Belton  
816- 322-7600  
www.casscountydentalclinic.org  
*(ages 1 through 20, accepts Medicaid; sliding  
scale fee for uninsured and underinsured)*

Cass County Smiles - Raymore  
816-331-3456

Custom Dental of Harrisonville  
816-925-0887  
www.harrisonvilledentist.com

David M. Smith, MD - Raymore  
(816) 348-7527  
raymoreoms.com

DDS Dentures + Implant Solutions of Belton  
816-366-7702  
www.dentalservice.net

Edwin Long, DDS - Harrisonville  
816-380-3522  
www.edwinlongdds.com

Foxwood Springs Living Center: Seabaugh  
- Raymore  
Ruth Anne DDS  
(913) 649-1351

Graig Grider PC - Belton  
(816) 246-9995  
griderorthodontics.com

Harmony Smiles Orthodontics - Raymore  
(816) 322-2525  
harmonysmiles.com

Harrisonville Smile & Trust Co. - Harrisonville  
816-887-2008  
harrisonvillesmileandtrust.com

Jacob D. Young, DDS - Belton  
(816) 331-4800  
beltontdentist.com

KC Family Dental Care - Harrisonville  
816-380-3705  
www.kc-familydental.com

Lifetime Dental - Belton  
Steven Dunning, DDS  
816-331-4333  
lifetimedentalkc.com

Lon Tracy, DDS - Harrisonville  
816-380-6000  
www.drlontracy.com

Love to Smile: Complete Family & Implant  
Dentistry - Peculiar  
816-620-2022  
www.love-to-smile.com

Mark A. Anderson, DDS - Belton  
816-425-2158  
www.markandersondds.com

Mary Kay Mitchell DDS Family Dentistry  
- Raymore  
(816) 322-8080  
mkmds.com

Pacific Plains Dental - Belton  
816-331-5900  
www.pacificplainsdental.com

Paul R Mann, DDS - Raymore  
(816) 322-7668

Peculiar Dental Care - Peculiar  
816-779-6500  
www.peculiardentalcare.com

Pleasant Hill Dental Care – Pleasant Hill.  
816-987-7467  
www.dentistpleasanthill.net

Silver Lake Dentistry - Raymore  
Whitford, Joshua E DDS  
(816) 322-2292  
silverlakedentistry.com

Smiles Unlimited LLC - Belton  
McNamara, Kevin DDS  
(816) 331-9100  
beltonsmiles.com

Terry L. Myers, DDS – Mini Dental Implants  
- Belton  
(816) 331-4200  
keystone-dentistry.com

UMKC Dental School  
816-235-2111  
[www.dentistry.umkc.edu](http://www.dentistry.umkc.edu)

### **Disability Services – Adults**

CASCO Area Workshop (age 18 and over  
employment center)  
- Harrisonville  
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](http://www.moadvocacy.org)

Social Security Administration  
800-772-1213  
[www.socialsecurity.gov](http://www.socialsecurity.gov)

The Whole Person  
816-561-0304  
800-878-3037  
[www.thewholeperson.org](http://www.thewholeperson.org)

Vocational Rehab  
816-325-1200  
[www.dese.mo.gov](http://www.dese.mo.gov)

### **Disability Services – Children**

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

Down Syndrome Guild of Greater KC  
office: 913-384-4848  
[www.kcdsg.org](http://www.kcdsg.org)

First Steps Program (0-3 years)  
573-522-8762  
[www.dese.mo.gov](http://www.dese.mo.gov)

Heritage Preschool (for special needs children –  
sliding scale) - Harrisonville  
816-380-4604

Kansas City Regional Office (KCRO)  
816-889-3400  
(for early detection of mental retardation and  
developmental disabilities)  
[www.dmh.mo.gov/kcro/](http://www.dmh.mo.gov/kcro/)

### **Local School Districts Special Services Office**

Missouri Department of Elementary and  
Secondary Education  
[www.dese.mo.gov](http://www.dese.mo.gov)

Missouri Department of Health and Senior  
Services  
[www.dhss.mo.gov](http://www.dhss.mo.gov) (A to Z)

Social Security Administration  
800-772-1213  
[www.socialsecurity.gov](http://www.socialsecurity.gov)

The Family Conservancy (childcare referrals for  
special needs children)  
913-342-1110  
[www.thefamilyconservancy.org](http://www.thefamilyconservancy.org)

### **Domestic Violence**

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

Hope House for Battered Women  
816-461-8188  
[www.hopehouse.net](http://www.hopehouse.net)  
Missouri Coalition Against Domestic and Sexual  
Violence  
1-800-799-7233  
[www.mocadsv.org](http://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](http://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](http://www.indep.k12.mo.us)

### **Educational Financial Assistance**

Education Online Search  
[www.education-online-search.com](http://www.education-online-search.com)

Free Application for Federal Student Aid  
1-800-433-3243  
[www.fafsa.ed.gov](http://www.fafsa.ed.gov)

MOSTARS Information Center  
800-473-6757  
[www.mostars.com](http://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](http://www.wcmcaa.org)

### **Emergency Management / Disaster Preparedness**

American Red Cross  
816-380-4271  
(KC) 816-931-8400  
[www.kcredcross.org](http://www.kcredcross.org)

Cass County Emergency Management  
- Harrisonville  
816-380-8125  
[www.casscounty.com](http://www.casscounty.com)

Cass County Health Department - Harrisonville  
816-380-8441

### **Employment and Training**

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

Job Corps (age 16-25)  
816-629-3111  
[excelsiorsprings.jobcorps.gov](http://excelsiorsprings.jobcorps.gov)  
Missouri's Workforce Resource  
[www.greathires.org](http://www.greathires.org)

West Central Missouri Community Action Agency

Belton 816-318-3922  
Harrisonville 816-380-6690  
[www.wcmcaa.org](http://www.wcmcaa.org)

### **Family Counseling Services**

Cass County Psychological Services  
- Harrisonville  
816-380-4010

Compass Health Network  
Harrisonville (816-380-5167)  
Raymore (816-318-4430)

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

The Family Conservancy  
913-342-1110  
[www.thefamilyconservancy.org](http://www.thefamilyconservancy.org)

Turning American Families Around  
913-449-3696  
[www.turningamericanfamiliesaround.org](http://www.turningamericanfamiliesaround.org)

### **Family Support Services**

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

Salvation Army  
816-380-3505  
[www.salvationarmyusa.org](http://www.salvationarmyusa.org)

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

### **Food Assistance**

Cass County Health Department (WIC)  
816-380-8430  
[www.casscountyhealth.com](http://www.casscountyhealth.com)

Cornerstone Community Church  
816-380-2422

Fishes and Loaves - Raymore  
816-322-1177  
(must be Cass County resident)  
[www.fishesandloavesfoodpantry.com](http://www.fishesandloavesfoodpantry.com)

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

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

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

Pleasant Hill Food Pantry – Pleasant Hill  
816-987-3600  
www.tlcp Hill.com

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

### **Health Care / Urgent Care Clinic**

Archie Medical Clinic  
709 East Pine Street  
Archie, Mo. 64725  
816-430-5777

Direct Family Healthcare  
305 W Wall St Ste A  
Harrisonville, Mo. 64701  
816-793-0071

Drexel Medical Clinic  
210 East Main Street  
Drexel, Mo. 64742  
816-619-3000

Garden City Medical Clinic  
101-B Old 7 Highway  
Garden City, Mo. 64747  
816-773-6203

Harrisonville Family Medicine  
2820 East Rock Haven Road, Suite 100  
Harrisonville Mo. 64701  
816-380-3582

Harrisonville Medical Clinic  
2800 East Rock Haven Road, Suite 210  
Harrisonville, Mo. 64701  
816-380-7470

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

Kingsville Medical Clinic  
305 East Pacific Street  
Kingsville, Mo. 64061  
816-597-3500

Mercy and Truth Medical Clinic  
913-248-9965  
www.mercyandtruth.com

Minute Clinic  
CVS Pharmacy  
(Raymore) 1-866-389-2727  
www.minuteclinic.com

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

Peculiar Medical Clinic  
300 South Main Street  
Peculiar, Mo. 64078  
816-779-1100

Pleasant Hill Medical Clinic  
1601 North Highway 7  
Pleasant Hill, Mo. 64080  
816-540-2111

Raymore Urgent Care  
242 Broadmoor Dr  
Raymore, Mo. 64083  
816-318-1300

Southland Primary Care  
17067 South 71 Highway, Suite 100  
Belton, Mo. 64012  
816-331-4000

St. Luke's Convenient Care – Hy-Vee Belton  
1307 E North Ave  
Belton, Mo. 64012  
816-251-5765

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

#### **Home Health Care**

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

Foxwood Springs - Raymore  
816-331-3111

Home Instead Senior Care – Pleasant Hill  
816-540-2499

Quality Home Care - Harrisonville  
(816) 380-3222

Right at Home - Raymore  
816-535-5183  
[www.rightathome.net](http://www.rightathome.net)

Visiting Nurse Association - Harrisonville  
816- 380-3654  
[www.vnac.com](http://www.vnac.com)

#### **Homeless / Transient Services**

Harrisonville Ministerial Alliance  
816-380-3505

City Union Mission  
816-566-5085  
[www.cityunionmission.org](http://www.cityunionmission.org)

Hotline for the Homeless  
816-474-4599

Hope Haven (for domestic violence victims only)  
816-380-4663  
[www.hopehavenofcasscounty.org](http://www.hopehavenofcasscounty.org)

#### **Hospice Services**

Crossroads Hospice of KC  
333-9200  
[www.crossroadshospice.com](http://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](http://www.kansascityhospice.org)

Omega Health Care – Lee's Summit  
816- 268-4130

Serenity Care Hospice - Harrisonville  
816-380-3913  
[www.serenitycares.com](http://www.serenitycares.com)

Twin Lakes Hospice  
(Clinton) 800-328-5446  
[www.twinlakeshospice.com](http://www.twinlakeshospice.com)

#### **Hospitals**

Cass Regional Medical Center  
2800 Rock Haven Rd  
Harrisonville, MO 64701  
816-380-3474 OR 816-380-5888  
[www.cassregional.org](http://www.cassregional.org)

Belton Regional Medical Center  
17065 S. 71 Hwy  
Belton, MO 64012  
816-348-1200  
[www.beltonregionalmedicalcenter.com](http://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](http://www.kc-aa.org)

Breast Center at Menorah Medical Center  
913-498-6266  
[www.menorahmedicalcenter.com/service/breast-care](http://www.menorahmedicalcenter.com/service/breast-care)

Child Abuse / Neglect Hotline  
800-392-3738  
(Missouri only)  
[www.dss.mo.gov/cd/can.htm](http://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](http://www.thehotline.org)

Elder Abuse / Neglect Hotline  
800-392-0210  
[www.dss.mo.gov](http://www.dss.mo.gov)

Food Stamp Case Information  
800-392-1261  
[www.dss.mo.gov](http://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](http://www.boystown.org/hotline)

Homeless Hotline  
816-474-4599

Hope Haven Crisis Line (domestic violence)  
816- 380-4663  
816-380-2833  
[www.hopehavenofcasscounty.org](http://www.hopehavenofcasscounty.org)  
Immunization Hotline (for clinic information)  
380-8433

Medicare Info Hotline  
800-MEDICARE  
[www.medicare.gov](http://www.medicare.gov)

Missouri School Violence Hotline  
866-748-7047

[www.schoolviolencehotline.com](http://www.schoolviolencehotline.com)

Narcotics Anonymous Helpline  
800-561-2250  
[www.na.org](http://www.na.org)

National Center for Missing and Exploited Children  
800-843-5678  
[www.missingkids.com](http://www.missingkids.com)

National Runaway Switchboard  
800-786-2929  
[www.1800runaway.org](http://www.1800runaway.org)

Parent Link Warmline  
800-552-8522  
[extension.missouri.edu/parentlink](http://extension.missouri.edu/parentlink)

Poison Control Center  
800-222-1222  
[www.aapcc.org](http://www.aapcc.org)

Research Psychiatric Crisis Line  
816-444-8161  
[www.researchpsychiatriccenter.com](http://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](http://www.ssa.gov)

STD / AIDS Hotline  
800-227-8922

Suicide Prevention Lifeline  
800-273-8255  
[www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)

United Way Assistance Line  
"211" or 474-5112  
[www.unitedwaygkc.org](http://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**

CASCO 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**

Cass County Psychological Services  
- Harrisonville  
816-380-4010

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

Compass Health Network  
Harrisonville (816-380-5167)  
Raymore (816-318-4430)

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

Crittenton Children's Center (Behavioral Health)  
816-765-6600

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

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

## **Nursing Homes**

Beautiful Savior - Belton  
816-331-0781

Benton House of Raymore  
816-322-2111

Carnegie Village - Belton  
816-322-8444

Crown Care Center - Harrisonville  
816-6525

Foxwood Springs - Raymore  
816-331-3111

Golden Years - Harrisonville  
816-380-4731

Pleasant Hill Health and Rehabilitation Center  
816-540-2116

Rehabilitation Center – Raymore  
816-322-1991

## **Optometry**

Advanced Eyecare South  
816-322-1872

Cylinder Optics Inc – Garden City  
816-862-6253

Discover Vision Centers – Harrisonville,  
Raymore  
816-478-1230

Dyer Vision Center - Belton  
816-331-9590

Ginger Cline, OD - Belton  
816-322-6100

Innovative Vision Care - Belton  
816-331-9590  
[www.innovativevisioncare.com](http://www.innovativevisioncare.com)

Raymore Eyecare - Raymore  
816-318-3937  
[www.raymoreeyecare.com](http://www.raymoreeyecare.com)

Sam's Club Optical Center - Raymore  
816-765-0600

Vision Source - Pleasant Hill

816-987-2203

Vision Source - Raymore  
816-892-0046

Walmart Vision & Glasses - Raymore  
816-322-3039

Wendy Parsons, OD - Belton  
816-554-7747

## **Parenting Support / Child Development**

Parents As Teachers  
Contact your local school district

The Family Conservancy  
913-342-1110  
[www.thefamilyconservancy.org](http://www.thefamilyconservancy.org)

University of Missouri Extension  
"Missouri Families" Program  
573-882-7828  
[www.missourifamilies.org](http://www.missourifamilies.org)

University of Missouri Extension  
Parent Link  
800-552-8522  
[www.extension.missouri.edu/parentlink](http://www.extension.missouri.edu/parentlink)

## **Paternity Testing**

DNA Services of America  
800-927-1635  
[www.dnaso.com](http://www.dnaso.com)

## **Pregnancy Testing**

Birthright of Greater KC (free testing)  
800-550-4900  
[www.birthright.org](http://www.birthright.org)

Cass County Health Department  
816-380-8431  
[www.casscountyhealth.com](http://www.casscountyhealth.com)

Life Choice Center for Women  
816-887-5100  
[www.lifechoicecenter.org](http://www.lifechoicecenter.org)

West Central Missouri Community Action  
Agency  
Belton Clinic: 816-322-5012  
Harrisonville Clinic: 888-577-4640  
[www.wcmcaa.org](http://www.wcmcaa.org)

## **Prescription Assistance**

Needy Meds  
800-503-6897  
[www.needmeds.com](http://www.needmeds.com)

Community Assistance Council  
816-763-3277  
[www.cackc.org](http://www.cackc.org)

Medications  
Missouri RxPlan  
1-800-375-1406  
[www.morx.mo.gov](http://www.morx.mo.gov)

## **Psychologist**

A Balanced Mind, LLC - Harrisonville  
816-738-1545

Overcomers Counseling Center – Raymore,  
Peculiar  
816-255-5375

Rick D. Thomas, Ph.D - Belton  
816-331-0374

Wecare Counseling - Harrisonville  
816-884-2900

## **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](http://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](http://www.eldercare.gov)

Experience Works, Inc. (employment for  
Seniors)  
877-872-4740  
[www.experienceworks.org](http://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](http://www.morx.mo.gov)

Medicare Info  
1-800-MEDICARE  
[www.medicare.gov](http://www.medicare.gov)

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

Missouri Aging Information Network  
[www.moaging.com](http://www.moaging.com)

Missouri Senior Legal Helpline  
[www.moaging.com/legalhelp](http://www.moaging.com/legalhelp)  
1-800-235-5503

Social Security Information  
800-772-1213  
[www.ssa.gov](http://www.ssa.gov)

Visiting Angels (senior homecare)  
800-365-4189  
[www.visitingangels.com](http://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](http://www.wcmcaa.org)

## **Support Groups**

Alcoholics Anonymous  
816-471-7229  
[www.kc-aa.org](http://www.kc-aa.org)

Alzheimer's Support Group  
800-272-3900 (24-hour line)  
[www.alz.org](http://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 - Harrisonville  
Thrift Store  
816-884-2279

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

Pleasant Hill Thrift Store & Food Pantry  
– Pleasant Hill  
816-987-3600  
www.tlcp Hill.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) - Harrisonville  
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

### **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](http://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

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

### **Youth Programs**

Boy Scouts  
942-9333  
[www.hoac-bsa.org](http://www.hoac-bsa.org)

Bullying Prevention Information  
[www.eyesonbullying.org](http://www.eyesonbullying.org)

Community Centers  
Belton (348-7400)  
[www.beltonparks.org](http://www.beltonparks.org)  
Harrisonville (380-8980)

[www.ci.harrisonville.mo.us](http://www.ci.harrisonville.mo.us)

4H  
University of Missouri Extension  
380-8460  
[extension.missouri.edu](http://extension.missouri.edu)

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

Headstart (ages 3-5 years)  
Belton (322-0004)  
Harrisonville (380-1844)  
[www.wcmcaa.org](http://www.wcmcaa.org)

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

Safe Sitters Training  
816-654-7966  
[www.kcumb.edu](http://www.kcumb.edu)

Youth Friends  
816-842-7082  
[www.youthfriends.org](http://www.youthfriends.org)

# Health Care Directory

## Physician Clinics

Physician Clinics by specialty by location located in Cass County.

### Primary Care / Family Practice

#### **Archie Medical Clinic**

Darya Mari Collins, NP-C  
Richard Price, MD  
709 East Pine Street  
Archie, Mo. 64725  
(816)430-5777

#### **Direct Family Healthcare**

Marsha Burris, NP  
Renee Endicott, NP  
305 W Wall St Ste A  
Harrisonville, Mo. 64701

#### **Garden City Medical Clinic**

Karmen E Goosey, ARNP, MSN, FNP-BC  
Richard Price, MD  
Christopher David Maxwell, MD  
101-B Old 7 Highway  
Garden City, Mo. 64747  
(816)773-6203

#### **Harrisonville Family Medicine**

Amy Marie Gibbens, MSN, FNP-C  
Shaun B Holden, MD—Functional Medicine  
Jennifer M Ryan, MSN FNP-C  
Aaron L Travis, DO, FACOI— Internal  
Medicine  
Damon K Travis, DO, FA  
Taylor Lincoln, MSN, FNP-C  
Tina Hill, FNP-C  
Kristin Waugh, MSN, FNP-C  
Jacob Smith, FNP-C  
2820 East Rock Haven Road, Suite 100  
Harrisonville Mo. 64701  
(816)380-3582

#### **Harrisonville Medical Clinic**

Heather A Bloesser, DO  
Lisa Nicole Everhart, NP  
Melinda M Lacy, FNP-BC  
Richard C Price, MD  
Samuel Dean Brewster, MD  
2800 East Rock Haven Road, Suite 210  
Harrisonville, Mo. 64701  
(816) 380-7470

#### **Kingsville Medical Clinic**

Kristi Ainstine, FNP  
Christopher David Maxwell, MD  
305 East Pacific Street  
Kingsville, Mo. 64061  
(816)597-3500

#### **Peculiar Medical Clinic**

Angelena L Orear, ARNP  
Alberto Suarez, MD  
Jackie D Kumm, RN, MSN, FNP-BC  
Molly Rae Urton, NP  
300 South Main Street  
Peculiar, Mo. 64078  
(816)779-1100

#### **Pleasant Hill Medical Clinic**

Jessica Testa, DO  
Pamela D Davis, DO  
Stephanie R Duarte, RMSN, FNP-BC  
Breann Sargent, FNP  
Ken Petersen, DO (orthopedics)  
Clinton Seifert, MD (general surgery)  
1601 North Highway 7  
Pleasant Hill, Mo. 64080  
(816)540-2111

#### **Southland Primary Care**

Logan Pratt, MD  
Kirk Bradley, MD  
David Williams, MD  
Kurt Bogner, DO  
Casandra Brewster, MD  
Sam Assafeeen, MD- Internal Medicine  
Zandra Gottman, NP  
Kristin Smith, FNP

17067 South 71 Highway, Suite 100  
Belton, Mo. 64012  
(816)331-4000

**Swope Health-Belton**

206 E North Avenue  
Belton, Mo 64012  
(816)599-5120

**OB/GYN**

**Midwest Women's Healthcare Specialist**

Belton Regional Medical Center  
17067 South 71 Highway, Suite 300  
Allyssa Kays, MD  
Meredith Levine, MD  
Rebecca Wayman, MD  
Belton, Mo. 64012  
(816)333-5424

**Midwest Women's Healthcare Specialist**

Cass Regional Medical Center  
2820 East Rock Haven Road, Suite 205  
Allyssa Kays, MD  
Harrisonville Mo. 64701  
(816)444-6888

**Pediatrics**

**Cass County Pediatrics & Adolescents-  
an affiliate of Children's Mercy**

523 North Scott Ave  
Ann Gassman, MD  
Anuradha Sarma, MD  
Merideth Nitzel, MD  
Lisa Welker, PNP  
Susan Bennett, FNP  
Belton, Mo. 64012  
(816)322-4769

**Specialists**

**Allergy**

**Aggarwal Allergy Clinic**

17067 South 71 Highway, Suite 200  
Belton, Mo. 64012  
(816)525-8400

**Cardiology**

**Midwest Heart and Vascular Specialist**

- 1) 17067 South 71 Highway, Suite 200  
Van Jones, DO  
Timothy Blackburn, MD  
Belton, Mo. 64012  
(816)348-4281
- 2) 2820 East Rock Haven Road, Suite 200  
Carrie Totta, MD  
Kiranmayi Chilappa, MD  
Jennifer Parris, NP  
Harrisonville Mo. 64701  
(816)380-8088

**Dermatology**

**Rock Haven Specialty Clinic**

2820 East Rock Haven Road, Suite 150  
Viseslav Tonkovic-Capin, MD  
Maria Tonkovic-Capin, MD  
Harrisonville Mo. 64701  
(816)887-0312

**Dialysis Clinics**

**Dialysis Clinic, Inc**

17045 South 71 Highway  
Belton, Mo. 64012  
(816)322-4034

**Davita Harrisonville Renal Center**

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**  
2820 East Rock Haven Road, Suite 220  
Brandon Johnson, MD  
Nicholas Wirtz, MD  
Harrisonville Mo. 64701  
(816)380-2446

**ENT Associated of Greater KC**  
17067 South 71 Highway, Suite 200  
Brandon Johnson, MD  
Belton, Mo. 64012  
(816)478-4200

**Endocrinology**

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

**Gastroenterology**

**Belton Regional Medical Center**  
17067 South 71 Highway Suite 200  
**Kansas City Gastroenterology and  
Hepatology-Belton**  
Rishi Grewal, MD  
Erica Dailey, MD  
Michael Conner, MD  
Ivan Elias, MD  
William Ginsburg, MD  
Francis Dailey, MD  
Belton, Mo. 64012  
(816)333-5424

**Harrisonville Family Medicine**  
2820 East Rock Haven Road, Suite 100  
Aaron L Travis, DO  
Harrisonville Mo. 64701

(816)380-3582

**Cass Regional Medical Center**  
2800 East Rock Haven Road  
Kansas City Gastroenterology and  
Hepatology  
Rishi Grewal, MD  
Ivan Elias, MD  
Francis Dailey, MD  
Harrisonville Mo. 64701  
(816)380-5888 ext. 7880

**General Surgery**

**KC Vascular & General Surgery-Belton**  
17067 South 71 Highway, Suite 200  
Caitlin Rooney, DO  
Austin Lohr, DO  
Belton, Mo. 64012  
(816)348-4220

**Cass Regional Medical Center  
General Surgery Clinic**  
Jack R Hudkins, MD  
Walter Costner, MD  
Clifton Siefert, MD  
2820 East Rock Haven Road, Suite 220  
Harrisonville Mo. 64701  
(816)380-2446

**Infectious Disease**

**Belton Regional Medical Center  
Infectious Disease Associated of KC**  
Joel McKinsey, MD  
Marjorie Wongsakhaluang, MD  
David McKinsey, MD  
David Brune, MD

**Nephrology**

**Midwest Nephrology Consultants, PA**  
Robert Golder, MD  
Hemender Vats, MD  
2820 East Rock Haven Road, Suite 160  
Harrisonville Mo. 64701  
(816)276-1700



**Belton Regional Medical Center  
Kidney Associated of KC**

**Neurology**

**Rock Haven Specialty Clinic**

Michael Schwartzman, DO  
2820 East Rock Haven Road, Suite 150  
Harrisonville Mo. 64701  
(816)887-0312

**Midwest Neurology Associates**

- 1) 17067 South 71 Highway, Suite 200  
Belton, Mo. 64012  
(816)348-4267
- 2) 2820 East Rock Haven Road, Suite 205  
Harrisonville Mo. 64701  
(816)380-8081

**Oncology**

**MidAmerica Cancer Care**

Jaswinder Singh, MD  
Nicholas Shuler, DO  
Kathrine Collins, NP  
2800 East Rock Haven Drive  
Harrisonville, Mo. 64701  
(816)380-5888 ext. 7880

**Sarah Cannon Cancer Center**

17053 South 71 Highway, Ste 204  
Jaswinder Singh, MD  
Nicholas Shuler, DO  
Easton Schwartz, MD  
Kathrine Collins, NP  
Belton, Mo. 64012  
(816)348-1900

**Ophthalmology**

**Cass County Eye Center**

424 East North Avenue  
Rolland Sabatas, MD  
Belton, Mo. 64012  
(816)322-6100

**Discover Vision Center - Harrisonville**

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

**Discover Vision Centers - Raymore**

1018 W Foxwood Dr  
Raymore, Mo. 64083  
(816)478-1230

**Heart of America Eyecare**

1147 E. North Avenue  
Amy Cicco, MD  
Amy Gemperli, MD  
Belton, Mo. 64012  
(816) 332-6100

**John Taylor, MD**

2033 North Commercial  
Harrisonville, Mo. 64701  
816-380-7970

**Orthopedics**

**Bone and Joint Specialists Physicians  
Group**

- 1) 17067 South 71 Highway, Suite 200  
Belton, Mo. 64012  
Danny Carroll, MD  
Kimberly Winkley, NP  
Catherine Sager, APRN, MSN, NP-C  
(816)348-4270
- 2) 2820 East Rock Haven Road, Suite 120  
Danny Carroll, MD  
Kimberly Winkley, NP  
Harrisonville Mo. 64701  
(816)348-4270

**Cass Regional Orthopedics**

Kenneth Peterson, DO  
Tyson Travis, DO  
2820 East Rock Haven Road, Suite 120  
Harrisonville Mo. 64701  
(816)380-7662

**KC Orthopedic Alliance**

17067 South 71 Highway, Suite 301  
Valarie Deardorff, MD  
David Clymer, MD  
Matthew, Kneidel, MD  
Scott Abraham, MD  
Gregory VandenBurghe, MD  
Michael McCable, MD  
Belton, Mo. 64012

**SANO Orthopedics**

Timothy Roberts, DO  
Matthew Daggett, DO  
Kevin Witte, DO  
Matthew Cullen, DO  
Alex Palmer, DO  
Stephanie De Vere, MD

**Pain Management****SJA Pain Associates**

Cass Regional Medical Center  
Richard Morgan, MD  
James Johnson, DO  
2800 East Rock Haven Road  
Harrisonville, Mo. 64701  
(816)380-5888

**KC Pain Center-Belton**

Belton Regional Medical Center  
17605 South 71 Highway  
Thomas Laughlin, MD  
Belton, Mo. 64012  
(913)754-2199  
(816)331-6700

**Podiatry****Associated Podiatrists, PA**

Belton Regional Medical Center  
17067 South 71 Highway, Suite 200  
Radmila Samardzja, DOM  
Belton, Mo. 64012  
(913)321-0522

**Rock Haven Specialty Clinic**

William Crce, DPM  
2820 East Rock Haven Road, Suite 150  
Harrisonville Mo. 64701

**Robert A & Laurel Bondi, DPM**

115 Bradford Lane  
Belton, Mo. 64102  
(816)322-3137

**Pulmonology**

Kansas City Pulmonary Practice  
17067 South 71 Highway, Suite 200  
Hamza Alshami, MD  
Willaim Beary, MD  
Netea Gaur, MD  
John Gaur, MD  
Katie Kincaid, NP  
Brian Mieczkowski, DO  
Belton, Mo. 64012  
(816)348-4267

**Kansas City Pulmonary Practice**

2820 East Rock Haven Road, Suite 200  
Hamza Alshami, MD  
Daniel Balmaceda, MD  
Willaim Beary, MD  
Netea Gaur, MD  
John Gaur, MD  
John Ireland, DO  
Katie Kincaid, NP  
Brian Mieczkowski, DO  
Harrisonville Mo. 64701  
(816)333-1919

**Rheumatology****Cass Regional Medical Center  
Specialist Clinic**

Kevin Latinis, MD  
Gina Accurso. MSN, APRN, FNP-C  
2800 East Rock Haven Road  
Harrisonville, Mo 64701  
(816)380-5888 ext. 7880

## **Urology**

### **Rock Haven Specialty Clinic**

Billy Perry, MD

Todd Johnson, DO

2820 East Rock Haven Road, Suite 150

Harrisonville Mo. 64701

### **Belton Regional Medical Center**

#### **Kansas City Urology Care**

17067 South 71 Highway, Suite 200

Todd Johnson, MD

Belton, Mo. 64012

(816) 444-5525

## **Wound Care**

### **Cass Regional Medical Center**

#### **Wound Clinic**

Walter Costner, MD

William Cruce, DPM

Molly Urton, NP

2820 East Rock Haven Road, Suite 150

Harrisonville Mo. 64701

(816)887-0309

# General Online Healthcare Resources

## Doctors and Dentists--General

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

## Hospitals and Clinics--General

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

## Doctors and Dentists--Specialists

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

## Other Healthcare Providers

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

## Hospitals and Clinics--Specialized

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

## Other Healthcare Facilities and Services

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

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

# V. Detail Exhibits


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[VVV Consultants LLC]


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## a.) Patient Origin Source Files

[VVV Consultants LLC]

		Patient Origin by Region - Inpatient																	
		Cass, MO Residents Treated in HIDI Reporting Area																	
		Federal Fiscal Year: 2018																	
		Total		Pediatric		Adult Medical/Surgical								Psychiatric		Obstetric		Newborn	
Discharges	Age 0 - 17	Age 18 - 44	Age 45 - 64	Age 65 - 74	Age 75+	Psychiatric	Obstetric	Newborn	Cases	%	Cases	%	Cases	%					
Hospital	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	
<b>Hospital Total</b>	<b>14,046</b>	<b>100.0%</b>	<b>564</b>	<b>4.0%</b>	<b>1,233</b>	<b>8.8%</b>	<b>3,258</b>	<b>23.2%</b>	<b>2,268</b>	<b>16.1%</b>	<b>3,211</b>	<b>22.9%</b>	<b>1,169</b>	<b>8.3%</b>	<b>1,221</b>	<b>8.7%</b>	<b>1,122</b>	<b>8.0%</b>	<b>24.7%</b>
Research Medical Center - Kansas Ci	2,495	17.8%	8	0.3%	257	10.3%	592	23.7%	384	15.4%	502	20.1%	383	15.4%	195	7.8%	174	7.0%	25.3%
Belton Regional Medical Center - Belt	2,394	17.0%	1	0.0%	259	10.8%	659	27.5%	492	20.6%	933	39.0%	45	1.9%	5	0.2%	0		20.4%
Saint Luke's East Hospital - Lees Sun	1,655	11.8%	4	0.2%	95	5.7%	315	19.0%	261	15.8%	371	22.4%	6	0.4%	311	18.8%	292	17.6%	20.8%
Menorah Medical Center - Overland P	780	5.6%	2	0.3%	40	5.1%	236	30.3%	153	19.6%	145	18.6%	3	0.4%	103	13.2%	98	12.6%	44.5%
Cass Regional Medical Center - Harris	755	5.4%	1	0.1%	59	7.8%	207	27.4%	155	20.5%	286	37.9%	47	6.2%	0		0		20.3%
University of Kansas Health System -	734	5.2%	10	1.4%	104	14.2%	216	29.4%	133	18.1%	116	15.8%	111	15.1%	25	3.4%	19	2.6%	30.0%
Lee's Summit Medical Center - Lees S	716	5.1%	0		89	12.4%	227	31.7%	199	27.8%	193	27.0%	8	1.1%	0		0		24.7%
St. Joseph Medical Center - Kansas C	696	5.0%	0		65	9.3%	214	30.7%	134	19.3%	276	39.7%	6	0.9%	1	0.1%	0		20.8%
Saint Luke's Hospital of Kansas City	602	4.3%	1	0.2%	63	10.5%	162	26.9%	118	19.6%	131	21.8%	8	1.3%	62	10.3%	57	9.5%	36.2%
Children's Mercy Kansas City - Kans	391	2.8%	364	93.1%	6	1.5%	0		0		0		7	1.8%	7	1.8%	7	1.8%	25.1%
Overland Park Regional Medical Cent	377	2.7%	37	9.8%	19	5.0%	60	15.9%	25	6.6%	32	8.5%	0		104	27.6%	100	26.5%	25.5%
Truman Medical Center Lakewood - K	369	2.6%	5	1.4%	15	4.1%	25	6.8%	13	3.5%	6	1.6%	17	4.6%	146	39.6%	142	38.5%	19.0%
AdventHealth Shawnee Mission - Sha	327	2.3%	1	0.3%	38	11.6%	69	21.1%	21	6.4%	27	8.3%	45	13.8%	65	19.9%	61	18.7%	31.5%
Saint Luke's South - Overland Park, K	290	2.1%	0		15	5.2%	63	21.7%	61	21.0%	68	23.4%	1	0.3%	41	14.1%	41	14.1%	30.7%
Centerpoint Medical Center - Indepen	223	1.6%	0		20	9.0%	53	23.8%	34	15.2%	28	12.6%	5	2.2%	43	19.3%	40	17.9%	35.0%
Truman Medical Center Hospital Hill -	185	1.3%	1	0.5%	32	17.3%	31	16.8%	3	1.6%	4	2.2%	33	17.8%	48	25.9%	33	17.8%	21.6%



 HOSPITAL INDUSTRY DATA INSTITUTE		Patient Origin by Region - Inpatient																		
		Cass, MO Residents Treated in HIDI Reporting Area																		
		Federal Fiscal Year: 2017																		
		Total Discharges		Pediatric		Adult Medical/Surgical										Psychiatric		Obstetric		New born
Cases	%	Cases	%	Age 0 - 17	Age 18 - 44	Age 45 - 64	Age 65 - 74	Age 75+	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%		
<b>Hospital Total</b>	13,462	100.0%	575	4.3%	1,264	9.4%	3,065	22.8%	2,178	16.2%	3,012	22.4%	1,141	8.5%	1,155	8.6%	1,072	8.0%	23.9%	
Research Medical Center - Kansas C	2,324	17.3%	7	0.3%	233	10.0%	567	24.4%	324	13.9%	451	19.4%	431	18.5%	166	7.1%	145	6.2%	23.1%	
Belton Regional Medical Center - Bel	2,138	15.9%	3	0.1%	248	11.6%	603	28.2%	474	22.2%	778	36.4%	30	1.4%	2	0.1%	0		21.4%	
Saint Luke's East Hospital - Lees Sun	1,550	11.5%	1	0.1%	131	8.5%	272	17.5%	221	14.3%	336	21.7%	7	0.5%	299	19.3%	283	18.3%	18.9%	
University of Kansas Health System -	817	6.1%	15	1.8%	97	11.9%	222	27.2%	191	23.4%	124	15.2%	114	14.0%	29	3.5%	25	3.1%	32.8%	
St. Joseph Medical Center - Kansas C	817	6.1%	0		81	9.9%	233	28.5%	152	18.6%	328	40.1%	11	1.3%	5	0.6%	7	0.9%	19.8%	
Cass Regional Medical Center - Harri	704	5.2%	0		46	6.5%	198	28.1%	152	21.6%	265	37.6%	43	6.1%	0		0		19.5%	
Menorah Medical Center - Overland P	674	5.0%	0		54	8.0%	176	26.1%	124	18.4%	152	22.6%	5	0.7%	84	12.5%	79	11.7%	37.5%	
Saint Luke's Hospital of Kansas City	651	4.8%	2	0.3%	67	10.3%	166	25.5%	146	22.4%	123	18.9%	5	0.8%	75	11.5%	67	10.3%	37.6%	
Lee's Summit Medical Center - Lees S	602	4.5%	1	0.2%	61	10.1%	193	32.1%	141	23.4%	200	33.2%	6	1.0%	0		0		28.1%	
Children's Mercy Kansas City - Kans	394	2.9%	375	95.2%	5	1.3%	0		0		0		2	0.5%	6	1.5%	6	1.5%	24.4%	
Overland Park Regional Medical Cent	381	2.8%	16	4.2%	31	8.1%	60	15.7%	33	8.7%	37	9.7%	1	0.3%	106	27.8%	97	25.5%	28.1%	
Truman Medical Center Lakewood - K	322	2.4%	0		17	5.3%	19	5.9%	11	3.4%	7	2.2%	37	11.5%	122	37.9%	109	33.9%	10.6%	
Saint Luke's South - Overland Park, K	311	2.3%	0		21	6.8%	62	19.9%	53	17.0%	64	20.6%	1	0.3%	55	17.7%	55	17.7%	28.9%	
AdventHealth Shawnee Mission - Sha	293	2.2%	1	0.3%	28	9.6%	42	14.3%	26	8.9%	14	4.8%	37	12.6%	71	24.2%	74	25.3%	26.6%	
Centerpoint Medical Center - Indepen	230	1.7%	1	0.4%	42	18.3%	56	24.3%	28	12.2%	37	16.1%	1	0.4%	33	14.3%	32	13.9%	30.4%	
Truman Medical Center Hospital Hill -	208	1.5%	5	2.4%	35	16.8%	40	19.2%	6	2.9%	2	1.0%	38	18.3%	45	21.6%	37	17.8%	26.9%	

 HOSPITAL INDUSTRY DATA INSTITUTE		Patient Origin by Region - Inpatient																				
		Cass, MO Residents Treated in HIDI Reporting Area																				
		Federal Fiscal Year: 2016																				
		Total Discharges		Pediatric		Adult Medical/Surgical										Psychiatric		Obstetric		New born		Surg %
Hospital	Cases	%	Cases	%	Age 0 - 17		Age 18 - 44		Age 45 - 64		Age 65 - 74		Age 75+		Cases	%	Cases	%	Cases	%	Cases	%
<b>Hospital Total</b>	<b>13,335</b>	<b>100.0%</b>	<b>507</b>	<b>3.8%</b>	<b>1,228</b>	<b>9.2%</b>	<b>2,942</b>	<b>22.1%</b>	<b>2,109</b>	<b>15.8%</b>	<b>3,024</b>	<b>22.7%</b>	<b>1,179</b>	<b>8.8%</b>	<b>1,229</b>	<b>9.2%</b>	<b>1,117</b>	<b>8.4%</b>	<b>24.8%</b>			
Research Medical Center - Kansas C	2,314	17.4%	8	0.3%	207	8.9%	519	22.4%	352	15.2%	428	18.5%	475	20.5%	177	7.6%	148	6.4%	22.8%			
Belton Regional Medical Center - Bel	2,049	15.4%	2	0.1%	258	12.6%	572	27.9%	419	20.4%	770	37.6%	26	1.3%	2	0.1%	0		21.4%			
Saint Luke's East Hospital - Lees Sur	1,406	10.5%	6	0.4%	101	7.2%	227	16.1%	166	11.8%	292	20.8%	10	0.7%	310	22.0%	294	20.9%	19.0%			
St. Joseph Medical Center - Kansas C	1,030	7.7%	4	0.4%	66	6.4%	238	23.1%	200	19.4%	311	30.2%	9	0.9%	107	10.4%	95	9.2%	24.5%			
Cass Regional Medical Center - Harris	868	6.5%	7	0.8%	57	6.6%	236	27.2%	177	20.4%	331	38.1%	60	6.9%	0		0		20.6%			
Menorah Medical Center - Overland P	708	5.3%	2	0.3%	70	9.9%	188	26.6%	140	19.8%	196	27.7%	5	0.7%	57	8.1%	50	7.1%	39.1%			
University of Kansas Health System -	686	5.1%	30	4.4%	102	14.9%	179	26.1%	170	24.8%	97	14.1%	75	10.9%	18	2.6%	15	2.2%	36.0%			
Saint Luke's Hospital of Kansas City	628	4.7%	2	0.3%	76	12.1%	155	24.7%	118	18.8%	118	18.8%	3	0.5%	80	12.7%	76	12.1%	37.1%			
Lee's Summit Medical Center - Lees S	617	4.6%	0		52	8.4%	190	30.8%	142	23.0%	224	36.3%	9	1.5%	0		0		25.0%			
AdventHealth Shawnee Mission - Sha	336	2.5%	0		32	9.5%	53	15.8%	36	10.7%	21	6.3%	31	9.2%	83	24.7%	80	23.8%	34.8%			
Overland Park Regional Medical Cent	322	2.4%	6	1.9%	23	7.1%	50	15.5%	29	9.0%	31	9.6%	0		93	28.9%	90	28.0%	28.6%			
Children's Mercy Kansas City - Kans	318	2.4%	297	93.4%	13	4.1%	0		0		0		4	1.3%	2	0.6%	2	0.6%	28.6%			
Saint Luke's South - Overland Park, K	311	2.3%	0		19	6.1%	55	17.7%	30	9.6%	73	23.5%	0		71	22.8%	63	20.3%	26.7%			
Truman Medical Center Lakewood - K	290	2.2%	4	1.4%	16	5.5%	17	5.9%	5	1.7%	13	4.5%	29	10.0%	110	37.9%	96	33.1%	14.8%			
Centerpoint Medical Center - Indepe	216	1.6%	0		26	12.0%	67	31.0%	21	9.7%	26	12.0%	2	0.9%	36	16.7%	38	17.6%	36.6%			
Truman Medical Center Hospital Hill -	195	1.5%	2	1.0%	34	17.4%	42	21.5%	8	4.1%	8	4.1%	42	21.5%	35	17.9%	24	12.3%	24.6%			

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## b.) Town Hall Attendees, Notes, & Feedback

[VVV Consultants LLC]

### Cass County, MO 2022 CHNA Town Hall - 8/30 (5:30-7pm)

Team	Lead	Attend	Last Name	First Name	Organization	Title
A		x	Carmichael	Danny		
A		x	Land	Patty	Cass Regional	Admin Practice Man & Ancillaries
A	##	x	Wiseman	Toni	CRMC	Trustee
B	##	x	Czech	Sarah	Cass County Health Department	Director
B		x	Lee	Jeff		
B		x	McLelland	Sonya		
C		x	Johnson	Jerry	Cass Regional Medical Center	Board Trustee
C	##	x	Lang	Chris	Cass Regional Medical Center	CEO
C		x	Sebelien	Jay	Cass Regional Medical Center	CNO
C		x	McCall	Mathew	Cass County	

# Cass County, MO Town Hall Event Notes

Attendance: N=10

Date: 8/30/2022 – 5:30 p.m. to 7 p.m.

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## **Community identified the following drugs (substance abuse) occurring in Cass Co, MO: Fentanyl, Meth, Marijuana, Heroin, Cocaine, including Alcohol Abuse**

### **Strengths**

- Diversity of Locations for Primary Care
- Financially Strong Hospital
- Health Department in Cass County
- Senior Enrichment Programs in Harrisonville
- Nursing Homes
- Diversity of Services Available
- Cass County Dental

### **Needs**

- Mental Health (Diagnosis, Treatment, Access, Providers)
- Transportation (Healthcare)
- Ambulance Coverage (Access / Staffing)
- Obesity (Nutrition / Exercise)
- Local Employment
- Chronic Disease Management
- Awareness of Services
- STI Treatment / Testing
- Visiting Specialists (Cardiology, OBG, Pulmonology)
- Community Leadership “Heal is our Priority”
- Workforce Staffing
- Homeless

# Wave #4 CHNA - Cass County, MO

## Town Hall Conversation - Strengths (White Cards) N=10

Card #	What are the strengths of our community that contribute to health?	Card #	What are the strengths of our community that contribute to health?
1	Serving Community	6	Location of primary care access sites
1	Services provided basic	6	Engaged staff and providers
1	Rehab	7	Treating people well
1	Quality care	7	Several services lines for small hospitals
1	Education	7	Financially strong
2	5 rural health clinics/ CAH-access	7	Long unity of staff
2	Dental care	7	Low poor outcomes
2	Oncology Services	8	High standards of care
2	Facility up-to-date	8	Several options in outpatient for services
3	Health Dept.	8	Have EMS transport for local trips now
3	Nursing home	8	State Art equipment
3	Strong first responders	8	Board/leadership vested in employee success/satisfaction
3	Clinics PC and urgent	9	Parks/trails/fitness facilities
3	Hospital with many services	9	Safety
4	Reputation	9	Strong hospital system
4	Accessibility	10	Good primary care network
4	Diabetes education	10	Churches/ministries alliance
4	Care comfort	10	Food pantry
5	Offering low/no cost options for vaccinations	10	OATS
5	Lower opioid subscription	10	Senior center
6	Diversity of services available	10	Dental care

# Wave #4 CHNA - Cass Co+B1:E36unty, MO

## Town Hall Conversation - Weaknesses (Color Cards) N=10

Card #	What are the weaknesses of our community that contribute to health?	Card #	What are the weaknesses of our community that contribute to health?
1	More service	7	More psych services/ providers
1	Staffing-to be able to provide care	7	Insulin availability
1	Band-aid hospital/reputation	7	Low income folks having access
1	<b>Town Hall Conversation - Weaknesses (Color Cards) N=10</b>	7	Primary care physicians
1	Outsource services IT	7	Ambulance services
2	Access/transportation	7	Homeless people
2	Distribute services evenly across southern cities	8	Transportation(nonmedical)
2	Marketing Services / How to access them	8	Lack of mental health resources-adult
2	Substance abuse	8	More resources to help get meds at lower cost
2	Homelessness	8	Pediatric presence for community and OB/GYN
3	Access to primary care	8	Resources for homeless populatio(more shelters)
3	Access to specialty care(more/greater hours)	8	Lack of veteran services
3	Mental health and drug dependency services	8	Need infectious disease provider
3	Chronic disease / Management	8	Adult obesity
3	Priority given to health	8	Drug/alcohol
3	Lack of unified strategy stats to improve health	8	Senior care staffing
4	Community outreach	9	Access to mental health services
4	OB/GYN	9	Nutrition education
4	Additional care	9	Mental health connection to physical health
4	Suicide prevention	9	Chronic disease management
4	Attraction healthcare workers	9	More primary care physicians
5	More home health care services	9	Pulmonary specialists
5	More specialties at hospital lower wait/appt. date	9	EMS coverage
5	Increase family care within department	10	Transportation
5	Increase number of PC and NP staff	10	Chronic diseases
5	More mental health services-outpatient	10	STI testing/treatment
6	Transportation	10	OBGYN access
6	Additional services	10	Mental health access
6	Mental health	10	Enrichment opportunities(youth and seniors)
6	Community Health-co-op outreach	10	Walkability
7	Stronger health dept.		

## **EMAIL #1 Request Message (Cut & Paste)**

**From:** Chris Lang, CEO

**Date:** 6/22/2022

**To:** Community Leaders, Providers and Hospital Board and Staff

**Subject:** 2022 Cass County Community Health Needs Assessment

**Cass Regional Medical Center** is working with other community health providers to update the 2022 Cass County Community Health Needs Assessment. The goal of this assessment update is to understand progress in addressing health needs cited in the 2016 and 2019 CHNA reports and to collect up-to-date community health perceptions.

VVW Consultants LLC, an independent healthcare consulting firm from Olathe, KS, has been retained to conduct this countywide research. All responses will be confidential if you choose to participate in this online survey.

To gather community feedback, a short and confidential online survey has been developed. To access this survey, please utilize the link below to participate.

**LINK:** <https://www.surveymonkey.com/r/CassCoMO>

All community residents and business leaders are encouraged to complete the 2022 CHNA online survey by **August 10<sup>th</sup>, 2022**. In addition, please **HOLD the date** for the Town Hall meeting scheduled **Tuesday, August 30<sup>th</sup>, 2022**, for Dinner from **5:30 p.m. – 7:00 p.m.** Please stay on the lookout for more information to come soon. Thank you in advance for your time and support!

If you have any questions regarding CHNA activities, please call Chris at 816.380.3474



## **PR#1 News Release**

*Local Contact: XXXX*

**Media Release: 7/1/22**

# **Cass Regional Medical Center Seeks Community Input on Local Health Needs**

Over the next few months, **Ellsworth County Medical Center (ECMC)** will be working with area providers to update the 2019 Ellsworth County Community Health Needs Assessment (CHNA). We are seeking input from community members regarding the healthcare needs in order to complete the 2022 CHNA.

VVV Consultants LLC, an independent research firm from Olathe, KS has been retained to conduct this countywide research. The goal of this assessment update is to understand progress in addressing community health needs cited in the both the 2016 and 2019 assessment reports, while collecting up-to-date community health perceptions and ideas.

A brief community survey has been developed in order to accomplish this work. The survey can be accessed by visiting the hospital website or the ECMC Facebook page if you would like to participate in providing this important feedback.

All community residents and business leaders are encouraged to complete the 2022 CHNA online survey by **April 1<sup>st</sup>, 2022**. In addition, please **HOLD the date** for the Town Hall meeting scheduled **Tuesday, April 12<sup>th</sup>, 2022** for lunch from **11:30 a.m. - 1:00 p.m.** Please, stay on the lookout for more information to come soon. Thank you in advance for your time and support!

If you have any questions regarding CHNA activities, please call 816.380.3474

**From:** Chris Lang, CEO

**Date:** 07/20/22

**To:** Community Leaders, Providers, Hospital Board Members and Staff

**Subject:** Last Call CHNA 2022 Town Hall Event – Cass County

Please join **Cass Regional Medical Center** for a Town Hall meeting on **Tuesday, August 30<sup>th</sup>, from 5:30 p.m. – 7:00 PM at Cass Regional Medical Center Conference Room**, The purpose of this meeting is to review key health indicators for Cass County and gather your feedback for our 2022 Community Health Needs Assessment (CHNA) programs.

Healthcare leaders, social service providers, community-based organizations, and county residents are all invited to this event – *please spread the word*.

To adequately prepare for this socially distanced gathering, we need your RSVP by August 30<sup>th</sup>. Please utilize the link or QR code below to complete your RSVP if you plan to attend this important event.

**RSVP Now:** <https://www.surveymonkey.com/r/CassRSVP>



Scan me to RSVP!

We hope you can find the time to attend this event on August 30<sup>th</sup>! Thank you for your time and participation!

If you have any questions regarding CHNA activities, please call 816.380.3474

# Join Cass Regional Medical Center as They Host the 2022 CHNA Town Hall Event

Media Release: 07/20/22

**Cass Regional Medical Center** will be hosting a Town Hall meeting for the 2022 Cass County, KS Community Health Needs Assessment on **Tuesday, August 30<sup>th</sup> from 5:30 p.m. to 7:00 p.m.** During this meeting, we will review the community health indicators and gather feedback opinions on key community needs.

As we continue to focus is the safety of our community in conjunction with COVID guidelines, it is vital everyone planning to attend this event RSVPs to properly adhere to guidelines for this social distanced event. Please visit our hospital website and social media sites to obtain the link to complete your RSVP! We hope that you find the time to join us for this important event on August 30th. Thanks in advance for your time and support!



Scan me to RSVP!

If you have any questions about CHNA activities, please call 816.380.3474

## d.) Primary Research Detail

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[VVV Consultants LLC]

## CHNA 2022 Community Feedback: Cass County MO (N=85)

ID	Zip	Rating	Movement	c1	c2	c3	In your opinion, what are the root causes of "poor health" in our community?
1016	64701	Very Good	Not really changing much	CHRON	FIT	MH	Chronic Disease, Lack of Nutrition/Exercise Services, Limited Access to Mental Health
1064	64747	Average	Decreasing - slipping downward	CHRON	MH	NEG	Chronic Disease, Limited Access to Mental Health, Neglect
1081		Very Good	Increasing - moving up	CHRON	MH	NEG	Chronic Disease, Limited Access to Mental Health, Neglect
1028	64701	Good	Not really changing much	CHRON	MH	SPRT	Chronic Disease, Lack of Health & Wellness, Limited Access to Mental Health, Family Assistance programs, Neglect
1054	64080	Good	Not really changing much	CHRON	MH	INSU	Chronic Disease, Limited Access to Mental Health, Lack of Health Insurance
1001	64701	Very Poor	Decreasing - slipping downward	CHRON	NUTR	FIT	Chronic Disease, Lack of Nutrition/Exercise Services, Dr not listening, when u see a doctor and are billed for a 30 min visit they should talk to u for more then 5 min
1061	64078	Very Good	Not really changing much	CHRON	NUTR	NEG	Chronic Disease, Lack of Nutrition/Exercise Services, Neglect
1043		Average	Decreasing - slipping downward	CHRON	PREV	NEG	Chronic Disease, Lack of Health & Wellness, Neglect
1079	64747	Average	Decreasing - slipping downward	CHRON	PREV		Chronic Disease, Lack of Health & Wellness
1004	64701	Average	Not really changing much	CHRON	PREV	INSU	Chronic Disease, Lack of Health & Wellness, Lack of Health Insurance
1018	64701	Average	Not really changing much	CHRON	PREV	PRIM	Chronic Disease, Lack of Health & Wellness, Limited Access to Primary Care, Limited Access Specialty Care, Limited Access to Mental Health, Family Assistance programs, Lack of Health Insurance
1021	64701	Good	Not really changing much	CHRON	PREV	MH	Chronic Disease, Lack of Health & Wellness, Limited Access to Mental Health
1082	64083	Average	Not really changing much	CHRON	PREV	MH	Chronic Disease, Lack of Health & Wellness, Limited Access to Mental Health
1009	64701	Very Poor	Decreasing - slipping downward	CHRON	PRIM	MH	Chronic Disease, Limited Access to Primary Care, Limited Access Specialty Care, Limited Access to Mental Health, Lack of Health Insurance, Neglect, Lack of healthcare providers to recognize life-threatening emergencies that are easily treatable
1049	64083	Good	Increasing - moving up	CHRON	SPEC		Chronic Disease, Limited Access Specialty Care
1077	64078	Average	Not really changing much	CHRON	SPEC	MH	Chronic Disease, Limited Access Specialty Care, Limited Access to Mental Health
1006	64701	Good	Not really changing much	DRUG			Drug abuse whis is rampant and seemingly ignored.
1074	64012	Very Good	Increasing - moving up	FIT	SPRT	NEG	Lack of Nutrition/Exercise Services, Family Assistance programs, Neglect
1076	64012	Average	Not really changing much	INSU	POV	ECON	Lack of Health Insurance, lack of income
1037		Good	Increasing - moving up	INSU			Lack of Health Insurance
1015	64080	Good	Increasing - moving up	MH	INSU	NEG	Limited Access to Mental Health, Lack of Health Insurance, Neglect
1078	64083	Good	Increasing - moving up	MH	INSU	NEG	Limited Access to Mental Health, Lack of Health Insurance, Neglect
1083	64701	Very Good	Increasing - moving up	MH	INSU	SPEC	Limited Access Specialty Care, Limited Access to Mental Health, Lack of Health Insurance
1071	64012	Good	Increasing - moving up	MH	SPRT	NEG	Limited Access to Mental Health, Family Assistance programs, Neglect
1068	64701	Good	Increasing - moving up	MH			Limited Access to Mental Health
1055		Very Good	Not really changing much	MH			Limited Access to Mental Health
1051	64701	Good	Increasing - moving up	NUTR	FIT	INSU	Lack of Nutrition/Exercise Services, Lack of Health Insurance
1060	64080	Good	Decreasing - slipping downward	NUTR	MH	INSU	Lack of Nutrition/Exercise Services, Limited Access to Mental Health, Lack of Health Insurance
1073	64080	Good	Not really changing much	NUTR	PRIM	MH	Lack of Nutrition/Exercise Services, Limited Access to Primary Care, Limited Access to Mental Health
1084	64701	Very Good	Increasing - moving up	OWN	FIT		A great deal of "poor health" is the result of choices people make. Many issues may be avoided by being physically active.
1023	64701	Very Good	Increasing - moving up	PREV	FIT	NUTR	Lack of Health & Wellness, Lack of Nutrition/Exercise Services
1059	66224	Very Good	Increasing - moving up	PREV	FIT	MH	Lack of Health & Wellness, Lack of Nutrition/Exercise Services, Limited Access to Mental Health
1062		Good	Increasing - moving up	PREV	FIT	MH	Lack of Health & Wellness, Lack of Nutrition/Exercise Services, Limited Access to Mental Health
1030	64701	Good	Not really changing much	PREV	FIT	NEG	Lack of Health & Wellness, Lack of Nutrition/Exercise Services, Lack of Health Insurance, Neglect
1039	64080	Poor	Not really changing much	PREV	FIT	PRIM	Lack of Health & Wellness, Lack of Nutrition/Exercise Services, Limited Access to Primary Care, Limited Access Specialty Care, Limited Access to Mental Health, Lack of Health Insurance
1046		Good	Not really changing much	PREV	FIT	NUTR	Lack of Health & Wellness, Lack of Nutrition/Exercise Services
1058	64080	Good	Increasing - moving up	PREV	MH	INSU	Lack of Health & Wellness, Limited Access to Mental Health, Lack of Health Insurance
1044	66216	Average	Not really changing much	PREV	MH	INSU	Lack of Health & Wellness, Limited Access to Mental Health, Lack of Health Insurance
1080	64701	Good	Not really changing much	PREV	MH	NEG	Lack of Health & Wellness, Limited Access to Mental Health, Neglect
1040	64080	Good	Decreasing - slipping downward	PREV	NUTR	INSU	Lack of Health & Wellness, Lack of Nutrition/Exercise Services, Lack of Health Insurance
1065	64078	Poor	Decreasing - slipping downward	PREV	NUTR	PRIM	Lack of Health & Wellness, Lack of Nutrition/Exercise Services, Limited Access to Primary Care
1010	64725	Average	Increasing - moving up	PREV	NUTR	INSU	Lack of Health & Wellness, Lack of Nutrition/Exercise Services, Lack of Health Insurance
1022	64701	Average	Not really changing much	PREV	NUTR	MH	Lack of Health & Wellness, Lack of Nutrition/Exercise Services, Limited Access to Mental Health
1035	64701	Good	Not really changing much	PREV	NUTR	NEG	Lack of Health & Wellness, Lack of Nutrition/Exercise Services, Neglect
1003	64078	Good	Increasing - moving up	PREV	SPEC	NEG	Lack of Health & Wellness, Limited Access Specialty Care, Neglect
1025	64080	Average	Not really changing much	PREV	SPEC	INSU	Lack of Health & Wellness, Limited Access Specialty Care, Lack of Health Insurance

### CHNA 2022 Community Feedback: Cass County MO (N=85)

ID	Zip	Rating	Movement	c1	c2	c3	In your opinion, what are the root causes of "poor health" in our community?
1041	64012	Average	Not really changing much	PREV	SPEC	MH	Lack of Health & Wellness, Limited Access Specialty Care, Limited Access to Mental Health
1036	64080	Good	Not really changing much	PREV			Lack of Health & Wellness
1002		Good	Increasing - moving up	PRIM	MH	INSU	Limited Access to Primary Care, Limited Access to Mental Health, Lack of Health Insurance
1045	64083	Good	Increasing - moving up	PRIM	MH	INSU	Limited Access to Primary Care, Limited Access to Mental Health, Lack of Health Insurance
1013	64747	Very Poor	Decreasing - slipping downward	PRIM	SPEC	NEG	Limited Access to Primary Care, Limited Access Specialty Care, Neglect
1067	64080	Average	Not really changing much	SPEC	MH		Limited Access Specialty Care, Limited Access to Mental Health
1029	64747	Average	Not really changing much	SPEC	SPRT	INSU	Limited Access Specialty Care, Family Assistance programs, Lack of Health Insurance
1066	64080	Good	Not really changing much	SPEC			Limited Access Specialty Care

### CHNA 2022 Community Feedback: Cass County MO (N=85)

ID	Zip	Rating	Movement	c1	c2	c3	Access to care is vital. Are there enough providers / staff available at the right times to care for you and our community?
1077	64078	Average	Not really changing much	ACC	RURAL		Yes, I'm in the north end of the county and it is easy enough for me to go to Jackson county, that can NOT be said for those living mid to southern rural Cass County
1018	64701	Average	Not really changing much	CLIN	HRS	EMER	No, An urgent care that is open 7 days a week until 9 pm would be a start. The er is for actual emergency. Not enough specialty clinics or doctors
1016	64701	Very Good	Not really changing much	CLIN			No, Need urgent care in Harrisonville
1039	64080	Poor	Not really changing much	DOCS	CLIN	LAB	No, not enough doctors in Pleasant Hill. No urgent care or diagnostics in pleasant hill
1065	64078	Poor	Decreasing - slipping downward	DOCS	HRS	TRAV	No, Limited number of doctors & hours. Have to go elsewhere for care
1004	64701	Average	Not really changing much	EMER	WAIT		No, Cut my hand open and required sutures. Waited almost an hour bleeding in that room waiting to be sutures up. That was about 10 pm
1079	64747	Average	Decreasing - slipping downward	EMS	STFF		No, We have a county wide shortage of EMS providers
1076	64012	Average	Not really changing much	FEM	PRIM		No, we need more woman oriented primary care physicians
1058	64080	Good	Increasing - moving up	PEDS	SERV		No, pediatrician, mental health providers for management and crisis services
1052	64701	Good	Increasing - moving up	SCH	PHONE		No, Difficult to get an appointment with a PCP - same day. The office phones just ring and ring - hard to get through to the office at CRMC.
1083	64701	Very Good	Increasing - moving up	SERV	ACC		No, Services offered but on part time basis.
1049	64083	Good	Increasing - moving up	SPEC	TRAV		No, While there are specialists available, their availability is often in frequent within our county. You can still visit them but you're required to go outside the county on most occasions
1082	64083	Average	Not really changing much	SPEC			No, More specialists
1009	64701	Very Poor	Decreasing - slipping downward	TRAIN	STFF		No, Harrisonville hospital needs better trained staff.
1015	64080	Good	Increasing - moving up	WAIT	MH	OBG	No, Students have long waits or no access to mental health services. OB/birthing at cass medical.
1003	64078	Good	Increasing - moving up	WAIT	SCH	ACC	No, Wait time for providers is much too long for care for appointments and by the time you get in to see someone you are either well or dead.

### CHNA 2022 Community Feedback: Cass County MO (N=85)

ID	Zip	Rating	Movement	c1	c2	c3	What "new" community health programs should be created to meet current community health needs?
1049	64083	Good	Increasing - moving up	CANC	RESO		Cancer treatment options from trusted resources
1027	64701	Poor	Not really changing much	CLIN	MH	OBG	Urgent care, mental health facilities, obstetrics/ maternity care in cass county
1013	64747	Very Poor	Decreasing - slipping downward	DOCS	EMER		get different doctors and better people running cass medical er.
1083	64701	Very Good	Increasing - moving up	DRUG	SUIC	OBG	Drug programs and suicide prevention, ob-gyn services would be a plus.
1040	64080	Good	Decreasing - slipping downward	EDU	PREV	MH	Education regarding how diet, exercise, & mental health (stress) affect physical health & how those things can be improved & support in pursuing the improvement of them.
1035	64701	Good	Not really changing much	EDU	SCRE	SERV	Healthcare education, screenings and advisory services
1074	64012	Very Good	Increasing - moving up	EDU			provide educational programs to identify science as a partner of good health care
1079	64747	Average	Decreasing - slipping downward	EMS	EDU	MH	I would like to see the hospital partner with local EMS for education programs for EMT-Advanced. Would also like to see mental health and substance abuse be more of a priority
1077	64078	Average	Not really changing much	FINA	NUTR	AWARE	More access to lower cost healthy food options, more awareness of chronic disease treatment, ANY increase in mental health options/drug recovery would be a step in the right direction
1003	64078	Good	Increasing - moving up	FP	NH		more general practice doctors--not nurses who want to be doctors....at least one more nursing home facility which actually provides care and not just a place to die...health care which does not assume every person has access to or knows how to use a computer.....as a matter of fact, this survey is a good example of that
1016	64701	Very Good	Not really changing much	FUND	DOH		Generally more funding for health department
1058	64080	Good	Increasing - moving up	MH	DRUG	SUIC	mental health including substance abuse and suicide prevention
1021	64701	Good	Not really changing much	MH	POV		Mental health homeless
1044	66216	Average	Not really changing much	MH	SERV		Behavioral Health facility/beds in Cass County
1054	64080	Good	Not really changing much	MH	SUIC	CLIN	Mental health Suicide prevention Urgent care
1060	64080	Good	Decreasing - slipping downward	MH			Mental health support
1078	64083	Good	Increasing - moving up	MH			Mental health care
1018	64701	Average	Not really changing much	MH			Mental health
1022	64701	Average	Not really changing much	MH			Community needs more known mental health support and AA support
1071	64012	Good	Increasing - moving up	NO			New - none. Improved - see previous answers.
1084	64701	Very Good	Increasing - moving up	NO			We don't need any new programs funded by the government.
1041	64012	Average	Not really changing much	NUTR	ECON	PREV	Nutrition/ grocery shopping classes Finance management for health and wellness
1029	64747	Average	Not really changing much	OBG	CLIN	FEM	Women's health - OBGYN clinic, access to child birth in Cass county
1009	64701	Very Poor	Decreasing - slipping downward	OBG	FEM		Women's reproductive healthcare.
1067	64080	Average	Not really changing much	OBG			Obstetrics
1076	64012	Average	Not really changing much	OBG			women's health
1030	64701	Good	Not really changing much	PEDS	DOCS		Get pediatric care multiple drs would be nice.
1043		Average	Decreasing - slipping downward	PREV	NUTR	DRUG	Engaging health and wellness promotion to combat sedentary lifestyles, obesity, and "gray area" alcohol/drug dependence.
1025	64080	Average	Not really changing much	PREV	NUTR		Wellness and Nutrition
1001	64701	Very Poor	Decreasing - slipping downward	PRIM	ENDO	MISD	Get more primary care doc that can treat auto immune issues more endocrinologist and good ones, ones that will listen not just half ass and half of your medical history incorrect or current topics also be written in your chart incorrect cause they hear you but do not listen.
1059	66224	Very Good	Increasing - moving up	SMOK			smoking cessation

Let Your Voice Be Heard!

**In 2019, Cass Regional Medical Center surveyed our community to assess health needs. Today, we request your input again in order to create a 2022 Cass County, MO Community Health Needs Assessment (CHNA).**

**To gather current area feedback, a short online survey has been created to evaluate current community health needs and delivery. Survey deadline will be Wednesday, August 10th, 2022.**

**While your participation is voluntary and confidential, all community input is valued. Thank you for your immediate attention!**

1. In your opinion, how would you rate the "Overall Quality" of healthcare delivery in our community?

- Very Good     Good     Average     Poor     Very Poor

2. When considering "overall community health quality", is it ...

- Increasing - moving up     Not really changing much     Decreasing - slipping downward

Please specify why.

3. In your own words, what is the general perception of healthcare delivery for our community (i.e. hospitals, doctors, public health, etc.)? Be Specific.



4. In your opinion, are there healthcare services in our community/your neighborhood that you feel need to be improved, worked on and/or changed? (Be specific)

5. From our past CHNA, a number of health needs were identified as priorities. Are any of these an ongoing problem for our community? Please select all that apply.

- |   |  |
|---|--|
| <input type="checkbox"/> Access for Dental Treatment for Uninsured / Medicaid               | <input type="checkbox"/> Lack of Mental Health Providers and Placement of Patients |
| <input type="checkbox"/> Access to Primary Care (Internal Medicine, Pediatrics, Obstetrics) | <input type="checkbox"/> Mental Health (Diagnosis, Treatment, Aftercare)           |
| <input type="checkbox"/> Awareness of Healthcare Services                                   | <input type="checkbox"/> Obesity - Need for Nutrition & Fitness                    |
| <input type="checkbox"/> Domestic Violence  | <input type="checkbox"/> Poverty (Homelessness / Access to Dental Care)            |
| <input type="checkbox"/> Drug Abuse / Drug Prevention Resources                             | <input type="checkbox"/> Senior Care Staffing                                      |
| <input type="checkbox"/> Healthcare Transportation  | <input type="checkbox"/> Smoking (Vaping)  |
| <input type="checkbox"/> Lack of Funding for Local Health Department                        | <input type="checkbox"/> Suicides (Adolescence-focused)                            |
| <input type="checkbox"/> Lack of Healthcare County-wide Coalition                           | <input type="checkbox"/> Urgent Care Services (Southern Cass Co)                   |

6. Which past CHNA needs are NOW the "most pressing" for improvement? Please select top three.

- |   |  |
|---|--|
| <input type="checkbox"/> Access to Dental Treatment for Uninsured / Medicaid                | <input type="checkbox"/> Lack of Mental Health Providers and Placement of Patients |
| <input type="checkbox"/> Access to Primary Care (Internal Medicine, Pediatrics, Obstetrics) | <input type="checkbox"/> Mental Health (Diagnosis, Treatment, Aftercare)           |
| <input type="checkbox"/> Awareness of Healthcare Services                                   | <input type="checkbox"/> Obesity - Need for Nutrition & Fitness                    |
| <input type="checkbox"/> Domestic Violence  | <input type="checkbox"/> Poverty (Homelessness / Access to Dental Care)            |
| <input type="checkbox"/> Drug Abuse / Drug Prevention Resources                             | <input type="checkbox"/> Senior Care Staffing                                      |
| <input type="checkbox"/> Healthcare Transportation  | <input type="checkbox"/> Smoking (Vaping)  |
| <input type="checkbox"/> Lack of Funding for Local Health Department                        | <input type="checkbox"/> Suicides (Adolescence-focused)                            |
| <input type="checkbox"/> Lack of Healthcare County-wide Coalition                           | <input type="checkbox"/> Urgent Care Services (Southern Cass Co)                   |

7. In your opinion, what are the root causes of "poor health" in our community? Please select top three.

- |  |  |
|--|--|
| <input type="checkbox"/> Chronic Disease                     | <input type="checkbox"/> Limited Access to Mental Health |
| <input type="checkbox"/> Lack of Health & Wellness           | <input type="checkbox"/> Family Assistance programs      |
| <input type="checkbox"/> Lack of Nutrition/Exercise Services | <input type="checkbox"/> Lack of Health Insurance        |
| <input type="checkbox"/> Limited Access to Primary Care      | <input type="checkbox"/> Neglect                         |
| <input type="checkbox"/> Limited Access Specialty Care       |  |

Other (Be Specific).



8. How would our community area residents rate each of the following health services?

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



9. How would our community area residents rate each of the following health services?

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

Other (please specify)

10. Community Health Readiness is vital. How would you rate each of the following?

	Very Good	Good	Fair	Poor	Very Poor
Behavioral/Mental Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency Preparedness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food and Nutrition Services/Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health Screenings/Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prenatal/Child Health Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance Use/Prevention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suicide Prevention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Violence/Abuse Prevention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Women's Wellness Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Do you have any Covid-19 worries and/or concerns in regards to Community Health delivery?

Yes

No

If yes, please specify your thoughts.



12. Over the past 2 years, did you or someone in your household receive healthcare services outside of your county?

Yes

No

If yes, please specify the services received



13. Access to care is vital. Are there enough providers/staff available at the right times to care for you and your community?

Yes

No

If NO, please specify what is needed where. Be specific.



14. What "new" community health programs should be created to meet current community health needs?



15. Are there any other health needs (listed below) that need to be discussed further at our upcoming CHNA Town Hall meeting? Please select all that apply.

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Abuse/Violence                   | <input type="checkbox"/> Health Literacy                   | <input type="checkbox"/> Poverty                       |
| <input type="checkbox"/> Access to Health Education       | <input type="checkbox"/> Heart Disease                     | <input type="checkbox"/> Preventative Health/Wellness  |
| <input type="checkbox"/> Alcohol                          | <input type="checkbox"/> Housing                           | <input type="checkbox"/> Sexually Transmitted Diseases |
| <input type="checkbox"/> Alternative Medicine             | <input type="checkbox"/> Lack of Providers/Qualified Staff | <input type="checkbox"/> Suicide                       |
| <input type="checkbox"/> Behavioral/Mental Health         | <input type="checkbox"/> Lead Exposure                     | <input type="checkbox"/> Teen Pregnancy                |
| <input type="checkbox"/> Breastfeeding Friendly Workplace | <input type="checkbox"/> Neglect                           | <input type="checkbox"/> Telehealth                    |
| <input type="checkbox"/> Cancer                           | <input type="checkbox"/> Nutrition                         | <input type="checkbox"/> Tobacco Use                   |
| <input type="checkbox"/> Care Coordination                | <input type="checkbox"/> Obesity                           | <input type="checkbox"/> Transportation                |
| <input type="checkbox"/> Diabetes                         | <input type="checkbox"/> Occupational Medicine             | <input type="checkbox"/> Vaccinations                  |
| <input type="checkbox"/> Drugs/Substance Abuse            | <input type="checkbox"/> Ozone (Air)                       | <input type="checkbox"/> Water Quality                 |
| <input type="checkbox"/> Family Planning                  | <input type="checkbox"/> Physical Exercise                 |  |

Other (Please specify).



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

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Business/Merchant               | <input type="checkbox"/> EMS/Emergency         | <input type="checkbox"/> Other Health Professional |
| <input type="checkbox"/> Community Board Member          | <input type="checkbox"/> Farmer/Rancher        | <input type="checkbox"/> Parent/Caregiver          |
| <input type="checkbox"/> Case Manager/Discharge Planner  | <input type="checkbox"/> Hospital/Health Dept. | <input type="checkbox"/> Pharmacy/Clinic           |
| <input type="checkbox"/> Clergy                          | <input type="checkbox"/> Housing/Builder       | <input type="checkbox"/> Media (Paper/TV/Radio)    |
| <input type="checkbox"/> College/University              | <input type="checkbox"/> Insurance             | <input type="checkbox"/> Senior Care               |
| <input type="checkbox"/> Consumer Advocate               | <input type="checkbox"/> Labor                 | <input type="checkbox"/> Teacher/School Admin      |
| <input type="checkbox"/> Dentist/Eye Doctor/Chiropractor | <input type="checkbox"/> Law Enforcement       | <input type="checkbox"/> Veteran                   |
| <input type="checkbox"/> Elected Official - City/County  | <input type="checkbox"/> Mental Health         |  |

Other (Please specify).



17. What is your home ZIP code? Please enter 5-digit ZIP code; for example 66544 or 65305



**VWV Consultants LLC**



## **VWV Consultants LLC**

**Vince Vandelaar, MBA**

*Principal & Adjunct Professor*

VVV@VandelaarMarketing.com

**Cassandra Kahl, BHS MHA**

*Director, Project Management*

CJK@VandelaarMarketing.com

**Hannah Foster, MBA**

*Associate Consultant*

HCF@VandelaarMarketing.com

HQ Office:

601 N Mahaffie, Olathe, KS 66061

(913) 302-7264

<http://vandelaarmarketing.com/>

**VWV Consultants LLC** is an Olathe, KS based “boutique” healthcare consulting firm specializing in Strategy; Research and Business Development services. We partner with clients. Plan the Work; Work the Plan