Community Health Needs Assessment 2017-2019

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*Shaded lines note IRS requirements
I. Executive Summary
I. Executive Summary

Western Missouri Medical Center (Primary Service Area) - Community Health Needs Assessment 2017-2019

Creating healthy communities requires a high level of mutual understanding and collaboration among community leaders. The development of this assessment brings together community health leaders and providers, along with local residents, to research and prioritize county health needs and document community health delivery successes. This health assessment will serve as the foundation for community health improvement efforts for the next three years. The last CHNA 2014-2016 for Western Missouri Medical Center (Primary Service Area) was published in September of 2013. (Note: The Patient Protection and Affordable Care Act (ACA) requires not-for-profit hospitals to conduct a CHNA every three years and adopt an implementation strategy to meet the needs identified by the CHNA). This assessment was coordinated and produced by VVV Consultants LLC (Olathe, Kansas) under the direction of Vince Vandehaar, MBA.

The CHNA 2017-2019 provides benefits to local health service organizations, the hospital, the public health department, as well as the community, in the following ways: 1) Increases knowledge of community health needs and resources 2) Creates a common understanding of the priorities of the community’s health needs 3) Enhances relationships and mutual understanding between and among stakeholders 4) Provides a basis upon which community stakeholders can make decisions about how they can contribute to improving the health of the community 5) Provides rationale for current and potential funders to support efforts to improve the health of the community 6) Creates opportunities for collaboration in delivery of services to the community and 7) Provides guidance to the hospital and local health department for how they can align their services and community benefit programs to best meet needs.
Town Hall Community Health “Strengths” cited for Western Missouri Medical Center’s Primary Service Area are as follows:

<table>
<thead>
<tr>
<th>#</th>
<th>Topic</th>
<th>#</th>
<th>Topic</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Smoking Ordinance</td>
<td>14</td>
<td>Drinking Restrictions</td>
</tr>
<tr>
<td>2</td>
<td>Access to Trails</td>
<td>15</td>
<td>Young Community</td>
</tr>
<tr>
<td>3</td>
<td>Good Primary Care Doctors</td>
<td>16</td>
<td>Low Cancer Rates</td>
</tr>
<tr>
<td>4</td>
<td>Urgent Care at the Hospital</td>
<td>17</td>
<td>Hospital/Clinic Expansion</td>
</tr>
<tr>
<td>5</td>
<td>St. Luke’s Affiliation</td>
<td>18</td>
<td>OB Delivery Services at Hospital</td>
</tr>
<tr>
<td>6</td>
<td>Physician Network Creating Best Practice Care Across Community</td>
<td>19</td>
<td>Access to a Hospital in our Community</td>
</tr>
<tr>
<td>7</td>
<td>School and Harvester’s Back Pack Program</td>
<td>20</td>
<td>Community Collaboration on Improving Health</td>
</tr>
<tr>
<td>8</td>
<td>UCM and Air Force Collaboration to Reduce Alcohol Consumption</td>
<td>21</td>
<td>Great Hospital Acquired Infection Rate (Zero)</td>
</tr>
<tr>
<td>9</td>
<td>Citizens for Environmental Action (CEA)</td>
<td>22</td>
<td>Katy Trail Coming into our Community</td>
</tr>
<tr>
<td>10</td>
<td>Outpatient Services at Hospital</td>
<td>23</td>
<td>Local Public Health</td>
</tr>
<tr>
<td>11</td>
<td>Emergency Services at Hospital are Improving</td>
<td>24</td>
<td>Project Community Connect</td>
</tr>
<tr>
<td>12</td>
<td>Farmer’s Market Associated with SNAP Program</td>
<td>25</td>
<td>Good Ambulance District</td>
</tr>
<tr>
<td>13</td>
<td>Meals-on-Wheels</td>
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</tbody>
</table>
Town Hall “Community Health Changes and/or Improvements Ranking” cited for Western Missouri Medical Center’s Primary Service Area are as follows:

<table>
<thead>
<tr>
<th>#</th>
<th>Health Needs to Change and/or Improve</th>
<th>Votes</th>
<th>%</th>
<th>Accum</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Mental Health (Diagnosis / Placement / Follow-Up)</td>
<td>29</td>
<td>21.5%</td>
<td>21.5%</td>
</tr>
<tr>
<td>2</td>
<td>Obesity (Nutrition / Fitness)</td>
<td>24</td>
<td>17.8%</td>
<td>39.3%</td>
</tr>
<tr>
<td>3</td>
<td>Access to Dental Care for Uninsured</td>
<td>13</td>
<td>9.6%</td>
<td>48.9%</td>
</tr>
<tr>
<td>4</td>
<td>Substance Use Disorder (Alcohol / Meth / Opiates / Marijuana / Heroin)</td>
<td>13</td>
<td>9.6%</td>
<td>58.5%</td>
</tr>
<tr>
<td>5</td>
<td>Suicide Prevention</td>
<td>13</td>
<td>9.6%</td>
<td>68.1%</td>
</tr>
<tr>
<td>6</td>
<td>Awareness of Available Healthcare Services</td>
<td>8</td>
<td>5.9%</td>
<td>74.1%</td>
</tr>
<tr>
<td>7</td>
<td>Family Planning Services</td>
<td>8</td>
<td>5.9%</td>
<td>80.0%</td>
</tr>
</tbody>
</table>

**Total Town Hall Votes**: 135 (100.0%)

Other Items Noted: Availability of Urgent Care Services, Case Management for Chronic Conditions, Build Sidewalks / Bike Lanes, Tree Ordinance, Prevention Services for Cancer, Emergency Services, Transportation for Groceries, Sexually Transmitted Infections Education, Traffic Accidents, Economic Development and Geriatric Care Providers.

**Key Community Health Needs Assessment 2017-2019 Conclusions** from secondary research for Western Missouri Medical Center’s Primary Service Area are as follows:

MO HEALTH RANKINGS: According to the 2016 RWJ County Health Rankings study, Johnson County’s highest State of Missouri rankings (of 115 counties including St. Louis City) were in Health Outcomes, Mortality, Morbidity, Health Factors, Social and Economic Factors and Physical Environment.
• **TAB 1**: Johnson County has a population of 53,951 residents as of July 1, 2015. The percent change in population in Johnson County from April 1, 2010 to July 1, 2015 is 2.6%. The percent of persons 65 and over in Johnson County is 11.8%, lower than the Missouri Rural Norm of 18.5%. The percent of residents in Johnson County who are white and alone is 89.4%, lower than the Missouri Rural Norm of 94.4%. The percent of resident in Johnson County who are living the same house as one year ago is 74.3%, lower than the Missouri Rural Norm of 85.4%. The number of veterans in Johnson County is 6,299, higher than the Missouri Rural Norm of 2,066. The population per square mile in Johnson County is 63.4, higher than the Missouri Rural Norm of 36.4. The percent of residents in Johnson County with limited access to healthy foods 2.0%, lower than the Missouri Rural Norm of 7.2%. The number of registered voters in Johnson County is 33,167, higher than the Missouri Rural Norm of 15,503.

• **TAB 2**: The number of housing units in Johnson County is 21,776, higher than the Missouri Rural Norm of 10,243. The number of firms in Johnson County is 3,451, higher than the Missouri Rural Norm of 1,818. The percent of residents in Johnson County with a long commute driving alone is 42.0%, higher than the Missouri Rural Norm of 32.1%.

• **TAB 3**: In Johnson County, 27.5.0% of students are eligible for free lunch, lower than the Missouri Rural Norm of 37.4%. The percent of persons aged 25+ in Johnson County who is a high school graduate or higher is 91.0%, higher than the Missouri Rural Norm of 86.5%. The percent of persons aged 25+ in Johnson County with a Bachelor’s degree or higher is 26.0%, higher than the Missouri Rural norm of 15.8%.

• **TAB 4**: The number of preterm births in Johnson County is 336, higher than the Missouri Rural Norm of 153. The number of infants participating in WIC in Johnson County is 449, higher than the Missouri Rural Norm of 167. The number of out-of-wedlock births in Johnson County is 956, higher than the Missouri Rural Norm of 59. The number of mothers who smoked during pregnancy in Johnson County is 112, higher than the Missouri Rural Norm of 59.

• **TAB 5**: The ratio of the population in Johnson County to primary care physicians is 2,700, lower than the Missouri Rural Norm of 3,174. The average time patients spend in the emergency department before they are seen by a healthcare professional in Johnson County is 25 minutes, higher than the Missouri Rural Norm of 16 minutes.

• **TAB 6**: The percent of alcohol-impaired driving deaths in Johnson County is 33.0%, higher than the Missouri Rural Norm of 30.5%.

• **TAB 7**: The percent of adult obesity in Johnson County is 32.0%, lower than the Missouri Rural Norm of 33.2%. The percent of physical inactivity in Johnson County is 32.0%, higher than the Missouri Rural Norm of 30.5%. The number of sexually transmitted infections in Johnson County is 137.1, lower than the Missouri Rural Norm of 260.9. The percent of Heart Failure in the Medicare population in Johnson County is 12.0%, lower than the Missouri Rural Norm of 14.1%. The percent of Chronic Kidney Disease in the Medicare population in Johnson County is 11.1%, lower than the Missouri Rural Norm of 13.9%.

• **TAB 8**: The percent of residents uninsured in Johnson County is 22.0%, higher than the Missouri Rural Norm of 17.3%.
• TAB 9: The suicide mortality rate per 100,000 in Johnson County is 17.0, higher than the Missouri Rural Norm of 5.

• TAB 10: The percent of access to exercise opportunities in Johnson County is 50.0%, higher than the Missouri Rural Norm of 45.1%. The percent of mammography screenings in Johnson County is 56.0%, lower than the Missouri Rural Norm of 56.4%.

Key 2016 Community Feedback Conclusions

In May of 2016, Western Missouri Medical Center (WMMC) collected stakeholder feedback from their primary service area consumers, community leaders and groups, public and other organizations, and other providers. These stakeholders (N=283) provided the following community feedback insights via an online perception survey:

• 82.3% of WMMC primary service area stakeholders would rate the overall quality of healthcare delivery in their community as either Very Good or Good, with Very Good being the highest ranking.

• WMMC primary service area stakeholders are satisfied with the following services: Ambulance, Chiropractors, Eye Doctor/Optometrist, Home Health, Hospice, Inpatient Services, Outpatient Services, Pharmacy, Primary Care, Public Health Department and School Nurse.

• WMMC primary service area stakeholders are not satisfied with the following services: Emergency Room, Family Planning Services, Mental Health Services and Nursing Home.

• 77.0% of WMMC primary service area stakeholders have received healthcare services outside of their community over the past two years.

• WMMC primary service area stakeholders perceive the following causes of disease or disability a problem in their community: Cancer, Diabetes, Drugs/Substance Abuse, Heart Disease, Mental Illness, Nutrition, Obesity, Physical Exercise, Suicide and Wellness Education.

As seen below, the community still senses a health need for Obesity (Nutrition / Fitness), Availability of Mental Health Providers, Cardiovascular Disease, Access to Dental Health Professions by Low-Income Residents, Lack of Health Insurance Coverage, Non-Medical Needs of Senior Citizens and Inadequate Social Support.

<table>
<thead>
<tr>
<th>Western Missouri Medical Center (Primary Service Area) - Warrensburg, MO N=283</th>
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<tbody>
<tr>
<td><strong>Answer Options</strong></td>
</tr>
<tr>
<td>Obesity (Nutrition / Fitness)</td>
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<tr>
<td>Availability of Mental Health Providers</td>
</tr>
<tr>
<td>Cardiovascular Disease</td>
</tr>
<tr>
<td>Access to Dental Health Professions by Low Income Residents</td>
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<tr>
<td>Lack of Health Insurance Coverage</td>
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<tr>
<td>Non-Medical Needs of Senior Citizens</td>
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<tr>
<td>Inadequate Social Support</td>
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<tr>
<td>Access to Primary Care Physicians</td>
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3. From our last CHNA (2014-2016), a number of health needs were identified as priorities. Are any of these CHNA 2015-2016 needs still an “Ongoing Problem” in the Western Missouri Medical Center Primary Service Area?

Western Missouri Medical Center (Primary Service Area) - Warrensburg, MO N=283
II. Methodology

[VVV Consultants LLC]
II. Methodology
   a) Scope and Purpose

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

JOB #1: Meet/Report IRS 990 Required Documentation

1. A 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 that are medically underserved, low-income, minority populations, and populations with chronic disease needs. In addition, a hospital organization may seek input from other individuals and organizations located in or serving the hospital facility’s defined community (e.g., health care consumer advocates, academic experts, private businesses, health insurance and managed care organizations, etc.).

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

The Notice provides that a CHNA will be considered to be “conducted” in the taxable year that the written report of the CHNA findings is made widely available to the public. The Notice also indicates that the IRS intends to pattern its rules for making a CHNA “widely available to the public” after the rules currently in effect for Form 990. Accordingly, an organization would make a facility’s written report widely available by posting the final report on its website either in the form of (1) the report itself, in a readily accessible format or (2) a link to another organization’s website, along with instructions for accessing the report on that website. The Notice clarifies that an organization must post the CHNA for each facility until the date on which its subsequent CHNA for that facility is posted.
**JOB #3: Adopt an Implementation Strategy by Hospital**

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

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

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

How and When to Conduct a CHNA

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

Determining the Community Served

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

Persons Representing the Community Served

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

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

Making a CHNA Widely Available to the Public

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

How and When to Adopt an Implementation Strategy

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

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

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

The ACA also added a new Section 4959, which imposes an excise tax for failure to meet the CHNA requirements, and added reporting requirements. These final regulations provide guidance on the entities that must meet these requirements, the reporting obligations relating to these requirements and the consequences for failing to satisfy the requirements. “Charitable hospitals represent more than half of the nation's hospitals and play a key role in improving the health of the communities they serve,” wrote Emily McMahon, Deputy Assistant Secretary for Tax Policy at the U.S. Department of the Treasury, in a blog post Monday explaining the requirements. “But reports that some charitable hospitals have used aggressive debt collection practices, including allowing debt collectors to pursue collections in emergency rooms, have highlighted the need for clear rules to protect patients. For hospitals to be tax-exempt, they should be held to a higher standard. That is why the Affordable Care Act included additional consumer protection requirements for charitable hospitals, so that patients are protected from abusive collections practices and have access to information about financial assistance at all tax-exempt hospitals.”

She noted that as a condition of their tax-exempt status, charitable hospitals must take an active role in improving the health of the communities they serve, establish billing and collections protections for patients eligible for financial assistance, and provide patients with the information they need to apply for such assistance. “These final rules adopt the same framework of proposed regulations but simplify the compliance process for charitable hospitals, while continuing to provide meaningful guidance on protections for patients and requirements to assess community health needs,” she added.
Under the new rules, hospitals cannot charge individuals eligible for financial assistance more for emergency or other medically necessary care than the amounts generally billed to patients with insurance (including Medicare, Medicaid, or private commercial insurance). In addition, every tax-exempt hospital must establish and widely publicize a financial assistance policy that clearly describes to patients the eligibility criteria for obtaining financial assistance and the method for applying for financial assistance.

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

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

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

While charitable hospitals must continue to make a good-faith effort to comply, the rules provide charitable hospitals with time to fully update their policies and programming to implement the changes. But if a charitable hospital fails to meet the consumer protection provisions required by the law, the hospital could have its tax-exempt status revoked. If a hospital fails to properly conduct a community health needs assessment or adopt an implementation strategy, an excise tax will apply, McMahon noted. “However, if a hospital fails to meet a requirement, but the failure is neither willful nor egregious, the hospital can correct and publicly disclose the error to have it excused, thus avoiding revocation of tax-exempt status, but the excise tax would still apply,” she wrote.
II. Methodology
   b) Collaborating CHNA 2017-2019 Parties

Working together to improve community health takes collaboration. Listed below is an in-depth profile of the local hospital and health department CHNA 2017-2019 partners:

Western Missouri Medical Center Profile

403 Burkarth Rd, Warrensburg, MO 64093
President and CEO: Darinda Reberry

About Us: Western Missouri Medical Center (WMMC) is a fully-accredited acute care facility located in Warrensburg, Missouri. A not-for-profit county Medical Center, WMMC offers comprehensive health care services to residents of Johnson County and west central Missouri.

Advanced Quality Care, Right Where You Are.

After a building project that focused on comfort and convenience, WMMC nearly doubled in size. That’s good news for patients because it means more of the good stuff and less waiting for it. Our goal? Offer the very latest state-of-the-art care and in-house specialists so you and your family can receive great care close to home.

A Patient-Centered Experience, A Healing Environment.

Putting patients first isn’t just something we say. It’s in everything we do, from our comfortable new, private rooms to our relaxing healing environment to the expert care given by our highly trained and compassionate staff.

Nationally Accredited and Award-Winning Care

Our quality of care has received national accreditations and awards.

Our Mission: Our mission is to improve the health of our greater community by providing quality health care services, exceeding the expectations of those we serve.

Our Vision: To be the regional preferred provider of exceptional health care services through these Pillars of Excellence:

- Community / Patient
- Medical Staff Engagement
- Employee Engagement
- Quality
- Clinical
- Financial Performance

Our Values:

- Accountability
- Service
- Promote teamwork
- Integrity
- Respect
- Excellence
Health Care Services: Western Missouri Medical Center takes pride in the strength of our obstetrics, surgical and specialty capabilities and inpatient services, as well as our diagnostic outpatient clinics and services. In addition, WMMC offers excellence in rehabilitation services and emergency care.

Inpatient Services: Our health care team is specially trained to provide care to pediatric, adult and elderly surgical patients.

- Diabetes Treatment
- Hospitalists
- Intensive Care Unit
- Medical / Surgical Nursing Unit
- Obstetrical / Labor and Delivery Unit
- Respiratory Therapy
- Senior Behavioral Health Unit (Coming December 2016)
- Social Services
- Telemetry Unit

Physician Services: At Western Missouri Medical Center (WMMC), we offer a broad range of specialists and services to meet the healthcare needs of you and your family. From family healthcare, internal medicine, and OB/GYN care to general and orthopedic surgery, we’re providing advanced treatment where you need it most-right here at home.

Outpatient Services: WMMC services offered on an outpatient basis include:

- Allergy and Asthma
- Anesthesiology
- Bariatric Surgery
- Cardiology
- Dermatology
- Ear, Nose and Throat (ENT)
- Emergency Medicine
- Express Care
- Family Medicine
- General Surgery
- Hematology / Oncology
- Hospitalists
- Internal Medicine
- Interventional Pain Management
- Nephrology
- Neurology
- Obstetrics and Gynecology
- Ophthalmology
- Orthopedic Surgery
- Pathology
- Pediatrics
- Physical Medicine and Rehabilitation
- Podiatry
- Pulmonology
- Psychiatry
- Radiology
- Rheumatology
- Sleep Medicine
- Urology
- Vascular Surgery
- Wound Care

Emergency Services: If you are currently having a medical emergency, please call 9-1-1. The WMMC Emergency Department offers quality, full-service emergency medical care, 24 hours a day, 7 days per week.
Johnson County Community Health Services

723 PCA Road, Warrensburg, MO 64093
Administrator: Anthony Arton

Mission: Johnson County Community Health Services is improving the quality of life for the communities we serve by providing quality Home Health, Public Health, and Hospice.

Vision: Johnson County Community Health Services will be a leader in Home Health, Public Health, and Hospice services.

Core Values:

- Dedicated, competent, and professional employees provide compassionate care to all clients.
- Establish community partnerships to address unmet needs and issues.
- Effective management of resources and programs assure continuity and growth.

Public Health Nursing: Public Health is YOUR health!

Public health protects and improves the health of individuals, families, communities, and populations. Our focus is on preventing disease and injury by promoting a healthy lifestyle.

- Immunizations
- Health Screenings
- STD Testing
- Tuberculosis (TB) Tests
- Pregnancy

- CPR/AED & First Aid
- Childcare Provider Support
- Car Seat Safety
- Lead Testing
- Animal Bites

WIC: Everyone loves their unborn baby, infant, child or children and will do whatever they can to make their lives better. Our children depend on and trust us to provide for them. WIC will help you and your family eat healthy and stay well.

Benefits of WIC:

- Nutrition and health education in person or on the Web
- Nutrition counseling focused on your needs and concerns
- Breastfeeding education and support by trained staff
- Breast pumps
- Healthful foods that will save the WIC participant $60-$75 each month
- Help in finding health care and other community services
- WIC checks to purchase:
  - Fresh and frozen fruit and veggies
  - Baby food
  - Milk, eggs, cheese, peanut butter
  - Whole grain cereal, whole wheat breads and/or tortillas
  - 100% juice
**Vital Records:** Missouri birth and death records are maintained by the Department of Health and Senior Services Bureau of Vital Records. Our office is able to provide authorized individuals with certified copies of birth and death certificates who were born or died in the state of Missouri. However, we are unable to make any changes or corrections. You can contact the Missouri Bureau of Vital Records at (573) 751-6378 for more information about correcting or changing information on a certificate.

**Environmental Services:** Environmental Public Health includes services and resources relating to sanitation and safety inspections of food establishments, child care facilities and lodging establishments. Additionally, it includes oversight of onsite wastewater treatment system construction and technical assistance for all environmental public health concerns.

- Food Inspections
- Food Safety
- Food Safety Training
- Lodging Inspections
- On-Site Wastewater Treatment Systems
- Childcare Facility Requirements
- Drinking Water Testing

**Home Health:** Whether you are recovering from an operation and are too ill to take care of yourself or you have a condition which requires regular medical care, Johnson County Home Health is here to help you recover and teach you how to live more independently so you can stay at home. Our goal is to keep you out of the hospital or nursing home and, with the assistance of our home health providers, allow you to be together with your family in the comfort, security and privacy of your own home.

Our credentialed and professionally trained team of Nurses, Physical Therapists, Occupational Therapists, Speech Therapists, Certified Nurses Aide, and Medical Social Worker, along with your physician, are ready to develop your personalized home health plan and provide the most compassionate care – right from the comfort of your own home.

**Hospice:** Hospice Care is a wonderful gift to patients and families. Johnson County Hospice is committed to providing the best “quality of life” for our terminally ill patients and their families. Our focus is to meet the physical, emotional, and spiritual needs of those you love while supporting and strengthening the family. Compassionate end-of-life care is top priority. Through pain and symptom management, we can provide the best comfort for both the client and their family.

Care is provided by our credentialed and professionally trained team of Nurses, Physicians, Medical Director, Nurses Aide, Social Worker, Chaplain, and Volunteers.
II. Methodology  
b) Collaborating CHNA 2017-2019 Parties Continued

Consultant Qualifications

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

VINCE VANDEHAAR, MBA  
Principal Consultant and Owner of VVV Consultants LLC

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

VVV Consultants LLC consultants have in-depth experience helping hospitals work with local health departments to engage community residents and leaders to identify gaps between existing health community resources and needs and construct detailed strategies to meet those needs, while still adhering to the hospital’s mission and budget. Over the past 20 years, Vandehaar has completed eight comprehensive Baldrige aligned Community Health Needs Assessments for Saint Luke’s of Kansas City System facilities (3 campuses) and was contracted to conduct two additional independent department of health consulting projects (prior to IRS 990 regs). To date, VVV has completed 55 CHNA IRS-aligned assessments for Iowa, Kansas, Missouri and Nebraska hospitals and health departments.

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

Collaborating Consultants

Alexa Backman, MBA - VVV Consultants LLC  
Associate Consultant

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

c) CHNA 2017-2019 and Town Hall Research Process

Western Missouri Medical Center’s Community Health Needs Assessment 2017-2019 process began in April 2016. At that time, an inquiry was made by Darinda Reberry, CEO to VVV Consultants LLC to explore the possibility of conducting a comprehensive IRS-aligned CHNA 2017-2019. VVV Consultants LLC then reviewed CHNA experience, in-depth CHNA requirements and regulations, CHNA development options to meet IRS requirements and next steps after option approval.

**VVV CHNA 2017-2019 Deliverables:**

- Confirm WMMC’s primary service area meets the 80-20 patient origin rule.
- Uncover/document basic secondary research and health of county, organized by 10 TABS.
- Conduct Town Hall meeting to discuss secondary data and uncover/prioritize county health needs.
- Conduct and report CHNA 2017-2019 primary research (with valid N).
- Prepare and publish IRS-aligned CHNA 2017-2019 report that meets requirements.

To ensure proper WMMC Town Hall representation that meets the 80-20 rule, the following patient origin 3-year summary was generated to document the WMMC primary service area.

<table>
<thead>
<tr>
<th>Western Missouri Medical Center</th>
<th>I/O/C/ER</th>
</tr>
</thead>
<tbody>
<tr>
<td>#  ZIP  CITY  County  Total 3Yr  Accum</td>
<td></td>
</tr>
<tr>
<td>1  64093  Warrensburg  Johnson  78,202  46.5%</td>
<td></td>
</tr>
<tr>
<td>2  65336  Knob Noster  Johnson  19,110  57.8%</td>
<td></td>
</tr>
<tr>
<td>3  65305  Whiteman AFB  Johnson  10,050  63.8%</td>
<td></td>
</tr>
<tr>
<td>4  64040  Holden  Johnson  9,067  69.2%</td>
<td></td>
</tr>
<tr>
<td>5  64037  Higginsville  Lafayette  6,446  73.0%</td>
<td></td>
</tr>
<tr>
<td>6  65301  Sedalia  Pettis  6,112  76.7%</td>
<td></td>
</tr>
<tr>
<td>7  64019  Centerview  Johnson  5,722  80.1%</td>
<td></td>
</tr>
</tbody>
</table>
### Western Missouri Medical Center - CHNA 2017-2019 Work Plan

<table>
<thead>
<tr>
<th>Step</th>
<th>Date (Start-Finish)</th>
<th>Lead</th>
<th>Task</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>4/18/2016</td>
<td>VVV</td>
<td>Sent VVV quote for review.</td>
</tr>
<tr>
<td>2</td>
<td>4/22/2016</td>
<td>Hosp</td>
<td>Select CHNA 2017-2019 Option C.</td>
</tr>
<tr>
<td>3</td>
<td>4/25/2016</td>
<td>VVV</td>
<td>Send out REQCommInvite Excel file. Hospital and health department to fill in PSA stakeholders names, addresses and e-mails.</td>
</tr>
<tr>
<td>4</td>
<td>4/25/2016</td>
<td>VVV</td>
<td>Request hospital client to send PO101, 102 and 103 Reports to document service area for FFY 13, 14 and 15. In addition, request hospital to complete three year historical PSA IP/OP/ER/Clinic Patient Origin file (Use ZipPSA_3yrPOrigin.xls).</td>
</tr>
<tr>
<td>5</td>
<td>On or before 5/2/2016</td>
<td>VVV</td>
<td>Prepare CHNA 2017-2019 Stakeholder Feedback online link. Send text link for hospital review.</td>
</tr>
<tr>
<td>6</td>
<td>On or before 5/2/2016</td>
<td>VVV / Hosp</td>
<td>Prepare and send out PR story to local media announcing upcoming CHNA 2017-2019 work. Hospital to place.</td>
</tr>
<tr>
<td>7</td>
<td>5/9/2016</td>
<td>VVV</td>
<td>Launch and conduct online survey to stakeholders. Hospital will e-mail invite to participate to all stakeholders.</td>
</tr>
<tr>
<td>9</td>
<td>On or before 5/16/2016</td>
<td>VVV</td>
<td>Assemble and complete secondary research. Find and populate 10 tabs. Create Town Hall PowerPoint for presentation.</td>
</tr>
<tr>
<td>10</td>
<td>5/16/2016</td>
<td>Hosp</td>
<td>Prepare and send out community Town Hall invite letter and place local advertisement.</td>
</tr>
<tr>
<td>11</td>
<td>5/16/2016</td>
<td>VVV / Hosp</td>
<td>Prepare and send out PR story to local media announcing upcoming Town Hall. VVV will mock up PR release to media sources.</td>
</tr>
<tr>
<td>12</td>
<td>Week of 6/6/2016 (TBD)</td>
<td>All</td>
<td>Conduct conference call with hospital and health department to review Town Hall data and flow.</td>
</tr>
<tr>
<td>13</td>
<td>6/14/2016</td>
<td>VVV</td>
<td>Conduct CHNA 2017-2019 Town Hall from from 5:30-7:00p.m. at the Warrensburg Community Center. Review and discuss basic health data plus rank health needs.</td>
</tr>
<tr>
<td>14</td>
<td>7/1/2016</td>
<td>Hosp</td>
<td>Conduct client Implementation Plan PSA leadership meeting from 7:30-9:00a.m. at Western Missouri Medical Center.</td>
</tr>
<tr>
<td>15</td>
<td>On or before 7/15/2016</td>
<td>VVV</td>
<td>Complete analysis. Release draft one and seek feedback from leaders at hospital and health department.</td>
</tr>
<tr>
<td>16</td>
<td>On or before 10/31/2016</td>
<td>VVV</td>
<td>Produce and release final CHNA 2017-2019 report. Hospital will post CHNA online.</td>
</tr>
<tr>
<td>17</td>
<td>30 days prior to end of hospital fiscal year</td>
<td>Hosp</td>
<td>Hold Board meetings to discuss CHNA 2017-2019 needs and create and adopt an Implementation Plan. Communicate CHNA 2017-2019 plan to community.</td>
</tr>
</tbody>
</table>
To meet IRS CHNA 2017-2019 requirements, a four-phase methodology was reviewed and approved as follows:

**Phase I—Discovery:**

Conduct a 30-minute conference call with the CHNA 2017-2019 hospital client and county health department. Review / confirm CHNA 2017-2019 calendar of events, explain / coach client to complete required participant database and schedule / organize all Phase II activities.

**Phase II—Qualify Community Need:**

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

<table>
<thead>
<tr>
<th>TAB 1. Demographic Profile</th>
</tr>
</thead>
<tbody>
<tr>
<td>TAB 2. Economic/Business Profile</td>
</tr>
<tr>
<td>TAB 3. Educational Profile</td>
</tr>
<tr>
<td>TAB 4. Maternal and Infant Health Profile</td>
</tr>
<tr>
<td>TAB 5. Hospitalization / Providers Profile</td>
</tr>
<tr>
<td>TAB 6. Behavioral Health Profile</td>
</tr>
<tr>
<td>TAB 7. Risk Indicators &amp; Factors</td>
</tr>
<tr>
<td>TAB 8. Uninsured Profile</td>
</tr>
<tr>
<td>TAB 9. Mortality Profile</td>
</tr>
<tr>
<td>TAB 10. Preventative Quality Measures</td>
</tr>
</tbody>
</table>

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

**Phase III—Quantify Community Need:**

Conduct a 90-minute Town Hall meeting with required county primary service area residents. At each Town Hall meeting, CHNA 2017-2019 secondary data will be reviewed, facilitated group discussion will occur and a group ranking activity to determine the most important community health needs will be administered.

**Phase IV—Complete Data Analysis and Create Comprehensive Community Health Needs Assessment 2017-2019:**


After consideration of CHNA 2017-2019 stakeholders (sponsoring hospital and local health department), the CHNA 2017-2019 Option C was selected with the following project schedule:

Phase I: Discovery…………………………………………………………………… March - April 2016
Phase II: Secondary / Primary Research……………………………………. May 2016
Phase III: Town Hall Meeting………………………………………………….. June 14, 2016
### Steps to Conduct Community Health Needs Assessment

<table>
<thead>
<tr>
<th>Step #1 Commitment</th>
<th>Determine interest level of area healthcare leaders (Hospital, Health Dept., Mental Health Centers, Schools, Churches and Physicians, etc.), hold community meeting.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step #2 Planning</td>
<td>Prepare brief Community Health Needs Assessment Plan. List goals, objectives, purpose, outcome, roles, community involvement, etc. Hold community kick-off meeting.</td>
</tr>
<tr>
<td>Step #3 Secondary Research</td>
<td>Collect and report community health published facts. Gather health practice data from published secondary research sources (i.e. census, county health records, behavioral risk factors surveillance, etc.).</td>
</tr>
<tr>
<td>Step #4a Primary Research</td>
<td>Conduct Community Roundtable (qualitative research). Review secondary research (Step #3) with community stakeholders. Gather current opinions and identify health needs.</td>
</tr>
<tr>
<td>Step #4b Primary Research &lt;Optional&gt;</td>
<td>Collect community opinions (quantitative research). Gather current opinions (valid sample size) regarding community health needs and healthcare practices. If appropriate, conduct Physician Manpower Assessment to determine FTE physician need by specialty.</td>
</tr>
<tr>
<td>Steps #5 Reporting</td>
<td>Prepare / Present comprehensive Community Health Needs Assessment report to community leaders with recommended actions to improve health. (Note: Formal report will follow IRS Notice 2011-52 regulations).</td>
</tr>
</tbody>
</table>

VVV Consultants LLC 913 302-7264
Overview of Town Hall Community Priority Setting Process

Each community has a wealth of expertise to be tapped for CHNA 2017-2019 development. For this reason, a Town Hall is the perfect forum to gather community insight and provide an atmosphere to objectively consensus build and prioritize county health issues.

All Town Hall priority-setting and scoring processes involve the input of key stakeholders in attendance. Individuals and organizations attending the Town Halls were critically important to the success of the CHNA 2017-2019. The following list outlines partners invited to Town Hall: local hospital, public health community, mental health community, free clinics, community-based clinics, service providers, local residents, community leaders, opinion leaders, school leaders, business leaders, local government, faith-based organizations and persons (or organizations serving them), people with chronic conditions, uninsured community members, low income residents and minority groups.

Western Missouri Medical Center’s Town Hall was held on Tuesday, June 14, 2016 at the Warrensburg Community Center. Vince Vandehaar and Alexa Backman facilitated this 1 ½ hour session with thirty-seven (37) attendees. (Note: a detailed roster of Town Hall attendees is listed in Section V a).

The following Town Hall agenda was conducted:

1. Welcome and introductions.
2. Review purpose for the CHNA 2017-2019 Town Hall and roles in the process.
3. Presentation/review of historical county health indicators (10 tabs).
4. Facilitate Town Hall participant discussion of data (probe health strengths/concerns). Reflect on size and seriousness of any health concerns sited and discuss current community health strengths.
5. Engage Town Hall participants to rank health needs (using four dots to cast votes on priority issues). Tally and rank top community health concerns cited.
6. Close meeting by reflecting on the health needs/community voting results. Inform participants on next steps.

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

(NOTE: To review detail Town Hall discussion content, please turn to Section V for detailed notes of session and activity card content reporting of open-end comments).
Community Health Needs Assessment 2017-2019
Town Hall Meeting
Western Missouri Medical Center - Primary Service Area

Vince Vandehaar, MBA
VVV Consultants LLC
Principal / Adjunct Professor
Olathe, Kansas 66061
VVV@VandehaarMarketing.com
www.vandehaarmarketing.com
913-302-7264

Town Hall Discussion Agenda

I. Opening / Introductions (10 mins)
II. Review CHNA 2017-2019 Purpose and Process (10 mins)
III. Review Current County “Health Status”
    Secondary Data by 10 TAB Categories
    Review Community Feedback Research (35 mins)
IV. Collect Community Health Perspectives
    Hold Community Voting Activity: Determine
    MOST Important Health Areas (30 mins)
V. Close / Next Steps (5 mins)

VVV Consultants LLC

I. Introduction:
   Background and Experience

Vince Vandehaar, MBA
VVV Consultants LLC - Principal Consultant
Olathe, KS 913 302-7264

- Professional Consulting Services: Strategic Planning, Marketing Management, Business Research & Development
- Focus: Strategy, Research, Deployment
- Over 25 years of experience with Tillinghast, BCBSKC, Saint Luke’s

Adjunct Professor - Marketing / Health Admin, 26 years +

- Webster University (1988 – present)
- Rockhurst University (2015 – present)

Alexa Backman, MBA, Associate Consultant

Town Hall Participation (You)

- ALL attendees welcome to share.
  - Parking Lot
- There are no right or wrong answers.
- Only one person speaks at a time.
- Please give truthful responses.
- Have a little fun along the way.
I. Introductions: A Conversation with the Community

Community members and organizations invited to CHNA 2017-2019 Town Hall

Consumers:
- Uninsured/underinsured people
- Members of at-risk populations
- Parents, caregivers, and other consumers of health care in the community
- 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/CEOs 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, elected and appointed 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
- 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, and unlicensed independent practitioners

II. Purpose: Why Conduct Community Health Needs Assessment?

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

Future System of Care Sg2

<table>
<thead>
<tr>
<th>Acuity</th>
<th>Community-Based Care</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Hospital Care</td>
</tr>
<tr>
<td></td>
<td>Recovery &amp; Rehab Care</td>
</tr>
</tbody>
</table>

II. Review CHNA Definition

A Community Health Needs Assessment (CHNA) is a systematic collection, assembly, analysis, and dissemination of information about the health of the community. (Note: Some of the data has already been collected (published) by local, state and federal public health organizations. Some data will be collected today).

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.
II. Required Written Report IRS 990 Documentation

- A description of the community served
- A description of the CHNA process
- The identity of any and all organizations & 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 and
- A description of the existing health care facilities and other resources within the community available to meet the needs identified through the CHNA.
IV. Collect Community Health Perspectives

Ask your opinion. Your thoughts?

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

V. Have We Forgotten Anything?

- Aging Services
- Chronic Pain Management
- Dental Care/Oral Health
- Developmental Disabilities
- Domestic Violence
- Early Detection & Screening
- Environmental Health
- Exercise
- Family Planning
- Food Safety
- Health Care Coverage
- Health Education
- Home Health
- Hospice
- Hospital Services
- Maternal, Infant & Child Health
- Nutrition
- Pharmacy Services
- Primary Health Care
- Public Health
- School Health
- Social Services
- Specialty Medical Care Clinics
- Substance Abuse
- Transportation
- Other

Community Health Needs Assessment 2017-2019

Questions
Next Steps?

VVV Consultants LLC
vmlvandehaar@aol.com
913 302-7264
II. Methodology
d) Community Profile (A Description of Community Served)

Johnson County, Missouri Community Profile

Demographics

The population of Johnson County was estimated to be 53,951 on July 1, 2015, and had a 2.6% change in population from April 1, 2010–July 1, 2015.¹ According to the United States Census Bureau, its county seat is Warrensburg. Johnson County comprises the Warrensburg, MO Micropolitan Statistical Area, which is also included in the Kansas City-Overland Park-Kansas City, MO-KS Combined Statistical Area. The county has a total area of 833 square miles, of which 829 square miles is land and 3.9 square miles is water.² Johnson County’s population density is 65 persons per square mile and its industries providing employment are Educational (health and social services) (33.4%), Professional (scientific, management, administrative, and waste management services) (13.3%) and Agriculture (forestry, fishing and hunting, and mining) (10.2%).³

The major highway transportation is by U.S. Route 50, Route 2, Route 13, Route 23, Route 58 and Route 151.⁴

¹ http://www.census.gov/quickfacts/table/PST045215/29101
² U.S. Census Bureau
³ http://www.city-data.com/county/Johnson_County-MO.html
⁴ U.S. Census Bureau
## Western Missouri Medical Center - PSA
### Detail Demographic Profile

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>64019</td>
<td>Centerview</td>
<td>JOHNSON</td>
<td>2,313</td>
<td>2,438</td>
<td>5.4%</td>
<td>884</td>
<td>6,693</td>
<td>2.6</td>
<td>$20,940</td>
</tr>
<tr>
<td>64040</td>
<td>Holden</td>
<td>JOHNSON</td>
<td>6,657</td>
<td>6,814</td>
<td>2.4%</td>
<td>2,658</td>
<td>425</td>
<td>2.5</td>
<td>$21,069</td>
</tr>
<tr>
<td>64061</td>
<td>Kingsville</td>
<td>JOHNSON</td>
<td>3,194</td>
<td>3,290</td>
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<td>1,307</td>
<td>425</td>
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<td>$26,545</td>
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<tr>
<td>64093</td>
<td>Warrensburg</td>
<td>JOHNSON</td>
<td>28,855</td>
<td>30,105</td>
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<td>11,185</td>
<td>425</td>
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<td>64733</td>
<td>Chilhowee</td>
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<td>1,072</td>
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<td>Leeton</td>
<td>JOHNSON</td>
<td>1,637</td>
<td>1,675</td>
<td>2.3%</td>
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<td>2,421</td>
<td>2.6</td>
<td>$20,522</td>
</tr>
<tr>
<td>65305</td>
<td>Whiteman Air Force Base</td>
<td>JOHNSON</td>
<td>2,877</td>
<td>3,172</td>
<td>10.3%</td>
<td>817</td>
<td>250</td>
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<td>Knob Noster</td>
<td>JOHNSON</td>
<td>6,099</td>
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<td>2.4%</td>
<td>2,450</td>
<td>250</td>
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<td>$21,511</td>
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<td>64037</td>
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<td>LAFAYETTE</td>
<td>6,175</td>
<td>6,135</td>
<td>-0.6%</td>
<td>2,450</td>
<td>2,490</td>
<td>2.5</td>
<td>$20,380</td>
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<tr>
<td>65301</td>
<td>Sedalia</td>
<td>PETTIS</td>
<td>34,278</td>
<td>34,654</td>
<td>1.1%</td>
<td>13,506</td>
<td>13,630</td>
<td>2.5</td>
<td>$18,921</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
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<td>1,260</td>
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<td>JOHNSON</td>
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<td>4,932</td>
<td>54,176</td>
<td>35,485</td>
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Source: ERSA Demographics
III. Community Health Status
III. Community Health Status
   a) Historical Health Statistics

Health Status Profile

This section of the CHNA 2017-2019 reviews published quantitative community health indicators and results of our recent CHNA 2017-2019 Town Hall. To produce this profile, VVV Consultants LLC staff analyzed data from multiple sources. This analysis focuses on a set of published health indicators organized by ten areas of focus (10 tabs), results from the 2015 County Health Rankings and conversations from Town Hall primary research. Each table reflects a Trend column, with GREEN denoting growing/high performance indicators, YELLOW denoting minimal change/average performance indicators and RED denoting declining/low performance indicators. <Note: The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to release annual County Health Rankings. As seen below in model, these rankings are based on a number of health factors.>
When considering the state of community health, it’s important to review published health data by topic area. Below is a summary of key tabs of information collected:
### Tab 1a Demographic Profile

<table>
<thead>
<tr>
<th>Tab</th>
<th>Health Indicator</th>
<th>Johnson County</th>
<th>Trend</th>
<th>State of MO</th>
<th>MO Rural Norm (26)</th>
<th>Source</th>
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<tbody>
<tr>
<td>1a</td>
<td>Population estimates, July 1, 2015, (V2015)</td>
<td>53,951</td>
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<td>20,826</td>
<td>22,763</td>
<td>People Quick Facts</td>
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<tr>
<td>1a</td>
<td>2010 (estimates base) to July 1, 2015, (V2015)</td>
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<td>2.6%</td>
<td>-160.0%</td>
<td>-1.6%</td>
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<tr>
<td>1a</td>
<td>Population, Census, April 1, 2010</td>
<td>52,595</td>
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<td>21,159</td>
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<td>1a</td>
<td>Persons under 5 years, percent, July 1, 2014, (V2014)</td>
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<tr>
<td>1a</td>
<td>Persons under 18 years, percent, July 1, 2014, (V2014)</td>
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<tr>
<td>1a</td>
<td>Persons 65 years and over, percent, July 1, 2014, (V2014)</td>
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<td>11.8%</td>
<td>15.8%</td>
<td>18.5%</td>
<td>People Quick Facts</td>
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<tr>
<td>1a</td>
<td>Female persons, percent, July 1, 2014, (V2014)</td>
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<td>48.8%</td>
<td>50.3%</td>
<td>49.5%</td>
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<tr>
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<td>White alone, percent, July 1, 2014, (V2014) (a)</td>
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<td>89.4%</td>
<td>92.1%</td>
<td>94.4%</td>
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<tr>
<td>1a</td>
<td>Black or African American alone, percent, July 1, 2014, (V2014) (a)</td>
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<td>4.9%</td>
<td>3.4%</td>
<td>2.7%</td>
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<tr>
<td>1a</td>
<td>Hispanic or Latino, percent, July 1, 2014, (V2014) (b)</td>
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<tr>
<td>1a</td>
<td>Foreign born persons, percent, 2010-2014</td>
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<td>2.3%</td>
<td>4.5%</td>
<td>1.8%</td>
<td>People Quick Facts</td>
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<tr>
<td>1a</td>
<td>Language other than English spoken at home, percent of persons age 5 years+, 2010-2014</td>
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<td>3.7%</td>
<td>7.2%</td>
<td>4.0%</td>
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<td>1a</td>
<td>Living in same house 1 year ago, percent of persons age 1 year+, 2010-2014</td>
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## Tab 1b Demographic Profile

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<td>Veterans, 2010-2014</td>
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<td>466,762</td>
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<td>1b</td>
<td>Population per square mile, 2010</td>
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<td>87.1</td>
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<td>1b</td>
<td>Children in single-parent households, 2016</td>
<td>26.0%</td>
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<td>33.0%</td>
<td>28.9%</td>
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<tr>
<td>1b</td>
<td>Persons in poverty, percent</td>
<td>14.6%</td>
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<td>15.5%</td>
<td>16.5%</td>
<td>People Quick Facts</td>
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<tr>
<td>1b</td>
<td>Limited access to healthy foods, 2016</td>
<td>2.0%</td>
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<td>6.0%</td>
<td>7.2%</td>
<td>County Health Rankings</td>
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<tr>
<td>1b</td>
<td>Seniors, low access to store (%), 2010</td>
<td>1.6%</td>
<td></td>
<td>NA</td>
<td>3.2%</td>
<td>U.S. Department of Agriculture - Food Environment Atlas</td>
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<td>1b</td>
<td>Registered Voters in Missouri, 2012</td>
<td>33,167</td>
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<td>4,190,936</td>
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### Tab 2 Economic Profile

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<th>MO Rural Norm (26)</th>
<th>Source</th>
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<td>2 a</td>
<td>Per capita income in past 12 months (in 2014 dollars), 2010-2014</td>
<td>$22,394</td>
<td>$26,006</td>
<td>$21,403</td>
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<tr>
<td>2 b</td>
<td>Housing units, July 1, 2014, (V2014)</td>
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<td>2,735,742</td>
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<td>2 c</td>
<td>Persons per household, 2010-2014</td>
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<td>2.5</td>
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<td>2 d</td>
<td>Severe housing problems, 2016</td>
<td>14.0%</td>
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<tr>
<td>2 e</td>
<td>Total retail sales per capita, 2012</td>
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<td>$15,036</td>
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<td>Business Quick Facts</td>
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<td>2 f</td>
<td>All firms, 2012</td>
<td>3,451</td>
<td>491,606</td>
<td>1,818</td>
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<td>2 g</td>
<td>Unemployment, 2016</td>
<td>7.6%</td>
<td>6.1%</td>
<td>6.1%</td>
<td>County Health Rankings</td>
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<tr>
<td>2 h</td>
<td>Food Insecurity Rate, 2013</td>
<td>16.7%</td>
<td>16.8%</td>
<td>15.1%</td>
<td>Feeding America</td>
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<td>Grocery stores/1,000 pop, 2012</td>
<td>0.1</td>
<td>NA</td>
<td>0.2</td>
<td>U.S. Department of Agriculture - Food Environment Atlas</td>
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<tr>
<td>2 j</td>
<td>Low income &amp; low access to store (%), 2010</td>
<td>6.4%</td>
<td>NA</td>
<td>7.2%</td>
<td>U.S. Department of Agriculture - Food Environment Atlas</td>
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<tr>
<td>2 k</td>
<td>SNAP participants (% eligible pop), 2010*</td>
<td>89.0%</td>
<td>NA</td>
<td>89.0%</td>
<td>U.S. Department of Agriculture - Food Environment Atlas</td>
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<tr>
<td>2 l</td>
<td>Mean travel time to work (minutes), workers age 16 years+, 2010-2014</td>
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<td>23.1</td>
<td>23.5</td>
<td>People Quick Facts</td>
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<tr>
<td>2 m</td>
<td>Long commute - driving alone, 2016</td>
<td>42.0%</td>
<td>30.0%</td>
<td>32.1%</td>
<td>County Health Rankings</td>
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### Tab 3 Public Schools Health Delivery Profile

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

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<th>State of MO</th>
<th>MO Rural Norm (26)</th>
<th>Source</th>
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<td>3 a</td>
<td>Students Eligible for Free Lunch (%), 2010</td>
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<td>NA</td>
<td>37.4%</td>
<td>U.S. Department of Agriculture - Food Environment Atlas</td>
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<tr>
<td>3 b</td>
<td>High school graduate or higher, percent of persons age 25 years+, 2010-2014</td>
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<td>88.0%</td>
<td>86.5%</td>
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<td>3 c</td>
<td>Bachelor’s degree or higher, percent of persons age 25 years+, 2010-2014</td>
<td>26.0%</td>
<td>26.7%</td>
<td>15.8%</td>
<td>People Quick Facts</td>
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**TAB 4 Maternal and Infant Health Profile**

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

<table>
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<th>MO Rural Norm (26)</th>
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<td>4 a</td>
<td>Care Began First Trimester, 2013</td>
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<td>53,335</td>
<td>196</td>
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<td>4 b</td>
<td>Preterm Births (less than 37 Weeks Gestation), 2008-2012</td>
<td>336</td>
<td>47,443</td>
<td>153</td>
<td>Missouri Department of Health and Senior Services</td>
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<tr>
<td>4 c</td>
<td>Low Birth Weight, 2008-2012</td>
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<td>31,138</td>
<td>101</td>
<td>Missouri Department of Health and Senior Services</td>
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<tr>
<td>4 d</td>
<td>Infants Participating in WIC, 2012</td>
<td>449</td>
<td>43,767</td>
<td>167</td>
<td>Missouri Department of Health and Senior Services</td>
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<tr>
<td>4 e</td>
<td>Teen Pregnancy Rate Under Age 18, 2009-2013</td>
<td>53</td>
<td>11,913</td>
<td>39</td>
<td>Missouri Department of Health and Senior Services</td>
<td></td>
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<tr>
<td>4 f</td>
<td>Out-of-Wedlock Births, 2009-2013</td>
<td>956</td>
<td>154,226</td>
<td>59</td>
<td>Missouri Department of Health and Senior Services</td>
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<td>4 g</td>
<td>Mother Smoked During Pregnancy, 2013</td>
<td>112</td>
<td>13,155</td>
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<td>Missouri Department of Health and Senior Services</td>
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<table>
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<th>Tab</th>
<th>Missouri Department of Health and Senior Services, Vital Statistics</th>
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<th>Trend</th>
<th>State of MO</th>
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<td>Total Live Births, 2010</td>
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<td>76,718</td>
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<tr>
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<td>Total Live Births, 2011</td>
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<tr>
<td>4 c</td>
<td>Total Live Births, 2012</td>
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<td>75,400</td>
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<tr>
<td>4 d</td>
<td>Total Live Births, 2013</td>
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<td>75,244</td>
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</tr>
<tr>
<td>4 e</td>
<td>Total Live Births, 2014</td>
<td>736</td>
<td>75,104</td>
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</table>
**TAB 5 Hospitalization/Provider Profile**

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

<table>
<thead>
<tr>
<th>Tab</th>
<th>Health Indicator</th>
<th>Johnson County</th>
<th>Trend</th>
<th>State of MO</th>
<th>MO Rural Norm (26)</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 a</td>
<td>Primary care physicians, 2016</td>
<td>2,700:1</td>
<td>1,420:1</td>
<td>3,174:1</td>
<td>County Health Rankings</td>
<td></td>
</tr>
<tr>
<td>5 b</td>
<td>Preventable hospital stays, 2016</td>
<td>71</td>
<td>59</td>
<td>71</td>
<td>County Health Rankings</td>
<td></td>
</tr>
<tr>
<td>5 c</td>
<td>Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)</td>
<td>68.0%</td>
<td>71.0%</td>
<td>70.3%</td>
<td>CMS Hospital Compare, 7/1/14-6/30/15</td>
<td></td>
</tr>
<tr>
<td>5 d</td>
<td>Patients Who Reported Yes, They Would Definitely Recommend the Hospital</td>
<td>66.0%</td>
<td>70.0%</td>
<td>66.2%</td>
<td>CMS Hospital Compare, 7/1/14-6/30/15</td>
<td></td>
</tr>
<tr>
<td>5 e</td>
<td>Average Time Patients Spent in the Emergency Department Before They Were Seen by a Healthcare Professional</td>
<td>25</td>
<td>20</td>
<td>16</td>
<td>CMS Hospital Compare, 7/1/14-6/30/15</td>
<td></td>
</tr>
</tbody>
</table>

**Missouri Hospital Association**

**Patient Origin by Region - Inpatient**

<table>
<thead>
<tr>
<th>FFY2013</th>
<th>FFY2014</th>
<th>FFY2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Total Market IP Discharges</td>
<td>5,747</td>
</tr>
<tr>
<td></td>
<td>WMMC only - IP Discharges</td>
<td>2,542</td>
</tr>
<tr>
<td>B</td>
<td>Total Market Obstetric</td>
<td>682</td>
</tr>
<tr>
<td></td>
<td>WMMC only - Obstetric</td>
<td>298</td>
</tr>
</tbody>
</table>

**Missouri Hospital Association**

**Market Penetration by Service Type - Outpatient**

<table>
<thead>
<tr>
<th>FFY2013</th>
<th>FFY2014</th>
<th>FFY2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>C</td>
<td>Total Market ER Visits</td>
<td>17,303</td>
</tr>
<tr>
<td></td>
<td>WMMC only - ER Visits</td>
<td>11,674</td>
</tr>
<tr>
<td>D</td>
<td>Total Market OP Visits</td>
<td>77,142</td>
</tr>
<tr>
<td></td>
<td>WMMC only - OP Visits</td>
<td>42,074</td>
</tr>
</tbody>
</table>

**TAB 6 Social & Rehab Services Profile**

Behavioral healthcare provides another important indicator of community health status.

<table>
<thead>
<tr>
<th>Tab</th>
<th>Health Indicator</th>
<th>Johnson County</th>
<th>Trend</th>
<th>State of MO</th>
<th>MO Rural Norm (26)</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 a</td>
<td>Depression: Medicare Population, 2012</td>
<td>15.9%</td>
<td>19.7%</td>
<td>16.6%</td>
<td>Centers for Medicare and Medicaid Services</td>
<td></td>
</tr>
<tr>
<td>6 b</td>
<td>Alcohol-impaired driving deaths, 2016</td>
<td>33.0%</td>
<td>33.0%</td>
<td>30.5%</td>
<td>County Health Rankings</td>
<td></td>
</tr>
<tr>
<td>6 c</td>
<td>Poor mental health days, 2016</td>
<td>4.1</td>
<td>3.7</td>
<td>3.8</td>
<td>County Health Rankings</td>
<td></td>
</tr>
</tbody>
</table>
**TAB 6 Social & Rehab Services Profile**

Individuals who received psychiatric services had the following types of disorders. The total number of diagnoses is larger than the number served because some individuals had more than one type of disorder.

<table>
<thead>
<tr>
<th>Diagnosis Category</th>
<th>2015</th>
<th>2014</th>
<th>2013</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 a Adjustment Disorder</td>
<td>24</td>
<td>29</td>
<td>33</td>
<td>Missouri Department of Mental Health</td>
</tr>
<tr>
<td>6 b Anxiety Disorder</td>
<td>264</td>
<td>250</td>
<td>240</td>
<td>Missouri Department of Mental Health</td>
</tr>
<tr>
<td>6 c Dementia</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Missouri Department of Mental Health</td>
</tr>
<tr>
<td>6 d Developmental Disorder</td>
<td>11</td>
<td>12</td>
<td>14</td>
<td>Missouri Department of Mental Health</td>
</tr>
<tr>
<td>6 e Impulse Control Disorder</td>
<td>69</td>
<td>66</td>
<td>82</td>
<td>Missouri Department of Mental Health</td>
</tr>
<tr>
<td>6 f Mood Disorder</td>
<td>346</td>
<td>341</td>
<td>330</td>
<td>Missouri Department of Mental Health</td>
</tr>
<tr>
<td>6 g Personality Disorder</td>
<td>22</td>
<td>10</td>
<td>10</td>
<td>Missouri Department of Mental Health</td>
</tr>
<tr>
<td>6 h Psychotic Disorder</td>
<td>87</td>
<td>69</td>
<td>81</td>
<td>Missouri Department of Mental Health</td>
</tr>
<tr>
<td>6 i Sexual Disorder</td>
<td>0</td>
<td>0</td>
<td>NA</td>
<td>Missouri Department of Mental Health</td>
</tr>
</tbody>
</table>

**TAB 7a Health Risk Profiles**

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

<table>
<thead>
<tr>
<th>Health Indicator</th>
<th>Johnson County</th>
<th>Trend</th>
<th>State of MO</th>
<th>MO Rural Norm (26)</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>7a a Adult obesity**, 2016</td>
<td>32.0%</td>
<td>31.0%</td>
<td>33.2%</td>
<td>County Health Rankings</td>
<td></td>
</tr>
<tr>
<td>7a b Adult smoking, 2016</td>
<td>20.0%</td>
<td>21.0%</td>
<td>20.5%</td>
<td>County Health Rankings</td>
<td></td>
</tr>
<tr>
<td>7a c Excessive drinking, 2016</td>
<td>13.0%</td>
<td>16.0%</td>
<td>15.3%</td>
<td>County Health Rankings</td>
<td></td>
</tr>
<tr>
<td>7a d Physical inactivity**, 2016</td>
<td>32.0%</td>
<td>26.0%</td>
<td>30.5%</td>
<td>County Health Rankings</td>
<td></td>
</tr>
<tr>
<td>7a e Poor physical health days, 2016</td>
<td>4.5</td>
<td>4.1</td>
<td>4.1</td>
<td>County Health Rankings</td>
<td></td>
</tr>
<tr>
<td>7a f Sexually transmitted infections**, 2016</td>
<td>137.1</td>
<td>453.8</td>
<td>260.9</td>
<td>County Health Rankings</td>
<td></td>
</tr>
</tbody>
</table>
## TAB 7b Health Risk Profiles

<table>
<thead>
<tr>
<th>Tab</th>
<th>Health Indicator</th>
<th>Johnson County</th>
<th>Trend</th>
<th>State of MO</th>
<th>MO Rural Norm (26)</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>7b</td>
<td>a Hypertension: Medicare Population, 2012</td>
<td>53.7%</td>
<td>54.8%</td>
<td>53.7%</td>
<td>Centers for Medicare and Medicaid Services</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>b Hyperlipidemia: Medicare Population, 2012</td>
<td>40.6%</td>
<td>42.3%</td>
<td>39.9%</td>
<td>Centers for Medicare and Medicaid Services</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>c Heart Failure: Medicare Population, 2012</td>
<td>12.0%</td>
<td>13.7%</td>
<td>14.1%</td>
<td>Centers for Medicare and Medicaid Services</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>d Chronic Kidney Disease: Medicare Population, 2012</td>
<td>11.1%</td>
<td>16.4%</td>
<td>13.9%</td>
<td>Centers for Medicare and Medicaid Services</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>e COPD: Medicare Population, 2012</td>
<td>13.7%</td>
<td>13.2%</td>
<td>13.9%</td>
<td>Centers for Medicare and Medicaid Services</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>f Atrial Fibrillation: Medicare Population, 2012</td>
<td>8.8%</td>
<td>8.1%</td>
<td>8.7%</td>
<td>Centers for Medicare and Medicaid Services</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>g Cancer: Medicare Population, 2012</td>
<td>7.7%</td>
<td>7.8%</td>
<td>7.4%</td>
<td>Centers for Medicare and Medicaid Services</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>h Osteoporosis: Medicare Population, 2012</td>
<td>4.5%</td>
<td>5.9%</td>
<td>4.9%</td>
<td>Centers for Medicare and Medicaid Services</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>i Asthma: Medicare Population, 2012</td>
<td>4.2%</td>
<td>4.8%</td>
<td>3.8%</td>
<td>Centers for Medicare and Medicaid Services</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>j Stroke: Medicare Population, 2012</td>
<td>3.0%</td>
<td>3.6%</td>
<td>3.3%</td>
<td>Centers for Medicare and Medicaid Services</td>
<td></td>
</tr>
</tbody>
</table>

## TAB 8 Uninsured Profiles

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.

<table>
<thead>
<tr>
<th>Tab</th>
<th>Health Indicator</th>
<th>Johnson County</th>
<th>Trend</th>
<th>State of MO</th>
<th>MO Rural Norm (26)</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>a Uninsured, 2016</td>
<td>22.0%</td>
<td>15.0%</td>
<td>17.3%</td>
<td>County Health Rankings</td>
<td></td>
</tr>
</tbody>
</table>

### Source Hospital Internal Records

<table>
<thead>
<tr>
<th>Western Missouri Medical Center</th>
<th>YR 2013</th>
<th>YR 2014</th>
<th>YR 2015</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Bad Debt</td>
<td>$11,764,914</td>
<td>$10,711,749</td>
<td>$11,092,992</td>
<td></td>
</tr>
<tr>
<td>2 Charity Care</td>
<td>$996,405</td>
<td>$1,829,750</td>
<td>$996,873</td>
<td></td>
</tr>
</tbody>
</table>
**TAB 9 Mortality Profile**

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

<table>
<thead>
<tr>
<th>Tab</th>
<th>Health Indicator</th>
<th>Johnson County</th>
<th>Trend</th>
<th>State of MO</th>
<th>MO Rural Norm (26)</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 a</td>
<td>Life Expectancy for Males, 2004-2012</td>
<td>75.9</td>
<td></td>
<td>74.6</td>
<td>74.6</td>
<td>Missouri Department of Health and Senior Services</td>
</tr>
<tr>
<td>9 b</td>
<td>Life Expectancy for Females, 2004-2012</td>
<td>80.2</td>
<td></td>
<td>79.7</td>
<td>79.3</td>
<td>Missouri Department of Health and Senior Services</td>
</tr>
<tr>
<td>9 c</td>
<td>Heart Disease Mortality, 2014</td>
<td>103</td>
<td></td>
<td>14,210</td>
<td>63</td>
<td>Missouri Department of Health and Senior Services</td>
</tr>
<tr>
<td>9 d</td>
<td>Chronic Lower Respiratory Disease Mortality, 2014</td>
<td>26</td>
<td></td>
<td>3,739</td>
<td>19</td>
<td>Missouri Department of Health and Senior Services</td>
</tr>
<tr>
<td>9 e</td>
<td>Suicides, 2014</td>
<td>17</td>
<td></td>
<td>1,004</td>
<td>5</td>
<td>Missouri Department of Health and Senior Services</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#</th>
<th>Causes of Death by County of Residence, Missouri Department of Health and Senior Services, 2014</th>
<th>Johnson County</th>
<th>%</th>
<th>Trend</th>
<th>State of MO</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Causes</td>
<td></td>
<td>408</td>
<td>100.0%</td>
<td></td>
<td>58,141</td>
<td>100.0%</td>
</tr>
<tr>
<td>1 Heart Disease</td>
<td></td>
<td>103</td>
<td>25.2%</td>
<td>0.8%</td>
<td>14,210</td>
<td>24.4%</td>
</tr>
<tr>
<td>1 Cancer</td>
<td></td>
<td>83</td>
<td>20.3%</td>
<td>-2.0%</td>
<td>13,009</td>
<td>22.4%</td>
</tr>
<tr>
<td>2 Other Diseases (Residual)</td>
<td></td>
<td>45</td>
<td>11.0%</td>
<td>-1.0%</td>
<td>6,983</td>
<td>12.0%</td>
</tr>
<tr>
<td>3 Pneumonitis Due to Solids and Liquids</td>
<td></td>
<td>31</td>
<td>7.6%</td>
<td>6.6%</td>
<td>570</td>
<td>1.0%</td>
</tr>
<tr>
<td>4 Chronic Lower Respiratory Diseases</td>
<td></td>
<td>26</td>
<td>6.4%</td>
<td>-0.1%</td>
<td>3,739</td>
<td>6.4%</td>
</tr>
<tr>
<td>5 Motor Vehicle Accidents</td>
<td></td>
<td>17</td>
<td>4.2%</td>
<td>2.8%</td>
<td>779</td>
<td>1.3%</td>
</tr>
<tr>
<td>6 Suicide</td>
<td></td>
<td>17</td>
<td>4.2%</td>
<td>2.4%</td>
<td>1,004</td>
<td>1.7%</td>
</tr>
<tr>
<td>7 Cerebrovascular Disease (Stroke)</td>
<td></td>
<td>16</td>
<td>3.9%</td>
<td>-1.3%</td>
<td>3,010</td>
<td>5.2%</td>
</tr>
<tr>
<td>8 Diabetes</td>
<td></td>
<td>10</td>
<td>2.5%</td>
<td>0.0%</td>
<td>1,413</td>
<td>2.4%</td>
</tr>
<tr>
<td>9 All Other Accidents and Adverse Effects</td>
<td></td>
<td>10</td>
<td>2.5%</td>
<td>-1.6%</td>
<td>2,377</td>
<td>4.1%</td>
</tr>
<tr>
<td>10 Kidney Disease (Nephritis/Nephrotic Syndrome/Nephrosis)</td>
<td></td>
<td>7</td>
<td>1.7%</td>
<td>-0.8%</td>
<td>1,446</td>
<td>2.5%</td>
</tr>
</tbody>
</table>
**TAB 10 Preventive Health Profile**

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

<table>
<thead>
<tr>
<th>Tab</th>
<th>Health Indicator</th>
<th>Johnson County</th>
<th>Trend</th>
<th>State of MO</th>
<th>MO Rural Norm (26)</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>a Access to exercise opportunities, 2016</td>
<td>50.0%</td>
<td>76.0%</td>
<td>45.1%</td>
<td></td>
<td>County Health Rankings</td>
</tr>
<tr>
<td>10</td>
<td>b Vaccines and Selected Vaccination Series, 2012</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>TBD</td>
</tr>
<tr>
<td>10</td>
<td>c Diabetic monitoring, 2016</td>
<td>86.0%</td>
<td>86.0%</td>
<td>84.3%</td>
<td></td>
<td>County Health Rankings</td>
</tr>
<tr>
<td>10</td>
<td>d Mammography screening, 2016</td>
<td>56.0%</td>
<td>62.0%</td>
<td>56.4%</td>
<td></td>
<td>County Health Rankings</td>
</tr>
<tr>
<td>10</td>
<td>e Percent Annual Check-Up Visit with PCP</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>TBD</td>
<td>TBD</td>
</tr>
<tr>
<td>10</td>
<td>f Percent Annual Check-Up Visit with Dentist</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>TBD</td>
<td>TBD</td>
</tr>
<tr>
<td>10</td>
<td>g Percent Annual Check-Up Visit with Eye Doctor</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>TBD</td>
<td>TBD</td>
</tr>
</tbody>
</table>
Community Feedback Research

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

**Question 1—Overall Quality of Healthcare Delivery**

<table>
<thead>
<tr>
<th>Western Missouri Medical Center (Primary Service Area) - Warrensburg, MO N=283</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Three years ago, Western Missouri Medical Center completed a Community Health Needs Assessment (2014-2016). This assessment identified a number of health needs for our community. Today, we are updating this assessment and would like to know how you rate the “Overall Quality” of healthcare delivery in our community?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Answer Options</th>
<th>Very Good</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
<th>Very Poor</th>
<th>Valid N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Johnson County N=283</td>
<td>69</td>
<td>164</td>
<td>43</td>
<td>7</td>
<td>0</td>
<td>283</td>
</tr>
<tr>
<td>Top 2 Boxes (Very Good / Good)</td>
<td>82.3%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Option C Stakeholders</td>
<td>840</td>
<td>1,796</td>
<td>683</td>
<td>88</td>
<td>17</td>
<td>3,424</td>
</tr>
<tr>
<td>Top 2 Boxes (Very Good / Good)</td>
<td>77.0%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Questions 5—Rating of Healthcare Services**

<table>
<thead>
<tr>
<th>Western Missouri Medical Center (Primary Service Area) - Warrensburg, MO N=283</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. How would Western Missouri Medical Center Primary Service Area residents rate each of the following services?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Service</th>
<th>Option C Stakeholders Bottom 2 Boxes</th>
<th>Johnson Co N=283</th>
<th>TREND</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulance Services</td>
<td>3.6%</td>
<td>1.1%</td>
<td></td>
</tr>
<tr>
<td>Child Care</td>
<td>13.8%</td>
<td>5.2%</td>
<td></td>
</tr>
<tr>
<td>Chiropractors</td>
<td>4.7%</td>
<td>4.0%</td>
<td></td>
</tr>
<tr>
<td>Dentists</td>
<td>12.0%</td>
<td>5.2%</td>
<td></td>
</tr>
<tr>
<td>Emergency Room</td>
<td>7.4%</td>
<td>14.5%</td>
<td></td>
</tr>
<tr>
<td>Eye Doctor / Optometrist</td>
<td>7.2%</td>
<td>1.0%</td>
<td></td>
</tr>
<tr>
<td>Family Planning Services</td>
<td>16.1%</td>
<td>14.5%</td>
<td></td>
</tr>
<tr>
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### Question 7—Healthcare Services Outside of PSA

| Western Missouri Medical Center (Primary Service Area) - Warrensburg, MO N=283 |
|---|---|---|
| **7. Throughout the past two years, did you or someone you know receive healthcare services outside of the Western Missouri Medical Center Primary Service Area?** | **Option C Stakeholders Bottom 2 Boxes** | **Johnson Co N=283** |
| Yes | 78.9% | 77.0% |
| No | 13.8% | 15.8% |
| Don’t know | 7.3% | 7.2% |
| **TOTALS** | 100.0% | 100.0% |

### Question 8—Requested Discussion Items for Town Hall Agenda

| Western Missouri Medical Center (Primary Service Area) - Warrensburg, MO N=283 |
|---|---|---|
| **8. Are there any other health needs from the list below that need to be discussed at our upcoming CHNA 2017-2019 Town Hall meeting?** | **Option C Stakeholders Bottom 2 Boxes** | **Johnson Co N=283** |
| Abuse / Violence | 4.8% | 4.4% |
| Alcohol | 5.0% | 4.1% |
| Cancer | 5.0% | 5.2% |
| Diabetes | 5.0% | 6.2% |
| Drugs / Substance Abuse | 7.8% | 8.0% |
| Family Planning | 2.8% | 2.5% |
| Heart Disease | 3.8% | 5.0% |
| Lead Exposure | 0.7% | 1.0% |
| Mental Illness | 8.9% | 9.9% |
| Nutrition | 5.0% | 5.2% |
| Obesity | 7.9% | 8.5% |
| Ozone | 0.7% | 0.1% |
| Physical Exercise | 5.9% | 5.9% |
| Poverty | 5.2% | 4.3% |
| Respiratory Disease | 2.2% | 2.5% |
| Sexual Transmitted Diseases | 2.3% | 2.7% |
| Suicide | 4.9% | 7.1% |
| Teen Pregnancy | 3.6% | 1.3% |
| Tobacco Use | 4.0% | 3.5% |
| Vaccinations | 4.0% | 2.9% |
| Water Quality | 3.2% | 1.7% |
| Wellness Education | 5.9% | 6.1% |
| Some Other Need (specify below) | 1.4% | 1.8% |
| **TOTAL** | 100.0% | 100.0% |
IV. Inventory of Community Health Resources
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*Total FTE specialists serving community who office outside PSA
# Inventory of Health Services - WMMC PSA

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### Visiting Specialists Serving Johnson County, MO Residents

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Johnson County, MO Area
Healthcare Services

Emergency Numbers

Police/Sheriff  911
Fire          911
Ambulance    911

Non-Emergency Numbers

Johnson County Sheriff  660-747-6469
Johnson County Ambulance 660-747-5735
Johnson County Fire Dept  816-732-8675
JOHNSON COUNTY, MO HEALTH RESOURCES

Acute Care

Western Missouri Medical Center

Offers a broad range of specialists and services to meet the healthcare needs of the community including family healthcare, internal medicine, OB/GYN care, general and orthopedic surgery, and critical care.

(660) 747-2500

Abuse/Neglect

Child Abuse/Neglect Hotline – Missouri Department of Social Services

Toll-free hotline. 24 hours a day, 7 days a week, 365 days a year.
1 (800) 392-3738 or (573) 751-3448

Elderly and Disabled Abuse/Neglect Hotline – Missouri Department of Health & Senior Services

Toll-free hotline. 7:00 am – 12:00 am, 7 days a week, 365 days a year.
1 (800) 392-0210

Survival House Abuse Center

Services include emergency shelter, crisis hotline, case management, crisis intervention, court advocacy, resource advocacy, a volunteer program, housing assistance, daycare welfare, job training, and support groups.
(660) 429-1088 or (800) 846-7597

The Lighthouse – UCM Violence Prevention & Intervention Center

Provides assistance to victims of sexual assault and relationship violence. Also provides prevention education; stalking, sexual assault, dating violence, domestic violence and healthy relationships.

Richards Hall
415 S. Holden St.
Warrensburg, MO 64093
(660) 543-8084

Alcoholics Anonymous

Alcoholics Anonymous – Greater Kansas City Area

24-hour hotline. Information on nearest/soonest meeting. Multiple meetings in Johnson County area.
(816) 471-7229

Alzheimer’s

American Academy of Neurology

The academy is in association of doctors specializing in disorders of the brain and central nervous system. The website provides publications and information as well as referrals to accredited neurologists.

http://www.aan.com
1 (800) 879-1960
Fax: (612) 454-2746
The Alzheimer’s Association Chapter in Kansas City

Provides information and support services to people with Alzheimer’s and their families. The association also funds research to find a cure for Alzheimer’s and provide information for caregivers. A free catalog of educational publications is available in English and Spanish.

info@alz.org
www.alz.org/kansascity/ or www.alz.org
1 (800) 272-3900

Alzheimer’s Disease Education and Referral Center

The Adear Center, funded by the National Institute on Aging, distributes information about Alzheimer’s to health professionals, patients and their families, and the public. The center will provide information about the symptoms, diagnosis and treatment of Alzheimer’s, recent research and referrals to state and other national services.

adear@alzheimers.org
http://www.alzheimers.org
Monday – Friday 8:30 am – 5:00 pm
1 (800) 438-4380

Care Connection for Aging Services

Services provided for Johnson County, Missouri.

Warrensburg, Missouri
www.goaging.org
(660) 747-3107 or 1 (800) 748-7826

National Institute on Aging

Supports and conducts research on the aging process, diseases such as Alzheimer’s disease and the special needs of the older population.

1 (800) 222-2225

National Institute of Mental Health – National Institutes of Health

Provides information on mental health and aging, Alzheimer’s disease, anxiety disorders, depression, and suicide.

nimhinfo@nih.gov
http://www.nimh.nih.gov
1 (866) 615-6464

Ambulances

Ambulance District Direct Line

(660) 747-5735

American Aeromedvac Air Ambulance Service

Fully equipped ICU aircraft.

1 (800) 462-0911

APSI in Pettis County – Sedalia

(660) 826-8100

Concordia Ambulance

(660) 463-7900

Angel Flights Central

Provides flights for passengers who have financial need for assistance.

(877) 621-7177

Higginsville Ambulance

(660) 584-3832

American Medical Response

Independence, Missouri

(816) 461-3699
**Odessa Ambulance**

(816) 633-7575

**Sweet Springs Ambulance**

(660) 335-4852

**Warrensburg Ambulance**

To arrange for a specific transfer time: (660) 747-9136

For dispatch: (660) 747-2265 or (660) 747-5735

**Blind-Visually Impaired**

**American Red Cross**

Uninsured patients can receive a voucher for frames and glasses if the hospital or physician makes the referral. No age criteria.

Warrensburg, Missouri

(660) 747-5173

**Insight Eyecare**

Will possibly provide frames to patients who need glasses and who meet certain criteria.

(600) 747-7300

**Parks Optical**

Clinton, Missouri

(660) 885-2800

**Rehabilitation Services for the Blind – Missouri Department of Social Services**

Agency will provide adaptive equipment for clients with the goal of keeping visually impaired individuals as independent as possible.

Clinton, Missouri

(816) 929-7171

**Cancer**

**American Breast Cancer Foundation**

Foundation may be able to assist with cost incurred with mammograms and possibly other procedures and testing.

www.ABCF.org

(410) 730-5105

**American Cancer Society**

Offers many services regarding cancer management.

www.cancer.org

1 (800) 227-2345

**R.A. Bloch Cancer Support Foundation**

Provides stress management training, relaxation, visualization and imagery, biofeedback training, counseling services; fees on a sliding scale, support groups.

1 (800) 433-0464

**Cancer Action**

Assist with food supplements, comfort items, transportation, in home assistance, bed pads and diapers, wigs and turbans, equipment, patient visits, counseling, support groups, prosthesis, mastectomy kits and visits, ostomy appliances, information referrals, literature, community education programs, and hemocult tests.

www.canceractionkc.org

Jackson County, Missouri

(816) 350-8881
Cancer Care
Provides assistance regarding sexual functioning of their partners, how to deal with cancer, how cancer affects sexual functioning and more.
Cancercare.org
1 (800) 813-4673

National Cancer Institute
General cancer information resource.
Monday – Friday, 8:00 am – 8:00 pm EST
1 (800) 4-CANCER (1-800-422-6237)

Ellis-Fischel Cancer Center – University of Missouri (Columbia)
Communicate with your medical team, request medication refills and manage appointments.
(573) 882-2100

Johnson County Community Health Services
Provides information regarding cancer support.
(660) 747-6121

Johnson County Cancer Foundation
May be able to provide financial assistance for cancer care.
JoCoMoCancer.org
(660) 747-9511

Lafayette County Cancer Coalition
Offers services for patients with cancer diagnosis who reside in Lafayette county such as transportation, and transportation reimbursement, food supplement such as boost, wigs, prosthesis, free clinics.
www.lafcocancer.org
(660) 584-7740 or (660) 674-2453

Leukemia and Lymphoma Society
Assist with copays and provides support groups.
Rye Brook, New York
(914) 949-5213
Fax: (914) 949-6691

Show Me Healthy Women Program – Missouri Department of Health & Senior Services
Offers free breast and cervical screenings for Missouri women who meet age, income and insurance guidelines.
(866) 726-9926

Children’s

Johnson County Children’s Division – Missouri Department of Social Services
Child Support Enforcement for paternity establishment/modification issues.
(660) 543-5083
Fax: (660) 543-7947
Direct Health Support

*American Red Cross – Western Missouri Region Greater – Kansas City Chapter*

Provides 24-hour emergency assistance to disaster victims and military families. Emergency services, health and safety education, and blood services are provided for all ages.

(816) 931-8400

*Children’s Mercy Hospital*

Regional pediatric medical center providing comprehensive and specialized service to children from birth to adolescence, regardless of ability to pay.

(816) 234-3000

*University of Missouri Health Center*

A scientific, educational and service corporation established to promote optimum use of existing knowledge to prevent, detect, diagnose and treat cancer/heart disease.

www.MUhealth.org

(573) 882-4141

Healthcare Providers

**ALLERGY AND ASTHMA**

*Allergy and Asthma Consultants*

Lawrence P. Landwehr, M.D.

407A East Russell Avenue – Suite 3 Warrensburg, MO 64093

(660) 422-7000

**ANESTHESIOLOGY**

*Sheridan Healthcare*

Michael Mehrer, M.D.
Shawn Crook, D.O.
Andrew Montalbano, M.D.
Ty Perkins, D.O.
Beverly Long, C.R.N.A.
Scott Smith, C.R.N.A.

403 Burkarth Road
Warrensburg, MO 64093

(660) 747-2500

Fax: (660) 747-8997

**BARIATRIC SURGERY**

*Surgical Services of Warrensburg*

Robert Kenney, D.O.

Medical Office Building – Suite 302
407 Burkarth Road
Warrensburg, MO 64093

(660) 747-5558

Fax: (660) 429-4169

**CARDIOLOGY**

*Western Missouri Cardiology*

Paul Chan, M.D.
Adnan Chhatriwalla, M.D.
Matthew Deedy, M.D.
Taiyeb Khumri, M.D.
Justin McCrary, M.D.
Valerie Rader, M.D.
Carlos Rivas-Gotz, M.D.
Ibrahim Saeed, M.D.
Robert Tanenbaum, M.D.
Deepa Upadhyaya, M.D.

Innes 1 – Suite C
427 Burkarth Road
Warrensburg, MO 64093

(660) 262-7314

Fax: (660) 262-7316

Kansas City Office: (816) 931-1883

Fax: (816) 554-4849
DENTISTRY

Cleveland Dental
Gregory Cleveland, DDS
601 E Russell Ave
Warrensburg, MO 64093
(660) 747-2322
Denise E. Hamlin, DDS Family Dentistry
Denise E. Hamlin, DDS
1103 N. Holden St., Suite D
Warrensburg, MO 64093
(660) 747-3171
Finnane-Robison Dental, L.L.C.
Elizabeth A. Finnane, DDS
Edward C. Robison DDS, FAGD
520-B Burkarth Road
Warrensburg, MO 64093
(660)747-7161
Heath Family Dentistry
Chad D. Heath, DDS
407A E. Russell Ave, Suite 1
Warrensburg, MO 64093
(660) 429-4300
McKell Young Family Dentistry
R. McKell Young, DMD
615 Burkarth, Ste A
Warrensburg, MO 64093
(660) 747-9117
Michael A. Hanna
Michael A. Hanna, DDS
510 E Gay St, Ste G
Warrensburg, MO 64093
(660) 747-7950

Purcell Lawrence W DDS
Purcell Lawrence W DDS
128 W Culton St
Warrensburg, MO 64093
(660) 747-8722

DERMATOLOGY

Lee’s Summit Dermatology Associates
Gary McEwen, M.D.
Amber Kunshek, NP-C
Katie Duke, APRN
276 North East Tudor Road
Lee’s Summit, MO 64086
(816) 525-8500

EAR, NOSE & THROAT

Surgical Services of Warrensburg
(in partnership with ENT Associates of Greater Knsas City, PC)
Mark Covington, M.D.
Kelly Spiller, AuD, CCC/A, FAAA
Medical Office Building – Suite 302
407 Burkarth Road
Warrensburg, MO 64093
(660) 747-5558

Ear, Nose and Throat/Plastic Surgery
Mark L. Hechler, D.O.
706 Burkarth Road
Warrensburg, MO 64093
(660) 747-5444
**EMERGENCY MEDICINE**

*Western Missouri Medical Center*
Simon Clark, D.O.
403 Burkarth Road
Warrensburg, MO 64093
(660) 747-8824
Fax: (660) 747-7166

**EXPRESS CARE**

*Express Care at WMMC*
Patricia Gawf-Garcia, NP
Paula Keil, NP
James Wirkkula, D.O.
Innes 1 – Suite A
427 Burkarth Road
Warrensburg, MO 64093
(660) 262-7580
Fax: (660) 262-7581

**FAMILY MEDICINE**

*Western Missouri Family Healthcare – Holden*
James Wirkkula, D.O.
Paula Keil, NP
Patricia Gawf-Garcia, FNP-BC
807 West 2nd Street
Holden, MO 64040
(816) 735-7979
Fax: (816) 735-7989

*Western Missouri Family Healthcare – Knob Noster*
Kelly Casler, F.N.P.
Debbie Freels, F.N.P.
James Wirkkula, D.O.
600 East Allen
Knob Noster, MO 65336
(660) 563-5555
Fax: (660) 563-5558

**Central Family & Sports Medicine**
Douglas Anderson, M.D.
David Glover, M.D.
Drew Glover, M.D.
Brent Hoke, D.O.
Angela Phelps, M.D.
407 East Russell Avenue – Building C
Warrensburg, MO 64093
(660) 747-5114
Fax: (660) 747-5684

**Community Health Partners**
Mandy Lueck, F.N.P.
Stephanie Hutchinson, F.N.P.
Staci Shay, F.N.P.
Rebecca Stephens, F.N.P.
510 East Gay Street – Suite A
Warrensburg, MO 64093
(660) 747-1111
Fax: (660) 747-1112

**Family Practice Associates of West Central Missouri**
Jayne Brockhaus, M.D.
Stephanie Long, M.D.
David Pulliam, D.O.
Jason C. Snowden, M.D.
Natalie Avery, F.N.P.
Kendra Butner, F.N.P.
Shelly Lynch, F.N.P.
Haley Maxon, F.N.P.
513 Burkarth Road
Warrensburg, MO 64093
(660) 747-7751
Fax: (660) 747-8398 (business) or (660) 747-2515 (med)

1200 West 22nd
Higginsville, MO 64037
(660) 584-7751
Fax: (660) 584-8261 (business) or (660) 584-6149 (med)
Holden Family Care
Dorothy Adams, APRN-BC, CDE
612 East 10th Street
Holden, MO 64040
(816) 732-6010
Fax: (816) 732-6011

Meyer Medical Clinic
Kelly Casler, F.N.P.
James Wirkkula, D.O.
905 Main Street
Concordia, MO 64020
(660) 463-7966
Fax: (660) 463-7729

GENERAL SURGERY
Surgical Services of Warrensburg
Amira Ghazali, M.D.
Robert Kenney, D.O.
Diane Switzner, M.D.
Medical Office Building – Suite 302
407 Burkarth Road
Warrensburg, MO 64093
(660) 747-5558
Fax: (660) 429-4169

HEMATOLOGY/ONCOLOGY
Cancer Center (in partnership with Saint Luke’s Health System)
Jacob Smeltzer, M.D.
Addison Tolentino, M.D.
403 Burkarth Road
Warrensburg, MO 64093
(660) 262-7321
Fax: (660) 747-2860

HOSPITALISTS
Western Missouri Hospitalists (in partnership with Saint Luke’s Health System)
Jeffery Sattler, D.O.
Shelley Edwards, M.D.
Anthony Fangman, M.D.
Kapil Kohli, M.D.
Gina Lawson, D.O.
403 Burkarth Road
Warrensburg, MO 64093
(660) 262-7382
Fax: (660) 262-7369

INTERNAL MEDICINE
Warrensburg Internal Medicine
Jayendra Astik, M.D.
Bradford Carper, D.O.
Stuart Smith, D.O.
511 Burkarth Road
Warrensburg, MO 64093
(660) 747-8154;
Fax: (660) 747-9757

Western Missouri Internal Medicine
Syed Hasan, M.D.
Bedilu Woldaregay, M.D.
514 Burkarth Road
Warrensburg, MO 64093
(660) 429-2128

INTERVENTIONAL PAIN MANAGEMENT
Western Missouri Interventional Pain Management
Ihab Doss, M.D.
Medical Office Building – Suite 301
407 Burkarth Road
Warrensburg, MO 64093
(660) 262-7520
Fax: (660) 262-7437
NEPHROLOGY

Western Missouri Specialty Clinic – Nephrology

Ahmed Awad, D.O.

Medical Office Building – Suite 302
407 Burkarth Road
Warrensburg, MO 64093
(660) 262-7420
Fax: (660) 429-4169

Kidney Associates of Kansas City/Dialysis Clinics Inc.

Kelly Alford, M.D.
William Peterson, M.D.

609 East Young Street
Warrensburg, MO 64093
(816) 361-0670

NEUROLOGY

Saint Luke’s Neurological Consultants

Suzanne Crandall, M.D.
Mark Mandelbaum, M.D.

Innes 1 – Suite C
427 Burkarth Road
Warrensburg, MO 64093
(660) 262-7393 or (816) 531-4080
Fax: (660) 262-7316

MD Electrodiagnosis Inc.

John Sand, M.D.

502 Burkarth Road
Warrensburg, MO 64093
(816) 361-8684

OBSTETRICS & GYNECOLOGY

Western Missouri Women’s Health Center

Ashley Alumbaugh, M.D.
Lynn Birchmier, D.O.
Deborah Gregory, D.O.
Traci Johnson, M.D.
Amanda Wait, D.O.
Gail Grey, CNM
Connie Johnson, CNM
Krysta Ramirez-Henry, CNM

Innes II, 415-A Burkarth Road
Warrensburg, MO 64093
(660) 429-2228;
Fax: (660) 262-7418

OPHTHALMOLOGY

Midwest Eye Consultants

Christopher Banning, M.D.
Ryan Christiansen, M.D.
Frank McKee, Jr., M.D.
C. M. Lederer, Jr., M.D.
James Overlease, M.D.
William White, M.D.

506-A Burkarth Road
Warrensburg, MO 64093
(660) 747-2202

Sabates Eye Center

David B. Lyone, M.D.
Timothy Walline, M.D.

601 East Russell Avenue – Suite A
Warrensburg, MO 64093
(660) 747-0020
ORTHOPEDIC SURGERY
Western Missouri Bone & Joint
Greg Bliss, M.D.
Damian Mizera, M.D.
Aaron Rupp, DO
Wes Shaw, PA-C
510 Foster Lane – Suite 101
Warrensburg, MO 64093
(660) 747-2228
Fax: (660) 747-7677

PATHOLOGY
Western Missouri Medical Center
Gordon Bell, M.D.
403 Burkarth Road
Warrensburg, MO 64093
(660) 262-7452
Fax: (660) 262-7572

PEDIATRICS
Building Blocks Pediatrics
Muhammad Asif, M.D., FAAP
510 Foster Lane – Suite 201
Warrensburg, MO 64093
(660) 262-7415
Fax: (660) 262-7416

Whistlestop Pediatrics
Victor Lovell, M.D.
Nedra Twillie, M.D.
415-D Burkarth Road
Warrensburg, MO 64093
(660) 747-3141

PHYSICAL MEDICINE AND
REHABILITATION
Mark Killman, M.D.
19550 East 39th South – Suite 41
Independence, MO 64057

EMGs
510 Foster Lane – Suite 101
Warrensburg, MO 64093
(816) 254-9595

PODIATRY
Complete Foot and Ankle Center
Lincoln R. Nowlin, D.P.M.
521 East Young Street
Warrensburg, MO 64093
(660) 429-2626

Foot and Ankle Specialists
Rick Grayson, D.P.M.
12 West 19th Street
Higginsville, MO 64037
(660) 584-2927
Fax: (660) 584-7444

PULMONOLOGY
Pulmonology Clinic
Bedilu Woldaregay, M.D.
403 Burkarth Road
Warrensburg, MO 64093
(660) 262-7321
Fax: (660) 747-2860

PSYCHIATRY
Pathways Community Behavioral Healthcare
Mehrunissa Ali, M.D.
Echezona Anunobi, M.D.
520-C, Burkarth Road
Warrensburg, MO 64093
(660) 747-7127
Psychiatry Associates of Kansas City
Michael Everson, M.D.
Kevin Mays, M.D.
407 East Russell Avenue – Suite 5A
Warrensburg, MO 64093
(913) 385-7252

Prairie Mental Health Services
Bruce Fletcher FPMHNP-BC
407 East Russell Avenue
Warrensburg, MO 64093
(660) 747-4700

RADIOLOGY
Western Missouri Diagnostic Imaging
John Waddell, M.D.
Douglas Hughes, M.D.
403 Burkarth Road
Warrensburg, MO 64093
(660) 262-7370 or (660) 262-7530
Fax: (660) 747-2432

RHEUMATOLOGY
Western Missouri Specialty Services
Tom Scott, M.D.
Medical Office Building – Suite 302, 407 Burkarth Road
Warrensburg, MO 64093
(660) 262-7420
Fax: (660) 262-7587

SLEEP MEDICINE
Sleep Center
Scott Eveloff, M.D.
Medical Office Building – Suite 302
407 Burkarth Road
Warrensburg, MO 64093
(660) 262-7520 or (660) 262-7370
Fax: (660) 262-7464

UROLOGY
Kansas City Urology Care at WMMC
Sam Kuykendall, M.D.
Innes 1 – Suite C
427 Burkarth Road
Warrensburg, MO 64093
(816) 444-5525
Fax: (816) 444-1947

VASULAR SURGERY
Western Missouri Vascular (in partnership with Kansas City Vascular)
Johnathon Wilson, D.O.
Robert Carter, M.D.
Austin Wagner, D.O.
Medical Office Building – Suite 302
407 Burkarth Road
Warrensburg, MO 64093
(660) 262-7420
Fax: (660) 429-4169
WOUND CARE

Advanced Wound Center at WMMC

Amira Ghazali, M.D.
Deborah Gregory, D.O.
Robert Kenney, D.O.
Stephanie Long, M.D.
Leon Robinson, M.D.

403 Burkarth Road
Warrensburg, MO 64093
(660) 262-7575
Fax: (660) 262-7578

WHITEMAN AIR FORCE BASE PROVIDERS

Chief of Medical Staff

Christopher Wilhelm, M.D.
(660) 687-6405

Family Practice

Bryan Cannon, M.D. (Director)
Margaret Garner, M.D.
Tara Nelson, PA
James Campbell, PA
Rosenda Belmonte, PA
Amy Birdsong, NP

Flight Medicine

Daniel Murray, M.D. (Chief of Aerospace Medicine)
Gary D’Orazio, M.D.
Margaret Tajak, M.D.
John Copeland, M.D.
Kallyn Harencak, M.D.
Broc Parker, M.D.

Pediatrics

Chauna Weyermuller, PNP
Candi Calderon, PA

Women’s Health

Adonius Wright, NP

509th Medical Group

331 Sijan Ave.
Whiteman Air Force Base, MO 65305

Family Medicine

(660) 687-2252

PRP Clinic

(660) 687-4299

Pediatric Clinic

660-687-6050

To reach the physicians:

After hours line: (660) 563-1179
Nurse Manager (Brandi): (660) 667-3548
Release of Information: (660) 687-2101
Referral Management: (660) 687-2188

PRP

Trevor Ambron, PA
Jesse Hemsworth, PA
Eric Atkinson, PA
Gary Sayre, PA

Home Health

Benton County Health Department

Offers in-home service, Hospice, and Public Health. Provides services in Benton, Hickory, Camden, Pettis, Morgan, and Johnson counties.

Warsaw, Missouri
(660) 438-2876

Boone Hospital Home Health

Columbia, Missouri
(573) 875-0555
Carondolet Home Health

Provides services in Jackson, KC area (south of the river), Lafayette (except Lexington, Wellington, and Concordia), Cass and parts of Saline (cannot do PT or OT East of 13 Hwy).

Kansas City, Missouri
(816) 941-1300

Fitzgibbon Home Health

Provides service in Carroll, Chariton, Howard, Johnson (except Warrensburg), Lafayette (Concordia and Alma), and Saline.

Marshall, Missouri
(660) 831-3293

Golden Valley Home Services

Provides services in Henry, Benton, Parts of Cass, Johnson (Holden and Centerview), parts of Pettis, St Clair and parts of Bates.

Clinton, Missouri
(660) 885-5088

Premier Home Health Services

Provides services in Cass, Henry, Jackson, Johnson, Lafayette and Saline Counties.

Harrisonville, Missouri
(816) 884-2401 or 1 (888) 711-3246
Fax: (816) 884-2501

Homemaker Health Care, Inc.

Provides home care services for the elderly and individuals with disabilities. Services include personal care, home chores, essential shopping, respite, and nursing services. Provides services in Johnson, Pettis, Benton, and Cass.

Sedalia, Missouri
(660) 827-6667

Integrity Home Care

Provides services in Bates, Caldwell, Cass, Clay, Henry, Jackson, Johnson, Lafayette, Platte and Ray counties.

Lee’s Summit, Missouri
(816) 254-3131 or 1 (800) 287-1555
Fax: (816) 254-4440

John Knox Village Home Health

Provides services in Jackson, Cass and Lafayette (south of I-70) and Holden counties.

Lee’s Summit, Missouri
(816) 892-4380

Home Health Program – Johnson County Community Health Services

Provides services in Johnson and Lafayette.

Warrensburg, Missouri
(660) 747-6121

Home Health Care – Lake Regional Health Systems

Accredited by The Joint Commission, Lake Regional Home Health is licensed and certified by Medicare/Medicaid to provide intermittent skilled care to homebound patients in Camden, Miller and parts of Morgan counties.

Osage Beach, Missouri
(573) 302-2860

Ray County Home Health – Ray County Memorial Hospital

Provides services in Ray, Caldwell, Carroll, Lafayette, and Clay.

Richmond, Missouri
(816) 470-5432
Saline County Health Department

Air quality, food safety, STD screening, family planning

1825 S. Atchison Ave.
Marshall, MO 65340
Mon-Fri 9am – 4pm by appt
(660) 886-3434
Fax: 660-886-6676

SSM Health at Home

Provides services in Boone, Callaway, Camden, Cole, Crawford, Gasconade, Maries, Miller, Moniteau, Morgan, Osage, Phelps and Pulaski counties.

2505 Mission Dr, Suite 320
Jefferson City, MO 65109
Hours 8am – 4:30pm
(573) 681-3777

St Clair County Home Health

Provides services in Henry, St Clair, Polk (northern half), and Cedar (eastern half).

1530 Arduser Ave
Osceola, MO 64776
M-Th 8am – 4:30pm (closed 12 – 12:30pm daily)
(417) 646-8332
Fax: (417) 646-8159

Visiting Nurses Association (VNA)

Offices in KC, and surrounding area.

1500 Meadow Lake Parkway
KC, MO 64114
M-F 8am – 4:30pm
(816) 627-6210
Fax: (816) 627-6235

Indirect Health Support

Catholic Charities of Kansas City-St. Joseph, Inc.-Heart of Missouri Office

The organization offers services for all ages including case management counseling, training, and emergency assistance to help persons attain self-sufficiency and live in healthy environments.

850 Main St
KC, MO 64105-1704
816-221-4377 or 1 (800) 875-4377

District III Area Agency on Aging Holden Senior Center

Provides services which enable older adults to lead healthy, independent lives by providing meals, transportation, and in-home care along with other essential services.

204 W. 2nd St
Holden, MO 64040
(816) 732-5757 or (660) 747-3107

District III Area Agency on Aging Warrensburg Senior Center

Provides services which enable older citizens to lead healthy, independent lives by providing meals, transportation, and in-home care, along with other essential services.

445 E. Gay St
Warrensburg, MO 64093
(660) 747-2624 or (660) 747-2107
HOPE Coalition

Offers food, clothing, and vouchers for food, gas, prescriptions, and utility assistance. GED classes, WIC, youth and senior recreational activities, plus health screening services.

117 W. 2nd St
Holden, MO 64040
T-F 9am – 5pm and Sat 9am – 2pm
(816) 732-4026

Johnson County Adult Literacy Program

Program offers instruction in basic reading, writing and math skills for adults 16 and over. Free, individual tutoring is by trained volunteers.

432 N. Holden St.
Warrensburg, MO 64093
(660) 429-5442

Missouri Department of Health and Senior Services

Provides appropriate support and resource information throughout the state of Missouri for seniors.

www.dhss.mo.gov
1 (800) 835-5465 or 573-751-6010

Salvation Army

A Christian organization providing assistance for basic human needs, such as utilities, rent, prescriptions, food, and other emergency needs without discrimination.

125 N. Holden St,
Warrensburg, MO 64093
T & Th 9:30am – 3:30pm
(660) 422-4304 or (660) 422-4303

Show-Me Christian Youth Home

We provide loving, stable homes for up to 95 children who cannot live with their biological parents due to abuse, neglect, or other unfortunate circumstances. Counselling & mental health.

(660) 347-5982

The Food Center

A cooperative community resource to help low-income families who reside in Johnson County to supplement their food supply.

137 E. Culton St.
Warrensburg, MO 64093
T & Th. from 1 – 4pm and 9am – 11am Sat
(660) 747-2241

Mental & Behavioral Health

Pathway Community Behavioral HealthCare, Inc.

Delivers comprehensive, accessible mental health/substance abuse treatment and prevention services to individuals and families while utilizing cost effective methods of care.

520 Burkarth Rd
Warrensburg, MO 64093
(660) 747-7127, (660) 890-8050 or (660) 885-8131
Fax: (660) 747-1823

Nursing Homes

ABC Health Center

307 E. South St.
Harrisonville, MO 64701
(816) 380-7399
Fax: (816) 380-2139
<table>
<thead>
<tr>
<th>Medical Facility</th>
<th>Address</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apple Ridge Care Center</td>
<td>100 Thomas Drive, Waverly, MO 64096</td>
<td>(660) 493-2232</td>
</tr>
<tr>
<td>Beautiful Savior Lutheran Home</td>
<td>1003 S. Cedar St, Belton, MO 64012</td>
<td>(816) 331-0781</td>
</tr>
<tr>
<td>Bristol Manor</td>
<td>115 South 5th St., Odessa, MO 64076</td>
<td>1 (888) 848-5698</td>
</tr>
<tr>
<td>603 Creach Drive, Warrensburg, MO 64093</td>
<td>1 (888) 727-9965, (660) 259-6655, (660) 347-5757, (816) 633-8692 or (660) 747-8319</td>
<td></td>
</tr>
<tr>
<td>Carmel Hills Healthcare &amp; Rehab Center</td>
<td>810 E. Walnut, Independence, MO 64050</td>
<td>(816) 461-9600</td>
</tr>
<tr>
<td>Carroll House</td>
<td>307 Grand Ave., Carrollton, MO 64633</td>
<td>(660) 542-1599</td>
</tr>
<tr>
<td>Fair View</td>
<td>1714 West 16th St., Sedalia, MO 65301</td>
<td>(660) 827-1594</td>
</tr>
<tr>
<td>Golden Living Center</td>
<td>17451 E. Medical Center Parkway, Independence, MO</td>
<td>(816) 373-7795</td>
</tr>
<tr>
<td>Harmony Gardens</td>
<td>503 Burkarth Rd., Warrensburg, MO 64093</td>
<td>(660) 262-3451</td>
</tr>
<tr>
<td>Independence Manor Care Care Center</td>
<td>1600 S. Kings Hwy, Independence, MO 64050</td>
<td>(816) 833-4777</td>
</tr>
<tr>
<td><strong>Golden Years</strong></td>
<td><strong>Life Care Center of Grandview</strong></td>
<td></td>
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<tr>
<td>-------------------------------</td>
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<td></td>
</tr>
<tr>
<td>2001 Jefferson Parkway</td>
<td>6301 E. 125th St</td>
<td></td>
</tr>
<tr>
<td>Harrisonville, MO 64701</td>
<td>Grandview, MO 64030</td>
<td></td>
</tr>
<tr>
<td>(816) 380-4731 or (816) 380-4730</td>
<td>(816) 765-7714</td>
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<table>
<thead>
<tr>
<th><strong>Holden Manor</strong></th>
<th><strong>Lutheran Good Shepard Home</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>2005 S Lexington</td>
<td>202 S. West</td>
</tr>
<tr>
<td>Holdon, MO 64040</td>
<td>Concordia, MO 64020</td>
</tr>
<tr>
<td>(816) 732-4138</td>
<td>(660) 463-226</td>
</tr>
<tr>
<td>Fax: (816) 732-4344</td>
<td>Fax: (660) 463-7116</td>
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<table>
<thead>
<tr>
<th><strong>Jefferson Health Care</strong></th>
<th><strong>Maywood Terrace Living Center</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Also serve Alzheimer patients</td>
<td>Also serve Alzheimer patients</td>
</tr>
<tr>
<td>615 SW Oldham Parkway</td>
<td>10300 E. Truman Road</td>
</tr>
<tr>
<td>Lee’s Summit, MO 64081</td>
<td>Independence, MO 64052</td>
</tr>
<tr>
<td>(816) 524-3328</td>
<td>(816) 836-1250</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th><strong>John Knox Village East Independent Retirement Living</strong></th>
<th><strong>Mar-Saline Manor Care Center</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1201 W. 19th St</td>
<td>809 E. Gordon</td>
</tr>
<tr>
<td>Higginsville, MO 64037</td>
<td>P.O. Box 68</td>
</tr>
<tr>
<td>(660) 584-4416</td>
<td>Marshall, MO 65340</td>
</tr>
<tr>
<td></td>
<td>(660) 886-2247</td>
</tr>
<tr>
<td></td>
<td>Fax: (660) 886-4001</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Johnson County Care Center</strong></th>
<th><strong>Meyer Care Center</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>122 E. Market</td>
<td>1201 W. 19th St.</td>
</tr>
<tr>
<td>Warrensburg, MO 64093</td>
<td>Higginsville, MO 64037</td>
</tr>
<tr>
<td>(660) 747-8101 or (660) 747-9671</td>
<td>(660) 584-4224</td>
</tr>
<tr>
<td></td>
<td>Fax: (660) 584-7139</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th><strong>Lexington Care Center</strong></th>
<th><strong>Medicare Nursing Home Compare</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1221 South Hwy 13</td>
<td>Provides patient and their family members</td>
</tr>
<tr>
<td>Lexington, MO 64067</td>
<td>with information regarding the quality of</td>
</tr>
<tr>
<td>(660) 259-4697 or 866-825-9079</td>
<td>care provided by the nursing homes in their</td>
</tr>
<tr>
<td>Fax: (660) 259-2701</td>
<td>state.</td>
</tr>
<tr>
<td></td>
<td><a href="http://www.medicare.gov">www.medicare.gov</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Life Care Center of Carrollton</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>300 Life Care Lane</td>
<td></td>
</tr>
<tr>
<td>Carrollton, MO 64633</td>
<td></td>
</tr>
<tr>
<td>(660) 542-0155</td>
<td></td>
</tr>
<tr>
<td>Fax: (660) 542-0032</td>
<td></td>
</tr>
</tbody>
</table>
Missouri Veterans Home
1300 Veterans Road
Warrensburg, MO 64093
(660) 543-5064
Fax: (660) 543-5075

Monterey Park Rehabilitation and Health Care Center
4600 Little Blue Parkway
Independence, MO 64057
(816) 795-7888

Golden Living Center - New Haven
609 Golf Street
Odessa, MO 64076
(816) 230-7530
Fax: (816) 633-7661

Pleasant Hill Health and Rehabilitation Center
1300 Broadway
Pleasant Hill, MO 64080
(816) 540-2116
Fax: (816) 329-7260

Rehab Center of Independence
1800 S. Swope Drive
Independence, MO 64057
(816) 257-2566

Ridge Crest Nursing Center
706 S. Mitchell
Warrensburg, MO 64093
(660) 429-2177
Fax: (660) 429-1929

Rosewood Health and Rehabilitation Center
Serves Alzheimer patients.
1415 W. White Oak
Independence, MO 64050
(816) 254-3500

Royal Oaks- Sweet Springs
507 E. Marshall, Sweet Springs, MO 65351
(660) 335-6500
Fax: (660) 335-6656

Shangri-La Rehab & Living Center
930 NE Duncan Road
Blue Springs, MO 64014
(816) 229-6677

St. Mary’s Manor
Serve Alzheimer patients.
111 Mock Avenue
Blue Springs, MO 64014
(816) 228-5655

Sweet Springs Villa
518 East Marshall
Sweet Springs, MO 65351
(660) 335-6391
Fax: (660) 335-6582

Truman Valley Health Care
209 E. Benton
Windsor MO 65360
(660) 647-3102
Fax: (660) 647-5972 or (660) 647-3583

Villages of Jackson Creek
3980 S. Jackson Drive
Independence, MO 64057
(816) 795-1433

John Knox Village Care Center
600 NW Pryor Road
Lee’s Summit, MO 64081
(816) 246-4343
<table>
<thead>
<tr>
<th><strong>Warrensburg Manor</strong></th>
<th><strong>Transportation – Medicaid</strong></th>
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<tr>
<td>400 Care Center Drive</td>
<td>Medicaid Broker for Transportation Coverage</td>
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<tr>
<td>Warrensburg, MO 64093</td>
<td>1 (866) 269-5927 or 1 (866) 269-5942</td>
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<tr>
<td>(660) 747-2216</td>
<td>Columbia: 1 (800) 889-6287</td>
</tr>
<tr>
<td>Fax: (660) 747-0807</td>
<td>Sedalia: 1 (800) 276-6287</td>
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<tr>
<td>Warsaw Healthcare and Rehabilitation</td>
<td>Oats-West: 1 (800) 480-6287</td>
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<td>1609 Sunchase Dr</td>
<td><strong>Medicaid Transportation Reimbursement Reservation Line</strong></td>
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<td>Warsaw, MO 65355</td>
<td>1 (866) 269-5927</td>
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<tr>
<td>(660) 438-2970</td>
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<tr>
<td>Fax: (660) 438-6327</td>
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<tr>
<td><strong>Golden Living Center - Westwood</strong></td>
<td>2500 Abbott Place</td>
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<tr>
<td>1801 Gaines Dr.</td>
<td>St. Louis, MO 63143</td>
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<tr>
<td>Hwy 13 North</td>
<td>1 (888) 590-9111</td>
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<td>Clinton MO 64735</td>
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<td>(660) 885-8196</td>
<td>1 (866) 262-2360</td>
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<td>Fax: (660) 885-6081</td>
<td>Fax: (660) 248-1218</td>
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<td><strong>White Ridge Health Center</strong></td>
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<td>1501 SW 3rd St</td>
<td>(913) 271-3030</td>
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<td>(816) 525-6300 or 1 (866) 871-1067</td>
<td>(660) 624-4120 or (660) 429-5523</td>
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<td><strong>Wilshire at Lakewood</strong></td>
<td><strong>Illipar Provide-a-Ride</strong></td>
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<td>600 NE Meadowview Drive</td>
<td>(660) 584-3233 or (660) 747-2624</td>
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<td>(660) 647-3102 or (660) 647-5972</td>
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**Veteran’s Resources**

*Aide and Attendance Benefit*

Johnson County: (660) 543-7930  
Pettis County: (660) 530-5544  

*Spousal Nursing Home Benefit*

(660) 543-7930  

*VA Outpatient Clinic*

(660) 747-5749 or (816) 922-2500  

*VA Transportation*

1 (800) 525-1423 extension 243
V. Detail Exhibits

[VVV Consultants LLC]
Patient Origin and Access
Cases % Cases % Cases % Cases % Cases % Cases % Cases % Cases % Cases %
2,542 44.2% 103 4.1% 280 11.0% 404 15.9% 273 13.2% 432 19.1% 286 5.1% 656 11.7% 661 11.8% 22.9%

[Other Hospitals]

University Hospital and Clinics - Columbia, MO
73 1.3% 0 0 22 18.0% 62 32.8% 38 20.1% 24 12.7% 0 16 8.5% 15 7.9% 40.7%

Hospital Total

73 1.3% 5 6.8% 9 13.9% 17 26.4% 16 25.4% 4 6.1% 3 4.7% 5 0.8% 3 4.7% 17.8%
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<th>Pediatric Discharges</th>
<th>Adult Medical/Surgical Discharges</th>
<th>Psychiatric Discharges</th>
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<td>340 14.9%</td>
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<td>Saint Luke’s East Hospital – Lee’s Summit, MO</td>
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<td>506 22.1%</td>
<td>506 22.1%</td>
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<td>Lee’s Summit Medical Center – Lee’s Summit, MO</td>
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<tr>
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<td>University Hospital and Clinics – Columbia, MO</td>
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<td>Bass Medical Center – Harrisonville, MO</td>
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<td>Truman Medical Center Lee’s Summit – Kansas City, MO</td>
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<td>North Kansas City Hospital – North Kansas City, MO</td>
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<td>Overland Park Regional Medical Center – Overland Park, KS</td>
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<td>Heartland Behavioral Health Services – Nevada, MO</td>
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<td>Betton Regional Medical Center – Betton, MO</td>
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<tr>
<td>Kindred hospital Kansas – Kansas City, MO</td>
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<td>Barnes Jewish St. Louis, MO</td>
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<td>Nevada Regional Medical Center – Nevada, MO</td>
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<tr>
<td>Liberty Hospital – Liberty, MO</td>
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<td>St John’s St. Mary’s Hospital – Jefferson City, MO</td>
<td>5 0.1%</td>
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<td>Howard &amp; Rock Rehabilitation Center – Columbia, MO</td>
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<tr>
<td>Signature Psychiatric Hospital – Kansas City, MO</td>
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<td>Other Hospitals</td>
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<tr>
<td>Hospital Total</td>
<td>47,730</td>
<td>100.0%</td>
<td>5,730 100.0%</td>
<td>259 4.5%</td>
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<td>ZIP - City</td>
<td>Market Penetration - Inpatient*</td>
<td>Western Missouri Medical Center - Warrensburg, MO</td>
<td>Federal Fiscal Year: 2013</td>
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### Market Penetration - Inpatient*

#### Western Missouri Medical Center - Warrensburg, MO

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<tr>
<th>Date</th>
<th>Total Discharges</th>
<th>Pediatrics</th>
<th>Adults</th>
<th>Psychiatric</th>
<th>Diabetic</th>
<th>Neuromuscular</th>
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<tbody>
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<td>May - 14</td>
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### Medicaid State Summary

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#### Market Penetration - Inpatient*

#### Western Missouri Medical Center - Warrensburg, MO

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### Market Penetration - Inpatient

Western Missouri Medical Center - Warrensburg, MO

Federal Fiscal Year: 2015

Discharge Data Available From 2010 Q 1 through 2016 Q 1

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<td>1,441</td>
<td>775</td>
</tr>
<tr>
<td>64025</td>
<td>1,441</td>
<td>775</td>
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</tbody>
</table>

### Total Discharges

<table>
<thead>
<tr>
<th>ZIP - City</th>
<th>Discharges</th>
<th>Pediatrics</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Age 0 - 17</td>
<td>Age 18 - 44</td>
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<tr>
<td>64093</td>
<td>2,916</td>
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<tr>
<td>65336</td>
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<td>64020</td>
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<tr>
<td>64037</td>
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<tr>
<td>65305</td>
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<tr>
<td>64019</td>
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<tr>
<td>64001</td>
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<tr>
<td>64025</td>
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<td>775</td>
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</tbody>
</table>
Town Hall Attendees
Notes and Feedback

[VVV Consultants LLC]
<table>
<thead>
<tr>
<th>IRS Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chamber.</td>
</tr>
<tr>
<td>Directors or staff of health and human services organizations.</td>
</tr>
<tr>
<td>Education officials and staff - school superintendents, principals, teachers and school nurses.</td>
</tr>
<tr>
<td>Friends of WMMC.</td>
</tr>
<tr>
<td>Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.</td>
</tr>
<tr>
<td>Political, appointed and elected officials.</td>
</tr>
<tr>
<td>Press (Paper, TV, Radio).</td>
</tr>
<tr>
<td>Public health officials / board members.</td>
</tr>
<tr>
<td>The hospital organization’s board members.</td>
</tr>
</tbody>
</table>
### Community Health Needs Assessment 2017-2019

Western Missouri Medical Center PSA - Strengths (Color Cards) N=37

<table>
<thead>
<tr>
<th>#</th>
<th>Today: What are the strengths of our community that contribute to health?</th>
<th>#</th>
<th>Today: What are the strengths of our community that contribute to health?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Creation of collaborative physician network</td>
<td>77</td>
<td>WMMC continues to improve drastically</td>
</tr>
<tr>
<td>2</td>
<td>New services coming to community</td>
<td>78</td>
<td>Diversity of population with talent to share</td>
</tr>
<tr>
<td>3</td>
<td>Financially viable providers</td>
<td>79</td>
<td>Agencies and organizations that are eager to communicate and cooperate and coordinate</td>
</tr>
<tr>
<td>4</td>
<td>Trained, compassionate clinicians and nurses</td>
<td>80</td>
<td>Excellent schools, hospital and churches</td>
</tr>
<tr>
<td>5</td>
<td>Collaboration of services with UCM and WAFB</td>
<td>81</td>
<td>Businesses and industries that provide opportunities for employment</td>
</tr>
<tr>
<td>6</td>
<td>Specialists available daily</td>
<td>82</td>
<td>More alignment between physicians/primary care and hospital</td>
</tr>
<tr>
<td>7</td>
<td>New facilities</td>
<td>83</td>
<td>More focus on obesity issues with a primary care provider certified in obesity medicine and surgeons performing bariatric surgery - nutritionist at WMMC</td>
</tr>
<tr>
<td>8</td>
<td>Wound center success</td>
<td>84</td>
<td>Expanding hospital and clinics, evolving with cooperation with UCM and Whiteman</td>
</tr>
<tr>
<td>9</td>
<td>OB award winning</td>
<td>85</td>
<td>Citizens for Environmental Excellence - working for healthy gardening, outpatient care and quality</td>
</tr>
<tr>
<td>10</td>
<td>Ambulance services</td>
<td>86</td>
<td>Positive impact of UCM and Whiteman</td>
</tr>
<tr>
<td>11</td>
<td>Highly educated</td>
<td>87</td>
<td>Work being done on Spirit Trail although uncertain of completion will ever happen</td>
</tr>
<tr>
<td>12</td>
<td>Great health stats for our county</td>
<td>88</td>
<td>Citizen for Environmental Excellence are catalysts for positive, environmental advocacy, education and action</td>
</tr>
<tr>
<td>13</td>
<td>Community team for CHNA</td>
<td>89</td>
<td>Outpatient care</td>
</tr>
<tr>
<td>14</td>
<td>Smoking ordinance/drinking restrictions</td>
<td>90</td>
<td>Pharmacy</td>
</tr>
<tr>
<td>15</td>
<td>Warrensburg school system</td>
<td>91</td>
<td>Mortality</td>
</tr>
<tr>
<td>16</td>
<td>Access to wellness - Warrensburg Community Center/UCM</td>
<td>92</td>
<td>Several primary care provider offices in town</td>
</tr>
<tr>
<td>17</td>
<td>That we have a hospital/acute care in our county</td>
<td>93</td>
<td>Orthopedic office expanding number of practitioners</td>
</tr>
<tr>
<td>18</td>
<td>Community collaborative efforts among community leaders</td>
<td>94</td>
<td>Emergency care outside of the emergency room</td>
</tr>
<tr>
<td>19</td>
<td>Farmer’s market</td>
<td>95</td>
<td>Urgent care at hospital</td>
</tr>
<tr>
<td>20</td>
<td>Good perception of healthcare in Johnson County</td>
<td>96</td>
<td>Increase in specialty areas of physicians</td>
</tr>
<tr>
<td>21</td>
<td>The hospital is working to bring in more specialists</td>
<td>97</td>
<td>Response time and professionalism of ambulance service</td>
</tr>
</tbody>
</table>
### Community Health Needs Assessment 2017-2019

**Western Missouri Medical Center PSA - Strengths (Color Cards) N=37**

<table>
<thead>
<tr>
<th>#</th>
<th>Today: What are the strengths of our community that contribute to health?</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Community leadership is aware of health issues and dedicated to supporting solutions</td>
</tr>
<tr>
<td>23</td>
<td>CHNA team working to address</td>
</tr>
<tr>
<td>24</td>
<td>Access to wellness facilities - adults and children</td>
</tr>
<tr>
<td>25</td>
<td>Lots of collaboration on issues</td>
</tr>
<tr>
<td>26</td>
<td>Farmer's market</td>
</tr>
<tr>
<td>27</td>
<td>Overall great health stats</td>
</tr>
<tr>
<td>28</td>
<td>Good perception of care</td>
</tr>
<tr>
<td>29</td>
<td>Access to wellness</td>
</tr>
<tr>
<td>30</td>
<td>Drinking age limit</td>
</tr>
<tr>
<td>31</td>
<td>Community involvement</td>
</tr>
<tr>
<td>32</td>
<td>Primary care doctors - good</td>
</tr>
<tr>
<td>33</td>
<td>Trails</td>
</tr>
<tr>
<td>34</td>
<td>Smoking ordinance</td>
</tr>
<tr>
<td>35</td>
<td>82% - very good/good healthcare stats</td>
</tr>
<tr>
<td>36</td>
<td>Hospital - new specialists (St. Luke's)</td>
</tr>
<tr>
<td>37</td>
<td>Community centers/sports gym</td>
</tr>
<tr>
<td>38</td>
<td>Collaborative efforts with community leaders</td>
</tr>
<tr>
<td>39</td>
<td>Harveters Back Pack on Pine (binge drinking, drinking restrictions)</td>
</tr>
<tr>
<td>40</td>
<td>Farmer's market</td>
</tr>
<tr>
<td>41</td>
<td>Good perception of care</td>
</tr>
<tr>
<td>42</td>
<td>Project Community Connect</td>
</tr>
<tr>
<td>43</td>
<td>Low cancer rate</td>
</tr>
<tr>
<td>44</td>
<td>Urgent care at hospital</td>
</tr>
<tr>
<td>45</td>
<td>Hospital expansion</td>
</tr>
<tr>
<td>98</td>
<td>Access to mental health care for uninsured, Medicaid and substance use disorder</td>
</tr>
<tr>
<td>99</td>
<td>Our youth</td>
</tr>
<tr>
<td>100</td>
<td>Our low cancer rate</td>
</tr>
<tr>
<td>101</td>
<td>Our tight-knit internal community</td>
</tr>
<tr>
<td>102</td>
<td>Our proximity to higher level services that are not as much to need the expense here</td>
</tr>
<tr>
<td>103</td>
<td>Plenty of primary care providers</td>
</tr>
<tr>
<td>104</td>
<td>Many specialists here, albeit not everyone</td>
</tr>
<tr>
<td>105</td>
<td>New hospital facility</td>
</tr>
<tr>
<td>106</td>
<td>Collaboration between hospital and other key players (e.g. UCM)</td>
</tr>
<tr>
<td>107</td>
<td>Community Health Partners open</td>
</tr>
<tr>
<td>108</td>
<td>Longer hours and no appointments</td>
</tr>
<tr>
<td>109</td>
<td>Urgent care at hospital</td>
</tr>
<tr>
<td>110</td>
<td>UCM's nursing program</td>
</tr>
<tr>
<td>111</td>
<td>Meals-on-Wheels</td>
</tr>
<tr>
<td>112</td>
<td>Community Health Partners have walk-in appointments and are open seven days a week. Largely staffed by nurse practitioners</td>
</tr>
<tr>
<td>113</td>
<td>Our Community Center for recreation activities</td>
</tr>
<tr>
<td>114</td>
<td>CCORC - Community Culture of Respect Committee</td>
</tr>
<tr>
<td>115</td>
<td>Air Force and University</td>
</tr>
<tr>
<td>116</td>
<td>Decreased drinking related problems</td>
</tr>
<tr>
<td>117</td>
<td>Collaborating on violence/sexual assault prevention</td>
</tr>
<tr>
<td>118</td>
<td>CAB - Community Alcohol Board</td>
</tr>
<tr>
<td>119</td>
<td>Addressed alcohol related problems with town and university</td>
</tr>
<tr>
<td>120</td>
<td>DD trail</td>
</tr>
<tr>
<td>121</td>
<td>Lions Lake Trail</td>
</tr>
</tbody>
</table>
### Community Health Needs Assessment 2017-2019

**Western Missouri Medical Center PSA - Strengths (Color Cards) N=37**

<table>
<thead>
<tr>
<th>#</th>
<th>Today: What are the strengths of our community that contribute to health?</th>
<th>#</th>
<th>Today: What are the strengths of our community that contribute to health?</th>
</tr>
</thead>
<tbody>
<tr>
<td>46</td>
<td>OB delivery</td>
<td>122</td>
<td>SNAP at Farmer's Market</td>
</tr>
<tr>
<td>47</td>
<td>Affiliation formal with St. Luke's with access to specialists</td>
<td>123</td>
<td>Back Pack Program</td>
</tr>
<tr>
<td>48</td>
<td>Creation of physician network with standardized care coming across entire community</td>
<td>124</td>
<td>Great doctors</td>
</tr>
<tr>
<td>49</td>
<td>Great patient satisfaction/HCAHPS scores at hospital</td>
<td>125</td>
<td>Education system</td>
</tr>
<tr>
<td>50</td>
<td>Phenomenal infection rates - hospital acquires is 0%</td>
<td>126</td>
<td>St. Luke's affiliation</td>
</tr>
<tr>
<td>51</td>
<td>Very good ambulance district</td>
<td>127</td>
<td>Additional specialists</td>
</tr>
<tr>
<td>52</td>
<td>Great OB care (TJC certified)</td>
<td>128</td>
<td>More specialists available - St. Luke's cardiologists and neurologists</td>
</tr>
<tr>
<td>53</td>
<td>Great wound care and HBD availability</td>
<td>129</td>
<td></td>
</tr>
<tr>
<td>54</td>
<td>Great ortho care (TJC certified)</td>
<td>130</td>
<td>Retaining more deliveries</td>
</tr>
<tr>
<td>55</td>
<td>Great bariatric program (certified)</td>
<td>131</td>
<td>Specialty care</td>
</tr>
<tr>
<td>56</td>
<td>Hospital committed to time - critical diagnosis, trauma, stroke, stemi designation, to care for our community</td>
<td>132</td>
<td>Low primary care ratio of 2700:1</td>
</tr>
<tr>
<td>57</td>
<td>Doctor recruitment</td>
<td>133</td>
<td>Veterans home</td>
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<tr>
<td>58</td>
<td>Geriatric psych</td>
<td>134</td>
<td>Veterans clinic</td>
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<tr>
<td>59</td>
<td>New ER doctors</td>
<td>135</td>
<td>Manna Harvest free dinner every night</td>
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<tr>
<td>60</td>
<td>Possible dialysis</td>
<td>136</td>
<td>Trails and exercise</td>
</tr>
<tr>
<td>61</td>
<td>Training center</td>
<td>137</td>
<td>Back Pack Program</td>
</tr>
<tr>
<td>62</td>
<td>Stroke certification</td>
<td>138</td>
<td>Great doctors</td>
</tr>
<tr>
<td>63</td>
<td>Ortho - hip and knee certification</td>
<td>139</td>
<td>Hospital</td>
</tr>
<tr>
<td>64</td>
<td>Physical therapy</td>
<td>140</td>
<td>Local Public Health</td>
</tr>
<tr>
<td>65</td>
<td>OB/delivery at WMMC</td>
<td>141</td>
<td>Pathways</td>
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<tr>
<td>66</td>
<td>Outpatient services at WMMC</td>
<td>142</td>
<td>Parks and Recreation</td>
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<tr>
<td>67</td>
<td>Ambulance service</td>
<td>143</td>
<td>Back Pack Program</td>
</tr>
<tr>
<td>68</td>
<td>Good school nurse support</td>
<td>144</td>
<td>Public health office</td>
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<tr>
<td>69</td>
<td>Geriatric psych</td>
<td>145</td>
<td>Several walking trails</td>
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<tr>
<td>70</td>
<td>Adding specialty doctors - ortho</td>
<td>146</td>
<td>Community Center</td>
</tr>
<tr>
<td>#</td>
<td>Today: What are the strengths of our community that contribute to health?</td>
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<td></td>
</tr>
<tr>
<td>----</td>
<td>-----------------------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>71</td>
<td>ER is improving</td>
<td></td>
<td></td>
</tr>
<tr>
<td>72</td>
<td>Wait times are decreasing at hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>73</td>
<td>Adding more clinical specialties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>74</td>
<td>Collaboration within community</td>
<td></td>
<td></td>
</tr>
<tr>
<td>75</td>
<td>Doing a better job getting word out about services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>76</td>
<td>ER is much improved</td>
<td></td>
<td></td>
</tr>
<tr>
<td>147</td>
<td>Hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>148</td>
<td>Great doctors for small community</td>
<td></td>
<td></td>
</tr>
<tr>
<td>149</td>
<td>OB</td>
<td></td>
<td></td>
</tr>
<tr>
<td>150</td>
<td>Pharmacy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>151</td>
<td>82.3% positive on Health Care Delivery which is great</td>
<td></td>
<td></td>
</tr>
<tr>
<td>#</td>
<td>Today: What are the weaknesses of our community that contribute to health?</td>
<td>#</td>
<td>Today: What are the weaknesses of our community that contribute to health?</td>
</tr>
<tr>
<td>----</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------</td>
<td>----</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>1</td>
<td>Prenatal care</td>
<td>77</td>
<td>Urgent care clinics</td>
</tr>
<tr>
<td>2</td>
<td>Reduce uninsured</td>
<td>78</td>
<td>Health education</td>
</tr>
<tr>
<td>3</td>
<td>Dental care</td>
<td>79</td>
<td>Need local behavioral health services - more</td>
</tr>
<tr>
<td>4</td>
<td>Need more doctors</td>
<td>80</td>
<td>Need more inpatient cardiology services at WMMC - less out of county trips</td>
</tr>
<tr>
<td>5</td>
<td>Comprehensive primary care (including dental) for uninsured and Medicaid population (Katy Trail Satellite)</td>
<td>81</td>
<td>Need inpatient dialysis services at local hospital</td>
</tr>
<tr>
<td>6</td>
<td>Increased family planning</td>
<td>82</td>
<td>Need more walk-in and urgent type care to reduce unnecessary ER use</td>
</tr>
<tr>
<td>7</td>
<td>Dental services for uninsured and Medicaid recipients</td>
<td>83</td>
<td>ER provider quality and wait times</td>
</tr>
<tr>
<td>8</td>
<td>Family planning services</td>
<td>84</td>
<td>More resources focused on wellness, such as exercise, weight management, prevention and vaccinations</td>
</tr>
<tr>
<td>9</td>
<td>Mental health services expansion to include behavioral health integration into primary care</td>
<td>85</td>
<td>Focus on diabetic issues</td>
</tr>
<tr>
<td>10</td>
<td>Improved prenatal access</td>
<td>86</td>
<td>Urgent care clinics</td>
</tr>
<tr>
<td>11</td>
<td>Community health workers</td>
<td>87</td>
<td>Inpatient cardiology</td>
</tr>
<tr>
<td>12</td>
<td>Suicide prevention programs</td>
<td>88</td>
<td>Expand behavioral health services</td>
</tr>
<tr>
<td>13</td>
<td>Lack of dental health for uninsured patients</td>
<td>89</td>
<td>Expand express care hours</td>
</tr>
<tr>
<td>14</td>
<td>Trail lights DD</td>
<td>90</td>
<td>Breast and lung cancer screenings</td>
</tr>
<tr>
<td>15</td>
<td>Dental access for under-insured</td>
<td>91</td>
<td>Cardiology</td>
</tr>
<tr>
<td>16</td>
<td>Suicide prevention</td>
<td>92</td>
<td>Highway signage</td>
</tr>
<tr>
<td>17</td>
<td>Teen Depression</td>
<td>93</td>
<td>Crisis management and prevention</td>
</tr>
<tr>
<td>18</td>
<td>Grocery access</td>
<td>94</td>
<td>Need specialty doctors - urology, nephrology, oncology, ENT, ortho</td>
</tr>
<tr>
<td>19</td>
<td>Grocery availability</td>
<td>95</td>
<td>Mental health</td>
</tr>
<tr>
<td>#</td>
<td>Today: What are the weaknesses of our community that contribute to health?</td>
<td>#</td>
<td>Today: What are the weaknesses of our community that contribute to health?</td>
</tr>
<tr>
<td>---</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------</td>
<td>---</td>
<td>------------------------------------------------------------------------</td>
</tr>
<tr>
<td>20</td>
<td>Dental</td>
<td>96</td>
<td>Breast and cancer awareness</td>
</tr>
<tr>
<td>21</td>
<td>Suicide rates</td>
<td>97</td>
<td>Diabetes education</td>
</tr>
<tr>
<td>22</td>
<td>Suicide rate</td>
<td>98</td>
<td>ER times</td>
</tr>
<tr>
<td>23</td>
<td>Specialty care - fertility, dermatology, orthodontics, all services for children like peds, and oral care for youth</td>
<td>99</td>
<td>Express care expansion</td>
</tr>
<tr>
<td>24</td>
<td>Suicide prevention in the community</td>
<td>100</td>
<td>Expand mental health services</td>
</tr>
<tr>
<td>25</td>
<td>Substance use prevention</td>
<td>101</td>
<td>Expand express care hours</td>
</tr>
<tr>
<td>26</td>
<td>Opportunities for physical wellness</td>
<td>102</td>
<td>Crisis prevention for suicide</td>
</tr>
<tr>
<td>27</td>
<td>Eat more vegetables and fruits</td>
<td>103</td>
<td>Breast cancer awareness</td>
</tr>
<tr>
<td>28</td>
<td>Use less media</td>
<td>104</td>
<td>More inpatient cardiology/critical care</td>
</tr>
<tr>
<td>29</td>
<td>Need more preventive medicine doctors</td>
<td>105</td>
<td>Obesity/nutrition</td>
</tr>
<tr>
<td>30</td>
<td>Mental health - connectivity to the base mental health department</td>
<td>106</td>
<td>Obesity/physical activity</td>
</tr>
<tr>
<td>31</td>
<td>Tobacco use in pregnancy</td>
<td>107</td>
<td>Suicide/mental health services</td>
</tr>
<tr>
<td>32</td>
<td>Somewhat, on the lack of ED services, we need more patient education (urgent vs emergency, etc.)</td>
<td>108</td>
<td>Depression</td>
</tr>
<tr>
<td>33</td>
<td>STI percentage is high</td>
<td>109</td>
<td>ER - quality</td>
</tr>
<tr>
<td>34</td>
<td>Suicide is higher</td>
<td>110</td>
<td>Substance abuse (alcohol/drugs/heroin/marijuana/meth)</td>
</tr>
<tr>
<td>35</td>
<td>Add a few more specialists</td>
<td>111</td>
<td>STI - college/base needs education</td>
</tr>
<tr>
<td>36</td>
<td>Better coordinate care for chronic conditions such as diabetes</td>
<td>112</td>
<td>Dental care for uninsured</td>
</tr>
<tr>
<td>37</td>
<td>Tree ordinance to keep more trees within our city, promoting better air quality and climate control (trees help cool our streets, houses, etc.)</td>
<td>113</td>
<td>Bike trails/sidewalks/trails</td>
</tr>
<tr>
<td>38</td>
<td>No support for Medicaid expansion from leaders (Board members, etc.) of WMMC</td>
<td>114</td>
<td>More urgent care</td>
</tr>
<tr>
<td>39</td>
<td>Mental health providers</td>
<td>115</td>
<td>Earlier breast cancer</td>
</tr>
</tbody>
</table>
# Today: What are the weaknesses of our community that contribute to health?

<table>
<thead>
<tr>
<th>#</th>
<th>Case management for all aspects - elderly, rehab, autism, etc. Allows individuals more sustainable lives.</th>
<th>#</th>
<th>Access to dental care for uninsured</th>
</tr>
</thead>
<tbody>
<tr>
<td>40</td>
<td>Sidewalks, bike paths</td>
<td>116</td>
<td>More mental health providers and placement</td>
</tr>
<tr>
<td>41</td>
<td>Diagnostic providers</td>
<td>117</td>
<td>More awareness for suicide prevention education</td>
</tr>
<tr>
<td>42</td>
<td>Food options - socioeconomic</td>
<td>118</td>
<td>Activities for teens (less drinking/smoking) in rural areas</td>
</tr>
<tr>
<td>43</td>
<td>Homeless center</td>
<td>119</td>
<td>Care in LTC centers</td>
</tr>
<tr>
<td>44</td>
<td>Planned Parenthood closed</td>
<td>120</td>
<td>Quality or perception of emergency services</td>
</tr>
<tr>
<td>45</td>
<td>Violence and sexual assault prevention in school district and community</td>
<td>121</td>
<td>STI education (UCM/WAFB)</td>
</tr>
<tr>
<td>46</td>
<td>Mental health services</td>
<td>122</td>
<td>Awareness of community initiatives</td>
</tr>
<tr>
<td>47</td>
<td>Safe sidewalks and biking around town</td>
<td>123</td>
<td>Work to bring additional specialty services, such as dermatology</td>
</tr>
<tr>
<td>48</td>
<td>Nutritious food options (lots of fast food available)</td>
<td>124</td>
<td>Additional behavioral health</td>
</tr>
<tr>
<td>49</td>
<td>Need Medicaid expansion for community, state and hospital</td>
<td>125</td>
<td>Quality (perception) of ED</td>
</tr>
<tr>
<td>50</td>
<td>Mental health care needed</td>
<td>126</td>
<td>ED could be more focused on patients</td>
</tr>
<tr>
<td>51</td>
<td>Staffing of homeless shelter</td>
<td>127</td>
<td>STI education on base/UCM campus</td>
</tr>
<tr>
<td>52</td>
<td>How much is the high suicide rate correlated to veterans or service personnel from Whiteman AFB who live in the county?</td>
<td>128</td>
<td>Awareness of initiatives</td>
</tr>
<tr>
<td>53</td>
<td>Need creative new initiatives to bridge the economic gap separating every citizen from access to quality healthcare</td>
<td>129</td>
<td>Access to dental care</td>
</tr>
<tr>
<td>54</td>
<td>Need to educate and promote more individual and family health mindsets to decrease obesity and increase physical activity</td>
<td>130</td>
<td>Need to educate and promote more individual and family health mindsets to decrease obesity and increase physical activity</td>
</tr>
<tr>
<td>55</td>
<td>Education of Medicaid resources available</td>
<td>131</td>
<td>Concern for education to those expecting</td>
</tr>
</tbody>
</table>
## Community Health Needs Assessment - 2017-2019

### Western Missouri Medical Center PSA - Weakness (White Cards) N=37

<table>
<thead>
<tr>
<th>#</th>
<th>Today: What are the weaknesses of our community that contribute to health?</th>
<th>#</th>
<th>Today: What are the weaknesses of our community that contribute to health?</th>
</tr>
</thead>
<tbody>
<tr>
<td>57</td>
<td>Communication between healthcare providers (and willingness to communicate)</td>
<td>133</td>
<td>Alcohol use</td>
</tr>
<tr>
<td>58</td>
<td>Collaboration among healthcare providers and schools for injury prevention and treatment</td>
<td>134</td>
<td>Stability in schools</td>
</tr>
<tr>
<td>59</td>
<td>Health education</td>
<td>135</td>
<td>Access to education for structured wellness</td>
</tr>
<tr>
<td>60</td>
<td>Wellness/physical health</td>
<td>136</td>
<td>Obesity</td>
</tr>
<tr>
<td>61</td>
<td>Obesity</td>
<td>137</td>
<td>Physical activity</td>
</tr>
<tr>
<td>62</td>
<td>Mental health</td>
<td>138</td>
<td>STIs</td>
</tr>
<tr>
<td>63</td>
<td>Access to primary care</td>
<td>139</td>
<td>Mental disorders</td>
</tr>
<tr>
<td>64</td>
<td>Preventive care</td>
<td>140</td>
<td>Insurance (lack of)</td>
</tr>
<tr>
<td>65</td>
<td>Prenatal</td>
<td>141</td>
<td>Suicides</td>
</tr>
<tr>
<td>66</td>
<td>Economic issues</td>
<td>142</td>
<td>Nursing homes</td>
</tr>
<tr>
<td>67</td>
<td>Perception of citizens that may need to be changed</td>
<td>143</td>
<td>Drug/alcohol abuse</td>
</tr>
<tr>
<td>68</td>
<td>Education of opportunities that are available</td>
<td>144</td>
<td>Emergency Department</td>
</tr>
<tr>
<td>69</td>
<td>Identification of problem areas and development of plans to assess and impact</td>
<td>145</td>
<td>Billing</td>
</tr>
<tr>
<td>70</td>
<td>Still hearing wait times in offices are too long</td>
<td>146</td>
<td>More doctors/specialties</td>
</tr>
<tr>
<td>71</td>
<td>People still have perceptions that ER has long wait times</td>
<td>147</td>
<td>Need another pediatrician</td>
</tr>
<tr>
<td>72</td>
<td>Needing a young doctor with new ideas about elder care</td>
<td>148</td>
<td>Mental health</td>
</tr>
<tr>
<td>73</td>
<td>Still need to continue to bring in specialists when possible</td>
<td>149</td>
<td>Family planning</td>
</tr>
<tr>
<td>74</td>
<td>Must have more/improved mental health services</td>
<td>150</td>
<td>People are leaving for cardiac, derm, cancer, ortho and general surgery</td>
</tr>
<tr>
<td>75</td>
<td>Need additional urgent care providers</td>
<td>151</td>
<td>Mental health care- access, quality, affordability</td>
</tr>
<tr>
<td>76</td>
<td>Overall community wellness needs to improve</td>
<td>152</td>
<td>Family planning/women’s health care that is affordable</td>
</tr>
</tbody>
</table>
Community Members Present:

- Parents
- Those taking care of the elderly
- Elected officials (Board members)
- Schools
- Home health/hospice
- Those who are seeing patients
- University of Central Missouri
- Air Force/Armed Forces
- Katy Trail Community Health

TAB 3: Educational Profile

- “The free school lunch number isn’t accurate. Warrensburg is at 38%, so the county as a whole should be higher.” – school superintendent
- “The food is okay, but the kids are not eating it.” – Board member
- There is one school nurse at each school (7 total in Johnson County)

TAB 8: Uninsured Profile

- The community wants Medicaid expansion

TAB 9: Mortality Profile

- “Suicide is a 2014 number, but I can tell you it is not getting better into 2015 and 2016.”

Primary Research:

- “It is good to see that everyone is pleased with being able to get vaccinations here.”

Impacting Health in our Community:

- Pathways in under construction to expand, will be open in January
- Opening Geriatric Psychology at the WMMC in December
- Mental Health Council is currently meeting every other month to coordinate care
- The Spirit Trail is expanding, may help impact obesity
- Increasing violence prevention at UCM

STRENGTHS:

- Smoking Ordinance
- Drinking Restrictions
- Access to Trails
- Young Community
• Good Primary Care Doctors
• Low Cancer Rates
• Urgent Care at the Hospital
• Hospital/Clinic Expansion
• St. Luke’s Affiliation
• OB Delivery Services at Hospital
• Physician Network Creating Best Practice Care Across Community
• Access to a Hospital in our Community
• School and Harvester’s Back Pack Program
• Community Collaboration on Improving Health
• UCM and Air Force Collaboration to Reduce Alcohol Consumption
• Great Hospital Acquired Infection Rate (Zero)
• Citizens for Environmental Action (CEA)
• Katy Trail Coming into our Community
• Outpatient Services at Hospital
• Local Public Health
• Emergency Services at Hospital are Improving
• Project Community Connect
• Farmer’s Market Associated with SNAP Program
• Good Ambulance District
• Meals-on-Wheels

WEAKNESSES:
• Transportation for Groceries
• Tree Ordinance
• Economic Development
• Awareness of Healthcare Services
• Traffic Accidents
• Sexually Transmitted Infections Education
• Access to Dental Care for Uninsured
• Case Management for Chronic Conditions
• Mental Health (Diagnosis / Placement / Follow-Up)
• Obesity (Nutrition / Fitness)
• Family Planning Services
• Availability of Urgent Care Services
• Prevention Services for Cancer
• Emergency Services
• Suicide
• Substance Use Disorder (Alcohol / Meth / Opiates / Marijuana / Heroin)
• Build Sidewalks / Bike Lanes
• Geriatric Care Providers
Public Notice and Invitation

[VVV Consultants LLC]
FOR IMMEDIATE RELEASE
Contact: Tara Carlyle
Director of Marketing and Business Development
(660) 262-7497
tcarlyle@wmmc.com

WMMC Needs Your Feedback on Community Health

Warrensburg, MO (May 27, 2016)—Over the next few months, Western Missouri Medical Center (WMMC) will be updating the 2013 Johnson County Community Health Needs Assessment (CHNA).

The goal of this assessment update is to understand progress in addressing community health needs cited in the 2013 CHNA report and to collect current community health perceptions. To accomplish this assessment, a short online survey has been developed: https://www.surveymonkey.com/r/WMMC2016.

All community residents and business leaders are encouraged to complete the 2016 online CHNA survey by Friday, June 3 and to attend a Community Town Hall on Tuesday, June 14 at Warrensburg Community Center, Multipurpose Room ABC.

“We hope that the community and health professionals will take advantage of this opportunity to provide important input into the future of healthcare delivery in our county,” said Darinda Reberry, President/CEO.

For questions about CHNA activities, please call (660) 262-7497.

*Note: This assessment update is a follow-up to meet final IRS regulations released on January 2, 2015, requiring all 501©3 hospitals to conduct a community health needs assessment and adopt an implementation strategy at least once every three years.

Western Missouri Medical Center (WMMC) is a fully-accredited acute care county medical center located in Warrensburg, MO. WMMC prides itself in emergency care, obstetrics, orthopedic and general surgery, family healthcare, internal medicine, outpatient clinics, ambulatory care, rehabilitation services and more. Inpatient services include medical, surgical, intensive, obstetrical, orthopedic, pediatric and skilled nursing care, as well as a wide range of therapeutic and diagnostic outpatient services. This institution is an equal opportunity provider and employer.

###
From: Tara Carlyle, Director of Marketing and Business Development  
Date: May 5th, 2016  
To: Community Leaders, Providers and Hospital Board and Staff  
Subject: CHNA 2017-2019 Online Survey

Western Missouri Medical Center is partnering with other community health providers to update the Community Health Needs Assessment 2014-2016. (Note: This assessment update is a follow-up to meet final IRS regulations released on 01/02/2015, requiring all 501(c)(3) hospitals to conduct a Community Health Needs Assessment and adopt an implementation strategy at least once every three years).

Your feedback and suggestions regarding community health delivery are very important to collect in order to complete the Community Health Needs Assessment 2017-2019 and Implementation Plan updates.

To accomplish this work, a short online survey has been developed: https://www.surveymonkey.com/r/WMMC2016

CHNA 2017-2019 due date for survey completion is Friday, June 3rd. All responses are confidential. Thank you in advance for your time and support in participating with this important request.

Also, please hold June 14th from 5:30-7pm in order to attend our CHNA 2017-2019 Town Hall at the Warrensburg Community Center. A light dinner will be provided.

Sincerely,

Tara Carlyle  
Director of Marketing and Business Development
Hospital seeks community input


Warrensburg – A town hall meeting is planned from 5:30 to 7:30 p.m. tonight, June 14, at the Warrensburg Community Center Multi-Purpose Room ABC to collect information from the community about the community health needs.

Western Missouri Medical Center and Johnson County Community Health Services are hosting the meeting due to an update of the required Community Health Needs Assessment 2014-2016.

The goal of this assessment update is to understand progress in addressing community health needs cited in the CHNA 2014-2016 report and to collect up-to-date community health perceptions.

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

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Dear Community Member,

You may have heard that Western Missouri Medical Center is partnering with other healthcare providers to perform a Community Health Needs Assessment 2017-2019. We need your input on the current state of health delivery in our community and your thoughts on the most important health needs that our community needs to address.

On Tuesday, June 14, you are invited to attend a Western Missouri Medical Center (Primary Service Area) Town Hall meeting. We have retained the services Vince Vandehaar and VVV Consultants LLC from Olathe, KS, to facilitate this meeting and prepare our report.

Your input is valuable, and will be incorporated into our final report. Please join us on **Tuesday, June 14 from 5:30-7:00p.m.** at the Warrensburg Community Center. A light dinner will be served starting at 5:00p.m.

We look forward to seeing you at the Town Hall meeting, and appreciate your input.

Sincerely,

Tara Carlyle
Director of Marketing and Business Development
Western Missouri Medical Center and Johnson County Community Health Services invite you to a Town Hall meeting discussing our greater community’s health.

TUESDAY, JUNE 14, 2016
5:30 – 7:00 pm
Community Center
Multipurpose Room ABC

A light dinner will be provided.

THE PUBLIC IS INVITED TO ATTEND.
Please join us for this opportunity to share your opinions and suggestions to improve health care delivery in Johnson County, MO.

Thank you in advance for your participation!
Warrensburg – The 37 people attending the Community Health Needs Assessment 2017-2019 at the Community Center identified health issues that need attention.

The Internal Revenue Service requires hospitals to conduct the assessment every three years, facilitator Vince Vandehaar of VV Consultants LLC, Olathe, Kansas, said.

Western Missouri Medical Center CEO Darinda Reberry said the hospital partnered with Johnson County Community Health Services to do the assessment.

Obesity, lack of mental health care, suicide prevention, access to dental care for uninsured people, substance abuse and family planning topped needs identified at the meeting, which did not differ greatly from the previous assessment.

“I don't feel priorities have changed,” Reberry said.

Among the strengths identified Tuesday are the hospital's affiliation with St. Luke's to provide specialty care; collaboration among medical providers and law enforcement to address mental health emergencies; development of a geriatric psychiatric facility at the hospital; and the Spirit Trail extension.

A follow-up meeting from 7:30 to 9 a.m. July 1 at the hospital will focus on how to address needs, Vandehaar said.

The 2016 County Health Rankings by the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute, shows Johnson County ranked eighth in health outcomes and 14th in quality of life among Missouri's 114 counties.

“Those are really good scores,” Vandehaar said.

Most of Johnson County's scores ranked better or on a par with rural Missouri norms, he said, but some areas produced below-average scores.

Data show that 42 percent of residents make long commutes to work, which can affect family life and leisure time, he said.

Data put the number of students eligible for free and reduced lunches at 27 percent, on a par with the state norm, but Warrensburg School Superintendent Scott Patrick said 38 percent of Warrensburg students are eligible for the program, adding the number is probably higher in rural areas of the county.

Premature births, births to unwed mothers and the number of mothers who smoke are concerns, Vandehaar said.

The number of uninsured people is much higher than in other counties, he said, with hospital bad debt and charity cases “increasing at an alarming rate.”

The suicide rate and number of deaths in motor vehicle wrecks are high, he said.

“Access to exercise needs to be higher,” Vandehaar said, and mammography screenings are too low.
The survey showed 82 percent of respondents rated overall quality of health care delivery high.

"That's a tremendous score," he said.

Areas of concern, Vandehaar said, are emergency room services, family planning services, mental health services and nursing homes. Areas identified for improvement or change: additional specialties, such as dermatology, nephrology and endocrinology; access to health care; mental health and women's health services; and emergency room and trauma services.

Survey respondents said they sought out-of-county care for cardiovascular, dermatology, cancer, orthopedic and surgical treatments.

The survey identified health concerns as cancer, alcoholism, diabetes, drugs and substance abuse, heart disease, mental health issues, exercise, suicide, wellness education, obesity and nutrition.

The survey three years ago cited obesity as the number one health issue, he said, followed by lack of dental care for low-income residents. Other concerns: lack of mental health caregivers, cardiovascular disease, inadequate social support for senior citizens, lack of access to a primary physician, lack of health insurance and non-medical health needs of seniors.

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FOR IMMEDIATE RELEASE
Contact: Tara Carlyle
Director of Marketing and Business Development
(660) 262-7497
tcarlyle@wmmc.com

WMMC and Johnson County Community Health Host Town Hall Meeting to Discuss Johnson County Health Needs

Warrensburg, MO (June 16, 2016)—On Tuesday, June 14, Western Missouri Medical Center (WMMC) and Johnson County Community Health hosted a Community Health Needs Assessment (CHNA) Town Hall at the Warrensburg Community Center.

There was a diverse group of 37 attendees who participated in valuable, two-way conversations helping to identify strengths and weaknesses of health needs in Johnson County. Attendees viewed a presentation on results of the CHNA survey and Johnson County public health data. They then participated in an exercise determining strengths and weaknesses of health needs and voted on top opportunities for improvement.

Preliminary findings for areas needing improvement were mental health diagnosis, placement and ongoing recovery; obesity (nutrition and fitness); access to dental care for low income families; substance abuse and family planning.

—MORE—
The goal of this assessment update is to understand progress in addressing community health needs cited in the 2013 CHNA report and to collect current community health perceptions. Members of the CHNA Group will hold an implementation meeting to create tactics and develop the 3-year plan based off of the information gathered through the survey, public health information and Town Hall.

For questions about CHNA activities, please call (660) 262-7497.

*Note: This assessment update is a follow-up to meet final IRS regulations released on January 2, 2015, requiring all 501©3 hospitals to conduct a community health needs assessment and adopt an implementation strategy at least once every three years.

Western Missouri Medical Center (WMMC) is a fully-accredited acute care county medical center located in Warrensburg, MO. WMMC prides itself in emergency care, obstetrics, orthopedic and general surgery, family healthcare, internal medicine, outpatient clinics, ambulatory care, rehabilitation services and more. Inpatient services include medical, surgical, intensive, obstetrical, orthopedic, pediatric and skilled nursing care, as well as a wide range of therapeutic and diagnostic outpatient services. This institution is an equal opportunity provider and employer.
Detail Primary Research
Primary Service Area

[VVV Consultants LLC]
Community Health Needs Assessment 2017-2019
Community Feedback

Methodology

A community feedback survey was created on behalf of the CHNA 2017-2019 client to gather primary service area stakeholder feedback on health perception and progress in addressing previous CHNA 2017-2019 community needs. All community residents were encouraged to take the survey online by entering the following address into their personal browser:


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

Below is a summary of public response:

<table>
<thead>
<tr>
<th>Western Missouri Medical Center (Primary Service Area) - Warrensburg, MO N=283</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. For reporting purposes, are you involved in or are you a...?</td>
</tr>
<tr>
<td>Board Member</td>
</tr>
<tr>
<td>Business / Merchant</td>
</tr>
<tr>
<td>Case Manager / Discharge</td>
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<tr>
<td>Civic Club / Chamber</td>
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<tr>
<td>Charitable Foundation</td>
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<tr>
<td>Clergy / Congregational Leader</td>
</tr>
<tr>
<td>College / University</td>
</tr>
<tr>
<td>Consumer Advocate</td>
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<tr>
<td>Consumers of Health Care</td>
</tr>
<tr>
<td>Dentist</td>
</tr>
<tr>
<td>Economic Development</td>
</tr>
<tr>
<td>Education Official / Teacher</td>
</tr>
<tr>
<td>Elected Official (City / County)</td>
</tr>
<tr>
<td>EMS / Emergency</td>
</tr>
<tr>
<td>Farmer / Rancher</td>
</tr>
<tr>
<td>Health Department</td>
</tr>
<tr>
<td>Hospital</td>
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<tr>
<td>Housing / Builder</td>
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<tr>
<td>Insurance</td>
</tr>
<tr>
<td>Labor</td>
</tr>
<tr>
<td>Law Enforcement</td>
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<tr>
<td>Low Income / Free Clinics</td>
</tr>
<tr>
<td>Mental Health</td>
</tr>
<tr>
<td>Nursing</td>
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<tr>
<td>Other Health Professional</td>
</tr>
<tr>
<td>Parent / Caregiver</td>
</tr>
<tr>
<td>Pharmacy</td>
</tr>
<tr>
<td>Physician (MD / DO)</td>
</tr>
<tr>
<td>Physician Clinic</td>
</tr>
<tr>
<td>Press (Paper, TV, Radio)</td>
</tr>
<tr>
<td>Senior Care / Nursing Home</td>
</tr>
<tr>
<td>Social Worker</td>
</tr>
<tr>
<td>Veteran</td>
</tr>
<tr>
<td>Welfare / Social Service</td>
</tr>
<tr>
<td>Other (please note below)</td>
</tr>
<tr>
<td>TOTAL</td>
</tr>
</tbody>
</table>
### KEY - CHNA 2017-2019 Open-End Comments

#### CODE | Physician Specialty
--- | ---
ALLER | Allergy/Immunology
AES | Anesthesia/Pain
CARD | Cardiology
DERM | Dermatology
EMER | Emergency
ENDO | Endocrinology
FP | Family Practice (General)
GAS | Gastroenterology
SUR | General Surgery
GER | Gerontology
HEM | Hematology
IFD | Infectious Diseases
IM | Internal Medicine
NEO | Neonatal/Perinatal
NEP | Nephrology
NEU | Neurology
NEUS | Neurosurgery
OBG | Obstetrics/Gynecology (Delivery)

#### CODE | Physician Specialty
--- | ---
ONC | Oncology/Radiation Oncology
OPTH | Ophthalmology
ORTH | Orthopedics
ENT | Otolaryngology (ENT)
PATA | Pathology
PEDS | Pediatrics
PHY | Physical Medicine/Rehabilitation
PLAS | Plastic/Reconstructive
PSY | Psychiatry
PUL | Pulmonary
RAD | Radiology
RHE | Rheumatology
VAST | Thoracic/Cardiovascular/Vascular
URL | Urology
MDLV | Mid-Level
SURG | Surgery
TEL | Telemedicine

### KEY - CHNA 2017-2019 Open-End Comments

<table>
<thead>
<tr>
<th>Code</th>
<th>Healthcare Themes</th>
<th>Code</th>
<th>Healthcare Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>VIO</td>
<td>Abuse/Violence</td>
<td>NURSE</td>
<td>More Nurse Availability</td>
</tr>
<tr>
<td>ACC</td>
<td>Access to Care</td>
<td>NEG</td>
<td>Neglect</td>
</tr>
<tr>
<td>AGE</td>
<td>Aging (Senior Care/Assistance)</td>
<td>NH</td>
<td>Nursing Home</td>
</tr>
<tr>
<td>AIR</td>
<td>Air Quality</td>
<td>NUTR</td>
<td>Nutrition</td>
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<tr>
<td>ALC</td>
<td>Alcohol</td>
<td>OBES</td>
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<tr>
<td>ALT</td>
<td>Alternative Medicine</td>
<td>ORAL</td>
<td>Oral Surgery</td>
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<tr>
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<td>Alzheimer’s</td>
<td>ORTHD</td>
<td>Orthodontist</td>
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<tr>
<td>AMB</td>
<td>Ambulance Service</td>
<td>OTHR</td>
<td>Other</td>
</tr>
<tr>
<td>ASLV</td>
<td>Assisted Living</td>
<td>OP</td>
<td>Outpatient Services/Surgeries</td>
</tr>
<tr>
<td>AUD</td>
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<td>OZON</td>
<td>Ozone</td>
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<td>Back/Spine</td>
<td>PAIN</td>
<td>Pain Management</td>
</tr>
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<td>Blood Drive</td>
<td>PARK</td>
<td>PARKING</td>
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<tr>
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<td>Breastfeeding</td>
<td>PHAR</td>
<td>Pharmacy</td>
</tr>
<tr>
<td>CANC</td>
<td>Cancer</td>
<td>DOCS</td>
<td>Physicians</td>
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<tr>
<td>CHEM</td>
<td>Chemotherapy</td>
<td>FLU</td>
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<td>KID</td>
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<td>CHRON</td>
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<td>POV</td>
<td>Poverty</td>
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<td>CLIN</td>
<td>Clinics (Walk-In, etc.)</td>
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<td>Code</td>
<td>Healthcare Themes</td>
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<td>QUAL</td>
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<td>REC</td>
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<td>Duplication of Services</td>
<td>RESP</td>
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<td>NO</td>
<td>Response “No Changes,” etc.</td>
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<td>SANI</td>
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<td>EMS</td>
<td>SNUR</td>
<td>School Nurse</td>
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<td>EYE</td>
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<td>STD</td>
<td>Sexually Transmitted Diseases</td>
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<td>SMOK</td>
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<td>SS</td>
<td>Social Services</td>
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<tr>
<td>FEM</td>
<td>Female (OBG)</td>
<td>SPEC</td>
<td>Specialist Physician care</td>
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<td>SPEE</td>
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<td>General Healthcare Improvement</td>
<td>DRUG</td>
<td>Substance Abuse (Drugs/Rx)</td>
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<td>THY</td>
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<td>HIV</td>
<td>HIV/AIDS</td>
<td>TOB</td>
<td>Tobacco Use</td>
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<td>Underage Drinking</td>
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<td>Infidelity</td>
<td>INSU</td>
<td>Uninsured/Underinsured</td>
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<td>Urgent Care/After Hours Clinic</td>
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<td>Lead Exposure</td>
<td>VACC</td>
<td>Vaccinations</td>
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<td>Medical Staff</td>
<td>WELL</td>
<td>Wellness Education/Health Fair</td>
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<td>BH</td>
<td>Mental Health Services</td>
<td>WIC</td>
<td>WIC Program</td>
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### CHNA 2017-2019 Community Feedback

**Western Missouri Medical Center (Primary Service Area) N=283**

<table>
<thead>
<tr>
<th>ID</th>
<th>Zip</th>
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<th>c1</th>
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<th>c3</th>
<th>Are there healthcare services in the Western Missouri Medical Center Primary Service Area that you feel need to be improved and/or changed?</th>
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<tbody>
<tr>
<td>1275</td>
<td>64093</td>
<td>Good</td>
<td>ACC</td>
<td>SPEC</td>
<td></td>
<td>Easier access to specialists.</td>
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<tr>
<td>1004</td>
<td>64093</td>
<td>Good</td>
<td>AWARE</td>
<td>BOTH</td>
<td>LSUMM</td>
<td>We need to create an atmosphere of trust and reliability in what we offer to our community. I still hear of many who go to Bothwell and Lee's Summit and Independence in preference to what we offer.</td>
</tr>
<tr>
<td>1057</td>
<td>64070</td>
<td>Fair</td>
<td>AWARE</td>
<td>PT</td>
<td>ORTH</td>
<td>Understanding of the available options for patients with regard to specific care needs: aquatic therapy, physical therapy, orthopedic vs primary care, ENTs, etc. Open communication between various providers regarding referrals, expectations, and options for patients.</td>
</tr>
<tr>
<td>1229</td>
<td>64093</td>
<td>Good</td>
<td>BILL</td>
<td>WAIT</td>
<td>COMM</td>
<td>There continue to be billing issues, stating there has been delayed billing while they update their system. Bills have said this for quite some time, and it seems to just be an excuse for late billing. There also seems to be some crossover issues with billing and insurance, receiving multiple bills for the exact same problem, despite having called multiple times to have it handled.</td>
</tr>
<tr>
<td>1010</td>
<td>64020</td>
<td>Good</td>
<td>BILL</td>
<td></td>
<td></td>
<td>The new Board Of Trustees is the best board we have had in a long time. I believe they are on the right path.</td>
</tr>
<tr>
<td>1181</td>
<td>64093</td>
<td>Very Good</td>
<td>BOARD</td>
<td></td>
<td></td>
<td>Serious need for the ability to treat people with heart trouble in a local facility. Life flight or service in urban area are dangerous options for people in our community. Billing process at local hospital has not been user friendly in my past experiences.</td>
</tr>
<tr>
<td>1244</td>
<td>64093</td>
<td>Good</td>
<td>CARD</td>
<td>BILL</td>
<td></td>
<td>I don't think hypertension is always appreciated as the problem that it is. I don't think people are in many cases followed adequately given age and underlying health status. For example, I don't think they need to come back and see a specialist in 6 months and tell me that they have not yet seen her primary care doctor.</td>
</tr>
<tr>
<td>1190</td>
<td>64093</td>
<td>Good</td>
<td>CARD</td>
<td>CANC</td>
<td></td>
<td>Cardio and Cancer</td>
</tr>
<tr>
<td>1165</td>
<td>64110</td>
<td>Good</td>
<td>CARD</td>
<td>PRIM</td>
<td>COMM</td>
<td>Communications with results and information from rural clinics to their patron/patients. Sometimes it is weeks before information is presented or delivered.</td>
</tr>
<tr>
<td>1198</td>
<td>Good</td>
<td>CARD</td>
<td>REHAB</td>
<td></td>
<td></td>
<td>Cardiac rehab</td>
</tr>
<tr>
<td>1098</td>
<td>64093</td>
<td>Good</td>
<td>CARD</td>
<td>SURG</td>
<td></td>
<td>Cardiac Care, more general surgeons</td>
</tr>
<tr>
<td>1049</td>
<td>64093</td>
<td>Very Good</td>
<td>CARD</td>
<td></td>
<td></td>
<td>Expanded heart care</td>
</tr>
<tr>
<td>1079</td>
<td>65336</td>
<td>Good</td>
<td>CLIN</td>
<td>INSUR</td>
<td>COST</td>
<td>We desperately need a free clinic, especially for the working poor and the 2,000 international students at UCM without available coverage.</td>
</tr>
<tr>
<td>1026</td>
<td>65336</td>
<td>Fair</td>
<td>COMM</td>
<td>CLIN</td>
<td></td>
<td>Communication with results and information from rural clinics to their patron/patients. Sometimes it is weeks before information is presented or delivered.</td>
</tr>
<tr>
<td>1160</td>
<td>64093</td>
<td>Very Good</td>
<td>COMM</td>
<td>QUAL</td>
<td></td>
<td>More case management of pts with chronic conditions Better county home health services</td>
</tr>
<tr>
<td>1121</td>
<td>64093</td>
<td>Good</td>
<td>COMM</td>
<td>RAD</td>
<td></td>
<td>Getting back with patient on test results as well as sending the patient a copy of MRI, X-Rays, etc. instead of patient having to call and ask for them, just mail them to them or at least call patient and let them know they can pick up.</td>
</tr>
<tr>
<td>1109</td>
<td>64093</td>
<td>Fair</td>
<td>COMM</td>
<td>WAIT</td>
<td></td>
<td>WMMC has grown immensely, broadening the services offered to the community. I would say the one thing that could be improved on from my most recent visit was the timeliness with returned calls. I was by no means disappointed, but that is just one thing that could be a bit quicker.</td>
</tr>
</tbody>
</table>
CHNA 2017-2019 Community Feedback
Western Missouri Medical Center (Primary Service Area) N=283

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</thead>
<tbody>
<tr>
<td>1148</td>
<td>64093</td>
<td>Fair</td>
<td>COST</td>
<td>INSUR</td>
<td>BILL</td>
<td>The general concern I have is for there to be a change in the way that healthcare services are priced and paid for (everywhere, not just locally). Unlike any other industry in which services are clearly priced and the means for paying for them is fairly clearly understood, the healthcare service industry is not clear in communicating the out-of-pocket cost of services to consumers. In what appears to be a collusion between the health care providers and the health insurance industry, I as a consumer never really know what I am going to owe for the healthcare services that I receive until a long process in which I am billed, the insurance company is billed, I am re-billed, I negotiate with my insurance provider and with the healthcare provider, and I finally am obligated to pay for whatever bill is outstanding. I am left with a great fear of seeking healthcare services and with a firm commitment to stay as healthy as I can for as long as I can so that I will not burden my family with the costs of healthcare services. I think that the public deserves major improvements/changes to this system which favors the deep pockets of the health care providers and insurers at the expense of the public who should be the ones favored by this system.</td>
</tr>
<tr>
<td>1031</td>
<td>64093</td>
<td>Good</td>
<td>DENT</td>
<td>MH</td>
<td>EMER</td>
<td>Dental and mental health care for low income folks. Training for your ED staff in assisting those in mental health crisis.</td>
</tr>
<tr>
<td>1134</td>
<td>64093</td>
<td>Good</td>
<td>DERM</td>
<td>ENT</td>
<td></td>
<td>Dermatologists services ENT services</td>
</tr>
<tr>
<td>1184</td>
<td>64093</td>
<td>Very Good</td>
<td>DERM</td>
<td>NEP</td>
<td>ENDO</td>
<td>Local access to dermatology, nephrology, endocrinology.</td>
</tr>
<tr>
<td>1268</td>
<td>64093</td>
<td>Good</td>
<td>DERM</td>
<td>SURG</td>
<td>ORTH</td>
<td>We need a dermatologist in the area. Are we adequately covered with surgeon, especially orthopedists?</td>
</tr>
<tr>
<td>1157</td>
<td>64093</td>
<td>Good</td>
<td>DERM</td>
<td>URG</td>
<td></td>
<td>Need Dermatology. Increase Express Care hours.</td>
</tr>
<tr>
<td>1215</td>
<td>64093</td>
<td>Good</td>
<td>DERM</td>
<td>VEIN</td>
<td>SPEC</td>
<td>Skin and vein specialist practice is needed.</td>
</tr>
<tr>
<td>1131</td>
<td>64093</td>
<td>Good</td>
<td>DERM</td>
<td></td>
<td></td>
<td>Dermatology</td>
</tr>
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<td>1039</td>
<td>64093</td>
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<td>DERM</td>
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<td></td>
<td>Dermatology</td>
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<tr>
<td>1040</td>
<td>64093</td>
<td>Good</td>
<td>DERM</td>
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<td></td>
<td>Dermatology</td>
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<tr>
<td>1158</td>
<td>64093</td>
<td>Good</td>
<td>DERM</td>
<td></td>
<td></td>
<td>We need a dermatologist, at least weekly, in the community.</td>
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<tr>
<td>1251</td>
<td>64093</td>
<td>Very Good</td>
<td>DERM</td>
<td></td>
<td></td>
<td>We need a dermatologist.</td>
</tr>
<tr>
<td>1238</td>
<td>64093</td>
<td>Good</td>
<td>DERM</td>
<td></td>
<td></td>
<td>We need to have a Dermatologist as part of the mix.</td>
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<tr>
<td>1177</td>
<td>64037</td>
<td>Good</td>
<td>DIAB</td>
<td>DOCS</td>
<td>COST</td>
<td>I am very interested in being in the part of the development of a Diabetes Management team that would include Providers and CDE and RD as a team to provide great Diabetes management for those who cannot get into the city or afford specialty costs.</td>
</tr>
<tr>
<td>1193</td>
<td>64093</td>
<td>Good</td>
<td>DIAB</td>
<td>ED</td>
<td></td>
<td>Diabetes Education</td>
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<tr>
<td>1162</td>
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<td>Good</td>
<td>DIAL</td>
<td></td>
<td></td>
<td>Dialysis available at WMMC.</td>
</tr>
<tr>
<td>1102</td>
<td>64093</td>
<td>Fair</td>
<td>DOCS</td>
<td>CLIN</td>
<td>Peds</td>
<td>I know there is limitations to the availability of doctors/clinics in Johnson County. This creates an access problem. More clinics, more doctors, more pediatricians...</td>
</tr>
<tr>
<td>1205</td>
<td>64093</td>
<td>Fair</td>
<td>DOCS</td>
<td>COMM</td>
<td>EOL</td>
<td>Physicians need to discuss end of life care options for patients and families</td>
</tr>
<tr>
<td>1055</td>
<td>64093</td>
<td>Good</td>
<td>DOCS</td>
<td>HOSP</td>
<td></td>
<td>My concern is that many of the community doctors do not have hospital privileges. You cannot have your regular doctor if you are hospitalized in Warrensburg. Many people are going to the city to seek medical treatment to avoid having an unknown doctor.</td>
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</table>
### CHNA 2017-2019 Community Feedback

**Western Missouri Medical Center (Primary Service Area) N=283**

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</thead>
<tbody>
<tr>
<td>1194</td>
<td>64093</td>
<td>Good</td>
<td>DOCS</td>
<td>HOSP</td>
<td></td>
<td>You need to call a truce with local doctors and allow them to practice in the local hospital. This has been ridiculous!!!!!!!!</td>
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<tr>
<td>1204</td>
<td>64093</td>
<td>Fair</td>
<td>DOCS</td>
<td>NUTR</td>
<td></td>
<td>I feel that doctors are not always up to date on the latest and best practices. Nutritional guidance is very rarely used and could benefit most of those with health care needs.</td>
</tr>
<tr>
<td>1104</td>
<td>64093</td>
<td>Good</td>
<td>DOCS</td>
<td>QUAL</td>
<td></td>
<td>Possibly the caliber of physicians offering care.</td>
</tr>
<tr>
<td>1138</td>
<td>64093</td>
<td>Good</td>
<td>ED</td>
<td></td>
<td></td>
<td>Opportunities for health education for community members, support groups</td>
</tr>
<tr>
<td>1100</td>
<td>64093</td>
<td>Fair</td>
<td>EMER</td>
<td>BILL</td>
<td></td>
<td>The ER department is horrible as well as the customer service for payments</td>
</tr>
<tr>
<td>1126</td>
<td>64093</td>
<td>Fair</td>
<td>EMER</td>
<td>CARD</td>
<td>WELL</td>
<td>Emergency services offered level 1 trauma improved diagnostic capabilities cardiac care pediatrics, injury prevention, health and wellness</td>
</tr>
<tr>
<td>1103</td>
<td>64093</td>
<td>Poor</td>
<td>EMER</td>
<td>COMM</td>
<td>STAFF</td>
<td>The Emergency Room services are very bad. I have had my mother in 4 times this past month and I myself have walked out the last 2 times I have been there. The doctor is disrespectful and inconsiderate. Most of the nurses are nice and try their best but the general customer service and procedures are unacceptable. Each time before there is any conversation, tests are ordered and you are told that most likely there will be an admission to the hospital. When I question the test and the reasoning then I am asked “do I not care about my mothers health.” I love my community but I am embarrassed at the care we are giving our people in the ER.</td>
</tr>
<tr>
<td>1169</td>
<td>64093</td>
<td>Very Good</td>
<td>EMER</td>
<td>DOCS</td>
<td></td>
<td>Emergency Room - it would be nice to see doctors employed by the hospital so that they are more dedicated to the patients. There is also a lack of bedside manner and professionalism in most of the current ER docs.</td>
</tr>
<tr>
<td>1173</td>
<td>65336</td>
<td>Fair</td>
<td>EMER</td>
<td>DOCS</td>
<td></td>
<td>ER doctors, not local physicians to follow up with if needed.</td>
</tr>
<tr>
<td>1247</td>
<td>65336</td>
<td>Fair</td>
<td>EMER</td>
<td>DOCS</td>
<td></td>
<td>The emergency room needs to be available with doctors available. This needs to support urgent care 24-7.</td>
</tr>
<tr>
<td>1201</td>
<td>64093</td>
<td>Poor</td>
<td>EMER</td>
<td>FAC</td>
<td>STAFF</td>
<td>Emergency facilities and staff are lacking in response time of services needed by patients</td>
</tr>
<tr>
<td>1090</td>
<td>64093</td>
<td>Good</td>
<td>EMER</td>
<td>FAC</td>
<td></td>
<td>Continued improvement of the ER facility.</td>
</tr>
<tr>
<td>1019</td>
<td>64093</td>
<td>Good</td>
<td>EMER</td>
<td>NH</td>
<td></td>
<td>ER had my dad in ER 3 times each year took at least 6 hours each time to get him from the ER to a room in the hospital each time. They did very little to keep us updated and I felt because he came from a nursing home they really didn’t care. Heard many comments about nursing home patients.</td>
</tr>
<tr>
<td>1232</td>
<td>64093</td>
<td>Fair</td>
<td>EMER</td>
<td>NURSE</td>
<td>COMM</td>
<td>Bedside manner. I was at the ER with my brother recently and the nurses were put out that he had vomited and they had to clean it up. The male nurse was making a big deal out of it. Then the female nurse came in and said maybe he could aim better. When he went in his BP was extremely high and they had given him a drug to lower it that made him not able to focus. They had him get out of the bed and move to the chairs without any assistance. When I tried to help with the changing of the bed I was told to leave things alone. I am fairly new to the area, but I have heard bad things about WMMC and am starting to believe them...</td>
</tr>
<tr>
<td>1278</td>
<td>64093</td>
<td>Good</td>
<td>EMER</td>
<td>TRANS</td>
<td>KC</td>
<td>Emergency / Trauma services so less patients have to be transported to Kansas City.</td>
</tr>
<tr>
<td>1284</td>
<td>64093</td>
<td>Very Good</td>
<td>EMER</td>
<td>TRANS</td>
<td>KC</td>
<td>Improved emergency and/or trauma services so fewer patients have to be transported to a Kansas City hospital for care.</td>
</tr>
</tbody>
</table>
### CHNA 2017-2019 Community Feedback

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<th>Rating</th>
<th>c1</th>
<th>c2</th>
<th>c3</th>
<th>Are there healthcare services in the Western Missouri Medical Center Primary Service Area that you feel need to be improved and/or changed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1137</td>
<td>64093</td>
<td>Good</td>
<td>EMER</td>
<td>WAIT</td>
<td>ORTH</td>
<td></td>
<td>ER wait time even after you are assigned a room. Extended wait time to see ortho Drs. way to long. Need to fill the mob as promised when built was told this was a must to create revenue.</td>
</tr>
<tr>
<td>1274</td>
<td>64093</td>
<td>Fair</td>
<td>EMER</td>
<td>WAIT</td>
<td>QUAL</td>
<td></td>
<td>ER Services need to be fixed because they are slow and have several misdiagnosis.</td>
</tr>
<tr>
<td>1246</td>
<td>64093</td>
<td>Good</td>
<td>EMER</td>
<td>WAIT</td>
<td>URG</td>
<td></td>
<td>Emergency room service at WMMC is very slow and I've heard from family members that it is occasionally ineffective. By contrast, your express care service is wonderful! Would really like to see some attention and care put into the emergency room function to make it more timely and patient friendly.</td>
</tr>
<tr>
<td>1089</td>
<td></td>
<td>Fair</td>
<td>EMER</td>
<td>WAIT</td>
<td></td>
<td></td>
<td>Emergency room time on stays.</td>
</tr>
<tr>
<td>1013</td>
<td>64093</td>
<td>Good</td>
<td>EMER</td>
<td>WAIT</td>
<td></td>
<td></td>
<td>Emergency Room visits, waits are extremely long with no ‘obvious’ reasons. (The lobby may be empty but ended up waiting over an hour, etc.)</td>
</tr>
<tr>
<td>1038</td>
<td>64093</td>
<td>Good</td>
<td>EMER</td>
<td>WAIT</td>
<td></td>
<td></td>
<td>Emergency room wait time</td>
</tr>
<tr>
<td>1175</td>
<td>64093</td>
<td>Good</td>
<td>EMER</td>
<td>WAIT</td>
<td></td>
<td></td>
<td>Emergency Room, many people seem frustrated with the care they get in the emergency room and the amount of time it takes to be taken care of.</td>
</tr>
<tr>
<td>1111</td>
<td>64093</td>
<td>Fair</td>
<td>EMER</td>
<td>WAIT</td>
<td></td>
<td></td>
<td>The emergency room needs to pick up the pace. It is not okay to walk in the door and wait 4 hours before being seen.</td>
</tr>
<tr>
<td>1263</td>
<td>64093</td>
<td>Good</td>
<td>EMER</td>
<td></td>
<td></td>
<td></td>
<td>Emergency room!!!!</td>
</tr>
<tr>
<td>1185</td>
<td>65336</td>
<td>Good</td>
<td>EMER</td>
<td></td>
<td></td>
<td></td>
<td>The ER Dpt.</td>
</tr>
<tr>
<td>1122</td>
<td>64093</td>
<td>Very Good</td>
<td>ENDO</td>
<td>DENT</td>
<td>INSUR</td>
<td></td>
<td>endocrinology, dental health for Medicare patients</td>
</tr>
<tr>
<td>1161</td>
<td>64093</td>
<td>Good</td>
<td>ENDO</td>
<td>IFD</td>
<td>PLAS</td>
<td></td>
<td>Need to add endocrinology, infectious disease and plastics specialties if possible.</td>
</tr>
<tr>
<td>1168</td>
<td>64093</td>
<td>Good</td>
<td>FAC</td>
<td></td>
<td></td>
<td></td>
<td>Expansion and improvements of what we already have.</td>
</tr>
<tr>
<td>1046</td>
<td>64093</td>
<td>Very Good</td>
<td>FAC</td>
<td></td>
<td></td>
<td></td>
<td>Ground keeping on some facilities needs cleaning up.</td>
</tr>
<tr>
<td>1250</td>
<td>64019</td>
<td>Very Good</td>
<td>FAC</td>
<td></td>
<td></td>
<td></td>
<td>There seems to be confusion as to which entrance to use for what services, east door or west door.</td>
</tr>
<tr>
<td>1021</td>
<td>64093</td>
<td>Very Good</td>
<td>GAS</td>
<td>DERM</td>
<td>CARD</td>
<td></td>
<td>Gastroenterologist for ERCP dermatology consultant consideration of a cardiac cath program for acute interventions</td>
</tr>
<tr>
<td>1171</td>
<td>65336</td>
<td>Very Good</td>
<td>GER</td>
<td>MH</td>
<td></td>
<td></td>
<td>Geriatric psych</td>
</tr>
<tr>
<td>1083</td>
<td>64093</td>
<td>Good</td>
<td>HOSP</td>
<td>FP</td>
<td></td>
<td></td>
<td>I am not happy seeing the hospital taking over private practices. I know some of the reasons, but I think it is showing up as a negative to me.</td>
</tr>
<tr>
<td>1281</td>
<td>64093</td>
<td>Good</td>
<td>IFD</td>
<td>ENDO</td>
<td>PLAS</td>
<td></td>
<td>Need to add infectious disease and endocrinology specialists, as well as plastic surgery, if the market will support it</td>
</tr>
<tr>
<td>1087</td>
<td>64093</td>
<td>Fair</td>
<td>INSUR</td>
<td>COST</td>
<td></td>
<td></td>
<td>The need for help with regards to someone not having health insurance and being turn away for services. Not just at the medical center but other offices also</td>
</tr>
<tr>
<td>1095</td>
<td>64733</td>
<td>Very Good</td>
<td>MH</td>
<td>COMM</td>
<td></td>
<td></td>
<td>Comprehensive planning and treatment of psychiatric patients through the continuum. Especially geared toward crisis intervention, collaboration of services, appropriate triage, and greater involvement from law enforcement and the local judiciary.</td>
</tr>
<tr>
<td>1015</td>
<td>64093</td>
<td>Fair</td>
<td>MH</td>
<td>INSUR</td>
<td>COST</td>
<td></td>
<td>Mental Health issues to persons who cannot afford to pay for services</td>
</tr>
<tr>
<td>1024</td>
<td>64093</td>
<td>Good</td>
<td>MH</td>
<td>NEP</td>
<td></td>
<td></td>
<td>Mental health needs Nephrology</td>
</tr>
<tr>
<td>ID</td>
<td>Zip</td>
<td>Overall HC Rating</td>
<td>c1</td>
<td>c2</td>
<td>c3</td>
<td>Are there healthcare services in the Western Missouri Medical Center Primary Service Area that you feel need to be improved and/or changed?</td>
<td></td>
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<tr>
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<tr>
<td>1282</td>
<td>64093</td>
<td>Good MH NEU</td>
<td></td>
<td></td>
<td></td>
<td>Mental Health services availability. Neurology availability.</td>
<td></td>
</tr>
<tr>
<td>1189</td>
<td>64076</td>
<td>Good MH STI WELL</td>
<td></td>
<td></td>
<td></td>
<td>Mental Health needs to be expanded to something besides just Pathways. Now that Planned Parenthood is gone, there is a gap with STD testing and contraceptives. There is nowhere for women that are uninsured to get women's health addressed. Thank goodness there is Katy Trail Community Health.</td>
<td></td>
</tr>
<tr>
<td>1097</td>
<td>64093</td>
<td>Very Good MH</td>
<td></td>
<td></td>
<td></td>
<td>Mental health resources</td>
<td></td>
</tr>
<tr>
<td>1006</td>
<td>64093</td>
<td>Good MH</td>
<td></td>
<td></td>
<td></td>
<td>psychiatry</td>
<td></td>
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<tr>
<td>1052</td>
<td>64093</td>
<td>Fair MH</td>
<td></td>
<td></td>
<td></td>
<td>There are no services that are easily assessable for psych services or ABA therapy</td>
<td></td>
</tr>
<tr>
<td>1030</td>
<td>64093</td>
<td>Very Good NURSE AWARE COMM</td>
<td></td>
<td></td>
<td></td>
<td>Improved working area and attentive focus to patient acuity status associated with Nurse and Tech assignments in order to allow maximum patient centered care increasing trust and decreasing errors and burnout.</td>
<td></td>
</tr>
<tr>
<td>1279</td>
<td>64093</td>
<td>Good OBG DERM RAD</td>
<td></td>
<td></td>
<td></td>
<td>Advanced OB/Delivery, such as higher risk pregnancies, dermatology, and radiation.</td>
<td></td>
</tr>
<tr>
<td>1034</td>
<td>64093</td>
<td>Fair OBG INSUR COST</td>
<td></td>
<td></td>
<td></td>
<td>Women's reproductive health especially for lower income women</td>
<td></td>
</tr>
<tr>
<td>1239</td>
<td>64093</td>
<td>Fair OBG SPEC CLIN</td>
<td></td>
<td></td>
<td></td>
<td>Women's health care. There aren't any specialist and only one clinic.</td>
<td></td>
</tr>
<tr>
<td>1264</td>
<td>64040</td>
<td>Very Good OPT INSUR</td>
<td></td>
<td></td>
<td></td>
<td>Vision care that my health insurance covers</td>
<td></td>
</tr>
<tr>
<td>1187</td>
<td>64093</td>
<td>Poor PAIN CLIN DERM</td>
<td></td>
<td></td>
<td></td>
<td>Pain clinic is inadequate - it is not comprehensive pain management and leaves our community having to travel long distances and sometimes to other states, for pain management. There still is no dermatology, no urology, no nephrology available. Again, patients are having to travel to other towns for these services. I am uncomfortable with referring patients for surgery to WMMC as they are still being floated to other units since there is not a dedicated surgical floor. Emergency room still needs improvement. Patients are being shipped to other facilities when we should be able to treat them in our own hospital. Pt's are not receiving comprehensive workups similar to what they would get at HCA or St. Luke's when going to the ED either. This is frustrating and is leading me to bypass WMMC altogether and recommend patients go straight to Kansas City for evaluation.</td>
<td></td>
</tr>
<tr>
<td>1140</td>
<td>65336</td>
<td>Good PEDS EMER KC</td>
<td></td>
<td></td>
<td></td>
<td>Pediatric emergency care is reported as lacking, referrals to Kansas City seem to be the default position. While understandable for a smaller community, this is a significant service limitation.</td>
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<tr>
<td>1143</td>
<td>64093</td>
<td>Good PLAS SURG</td>
<td></td>
<td></td>
<td></td>
<td>cosmetic services and surgery</td>
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<tr>
<td>1099</td>
<td>64093</td>
<td>Fair PRIM PEDS SPEC</td>
<td></td>
<td></td>
<td></td>
<td>More primary care and pediatrics, increased specialty services, improved critical care</td>
<td></td>
</tr>
<tr>
<td>1236</td>
<td>66208</td>
<td>Very Good PRIM</td>
<td></td>
<td></td>
<td></td>
<td>No think it does well in primary care</td>
<td></td>
</tr>
<tr>
<td>1043</td>
<td>64093</td>
<td>Poor PT PULM</td>
<td></td>
<td></td>
<td></td>
<td>Physical therapy dept. and Pulmonologist</td>
<td></td>
</tr>
<tr>
<td>1221</td>
<td>64093</td>
<td>Fair QUAL EMER WAIT</td>
<td></td>
<td></td>
<td></td>
<td>The quality of service in the ER. People are often sent away still having problems or they leave because the wait is to long and they drive to the city.</td>
<td></td>
</tr>
<tr>
<td>1028</td>
<td>64093</td>
<td>Good RAD</td>
<td></td>
<td></td>
<td></td>
<td>Improve accuracy of radiology reports</td>
<td></td>
</tr>
<tr>
<td>ID</td>
<td>Zip</td>
<td>Overall HC Rating</td>
<td>c1</td>
<td>c2</td>
<td>c3</td>
<td>Are there healthcare services in the Western Missouri Medical Center Primary Service Area that you feel need to be improved and/or changed?</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>1256</td>
<td>64093</td>
<td>Fair REP</td>
<td></td>
<td></td>
<td></td>
<td>Still known as a band aid hospital.</td>
<td></td>
</tr>
<tr>
<td>1176</td>
<td>64093</td>
<td>Very Good SPEC CRIT COMM</td>
<td></td>
<td></td>
<td></td>
<td>WMMC has done a good job of adding specialists, but there is still need for additional doctors. WMMC has also done a good job of offering seminars to address critical needs, but communication for such sessions needs to be improved. Heightened awareness of WMMC needs to be addressed in the western part of the county.</td>
<td></td>
</tr>
<tr>
<td>1058</td>
<td>64093</td>
<td>Good SPEC ENDO WAIT</td>
<td></td>
<td></td>
<td></td>
<td>Specialists are needed–Endocrinology, specifically. Also, shorter wait times for general practitioners and easier access/shorter wait times.</td>
<td></td>
</tr>
<tr>
<td>1002</td>
<td>64081</td>
<td>Good SPEC NEU URL</td>
<td></td>
<td></td>
<td></td>
<td>Need certain specialties especially neurology and urology. Additional orthopedists.</td>
<td></td>
</tr>
<tr>
<td>1053</td>
<td>64093</td>
<td>Good SPEC</td>
<td></td>
<td></td>
<td></td>
<td>Specialty care</td>
<td></td>
</tr>
<tr>
<td>1144</td>
<td>64085</td>
<td>Very Good SPEC</td>
<td></td>
<td></td>
<td></td>
<td>Specialty services</td>
<td></td>
</tr>
<tr>
<td>1044</td>
<td>64093</td>
<td>Good STAFF BEN</td>
<td></td>
<td></td>
<td></td>
<td>employees should not have to give benefits to improve health care.</td>
<td></td>
</tr>
<tr>
<td>1191</td>
<td>64076</td>
<td>Good STI INSUR WELL</td>
<td></td>
<td></td>
<td></td>
<td>Now that Planned Parenthood is closed, we need someone to fill that gap for STD testing and Contraceptives. We also have no one to refer uninsured women to for women's health. Thank goodness Katy Trail Community Health takes them.</td>
<td></td>
</tr>
<tr>
<td>1172</td>
<td>64093</td>
<td>Fair SURG EMER ORTH</td>
<td></td>
<td></td>
<td></td>
<td>Acute surgical (unscheduled, emergency) services for orthopedics and general surgery. Psychiatric services!</td>
<td></td>
</tr>
<tr>
<td>1017</td>
<td>64093</td>
<td>Very Good TELE OBG KC</td>
<td></td>
<td></td>
<td></td>
<td>Telehealth for Maternal Fetal Medicine would really help a lot of our patients. Many of our patients cannot afford to drive to Kansas City or Columbia for some of their maternal fetal medicine needs.</td>
<td></td>
</tr>
<tr>
<td>1072</td>
<td>64093</td>
<td>Fair TRANS COMM</td>
<td></td>
<td></td>
<td></td>
<td>Translation Services are different now that there is a telephone service in place. Has there been any assessment done on this service by patients, family/support members, and community members?</td>
<td></td>
</tr>
<tr>
<td>1225</td>
<td>64093</td>
<td>Good UCM RAD</td>
<td></td>
<td></td>
<td></td>
<td>Is it possible to assist UCM by providing mobile X-ray units at UCM for TB screenings (mainly for international students)?</td>
<td></td>
</tr>
<tr>
<td>1270</td>
<td>64093</td>
<td>Poor URG BILL WAIT</td>
<td></td>
<td></td>
<td></td>
<td>Implementation of a 24 hour urgent care Timely billing processes (ours have consistently (50%+) been 45 + days past visit</td>
<td></td>
</tr>
<tr>
<td>1213</td>
<td>64093</td>
<td>Good URG EMER AWARE</td>
<td></td>
<td></td>
<td></td>
<td>I need to know about getting medical care at odd hours of the day and night without using the emergency room. Maybe this service is available but I am not aware of the specificis.</td>
<td></td>
</tr>
<tr>
<td>1064</td>
<td>64093</td>
<td>Very Good URG EMER AWARE</td>
<td></td>
<td></td>
<td></td>
<td>Where do I go with a concern at 9:00 on a Friday night? Not an emergency but a true concern. This is rhetorical...the community needs to know this answer.</td>
<td></td>
</tr>
<tr>
<td>1210</td>
<td>64037</td>
<td>Good URG</td>
<td></td>
<td></td>
<td></td>
<td>Available Minute Clinics would be nice</td>
<td></td>
</tr>
<tr>
<td>1146</td>
<td>65301</td>
<td>Very Good URL ACC WAIT</td>
<td></td>
<td></td>
<td></td>
<td>urology more access I recently had an appoint made it is for 10 weeks out...</td>
<td></td>
</tr>
<tr>
<td>1154</td>
<td>65301</td>
<td>Good URL MH NEU</td>
<td></td>
<td></td>
<td></td>
<td>urology, psychology and neurology</td>
<td></td>
</tr>
<tr>
<td>1159</td>
<td>64093</td>
<td>Very Good URL</td>
<td></td>
<td></td>
<td></td>
<td>We need consistent urology coverage</td>
<td></td>
</tr>
<tr>
<td>1118</td>
<td>64093</td>
<td>Good WAIT EMER</td>
<td></td>
<td></td>
<td></td>
<td>long waiting time in er</td>
<td></td>
</tr>
<tr>
<td>1231</td>
<td>64093</td>
<td>Good WAIT EMER</td>
<td></td>
<td></td>
<td></td>
<td>The wait time for ER care.</td>
<td></td>
</tr>
<tr>
<td>1029</td>
<td>64021</td>
<td>Very Good WAIT MH</td>
<td></td>
<td></td>
<td></td>
<td>Timely, pt friendly mental health</td>
<td></td>
</tr>
</tbody>
</table>
Throughout the past two years, did you or someone you know receive healthcare services outside of the Western Missouri Medical Center Primary Service Area? If yes, please specify the healthcare services received.

<table>
<thead>
<tr>
<th>ID</th>
<th>Zip</th>
<th>Overall HC Rating</th>
<th>c1</th>
<th>c2</th>
<th>c3</th>
<th>Comments</th>
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<tr>
<td>1183</td>
<td>64093</td>
<td>Very Good</td>
<td>AAA</td>
<td>CNTRP</td>
<td></td>
<td>AAA repair surgery @ Centerpoint</td>
</tr>
<tr>
<td>1006</td>
<td>64093</td>
<td>Good</td>
<td>AAA</td>
<td>SURG</td>
<td></td>
<td>AAA repair surgery</td>
</tr>
<tr>
<td>1256</td>
<td>64093</td>
<td>Fair</td>
<td>ARTH</td>
<td>OPT</td>
<td></td>
<td>Arthritis and eye</td>
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<tr>
<td>1204</td>
<td>64093</td>
<td>Fair</td>
<td>CANC</td>
<td>DERM</td>
<td></td>
<td>Cancer Care and Dermatological care</td>
</tr>
<tr>
<td>1247</td>
<td>65336</td>
<td>Fair</td>
<td>CANC</td>
<td>ORTH</td>
<td></td>
<td>Cancer treatment, orthopedic</td>
</tr>
<tr>
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<td>64093</td>
<td>Very Good</td>
<td>CANC</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>1168</td>
<td>64093</td>
<td>Good</td>
<td>CANC</td>
<td></td>
<td></td>
<td>Cancer</td>
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<td>64093</td>
<td>Good</td>
<td>CANC</td>
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<td>cancer care</td>
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<td>CANC</td>
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<td>Cancer Treatment</td>
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<tr>
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<td>Good</td>
<td>CANC</td>
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<td></td>
<td>cancer treatment</td>
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<tr>
<td>1068</td>
<td>65301</td>
<td>Good</td>
<td>CANC</td>
<td></td>
<td></td>
<td>Cancer treatment,</td>
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<tr>
<td>1240</td>
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<td>Very Good</td>
<td>CARD</td>
<td>DERM</td>
<td></td>
<td>cardiac care, dermatology</td>
</tr>
<tr>
<td>1024</td>
<td>64093</td>
<td>Good</td>
<td>CARD</td>
<td>PULM</td>
<td>OBG</td>
<td>Cardiac, Pulmonary and GYN (high risk patient)</td>
</tr>
<tr>
<td>1189</td>
<td>64076</td>
<td>Good</td>
<td>CARD</td>
<td>RAD</td>
<td>OBG</td>
<td>Cardiology, Radiology, Obstetrics, dental, Mental Health, Oncology, Pediatrics, Emergency Room Services, Family Practice, Women's Healthcare, etc...</td>
</tr>
<tr>
<td>1191</td>
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<td>Good</td>
<td>CARD</td>
<td>RAD</td>
<td>ONC</td>
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CHNA 2017-2019 Community Feedback

Western Missouri Medical Center (Primary Service Area)  N=283

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## CHNA 2017-2019 Community Feedback

### Western Missouri Medical Center (Primary Service Area) N=283

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<th>Overall HC Rating</th>
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<th>c3</th>
<th>Throughout the past two years, did you or someone you know receive healthcare services outside of the Western Missouri Medical Center Primary Service Area? If yes, please specify the healthcare services received.</th>
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Throughout the past two years, did you or someone you know receive healthcare services outside of the Western Missouri Medical Center Primary Service Area? If yes, please specify the healthcare services received.

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<td>Fair SPEC COL</td>
<td>Wife went to specialist in KC for ulcerative colitis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1213</td>
<td>64093</td>
<td>Good SPEC KC</td>
<td>A specialist in KC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1041</td>
<td>64093</td>
<td>Good SPEC NEUR</td>
<td>Specialists in neurology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1079</td>
<td>65336</td>
<td>Good SPEC</td>
<td>all specialists.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1130</td>
<td>64093</td>
<td>Good STL CARD</td>
<td>Send to St. Luke's on the Plaza for blood clot.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1158</td>
<td>64093</td>
<td>Good STL STRKE</td>
<td>hospitalized at St Luke's on the Plaza due to seizure/stroke</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1205</td>
<td>64093</td>
<td>Fair STL</td>
<td>St. Luke's health system</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1160</td>
<td>64093</td>
<td>Very Good STRKE</td>
<td>Stroke care</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1165</td>
<td>64110</td>
<td>Good STRKE</td>
<td>stroke services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1220</td>
<td>64093</td>
<td>Good SURG CARD MAMM</td>
<td>surgeries, vein care, mammograms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1188</td>
<td>64040</td>
<td>Good SURG CARD</td>
<td>major surgery  heart problems</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>1072</td>
<td>64093</td>
<td>Fair SURG ENT DENT</td>
<td>Surgery, ENT, Dentist, colonoscopy, Ortho,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1008</td>
<td>64093</td>
<td>Very Good SURG ENT</td>
<td>Surgery for deviated septum</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1022</td>
<td>64093</td>
<td>Good SURG</td>
<td>Surgery</td>
<td></td>
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</tr>
</tbody>
</table>
Throughout the past two years, did you or someone you know receive healthcare services outside of the Western Missouri Medical Center Primary Service Area? If yes, please specify the healthcare services received.

<table>
<thead>
<tr>
<th>ID</th>
<th>Zip</th>
<th>Overall HC</th>
<th>Rating</th>
<th>c1</th>
<th>c2</th>
<th>c3</th>
</tr>
</thead>
<tbody>
<tr>
<td>1118</td>
<td>64093</td>
<td>Good</td>
<td>SURG</td>
<td>surgery</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1134</td>
<td>64093</td>
<td>Good</td>
<td>SURG</td>
<td>Surgery</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1027</td>
<td>64093</td>
<td>Good</td>
<td>SURG</td>
<td>Surgery</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1209</td>
<td>64093</td>
<td>Fair</td>
<td>SURG</td>
<td>surgery and MORE!</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1047</td>
<td>64093</td>
<td>Good</td>
<td>SURG</td>
<td>Surgical</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1274</td>
<td>64093</td>
<td>Fair</td>
<td>TONS</td>
<td>Tonsillectomy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1144</td>
<td>64085</td>
<td>Very Good</td>
<td>URG</td>
<td>Express care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1039</td>
<td>64093</td>
<td>Good</td>
<td>URG</td>
<td>Urgent Care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1040</td>
<td>64093</td>
<td>Good</td>
<td>URG</td>
<td>Urgent Care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1012</td>
<td>65336</td>
<td>Good</td>
<td>URL</td>
<td>Urological services at KCUC in Overland Park, KS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1127</td>
<td>64093</td>
<td>Very Good</td>
<td>URL</td>
<td>Urology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1275</td>
<td>64093</td>
<td>Good</td>
<td>URL</td>
<td>Urology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1154</td>
<td>65301</td>
<td>Good</td>
<td>URL</td>
<td>urology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1043</td>
<td>64093</td>
<td>Poor</td>
<td>VA</td>
<td>VA services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1003</td>
<td>64093</td>
<td>Good</td>
<td>WAFB</td>
<td>Whiteman AFB, St Luke's East</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Western Missouri Medical Center, in collaboration with Johnson County Community Health Services, is updating its Community Health Needs Assessment 2014-2016. Your feedback from this survey will help us identify the current health issues in our community and while your participation is voluntary, we would greatly appreciate your input. All answers will be kept confidential.

All Community Health Needs Assessment 2017-2019 feedback is due by Friday, June 3rd. Thank you for your participation.

1. Three years ago, Western Missouri Medical Center completed a Community Health Needs Assessment (2014-2016). This assessment identified a number of health needs for our community. Today, we are updating this assessment and would like to know how you rate the "Overall Quality" of healthcare delivery in our community?

   Very Good  Good  Fair  Poor  Very Poor

   Health Rating:  

2. Are there healthcare services in the Western Missouri Medical Center Primary Service Area that you feel need to be improved and/or changed? (Please be specific.)
3. From our last CHNA (2014-2016), a number of health needs were identified as priorities. Are any of these CHNA 2014-2016 needs still an “Ongoing Problem” in the Western Missouri Medical Center Primary Service Area?

<table>
<thead>
<tr>
<th>Health Need</th>
<th>Not a Problem Anymore</th>
<th>Somewhat of a Problem</th>
<th>Major Problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity (Nutrition / Fitness)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cardiovascular Disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of Health Insurance Coverage</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inadequate Social Support</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Availability of Mental Health Providers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to Primary Care Physicians</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to Dental Health Professions by Low Income Residents</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Medical Needs of Senior Citizens</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Which CHNA 2014-2016 health needs are most pressing today for improvement? (Please select top three needs.)

- Obesity (Nutrition / Fitness)
- Availability of Mental Health Providers
- Cardiovascular Disease
- Access to Primary Care Physicians
- Lack of Health Insurance Coverage
- Access to Dental Health Professions by Low Income Residents
- Inadequate Social Support
- Non-Medical Needs of Senior Citizens
5. How would Western Missouri Medical Center Primary Service Area residents rate each of the following services? (Please select one box per row.)

<table>
<thead>
<tr>
<th>Service</th>
<th>Very Good</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
<th>Very Poor</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulance Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Care</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>Chiropractors</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Dentists</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency Room</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eye Doctor / Optometrist</td>
<td></td>
<td></td>
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<tr>
<td>Family Planning Services</td>
<td></td>
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<tr>
<td>Home Health</td>
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<tr>
<td>Hospice</td>
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</tr>
</tbody>
</table>
6. How would Western Missouri Medical Center Primary Service Area residents rate each of the following? (Please select one per row.)

<table>
<thead>
<tr>
<th>Service</th>
<th>Very Good</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
<th>Very Poor</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Health Services</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nursing Home</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outpatient Services</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>Pharmacy</td>
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<tr>
<td>Primary Care</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Public Health Department</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>School Nurse</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Specialists</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

7. Throughout the past two years, did you or someone you know receive healthcare services outside of the Western Missouri Medical Center Primary Service Area?

- [ ] Yes
- [ ] No
- [x] Do Not know

If yes, please specify the healthcare services received.

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Community Health Needs Assessment 2017-2019 - Western Missouri Medical Center (Primary Service Area)
8. Are there any other health needs from the list below that need to be discussed at our upcoming CHNA 2017-2019 Town Hall meeting? (Please select all that need to be on our agenda.)

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

9. What is your home zip code?

[Blank]

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

- Board Member
- Business / Merchant
- Case Manager / Discharge Planner
- Civic Club / Chamber
- Charitable Foundation
- Clergy / Congregational Leader
- College / University
- Consumer Advocate
- Consumers of Healthcare
- Dentist
- Economic Development
- Education Official / Teacher
- Elected Official - City / County
- EMS / Emergency
- Farmer / Rancher
- Health Department
- Hospital
- Housing / Builder
- Insurance
- Labor
- Law Enforcement
- Low Income / Free Clinics
- Mental Health
- Nursing
- Other Health Professional
- Parent / Caregiver
- Pharmacy
- Physician (MD / DO)
- Physician Clinic
- Media (Paper, TV, Radio)
- Senior Care / Nursing Home
- Social Worker
- Veteran
- Welfare / Social Service
- Other (please specify)
Vince Vandehaar, MBA
VVV Consultants LLC
Adjunct Professor / Professional Healthcare Marketing and Strategic Planning Consulting Services

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