Community Health Needs Assessment
June 30, 2016

Salem Memorial District Hospital

35629 Highway 72 North
P.O. Box 774
Salem, Missouri 65560
573-729-6626
www.smdh.net

Kasey Lucas
Administrator
klucas@smdh.net
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I. Executive Summary

The 2015-2016 Community Health Needs assessment is a continuation of the process begun in 2013 to identify primary health issues, current health status and needs, and to provide critical information to those in a position to make a positive impact on the health and well-being of the hospital district’s residents.

To perform the 2015-2016 CHNA, in accordance with the Affordable Care Act and as directed by the SMDH governing Board of Directors, a committee was formed consisting of a group of individuals who represent various community organizations who are deeply committed to this project.

Planning for the survey began in August, 2015 and the CHNA committee met monthly to develop the survey and form a process for collecting the data. The first meeting was September 15, 2015, and was well attended by those individuals selected to participate. We continue to have good attendance at the meetings as we proceed to develop action plans to address the specific needs identified.

A survey was developed consisting of 34 questions which included questions about demographics, socioeconomic information, and perceptions of the health of the communities served by Salem Memorial District Hospital (SMDH).

The survey and collection boxes were distributed to 24 area locations on November 15th, 2015 and those collection points remained until March 8th. The survey was also made available on line through Facebook, and the SMDH website. A booth was set up at the SMDH Health Fair on February 10th and 11th, and again at the Healthy Dent County Million Hearts Kickoff event, to collect responses. We were able to increase the number of surveys completed from 475 in the 2013 Survey to 832 for the 2015-2016 survey.

Community awareness of the survey and our goals was promoted through local newspapers and by local radio interviews.

The information obtained by the surveys was presented to the CHNA committee on May 25th, 2016 and the top 3 needs were selected for development of action plans. Other top categories were presented to the group for awareness and suggestions for interventions to address those needs were discussed at that meeting.

Dissemination of the top 3 categories will be accomplished through newspaper articles in the counties served by the hospital district as well as local radio station interviews.

SMDH is deeply committed to improving the health of our community and together with our partners who are named in the listing of CHNA committee members, feel we can made a difference in the lives of our hospital district’s residents.
The action plans identified by the CHNA committee to address the needs of the hospital district are attached to and made a part of this document. The strategy addressed in the action plans were adopted by the SMDH Board of Directors at its regular meeting on August 16, 2016.

Work towards meeting the goals identified will continue for the next 36 months and beyond until a different set of needs are identified. It is the hope of SMDH and its Board of Directors that meaningful data is obtained and used to direct the hospital to provide services and programs that truly benefit the needs of our communities.
II. Community Health Needs Assessment: Community Defined
   a. Description of the community served by the hospital.
      i. Geography

      1. Counties:
         *All of Dent County and parts of Shannon, Iron and Crawford Counties.*
         *(Appendix A)*

      2. Zip Codes:
         65560, 65466, 65566, and 65449

      3. Square miles: *1,233 square miles*

   ii. Population

      1. Total: *18,241*

      2. Population density

         *Dent County: 20/sq mi; Shannon County: 8/sq mi; Crawford County: 31/sq mi; Iron County: 8/sq mi.*

      3. Demographics *(Appendix B)*

![2010 Census Chart](chart.png)
**Population Age Group Percent %**

- <18: 25.7%
- 18-24: 7.6%
- 25-44: 26.0%
- 45-64: 24.3%
- 65 & Over: 16.4%

**Race Percentage %**

- White: 97%
Family Type Percentages

- Married: 58.3%
- Someone <18 yrs residing: 32.0%
- Female - No husband: 8.9%
- Non-families: 28.8%
- Individual: 25.2%
- 65 or > Living Alone: 12.1%

Median Income

- Household: $31,664
- Family: $38,364
- Males: $26,279
- Females: $17,219
- Per Capita: $16,194
iii. Unique Community Characteristics

1. Colleges:

*Dent County: Southwest Baptist University Annex in Salem - A satellite campus of Southwest Baptist University in Bolivar, MO.*

iv. Other health services available in same community area

1. Federal designation for medically underserved

*Dent, Shannon, Iron and Crawford counties are all Health Professional Shortage Area (HPSA) designated. (Appendix D)*

2. Community Health Center

*Each county in the service area has a public health department.*

3. Other hospitals, specialty providers

- *Nearest hospitals are in Phelps and Texas Counties.*
- *Office space is provided on the SMDH campus for specialty physicians who travel here to see patients (cardiology, dermatology, podiatry, surgery, nephrology, mammography, ENT, and a VA clinic)*
- *Telehealth is also being utilized for cardiology and Emergency Dept. transfer consultations.*
III. Community Health Needs Assessment: Process

a. Description of the process and methods used to conduct the assessment including:

i. Identification of personnel involved in planning by title, organization (Appendix C)

ii. Description of overall planned approach for developing and conducting the assessment:

Project coordinator assigned by hospital administrator. Coordinator contacted multiple community members regarding serving on project committee, with attention to including representatives from multiple types of organization. Initial committee meeting focused on presenting the CHNA requirements, goals and implementation requirements. A detailed community survey was developed and distributed using various media, with results tabulated and top identified needs noted. Goals and interventions were established and will be widely disseminated to the service area.

iii. Description of the process used to collect secondary data.

Research of various media and data available through government and other websites.

iv. Description of the process used to develop and collect primary data.

Community survey was developed with intent to obtain feedback from all socio-economic groups, to determine perceived health care issues which are the most prevalent in the hospital community. Data was also obtained from the MICA system, which helps to identify health data and emergency room visits for certain conditions.

b. Data and information sources for secondary data.

See Resources and End Notes.

c. Data and information sources for primary data collection.

i. Methodology: 1) Advertising in local weekly newspaper, daily news bulletin, local radio station, and group emails. 2) Paper survey distribution and website link to survey through Survey Monkey. 3) Facebook link to Survey Monkey

ii. Rationale for methodology selection:

Thought to reach all sectors of the population.

iii. Setting(s) of primary data collection:

Churches, hospital chaplains group, pharmacies, fitness centers, hospital, doctors’
offices, public library, banks, employers, senior center, high school and college. Collections were also conducted at the SMDH Health Fair, and at the Healthy Dent County Million Hearts Kickoff event.

iv. List of specific target populations

General public, senior citizens, low income.

v. Response rate by setting and population.

Approximately 3000 paper surveys distributed / 650 completed / 22% return rate. The survey was also placed on the hospital website and distributed through group emails. 182 on-line surveys were completed but unable to determine volume of people reached or the return rate. Total of both paper and on-line surveys completed was 832.

vi. Description and list of successful approaches

Both paper and website surveys were very successful in volume but possibly not in range of socio-economic groups.

vii. Description and list of barriers, challenges and unsuccessful approaches.

The survey results are a perception of the community as to its health needs. It is difficult to impress upon the community the necessity of completing the paper surveys. A return rate of 22% for 2015-2016 survey is better than the 12% return rate for the 2013 survey.

viii. Note: Section IV will provide more detail on broad input from the community.

d. Analytical methods used to identify the community health needs

i. Description

Compilation of survey results and research of outside resources.

e. Gaps in information that limited the ability to assess the community served

i. Description and list of specific gaps

As stated in Section III., c., vii above

f. Community organizations that collaborated or contributed to the CHNA

i. List by organization, name, title and credentials.

(Appendix C)

g. Identification of third-party agents to assist with the CHNA, including qualifications; description of the outside party’s specific role and products developed.

None were used.
RESPONDANTS’ DEMOGRAPHIC INFORMATION

Gender

- Male: 32%
- Female: 68%

Age

- Under 18: 1%
- 18-25 Yrs: 8%
- 26-39 Yrs: 20%
- 40-54 Yrs: 28%
- 55-64 Yrs: 25%
- 65-80 Yrs: 16%
- over 80: 2%
IV. Community Health Needs Assessment: Input from Community

a. Description of how the hospital sought input from broad interests in the community

   i. Target populations

      Lower socio economic groups and elderly, as well as the general population.

   1. What methods

      Surveys

   2. When

      Surveys were distributed and made available on website beginning October 2015 with collections solicited through February, 2016.

   3. Locations

      Same as III.,c.,iii.

ii. Representative organizations (may repeat Section II.f) (Appendix C)

iii. Individual(s) included with expertise in public health (may repeat Section II.f)

   1. Name

      Janey Jadwin, RN

   2. Title

      Administrator

   3. Affiliation(s)

      Dent County Health Center

   4. Describe leadership role, if applicable

      Served on CHNA committee with valuable input.

V. Community Health Needs Assessment: Findings (Note: this section will complement the implementation plan (Appendix E))

a. Identified health issues through assessment process

   Top 3 Needs: 1) Alcohol/Drug Abuse; 2) Obesity; and 3) Cancer (Appendix F)

b. Process to prioritize health issues

   i. Description of process

      Review of compiled survey results and findings from other research.

c. List of priority health issues identified and description of why these issues were identified

   Top 10 Needs: 1) Alcohol/Drug Abuse; 2) Obesity; 3) Cancer; 4) Child Abuse/Neglect;
5) Heart Disease and Stroke; 6) Diabetes; 7) Mental Health Problems; 8) Dental Problems; 9) Teen Pregnancy; and 10) Aging Problems.

Action Plans were developed for addressing Heart Disease and Stroke; Alcohol and Drug Abuse; Obesity and Diabetes.

TOP TEN NEEDS IDENTIFIED BY THE 2015-2016 SMDH COMMUNITY HEALTH NEEDS ASSESSMENT

- Description of rationale used not to address health issues:
  - Cancer can be linked to any of the above identified health needs. The category of Mental Health Needs is such a very broad category we felt it should be narrowed down more to realistically address. Also, the category of Alcohol and Drug abuse is linked to mental health issues as well as Child Abuse and Neglect. Teen Pregnancy is already a focus of community resources; and aging problems are closely related to Heart Disease and Stroke. The action plans developed for the three categories mentioned were areas of need that we felt we could realistically set and reach goals for improvement.

VI. Resource Inventory

- Description of existing health care facilities within the same community, including specialty services.

  Salem Memorial District Hospital
  SMDH Long Term Care Center
  Salem Care Center
  Salem Residential Center
  Seville Nursing Home
b. Other resources available to meet the community health needs identified

- Dent County Health Department
- Dent County Social Services
- Pathways (behavioral and mental health)
- Masters Peace Clinic of Hope
- Fitness Center – Community Center @ the Armory
- Pure Fitness
- Dent County Extension Center
- Mercy Medical Clinic*
- Dent Medical Clinic*
- Physicians on SMDH Campus:
  - John Demorlis, MD
  - Julius Punzalan, MD
  - Yvonne Prince, MD*
  - Sarfaraz Jasdanwala, MD

* Nurse Practitioner or Physician Assistant also available.

VII. Community Health Needs Assessment: Dissemination Plan

a. Description of report release to public

Top 10 identified needs will be published in the local weekly newspaper and also in the daily publication, “Your World Today”. These will also include the Top 3 goals and planned interventions.

b. List of websites, including URL

www.smdh.net

c. Describe the process to provide printed copies upon request.

Will mail them to the requestor, or they may pick them up at the hospital.

d. Describe the process to share information with the broad community, including the medically underserved, chronically ill and lower socioeconomic populations

Will provide printed copies of Top 10 identified needs including the Top 3 goals and planned interventions at the following locations: Dent, Shannon, Iron and Crawford County Family Services; Dent, Shannon, Iron and Crawford County Health Departments; area nursing homes/centers and also the Salem Senior Center.
VIII. Appendices
Appendix A

Salem Memorial Hospital District

Appendix - B
DEMOGRAPHICS
## Appendix - B

### Service area population Percentages

<table>
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<tr>
<th></th>
<th>&lt;18</th>
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<th>25-44</th>
<th>45-64</th>
<th>65 &amp; Over</th>
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<td>Total</td>
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<td>7.6</td>
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### Race Percentages %

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<th>White</th>
<th>Black</th>
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<th>Other</th>
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<td>Total</td>
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<td>0.18</td>
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### Family Type Percentages %

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<th>Married</th>
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<th>Individual</th>
<th>65 or &gt; Living Alone</th>
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<td>Crawford</td>
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<td>8.9</td>
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### Median Income

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<th>Females</th>
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<td>38364</td>
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### Percent % Below Poverty Line

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<tr>
<td>Shannon</td>
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<td>26.9</td>
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<td>Crawford</td>
<td>12.7</td>
<td>16.3</td>
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<td>Iron</td>
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<tr>
<td>Average%</td>
<td>15.05</td>
<td>19.85</td>
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## Appendix - C

### Community Health Needs Assessment – Committee

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<thead>
<tr>
<th>Name</th>
<th>Title</th>
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<tbody>
<tr>
<td>Kasey Lucas</td>
<td>Administrator</td>
<td>Salem Memorial District Hospital</td>
</tr>
<tr>
<td>Lisa Dulany</td>
<td>Social Services Director</td>
<td>Salem Memorial District Hospital</td>
</tr>
<tr>
<td>Debra Piatt</td>
<td>Education/Infection Control</td>
<td>Salem Memorial District Hospital</td>
</tr>
<tr>
<td>Mary Lou Brooks</td>
<td>Chairman, CHNA Committee, CNO</td>
<td>Salem Memorial District Hospital</td>
</tr>
<tr>
<td>Tabitha Stanfast</td>
<td>ED Director</td>
<td>Salem Memorial District Hospital</td>
</tr>
<tr>
<td>Cindy Fry, RN</td>
<td>Acute Care Director</td>
<td>Salem Memorial District Hospital</td>
</tr>
<tr>
<td>Janey Jadwin, RN</td>
<td>Administrator</td>
<td>Dent County Health Department</td>
</tr>
<tr>
<td>Ray Walden</td>
<td>Economic Development Coordinator</td>
<td>City of Salem</td>
</tr>
<tr>
<td>David Kettner</td>
<td>Pastor</td>
<td>Salem Lutheran Church</td>
</tr>
<tr>
<td>Yvonne Prince</td>
<td>Family Practice</td>
<td>SMDH Family Medicine</td>
</tr>
<tr>
<td>Chris Welch</td>
<td>President</td>
<td>Southwest Baptist University</td>
</tr>
<tr>
<td>Sherry Lea</td>
<td>Director</td>
<td>Community Center @ The Armory</td>
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<tr>
<td>Karen Brown</td>
<td>Administrative Secretary</td>
<td>Salem Memorial District Hospital</td>
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<tr>
<td>Doug Walter</td>
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<td>Jason Edwards</td>
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<td>Kim Kimnetzer</td>
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<td>Masters Peace Clinic of Hope</td>
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<td>George LaJoie</td>
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<td>Air Evac Helicopter</td>
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<td>Linda Cheatham</td>
<td>R-80 School System</td>
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<td>Marty Anderson</td>
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<td>Dan Adams</td>
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<td>Southeast Missouri Behavioral Health</td>
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<tr>
<td>Liz Gruendel</td>
<td>Community Member</td>
<td>Committee for a Healthy Dent County</td>
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## Appendix D

Find Shortage Areas: HPSA by State & County

<table>
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<th>Shortage Designation</th>
<th>Discipline: Primary Medical Care, Dental, Mental Health</th>
<th>Metro: All</th>
<th>Status: Designated</th>
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<td>State: Missouri</td>
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**Results:** 20 records found.

Satellite sites of Comprehensive Health Centers automatically assume the HPSA score of the affiliated grantee. They are not listed separately.

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Data as of: 7/12/2013

## Appendix E

Appendix E - Survey Response Summary.pdf
Appendix F

Appendix F - Top 3 Needs Implementation.docx
IX. References

“Assessing the Health of our Communities – Central Region”, Crawford, pg 25-26; Dent, pg. 27-28; Missouri Hospital Association, 2010.

i http://health.mo.gov/living/lpha/countyinfo/CpiDent.html

ii http://health.mo.gov/living/lpha/countyinfo/CpiShannon.html

iii http://www.crawfordcountymo.net/index_files/Page1235.htm

iv http://health.mo.gov/living/lpha/countyinfo/CpiIron.html

MICA (Missouri Information for Community Assessment-Data)