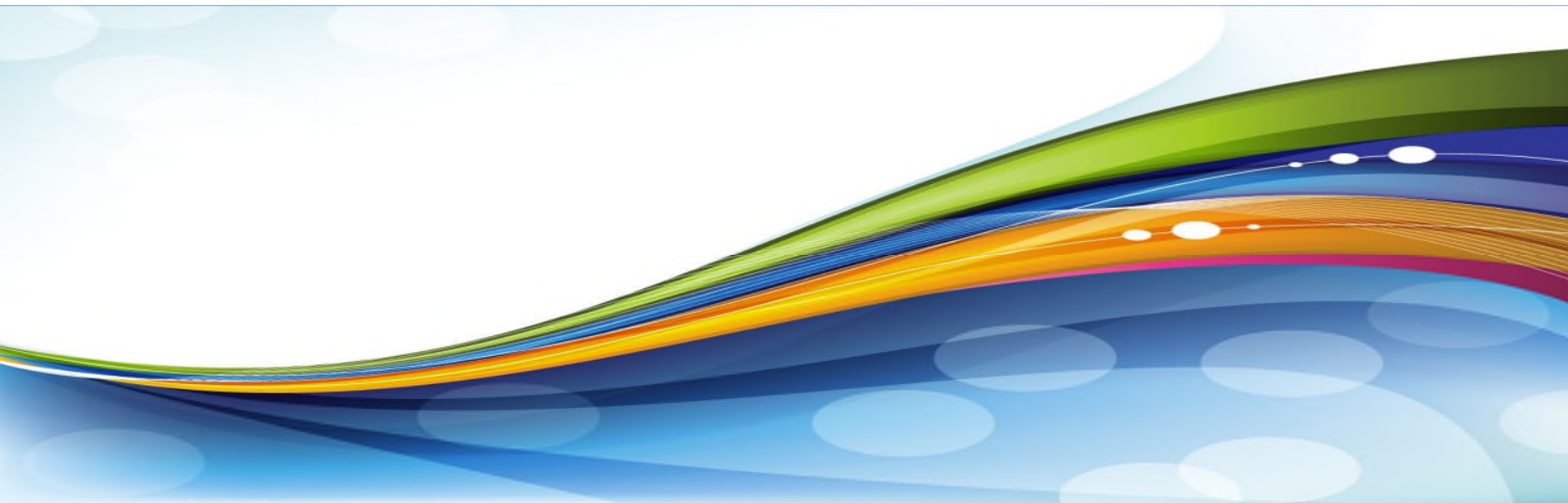




**Bates County Memorial Hospital - PSA
Bates County, Missouri
Community Health Needs Assessment Round #2**



November 2016

**VVV Consultants LLC
Olathe, KS**

Community Health Needs Assessment

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**Italic lines note IRS requirements*

I. Executive Summary

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I. Executive Summary

Bates County Memorial Hospital (Primary Service Area) - 2016 Community Health Needs Assessment (CHNA)

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

The CHNA provides benefits to local health service organizations, the hospital, the public health department, as well as the community, in the following ways: 1) Increases knowledge of community health needs and resources; 2) Creates a common understanding of the priorities of the community's health needs; 3) Enhances relationships and mutual understanding between and among stakeholders; 4) Provides a basis upon which community stakeholders can make decisions about how they can contribute to improving the health of the community; 5) Provides rationale for current and potential funders to support efforts to improve the health of the community; 6) Creates opportunities for collaboration in delivery of services to the community; and 7) Provides guidance to the hospital and local health department for how they can align their services and community benefit programs to best meet needs.

Town Hall "Community Health Strengths" cited for Bates County Memorial Hospital's Primary Service Area are as follows:

Bates County Memorial Hospital (Primary Service Area) - Community Health "Strengths"			
#	Topic	#	Topic
1	Pharmacies	11	Health Department
2	Caring hospital staff	12	State of the art equipment (particularly Radiology)
3	Senior Center	13	Engaged providers (integrated care)
4	Physical Therapy department	14	Enough Primary Care providers
5	Children's Center	15	Nursing Homes
6	Good Specialist support	16	Financially sound hospital
7	Diabetic Education	17	Good patients (appreciate care)
8	Patient Centered Medical Homes	18	Cardiac Rehab
9	Community Café	19	Food Pantry
10	Impact Program in schools through health foundation	20	Ministerial alliance

Town Hall “Community Health Changes and/or Improvements Ranking” cited for Bates County Memorial Hospital’s Primary Service Area are as follows:

Bates County Memorial Hospital - Primary Service Area				
2016 Community Health Needs - Town Hall Priorities (43 Attendees, 137 Votes)				
#	Health Needs to Change and/or Improve	Votes	%	Accum
1	Community Center (including Youth Activities)	20	14.6%	14.6%
2	Specialists (ENT, Derm, OBGYN, Ortho, Endo, CV, Chiropractor)	19	13.9%	28.5%
3	Drug Abuse	17	12.4%	40.9%
4	Billing Department	14	10.2%	51.1%
5	Obesity (Nutrition / Fitness)	11	8.0%	59.1%
6	Urgent Care	7	5.1%	64.2%
7	Cost of Care	7	5.1%	69.3%
8	Mental Health (Diagnosis / Placement)	7	5.1%	74.5%
Total Town Hall Votes		137	100.0%	
Other Items Noted: Assisted Living, Return of Health Fair, Homeless Shelter, Affordable Insurance, Providers Accepting Medicaid, Chronic Disease Management (COPD / Diabetes), Smoking, Teen Pregnancy, Sexually Transmitted Infections Education, Behavioral Health Intervention, Economic Development and Home Health.				

Key Community Health Needs Assessment Conclusions from secondary research for Bates County Memorial Hospital’s Primary Service Area are as follows:

MISSOURI HEALTH RANKINGS: According to the 2016 RWJ County Health Rankings study, Bates County Memorial Hospital’s Primary Service Area (Bates County, Missouri) had the highest State of Kansas ranking (of 115 counties) in Mortality, Health Behaviors and Physical Environment.

TAB 1. Demographic Profile
TAB 2. Economic/Business Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospitalization / Providers Profile
TAB 6. Behavioral Health Profile
TAB 7. Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

- TAB 1: The BCMH PSA has a population of 16,446 residents as of July 1, 2015, lower than the Missouri Rural Norm of 22,762. The percent change in population in the BCMH PSA from April 1, 2010 to July 1, 2015 is -3.5%, higher than the Missouri Rural Norm of -1.6%. The percent of persons under 18 years in the BCMH PSA is 24.1%, higher than the Missouri Rural Norm of 22.7%. The percent of white alone persons in the BCMH PSA is 96.4%, higher than the Missouri Rural Norm of 94.4%. The percent of persons age 5+ years speaking a language other than English at home in the BCMH PSA is 1.8%, lower than the Missouri Rural Norm of 4.0%. The percent of persons age 1 year+ living in the same house as one year ago in the BCMH PSA is 88.9%, higher than the Missouri Rural Norm of 85.4%. The number of Veterans in the BCMH PSA is 1,106, lower than the Missouri Rural Norm of 2,066. The population per square mile in the BCMH PSA is 20.4, lower than the Missouri Rural Norm of 36.4. The percent of children in single-parent households in the BCMH PSA is 26.0%, lower than the Missouri Rural Norm of 28.9%. The percent of person in poverty in the BCMH PSA is 18.4%, higher than the Missouri Rural Norm of 16.5%. The percent of seniors with low access to stores in the BCMH PSA is 0.9%, lower than the Missouri Rural Norm of 3.2%. The number of registered voters in the BCMH PSA is 11,942, lower than the Missouri Rural Norm of 15,502.
- TAB 2: The number of housing units in the BCMH PSA is 7,809, lower than the Missouri Rural Norm of 10,243. The percent of severe housing problems in the BCMH PSA is 18.0%, higher than the Missouri Rural Norm of 11.7%. The total of all firms in the BCMH PSA is 1,209, lower than the Missouri Rural Norm of 1,818. The percent of persons in the BCMH PSA who are low income with low access to stores is 1.5%, lower than the Missouri Rural Norm of 7.2%. The mean travel time to work for workers age 16 years+ is 29.3 minutes, higher than the Missouri Rural Norm of 23.5 minutes. The percent of BCMH PSA residents with a long commute driving alone is 15.0%, lower than the Missouri Rural Norm of 23.4%. The percent of persons in the BCMH PSA with a long commute driving alone is 18.0%, lower than the Missouri Rural Norm of 32.1%.
- TAB 3: The percent of students eligible for free lunch in the BCMH PSA is 41.2%, higher than the Missouri Rural Norm of 37.4%. The percent of persons age 25 years+ in the BCMH PSA who are a high school graduate or higher is 84.1%, lower than the Missouri Rural Norm of 86.5%. The percent of persons age 25+ years with a Bachelor's degree or higher in the BCMH PSA is 12.1%, lower than the Missouri Rural Norm of 15.8%.
- TAB 4: The number of birth care beginning in the first trimester in the BCMH PSA is 150.0, lower than the Missouri Rural Norm of 195.8. The number of preterm births (less than 37 weeks gestation) is 123.0, lower than the Missouri Rural Norm of 153.0. The number of low birth weights in the BCMH PSA is 77.0, lower than the Missouri Rural Norm of 100.7. The number of infants participating in the WIC in the BCMH PSA is 155.0, lower than the Missouri Rural Norm of 1671.1. The teen pregnancy rate under age 18 in the BCMH PSA is 35.0, lower than the Missouri Rural Norm of 38.7. The number of out-of-wedlock births in the BCMH PSA is 379.0, higher than the Missouri Rural Norm of 59.2. The number of mothers who smoked during pregnancy in the BCMH PSA is 38.0, lower than the Missouri Rural Norm of 59.0

- TAB 5: The ratio of the population in the BCMH to primary care physicians is 2,010:1, lower than the Missouri Rural Norm of 3,174:1. The rate of preventable hospital stays is 77.0, higher than the Missouri Rural Norm of 70.9. The average time patients in the BCMH PSA spent in the Emergency Department before they were seen by a healthcare professional is 10.0 minutes, lower than the Missouri Rural Norm of 15.4 minutes.
- TAB 6: The percent of Depression in the Medicare population in the BCMH PSA is 18.1%, higher than the Missouri Rural Norm of 16.6%. The percent of alcohol-impaired driving deaths in the BCMH PSA is 37.0%, higher than the Missouri Rural Norm of 30.5%.
- TAB 7: The percent of adult obesity in the BCMH PSA is 35.0%, higher than the Missouri Rural Norm of 33.2%. The percent of adults smoking in the BCMH PSA is 23.0%, higher than the Missouri Rural Norm of 20.5%. The rate of sexually transmitted infections in the BCMH PSA is 479.7, higher than the Missouri Rural Norm of 260.9. The percent of the Medicare population in the BCMH PSA with Hypertension is 55.5%, higher than the Missouri Rural Norm of 53.7%. The percent of the Medicare population in the BCMH PSA with Hyperlipidemia is 37.2%, lower than the Missouri Rural Norm of 39.9%. The percent of the Medicare population in the BCMH PSA with COPD is 17.5%, higher than the Missouri Rural Norm of 13.9%.
- TAB 8: The percent of residents uninsured in the BCMH PSA is 20.0%, higher than the Missouri Rural Norm of 17.3%.
- TAB 9: The Heart Disease mortality rate in the BCMH PSA is 61.0, lower than the Missouri Rural Norm of 62.8. The Chronic Lower Respiratory Disease mortality rate in the BCMH PSA is 19.0, higher than the Missouri Rural Norm of 18.8. The number of suicides in the BCMH PSA is 4.0, lower than the Missouri Rural Norm of 4.6.
- TAB 10: The percent of access to exercise opportunities in the BCMH PSA is 63.0%, higher than the Missouri Rural Norm of 45.1%. The percent of Diabetic monitoring in the BCMH PSA is 80.0%, lower than the Missouri Rural Norm of 84.3%. The percent of mammography screenings in the BCMH PSA is 58.0%, higher than the Missouri Rural Norm of 56.4%.

Key 2016 Community Feedback Conclusions

In July 2016, Bates County Memorial Hospital (BCMh) collected stakeholder feedback from their primary service area consumers, community leaders and groups, public and other organizations, and other providers. These stakeholders (N=254) provided the following community feedback insights via an online perception survey:

- 63.8% of BCMh 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.
- BCMh primary service area stakeholders are satisfied with the following services: Ambulance, Eye Doctor / Optometrist, Hospice, Inpatient Services, Outpatient Services, Pharmacy and Public Health Department.
- BCMh primary service area stakeholders are not satisfied with the following services: Child Care, Chiropractors, Dentists, Emergency Room, Family Planning Services, Home Health, Mental Health Services and Specialists.
- 82.2% of BCMh primary service area stakeholders have received healthcare services outside of their community over the past two years.
- BCMh primary service area stakeholders perceive the following causes of disease or disability a problem in their community: Abuse / Violence, Cancer, Drugs / Substance Abuse, Mental Illness, Obesity, Physical Exercise, Poverty and Wellness.

As seen below, the community still senses a health need for Substance Abuse, Obesity (Healthy Foods / Exercise), Smoking, Chronic Disease Management, Affordable Health Insurance and Healthcare Transportation.

Bates County Memorial Hospital (Primary Service Area) - Butler, MO N=254						
From our last CHNA (2013), a number of health needs were identified as priorities. Are any of these 2013 CHNA needs still an "Ongoing Problem" in the Bates County Memorial Hospital primary service area?						
Answer Options	Not a Problem Anymore	Somewhat of a Problem	Major Problem	Problem %	Response Count	Most Pressing Rank
Substance Abuse	7	46	158	96.7%	211	1
Obesity (Healthy Foods / Exercise)	9	71	121	95.5%	201	3
Smoking	13	97	91	93.5%	201	6
Chronic Disease Management	18	118	70	91.3%	206	4
Affordable Health Insurance	18	88	98	91.2%	204	2
Healthcare Transportation	40	107	57	80.4%	204	7
Access to Primary Care	72	86	49	65.2%	207	5

II. Methodology

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II. Methodology

a) Scope and Purpose

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

JOB #1: Meet/Report IRS 990 Required Documentation

1. A 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.).

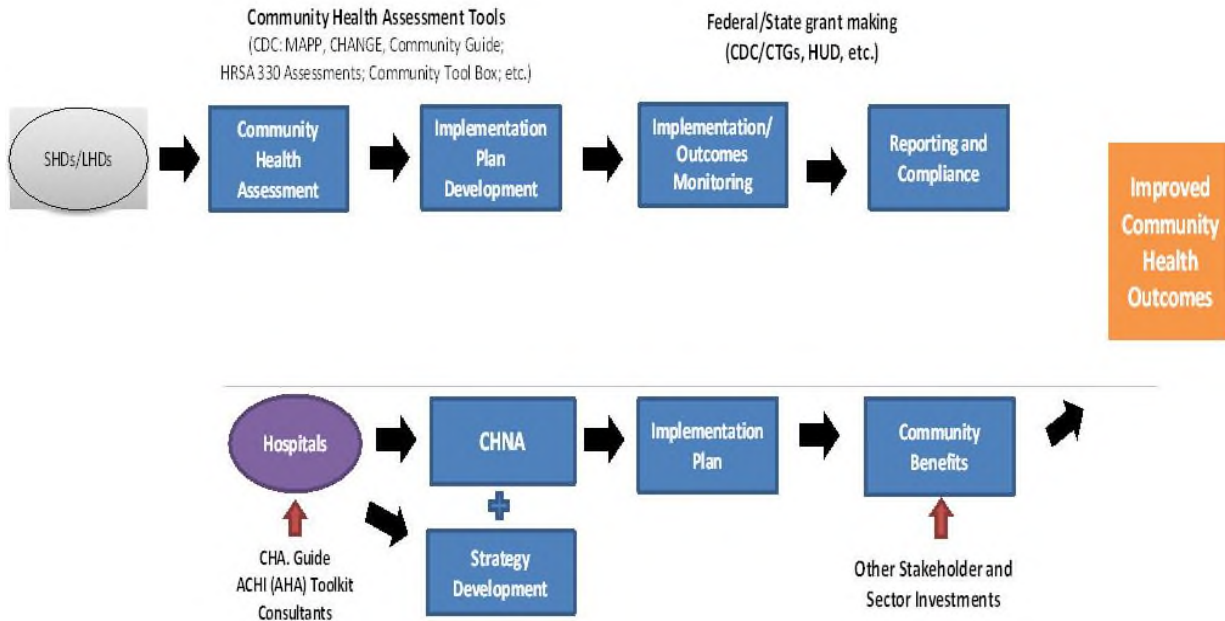
JOB #2: Making a CHNA Widely Available to the Public

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.



IRS Notice 2011-52 Overview

Notice and Request for Comments Regarding the Community Health Needs Assessment Requirements for Tax-exempt Hospitals

Applicability of CHNA Requirements to “Hospital Organizations”

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

How and When to Conduct a CHNA

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

Determining the Community Served

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

Persons Representing the Community Served

Section 501(r) provides that a CHNA must take into account input from **persons who represent the broad interests of the community** served by the hospital facility, including individuals 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.*

Year 2015 - IRS and Treasury Finalize Patient Protection Rules for Tax-Exempt Hospitals

ACCOUNTING TODAY 1/2/15

The Internal Revenue Service and the Treasury Department have issued **final regulations** under the Affordable Care Act to protect patients in tax-exempt hospitals from aggressive debt collection practices and to provide other rules for charitable hospitals.

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

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

She noted that as a condition of their tax-exempt status, charitable hospitals must take an active role in improving the health of the communities they serve, establish billing and collections protections for patients eligible for financial assistance, and provide patients with the information they need to apply for such assistance. "These final rules adopt the same framework of proposed regulations but simplify the compliance process for charitable hospitals, while continuing to provide meaningful guidance on protections for patients and requirements to assess community health needs," she added.

Under the new rules, hospitals cannot charge individuals eligible for financial assistance more for emergency or other medically necessary care than the amounts generally billed to patients with insurance (including Medicare, Medicaid, or private commercial insurance). In addition, every tax-exempt hospital must establish and widely publicize a financial assistance policy that clearly describes to patients the eligibility criteria for obtaining financial assistance and the method for applying for financial assistance.

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

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

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

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

II. Methodology

b) Collaborating CHNA Parties

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

Bates County Memorial Hospital Profile

615 W Nursery St, Butler, MO 64730

CEO: Edward Hannon

About Bates County Memorial Hospital (BCMh)

Bates County Memorial Hospital (BCMh), located approximately 60 miles south of Kansas City in Butler, Mo., serves Bates County and the surrounding communities, including Adrian, Archie, Amoret, Amsterdam, Appleton City, Butler, Drexel, Foster, Hume, Montrose, Nevada, Rich Hill and Rockville.

BCMh is a 60-bed acute care facility. We offer a wide range of services including a 24-hour physician-staffed emergency department, inpatient and outpatient surgery.

Commitment to Health Care

With our caring physicians, dedicated employees and specialty services, we are committed to providing health care with state-of-the-art technology. We are proud to offer extensive outpatient specialty clinics, with a qualified and professional staff. More than 120 health care providers comprise the medical and allied health staffs at BCMh and represent a broad cross-section of specialty care areas.

We invite you to get to know us better and discover all BCMh has to offer.

Mission – Why We Exist

To continuously improve the health of the people of our community.

Vision – What We Want to Be

The provider of choice for quality patient-centered care and health services in the community.

Values – Who We Are

Compassion—Show sincere care and kindness for those we serve.

Accountability—Take responsibility for our actions.

Respect—Treat everyone with dignity.

Excellence—Achieve excellence through innovation, team work and doing our best.

Smile—Always be friendly.

Critical Success Factors – How We Succeed

People—Maintain high-quality workforce.

Service—Improve customer service.

Quality—Improve prevention and health education services and Improve health outcomes.

Financial—Produce financial resources required to support the mission and values.

Growth—Expand access to health services.

Our Services

Bates County Memorial Hospital invites you review the many services we offer the community. We strive to bring to the community, quality healthcare, close to home. Our Outpatient Specialty Clinics offer services by the area's leading specialists. Our Hospitalist program utilizes physicians specializing in Inpatient care. Telemedicine consults are available with Cardiologists, Pulmonary and Infectious Disease specialists.

- Ambulance
- Breast Health
- Cancer Care
- Cardiac-Pulmonary Rehab
- Clinics
- Emergency Medical Services
- Endoscopy Procedures
- Hospitalist
- Imaging Services
- Laboratory Services
- Outpatient Specialty Clinics
- Rehabilitation Services
- Sleep Disorders
- Surgical Services
- Telemedicine
- Wound Care

Bates County Health Center

501 N Orange St, Butler, MO 64730

Administrator: Mylissa "Jody" Welston, RN

Bates County Health Center was opened as a demonstration unit on April 1, 1975. A vote of the citizens on August 3, 1976 approved a mill tax for the continuation of the local public health agency. Since its establishment, the Bates County Health Center has been dedicated to protecting the health and well-being of the citizens of the county. Although services offered have changed over the years, we still strive to fulfill the mission of public health which is to Prevent, Promote, and Protect our citizens.

Services: The Bates County Health Center is dedicated to the prevention of disease and the maintenance of a high level of health in the family and community through education, immunization, inspection and response. A variety of health screenings, disease testing, immunizations, health education and certified birth and death certificates are offered at the Health Center. While some services are available at no cost to Bates County residents, others have a fee based on the cost of providing the service or based on fees set through Missouri State Statutes.

- Lab Screenings
- Immunizations and Vaccines
- Communicable Disease
- Temporary Medicaid
- STD/HIV

Birth/Death Certificates: Individuals may obtain a birth certificate for themselves or any immediate family member which includes those family members and in-laws in the direct line of descent up to but not including cousins if the birth occurred anywhere in the state of Missouri after 1920. Individuals may obtain a death certificate for any family member if the person passed away anywhere in the state of Missouri after 1980.

Health Education

PACE: People With Arthritis Can Exercise was created to keep joints flexible, muscles strong and to help reduce the pain and stiffness associated with arthritis. The low-impact class uses routines that are suitable for every fitness level using gentle range-of-motion movements. Classes are held on Monday and Friday from 10:00 a.m. to 11:00 a.m.

Aquatics: In conjunction with the PACE classes, during the summer individuals with arthritis can also take advantage of water exercises. Class size is limited and pre-registration is required.

Car Seat Classes and Safety Checks: Certified Child Passenger Safety Technicians provide classes to educate on child passenger seat safety and installation. The class is open to pregnant women who reside in Bates County. Once the individual attends and completes the instructional class they will receive a convertible safety seat for their child which can be used until the child reaches the maximum weight defined on the seat. When available, booster seat classes are also held for parents and grandparents who reside in Bates County. Certified Child Passenger Safety Technicians are also available for technical support, to answer questions and to check for proper installation of child seats.

Bike Helmets: Ensuring safety while promoting physical activity is the goal of the bike helmet program. Bike helmets are distributed through different organizations and activities within the county.

Children's Health and Safety Fair: As children prepare to return to school, the Bates County Health Center sponsors a Children's Health and Safety Fair which provides screenings such as height, weight, hearing, vision and others. Education booths are also there to provide health and safety information. Fire trucks and ambulance are on site for children to view and learn about. Games, prizes and food are also provided.

Safe Sitter Classes: Better Sitters Today/Better Parents Tomorrow; that is the motto of the certified Safe Sitter Babysitting class offered annually. The class is open to boys and girls ages 11-13 and prepares these young individuals on how to be the best sitter they can be. Topics covered include child care essentials, preventing injuries and problem behaviors, basic first aid and choking skills as well as safety and emergency actions.

Childcare Providers Training

Education and Consultation: The Child Care Health Consultation program is a collaborative program between the Missouri Department of Health and Senior Services and the Local Public Health Departments throughout Missouri to provide child care health consultation services to child care providers. It is supported in part by a special child care grant from the U.S. Department of Health and Human Services, Child Care Bureau and Maternal Child Health Bureau.

This program exists to provide child care health consultation to child care providers which promote safe sleep, health and developmentally appropriate environments for children in child care and to assist families and child care providers in accessing needed health and social services programs. Services are available to local child care providers, families and children in the child care facilities at no cost.

Consultation is available at child care homes, group homes or centers regarding child health and safety concerns. Training for child care providers to improve their health and safety knowledge and practices are offered on topics such as:

- Immunizations
- Poison Prevention
- Medication Administration
- Fire Safety
- Dental Health
- Nutrition and Physical Activity
- Communicable Disease
- CPR and First Aid
- Sanitation

WIC: The Women, Infants, and Children Program, also known as WIC, is a federally funded nutrition education supplemental food program which provides services for pregnant, non-breastfeeding postpartum women (up to 6 months after delivery or termination of the pregnancy), breastfeeding women (up to 1 year after delivery as long as they are breastfeeding the baby), infants from birth up to 1 year of age, and children up to their 5th birthday. The program is designed to help mothers and young children eat well and stay healthy by providing health screening, risk assessment, nutrition education and counseling, breastfeeding promotion and referrals to health care as well as supplemental food items.

To qualify, individuals must meet income guidelines and be at a nutritional or health risk. Qualifying participants will receive vouchers for food items such as milk, juice, peanut butter, eggs, canned and dried beans, cereal, fresh and frozen fruits and vegetables, infant formula and baby food. Food packages are prescribed according to the individual's qualifying category. These food packages are to supplement the family's food budget but will not provide enough food to support the WIC clients for the entire month.

Emergency Preparedness: Emergencies or disasters can occur at any time. An all hazards response plan is prepared and integrated into the Bates County Emergency Operations Plan. Staff is prepared to respond to a public health emergency which is any threat to public health and safety such as an infectious disease epidemic or any event that has the potential for significant health impact to the community, such as a bioterrorism event. They are also prepared to respond in support roles in other types of emergencies or disasters.

Environmental Health: Through agreements with the Missouri Department of Health and Senior Services, Environmental Public Health Specialists inspect food establishments, lodging facilities, child care centers, and other environmental public health concerns. Sewage permits are also handled by the Environmental Public Health Specialist.

Supplies for testing of public drinking water for Total Coliform and E. coli bacteria are available through our office. All samples must be collected according to instructions and submitted with proper paperwork and payment to Missouri Department of Health and Senior Services State Public Health Laboratories.

II. Methodology

b) Collaborating CHNA 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 (three campuses) and was contracted to conduct two additional independent department of health consulting projects (prior to IRS 990 regs). To date, VVV has completed 75 CHNA IRS-aligned assessments for Iowa, Kansas, Missouri and Nebraska hospitals and health departments.

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

Collaborating Consultants

Alexa Backman, MBA - VVV Consultants LLC

Associate Consultant

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

II. Methodology

c) CHNA and Town Hall Research Process

Bates County Memorial Hospital's Community Health Needs Assessment (CHNA) process began in October 2015. At that time, an inquiry was made by Edward Hannon, CEO to VVV Consultants LLC to explore the possibility of conducting a comprehensive IRS-aligned CHNA. 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 Deliverables:

- Confirm BCMH primary service area meets 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 primary research (with valid N).
- Prepare and publish IRS-aligned CHNA report that meets requirements.

To ensure proper BCMH Town Hall representation that meets the 80-20 Rule, a Patient Origin three-year summary was generated and documented the zip codes below as BCMH's Primary Service Area.

Bates County Memorial Hospital			Source: Internal Hospital Records			IP/OP/ER/C
				Totals		123,043
#	ZIP	City	County	Accum	%	3YR Tot
	Overall - Total				100.0%	123,047
1	64730	Butler	BATES	53.7%	53.7%	66,073
2	64720	Adrian	BATES	66.8%	13.1%	16,067
3	64779	Rich Hill	BATES	77.6%	10.9%	13,383
4	64723	Amsterdam	BATES	79.9%	2.3%	2,776

Bates County Memorial Hospital CHNA Work Plan

Project Timeline and Roles 2016

Step	Date (Start-Finish)	Lead	Task
1	2/1/2016	VVV	Sent VVV quote for review.
2	2/19/2016	Hosp	Select CHNA Option A/B/C. Approve and sign VVV CHNA quote.
3	5/2/2016	VVV	Send out REQCommInvite Excel file. Hospital and health department to fill in PSA stakeholders names, addresses and e-mails.
4	5/2/2016	VVV	Request hospital client to send MHA PO101 and PO103 Patient Origin 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).
5	On or before 5/16/16	VVV	Prepare CHNA Round#2 stakeholder feedback online link. Send text link for hospital review.
6	On or before 5/16/2016	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming CHNA work. Hospital to place.
7	5/30/2016	VVV	Launch and conduct online survey to stakeholders. Hospital will e-mail invite to participate to all stakeholders. Due by 1/8/16
8	5/30/2016	VVV / Hosp	Prepare and send out PR story to local media CHNA survey announcing online CHNA Round #2 feedback. Request public to participate.
9	On or before 6/20/2016	VVV	Assemble and complete secondary research. Find and populate 10 TABS. Create Town Hall PowerPoint for presentation.
10	7/1/2016	Hosp	Prepare and send out community Town Hall invite letter and place local ad.
11	7/11/2016	VVV / Hosp	Prepare and send out PR story to local media announcing upcoming Town Hall. VVV will mock up PR release to media sources.
12	On or before 8/5/2016	All	Conduct conference call (<i>time TBD</i>) with hospital and health department to review Town Hall data and flow.
13	Week of 8/8/2016 TBD	VVV	Conduct CHNA Town Hall from 5:30-7:00 p.m. at BCMH. Review and discuss basic health data plus rank health needs.
14	On or before 9/15/2016	VVV	Complete analysis. Release draft one and seek feedback from leaders at hospital and health department.
15	On or before 10/15/2016	VVV	Produce and release final CHNA report. Hospital will post CHNA online.
16	On or before 10/31/2016	Hosp	Conduct client Implementation Plan PSA leadership meeting.
17	30 days prior to end of hospital fiscal year	Hosp	Hold board meetings to discuss CHNA needs, create and adopt an Implementation Plan. Communicate CHNA plan to community.

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

Phase I—Discovery:

Conduct a 30-minute conference call with the CHNA Hospital client and county Health Department. Review / Confirm CHNA calendar of events, explain / coach client to complete required participant database and schedule / organize all Phase II activities.

Phase II—Qualify Community Need:

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

TAB 1. Demographic Profile
TAB 2. Economic/Business Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospitalization / Providers Profile
TAB 6. Behavioral Health Profile
TAB 7. Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

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

Phase III—Quantify Community Need:

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

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

Post CHNA report findings to meet IRS-aligned CHNA criteria.

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

Phase I: Discovery.....	June 2016
Phase II: Secondary / Primary Research.....	July 2016
Phase III: Town Hall Meeting.....	August 9, 2016
Phase IV: Prepare / Release CHNA report.....	October 2016

Detail CHNA Development Steps Include:

Steps to Conduct Community Health Needs Assessment	
	Development Steps
Step #1 Commitment	<i>Determine interest level of area healthcare leaders (Hospital, Health Dept., Mental Health Centers, Schools, Churches and Physicians, etc.), hold community meeting.</i>
Step #2 Planning	<i>Prepare brief Community Health Needs Assessment Plan. List goals, objectives, purpose, outcome, roles, community involvement, etc. Hold community kick-off meeting.</i>
Step #3 Secondary Research	<i>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.).</i>
Step #4a Primary Research	<i>Conduct Community Roundtable (qualitative research). Review secondary research (Step #3) with community stakeholders. Gather current opinions and identify health needs.</i>
Step #4b Primary Research <Optional>	<i>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.</i>
Steps #5 Reporting	<i>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).</i>
VVV Consultants LLC	913 302-7264

Overview of Town Hall Community Priority Setting Process

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

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

Bates County Memorial Hospital's Town Hall was held on Tuesday, August 9, 2016 at Bates County Memorial Hospital. Vince Vandehaar and Alexa Backman facilitated this 1½ hour session with 43 attendees. (Note: a detailed roster of all Town Hall attendees is listed in Section V.)

The following Town Hall agenda was conducted:

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

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

(NOTE: To review detail Town Hall discussion content, please turn to Section V for detailed notes of session and activity card content reporting of open-end comments).

Community Health Needs Assessment Town Hall Meeting Bates County Memorial Hospital PSA



Vince Vandelaar, MBA
VVV Consultants LLC
Principal / Adjunct Professor

Olathe, Kansas 66061
VVV@VandelaarMarketing.com
913-302-7264

Community Health Needs Assessment (CHNA) Town Hall Discussion Agenda

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

I. Introduction:

Background and Experience



Vince Vandelaar, 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
- > 25+ years of experience with Tillinghast, BCBSKC, Saint Luke's

Adjunct Professor - Marketing / Health Admin, 26 years +

- > Webster University (1988 – present)
- > Rockhurst University (2010 – 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 Town Hall

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

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

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

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

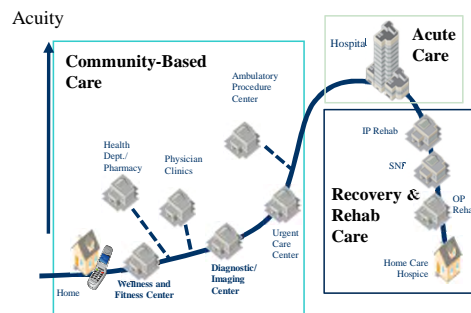
II. Purpose—Why Conduct a CHNA?

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

II. Review CHNA Definition

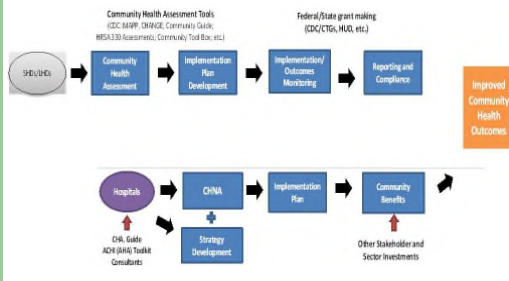
- A Community Health Needs Assessment (CHNA) is a **systematic collection, assembly, analysis, and dissemination of information about the health of the community.** (NOTE: Some the data has already been collected / published by Local, State and Federal public health organizations. Some data will be collected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

Future System of Care—Sg2



IP = inpatient; SNF = skilled nursing facility; OP = outpatient.

Community Health Needs Assessment Joint Process: Hospital and Health Department



II. Required Written Report—IRS 990 Documentation

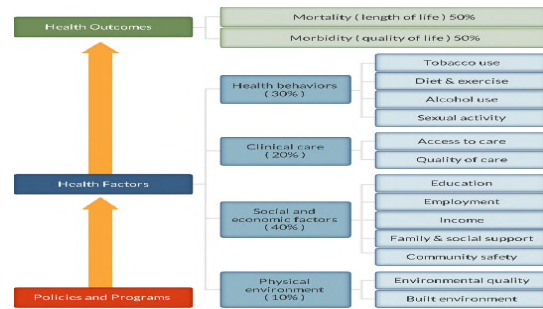
- a description of the community served
- a description of the CHNA process
- the identity of any and all organizations and third parties which collaborated to assist with the CHNA
- a description of how the organization considered the input of persons representing the community (e.g., through meetings, 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

III. Review Current County Health Status: Secondary Data by 10 Tab Categories, plus MO State Rankings

TAB 1. Demographic Profile
TAB 2. Economic/Business Profile
TAB 3. Educational Profile
TAB 4. Maternal and Infant Health Profile
TAB 5. Hospitalization / Providers Profile
TAB 6. Behavioral Health Profile
TAB 7. Risk Indicators & Factors
TAB 8. Uninsured Profile
TAB 9. Mortality Profile
TAB 10. Preventative Quality Measures

County Health Rankings -

Robert Wood Johnson Foundation and University of WI Health Institute



II. Methodology

d) Community Profile (A Description of Community Served)

Bates County, Missouri Community Profile



Demographics

The population of Bates County was estimated to be 16,446 on July 1, 2015, and had a -3.5% change in population from April 1, 2010–July 1, 2015.¹ According to the United States Census Bureau, its county seat is Butler. Bates County is part of the Kansas City, MO-KS Metropolitan Statistical Area. The county has a total area of 851 square miles, of which 837 square miles is land and 15 square miles is water.² Bates County's population density is 20 persons per square mile and its industries providing employment are Agriculture (forestry, fishing and hunting, and mining) (35.3%) and Educational (health and social services) (20.6%).³

The major highway transportation is by Interstate 49, U.S. Route 71, Route 18 and Route 52.⁴

¹ <http://www.census.gov/quickfacts/table/PST045215/29013>

² U.S. Census Bureau

³ http://www.city-data.com/county/Bates_County-MO.html

⁴ U.S. Census Bureau

Bates County Memorial Hospital - PSA Detail Demographic Profile

Zip	Name	County	Population			Households		HH Avg. Size	Per Capita Income 14
			YR 2014	YR 2019	Chg.	YR 2014	YR 2019		
64720	Adrian	BATES	3,049	3,018	-1.0%	1,198	1,189	2.5	\$20,071
64722	Amoret	BATES	475	458	-3.6%	174	169	2.7	\$22,600
64723	Amsterdam	BATES	1,086	1,051	-3.2%	421	408	2.6	\$19,273
64730	Butler	BATES	8,932	8,723	-2.3%	3,606	3,525	2.4	\$19,656
64742	Drexel	BATES	1,788	1,826	2.1%	735	753	2.4	\$24,732
64745	Foster	BATES	341	330	-3.2%	131	127	2.6	\$19,690
64752	Hume	BATES	759	767	1.1%	292	295	2.6	\$18,280
64779	Rich Hill	BATES	2,135	2,136	0.0%	795	792	2.7	\$14,079
64780	Rockville	BATES	472	460	-2.5%	195	190	2.4	\$19,826
Totals			19,037	18,769	-12.7%	7,547	7,448	2.5	\$19,801

Zip	Name	County	Population				YR 2014		Females Age 20_35
			YR 2014	Pop. 65+	Kids <18	Gen. Y	Males	Females	
64720	Adrian	BATES	3,049	560	791	852	1,481	1,568	260
64722	Amoret	BATES	475	93	112	126	239	236	39
64723	Amsterdam	BATES	1,086	162	272	313	559	527	87
64730	Butler	BATES	8,932	1,782	2,218	2,471	4,361	4,571	761
64742	Drexel	BATES	1,788	321	453	475	887	901	148
64745	Foster	BATES	341	58	96	97	176	165	28
64752	Hume	BATES	759	129	219	210	392	367	60
64779	Rich Hill	BATES	2,135	365	619	562	1,049	1,086	173
64780	Rockville	BATES	472	100	111	117	243	229	36
Totals			19,037	3,570	4,891	5,223	9,387	9,650	1,592

Zip	Name	County	Population				Aver HH Inc. 14	HH YR 2014	HH \$50K+
			White	Black	Amer. Ind.	Hisp.			
64720	Adrian	BATES	2,979	11	19	38	\$50,450	1,198	484
64722	Amoret	BATES	457	1	6	10	\$61,695	174	92
64723	Amsterdam	BATES	1,041	4	12	19	\$49,717	421	191
64730	Butler	BATES	8,540	146	70	172	\$48,064	3,606	1,339
64742	Drexel	BATES	1,737	13	7	19	\$60,163	735	387
64745	Foster	BATES	324	2	5	8	\$51,254	131	42
64752	Hume	BATES	729	4	9	12	\$47,514	292	90
64779	Rich Hill	BATES	2,042	6	15	36	\$37,508	795	219
64780	Rockville	BATES	454	2	5	4	\$47,990	195	67
Totals			18,303	189	148	318	\$50,484	7,547	2,911

Source: ERSA Demographics

III. Community Health Status

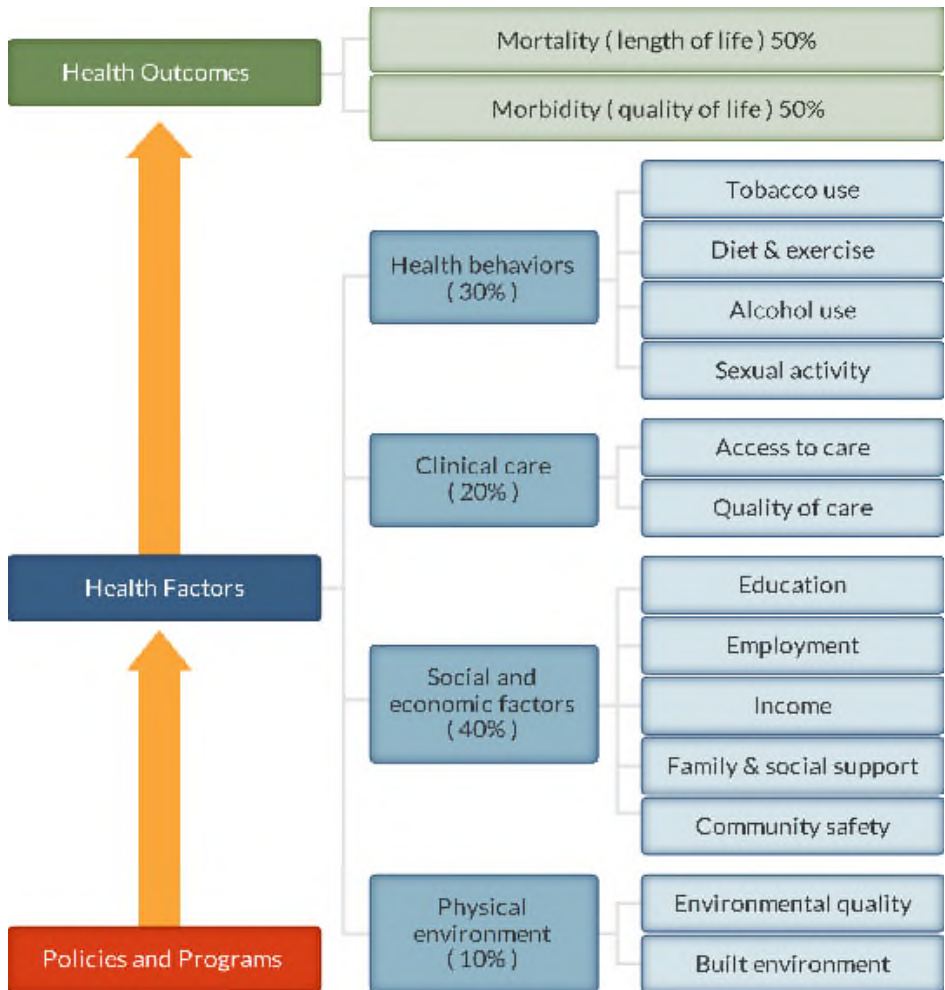
[VVV Consultants LLC]

III. Community Health Status

a) Historical Health Statistics

Health Status Profile

This section of the CHNA reviews published quantitative community health indicators and results of our recent CHNA Town Hall. To produce this profile, VVV Consultants LLC staff analyzed data from multiple sources. This analysis focuses on a set of published health indicators organized by 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.>



County Health Rankings model ©2012 UWPHI

Secondary Research

2016 State Health Rankings for Bates County, Missouri

#	MO Rank of 115 Counties (including St. Louis City)	Definitions	BCMH PSA	TREND	MO RURAL NORM (26)
1	Health Outcomes		83		51
2	Mortality	Length of Life	73		50
3	Morbidity	Quality of Life	87		51
4	Health Factors		85		50
5	Health Behaviors	Tobacco Use, Diet/Exercise, Alcohol Use, Sexual Activitiy	74		48
6	Clinical Care	Access to care / Quality of Care	92		63
7	Social & Economic Factors	Education, Employment, Income, Family/Social support, Community Safety	86		51
8	Physical Environment	Environmental quality	45		39

<http://www.countyhealthrankings.org>, released 2016

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

When considering the state of community health, it's important to review published health data by topic area. Below is a summary of key tabs of information collected:

Tab 1a Demographic Profile

Tab	Health Indicator	BCMH PSA	Trend	State of MO	MO Rural Norm (26)	Source
1a a	Population estimates, July 1, 2015, (V2015)	16,446		6,083,672	22,762	People Quick Facts
1a b	Population, percent change - April 1, 2010 (estimates base) to July 1, 2015, (V2015)	-3.5%		1.6%	-1.6%	People Quick Facts
1a c	Population, Census, April 1, 2010	17,049		5,988,927	22,849	People Quick Facts
1a d	Persons under 5 years, percent, July 1, 2014, (V2014)	5.9%		6.2%	5.7%	People Quick Facts
1a e	Persons under 18 years, percent, July 1, 2014, (V2014)	24.1%		23.0%	22.7%	People Quick Facts
1a f	Persons 65 years and over, percent, July 1, 2014, (V2014)	18.7%		15.4%	18.5%	People Quick Facts
1a g	Female persons, percent, July 1, 2014, (V2014)	50.6%		50.9%	49.5%	People Quick Facts
1a h	White alone, percent, July 1, 2014, (V2014) (a)	96.4%		83.5%	94.4%	People Quick Facts
1a i	Black or African American alone, percent, July 1, 2014, (V2014) (a)	1.1%		11.8%	2.7%	People Quick Facts
1a j	Hispanic or Latino, percent, July 1, 2014, (V2014) (b)	2.2%		4.0%	3.0%	People Quick Facts
1a k	Foreign born persons, percent, 2010-2014	0.8%		3.9%	1.8%	People Quick Facts
1a l	Language other than English spoken at home, percent of persons age 5 years+, 2010-2014	1.8%		6.1%	4.0%	People Quick Facts
1a m	Living in same house 1 year ago, percent of persons age 1 year+, 2010-2014	88.9%		83.9%	85.4%	People Quick Facts

Tab 1b Demographic Profile

Tab	Health Indicator	BCMH PSA	Trend	State of MO	MO Rural Norm (26)	Source
1b a	Veterans, 2010-2014	1,106		466,762	2,066	People Quick Facts
1b b	Population per square mile, 2010	20.4		87.1	36.4	Geography Quick Facts
1b c	Children in single-parent households, 2010-2014	26.0%		33.0%	28.9%	County Health Rankings
1b d	Persons in poverty, percent	18.4%		15.5%	16.5%	People Quick Facts
1b e	Limited access to healthy foods, 2010	6.0%		6.0%	7.2%	County Health Rankings
1b f	Seniors, low access to store (%), 2010	0.9%		NA	3.2%	U.S. Department of Agriculture - Food Environment Atlas
1b g	Registered Voters in Missouri, 2012	11,942		4,190,936	15,502	Missouri Secretary of State

Tab 2 Economic Profile

Tab	Health Indicator	BCMH PSA	Trend	State of MO	MO Rural Norm (26)	Source
2 a	Per capita income in past 12 months (in 2014 dollars), 2010-2014	\$21,369		\$26,006	\$21,403	People Quick Facts
2 b	Housing units, July 1, 2014, (V2014)	7,809		2,735,742	10,243	People Quick Facts
2 c	Persons per household, 2010-2014	2.4		2.5	2.5	People Quick Facts
2 d	Severe housing problems, 2008-2012	18.0%		15.0%	11.7%	County Health Rankings
2 e	Total retail sales per capita, 2012	\$10,275		\$15,036	\$10,104	Business Quick Facts
2 f	All firms, 2012	1,209		491,606	1,818	Business Quick Facts
2 g	Unemployment, 2016	6.1%		6.1%	6.1%	County Health Rankings
2 h	Food Insecurity Rate, 2013	16.4%		16.8%	15.1%	Feeding America
2 i	Grocery stores/1,000 pop, 2012	0.2		NA	0.2	U.S. Department of Agriculture - Food Environment Atlas
2 j	Low income & low access to store (%), 2010	1.5%		NA	7.2%	U.S. Department of Agriculture - Food Environment Atlas
2 k	SNAP participants (% eligible pop), 2010*	89.0%		NA	89.0%	U.S. Department of Agriculture - Food Environment Atlas
2 l	Mean travel time to work (minutes), workers age 16 years+, 2010-2014	29.3		23.1	23.5	People Quick Facts
2 m	Long commute - driving alone, 2010-2014	18.0%		30.0%	32.1%	County Health Rankings

Tab 3 Public Schools Health Delivery Profile

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

Tab	Health Indicator	BCMH PSA	Trend	State of MO	MO Rural Norm (26)	Source
3 a	Students Eligible for Free Lunch (%), 2010	41.2%		NA	37.4%	U.S. Department of Agriculture - Food Environment Atlas
3 b	High school graduate or higher, percent of persons age 25 years+, 2010-2014	84.1%		88.0%	86.5%	People Quick Facts
3 c	Bachelor's degree or higher, percent of persons age 25 years+, 2010-2014	12.1%		26.7%	15.8%	People Quick Facts

Tab 3 Public Schools Health Delivery Profile

#	Health Indicators	Adrian R-3 Schools	Appleton City R-2 Schools	Archie R-5 Schools	Butler R-5 Schools	Ballard R-2 Schools	Drexel R-4 Schools	Hudson R-9 Schools	Hume R-8 Schools	Miami R-1 Schools	Rich Hill R-4 Schools
1	Total Public School Nurses	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
2	School Nurse Part of IEP Team	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
3	Active School Wellness Plan	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
4	VISION: # Screened / Referred to Prof / Seen by Professional	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
5	HEARING: # Screened / Referred to Prof / Seen by Professional	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
6	ORAL HEALTH: # Screened / Referred to Prof / Seen by Professional	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
7	SCOLIOSIS: # Screened / Referred to Prof / Seen by Professional	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
8	Students Served with No Identified Chronic Health Concerns	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
9	School has Suicide Prevention Program	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
10	Compliance on Required Vaccinations	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

TAB 4 Maternal and Infant Health Profile

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

Tab	Health Indicator	BCMH PSA	Trend	State of MO	MO Rural Norm (26)	Source
4 a	Birth Care Began First Trimester, 2013	150.0		53,335	195.8	Missouri Department of Health and Senior Services
4 b	Preterm Births (less than 37 Weeks Gestation), 2008-2012	123.0		47,443	153.0	Missouri Department of Health and Senior Services
4 c	Low Birth Weight, 2008-2012	77.0		31,138	100.7	Missouri Department of Health and Senior Services
4 d	Infants Participating in WIC, 2012	155.0		43,767	167.1	Missouri Department of Health and Senior Services
4 e	Teen Pregnancy Rate Under Age 18, 2009-2013	35.0		11,913	38.7	Missouri Department of Health and Senior Services
4 f	Out-of-Wedlock Births, 2009-2013	379.0		154,226	59.2	Missouri Department of Health and Senior Services
4 g	Mother Smoked During Pregnancy, 2013	38.0		13,155	59.0	Missouri Department of Health and Senior Services

TAB 4 Maternal and Infant Health Profile

Tab	Missouri Department of Health and Senior Services, Vital Statistics	BCMh PSA	Trend	State of MO
4	a Total Live Births, 2010	199		76,718
4	b Total Live Births, 2011	198		76,069
4	c Total Live Births, 2012	183		75,400
4	d Total Live Births, 2013	198		75,244
4	e Total Live Births, 2014	193		75,104

TAB 5 Hospitalization/Provider Profile

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

Tab	Health Indicator	BCMh PSA	Trend	State of MO	MO Rural Norm (26)	Source
5	a Primary care physicians, 2013	2,010:1		1,420:1	3,174:1	County Health Rankings
5	b Preventable hospital stays, 2013	77.0		59.0	70.9	County Health Rankings
5	c Patients Who Gave Their Hospital a Rating of 9 or 10 on a Scale from 0 (Lowest) to 10 (Highest)	69.0%		71.0%	68.8%	CMS Hospital Compare, 7/1/2014-6/30/2015
5	d Patients Who Reported Yes, They Would Definitely Recommend the Hospital	65.0%		70.0%	65.8%	CMS Hospital Compare, 7/1/2014-6/30/2015
5	e Average Time Patients Spent in the Emergency Department Before They Were Seen by a Healthcare Professional (in Minutes)	10.0		20.0	15.4	CMS Hospital Compare, 7/1/2014-6/30/2015

TAB 5 Hospitalization/Provider Profile

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

#	MHA PO103	Bates County MO			Trend
		FFY13	FFY14	FFY15	
1	Total Discharges	2,347	2,338	2,397	
2	Total IP Discharges-Age 0-17 Ped	87	82	62	
3	Total IP Discharges-Age 18-44	260	262	239	
4	Total IP Discharges-Age 45-64	512	551	577	
5	Total IP Discharges-Age 65-74	389	345	399	
6	Total IP Discharges-Age 75+	600	561	659	
7	Psychiatric	180	135	115	
8	Obstetric	170	205	179	
9	Surgical %	25.0%	22.3%	22.2%	
#	MHA PO103	BCMh Only			Trend
		FFY13	FFY14	FFY15	
1	Total Discharges	596	654	751	
2	Total IP Discharges-Age 0-17 Ped	5	4	3	
3	Total IP Discharges-Age 18-44	65	80	71	
4	Total IP Discharges-Age 45-64	126	171	188	
5	Total IP Discharges-Age 65-74	114	98	146	
6	Total IP Discharges-Age 75+	285	295	339	
7	Psychiatric	0	5	4	
#	MHA TOT223E - BCMH	FFY13	FFY14	FFY15	Trend
1	Emergency Market Share	67.0%	67.9%	67.6%	
2	Surgery Market Share	41.5%	44.7%	46.5%	
3	Observation Market Share	57.0%	58.0%	56.1%	

TAB 6 Social & Rehab Services Profile

Behavioral healthcare provides another important indicator of community health status.

Tab	Health Indicator	BCMh PSA	Trend	State of MO	MO Rural Norm (26)	Source
6 a	Depression: Medicare Population, 2012	18.1%		19.7%	16.6%	Centers for Medicare and Medicaid Services
6 b	Alcohol-impaired driving deaths, 2010-2014	37.0%		33.0%	30.5%	County Health Rankings
6 c	Poor mental health days, 2014	4.1		3.7	3.8	County Health Rankings

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.		BCMH PSA			Trend	Source
		2015	2014	2013		
Diagnosis Category		2015	2014	2013		
a	Adjustment Disorder	7	7	5		Missouri Department of Mental Health
b	Anxiety Disorder	90	93	90		Missouri Department of Mental Health
c	Dementia	0	NA	0		Missouri Department of Mental Health
d	Developmental Disorder	NA	NA	NA		Missouri Department of Mental Health
e	Impulse Control Disorder	26	31	29		Missouri Department of Mental Health
f	Mood Disorder	122	127	130		Missouri Department of Mental Health
g	Personality Disorder	11	12	10		Missouri Department of Mental Health
h	Psychotic Disorder	24	23	27		Missouri Department of Mental Health
i	Sexual Disorder	0	0	0		Missouri Department of Mental Health

TAB 7a Health Risk Profiles

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

Tab	Health Indicator	BCMH PSA	Trend	State of MO	MO Rural Norm (26)	Source
7a	a Adult obesity**, 2012	35.0%		31.0%	33.2%	County Health Rankings
7a	b Adult smoking, 2014	23.0%		21.0%	20.5%	County Health Rankings
7a	c Excessive drinking, 2014	15.0%		16.0%	15.3%	County Health Rankings
7a	d Physical inactivity**, 2012	31.0%		26.0%	30.5%	County Health Rankings
7a	e Poor physical health days, 2014	4.7		4.1	4.1	County Health Rankings
7a	f Sexually transmitted infections**, 2013	479.7		453.8	260.9	County Health Rankings

TAB 7b Health Risk Profiles

Tab	Health Indicator	BCMH PSA	Trend	State of MO	MO Rural Norm (26)	Source
7b a	Hypertension: Medicare Population, 2012	55.5%		54.8%	53.7%	Centers for Medicare and Medicaid Services
7b b	Hyperlipidemia: Medicare Population, 2012	37.2%		42.3%	39.9%	Centers for Medicare and Medicaid Services
7b c	Heart Failure: Medicare Population, 2012	14.1%		13.7%	14.1%	Centers for Medicare and Medicaid Services
7b d	Chronic Kidney Disease: Medicare Population, 2012	13.5%		16.4%	13.9%	Centers for Medicare and Medicaid Services
7b e	COPD: Medicare Population, 2012	17.5%		13.2%	13.9%	Centers for Medicare and Medicaid Services
7b f	Atrial Fibrillation: Medicare Population, 2012	9.5%		8.1%	8.7%	Centers for Medicare and Medicaid Services
7b g	Cancer: Medicare Population, 2012	8.0%		7.8%	7.4%	Centers for Medicare and Medicaid Services
7b h	Osteoporosis: Medicare Population, 2012	3.6%		5.9%	4.9%	Centers for Medicare and Medicaid Services
7b i	Asthma: Medicare Population, 2012	4.3%		4.8%	3.8%	Centers for Medicare and Medicaid Services
7b j	Stroke: Medicare Population, 2012	2.9%		3.6%	3.3%	Centers for Medicare and Medicaid Services

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.

Tab	Health Indicator	BCMH PSA	Trend	State of MO	MO Rural Norm (26)	Source
8 a	Uninsured, 2013	20.0%		15.0%	17.3%	County Health Rankings

Source Hospital Internal Records					
	Bates County Memorial Hospital	YR 2013	YR 2014	YR 2015	Trend
1	Bad Debt	\$9,557,607	\$5,742,816	\$7,520,385	
2	Charity Care	\$1,009,170	\$1,365,649	\$1,739,164	

TAB 9 Mortality Profile

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

Tab	Health Indicator	BCMH PSA	Trend	State of MO	MO Rural Norm (26)	Source
9 a	Life Expectancy for Males, 2004-2012	74.4		74.6	74.6	Missouri Department of Health and Senior Services
9 b	Life Expectancy for Females, 2004-2012	79.0		79.7	79.3	Missouri Department of Health and Senior Services
9 c	Heart Disease Mortality, 2014	61.0		14,210	62.8	Missouri Department of Health and Senior Services
9 d	Chronic Lower Respiratory Disease Mortality, 2014	19.0		3,739	18.8	Missouri Department of Health and Senior Services
9 e	Suicides, 2014	4.0		1,004	4.6	Missouri Department of Health and Senior Services

#	Causes of Death by County of Residence, Missouri Department of Health and Senior Services, 2014	BCMH PSA	%	Trend	State of MO	%
	All Causes	223	100.0%		58,141	100.0%
1	Heart disease	61	27.4%	2.9%	14,210	24.4%
2	Cancer	39	17.5%	-4.9%	13,009	22.4%
3	Other diseases (residual)	24	10.8%	-1.2%	6,983	12.0%
4	Chronic lower respiratory diseases	19	8.5%	2.1%	3,739	6.4%
5	Cerebrovascular disease (Stroke)	14	6.3%	1.1%	3,010	5.2%
6	All other accidents and adverse effects	12	5.4%	1.3%	2,377	4.1%
7	Kidney disease (nephritis/nephrotic syndrome/nephrosis)	10	4.5%	2.0%	1,446	2.5%
8	Alzheimer's disease	8	3.6%	0.1%	2,047	3.5%
9	Other digestive diseases	6	2.7%	0.4%	1,319	2.3%
10	Pneumonia and influenza	5	2.2%	0.0%	1,317	2.3%

TAB 10 Preventive Health Profile

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

Tab	Health Indicator	BCMHS PSA	Trend	State of MO	MO Rural Norm (26)	Source
10 a	Access to exercise opportunities, 2014	63.0%		76.0%	45.1%	County Health Rankings
10 b	2-Year-Old Coverage of Individual Vaccines and Selected Vaccination Series, 2012	NA		NA	NA	NA
10 c	Diabetic monitoring, 2013	80.0%		86.0%	84.3%	County Health Rankings
10 d	Mammography screening, 2013	58.0%		62.0%	56.4%	County Health Rankings
10 e	Percent Annual Check-Up Visit with PCP	NA		NA	NA	TBD
10 f	Percent Annual Check-Up Visit with Dentist	NA		NA	NA	TBD
10 g	Percent Annual Check-Up Visit with Eye Doctor	NA		NA	NA	TBD

Community Feedback Research

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

Question 1—Overall Quality of Healthcare Delivery

Bates County Memorial Hospital (PSA) - Butler, MO N=254						
1. Three years ago, Bates County Memorial Hospital completed a Community Health Needs Assessment (CHNA). This assessment identified a number of health needs for our community. Today, we are updating this assessment and would like to know how you rate the "Overall Quality" of healthcare delivery in our community?						
Answer Options	Very Good	Good	Fair	Poor	Very Poor	Valid N
Bates County Memorial Hospital PSA N=254	55	107	66	22	4	254
Top 2 Boxes (Very Good / Good)	63.8%		26.0%	8.7%	1.6%	
Option C Stakeholders Round #2	977	2,065	826	120	25	4,013
Top 2 Boxes (Very Good / Good)	75.8%		20.6%	3.0%	0.6%	

Question 8—Requested Discussion Items for Town Hall Agenda

Bates County Memorial Hospital (PSA) - Butler, MO N=254			
8. Are there any other health needs from the list below that need to be discussed at our upcoming CHNA Town Hall meeting?	Option C Stakeholders Round #2 Bottom 2 Boxes	BCMh PSA N=254	TREND
Abuse / Violence	4.8%	5.7%	
Alcohol	4.9%	4.2%	
Cancer	4.9%	5.7%	
Diabetes	5.0%	4.9%	
Drugs / Substance Abuse	8.2%	14.3%	
Family Planning	2.8%	2.0%	
Heart Disease	3.8%	2.8%	
Lead Exposure	0.8%	0.3%	
Mental Illness	8.8%	8.4%	
Nutrition	5.1%	3.1%	
Obesity	7.8%	8.9%	
Ozone	0.8%	0.0%	
Physical Exercise	5.6%	5.1%	
Poverty	5.3%	5.8%	
Respiratory Disease	2.3%	2.0%	
Sexual Transmitted Diseases	2.2%	1.5%	
Suicide	5.0%	3.5%	
Teen Pregnancy	3.6%	3.4%	
Tobacco Use	3.9%	4.5%	
Vaccinations	3.8%	2.8%	
Water Quality	3.3%	1.6%	
Wellness	5.8%	6.5%	
Other (please specify)	1.5%	2.8%	
TOTAL	100.0%	100.0%	

Questions 5-6—Rating of Healthcare Services

Bates County Memorial Hospital (PSA) - Butler, MO N=254			
5. How would Bates County Memorial Hospital primary service area residents rate each of the following services?	Option C Stakeholders Round #2 Bottom 2 Boxes	BCMh PSA N=254	TREND
Ambulance Services	3.3%	1.5%	
Child Care	13.7%	18.3%	
Chiropractors	5.1%	11.0%	
Dentists	12.0%	22.3%	
Emergency Room	8.1%	13.9%	
Eye Doctor / Optometrist	6.6%	3.7%	
Family Planning Services	15.5%	15.7%	
Home Health	9.7%	18.3%	
Hospice	6.0%	4.9%	
Inpatient Services	3.8%	9.2%	
Mental Health Services	33.5%	26.8%	
Nursing Home	11.4%	8.4%	
Outpatient Services	3.0%	8.2%	
Pharmacy	2.4%	3.2%	
Primary Care	4.2%	6.2%	
Public Health Department	4.5%	4.4%	
School Nurse	6.5%	5.9%	
Specialists	8.1%	12.0%	

Question 7—Healthcare Services Outside of PSA

Bates County Memorial Hospital (PSA) - Butler, MO N=254			
7. Throughout the past two years, did you or someone you know receive healthcare services outside of the Bates County Memorial Hospital primary service area?	Option C Stakeholders Round #2 Bottom 2 Boxes	BCMh PSA N=254	TREND
Yes	78.6%	82.2%	
No	14.4%	11.4%	
Don't know	7.0%	6.4%	
TOTALS	100.0%	100.0%	

IV. Inventory of Community Health Resources

[VVV Consultants LLC]

Inventory of Health Services - Bates County, MO

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

Inventory of Health Services - Bates County, MO

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

BCMh PSA - Physician Manpower

Providers by Specialty	BCMh PSA	FTE	PSA MD/DO	PSA NP/PA	Visiting DRs*
Primary Care:					
Family Practice	8.0	8.0	4.0	4.0	
Internal Medicine / Geriatrics					
Obstetrics / Gynecology					
Pediatrics					
Medicine Specialists:					
Allergy / Immunology					
Cardiology	0.2	0.2			0.2
Dermatology					
Endocrinology					
Gastroenterology	0.1	0.1			0.1
Hematology / Oncology	0.2	0.2			0.2
Infectious Diseases					
Nephrology	0.2	0.2			0.2
Neurology	0.1	0.1			0.1
Psychiatry					
Pulmonary	0.1	0.1			0.1
Rheumatology					
Surgery Specialists:					
General Surgery / Colon / Oral					
Neurosurgery					
Ophthalmology					
Orthopedics	0.1	0.1			0.1
Otolaryngology					
Plastic / Reconstructive					
Thoracic / Cardiovascular / Vascular					
Urology	0.1	0.1			0.1
Hospital Based:					
Anesthesia / Pain	0.1	0.1			0.1
Emergency					
Hospitalist					
Radiology					
Pathology					
Neonatal / Perinatal					
Physical Medicine / Rehab					
Occupational Medicine					
Podiatry	0.1	0.1			0.1
Wound Care					
TOTALS	9.3	9.3	4.0	4.0	1.3

*Total FTE specialists serving community who office outside PSA

Visiting Specialists to Bates County Memorial Hospital

<i>Provider Name</i>	<i>Provider Name</i>	<i>Group Name</i>	<i>Group City</i>	<i>Specialty</i>	<i>Days in Clinic Per Month</i>
Francisco	Lammoglia	Healient Physician Group	Leawood, KS	Cardiovascular	1
Craig	Lundgren	Healient Physician Group	Leawood, KS	Cardiovascular	1
Gerald	Mancuso	Healient Physician Group	Leawood, KS	Cardiovascular	1
Jin	Park	Healient Physician Group	Leawood, KS	Cardiovascular	1
Donald	Clement	Consultants in Gastroenterology, PC	Kansas City, MO	Gastrointestinal	1
Todd	Kilgore	Summit Gastroenterology	Lee's Summit, MO	Gastrointestinal	2
Frank	Totta	Summit Gastroenterology	Lee's Summit, MO	Gastrointestinal	1
Ryan	Lustig	Kansas City Kidney Consultants	Kansas City, MO	Nephrology	1
Barry	Wood	Kansas City Kidney Consultants	Kansas City, MO	Nephrology	3
Roxane	Bremen		Lee's Summit, MO	Neurology	2
Aimee	Kohn	Saint Luke's Cancer Specialists–Lee's Summit	Lee's Summit, MO	Oncology / Hematology	4+
Joseph	Pareiman	Mid-America Eye Center	Prairie Village, KS	Ophthalmology	1
Danny	Carroll	Bone and Joint Specialists Physicians Group - Belton	Belton, MO	Orthopedics	2
James	Whitaker		Overland Park, KS	Orthopedics	4+
Dennison	Hamilton		Kansas City, MO	Pain	4+
Roger	Misasi	Headache and Pain Center	Kansas City, MO	Pain	2
Robert	Shemwell		North Kansas City, MO	Podiatry	4+
Timothy	Smith	Pulmonary Physicians of Kc	Kansas City, MO	Pulmonology	3
Robert	Smith	Midwest Urology & Radiation	Independence, MO	Urology	2

Bates County, Missouri Area Healthcare Services

Emergency Numbers

Police/Sheriff	911
Fire	911
Ambulance	911

Non-Emergency Numbers

Bates County Sheriff	660-679-3232
Bates County Ambulance	660-200-7119

MEDICAL EQUIPMENT

ADRIAN:

Kreisler Drug

21 E. Main
Adrian, MO 64720
816-297-8833

BUTLER:

Monarch Pharmacy

11 S. Orange
Butler, MO 64730
660-679-3010

Summers Pharmacy Inc.

11 W. Dakota
Butler, MO 64730
660-679-5002

Wal-Mart Pharmacy

1005 W. Ft. Scott
Butler, MO 64730
660-679-3163

RICH HILL:

Wilkinson Pharmacy, Inc.

301 N. 14th
Rich Hill, MO 64779
417-395-4700

HOME HEALTH CARE

Quality Home Care

(Housekeeping & Nursing
Visits)
1300 N. Orange
Butler, MO 64730
660-679-6733

Visiting Nurse Association

1604 E. Elm
Harrisonville, MO 64701
816-380-3654
Toll Free 800-231-9862

PHARMACY

ADRIAN:

Kreisler Drug

21 E. Main
Adrian, MO 64720
816-297-8833

BUTLER:

Monarch Pharmacy

11 S. Orange
Butler, MO 64730
660-679-3010

Summers Pharmacy

11 W. Dakota
Butler, MO 64730
660-679-5002

Wal-Mart Pharmacy

1005 W. Ft. Scott
Butler, MO 64730
660-679-3163

RICH HILL:

Wilkinson Pharmacy, Inc.

301 N. 14th
Rich Hill, MO 64779
417-395-4700

HOSPITAL

**Bates County Memorial
Hospital**

615 W. Nursery
Butler, MO 64730
660-200-7000

Ambulance

660-200-7070

**Cass Regional Medical
Center**

2800 E. Rock Haven Road
Harrisonville, MO 64701
816-380-3474

Ellett Memorial Hospital

610 N. Ohio
Appleton City, MO 64724
660-476-2111

**Nevada Regional Medical
Center**

800 S. Ash St.
Nevada, MO 64772
417-667-3355

SENIOR CENTERS

ADRIAN:

Adrian Senior Center

125 S. Houston
Adrian, MO 64720
816-297-4203

BUTLER:

Butler Senior Center

611 W. Mill
Butler, MO 64730
660-679-5830

RICH HILL:

Kern Senior Center

613 E. Park
Rich Hill, MO 64779
417-395-2225

TRANSPORTATION

COUNTY WIDE:

OATS

(public transportation)
1-800-276-6287

BUTLER:

Butler Senior Citizens Taxi

611 W. Mill
Butler, MO 64730
660-679-6322

**PUBLIC HEALTH
DEPARTMENT**

Bates County Health Center
501 N. Orange
P.O. Box 178
Butler, MO 64730
660-679-6108
Fax 600-679-6022

FUNERAL HOMES

ADRIAN:

Atkinson Funeral Home
142 E. Main
Adrian, MO 64720
816-297-2211

ARCHIE:

Atkinson Funeral Home
104 W. Walnut
Archie, MO 64725
816-293-5566

BUTLER:

**Mullinax Funeral Home &
Cremation Services**
10 S. High St.
Butler, MO 64730
660-679-0009

Schowengerdt Funeral Home
1301 N. Orange
Butler, MO 64730
660-679-6555

DREXEL:

**Mullinax Funeral Home &
Cremation Services**
136 E. Main St.
Drexel, MO 64742
816-657-4400

HUME:

**Coffel-Schneider Funeral
Home**
2nd St.
Hume, MO 64752
660-643-7531

RICH HILL:

Heuser Funeral Home
4th & Walnut
Rich Hill, MO 64779
417-395-2213

PUBLIC LIBRARY

ADRIAN:

Adrian Community Library
116 E. Main
PO Box 306
Adrian, MO 64720
816-297-2105

BUTLER:

Butler Public Library
100 W. Atkinson
Butler, MO 64730
660-679-4321

RICH HILL:

Rich Hill Memorial Library

514 E. Walnut
Rich Hill, MO 64779
417-395-2291

MENTAL HEALTH SERVICES

BUTLER:

Butler-Davidson Counseling Services

100 S. Sunset View Drive
Butler, MO 64730
660-200-7221

Jerry Morris, Psychologist

High Street Family Care Clinic
706 S. High St.
Butler, MO 64730
660-200-7135

Pathways Community Behavioral Healthcare, Inc.

205 E. Dakota
Butler, MO 64730
660-679-4636
Crisis Hotline 888-279-8188

NEVADA:

New Beginnings Health Services

800 S. Ash
Nevada, MO 64772
417-448-3677

RICH HILL:

We Care Counseling

Holly Chatain, Psychologist
320 N. 14th St.
Rich Hill, MO 64779
417-395-2727

DENTISTRY

ADRIAN:

Steve D. Dunning, DDS

20 E. Main
Adrian, MO 64720
816-297-2297

ARCHIE:

James M. Binkley DDS

402 S. Main
Archie, MO 64725
816-293-5980

BUTLER:

Bates County Dental Center

619 W. Nursery
Butler, MO 64730
660-679-6767

Corry R. Lanyon, DDS

1018 W. Fort Scott St.
Butler, MO 64730
660-679-6173

Thomas E. Moore, DDS
Orthodontists
200 W. Ohio
Butler, MO 64730
660-679-6105

RICH HILL:

Lon R. Tracy, DDS
512 E. Walnut
Rich Hill, MO 64779
816-380-6000

CHIROPRACTICS

ADRIAN:

Clark Carroll, DC
42 E. Main
Adrian, MO 64720
816-297-2797

BUTLER:

Wellness Insight
Travis Kershner, DC
101 N. Lyons
Butler, MO 64730
660-679-4423

A Minor Adjustment
Andy Minor, DC & Staff
Doctors
9 N. Main
Butler, MO 64730
660-679-6012

NURSING HOMES

ADRIAN:

Adrian Manor Nursing Home
402 W. 1st
Adrian, MO 64720
816-297-2107

BUTLER:

Breezy Meadows Nursing
Center
416 S. High
Butler, MO 64730
660-679-6157

Medicalodge of Butler
Nursery & Main
Butler, MO 64730
660-679-3179

RESIDENTIAL CARE
FACILITIES

ADRIAN:

Crystal Manor of Adrian
409 W. 1st
Adrian, MO 64720
816-297-8832

BUTLER:

Bristol Manor
411 S. Delaware
Butler, MO 64730
660-679-3661

**OPTOMETRISTS /
OPHTHALMOLOGISTS**

David Miller, OD
204 W. Chestnut
Butler, MO 64730
660-679-3261

Susan Miller, OD
204 W. Chestnut
Butler, MO 64730
660-679-3261

Mid America Eye Center
Allen Parelman, MD
Joseph Parelman, MD
204 W. Chestnut
Butler, MO 64730
660-679-6478

**PHYSICIANS /
MEDICAL CLINICS**

ADRIAN:

Adrian Family Care Clinic
102 E. Main
Adrian, MO 64720
816-297-2640

BUTLER:

C.W. Long & Associates
200 W. Chestnut
Butler, MO 64730
660-679-3149

**High Street Family Care
Clinic**

706 S. High
Butler, MO 64730
660-200-7135

**Nursery Street Family Care
Clinic**

617 W. Nursery
Butler, MO 64730
660-200-7133

RICH HILL:

**Rich Hill Family Medical
Clinic**

320 N. 14th
Rich Hill, MO 64779
417-395-2150

COMMUNITY SERVICES

Bates County Industries

Rt. 1
Butler, MO 64730
660-679-3667

**Butler Community Food
Pantry**

709 W. Ohio
Butler, MO 64730
660-679-3951

Care Connection

301 N. Main
Nevada, MO 64772
417-667-5847
(Assists Bates County residents
60 years & over with DME,
incontinence supplies, respite
care & transportation)

**Community Assistance
Clearing House**

709 W. Ohio
Butler, MO 64730
660-679-3951
All assistance for Salvation
Army, Food Pantry, Ministerial
Alliance must start here

**Division of Aging & Family
Support Division**

4 W. Ohio
Butler, MO 64730
660-679-3174

Domestic Violence Shelter

Moss House
415 N. Main St.
Nevada, MO 64772
417-667-3733
1-800-398-4271 Crisis Only
Line

**Osage Valley Electric
Cooperative Association**

Round Up Program
1321 N. Orange
Butler, MO 64730
660-679-3131

**Salvation Army
Happy Hill Church**

Ron Dunlap
660-679-5135

University Extension

Bates County Courthouse
Butler, MO 64730
660-679-4167

**West Central Missouri
Community Action Agency**

Bates County Outreach Office
5 E. Dakota
Butler, MO 64730
660-679-4108

Women's Health Services

West Central Missouri
Community Action Agency
1-888-577-4640
660-476-219

DIALYSIS**DSI-DaVita**

601 W. Nursery
Butler, MO 64730
660-679-6513

HOSPICE**Heartland Hospice**

612 W. Fort Scott St.
Butler, MO 64730
660-679-4300

THERAPY SERVICES

Bates County Memorial Hospital

615 W. Nursery
Butler, MO 64730
660-200-7000

Visiting Nurse Association

1604 E. Elm
Harrisonville, MO 64701
816-380-3654
Toll Free 800-231-9862

VETERINARIANS

ADRIAN:

Rolling Meadows Animal Hospital

East Hwy 18
Adrian, MO 64720
816-297-2006

BUTLER:

Bates County Veterinary Clinic

Hwy 52 & 49-Outer Rd
Butler, MO 64730
660-679-3120

Butler Animal Clinic

620 W. Harrison
Butler, MO 64730
660-679-6139

Sage Animal Health Clinic

716 W. Dakota
Butler, MO 64730
660-679-4111

SCHOOLS—PUBLIC

Adrian R-III

Box 98
Adrian, MO 64720
816-297-2158 High School
816-297-4460 Elementary

Ballard R-II

10247 NE St Rt 18
Butler, MO 64730
816-297-2656

Butler R-V High School

420 S. Fulton
Butler, MO 64730
660-679-6121

Butler R-V Elementary

4 N. High
Butler, MO 64730
660-679-6591

Hudson R-IX

15012 NE St Rt 52
Appleton City, MO 64724
660-476-5467

Hume R-VIII

Box 402
Hume, MO 64752
660-643-7411

Miami R-I

7638 NW St Rt J
Amoret, MO 64722
660-267-3484 High School
660-267-3495 Elementary

Rich Hill R-IV

703 N. 3rd
Rich Hill, MO 64779
417-395-4191 High School
471-395-2227 Elementary

SCHOOLS—PRIVATE

Harmony Mennonite School

Rt. 3 Box 164
Rich Hill, MO 64779
417-395-2558

Zion Lutheran School

Rt. 1 Box 31
Rockville, MO 64780
660-598-6213

**DAYCARE PROVIDERS /
PRESCHOOLS / HEAD
START CENTERS
(LICENSED)**

ADRIAN:

Adrian Head Start Center

311 W. 1st
Adrian, MO 64720
816-297-8829

Adrian R-III Preschool

601 N. Houston
Adrian, MO 64720
816-297-2710 (on campus site)
816-297-8804 (off campus site)

Hawkins Daycare

220 Skyline Dr.
Adrian, MO 64720
816-297-2842

AMORET:

Miami R-I Preschool

Rt. 1 Box 418
Amoret, MO 64722
660-267-3495

BUTLER:

Baby Bear

619 W. Harrison
Butler, MO 64730
660-679-5431

Butler Head Start Center

225 N. Main
Butler, MO 64730
660-679-5046

Butler R-V Preschool

4 N. High
Butler, MO 64730
660-679-6591

Lane Daycare

202 N. High
Butler, MO 64730
660-679-5840

Magic Years
1017 N. Orange
Butler, MO 64730
660-679-5437

Tender Times
201 S. Main
Butler, MO 64730
660-679-4865

Tot Lot II
2001 Stirling Dr.
Butler, MO 64730
660-679-5056

HUDSON:

Hudson R-IX Preschool
Rt. 3 Box 32-1
Appleton City, MO 64724
660-476-5467

HUME:

Community Preschool
Box 402
Hume, MO 64752
660-643-7270

RICH HILL:

Magic Years
721 S. 5th Street
Rich Hill, MO 64779
417-395-2424

Samantha Hopes
110 E. Maple
Rich Hill, MO 64779
417-395-4600

Rich Hill Head Start Center
422 N. 3rd
Rich Hill, MO 64779
417-395-2645

Bright Beginnings
721 S. 5th Street
Rich Hill, MO 64779
417-395-2424

**DETENTION / YOUTH
SERVICES FACILITIES**

BUTLER:

**Bates County Detention
Center**
Bates County Sheriff
Fort Scott St.
Butler, MO 64730
660-679-3232

RICH HILL:

**Rich Hill Youth Development
Services**
501 N. 14th
Rich Hill, MO 64779
417-395-4810

General Online Healthcare Resources

Doctors and Dentists--General

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

Hospitals and Clinics--General

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

Doctors and Dentists--Specialists

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

Other Healthcare Providers

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

Hospitals and Clinics--Specialized

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

Other Healthcare Facilities and Services

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

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

V. Detail Exhibits

[VVV Consultants LLC]

Patient Origin and Access

[VVV Consultants LLC]



Patient Origin by Region - Inpatient
 Bates, MO Residents Treated in HIDI Reporting Area
 Federal Fiscal Year: 2013
 Kansas Discharge Data Available From 2011 Q 1 through 2016 Q 1

Hospital	Total Discharges		Pediatric Age 0 - 17		Age 18 - 44		Adult Medical/Surgical Age 45 - 64		Age 65 - 74		Age 75+		Psychiatric		Obstetric		Newborn		Surg %
	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	
Bates County Memorial Hospital - Butler, MO	596	25.4%	5	0.8%	65	10.9%	126	21.1%	114	19.1%	285	47.8%	0		1	0.2%	0		10.7%
St. Joseph Medical Center - Kansas City, MO	343	14.6%	0		40	11.7%	90	26.2%	77	22.4%	92	26.8%	2	0.6%	22	6.4%	20	5.8%	34.7%
Nevada Regional Medical Center - Nevada, MO	178	7.6%	2	1.1%	2	1.1%	10	5.6%	5	2.8%	3	1.7%	43	24.2%	63	35.4%	50	28.1%	13.5%
Research Medical Center - Kansas City, MO	165	7.0%	0		27	16.4%	48	29.1%	44	26.7%	22	13.3%	7	4.2%	9	5.5%	8	4.8%	38.8%
Cass Regional Medical Center - Harrisonville, MO	139	5.9%	0		19	13.7%	40	28.8%	26	18.7%	41	29.5%	13	9.4%	0		0		17.3%
Saint Luke's Hospital of Kansas City - Kansas City, MO	109	4.6%	1	0.9%	18	16.5%	27	24.8%	23	21.1%	25	22.9%	2	1.8%	8	7.3%	5	4.6%	27.5%
The University of Kansas Hospital - Kansas City, KS	84	3.6%	5	6.0%	13	15.5%	32	38.1%	20	23.8%	13	15.5%	1	1.2%	0		0		38.1%
Shawnee Mission Health - Shawnee Mission, KS	78	3.3%	0		4	5.1%	25	32.1%	15	19.2%	23	29.5%	5	6.4%	3	3.8%	3	3.8%	43.6%
Belton Regional Medical Center - Belton, MO	60	2.6%	0		12	20.0%	22	36.7%	9	15.0%	17	28.3%	0		0		0		70.0%
Missouri Residents/Kansas Hospitals	54	2.3%	2	3.7%	2	3.7%	8	14.8%	3	5.6%	9	16.7%	4	7.4%	13	24.1%	13	24.1%	13.0%
Children's Mercy Kansas City - Kansas City, MO	51	2.2%	49	96.1%	1	2.0%	0		0		0		1	2.0%	0		0		17.6%
Golden Valley Memorial Healthcare - Clinton, MO	45	1.9%	0		7	15.6%	0		2	4.4%	5	11.1%	0		16	35.6%	15	33.3%	15.6%
Overland Park Regional Medical Center - Overland Park, KS	45	1.9%	0		3	6.7%	8	17.8%	7	15.6%	5	11.1%	0		11	24.4%	11	24.4%	42.2%
Menorah Medical Center - Overland Park, KS	39	1.7%	0		7	17.9%	10	25.6%	9	23.1%	9	23.1%	0		2	5.1%	2	5.1%	51.3%
Saint Luke's East Hospital - Lees Summit, MO	39	1.7%	1	2.6%	4	10.3%	4	10.3%	3	7.7%	4	10.3%	0		12	30.8%	11	28.2%	38.5%
Research Psychiatric Center - Kansas City, MO	37	1.6%	0		0		0		1	2.7%	1	2.7%	35	94.6%	0		0		
Heartland Behavioral Health Services - Nevada, MO	25	1.1%	0		0		0		0		0		25	100.0%	0		0		
Saint Luke's South - Overland Park, KS	24	1.0%	0		2	8.3%	5	20.8%	8	33.3%	4	16.7%	0		2	8.3%	3	12.5%	37.5%
Freeman Health System - Joplin, MO	19	0.8%	0		4	21.1%	6	31.6%	1	5.3%	3	15.8%	5	26.3%	0		0		15.8%



Patient Origin by Region - Inpatient
 Bates, MO Residents Treated in HIDI Reporting Area
 Federal Fiscal Year: 2013
 Kansas Discharge Data Available From 2011 Q 1 through 2016 Q 1

Hospital	Total Discharges		Pediatric Age 0 - 17		Age 18 - 44		Adult Medical/Surgical Age 45 - 64		Age 65 - 74		Age 75+		Psychiatric		Obstetric		Newborn		Surg %
	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	
Ellett Memorial Hospital - Appleton City, MO	19	0.8%	1	5.3%	5	26.3%	3	15.8%	5	26.3%	5	26.3%	0		0		0		
Children's Mercy Hospital Kansas - Overland Park, KS	19	0.8%	19	100.0%	0		0		0		0		0		0		0		
Centerpoint Medical Center - Independence, MO	18	0.8%	0		2	11.1%	4	22.2%	3	16.7%	8	44.4%	1	5.6%	0		0		33.3%
University Hospital and Clinics - Columbia, MO	14	0.6%	0		4	28.6%	8	57.1%	0		2	14.3%	0		0		0		92.9%
Olathe Medical Center Inc. - Olathe, KS	14	0.6%	0		1	7.1%	4	28.6%	1	7.1%	2	14.3%	0		3	21.4%	3	21.4%	50.0%
Truman Medical Center Lakewood - Kansas City, MO	14	0.6%	0		1	7.1%	3	21.4%	0		0		6	42.9%	2	14.3%	2	14.3%	14.3%
Truman Medical Center Hospital Hill - Kansas City, MO	12	0.5%	0		4	33.3%	3	25.0%	0		0		1	8.3%	2	16.7%	2	16.7%	16.7%
North Kansas City Hospital - North Kansas City, MO	12	0.5%	0		3	25.0%	2	16.7%	1	8.3%	6	50.0%	0		0		0		66.7%
Lee's Summit Medical Center - Lees Summit, MO	12	0.5%	0		0		7	58.3%	0		5	41.7%	0		0		0		41.7%
CoxHealth - Springfield, MO	11	0.5%	0		0		2	18.2%	3	27.3%	1	9.1%	4	36.4%	1	9.1%	0		9.1%
Mercy Hospital Joplin - Joplin, MO	10	0.4%	0		0		1	10.0%	3	30.0%	4	40.0%	2	20.0%	0		0		40.0%
Mercy Hospital Springfield - Springfield, MO	10	0.4%	2	20.0%	2	20.0%	1	10.0%	2	20.0%	1	10.0%	2	20.0%	0		0		10.0%
Crittenton - Kansas City, MO	8	0.3%	0		0		0		0		0		8	100.0%	0		0		
Lakeland Behavioral Health System - Springfield, MO	5	0.2%	0		0		0		0		0		5	100.0%	0		0		
Kindred Hospital Kansas City - Kansas City, MO	5	0.2%	0		0		2	40.0%	1	20.0%	2	40.0%	0		0		0		80.0%
Other Hospitals	34	1.4%	0		8	23.5%	11	32.4%	3	8.8%	3	8.8%	8	23.5%	0		1	2.9%	32.4%
Hospital Total	2,347	100.0%	87	3.7%	260	11.1%	512	21.8%	389	16.6%	600	25.6%	180	7.7%	170	7.2%	149	6.3%	25.0%



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Hospital	Total Discharges		Pediatric Age 0 - 17		Age 18 - 44		Adult Medical/Surgical Age 45 - 64		Age 65 - 74		Age 75+		Psychiatric		Obstetric		Newborn		Surg %
	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	
Bates County Memorial Hospital - Butler, MO	654	28.0%	4	0.6%	80	12.2%	171	26.1%	98	15.0%	295	45.1%	5	0.8%	1	0.2%	0		11.9%
St. Joseph Medical Center - Kansas City, MO	315	13.5%	0		31	9.8%	86	27.3%	55	17.5%	88	27.9%	4	1.3%	26	8.3%	25	7.9%	27.6%
Research Medical Center - Kansas City, MO	195	8.3%	1	0.5%	27	13.8%	77	39.5%	25	12.8%	14	7.2%	36	18.5%	8	4.1%	7	3.6%	32.3%
Nevada Regional Medical Center - Nevada, MO	184	7.9%	1	0.5%	10	5.4%	7	3.8%	2	1.1%	8	4.3%	28	15.2%	65	35.3%	63	34.2%	9.8%
Cass Regional Medical Center - Harrisonville, MO	135	5.8%	0		23	17.0%	34	25.2%	33	24.4%	41	30.4%	4	3.0%	0		0		14.1%
Saint Luke's Hospital of Kansas City - Kansas City, MO	126	5.4%	0		18	14.3%	35	27.8%	30	23.8%	21	16.7%	3	2.4%	9	7.1%	10	7.9%	24.6%
The University of Kansas Hospital - Kansas City, KS	75	3.2%	1	1.3%	16	21.3%	31	41.3%	12	16.0%	13	17.3%	1	1.3%	1	1.3%	0		41.3%
Golden Valley Memorial Healthcare - Clinton, MO	65	2.8%	0		2	3.1%	6	9.2%	2	3.1%	2	3.1%	0		27	41.5%	26	40.0%	18.5%
Menorah Medical Center - Overland Park, KS	61	2.6%	1	1.6%	8	13.1%	11	18.0%	20	32.8%	12	19.7%	0		5	8.2%	4	6.6%	47.5%
Shawnee Mission Health - Shawnee Mission, KS	55	2.4%	0		4	7.3%	13	23.6%	10	18.2%	11	20.0%	4	7.3%	7	12.7%	6	10.9%	38.2%
Overland Park Regional Medical Center - Overland Park, KS	52	2.2%	0		3	5.8%	3	5.8%	2	3.8%	2	3.8%	0		21	40.4%	21	40.4%	23.1%
Children's Mercy Kansas City - Kansas City, MO	51	2.2%	51	100.0%	0		0		0		0		0		0		0		35.3%
Belton Regional Medical Center - Belton, MO	48	2.1%	0		6	12.5%	17	35.4%	12	25.0%	13	27.1%	0		0		0		66.7%
Saint Luke's East Hospital - Lees Summit, MO	39	1.7%	0		5	12.8%	4	10.3%	3	7.7%	3	7.7%	0		13	33.3%	11	28.2%	15.4%
Missouri Residents/Kansas Hospitals	29	1.2%	0		2	6.9%	5	17.2%	8	27.6%	3	10.3%	0		6	20.7%	5	17.2%	20.7%
Saint Luke's South - Overland Park, KS	27	1.2%	0		2	7.4%	4	14.8%	5	18.5%	2	7.4%	0		7	25.9%	7	25.9%	33.3%
Heartland Behavioral Health Services - Nevada, MO	24	1.0%	0		0		0		0		0		24	100.0%	0		0		
Centerpoint Medical Center - Independence, MO	19	0.8%	0		0		7	36.8%	5	26.3%	3	15.8%	0		1	5.3%	3	15.8%	21.1%
Children's Mercy Hospital Kansas - Overland Park, KS	18	0.8%	16	88.9%	0		0		0		0		2	11.1%	0		0		



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Hospital	Total Discharges		Pediatric Age 0 - 17		Age 18 - 44		Adult Medical/Surgical Age 45 - 64		Age 65 - 74		Age 75+		Psychiatric		Obstetric		Newborn		Surg %
	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	
Freeman Health System - Joplin, MO	15	0.6%	0		5	33.3%	1	6.7%	4	26.7%	2	13.3%	1	6.7%	1	6.7%	1	6.7%	46.7%
Lee's Summit Medical Center - Lees Summit, MO	12	0.5%	0		0		4	33.3%	2	16.7%	6	50.0%	0		0		0		33.3%
Eliett Memorial Hospital - Appleton City, MO	11	0.5%	0		0		4	36.4%	2	18.2%	5	45.5%	0		0		0		
Olathe Medical Center Inc. - Olathe, KS	10	0.4%	0		2	20.0%	1	10.0%	2	20.0%	5	50.0%	0		0		0		50.0%
Truman Medical Center Hospital Hill - Kansas City, MO	10	0.4%	0		0		7	70.0%	0		0		1	10.0%	1	10.0%	1	10.0%	
North Kansas City Hospital - North Kansas City, MO	10	0.4%	0		1	10.0%	4	40.0%	3	30.0%	0		0		1	10.0%	1	10.0%	60.0%
Mercy Hospital Joplin - Joplin, MO	9	0.4%	0		0		1	11.1%	2	22.2%	4	44.4%	2	22.2%	0		0		22.2%
University Hospital and Clinics - Columbia, MO	9	0.4%	1	11.1%	3	33.3%	4	44.4%	1	11.1%	0		0		0		0		77.8%
Kindred Hospital Kansas City - Kansas City, MO	6	0.3%	0		2	33.3%	3	50.0%	1	16.7%	0		0		0		0		
Citizens Memorial Hospital - Bolivar, MO	5	0.2%	0		0		1	20.0%	0		0		0		2	40.0%	2	40.0%	20.0%
Western Missouri Medical Center - Warrensburg, MO	5	0.2%	0		0		0		0		0		0		2	40.0%	3	60.0%	20.0%
Research Psychiatric Center - Kansas City, MO	5	0.2%	0		0		0		0		0		5	100.0%	0		0		
Other Hospitals	59	2.5%	6	10.2%	12	20.3%	10	16.9%	6	10.2%	8	13.6%	15	25.4%	1	1.7%	1	1.7%	22.0%
Hospital Total	2,338	100.0%	82	3.5%	262	11.2%	551	23.6%	345	14.8%	561	24.0%	135	5.8%	205	8.8%	197	8.4%	22.3%



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	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	
Bates County Memorial Hospital - Butler, MO	751	31.3%	3	0.4%	71	9.5%	188	25.0%	146	19.4%	339	45.1%	4	0.5%	0	0	9.6%
St. Joseph Medical Center - Kansas City, MO	274	11.4%	0		36	13.1%	88	32.1%	53	19.3%	84	30.7%	1	0.4%	7	2.6%	28.8%
Research Medical Center - Kansas City, MO	228	9.5%	0		25	11.0%	73	32.0%	31	13.6%	35	15.4%	39	17.1%	15	6.6%	30.7%
Nevada Regional Medical Center - Nevada, MO	167	7.0%	0		5	3.0%	11	6.6%	6	3.6%	8	4.8%	22	13.2%	57	34.1%	9.0%
Saint Luke's Hospital of Kansas City - Kansas City, MO	113	4.7%	1	0.9%	14	12.4%	41	36.3%	29	25.7%	18	15.9%	1	0.9%	5	4.4%	25.7%
Cass Regional Medical Center - Harrisonville, MO	106	4.4%	0		11	10.4%	26	24.5%	25	23.6%	37	34.9%	7	6.6%	0	0	17.0%
The University of Kansas Hospital - Kansas City, KS	97	4.0%	1	1.0%	19	19.6%	33	34.0%	19	19.6%	24	24.7%	0		1	1.0%	43.3%
Golden Valley Memorial Healthcare - Clinton, MO	81	3.4%	2	2.5%	5	6.2%	4	4.9%	3	3.7%	4	4.9%	0		31	38.3%	22.2%
Saint Luke's East Hospital - Lees Summit, MO	78	3.3%	0		8	10.3%	9	11.5%	7	9.0%	14	17.9%	0		20	25.6%	20.5%
Menorah Medical Center - Overland Park, KS	57	2.4%	1	1.8%	5	8.8%	23	40.4%	12	21.1%	7	12.3%	1	1.8%	4	7.0%	47.4%
Belton Regional Medical Center - Belton, MO	50	2.1%	0		5	10.0%	12	24.0%	13	26.0%	20	40.0%	0		0	0	74.0%
Missouri Residents/Kansas Hospitals	46	1.9%	1	2.2%	2	4.3%	10	21.7%	5	10.9%	4	8.7%	0		12	26.1%	13.0%
Children's Mercy Kansas City - Kansas City, MO	41	1.7%	41	100.0%	0		0		0		0		0		0	0	31.7%
Shawnee Mission Health - Shawnee Mission, KS	39	1.6%	0		1	2.6%	10	25.6%	11	28.2%	9	23.1%	2	5.1%	3	7.7%	30.8%
Overland Park Regional Medical Center - Overland Park, KS	38	1.6%	0		3	7.9%	5	13.2%	4	10.5%	8	21.1%	1	2.6%	8	21.1%	26.3%
Saint Luke's South - Overland Park, KS	30	1.3%	0		3	10.0%	7	23.3%	4	13.3%	4	13.3%	0		6	20.0%	26.7%
Heartland Behavioral Health Services - Nevada, MO	19	0.8%	0		0		0		0		0		19	100.0%	0	0	
Olathe Medical Center Inc. - Olathe, KS	19	0.8%	0		6	31.6%	5	26.3%	3	15.8%	4	21.1%	0		1	5.3%	68.4%
Freeman Health System - Joplin, MO	18	0.8%	0		4	22.2%	1	5.6%	6	33.3%	7	38.9%	0		0	0	38.9%
Elliott Memorial Hospital - Appleton City,	14	0.6%	0		1	7.1%	3	21.4%	1	7.1%	9	64.3%	0		0	0	



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	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%	Cases	%			
MO																			
North Kansas City Hospital - North Kansas City, MO	13	0.5%	0		0		1	7.7%	1	7.7%	11	84.6%	0		0	0	38.5%		
University Hospital and Clinics - Columbia, MO	12	0.5%	0		5	41.7%	6	50.0%	1	8.3%	0		0		0	0	75.0%		
Mercy Hospital Joplin - Joplin, MO	11	0.5%	0		0		2	18.2%	4	36.4%	3	27.3%	0		2	18.2%	45.5%		
Mercy Hospital Springfield - Springfield, MO	10	0.4%	2	20.0%	1	10.0%	4	40.0%	3	30.0%	0		0		0	0	50.0%		
Children's Mercy Hospital Kansas - Overland Park, KS	10	0.4%	10	100.0%	0		0		0		0		0		0	0			
Lee's Summit Medical Center - Lees Summit, MO	8	0.3%	0		1	12.5%	1	12.5%	4	50.0%	2	25.0%	0		0	0	37.5%		
Kindred Hospital Kansas City - Kansas City, MO	8	0.3%	0		1	12.5%	4	50.0%	1	12.5%	2	25.0%	0		0	0	25.0%		
Centerpoint Medical Center - Independence, MO	6	0.3%	0		0		0		2	33.3%	1	16.7%	0		2	33.3%	66.7%		
Truman Medical Center Hospital Hill - Kansas City, MO	5	0.2%	0		2	40.0%	1	20.0%	0		0		0		1	20.0%	20.0%		
Truman Medical Center Lakewood - Kansas City, MO	5	0.2%	0		0		0		0		1	20.0%	0		2	40.0%	20.0%		
Other Hospitals	43	1.8%	0		5	11.6%	9	20.9%	5	11.6%	4	9.3%	18	41.9%	2	4.7%	9.3%		
Hospital Total	2,397	100.0%	62	2.6%	239	10.0%	577	24.1%	399	16.6%	659	27.5%	115	4.8%	179	7.5%	167	7.0%	22.2%

Town Hall Attendees Notes and Feedback

[VVV Consultants LLC]

Bates County Memorial Hospital (Primary Service Area) - CHNA Town Hall 8/9/2016, N=43

Category	Last name	First name	Organization	Address	City	ST	Zip
Business people and merchants (e.g., who sell tobacco, alcohol, or other drugs).	Brooks	Misty	Medicalodge of Butler	103 E Nursery St	Butler	MO	64730
Health insurers.	Brown	Gordon	Gordon Brown Insurance	100 Sunset Dr	Butler	MO	64730
Physicians.	Bustle	John	Adrian Family Care Clinic	102 E. Main St.	Adrian	MO	64720
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Cole	Judy	Bates County Memorial Hospital	615 W Nursery St	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Cook	Gayle	Bates County Memorial Hospital	615 W Nursery St	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Floyd	Terri	Bates County Memorial Hospital	1705 Hickory Lane	Fort Scott	KS	66701
Education officials and staff - school superintendents, principals, teachers and school nurses.	Goldammer	Debbie		412 Meadow Lane	Butler	MO	64730
Health insurers.	Goodman	Elaine	Gordon Brown Insurance	100 Sunset Dr	Butler	MO	64730
Leaders in health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Hannon	Edward	Bates County Memorial Hospital	615 W Nursery St	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Hasting	Lois	Head Start	206 N Mulberry	Adrian	MO	64720
Business people and merchants (e.g., who sell tobacco, alcohol, or other drugs).	Henderson	Ginger	Monarch Pharmacy	11 S Orange St	Butler	MO	64730
The hospital board leadership members.	Hess	Margaret	Bates County Memorial Hospital	615 W Nursery St	Butler	MO	64730
The hospital board leadership members.	Hess	Phil	Bates County Memorial Hospital	615 W Nursery St	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Jackson	Melinda	Bates County Memorial Hospital	615 W Nursery St	Butler	MO	64730
Business people and merchants (e.g., who sell tobacco, alcohol, or other drugs).	Jacobs	Kim	Corner Hardware & Plumbing	107 W Ohio St	Butler	MO	64730
Business people and merchants (e.g., who sell tobacco, alcohol, or other drugs).	Jeffries	Bailee	Breezy Meadows	416 South High Street	Butler	MO	64730
The hospital board leadership members.	Jennings	Linda	Bates County Memorial Hospital	106 Country Club Terrace	Butler	MO	64730
The hospital board leadership members.	Jones	Jerry	Bates County Memorial Hospital	571 N.W. County Rd. 1502	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Kaelke	Amy	Children's Center	PO Box 423	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Keiser	Mike	Bates County Memorial Hospital	615 W Nursery St	Butler	MO	64730
Business people and merchants (e.g., who sell tobacco, alcohol, or other drugs).	Kershner	Vicki	West Central Community Action	225 N Main St	Butler	MO	64730
The hospital board leadership members.	King	Rick	Bates County Memorial Hospital	3188 N.W. County Rd. 5001	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Lewis	Carol	Bates County Memorial Hospital	615 W Nursery St	Butler	MO	64730
Business people and merchants (e.g., who sell tobacco, alcohol, or other drugs).	Long	Curtis	C.W. Long Enterprises	200 W Chestnut St	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	McGregor	Tara	Pathways	205 E Dakota St	Butler	MO	64730
Physicians.	Miller	James	Nursery Street Family Care Clinic	617 W. Nursery St.	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Moles	Judy	WCMCAA	106 W 4th St	Appleton City	MO	64724
Mental health providers.	Morris	Jerry	Community Mental Health Consultants	815 S. Ash	Nevada	MO	64772
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Phillips	Kelly	Bates County Memorial Hospital	615 W Nursery St	Butler	MO	64730
Political, appointed and elected officials.	Pike	Patricia	Missouri House of Representatives	201 W Capitol Ave	Jefferson City	MO	65101
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Pope	Chris	Bates County Memorial Hospital	615 W Nursery St	Butler	MO	64730

Bates County Memorial Hospital (Primary Service Area) - CHNA Town Hall 8/9/2016, N=43

Category	Last name	First name	Organization	Address	City	ST	Zip
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Rhoades	Jean	Dusty Attic	813 N Orange St	Butler	MO	64730
Press (Paper, TV, Radio)	Schowengerdt	Paula	Messenger-Hub News Publications	39 East Main Street	Adrian	MO	64720
The hospital board leadership members.	Shade	Jim	Bates County Memorial Hospital	1467 N.E. State Route 52	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Shannon	Bjoke	Bates County Memorial Hospital	PO Box 17	Rich Hill	MO	64779
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Shine	Theresa	NSFCC				
Business people and merchants (e.g., who sell tobacco, alcohol, or other drugs).	Simpson	Carl	Edward Jones Investment	100 W Ohio St	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Stach	Gayle	Ward II Council	614 W Ohio	Butler	MO	64730
The hospital board leadership members.	Taranto	Mike	Bates County Memorial Hospital	1399 N.E. Kelly Dr.	Butler	MO	64730
Family Nurse Practitioner.	Tourtillott	Misty	High Street Family Care Clinic	706 S. High St.	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Warder	Gayle	Bates County Memorial Hospital	502 W Ft Scott	Butler	MO	66730
Leaders in health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Welston	Jody	Bates County Memorial Hospital	615 W Nursery St	Butler	MO	64730
Leaders in other not-for-profit health care organizations, such as hospitals, clinics, nursing homes and home-based and community-based services.	Williams	Candy	Bates County Memorial Hospital	615 W Nursery St	Butler	MO	64730

Bates County Memorial Hospital (Primary Service Area) - Community Health Needs Assessment Meeting

8.9.2016

N=43

Community Members Present:

- Parents
- Farmers
- Nursing Homes
- Those taking care of Seniors
- Providers

TAB 1: Demographic Profile

- Veterans are going to Nevada for care

TAB 2: Economic / Business Profile

- There is a homeless population living in vacant houses
- Unemployment is higher now
- People are going to Kansas City to work

TAB 3: Educational Profile

- Schools have school nurses giving screenings

TAB 5: Hospitalization / Provider Profile

- Have a good group of people working in the ED

TAB 6: Behavioral Health Profile

- Drunk driving accidents is an issue coming through the ED

TAB 7: Risk Indicators and Factors Profile

- There is only one fitness center in town, it may not be affordable for everyone

TAB 10: Preventative Quality Measures Profile

- Mammographies are increasing here, have a great wellness program in place

Impacting Health in our Community:

- We moved from a state road to an Interstate

STRENGTHS:

- Pharmacies
- Health Department
- Hospital
- State of the art equipment (particularly Radiology)
- Caring hospital staff
- Engaged providers (integrated care)

- Senior Center
- Enough Primary Care providers
- Physical Therapy department
- Nursing Homes
- Children's Center
- Financially sound hospital
- Good Specialist support
- Good patients (appreciate care)
- Diabetic Education
- Cardiac Rehab
- Patient Centered Medical Homes
- Food Pantry
- Community Café
- Ministerial alliance
- Impact Program in schools through health foundation

WEAKNESSES:

- Urgent care
- Drug abuse
- Behavioral health intervention
- Chronic disease management (COPD, Diabetes)
- Teen pregnancy
- Sexually transmitted infections education
- Home health
- Cost of care
- Mental health (diagnosis, placement)
- Assisted living
- Community Center (including youth activities)
- Specialists (ENT, Derm, OBGYN, Ortho, Endo, Card, Chiropractors)
- Return of health fair
- Billing department
- Homeless shelter
- Affordable insurance
- Providers accepting Medicaid
- Smoking
- Obesity (nutrition, fitness)
- Economic development

Children's Center of Southwest Missouri

413 W Howard, PO Box 423, Butler, MO 64730

Phone: 417-549-0900

Executive Director: Vicki Dudley

Bates County Memorial Hospital (PSA) - CHNA Town Hall Request

Request: On August 2, Edward Hannon, CEO at BCMH, received a request from Vicki Dudley, Executive Director at the Children's Center, to ask an additional question for them, as they too are required to do a CHNA. BCMH had already finished their CHNA survey, but offered to find a way to ask this question at the Town Hall meeting and give the Children's Center any information or comments gathered.

During the BCMH Town Hall meeting on 8/9/2016, the following question was proposed. All 43 Town Hall attendees were asked to write down their feedback to the question on their note cards to be addressed during group discussion later on in the meeting:

- 1) Are the needs of child victims of physical and sexual abuse and their families met in a manner that is respectful of their diverse culture?

During group discussion at the Town Hall meeting, all 43 attendees came to a consensus that the Children's Center of Southwest Missouri is considered a strength in the community and should be documented as so in the final Community Health Needs Assessment report.

Children's Center Profile

Children's Center of Southwest Missouri, a not-for-profit child advocacy center headquartered in Joplin, Missouri has been providing victim assistance services since May 5, 1997 to sexually abused and/or physically abused children, ages birth through 17, and their families. As a child advocacy center (CAC), Children's Center provides many benefits, both to victims and families as well as the community as a whole. For victims and their families, the benefits of a CAC are readily apparent: consistent and prompt follow-up to abuse reports; crisis intervention; consistent and compassionate support for the child and family; referrals to professionals with expertise in specialized fields; dramatically fewer victim interviews; and increased successful prosecutions.

Children's Center was founded in 1996 by a group of citizens concerned that children should not be interviewed over and over again about an abusive incident. At that time many children were interviewed in busy police departments or in their own homes where the abuse occurred. Medical exams were provided in emergency rooms where children waited for hours to get an exam. Prosecution rates were low and the number of unresolved cases was high. With the intent of solving these problems, this community group became the first board of directors of Children's Center. Our Joplin center opened May 5, 1997 with the purpose of helping sexually abused and severely physically abused children and their families.

- Because of unrelenting community interest and support in Barry and Lawrence Counties, Children's Center opened a second child advocacy center in Monett, Missouri in December, 2001. This center is housed in a donated building that was built specifically for our child advocacy center.

- In 2003, a hardworking community group in Nevada, Missouri and surrounding counties asked that a center be opened in Nevada to provide child advocacy services locally for child abuse victims in Barton, Bates, Cedar, Dade, St. Clair and Vernon Counties. This center began providing services in January, 2004 in space donated by Crowder College. In 2007, the Center moved to a building just off the Nevada Square.
- In October, 2009, Children's Center opened a fourth child advocacy center in Butler, Missouri. Once again a dedicated group of community individuals and a strong multidisciplinary team, all wanting a better way to provide services for alleged child abuse victims and their families, made this center possible.

These centers were opened so that families and investigators in these rural areas would not have to drive to Joplin for services.

Children's Center of SW MO has provided advocacy services to over 11,000 children since opening in 1997 in twelve southwest Missouri Counties. Services are available to all children regardless of religion, race, disability, national origin or ancestry and at no charge to the families.

Children's Center Services

Forensic Interview

The forensic interview is of vital importance in the investigation and prosecution of child abuse.

When a concern arises that a child has been abused, the child is interviewed by Children's Center's highly qualified, neutral forensic interviewers, in a warm welcoming child-friendly, age-appropriate setting. This forensic interview is an objective, non-leading and age appropriate, information-gathering process. During the interview, the interviewer wears an earpiece allowing multidisciplinary team members who are discreetly observing the interview to ask questions.

Medical Evaluations

All Medical Evaluations are performed by trained medical professionals with pediatric experience and child abuse expertise. The exams take place in a warm, child friendly examination room. A child is never forced to have an exam and every effort is made to make the child feel comfortable and non-threatened during the exam.

- **Sexual Abuse Forensic Exams (SAFE):**
When there is a concern that a child has been sexually abused, a SAFE exam will be performed. This exam is a comprehensive, non-invasive medical examination much like a well-child check-up. Our medical provider will use a colposcope as part of the exam. This state of the art forensic equipment records evidence of abuse.
- **Child At Risk Exam (CARE):**
This exam is a comprehensive, head-to-toe physical exam used to document recent and/or past physical trauma to a child. Physical evidence is photographed using state of the art forensic equipment. This exam is also a part of our drug decontamination protocols for children who have been removed from a methamphetamine-producing environment.

Multidisciplinary Team (MDT)

It takes a team effort to investigate child abuse. Children's Center is proud to serve in a coordinating capacity in an effort to ensure that all team agencies are working individually and collaboratively to provide the most comprehensive and child-friendly services for child victims of abuse. Team agencies include law enforcement officers, juvenile officers, prosecutors, medical personnel, Children's Division workers, therapists and Children's Center staff.

Advocacy

Our Child Advocates are key in helping the child victim and the non-offending caregivers through the entire investigation process. The advocate is the first to welcome the child and family, explaining and answering questions about the investigation process. Child Advocates assist the non-offending caregiver in stabilizing the family unit and protecting the child, act as liaison between the family and multidisciplinary team, and guide the family through the court process.

Community Health Needs Assessment			
Bates County Memorial Hospital PSA - Strengths (White Cards) N=43			
#	Today: What are the strengths of our community that contribute to health?	#	Today: What are the strengths of our community that contribute to health?
1	Imaging services - Investment in updating equipment	62	School health oncussion program
2	Hospitalists - Provides opportunities for Bates County physicians to see more patients as in office	63	Primary Care physicians
3	EICU - Coming technology enhancement for patient care	64	FNP
4	Good patient care	65	County Health Department
5	Caring employers	66	Pathways FQHC
6	Great patients to take care of	67	Hospital
7	Providers who want to improve hospital	68	BCMh
8	Health Department	69	ER
9	Community Health and School Nurse strength - Good ER and good access to healthcare	70	More specialists coming into the community
10	Number of Primary Care providers	71	Pathways Dental/FQHC
11	Accessible healthcare/hospital for a rural county	72	Hospital
12	WC Family Planning	73	Pharmacy
13	Community connection between faith communities	74	Collaboration between staff and Primary Care clinics, hospital, mental health unit and ER
14	Food pantry has mass distribution of healthy foods	75	Flexible and committed emergency care - Medical and BH
15	Insurance broker - Several companies represented locally	76	Modernizing and evaluating - HHS, DM
16	Great Hospice	77	Have plenty of providers per capita
17	Home Health care	78	Good ER - 24 hour coverage and good staff
18	Great nurses	79	Interstate has lessened MVAs
19	Substance abuse support group/drug court	80	Child abuse center helps with getting care to families
20	Many local physicians	81	Improving on community working together for the patient - Diabetic education, Cardiac Rehab
21	Local nursing homes so resident can be close to home/family.	82	Senior Center is great for the older population
22	Close to rural area	83	ER - Timely and service
23	Friendly	84	State road to Interstate
24	Have specialty doctors within hospital when patients stay	85	Specialists from city - saves trips
25	Hospitalists	86	Visiting specialists that come to our hospital
26	Small town - everybody (staff) knows you or family	87	More information of the service of Health Departments
27	Home Health	88	We have two OBGYNs and Physical Therapy for monitored and rehab exercise
28	Good Pharmacy	89	Great mammogram department and follow up
29	Good Hospice care	90	Center of the community
30	Health Center	91	Great ED
31	Vaccinations	92	Hospitalist doing great job - Well trained
32	Several pharmacies in town	93	Top notch Radiology department
33	School screenings	94	Number of Primary Care providers
34	Primary Care providers - There are a few Primary Care providers that have been here for a long time	95	Excellent inpatient care

Community Health Needs Assessment

Bates County Memorial Hospital PSA - Strengths (White Cards) N=43

#	Today: What are the strengths of our community that contribute to health?	#	Today: What are the strengths of our community that contribute to health?
35	All three retail pharmacies are preferred with patients	96	Schools are good
36	Great volunteer program	97	Patient Centered Medical Homes - delivery of care in team approach
37	Ortho, PT - for my clients I have seen, great results from the PT department	98	Portion of population, i.e. medical care providers and non-providers who are highly devoted to providing excellent health care - Sole provider
38	School screening - Dental and Vision	99	ER
39	Health Center immunizations new for insurances	100	Health Department
40	Children's Center	101	Pharmacies
41	FQHC implemented	102	OBGYN
42	Children's Center does a great job	103	ER services
43	Wonderful track in Butler that schools allows community to use as well as Adrian school	104	Overall patient care
44	Primary care physicians	105	Ambulance
45	BCMh a plus	106	Outpatient therapy
46	BCMh	107	Community Health
47	Children's Center/safe house	108	Quality, caring people in the industry
48	Excellent Radiology	109	Patient care
49	Local	110	ER care
50	Financially sound facility	111	Good Primary Care base
51	State road to Interstate	112	Patient Centered Medical Home initiative
52	Free exams for school athletes	113	Great current specialist support
53	Concussion exams for county youth	114	Great ER staff/hospital staff
54	Hospitalist program	115	Quality healthcare teams who live among us and care about our needs
55	Have very qualified or good quality physicians	116	Dedicated and caring professionals
56	Hospital that is progressive and wanting to remain its own entity	117	Emergency care
57	Hospitalists	118	Imaging services
58	Pharmacy	119	ER
59	Health Department	120	Wellness
60	Physicians/Hospitalist	121	State of the art equipment
61	Engaged providers	122	Coding staff

Community Health Needs Assessment			
Bates County Memorial Hospital PSA - Weakness (Color Cards) N=43			
#	Today: What are the weaknesses of our community that contribute to health?	#	Today: What are the weaknesses of our community that contribute to health?
1	Can't plan well because everything is changing	70	Obesity
2	Hard job evolving coordinated care with providers staying overwhelmed	71	Urgent Care
3	In higher stress for providers as volume increases	72	Cost of care
4	Substance abuse	73	County HSA
5	Obesity - Poverty	74	Behavioral Health/Mental Health
6	Attitude to hospital billing	75	Urgent Care available
7	Prompter service - Less wait time	76	Smoking cessation
8	Able to relate more accurately between patient and personnel	77	Diabetes/obesity
9	Better education - So better choices are made	78	Convenient
10	Assisted Living	79	Mental Health
11	Substance abuse - Maybe state mandate	80	Abuse - Physical and Sexual
12	Go back to have the Health Fair	81	Substance abuse
13	Help the uninsured	82	Need Urgent Care
14	More formal plan to coordinate and develop coordination of integrated care components	83	Transportation to grocery store and doctors
15	Prevention and wellness program expansion	84	Dentistry core for children on Medicaid
16	Coverage of the 20% that have no healthcare	85	Assisted Living
17	Need homeless shelter and assistance for people to become self sufficient	86	Specialists - ENT, Derm, OBGYN, Ortho, Cardio, Mental Health
18	Need community center and to track way to exercise in all types of wealth. Classes to the public to improve on wellness with regular exercise.	87	No insurance - frequent ER visits, not established with a Primary Care provider
19	Affordable health insurance	88	Drug/alcohol use
20	Obesity	89	Transportation to specialists for providers not in the community
21	OB care	90	STD
22	Pediatrician	91	Adjusting prices of services to be more in line with what is available in the KC metro
23	Assisted Living	92	Income/family gap with the ACA
24	Specialists - Endocrinologist, Dermatologist	93	Primary Care providers are musical chairs doctors
25	Improve hospital wellness program	94	OBGYN services - Need maternity ward
26	Recruit specialists - Cardiologist, Ortho, Dentist	95	Pediatric doctors
27	Focus on obesity	96	ENT
28	Diabetes/chronic disease	97	Local billing - no outside source
29	Wellness - Exercise	98	Urgent Care
30	Drug/alcohol abuse	99	Diagnostic Imaging Center
31	Mental health services	100	Providers that accept Medicaid including Dentists, Optometrists, ENT
32	Child care services	101	Quality of providers - Wrong, don't or take too long to diagnose
33	Chiropractor and Dentists	102	Mental Health - Could change depression, drugs, obesity, suicide
34	Family Planning	103	What's different in other counties that show better stats?
35	Home Health	104	Better communication between community and hospital

Community Health Needs Assessment			
Bates County Memorial Hospital PSA - Weakness (Color Cards) N=43			
#	Today: What are the weaknesses of our community that contribute to health?	#	Today: What are the weaknesses of our community that contribute to health?
36	Med services to homeless and uninsured	105	More outreach/education
37	Clearer billing services	106	Billing - Confusing to people and delayed
38	Billing Medicare for wellness visits	107	Substance abuse counseling
39	Drug abuse in community	108	Only one Assisted Living
40	Not enough resources for Behavioral Health patients	109	New business
41	Need more resources for chronic disease management	110	Community improvement
42	Home Health resources	111	Better doctors
43	Specialists - Pediatrics	112	Home Health care
44	Teen pregnancy	113	Prices
45	Health Fair reinstated	114	Additional specialist support - ENT, OBGYN, Dermatology
46	Over-pricing for hospital services	115	Smoking rates
47	Need Assisted Living	116	Obesity rates
48	More employment needed	117	Low income housing
49	Assisted Living	118	Patient adherence - Behavioral support
50	Better plan to address drug abuse issues	119	Disease education for chronic diseases
51	Ability to see own doctor at hospital who knows your history	120	Physical activities supported by the hospital - Ex. 5k walk
52	Hospital should not dictate to doctors what they can do or what patient needs	121	Need more Senior housing options in the community
53	Costs	122	More awareness of sexual abuse and child abuse
54	Wellness - Start health education early	123	Encourage more young adults to find jobs
55	Poverty	124	Better communication in our hospital
56	Drugs	125	More Mental Health providers and those willing to go in the home
57	Poor community - High Medicare/Medicaid, low reimbursement	126	Ease of access to emergency/inpatient psychiatric care
58	The quality of our population	127	Lack of engagement by population - Little interest until critical issue
59	Bad debt from uninsured and Obamacare	128	No dilution of negatives - Social media, limited to service area
60	Medicare payment decrease	129	Limit to access of some specialty care needs
61	Poverty level - Third generation	130	Job opportunities - Industry growth is needed
62	Higher education leaves - County perception of BCMH	131	Things for youth children to do - Wellness, other than sports to reduce alcohol/drugs/smoking
63	Mental Health	132	Medicaid population - Too high
64	School exams - Concussion	133	Drunk diving - Court system lax
65	Spanish language	134	Drug abuse/manufacturing it
66	Lead paint	135	Insurance - High deductibles
67	Poverty - Purchasing choices, employment, homeless	136	Child abuse - Abuse center
68	Physicians - Peds, Ortho, ENT, Chiropractor	137	Feedback perception - Dissatisfied sometimes, old grudge
69	Mental Health - Depression, ETDH, Meth	138	Chronic disease management - Drugs, ETDH, Pulm

Public Notice and Invitation

[VWV Consultants LLC]

Community Health Needs Assessment Round #2 Feedback Request – Bates County Memorial Hospital

Media Release June 27, 2016

Over the next three months, Bates County Memorial Hospital will be updating the 2013 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 up-to-date community health perceptions and needs.

To start this work, a short online community survey has been developed:
https://www.surveymonkey.com/r/BCMh_CHNA2016. (Note: Please copy link into your browser to participate.)

All community residents and healthcare leaders are encouraged to **complete the 2016 CHNA Round #2 Online Survey by Friday, 07/22/2016** and to attend the upcoming scheduled **Town Hall on Tuesday, August 9 from 5:30-7:00 p.m. at Bates County Memorial Hospital - Education Center East entrance.**

“We hope that the community and health professionals will take advantage of this opportunity to provide input into the future of healthcare delivery in our community,” comments Edward Hannon, CEO.

Vince Vandelaar, MBA (VVV Consultants LLC, an independent research firm from Olathe, Kansas) has been retained to conduct this CHNA research. If you have any questions about project, please contact Edward Hannon at 660-200-7001.

Bates County Memorial Hospital Town Hall Meeting August 9th 5:00 p.m. to 7:00 p.m. Public is Invited to Attend !

In 2013, the hospital conducted a survey to understand your perception of the health needs of our community. Bates County Memorial Hospital and Bates County Health Center has completed its second round of the survey process to understand the progress we have made as we strive to continue our goal of improving the healthcare needs of those we serve.

Now they want to hear from you, during a public town Hall Meeting Tuesday August 9th. The Town Hall Meeting will be held at in the Education Center on the lower level of Bates County Memorial Hospital. The meeting will be open from 5:00 pm until 7:00. Light refreshments will be served to those attending.

Please join us at our upcoming Town Hall Meeting TUESDAY, AUGUST 9, 2016 5:00 p.m. to 7:00 p.m.

“Bates County Memorial Hospital hope the community and health professionals will take advantage of this opportunity to provide input into the future of healthcare delivery to our county,” commented Ed Hannon, hospital CEO.

Mr. Vince Vandehaar, MBA (VVV Consultants LLC, an independent research firm from Olathe, Kansas) has been retained to conduct this countywide research.

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.

If you have any questions about CHNA activities, contact Shannon at 660-200-7072.

Bates county Assessment Survey Please Take the Time to Complete the Survey (link is here)



Bates County Memorial Hospital is working on updating the required 2013 Bates County (Butler, MO) 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 up-to-date community health perceptions.

Your feedback and suggestions regarding community health delivery are very important to collect in order to complete our 2016 Community Health Needs Assessment and implementation plan.

To accomplish this work, a short online survey has been developed:

https://www.surveymonkey.com/r/BCMh_CHNA2016

The CHNA Round #2 online survey due date is 07/22/2016. All responses are confidential. Thank you **in advance for your time and support in participating with this important request.**

To continue this work, Bates County Memorial Hospital and Bates County Health Center will host a **Town Hall meeting on Tuesday, August 9 from 5:30-7:00 p.m. at Bates County Memorial Hospital. Please plan to attend.** (Note: A light dinner will be provided starting at 5:00 p.m.)

**Subject: BCMH Community Health Needs Assessment Town Hall,
Tuesday, August 9, 5:30-7p.m.**

Bates County Memorial Hospital is partnering with other community health providers to update the 2013 Community Health Needs Assessment. The goal of this assessment update is to understand progress in addressing community health needs cited in the 2013 CHNA report and to collect up-to-date community health perceptions.

You are invited to **attend the CHNA Round #2 Town Hall** from 5:3-7p.m. at Bates County Memorial Hospital on **Tuesday, August 9**. A light dinner will be provided starting at 5:00p.m. that day.

We hope you can participate in this very important Town Hall.

Edward Hannon



Community Health Needs Assessment

BCMh Community Town Hall Meeting

Bates County Memorial Hospital and
Bates County Health Center
will be sponsoring a
Town Hall Meeting on Tuesday, August 9
from 5:30 to 7:00 p.m.
at Bates County Memorial Hospital

All BCMH primary service area residents are
invited to attend.
A light dinner will be provided starting at 5p.m.

Please join us for this opportunity to share your opinions
and suggestions to improve health care delivery
in Bates County, MO.

Thank you in advance for your participation.

Detail Primary Research Primary Service Area

[VVV Consultants LLC]

Community Health Needs Assessment Round #2 Community Feedback

Methodology

A community feedback survey was created on behalf of the CHNA client to gather primary service area stakeholder feedback on health perception and progress in addressing previous CHNA community needs. All community residents were encouraged to take the survey online by entering the following address into their personal browser:
https://www.surveymonkey.com/r/BCMh_CHNA2016.

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:

Bates County Memorial Hospital (PSA)- Butler, MO N=254		
10. For reporting purposes, are you involved in or are you a ...?	Option C Stakeholders Round #2 Bottom 2 Boxes	BCMh PSA N=254
Board Member	4.2%	3.3%
Business / Merchant	5.8%	6.8%
Case Manager / Discharge	0.7%	1.4%
Civic Club / Chamber	4.8%	6.0%
Charitable Foundation	2.5%	2.2%
Clergy / Congregational Leader	1.4%	2.2%
College / University	2.3%	0.8%
Consumer Advocate	1.2%	1.6%
Consumers of Health Care	8.3%	5.2%
Dentist	0.2%	0.3%
Economic Development	1.4%	1.4%
Education Official / Teacher	4.5%	4.7%
Elected Official (City / County)	1.5%	2.7%
EMS / Emergency	1.5%	0.8%
Farmer / Rancher	3.9%	3.3%
Health Department	1.8%	0.8%
Hospital	11.5%	13.4%
Housing / Builder	0.4%	0.0%
Insurance	1.1%	1.9%
Labor	1.2%	1.6%
Law Enforcement	0.6%	0.5%
Low Income / Free Clinics	0.7%	0.0%
Media (Paper, TV, Radio)	0.4%	0.3%
Mental Health	1.5%	1.9%
Nursing	8.7%	10.4%
Other Health Professional	6.3%	6.6%
Parent / Caregiver	10.3%	8.8%
Pharmacy	0.5%	0.8%
Physician (MD / DO)	0.8%	0.3%
Physician Clinic	1.5%	3.8%
Senior Care / Nursing Home	1.4%	0.8%
Social Worker	1.0%	1.6%
Veteran	1.8%	1.1%
Welfare / Social Service	0.8%	0.8%
Other (please specify)	3.7%	1.6%
TOTAL	100.0%	100.0%

KEY - CHNA Open End Comments				
CODE	Physician Specialty		CODE	Physician Specialty
ALLER	Allergy/Immunology		ONC	Oncology/Radiation Oncology
AES	Anesthesia/Pain		OPHTH	Ophthalmology
CARD	Cardiology		ORTH	Orthopedics
DERM	Dermatology		ENT	Otolaryngology (ENT)
EMER	Emergency		PATA	Pathology
ENDO	Endocrinology		PEDS	Pediatrics
FP	Family Practice (General)		PHY	Physical Medicine/Rehabilitation
GAS	Gastroenterology		PLAS	Plastic/Reconstructive
SUR	General Surgery		PSY	Psychiatry
GER	Gerontology		PUL	Pulmonary
HEM	Hematology		RAD	Radiology
IFD	Infectious Diseases		RHE	Rheumatology
IM	Internal Medicine		VAST	Thoracic/Cardiovascular/Vascular
NEO	Neonatal/Perinatal		URL	Urology
NEP	Nephrology		MDLV	Mid-Level
NEU	Neurology		SURG	Surgery
NEUS	Neurosurgery		TEL	Telemedicine
OBG	Obstetrics/Gynecology (Delivery)			

KEY - CHNA Open End Comments				
Code	Healthcare Themes		Code	Healthcare Themes
VIO	Abuse/Violence		NURSE	More Nurse Availability
ACC	Access to Care		NEG	Neglect
AGE	Aging (Senior Care/Assistance)		NH	Nursing Home
AIR	Air Quality		NUTR	Nutrition
ALC	Alcohol		OBES	Obesity
ALT	Alternative Medicine		ORAL	Oral Surgery
ALZ	Alzheimer's		ORTHOD	Orthodontist
AMB	Ambulance Service		OTHR	Other
ASLV	Assisted Living		OP	Outpatient Services/Surgeries
AUD	Auditory		OZON	Ozone
BACK	Back/Spine		PAIN	Pain Management
BD	Blood Drive		PARK	Parking
BRST	Breastfeeding		PHAR	Pharmacy
CANC	Cancer		DOCS	Physicians
CHEM	Chemotherapy		FLU	Pneumonia / Flu
KID	Child Care		FOOT	Podiatrist
CHIR	Chiropractor		POD	Podiatrist
CHRON	Chronic Diseases		POV	Poverty
CLIN	Clinics (Walk-In, etc.)		PNEO	Prenatal

KEY - CHNA Open End Comments

Code	Healthcare Themes	Code	Healthcare Themes
COMM	Communication	PREV	Preventative Healthcare
CORP	Community Lead Healthcare	PRIM	Primary Care:
CONF	Confidentiality	PROS	Prostate
DENT	Dentists	DOH	Public Health Department
DIAB	Diabetes	QUAL	Quality of care
DIAL	Dialysis	REC	Recreation
DUP	Duplication of Services	RESP	Respiratory Disease
ECON	Economic Development	NO	Response "No Changes," etc.
EMER	Emergency Room	SANI	Sanitary Facilities
EMS	EMS	SNUR	School Nurse
EYE	Eye Doctor/Optomtrist	STD	Sexually Transmitted Diseases
FAC	Facility	SMOK	Smoking
FAM	Family Planning Services	SS	Social Services
FEM	Female (OBG)	SPEC	Specialist Physician care
FINA	Financial Aid	SPEE	Speech Therapy
FIT	Fitness/Exercise	STRK	Stroke
ALL	General Healthcare Improvement	DRUG	Substance Abuse (Drugs/Rx)
GEN	General Practice	SUIC	Suicide
GOV	Government	TPRG	Teen Pregnancy
HRT	Heart Care	THY	Thyroid
HIV	HIV/AIDS	TOB	Tobacco Use
HH	Home Health	TRAN	Transportation
HSP	Hospice	TRAU	Trauma
HOSP	Hospital	TRAV	Travel
MAN	Hospital Management	ALCU	Underage Drinking
INFD	Infidelity	INSU	Uninsured/Underinsured
IP	Inpatient Services	URG	Urgent Care/After Hours Clinic
LEAD	Lead Exposure	VACC	Vaccinations
BIRT	Low Birth Weight	VETS	Veteran Care
LOY	Loyalty	WAG	Wages
MAMO	Mammogram	WAIT	Wait Times
MRKT	Marketing	H2O	Water Quality
STFF	Medical Staff	WELL	Wellness Education/Health Fair
BH	Mental Health Services	WIC	WIC Program

CHNA Community Feedback 2016						
Bates County Memorial Hospital (Primary Service Area) N=254						
ID	Zip	Overall HC Rating	c1	c2	c3	Are there healthcare services in the Bates County Memorial Hospital primary service area that you feel need to be improved and/or changed?
1103	64779	Poor	ADMIN	BILL		The hospital is just as good as your c.e.o. He needs to go. The tog group is sending patients to collection before the patients even get your bill. This has been going on for almost 3 years now.
1087	64730	Poor	ADMIN	STL	CRMC	Yes When Wendell Harris left as c.e.o. we were in the black. Do not know what shape the hosp. in now. Poor patient care now. People do not like the the doctor's that make rounds from St. Lukes. Patients don't like getting almost all their lab.. at the hosp. lab. and they do not like going to the hospital to get their allergy shots. Patients are going to Harrisonville doctors and also going to K.C. Doctors and hospitals. Better care and prices cheaper and insurance gets sent in correct in a timely manner.
1050	64730	Poor	ALL			All areas.
1034	64730	Fair	AUT	PEDS		Minimal services or resources available for parents of children with Autism.
1226	64730	Good	BELT	CLIN	EMER	There are not enough primary care appointments available. I will often travel to Belton for aa walk-in clinic because I can not get a same day appointment with a NP or PA. If I want to see my primary doctor this requires booking weeks in advance. There in no urgent care. If I have a need it is ER or nothing and many times an ER visit is not needed. Also the insurance I have is out of network with the ER doctors, so I pay substantially more than if I went to Harrisonville and saw the same doctor.
1141	64730	Fair	BILL	COMM	STAFF	I feel you need someone at the Hospital to talk about your bills. You talk to people that are no where close to Butler and they lie to you. You have to prove they have billed incorrectly after they send you a bill. Very unprofessional!!! They try to make you feel you are stupid and don't know what you are talking about when the problem is this billing service.
1233	64723	Fair	BILL	DOCS		Billing needs improved. Need new doctors.
1020	64730	Good	BILL			Billing and accounts receiveable
1122	64730	Very Good	BILL			I consider billing a part of my healthcare services and I feel that there is much progress yet to be made in this area.
1089	64722	Very Good	BILL			My only concern is with the billing process at BCMH. Several times this year it has been a difficult process to get an appropriate bill for services and then, before it can be resolved, at least once it was sent to a collection agency. We will pay what we owe, every time, on time. But the bills have to reflect the accurate services we used.
1143	64730	Good	BILL			Need better information on the billing.

CHNA Community Feedback 2016						
Bates County Memorial Hospital (Primary Service Area) N=254						
ID	Zip	Overall HC Rating	c1	c2	c3	Are there healthcare services in the Bates County Memorial Hospital primary service area that you feel need to be improved and/or changed?
1201	64730	Fair	BILL			The billing issues are horrible. We left BCMH healthcare because of the billing. We were billed for statements we had already paid. We were billed for items we shouldn't have been charged for, AND the prices compared to Harrisonville are astronomical. We do not have health insurance and so we are self pay. I would never have an office visit for less than \$200 to \$225 here in Butler and I go regularly at Harrisonville and pay \$58.50 every time I go. I can't afford to Doctor here, even though I got excellent care from Dr. Miller and didn't want to leave him, but I couldn't afford to stay either. It would be nice if this was fixable, but I'll never know because I can't afford to go back! (unless you put out some kind of statement!)
1134	64772	Fair	CARD	ENDO	PULM	Need access to specialists, such as cardiologists, endocrinologists, pulmonologists, neurologists, etc
1256	64730	Good	CARD	ENT	OBG	Need Cardiology, ENT, GYN
1230	64730	Very Good	CARD	ORTHO	PEDS	Cardiology and Orthopedics and Peds
1212	64730	Very Good	CARD			More cardiology options.
1031	64730	Very Good	CARD			We need to be able to do all cardiac testing at BCMH
1012	64720	Poor	CLIN	LAB	ALL	Let the patients make their own appointments at their own clinic which takes care of them. The people at the hospital do not know the patients needs. Also when the patient sees their physician let them return to the clinic and get their lab work at clinic which is so much cheaper that what the hospital charges. They quit letting the patients get their B 12 shots and also allergy shots at the clinics and make them go to the hospital to get these. Not thinking about the patients care, easier to get to the clinics to walk in there rather than going through the hospital trying to get to lab. and out patient. Patients can not walk that far. Go back to patient care.
1013	64730	Poor	CLIN	LAB		Let the patients call their own clinic for their appointments. The girls at the hospital do not know what their needs are. Not able to get their lab. work at their own clinics after they see their physician.
1238	64720	Very Good	CLIN	WAIT		weekend clinic
1104	64720	Poor	COMM	CLIN	WAIT	Yes. There is no patient care and compassion any more. The patients are just a number. You have taken away for patients to call and make their own appointments--which is sad. The hospital does not know about the patients health needs, it was better to let the patients call their own clinic and make their own appointments. Patients are being turned away that are sick.
1237	64730	Very Good	COMM	COST		1.complete communication regarding possible costs the patient will incur.
1097	64779	Fair	COMM	EMER	HH	There needs to be better communication between the ER and the Main Hospital. Also, this community needs to have a Home Health Company again. Nevada and Harrisonville can not handle the demand.

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Bates County Memorial Hospital (Primary Service Area) N=254						
ID	Zip	Overall HC Rating	c1	c2	c3	Are there healthcare services in the Bates County Memorial Hospital primary service area that you feel need to be improved and/or changed?
1047	64730	Good	COST	COMM		Not some many hoops to jump through the be able to get a a diagnos. Cost patients more money and time then they have, then usually do not get the proper diagnosis because they had to stop do to costs.
1067	64730	Fair	COST	KC		Adjusting the cost of care to a level more in line with sources in the KC Metro.
1002	64779	Very Good	COST	LAB	RAD	Improvement of cost in lab and imaging services.
1168	64730	Fair	COST	OBG	BILL	Charges are astronomical. No OB services. When trying to make sense of a bill you can't even speak to someone locally--it is contracted out and they have no idea what they are talking about. Ambulance dispatching concerns--why if dispatched to another part of the county do they have to take patient back to BCMH before transporting to KC--MAJOR loss of time.
1126	64780	Good	COST	SPEC		Would be nice to let people know how much it may cost to see a specialist in Butler when it might be cheaper for them to travel to the specialist's office.
1241	64730	Fair	COST	SURG	KC	Pricing. Putting a person in the surgical dept. for taking off three moles and charging over \$3000? I asked my doctor in the city, office time and doing the same removal would have been less than \$400 and then lab services on top of that. The \$3k didn't include lab charges. Fifteen minutes for a physical therapist to watch me walk and then tell me to buy shoe inserts... \$750. Went to KU ortho dept by the stadium, 50 min. apt, x-ray, range of motion, manipulation of joint exam etc. \$680. What is wrong with that picture? KU is the one that advised me to have PT, I should have gone back up to the complex, but opted for "close".
1049	64730	Poor	COST			If you see a doctor for an illness and they tell you to come back if it doesnt improve, then the follow up visit should be free.
1036	64720	Good	DERM	ENDO	BILL	Dermatology, endocrinology. Being able to get in with my doc when I need him. And the billing dept. sucks
1179	64725	Very Good	DERM	PEDS	OBG	Need a Dermatologist, Pediatrician, OB/Gyn, Infectious Disease.
1074	64730	Fair	DOCS	BILL	INSUR	I feel a patient needs to able to confer with their local physician while they are an in patient at the Hospital. I also feel you need someone at the Hospital to talk about the Hospital bills. We are a small community not a metropolitan facility and the people I have spoken with are very rude and uncaring. I have been lied to until I have proven the issue myself, to arrive at the truth. That the bill shouldn't have been sent because the balance was due from the insurance company.
1112	64730	Poor	DOCS	COMM	BILL	The doctors never get back with you on results and you get old bills (and threats) that have been paid off.
1182	64747	Very Good	DOCS	COMM		Some physicians need to spend more time with their patients and listening to their needs.

CHNA Community Feedback 2016						
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ID	Zip	Overall HC Rating	c1	c2	c3	Are there healthcare services in the Bates County Memorial Hospital primary service area that you feel need to be improved and/or changed?
1003	64730	Very Poor	DOCS	QUAL	COST	Lack of physicians is a problem, but having seen several of them, lack of physician quality is a far more critical issue. In the same vein, the fees charged for office calls in your clinics is exorbitant. Recently I visited a clinic for a simple blood-pressure check. The visit with the doctor was under three minutes. The cost? Over \$100 For those with little or no insurance, the cost of a simple office call is ridiculous. I am currently researching health care providers outside of Bates County, and have found several whose fee structure is more reasonable and less rigid than the single option found in Butler. Simply, the cost charged for basic health services via BCMH does not represent the quality of services provided.
1252	64730	Fair	DOCS	QUAL	KC	need competent doctors instead of what you have now. The number of misdiagnosis is disgraceful. I personally know of at least 6 instances - some which were life threatening. Fortunately the people finally had the good sense to go to KC and take a chance on someone up there and each time KC got it right!
1197	64730	Good	DOCS	WAIT		I feel we need more MD's to cover our county since it is getting harder to see one
1007	64720	Poor	DOCS			BCMh service area needs new and more current Physicians.
1138	64720	Fair	DOCS			There is a need of Better, Younger, More current Physicians at BCMH.
1185		Good	DOCS			We need more providers
1131	64722	Good	EMER	ADMIN	CHILD	I feel the ER needs to be more aggressive in their treatment. Also I don't understand why minors can not be admitted to the hospital anymore.
1064	64730	Very Poor	EMER	DOCS	DRUGS	The ER physicians handing out drugs like they are Tylenol.
1094	64730	Very Good	EMER	DOCS	STAFF	ER most of the Doctors and staff are Excellent. You come across sometimes when a Doctor Just doesn't give you the care you feel like you need.
1038	64730	Fair	EMER	DOCS		The care provided by the Emergency room physicians
1077	64730	Poor	EMER	DOCS		The E.R. The doctors appear to be second-rate; some very bizarre advice coming out of this area.
1249	64779	Fair	EMER	HOSPT	KC	We recently made a stop at your ER. Received wrong diagnosis in a critical case. When we requested a transfer to a larger hospital, we were told the hospital we were requesting was not accepting patients. No effort or offer was made to attempt a transfer to another hospital. We had to arrange our own transfer over the protests and somewhat snide remarks of your hospitalist. No specialist to make a diagnosis would be in the hospital for days. If we had remained in your hospital without a diagnosis or treatment, a very serious condition would have caused more harm. After explaining our experience to our cardiologist, he instructed us to skip your facility next time and head straight to KC. I have used your PT department and was pleased with their services.
1059	64730	Good	EMER	STAFF		I've heard several complaints about the ER, and not getting friendly service. I think that could definitely be improved. People already don't feel well when they go to the ER, the last thing they need if for the staff to treat them poorly.

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1150	64730	Good	EMER	TRIAG	COST	Start doing a proper triage in ER. 90% of what comes through is not to the level of emergency care. Time, money, and resources are being wasted on care for Pts who's needs are not an emergency.
1194	64730	Very Poor	EMER	WAIT	STAFF	ER is extremely slow and antiquated. Night crew is abusive and rough to elderly women.
1060	64730	Very Good	EMR	COMM		Access to our medical records on the computers. We still cannot access our records like we should. It is very limited in the information it shows and it is not all correct. It's like it's a big deal even when we just want to see what is on our records when other health care facility will just let you see it. There are hospitals with signs up that say " you may view you medical record at any time". That is impossible to do here. It's like this place is hiding something. When compared to other hospitals it is very sad the way this hospital preforms in this area.
1192	64730	Good	ENDO	DERM	OBG	Yes - need endocrinologist, dermatologist and GYN services
1017	64779	Good	ENDO	RHEU		endocrinology, rheumatologist
1218	64701	Good	ENT	AUD	DERM	We need to add an ENT/Audiology and Dermatology clinic.
1127	64730	Very Good	ENT	DERM	ENDO	Only maybe some more specialty clinics. ENT, dermatology, endocrine.
1010	64720	Very Good	ENT	DERM	PULM	Would like to see ENT and dermatology services available. Also more dates for other specialists such as pulmonology, cardiology, and GI.
1183	64744	Fair	ENT	ENDO		ENT and endocrinologist
1254	64730	Very Good	ENT	ORTHO		There is a need for ENT services and more orthopedic
1202	64730	Poor	FAIR	COST	CLIN	We need the Health Fair to be reinstated. It helped a lot of people find out they had major issues and they wouldn't have gone to a dr. and pay for it, but found out due to the free clinic.
1251	64730	Good	FP	CLIN	WAIT	There shouldn't be a 15 minute time limit on patients seeing doctors at the Family Care Clinic. I have the best doctor there, but I feel like I am being rushed and often forget to ask or discuss something with him. I know that waiting is inconvenient, but I believe pushing the doctors to see a patient every 15 minutes is a little extreme, some patients need longer to make sure they cover all their problems with their doctors.
1130	64730	Poor	FP	HOSPT	KC	I do not like that a patient at BCMH cannot see their own family practitioner. Instead, the hospital forces their patients to use the hospitalist. We are a small town, why are we trying to be KC? My family doctor knows me and my health concerns. He would be the best choice to see me in the hospital.

CHNA Community Feedback 2016						
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ID	Zip	Overall HC Rating	c1	c2	c3	Are there healthcare services in the Bates County Memorial Hospital primary service area that you feel need to be improved and/or changed?
1111	64730	Very Good	FPLAN	DENT	EMER	People need to have parenting classes readily available so they know that it not normal for their 12 and 13 year old daughters to become pregnant. Also Dental care for the adult and child. Too many adults coming into the ER with toothaches, rotten teeth, crack teeth. It's disgusting and all they really want is the pain medication and not the antibiotic or the toothbrush and toothpaste. And personal hygiene.....when did people forget to take a shower and clean their body? Probably on the same day that they forgot to brush their teeth.
1163	64779	Good	GRIEF			I would like to see the grief support group started again.
1011	64724	Good	HH			there is very limited home health agencies in this area,
1142	64730	Fair	HOSP	KC	STAFF	I feel we need our Hospital back. We are not a Kansas City Hospital. The care used to be great, but I can't say that now. We need to be treated like family instead of like just a stranger.
1042	64730	Fair	IFD	HH		Infectious workup needs. Access to Home Health within the outlying community.
1014	64779	Poor	LAB	FAIR	ADMIN	We are lacking patient care. Does anybody care anymore about our patients? I hear complaints everyday. The patients enjoyed the lab. fair that we had each summer when we had our local Butler Fair. When Mr. Hannon arrived on duty this is one thing he cut out. Our community is a poor/poverty level for several and this is one time a year they could receive this service.
1102	64779	Good	LOC			Expand to southern Bates County.
1232	64779	Very Good	LOC			Expanded service to southern Bates County.
1082	64730	Good	MH	PRIM	EMER	Clearly, screening and linkage with substance abusing and mentally ill patients in the Primary Care Setting and ED could be improved. We are informally doing many important things, but don't really have a program for these important services in emerging models that the research shows amount to 24% of admissions in the general population and more in the multi-dx and chronic illness populations.
1006	64730	Fair	OBG	CARD		Obstetrics, cardiology full time
1155	64730	Fair	OBG	DERM		I feel be need an OB/Gyn and a Dermatologist.
1172	64030	Good	OBG	ENT		Yes we need OBGYN and ENT services.
1176	64730	Fair	OBG	PEDS	HOSP	Need to be able to care for all needs of the community, for example OB & pediatrics. Local doctors need to care for their own patients rather than hospitalists.
1032	64730	Good	OBG	PEDS		Need good OB/GYN and Pediatrician
1242	64730	Fair	OBG	QUAL	MH	Accessible prenatal care, Accessible quality mental health professionals,
1164	64730	Good	OBG			gynecologist for our area
1190	64730	Good	OBG			Need an OB/GYN physician to be accessible at least 1-2 times monthly

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1149	64730	Good	OBG			OBGYN
1217	64730	Fair	OBG			There needs to be a gynecologist
1048	64730	Very Good	OBG			Women's Care
1166	64730	Good	OUTR	SCRN	INSUR	There use to be more community outreach, but now there is none. People miss the free screenings the hospital use to provide, it helped out people with no insurance and even people with insurance attended and valued this service.
1137	64730	Fair	PEDS	DERM	SPEC	Pediatric and dermatology specialist would be very beneficial.
1136	64730	Fair	PEDS	DERM	SPEC	Pediatric and dermatology specialities would be beneficial.
1200	64730	Very Good	PEDS			NEED GOOD PEDIATRICIANS
1154	64720	Very Good	PEDS			Pediatrics
1056	64730	Good	PEDS			Pediatrics
1236	64723	Very Good	PEDS			Pediatrics - need to provide/increase services for pediatric patients.

CHNA Community Feedback 2016						
Bates County Memorial Hospital (Primary Service Area) N=254						
ID	Zip	Overall HC Rating	c1	c2	c3	Throughout the past two years, did you or someone you know receive healthcare services outside of the Bates County Memorial Hospital primary service area?
1058	64720	Fair	CANC	OBG	STRK	cancer, ob-gyn, stroke, orthopedic, surgery,
1080	64722	Poor	CANC	STRK		cancer, stroke
1043	64720	Good	CANC			Cancer diagnosis
1065	64730	Good	CANC			Cancer Treatment
1077	64730	Poor	CANC			Cancer treatment
1210	64730	Good	CANC			Cancer Treatment
1060	64730	Very Good	CARD	KID	DIAB	Cardiac, Kidney and Diabetic
1047	64730	Good	CARD	OBG		Heart/ gynecologist
1034	64730	Fair	CARD	ORTHO	SPEC	Cardiac, orthopedic specialist
1099	64779	Good	CARD	SPEC		Heart Specialst
1240	64730	Very Good	CARD	SURG	CANC	heart surgery, cancer treatments
1182	64747	Very Good	CARD	SURG		cardiac surgery
1156	64720	Good	CARD	SURG		Cardiologist and surgeon
1249	64779	Fair	CARD	URL	DERM	Cardiac care, urology, dermatology, orthopedic, general hospital care and primary care
1055	64723	Fair	CARD	URL		Cardiology, Urology
1216	64720	Good	CARD			cardiac cath
1036	64720	Good	CARD			Cardiology
1159	64730	Good	CARD			Cardiology
1233	64723	Fair	CARD			Cardiology - nuclear stress test
1256	64730	Good	CARD			Cardiology diagnostic services
1110	64752	Fair	CARD			Heart issue,
1112	64730	Poor	CRMC	COMM		everyone is leaving for Cass Regional- poor follow up and outsourcing jobs from Bates.
1209	64720	Good	CRMC			Cass Medical Center
1050	64730	Poor	CRMC			Cass Regional gallbladder removal
1177	64730	Good	CRMC			Harrisonville Hospital
1160	64730	Good	DENT	EYE		dental, eye doctor
1242	64730	Fair	DENT	PEDS	PRIM	Dental, Pediatrics, Primary Physician

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1058	64720	Fair	CANC	OBG	STRK	cancer, ob-gyn, stroke, orthopedic, surgery,
1116	64720	Fair	DENT			Dental
1038	64730	Fair	DENT			dental
1169	64730	Fair	DENT			Dental
1010	64720	Very Good	DERM	ENT		Dermatology, ENT services.
1089	64722	Very Good	DERM	NEUR	DENT	Dermatology, neurology, dental services
1002	64779	Very Good	DERM	OBG		Dermatology/GYN
1147	64730	Good	DERM	OBG		Dermatoly/gynocologist
1088	64730	Good	DERM			dermatologist
1208	64720	Good	EMER	CMH		ER visit and admission to Children's Mercy
1211	64720	Good	EMER	CMH		ER visit and admission to Children's Mercy
1139	64730	Good	EMER	LAB	PRIM	ER and lab services primary care
1243	64720	Fair	EMER	PRIM	ADRIAN	emergency room and Primary care at Adrian
1212	64730	Very Good	EMER	TRAUM		EMERGENCY HEAD TRAUMA
1095	64730	Good	EMER			Emergency care
1031	64730	Very Good	EMER			medical emergency away from town
1076	64720	Fair	EMS	KC		EMS blood sugar crash metro
1245	64779	Good	ENDO	CARD	NEUR	Endocrinologist, Cardiologist, Neurosurgeon
1192	64730	Good	ENDO	DERM		Endocrinology; Dermatology
1102	64779	Good	ENDO			Endoscopy
1232	64779	Very Good	ENDO			Endoscopy
1183	64744	Fair	ENT	ENDO		ent and endocrinologist
1005	64730	Good	ENT			ENT
1021	64779	Very Good	ENT			ENT
1082	64730	Good	EYE	DENT	VACC	Specialty Eye, Dental, foreign vaccinations
1163	64779	Good	EYE	SURG		lasix eye surgery
1189	64730	Fair	FAM			husband, Daughter

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1058	64720	Fair	CANC	OBG	STRK	cancer, ob-gyn, stroke, orthopedic, surgery,
1181	64720	Fair	FP			Family practice
1137	64730	Fair	GAS	HOSPT		Gastroenterology.....lack of care at BCMH contributed to transfer to another facility. Hospitalist are now present, and may have prevented this transfer if they had been available.
1136	64730	Fair	GAS			Gastroenterology
1201	64730	Fair	GEN	COST		General care - can't afford BCMH
1111	64730	Very Good	HAIR			Permanent Hair removal,
1222	64772	Fair	HH			Home health
1097	64779	Fair	HH			home health
1124	64730	Fair	HOSP	KC		Hospital care in KC
1238	64720	Very Good	HOSP			hospital
1042	64730	Fair	IFD	OBG	FPLAN	infectious workup. Labor and delivery / family planning.
1155	64730	Fair	IP	KC		Both of my partents have been IP in BCMH and we had my mother transferred to a KC Hospital.
1074	64730	Fair	IP	MMC	VA	IP care at Menorah. Also VA OP.
1105	64730	Fair	KC	GAS		KC Gastro
1107	64730	Good	KC	GAS		KC Gastro
1143	64730	Good	KC			To Dr in Kansas city
1221	64730	Very Good	LAB	RAD		Lab work and x-rays
1248	64724	Fair	MAMM	OBG		Mammogram, pap smear
1132	64770	Good	MH			mental health
1133	64779	Good	MH			mental health
1130	64730	Poor	MMC	HOSPT	GALL	Bates County was letting my mother die. We transferred her to Menorah. She was septic. The hospitalist wanted to do gall bladder surgery. This would have killed her. At Menorah, they found that she did not need that surgery.
1141	64730	Fair	MMC	KID	SURG	Transferred to Menoral for continued care for kidney problems and possible surgery.
1230	64730	Very Good	MVA	RMC		Father was in MVA and flown to Research. The longer he was there the decline in care became apparent until his death.
1092	64730	Very Good	NEUR	SURG		NEUROSURGEON

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1058	64720	Fair	CANC	OBG	STRK	cancer, ob-gyn, stroke, orthopedic, surgery,
1220	64730	Very Good	NEUR	SURG		NEURO-SURGEON
1236	64723	Very Good	NEUR	SURG		Neurosurgery
1098	64779	Very Good	NRMC	CLIN		Nevada Regional Medical Center and Clinic
1064	64730	Very Poor	OBG	CARD		OBGYN and Cardio
1006	64730	Fair	OBG	CARD		Obsectrics, cardiology
1227	64730	Good	OBG	DENT	GAS	gynecologist, dentist, internist, urologist
1093	64720	Fair	OBG	DENT	CANC	ob/gyn, dental, cancer, stroke, orthopedic
1142	64730	Fair	OBG	DERM		GYN, Dermatologist
1172	64030	Good	OBG	ENT		OB and ENT
1179	64725	Very Good	OBG	IFD	DERM	Gynecology, Infectious Disease, Dermatology
1226	64730	Good	OBG	PEDS		OB/GYN including OB delivery, Pediatrics
1229	64730	Fair	OBG	PEDS		OB/GYN including OB delivery, Pediatrics
1059	64730	Good	OBG	PRIM	EMER	obgyn, primary care, ER
1014	64779	Poor	OBG			appointment to GYN
1048	64730	Very Good	OBG			Gynecological
1104	64720	Poor	OBG			ob gyn services
1131	64722	Good	OBG			OB/GYN
1190	64730	Good	OBG			OB/GYN
1213	64730	Good	OBG			Obstetrics
1103	64779	Poor	OBG			pap smear
1164	64730	Good	OBG			they went to see another for female issues since dr bread is no longer here
1027	64730	Good	OBG			Women's Health
1075	64720	Fair	ORTHO	CANC		orthopedic, cancer
1127	64730	Very Good	ORTHO	CARD	ENDO	orthopedic, cardiology, endocrine
1199	64720	Fair	ORTHO	CARD	OBG	Ortho, Cardiology, OB/GYN
1023	64730	Good	ORTHO	CARD	ONC	orthopedic, cardiology, oncology, renal,
1067	64730	Fair	ORTHO	PRIM	PHARM	Orthopedic, primary care, pharmacy, cardio.
1194	64730	Very Poor	ORTHO	REHAB	CARD	severe back injury, geriatric drug rehab, heart and leg stents,
1237	64730	Very Good	ORTHO	SURG		joint replacement--ankle

CHNA Community Feedback 2016						
Bates County Memorial Hospital (Primary Service Area) N=254						
ID	Zip	Overall HC Rating	c1	c2	c3	Throughout the past two years, did you or someone you know receive healthcare services outside of the Bates County Memorial Hospital primary service area?
1058	64720	Fair	CANC	OBG	STRK	cancer, ob-gyn, stroke, orthopedic, surgery,
1247	64730	Good	ORTHO	SURG		Knee replacement
1255	64730	Good	ORTHO	SURG		Knee replacement
1086	64730	Good	ORTHO	SURG		Total knee replacement and surgery to repair broken ankle
1165	64730	Very Good	ORTHO			back surgery
1052	64730	Good	ORTHO			Ortho
1202	64730	Poor	ORTHO			ortho
1087	64730	Poor	ORTHO			ortho physician
1231	64730	Good	ORTHO			Orthopedic
1032	64730	Good	ORTHO			test for carpal tunnel
1049	64730	Poor	PAIN	MH	EMER	pain management, mri, mental health screening, emergency visit for children is cheaper in kansas city
1144	64779	Very Good	PEDS	ORTHO	ALL	Specialist not available- pediatric ortho, allergist, pediatric ENT
1168	64730	Fair	PRIM	EMER	KC	Primary care, specialist care and ER care in KC area
1224	64730	Very Poor	PRIM	HOSP		Primary Care and Hospital
1003	64730	Very Poor	PRIM	ONC	NEUR	basic primary care, oncology, neurology, cardiac care, hospice, dental, vision
1218	64701	Good	PRIM	OP	EMER	PCP, OP Specialty, ED
1241	64730	Fair	PRIM	ORTHO	PHARM	Primary care, ortho, pharmacy.
1149	64730	Good	PRIM	RAD	PT	Primary care, radiology, physical therapy
1217	64730	Fair	PRIM	SPEC		primary and specialty care
1195	64730	Fair	PRIM	SURG		regular checkups and surgeries
1012	64720	Poor	PRIM			For a regular check up
1198	64730	Good	RAD	CARD		x-ray, echo cardio gram, ekg
1085	64730	Good	RAD	PEDS	ORTHO	imaging, pediatric specialist, orthopedist
1011	64724	Good	SPEC	CARD	ENDO	specialty cardiac care, endocrinology care
1206	64730	Good	SPEC	ENDO		Speciality Physician-Endocrinologist
1073	64730	Fair	SPEC	KC		Specialists in the city
1013	64730	Poor	SPEC	PRIM		Saw a specialist and get a check up

CHNA Community Feedback 2016						
Bates County Memorial Hospital (Primary Service Area) N=254						
ID	Zip	Overall HC Rating	c1	c2	c3	Throughout the past two years, did you or someone you know receive healthcare services outside of the Bates County Memorial Hospital primary service area?
1058	64720	Fair	CANC	OBG	STRK	cancer, ob-gyn, stroke, orthopedic, surgery,
1046	64730	Good	SPEC	SURG		Specialist and surgeries
1135	64767	Very Good	SPEC			specialist
1128	64730	Good	SPEC			specialty
1254	64730	Very Good	SPEC			specialty not available at BCMH
1239	64720	Fair	STLKS			tests St. Luke's South
1252	64730	Fair	STRK	CANC	ORTHO	stroke, bladder cancer, breast cancer, bone spur/knee, ob/gyn, dental,
1154	64720	Very Good	SURG	OP		surgery, outpatient procedure
1078	64730	Very Good	SURG			Surgery
1094	64730	Very Good	SURG			Surgery
1007	64720	Poor	SURG			Surgical services
1028	64767	Very Good	TERT			tertiary center
1153	64730	Fair	URG	PEDS		Urgent care and pediatric care
1223	64730	Very Good	URG	STREP		Used a Minute Clinic for quicker access for strep throat
1122	64730	Very Good	URG			My husband had to go to urgent care when we were out of town
1162	64730	Fair	WND	EMER	ORTHO	wound care, ER, orthopedics, surgery, cardiology

Community Health Needs Assessment 2016 - Bates County Memorial Hospital (Primary Service Area)

Let Your Voice Be Heard!

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

All 2016 Community Health Needs Assessment feedback is due by Friday, July 22. Thank you for your participation.

Community Health Needs Assessment 2016 - Bates County Memorial Hospital (Primary Service Area)

Part I: Introduction

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

	Very Good	Good	Fair	Poor	Very Poor
Health Rating:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Community Health Needs Assessment 2016 - Bates County Memorial Hospital (Primary Service Area)

2. Are there healthcare services in the Bates County Memorial Hospital primary service area that you feel need to be improved and/or changed? (Please be specific.)

Community Health Needs Assessment 2016 - Bates County Memorial Hospital (Primary Service Area)

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

	Not a Problem Anymore	Somewhat of a Problem	Major Problem
Substance Abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Smoking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chronic Disease Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obesity (Healthy Foods / Exercise)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Healthcare Transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to Primary Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Affordable Health Insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Community Health Needs Assessment 2016 - Bates County Memorial Hospital (Primary Service Area)

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

- | | |
|---|--|
| <input type="checkbox"/> Substance Abuse | <input type="checkbox"/> Healthcare Transportation |
| <input type="checkbox"/> Smoking | <input type="checkbox"/> Access to Primary Care |
| <input type="checkbox"/> Chronic Disease Management | <input type="checkbox"/> Affordable Health Insurance |
| <input type="checkbox"/> Obesity (Healthy Foods / Exercise) | |

Community Health Needs Assessment 2016 - Bates County Memorial Hospital (Primary Service Area)

5. How would Bates County Memorial Hospital primary service area residents rate each of the following services? (Please select one box per row.)

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

Community Health Needs Assessment 2016 - Bates County Memorial Hospital (Primary Service Area)

6. How would Bates County Memorial Hospital primary service area residents rate each of the following? (Please select one per row.)

	Very Good	Good	Fair	Poor	Very Poor	N/A
Inpatient Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nursing Home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outpatient Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmacy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Primary Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public Health Department	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School Nurse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specialists	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Community Health Needs Assessment 2016 - Bates County Memorial Hospital (Primary Service Area)

7. Throughout the past two years, did you or someone you know receive healthcare services outside of the Bates County Memorial Hospital primary service area?

- Yes Don't Know
 No

If yes, please specify the healthcare services received.

Community Health Needs Assessment 2016 - Bates County Memorial Hospital (Primary Service Area)

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

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

Community Health Needs Assessment 2016 - Bates County Memorial Hospital (Primary Service Area)

9. What is your home zip code?

Community Health Needs Assessment 2016 - Bates County Memorial Hospital (Primary Service Area)

Demographics

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

- | | | |
|---|---|---|
| <input type="checkbox"/> Board Member | <input type="checkbox"/> Elected Official - City / County | <input type="checkbox"/> Other Health Professional |
| <input type="checkbox"/> Business / Merchant | <input type="checkbox"/> EMS / Emergency | <input type="checkbox"/> Parent / Caregiver |
| <input type="checkbox"/> Case Manager / Discharge Planner | <input type="checkbox"/> Farmer / Rancher | <input type="checkbox"/> Pharmacy |
| <input type="checkbox"/> Civic Club / Chamber | <input type="checkbox"/> Health Department | <input type="checkbox"/> Physician (MD / DO) |
| <input type="checkbox"/> Charitable Foundation | <input type="checkbox"/> Hospital | <input type="checkbox"/> Physician Clinic |
| <input type="checkbox"/> Clergy / Congregational Leader | <input type="checkbox"/> Housing / Builder | <input type="checkbox"/> Media (Paper, TV, Radio) |
| <input type="checkbox"/> College / University | <input type="checkbox"/> Insurance | <input type="checkbox"/> Senior Care / Nursing Home |
| <input type="checkbox"/> Consumer Advocate | <input type="checkbox"/> Labor | <input type="checkbox"/> Social Worker |
| <input type="checkbox"/> Consumers of Healthcare | <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Veteran |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Low Income / Free Clinics | <input type="checkbox"/> Welfare / Social Service |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Mental Health | |
| <input type="checkbox"/> Education Official / Teacher | <input type="checkbox"/> Nursing | |
| <input type="checkbox"/> Other (please specify) | | |

Community Health Needs Assessment 2016 - Bates County Memorial Hospital (Primary Service Area)

You have just completed the Community Health Needs Assessment Survey. Thank you for your participation.

By selecting "Done," you are submitting your responses and giving others an opportunity to complete the same survey. Again, thank you for your participation.

CHNA Report Contact :



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