## TABLE OF CONTENTS

**Introduction** ................................................................. 4

**SECTION 1: Summary of Community Health Needs Assessment** ............... 5
- Patient Protection and Affordable Care Act .................................................. 6
- Methodology .................................................................. 7

**SECTION 2: General Description of Hospital** ........................................ 8

**SECTION 3: Community Served by the Hospital** .................................... 9
- Defined Community .................................................................. 9
- Map of Community Service Area ......................................................... 10

**SECTION 4: Community Details** ...................................................... 12
- Geography ........................................................................ 12
- Numbers ........................................................................ 12
- Age Distribution .................................................................. 12
- Gender Distribution .................................................................. 13
- Ethnicity and Religion ................................................................. 13
- Population Trends .................................................................. 14
- Language and Literacy ................................................................. 15
- Education ........................................................................ 16
- Uninsured ........................................................................ 17

**SECTION 5: Health Status of the Community** .................................... 18
- Health Behaviors ........................................................................ 19
- Health Outcomes ...................................................................... 19
- Mental Health ........................................................................ 20
- Preventable Hospitalizations............................................................... 20
- Clinical Care ........................................................................ 20
- Safety .................................................................................. 20
- Leading Causes of Death ............................................................... 22

**SECTION 6: Local Factors Affecting Health of Clay County** ............... 23
- Work and Employment ................................................................ 23
- Poverty and Incomes ................................................................. 24
- Environment ........................................................................ 25
SECTION 7: Current Available Health Services .............................................. 26
Clay County Health Department ................................................................. 26
Vision North ......................................................................................... 26

SECTION 8: Hospitals and Health Centers ..................................................... 28
Hospital Market Share ........................................................................... 28
Other Healthcare Providers ...................................................................... 29

SECTION 9: Community Health Survey ......................................................... 30
Methodology and Survey Instrument ....................................................... 30
Information Gaps .................................................................................. 30
Highlights ............................................................................................. 30

SECTION 10: Local Community Perspective about Health Needs and Services ... 37

SECTION 11: Expert Opinion of Healthcare Partners/Stakeholders
of the Community’s Health Needs ........................................................... 39
Methodology ......................................................................................... 39
Key Informant Questions ....................................................................... 39
Key Informant Profiles .......................................................................... 40
Key Findings ......................................................................................... 42

SECTION 12: Local, State and National Priorities ........................................... 43

SECTION 13: Meeting Specific Community-Identified Needs ................. 45
Cancer ................................................................................................. 45
Heart Disease ...................................................................................... 46
Diabetes ............................................................................................... 47

Conclusion ............................................................................................ 48

Appendix A: NRC Consumer Health Report 2011/2012
A Message from David Feess,
Liberty Hospital President and CEO

Liberty Hospital is a public, nonprofit hospital, created for the benefit of the community as a political subdivision district hospital under Chapter 206 of the Revised Statutes of Missouri. The hospital is governed by a six-member, publicly elected board of trustees who serve six-year terms.

That means in today’s healthcare environment, Liberty Hospital is truly unique. The hospital remains an independent facility that exists solely to serve our community’s healthcare needs. In spite of an ever-changing marketplace, our mission remains unchanged: to work in partnership with our community to improve the health and well-being of those we serve.

Our goal is to provide excellent healthcare services to our community. High quality is a commitment that Liberty Hospital makes to Clay County residents—and all our patients—a commitment we consider our responsibility. The pillars for achieving this commitment to quality include growth, care of the patient, physician engagement, employee/volunteer engagement, and fiscal accountability.

We welcome this opportunity to examine our community’s healthcare needs, and demonstrate how Liberty Hospital currently meets those needs, as well as our plans for the future.

David Feess,
President and CEO, Liberty Hospital
A Community Health Needs Assessment was conducted by the National Research Corporation on behalf of the New Liberty Hospital District in 2011/2012. The hospital’s primary service area is Clay County, Missouri.

The needs assessment provides a detailed view of the health need, health status, behaviors, and perceptions of residents within the hospital’s primary service area. The assessment included 670 households; the respondent was the individual in the household who is most often the primary healthcare decision-maker.

Key findings, which are detailed later in this report, are also included in Appendix A. Highlights include that 79 percent of respondents ranked their overall household health status as either excellent, very good or good; 41 percent saw their physician for routine medical care—only 6 percent had not seen a physician within the last two years; and some of the most frequently cited health problems included high blood pressure, high cholesterol, smoking, depression/anxiety disorder, and arthritis. The report also looked at key findings for low-income consumers, and preventive health behaviors among respondents.¹

In developing this report, Liberty Hospital also considered community health and demographic reports, including the 2013-2015 Community Health Improvement Plan for Clay County, Mo., the Chronic Disease Assessment for Clay County, Mo. for 2011, and a community strategic planning effort called VISION NORTH 2010-2015. These reports identified community wellness issues that focused on reducing chronic disease rates in Clay County as a major goal. The 2013-2015 Community Health Improvement Plan for Clay County identified five priorities based upon their current demonstrated ability of having the most impact on the morbidity and mortality of Clay County residents. These included diabetes, heart disease, cancer, accidents/non-intentional injuries, and chronic obstructive pulmonary disease.²

Identification of these important priorities has been crucial in guiding the hospital’s decisions regarding how to best meet the community’s need for healthcare services, but most importantly, how to improve the community’s overall health status in Clay County, as well as in our secondary service area.

¹NRC Consumer Health Report 2011/12, Liberty Hospital
²2013-2015 Community Health Improvement Plan for Clay County, Missouri
PATIENT PROTECTION AND AFFORDABLE CARE ACT (PPACA)

In March 2010, the Patient Protection and Affordable Care Act (PPACA) was passed by Congress and signed into law by President Barak Obama. Section 9007 of the PPACA addresses “Additional Requirements for Charitable Hospitals” and states a community health needs assessment must be completed every three years to comply with the PPACA. In addition, Section 501 (r)(3) of the Internal Revenue Code states non-profit organizations may lose their tax-exempt status if they fail to complete the community health needs assessment (CHNA). The penalty for failing to comply with providing a community health assessment is the loss of tax-exempt status and a fine of $50,000 every year a CHNA is not prepared.

The Internal Revenue Code, Section 501 (r)(3) states:

Section 501 (r)(3) requires a hospital organization to conduct a community health needs assessment (CHNA) every three years and adopt an implementation strategy to meet the community health needs identified through such assessment. The CHNA must (1) take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health and (2) be made widely available to the public. Section 501 (r) (3)(B).

The Joint Committee on Taxation’s Technical Explanation of the Affordable Care Act (Technical Explanation) states that the CHNA “may be based on current information collected by a public health agency or non-profit organizations and may be conducted together with one or more organizations, including related organizations.” Joint Committee on Taxation, Technical Explanation of the Revenue Provisions of the “Reconciliation Act of 2010,” as amended, in combination with the “Patient Protection and Affordable Care Act” (JCX-18-10), at 81, March 21, 2010.

Section 6033 (b)(15)(A) requires hospital organizations to include in their annual information return (i.e., Form 990) a description of how the organization is addressing the needs identified in each CHNA conducted under section 501 (r)(3) and a description of any needs that are not being addressed, along with the reasons why the needs are not being addressed.

The New Liberty Hospital District of Clay County, Missouri, doing business as Liberty Hospital, submitted a request May 14, 2009 for an exception from filing Form 990. The hospital received notification June 17, 2009, that it meets the criteria required for classification as an affiliate of a government unit, as described in Revenue Procedure 95-48, I.R.B. 1995-47, 13., (Nov. 20, 1995). In accordance with this determination, the hospital is no longer required to file a Form 990.

Section 4959 imposes a $50,000 excise tax on a hospital organization that fails to meet the CHNA requirements of section 501 (r)(3). Section 6033 (b)(10), as amended, requires hospital organizations to report the amount of the excise tax imposed on the organization under section 4959.
Notice 2011-52 was introduced on July 7, 2011 by the IRS to provide anticipated regulatory guidance related to CHNAs. It requires hospitals to make their CHNAs available to the public and develop an implementation strategy describing how the hospital plans to meet the health needs of the community. In addition, Notice 2011-52 requires the hospital to justify why or why not it is addressing each identified community health need.

This CHNA fulfills the requirement set forth by the PPACA and IRS. The CHNA of Liberty Hospital will benefit the population in Clay County, Mo. by identifying the healthcare needs of this community, healthcare services provided in this area, and recommendations to address the needs of Clay County. Clay County is the primary service area of Liberty Hospital, with Ray and Clinton counties as part of the hospital’s secondary service area. The hospital provides regional care that extends to the Iowa border.

**METHODOLOGY**

Information included in this report was collected under the direction of the Liberty Hospital Marketing and Public Relations and Quality and Planning departments. The departments contracted with the following organizations to complete the report:

- Liberty Hospital contracted with the NRC to conduct the hospital’s community health needs assessment survey. The National Research Corporation (NRC) has been in existence for more than 30 years and has been at the forefront of patient-centered care, helping healthcare providers measure and improve quality and services through analytics that provide an understanding of the market’s experiences, preferences, risks and behaviors.

- The report was compiled and written by the departments with assistance from Sherry Osburn, Osburn Public Relations. She has more than 25 years of experience working with healthcare organizations on a wide range of projects focused on communicating hospital services, technology and expertise to the public. These projects include annual reports, community newsletters, website content and brochures. She is the recipient of more than 50 awards for healthcare public relations and is a graduate of the University of Missouri at Columbia School of Journalism.
Liberty Hospital is a regional medical center located in Clay County, just 20 minutes north of downtown Kansas City, Mo. at 2525 Glenn Hendren Drive.

The hospital opened in February 1974 as a 130-bed facility and has now grown to 250 licensed beds and more than 1,900 employees. Nearly 300 physicians covering all specialties practice medicine at the hospital.

Liberty Hospital offers the following services:

- Breast Center
- Cancer Center
- Diagnostic Imaging
- Emergency and Trauma
- Gastroenterology
- Heart and Vascular
- Home Health
- Hospice
- Hyperbaric Medicine
- Intensive Care
- Interventional Radiology
- Lung Cancer Clinic
- Maternity
- Neurology
- Orthopedics
- Pain Management
- Palliative Care
- Pediatrics
- Pulmonary
- Rehabilitation
- Robotic Surgery
- Sleep Lab
- Surgery
- WorkHealth Solutions
- Wound Clinic
Liberty Hospital is located in Liberty, Mo., in Clay County. The hospital is approximately 20 minutes north of downtown Kansas City, Mo. Its primary service area is Clay County. The secondary service area extends northward to Ray and Clinton counties, and beyond to the Iowa border. This secondary area is very rural, with no major healthcare providers near many residents. However, Liberty Hospital is situated near I-35, a major interstate which makes access to the hospital and its services convenient for many residents in the secondary service area.

**DEFINED COMMUNITY**

A community is defined as the geographic area from which a significant number of the patients utilizing hospital services reside. After analyzing the hospital’s patient discharge data for 2012, it has been determined that 63 percent of the hospital’s inpatients and 67 percent of the hospital’s outpatients are residents of Clay County, Mo., the hospital’s primary service area and the focus of this assessment.

Its secondary service area includes Clinton and Ray Counties, also in Missouri. Approximately 6 percent of its inpatients and 7 percent of its outpatients are from Clinton County; and 9 percent of its inpatients and 8 percent of its outpatients are from Ray County. This secondary service area extends to the Iowa border up the northwest Missouri corridor.

**Primary Service Area**

The primary service area of Liberty Hospital includes residents in the following cities/zip codes:

<table>
<thead>
<tr>
<th>ZIP</th>
<th>CITY</th>
<th>COUNTY</th>
</tr>
</thead>
<tbody>
<tr>
<td>64024</td>
<td>Excelsior Springs, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64048</td>
<td>Holt, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64060</td>
<td>Kearney, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64068</td>
<td>Liberty, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64069</td>
<td>Liberty, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64024</td>
<td>Mosby</td>
<td>Clay</td>
</tr>
<tr>
<td>64073</td>
<td>Mosby</td>
<td>Clay</td>
</tr>
<tr>
<td>64089</td>
<td>Smithville, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64118</td>
<td>Gladstone, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64116</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64117</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64119</td>
<td>Kansas City, Gladstone, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64144</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ZIP</th>
<th>CITY</th>
<th>COUNTY</th>
</tr>
</thead>
<tbody>
<tr>
<td>64151</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64154</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64155</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64156</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64157</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64158</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64161</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64165</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64166</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64167</td>
<td>Kansas City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64072</td>
<td>Missouri City, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64152</td>
<td>Parkville, Mo.</td>
<td>Clay</td>
</tr>
<tr>
<td>64188</td>
<td>Gladstone, Mo.</td>
<td>Clay</td>
</tr>
</tbody>
</table>
Chart 3.1

MAP OF COMMUNITY SERVICE AREA
Liberty Hospital primary and secondary service areas

Chart showing the primary and secondary service areas of Liberty Hospital, including counties such as Worth, Gentry, DeKalb, Clinton, Clay, Ray, Harrison, Daviess, Caldwell, Livingston, Carroll, Mercer, Grundy, Sullivan, Linn, Johnson, Jackson, Lafayette, Cass, and Johnson. The map also includes cities like Kansas City, Wyandotte, St. Lukes Northland Hospital, and North Kansas City Hospital.
## Secondary Service Area

<table>
<thead>
<tr>
<th>ZIP</th>
<th>CITY</th>
<th>COUNTY</th>
<th>ZIP</th>
<th>CITY</th>
<th>COUNTY</th>
</tr>
</thead>
<tbody>
<tr>
<td>64449</td>
<td>Fillmore, Mo.</td>
<td>Andrew</td>
<td>64029</td>
<td>Grain Valley, Mo.</td>
<td>Jackson</td>
</tr>
<tr>
<td>64485</td>
<td>Savannah, Mo.</td>
<td>Andrew</td>
<td>64050</td>
<td>Independence, Mo.</td>
<td>Jackson</td>
</tr>
<tr>
<td>64503</td>
<td>St. Joseph, Mo.</td>
<td>Buchanan</td>
<td>64053</td>
<td>Independence, Mo.</td>
<td>Jackson</td>
</tr>
<tr>
<td>64506</td>
<td>St. Joseph, Mo.</td>
<td>Buchanan</td>
<td>64055</td>
<td>Independence, Mo.</td>
<td>Jackson</td>
</tr>
<tr>
<td>64507</td>
<td>St. Joseph, Mo.</td>
<td>Buchanan</td>
<td>64056</td>
<td>Independence, Mo.</td>
<td>Jackson</td>
</tr>
<tr>
<td>64624</td>
<td>Braymer, Mo.</td>
<td>Caldwell</td>
<td>64057</td>
<td>Independence, Mo.</td>
<td>Jackson</td>
</tr>
<tr>
<td>64625</td>
<td>Breckenridge, Mo.</td>
<td>Caldwell</td>
<td>64058</td>
<td>Independence, Mo.</td>
<td>Jackson</td>
</tr>
<tr>
<td>64637</td>
<td>Cowgill, Mo.</td>
<td>Caldwell</td>
<td>64067</td>
<td>Lexington, Mo.</td>
<td>Lafayette</td>
</tr>
<tr>
<td>64644</td>
<td>Hamilton, Mo.</td>
<td>Caldwell</td>
<td>64076</td>
<td>Odessa, Mo.</td>
<td>Lafayette</td>
</tr>
<tr>
<td>64650</td>
<td>Kingston, Mo.</td>
<td>Caldwell</td>
<td>64628</td>
<td>Brookfield, Mo.</td>
<td>Linn</td>
</tr>
<tr>
<td>64671</td>
<td>Polo, Mo.</td>
<td>Caldwell</td>
<td>64659</td>
<td>Meadville, Mo.</td>
<td>Linn</td>
</tr>
<tr>
<td>64633</td>
<td>Carrollton, Mo.</td>
<td>Carroll</td>
<td>64658</td>
<td>Marceline, Mo.</td>
<td>Linn</td>
</tr>
<tr>
<td>64623</td>
<td>Bosworth, Mo.</td>
<td>Carroll</td>
<td>64601</td>
<td>Chillicothe, Mo.</td>
<td>Livingston</td>
</tr>
<tr>
<td>64429</td>
<td>Cameron, Mo.</td>
<td>Clinton</td>
<td>64656</td>
<td>Ludlow, Mo.</td>
<td>Livingston</td>
</tr>
<tr>
<td>64444</td>
<td>Edgerton, Mo.</td>
<td>Clinton</td>
<td>64673</td>
<td>Princeton, Mo.</td>
<td>Mercer</td>
</tr>
<tr>
<td>64444</td>
<td>Gower, Mo.</td>
<td>Clinton</td>
<td>64018</td>
<td>Camden Point, Mo.</td>
<td>Platte</td>
</tr>
<tr>
<td>64492</td>
<td>Trimble, Mo.</td>
<td>Clinton</td>
<td>64439</td>
<td>Dearborn, Mo.</td>
<td>Platte</td>
</tr>
<tr>
<td>64493</td>
<td>Turney, Mo.</td>
<td>Clinton</td>
<td>64153</td>
<td>Kansas City, Mo.</td>
<td>Platte</td>
</tr>
<tr>
<td>64465</td>
<td>Lathrop, Mo.</td>
<td>Clinton</td>
<td>64163</td>
<td>Kansas City, Mo.</td>
<td>Platte</td>
</tr>
<tr>
<td>64477</td>
<td>Plattsburg, Mo.</td>
<td>Clinton</td>
<td>64150</td>
<td>Riverside, Mo.</td>
<td>Platte</td>
</tr>
<tr>
<td>64454</td>
<td>Gower, Mo.</td>
<td>Clinton</td>
<td>64079</td>
<td>Platte City, Mo.</td>
<td>Platte</td>
</tr>
<tr>
<td>64620</td>
<td>Altamont, Mo.</td>
<td>Daviess</td>
<td>64098</td>
<td>Weston, Mo.</td>
<td>Platte</td>
</tr>
<tr>
<td>64640</td>
<td>Gallatin, Mo.</td>
<td>Daviess</td>
<td>64035</td>
<td>Hardin, Mo.</td>
<td>Ray</td>
</tr>
<tr>
<td>64670</td>
<td>Pattonsburg, Mo.</td>
<td>Daviess</td>
<td>64062</td>
<td>Lawson, Mo.</td>
<td>Ray</td>
</tr>
<tr>
<td>64689</td>
<td>Winston, Mo.</td>
<td>Daviess</td>
<td>64077</td>
<td>Orrick, Mo.</td>
<td>Ray</td>
</tr>
<tr>
<td>64648</td>
<td>Jamesport, Mo.</td>
<td>Daviess</td>
<td>64085</td>
<td>Richmond</td>
<td>Ray</td>
</tr>
<tr>
<td>64469</td>
<td>Maysville, Mo.</td>
<td>Dekalb</td>
<td>64084</td>
<td>Rayville, Mo.</td>
<td>Ray</td>
</tr>
<tr>
<td>64683</td>
<td>Trenton, Mo.</td>
<td>Grundy</td>
<td>64017</td>
<td>Camden, Mo.</td>
<td>Ray</td>
</tr>
<tr>
<td>64424</td>
<td>Bethany, Mo.</td>
<td>Harrison</td>
<td>64036</td>
<td>Henrietta, Mo.</td>
<td>Ray</td>
</tr>
</tbody>
</table>
GEOGRAPHY

Liberty Hospital’s primary service area is located in Clay County, Mo., which is in the northwest portion of the state. It is included in the Kansas City metropolitan service area. The total area of Clay County is 397 square miles with approximately 559 persons per square mile.¹

NUMBERS

According to the 2010 U.S. Census, total population of Clay County is 221,939. A little more than half of the population lives in Kansas City, Mo. The county experienced a growth rate of nearly 20 percent in the decade between 2000 and 2010.⁴

AGE DISTRIBUTION

The age distribution for Clay County is as follows:

<table>
<thead>
<tr>
<th>AGE</th>
<th>NUMBER</th>
<th>PERCENTAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 5 years</td>
<td>16,302</td>
<td>7.3</td>
</tr>
<tr>
<td>5 to 9 years</td>
<td>16,276</td>
<td>7.3</td>
</tr>
<tr>
<td>10 to 14 years</td>
<td>15,500</td>
<td>7.0</td>
</tr>
<tr>
<td>15 to 19 years</td>
<td>14,431</td>
<td>6.5</td>
</tr>
<tr>
<td>20 to 24 years</td>
<td>12,755</td>
<td>5.7</td>
</tr>
<tr>
<td>25 to 29 years</td>
<td>15,936</td>
<td>7.2</td>
</tr>
<tr>
<td>30 to 34 years</td>
<td>15,921</td>
<td>7.2</td>
</tr>
<tr>
<td>35 to 39 years</td>
<td>16,136</td>
<td>7.3</td>
</tr>
<tr>
<td>40 to 44 years</td>
<td>15,758</td>
<td>7.1</td>
</tr>
<tr>
<td>45 to 49 years</td>
<td>16,823</td>
<td>7.6</td>
</tr>
<tr>
<td>50 to 54 years</td>
<td>15,975</td>
<td>7.2</td>
</tr>
<tr>
<td>55 to 59 years</td>
<td>13,466</td>
<td>6.1</td>
</tr>
<tr>
<td>60 to 64 years</td>
<td>11,696</td>
<td>5.3</td>
</tr>
<tr>
<td>65 to 69 years</td>
<td>8,105</td>
<td>3.7</td>
</tr>
<tr>
<td>70 to 74 years</td>
<td>5,816</td>
<td>2.6</td>
</tr>
<tr>
<td>75 to 79 years</td>
<td>4,512</td>
<td>2.0</td>
</tr>
<tr>
<td>80 to 84 years</td>
<td>3,467</td>
<td>1.6</td>
</tr>
<tr>
<td>85 years and over</td>
<td>3,064</td>
<td>1.4</td>
</tr>
</tbody>
</table>

¹U.S. Census Bureau
²U.S. Census Bureau
³U.S. Census Bureau
⁴U.S. Census Bureau
GENDER DISTRIBUTION

The gender distribution for Clay County is as follows:

<table>
<thead>
<tr>
<th>SEX</th>
<th>NUMBER</th>
<th>PERCENTAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male population</td>
<td>108,361</td>
<td>48.8</td>
</tr>
<tr>
<td>Female population</td>
<td>113,578</td>
<td>51.2</td>
</tr>
</tbody>
</table>

ETNICITY AND RELIGION

Ethnicity

<table>
<thead>
<tr>
<th>RACE</th>
<th>NUMBER</th>
<th>PERCENTAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>194,100</td>
<td>87.5</td>
</tr>
<tr>
<td>Black or African American</td>
<td>11,506</td>
<td>5.2</td>
</tr>
<tr>
<td>American Indian and Alaska Native</td>
<td>1,176</td>
<td>0.5</td>
</tr>
<tr>
<td>Asian</td>
<td>4,551</td>
<td>2.1</td>
</tr>
<tr>
<td>Asian Indian</td>
<td>371</td>
<td>0.2</td>
</tr>
<tr>
<td>Chinese</td>
<td>586</td>
<td>0.3</td>
</tr>
<tr>
<td>Filipino</td>
<td>584</td>
<td>0.3</td>
</tr>
<tr>
<td>Japanese</td>
<td>110</td>
<td>0.0</td>
</tr>
<tr>
<td>Korean</td>
<td>257</td>
<td>0.1</td>
</tr>
<tr>
<td>Vietnamese</td>
<td>1,759</td>
<td>0.8</td>
</tr>
<tr>
<td>Other Asian [1]</td>
<td>884</td>
<td>0.4</td>
</tr>
<tr>
<td>Native Hawaiian and Other Pacific</td>
<td>586</td>
<td>0.3</td>
</tr>
<tr>
<td>Native Hawaiian</td>
<td>66</td>
<td>0.0</td>
</tr>
<tr>
<td>Guamanian or Chamorro</td>
<td>50</td>
<td>0.0</td>
</tr>
<tr>
<td>Samoan</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Other Pacific Islander [2]</td>
<td>421</td>
<td>0.2</td>
</tr>
<tr>
<td>Some Other Race</td>
<td>3,922</td>
<td>1.8</td>
</tr>
</tbody>
</table>

Religion

According to the Association of Religion Data Archives, the population of Clay County, Mo. was 221,939 in 2010, with 105,280 individuals declaring a religious affiliation.

Major affiliations included:

<table>
<thead>
<tr>
<th>RELIGION</th>
<th>NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evangelical Protestant</td>
<td>55,953</td>
</tr>
<tr>
<td>Catholic</td>
<td>23,511</td>
</tr>
<tr>
<td>Mainline Protestant</td>
<td>20,193</td>
</tr>
<tr>
<td>Black Protestant</td>
<td>125</td>
</tr>
<tr>
<td>Orthodox Jewish</td>
<td>44</td>
</tr>
<tr>
<td>Other</td>
<td>5,454</td>
</tr>
</tbody>
</table>

---

6U.S. Census Bureau
7U.S. Census Bureau
8Association of Religion Data Archives
**POPULATION TRENDS**

Based on the U.S. Census Bureau and Esri forecasts for 2012 and 2017, the population of Clay County is expected to increase to 245,120 by 2017, from the 2010 census figure of 221,939. Further, the trend in race is expected to shift slightly, reducing the percentage of whites from 87.5 to 84.9, and increasing the percentage of African-Americans from 5.2 percent to 7 percent. Variations in age groups are relatively minor, with the median age remaining at 36 through 2017.

Provided below is a presentation of four key demographic factors for LIBERTY HOSPITAL PSA/SSA respondents within the annual Healthcare Consumer Health Report survey. The majority of questions within the Consumer Health Report can be analyzed across any one of these factors.

**Chart 4.1**

**LIBERTY HOSPITAL PSA/SSA**

*Demographics*

- **Decision-Maker Age**
  - 18-34: 39%
  - 35-44: 20%
  - 45-64: 22%
  - 65+: 19%

- **Household Size**
  - 1 Member: 20%
  - 2 Members: 12%
  - 3 Members: 13%
  - 4 Members: 18%
  - 5+ Members: 18%

- **Household Income**
  - Less than $25,000: 22%
  - $25,000-$49,999: 30%
  - $50,000-$74,999: 29%
  - Over $75,000: 19%

- **Years Lived in Community**
  - Less than one year: 61%
  - 1-2 years: 8%
  - 2-3 years: 6%
  - 3-5 years: 8%
  - 5-9 years: 8%
  - 10 or more years: 5%
**LANGUAGE AND LITERACY**

As of 2003, a total of 3 percent of the Clay County population was not considered proficient in English compared to the Missouri average of 2 percent. Also, 4.7 percent of the population of Clay County was considered illiterate, compared to a 7.5 percent illiteracy rate in Missouri.

**Income and Employment**

Based on the 2010 U.S. Census, data for Clay County, Mo. the median household income for 2007-2011 was $60,507, compared to $47,202 for the state of Missouri. In Clay County, there were 17,882 businesses in 2007. Retail sales per capita in 2007 were $15,427, also higher than the state average of $12,957.

Based on the Clay County Labor Market Profile, the county’s unemployment rate declined between June 2011 and June 2012. Major employers in the county include Cerner Corp., Ford Motor Company, Hallmark Cards, Harrah’s Casino, Worlds of Fun, Liberty Hospital, North Kansas City Hospital, Ameristar Casino, Wal-Mart Supercenter, Garney Co. and R.R. Donnelley.

**Chart 4.2**

**UNEMPLOYMENT RATES**

*Break down of unemployment percentage in Clay County, MO, and Kansas City, MSA*

---

11National Center for Education Statistics
12U.S. Census Bureau
13Clay County Labor Market Profile, 2012
EDUCATION

Compared to the state of Missouri, Clay County has a 91.9 percent high school graduation rate. The state’s is 86.8 percent. Individuals with a bachelor’s degree or higher also represent a larger percentage of the population, 30.6 percent compared to the state’s 25.4 percent.\textsuperscript{14}

The chart below is from the Clay County Labor Market Profile and demonstrates the community’s educational attainment compared to the Kansas City area.\textsuperscript{15}

\textit{Chart 4.3}

\textbf{EDUCATIONAL ATTAINMENT}

\textit{Comparison of education completed in Clay County and the Kansas City Metro}

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{chart_4.3}
\caption{Comparison of educational attainment between Clay County and the Kansas City Metro.}
\end{figure}

\begin{itemize}
\item \textbf{Clay County}
\item \textbf{Kansas City Metro}
\end{itemize}

\textsuperscript{14}U.S. Census Bureau
\textsuperscript{15}Clay County Labor Market Profile, 2012
UNINSURED\textsuperscript{16, 17}

The rate of uninsured residents in Clay County, Mo., is 11.2 percent, slightly lower than the state of Missouri at 15 percent.\textsuperscript{16}

The chart below details reasons residents of Clay County said they were uninsured in a recent survey conducted for the hospital’s Community Needs Assessment. Individuals responding to this question were those who indicated they were uninsured. \textsuperscript{17}

\textit{Chart 4.4}

\textbf{REASONS UNINSURED}

\textit{Response by uninsured residents of Clay County regarding reasons for being uninsured}

\begin{itemize}
  \item Healthy \(5\%\)
  \item Do Not Need \(5\%\)
  \item Cost \(43\%\)
  \item Employer Does Not Offer \(14\%\)
  \item Unemployed \(34\%\)
  \item Medical Condition \(3\%\)
  \item Medical Disability \(4\%\)
  \item Cheaper To Pay Out Of Pocket (Self-Insured) \(8\%\)
  \item Do Not Understand Plans Well Enough \(12\%\)
\end{itemize}

Base: Respondents who stated they were uninsured. Multiple responses given.

\textit{POINT PERCENTAGE}

\textsuperscript{16SAHIE/State and County by Demographic and Income Characteristics/2010}
\textsuperscript{17NRC Consumer Health Report 2011/12, Liberty Hospital}
This section of the assessment reviews the health status of Clay County, Mo., residents. As in the previous section, comparisons are provided with the state of Missouri. This assessment of the health behaviors, health outcomes, mental health, preventable hospitalizations and safety will enable Liberty Hospital to identify priority health issues related to the health status of its residents.

Good health can be defined as a state of physical, mental and social well-being, rather than the absence of disease or infirmity. According to Healthy People 2010, the national health objectives released by the U.S. Department of Health and Human Services, individual health is closely linked to community health. Community health, which includes both the physical and social environment in which individuals live, work and play, is profoundly affected by the collective behaviors, attitudes and beliefs of everyone who lives in the community. Healthy people are among a community’s most essential resources.

In the 2013-2015 Community Health Improvement Plan for Clay County, Mo., several key stakeholders, including the Clay County Public Health Center, VISION NORTH 2010-2015 and the Kansas City Missouri Health Department, came together to develop a coordinated approach to community wellness. This approach focuses on reducing chronic disease rates in Clay County. After a comprehensive review of the county-wide health data sets, the following five priorities were selected based upon their current demonstrated ability of having the most impact on the morbidity and mortality of Clay County residents. These include:

- Diabetes
- Heart Disease
- Cancer
- Accidents/Non-Intentional Injuries
- Chronic Obstructive Pulmonary Disease

---

182013-2015 Community Health Improvement Plan for Clay County, Missouri
**Chart 5.1**

**HEALTH FACTORS**

*Health behaviors of Clay County compared with Missouri state averages*

<table>
<thead>
<tr>
<th>Health Behaviors</th>
<th>Clay County</th>
<th>95% Confidence Interval</th>
<th>*National Benchmark Missouri</th>
<th>Data Source, Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult smoking</td>
<td>22.8%</td>
<td>19.9-25.9%</td>
<td>14% 23.5%</td>
<td>BRFSS, 2004-2010</td>
</tr>
<tr>
<td>Adult obesity</td>
<td>27.8%</td>
<td>24.2-31.7%</td>
<td>25% 31.1%</td>
<td>National Center for Chronic Disease Prevention and Health Promotion, calculated from BRFSS, 2009</td>
</tr>
<tr>
<td>Physical Inactivity</td>
<td>26.5%</td>
<td>23.2-30.3%</td>
<td>21% 27.7%</td>
<td>National Center for Chronic Disease Prevention and Health Promotion, calculated from BRFSS, 2009</td>
</tr>
<tr>
<td>Excessive Drinking</td>
<td>17.5%</td>
<td>14.7-20.8%</td>
<td>8% 17%</td>
<td>BRFSS, 2004-2010</td>
</tr>
<tr>
<td>Motor vehicle crash death rate per 100,000</td>
<td>14.4</td>
<td>12.4-16.3%</td>
<td>12 19.5</td>
<td>Vital Statistics, NCHS, 2002-2008</td>
</tr>
<tr>
<td>Sexually transmitted infection (chlamydia per 100,000)</td>
<td>363.5</td>
<td>84 437.6</td>
<td>Centers for Disease Control, National Center for Hepatitis, HIV, STD and TB Prevention, 2009</td>
<td></td>
</tr>
<tr>
<td>Teen birth rate (per 1,000, ages 15-19)</td>
<td>35.6</td>
<td>33.9-37.3%</td>
<td>22 44.3</td>
<td>Vital Statistics, NCHS, 2002-2008</td>
</tr>
<tr>
<td>HIV rate per 100,000</td>
<td>118.4</td>
<td>225.7</td>
<td></td>
<td>Centers for Disease Control, National Center for Hepatitis, HIV, STD and TB Prevention, 2008</td>
</tr>
</tbody>
</table>

**Chart 5.2**

**HEALTH OUTCOMES**

*Health outcomes of Clay County compared with Missouri state averages*

<table>
<thead>
<tr>
<th>Mortality</th>
<th>Clay County</th>
<th>95% Confidence Interval</th>
<th>*National Benchmark Missouri</th>
<th>Data Source, Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premature death (years of potential life lost)</td>
<td>6,298.5</td>
<td>5,934.2-6,662.7</td>
<td>5,466 7,981</td>
<td>Vital Statistics, National Center for Health Statistics, 2006-2008</td>
</tr>
</tbody>
</table>

**Morbidity**

| Poor or fair health    | 14.1%       | 12.0-16.4%              | 10% 16%                      | BRFSS, 2004-2010                                       |
| Poor physical health days/previous 30 days | 3.4 | 3.0-3.8% | 2.6 3.6 | BRFSS, 2004-2010 |
| Poor physical health days/previous 30 days | 3.8 | 3.1-4.4% | 2.3 3.7 | BRFSS, 2004-2010 |
| Low birthweight         | 6.9%        | 6.5-7.2%                | 6% 8.1%                      | Vital Statistics, NCHS, 2006-2008                      |

---

19 Community Needs Assessment 2012 Data Profile, Missouri Hospital Association  
20 Community Needs Assessment 2012 Data Profile, Missouri Hospital Association
MENTAL HEALTH

In Clay County, the ratio of residents to the mental health providers is 44,674:1 compared to the Missouri ratio of 9,561:1. There are a total of five mental health providers in Clay County. Also, in Clay County, the number of poor mental health days was 3.8, compared to the national benchmark of 2.3 and the Missouri state average of 3.7 days.

PREVENTABLE HOSPITALIZATIONS

In 2009, the hospitalization rate for Medicare enrollees was 84.3 ambulatory-care sensitive conditions per 1,000 in Clay County. The Missouri average is 75 and the national benchmark is 49.22.

Chart 5.3

CLINICAL CARE

Other clinical data for Clay County compared with Missouri state averages

<table>
<thead>
<tr>
<th>Health Outcomes</th>
<th>Clay County</th>
<th>95% Confidence Interval</th>
<th>*National Benchmark</th>
<th>Missouri</th>
<th>Data Source, Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventable hospital stays rate</td>
<td>84.3</td>
<td>80.2-88.4</td>
<td>49</td>
<td>75</td>
<td>Medicare claims/Dartmouth Atlas, 2009</td>
</tr>
<tr>
<td>Diabetic screening (HbA1c for diabetic</td>
<td>85.5%</td>
<td>81.8-89.2%</td>
<td>89%</td>
<td>83.5%</td>
<td>Medicare claims/Dartmouth Atlas, 2009</td>
</tr>
<tr>
<td>Medicare enrollees)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diagnosed with diabetes</td>
<td>8.7%</td>
<td>7.1-10.4%</td>
<td>9.6%</td>
<td></td>
<td>CDC, Small Area Obesity Estimates, 2009</td>
</tr>
<tr>
<td>Mammography screening for Medicare</td>
<td>66.7%</td>
<td>62.5-70%</td>
<td>74%</td>
<td>64.6%</td>
<td>Medicare claims/Dartmouth Atlas, 2009</td>
</tr>
<tr>
<td>enrollees</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SAFETY

The violent crime rate for Clay County is 832.7 per 100,000, compared to 518.5 for Missouri. The homicide rate for the county is 3.3 per 100,000, compared to 6.8 for the state. The motor vehicle crash death rate is 14.4, lower than the state of Missouri at 19.8.

On the following page are the crime statistics for Clay County, Mo., as reported by the Missouri State Highway Patrol for 2011.

21Community Needs Assessment 2012 Data Profile, Missouri Hospital Association
22Community Needs Assessment 2012 Data Profile, Missouri Hospital Association
23Community Needs Assessment 2012 Data Profile, Missouri Hospital Association
24Uniform Crime Reporting, Federal Bureau of Investigation, State Data Sources, 2007-2009
25National Center for Health Statistics, 2002-2008
26Vital Statistics, NCHS, 2002-2008
27Missouri State Highway Patrol Statistics Analysis Center
## Chart 5.4

### SAFETY

#### 2011 Crime Data

<table>
<thead>
<tr>
<th>Offenses</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Crime Index</td>
<td>2,909</td>
</tr>
<tr>
<td>Violent Offenses</td>
<td>235</td>
</tr>
<tr>
<td>Property Offenses</td>
<td>2,674</td>
</tr>
<tr>
<td>Murder</td>
<td>4</td>
</tr>
<tr>
<td>Rape</td>
<td>19</td>
</tr>
<tr>
<td>Robbery</td>
<td>49</td>
</tr>
<tr>
<td>Aggravated Assault</td>
<td>163</td>
</tr>
<tr>
<td>Burglary</td>
<td>511</td>
</tr>
<tr>
<td>Theft</td>
<td>1,939</td>
</tr>
<tr>
<td>Motor Vehicle Theft</td>
<td>210</td>
</tr>
<tr>
<td>Arson</td>
<td>14</td>
</tr>
</tbody>
</table>

#### 2011 Crash Data

<table>
<thead>
<tr>
<th>Crashes</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>4,730</td>
</tr>
<tr>
<td>Fatal</td>
<td>16</td>
</tr>
<tr>
<td>Injury</td>
<td>1,159</td>
</tr>
<tr>
<td>Property Damage</td>
<td>3,555</td>
</tr>
<tr>
<td>Speed</td>
<td>837</td>
</tr>
<tr>
<td>Drinking</td>
<td>162</td>
</tr>
<tr>
<td>Young Driver</td>
<td>1,082</td>
</tr>
<tr>
<td>Mature Driver</td>
<td>1,356</td>
</tr>
<tr>
<td>Motorcycle</td>
<td>93</td>
</tr>
<tr>
<td>Pedestrian</td>
<td>24</td>
</tr>
<tr>
<td>Fixed Object</td>
<td>914</td>
</tr>
</tbody>
</table>

| Persons Killed     | 18    |
| Safety Device Not Used | 5    |

| Persons Injured    | 1,652 |
| Safety Device Not Used | 114  |

#### Registered Sex Offenders

<table>
<thead>
<tr>
<th>Total</th>
<th>384</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>368</td>
</tr>
<tr>
<td>Female</td>
<td>16</td>
</tr>
</tbody>
</table>

**Data Sources**

1. U.S. Bureau Census, State and County Quick Facts, Median Household Income 2006-2010
2. Missouri Department of Transportation, 2011 Certified State System Centerline Mileage
3. Crime in Missouri, Missouri Statistical Analysis Center, 2011
5. Missouri State Highway Patrol, Missouri Sex Offender Registry
LEADING CAUSES OF DEATH

Detailed below are the top 10 leading causes of death in Clay County, Mo., as reported in the county’s 2013-2015 Community Health Improvement Plan. As evidenced in this chart, many of the causes of death are related to chronic diseases.

Chart 5.5

TOP TEN LEADING CAUSES OF DEATH
Clay County, 2005-2009

<table>
<thead>
<tr>
<th>Year</th>
<th>Cancer</th>
<th>Heart Disease</th>
<th>CLRD¹</th>
<th>Stroke²</th>
<th>Alzheimer’s Disease</th>
<th>All Other Accidents and Adverse Effects</th>
<th>Pneumonia and Influenza</th>
<th>Diabetes</th>
<th>Kidney Disease³</th>
<th>Motor Vehicle Accidents</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005</td>
<td>Cancer</td>
<td>Heart Disease</td>
<td>CLRD¹</td>
<td>Stroke²</td>
<td>Alzheimer’s Disease</td>
<td>All Other Accidents and Adverse Effects</td>
<td>Pneumonia and Influenza</td>
<td>Diabetes</td>
<td>Kidney Disease³</td>
<td>Motor Vehicle Accidents</td>
</tr>
<tr>
<td>2006</td>
<td>Cancer</td>
<td>Heart Disease</td>
<td>CLRD¹</td>
<td>Stroke²</td>
<td>Alzheimer’s Disease</td>
<td>All Other Accidents and Adverse Effects</td>
<td>Pneumonia and Influenza</td>
<td>Diabetes</td>
<td>Kidney Disease³</td>
<td>Motor Vehicle Accidents</td>
</tr>
<tr>
<td>2007</td>
<td>Cancer</td>
<td>Heart Disease</td>
<td>CLRD¹</td>
<td>Stroke²</td>
<td>Alzheimer’s Disease</td>
<td>All Other Accidents and Adverse Effects</td>
<td>Pneumonia and Influenza</td>
<td>Diabetes</td>
<td>Kidney Disease³</td>
<td>Motor Vehicle Accidents</td>
</tr>
<tr>
<td>2008</td>
<td>Cancer</td>
<td>Heart Disease</td>
<td>CLRD¹</td>
<td>Stroke²</td>
<td>Alzheimer’s Disease</td>
<td>All Other Accidents and Adverse Effects</td>
<td>Pneumonia and Influenza</td>
<td>Diabetes</td>
<td>Kidney Disease³</td>
<td>Motor Vehicle Accidents</td>
</tr>
<tr>
<td>2009</td>
<td>Cancer</td>
<td>Heart Disease</td>
<td>CLRD¹</td>
<td>Stroke²</td>
<td>Alzheimer’s Disease</td>
<td>All Other Accidents and Adverse Effects</td>
<td>Pneumonia and Influenza</td>
<td>Diabetes</td>
<td>Kidney Disease³</td>
<td>Motor Vehicle Accidents</td>
</tr>
</tbody>
</table>

RANKING

1 CLRD - Chronic Lower Respiratory Disease
2 Cerebrovascular Disease (Stroke)
3 Nephritis/Nephrotic Syndrome/Nephrosis (Kidney Disease)

Source: Death MICA; Top Ten Causes of Mortality in Clay County and its Major Cities – Clay County Public Health Center

Clay County 2013-2015 Community Health Improvement Plan
WORK AND EMPLOYMENT

Based on the 2010 U.S. Census, data for Clay County, Mo. the median household income for 2007-2011 was $60,507, compared to $47,202 for the state of Missouri. In Clay County, there were 17,882 businesses in 2007. Retail sales per capita in 2007 were $15,427, also higher than the state average of $12,957.29

Based on the Clay County Labor Market Profile, the county’s unemployment rate declined between June 2011 and June 2012. Major employers in the county include Cerner Corp., Ford Motor Company, Hallmark Cards, Harrah’s Casino, Worlds of Fun, Liberty Hospital, North Kansas City Hospital, Ameristar Casino, Walmart Supercenter, Garney Co. and R.R. Donnelley.30

Chart 6.1

UNEMPLOYMENT RATES

Break down of unemployment percentage in Clay County, MO, and Kansas City, MSA

29U.S. Census Bureau
30Clay County Labor Market Profile, 2012
POVERTY AND INCOMES

SOCIAL AND ECONOMIC FACTORS

Local factors that could influence the health of the primary service area residents

<table>
<thead>
<tr>
<th></th>
<th>Clay County</th>
<th>95% Confidence Interval</th>
<th>*National Benchmark</th>
<th>Missouri</th>
<th>Data Source, Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>High school graduate</td>
<td>87.6%</td>
<td>68.0-73.1%</td>
<td>85.7%</td>
<td></td>
<td>State sources and the National Center for Education Statistics, varies by state, 2008-2009 or 2009-2010</td>
</tr>
<tr>
<td>Some college</td>
<td>70.5%</td>
<td>68.0-73.1%</td>
<td>68%</td>
<td>60.8%</td>
<td>ACS, 2006-2010</td>
</tr>
<tr>
<td>Illiteracy</td>
<td>4.7%</td>
<td>2.3-8.5%</td>
<td>7.5%</td>
<td></td>
<td>National Center for Education Statistics, National Assessment of Adult Literacy, 2003</td>
</tr>
<tr>
<td>Median household income</td>
<td>$55,835</td>
<td>$52,716-58,954</td>
<td>$44,306</td>
<td></td>
<td>Small Area Income and Poverty Estimates, 2010</td>
</tr>
<tr>
<td>High housing costs</td>
<td>26.9%</td>
<td></td>
<td>29.2%</td>
<td></td>
<td>ACS 5-Year Estimates, 2006-2010</td>
</tr>
<tr>
<td>Unemployment</td>
<td>8.8%</td>
<td>5.4-9.6%</td>
<td>9.6%</td>
<td></td>
<td>Local Area Unemployment Statistics, Bureau of Labor Statistics, 2010</td>
</tr>
<tr>
<td>Children in poverty</td>
<td>13.4%</td>
<td>10.9-15.9%</td>
<td>13%</td>
<td>21%</td>
<td>Census/Current Population Survey—SAIPE, 2010</td>
</tr>
<tr>
<td>Children eligible for free lunch</td>
<td>20.2%</td>
<td></td>
<td>39.3%</td>
<td></td>
<td>United States Department of Agriculture Food Environmental Atlas, 2006</td>
</tr>
<tr>
<td>Inadequate social support</td>
<td>14.7%</td>
<td>12.3-17.4%</td>
<td>14%</td>
<td>19.4%</td>
<td>BRFSS, 2004-2010</td>
</tr>
<tr>
<td>Children in single-parent households</td>
<td>25.6%</td>
<td>23.1-28.1%</td>
<td>20%</td>
<td>32.3%</td>
<td>ACS, 2006-2010</td>
</tr>
<tr>
<td>Violent crime rate per 100,000</td>
<td>832.7</td>
<td>73-518.5</td>
<td></td>
<td></td>
<td>Uniform Crime Reporting, FBI – State data sources for Illinois, 2007-2009</td>
</tr>
<tr>
<td>Homicide rate per 100,000</td>
<td>3.3</td>
<td>2.4-4.3</td>
<td>6.8</td>
<td></td>
<td>National Center for Health Statistics, 2002-2008</td>
</tr>
</tbody>
</table>

31 Community Needs Assessment 2012 Data Profile, Missouri Hospital Association
### Chart 6.3

**PHYSICAL ENVIRONMENT**

*Physical environment is defined as air pollution-particulate matter days, air pollution-ozone days, access to healthy foods and access to recreational facilities*

<table>
<thead>
<tr>
<th></th>
<th>Clay County</th>
<th>95% Confidence Interval</th>
<th><em>National Benchmark</em></th>
<th>Data Source, Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Air pollution-particulate matter days/days that exceed maximum average per year</td>
<td>0.0</td>
<td>0</td>
<td>0</td>
<td>CDC-Environmental Protection Agency Collaboration, data not available for Alaska and Hawaii, 2007</td>
</tr>
<tr>
<td>Air pollution-ozone days/days that exceed maximum average per year</td>
<td>23.0</td>
<td>7</td>
<td>0</td>
<td>CDC-EPA Collaboration, data not available for Alaska and Hawaii, 2007</td>
</tr>
<tr>
<td>Labor force who drive alone to work</td>
<td>85.0%</td>
<td>80.7%</td>
<td></td>
<td>ACS 5-Year Estimates, 2006-2010</td>
</tr>
<tr>
<td>Access to recreational facilities per 100,000</td>
<td>8.3</td>
<td>16</td>
<td>10</td>
<td>Census County Business Patterns, 2009</td>
</tr>
<tr>
<td>Limited access to healthy foods</td>
<td>5.8%</td>
<td>0%</td>
<td>7.8%</td>
<td>USDA Food Environmental Atlas</td>
</tr>
<tr>
<td>Fast food restaurants</td>
<td>52.2%</td>
<td>25%</td>
<td>47.4%</td>
<td>Census County Business Patterns, 2007</td>
</tr>
</tbody>
</table>

---

32 Community Needs Assessment 2012 Data Profile, Missouri Hospital Association
Section 7

Current Available Health Services

According to the Clay County 2013-2015 Community Health Improvement Plan, the following resources and relationships are available in Clay County. The Clay County Public Health Center and The Kansas City Missouri Health Department; five hospitals providing services to residents which also serve as a resource for the seven-county, bi-state Kansas City Metropolitan Service area. There are an estimated 450 physicians, approximately 155 social service providers, six school districts, seven municipal governments, 160 faith-based organizations, 4,751 small and large businesses, and many other private and community service organizations.

CLAY COUNTY HEALTH DEPARTMENT
The following services are available at the Clay County Health Department:

- Immunizations
- Educational Workshops
- Women’s Health Services
- STD Services
- Tuberculosis Screening
- Speech and Hearing Services
- Dental Services and Referrals
- Women, Infants, and Children Program (WIC)
- Pregnancy Testing
- Lead Screening/Testing
- Blood Pressure Screening/Testing
- Diabetic Screening

There is no physician on site at the health department. The clinic only offers nursing services. Patients who need medical care or diagnoses are referred to the Samuel U. Rodgers Northland Health Center.

VISION NORTH
Vision North conducted a community needs assessment of Clay County and then engaged the community in addressing the priorities identified in effective and measurable ways to improve the quality of life for all those who live in the Northland.

Vision North started as a collaborative effort between the Northland Community Foundation and Northland United Way Services (NUWS) in 1999. These organizations worked to develop an assessment of the needs and challenges of the county. Taskforces then were put together to address these prioritized needs of the community. Identified priorities that have been the focus in the past include child care, dental services, transportation services, youth programming, affordable housing, healthcare, the arts and recreation.

3Clay County 2013-2015 Community Health Improvement Plan
Vision North is working again to update this vision in an attempt to positively affect the future of the community. The information that is gathered from these reports is essential in the strategic planning of area organizations. Liberty Hospital has been a participant in the Vision North initiative.

Three major goals were identified by the Vision North initiative in relation to health:

**Goal 1: Prevention Leading to Wellness**
Rationale for Goal: Prevention is the key to wellness. Wellness is less expensive than illness.

Note: The Community Wellness team agreed that the following issues should be considered:

- Coordinated and consistent message to the public.
- Nutrition, physical activity, mental health, oral health, vision, speech and hearing, and injuries.
- Utilize collaborative partnerships to achieve goals.
- Develop and implement a coordinated approach to community wellness that is focused on the goal of reducing chronic disease rates.

**Goal 2: Education with an Emphasis on Communication**
Rationale for Goal: Change from a reaction-based health system to a prevention-based health system.

A significant number of agencies exist but are unknown to the community.

**Goal 3: Access in the form of transportation; number of providers; affordability and timeliness of service**
Rationale for Goal: Improved quality of life; access to services not equal in diverse population as a whole.

- Coordinated and consistent message of the services available to the public.
- Transportation.
- Number of providers.
- Affordability and timeliness of service.
- Non-emergency after-hours medical care.
Liberty Hospital is a 250-bed regional medical center located just 20 minutes north of downtown Kansas City, Mo. The hospital’s primary service area is Clay County, Mo. Its secondary service area includes Ray and Clinton counties and extends to the Iowa border up the northwest Missouri corridor. Its primary services include cardiology, orthopedics, endocrinology, diagnostic imaging and women’s health.

HOSPITAL MARKET SHARE

As the graph below indicates, Liberty Hospital’s market share in Clay County has remained fairly steady through the past five years, but is second to North Kansas City Hospital, a 451-bed non-profit hospital located in North Kansas City, Mo.

Chart 8.1

MARKET SHARE
Clay County population (234,520) use of hospitals

HIDI Analytics, 2008-2012, Missouri Hospital Association
OTHER HEALTHCARE PROVIDERS

In addition to Liberty Hospital, the following other hospitals are key providers within the service area:

- Saint Luke’s Northland has two locations at Barry Road and Smithville. The two campuses offer 175 licensed beds and more than 20 specialized healthcare services. The hospital system also has a full-service campus located at 44th and Wornall Road in Kansas City, Mo.

- North Kansas City Hospital (a non-profit community hospital) is located in North Kansas City, Mo. and has 451 licensed beds, including a full range of services: inpatient, outpatient observation, home health, hospice care, and an accredited chest pain center.

- Excelsior Springs Medical Center (critical access hospital) is located in Excelsior Springs, Mo. and is 105 licensed beds offering emergency room services, cardiopulmonary, surgery, laboratory, home health and hospice.

- Heartland Regional Medical Center is a general medical and surgical hospital in Saint Joseph, Mo. It has 352 licensed beds and offers birthing services, end-of-life care and cardiac services.

- Tri-County Mental Health provides recovery-oriented mental health, substance abuse and prevention services for all ages and also works to help all mental health providers in the Northland to better serve the needs of those with mental health disorders.

- Creekwood Surgery Center specializes in outpatient surgeries including dental/oral surgery, ear, nose and throat, general surgery, gynecology, ophthalmology, orthopedic, pain management, plastic surgery, and podiatry.
A community survey was conducted by Liberty Hospital in order to gather broad community input regarding health issues. The survey was performed by the National Research Corporation (NRC) in 2011/2012. The survey provides a detailed view of the health need, health status, behaviors and perceptions of residents within the Liberty Hospital primary and secondary service area (Appendix A).

**METHODOLOGY AND SURVEY INSTRUMENT**

The Liberty Hospital primary and secondary service area sample for 2011/12 was comprised of 670 households. The standard error range for a sample of 670 households is plus/minus 3.8 percent at the 95 percent confidence level.

The survey document was an internet-based questionnaire which respondents received through internet invitations. The questionnaires were developed utilizing NRC’s experience in the design and implementation of hundreds of consumer research studies. Questions were designed to meet the objectives determined from the combined input of marketing directors and strategic planners nationwide. The questions were presented in a clear and concise manner, in an easy-to-understand format, and the questionnaire was thoroughly pre-tested in an actual field situation to ensure respondents’ question comprehension.

The respondent was the individual in the household who is most often the target for communications—the primary healthcare decision-maker. This individual most often selects the hospital, physician, healthcare products and services utilized by household members and, therefore, was the subject of the study.

**INFORMATION GAPS**

After assessing potential language barriers and access to technology in the community, no major information gaps have been identified in the information-gathering process for this assessment.

**HIGHLIGHTS**

The actual survey was quite detailed in nature, including many specific questions regarding general health, satisfaction with specific and general providers, and demographic information. A compilation of the actual survey results has also been included in Appendix A for each question to allow for a more detailed analysis. Highlights of the survey include:

- **Overall Household Health Status**
  In the Liberty Hospital primary and secondary service areas, based on the NRC Consumer Health Report conducted for the hospital, 16 percent of households rated their health as excellent, 31 percent as very good and 32 percent as good. Only four percent rated their health as poor. These numbers are consistent with the State of Missouri.

- **Access to Healthcare**
  When asked in the survey the purpose of a physician visit, 41 percent of respondents cited routine care and 22 percent a minor illness or injury. Other results are detailed in the chart on the following page.

NRC Consumer Health Report 2011/12, Liberty Hospital
This report also provided some insight regarding reasons residents are uninsured, with cost ranking highest among respondents.
Trusted Providers

When asked who the community trusts and has the most confidence in in healthcare, the survey showed nurses ranked highest, with 24 percent, followed by physicians with 22 percent. The chart below demonstrates these results.

Chart 9.3

**TRUST AND CONFIDENCE**

*Liberty Hospital area community confidence in healthcare*

<table>
<thead>
<tr>
<th></th>
<th>POINT PERCENTAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses</td>
<td>24%</td>
</tr>
<tr>
<td>Physicians</td>
<td>22%</td>
</tr>
<tr>
<td>Hospitals</td>
<td>17%</td>
</tr>
<tr>
<td>Health Plans</td>
<td>8%</td>
</tr>
</tbody>
</table>
HEALTH RISK PROFILES

Represented below is the percentage of LIBERTY HOSPITAL PSA/SSA households that report one or more household member has been diagnosed with having the following chronic condition. Comparison benchmarks are given for the MSA, state and national. More detailed results are available in Appendix A.
HEALTH RISK PROFILES — LOWER INCOME

Represented below is the percentage of LIBERTY HOSPITAL PSA/SSA households in lower income categories that report one or more household member has been diagnosed with the chronic condition, compared to the market average. More detailed results are available in Appendix A.
PREVENTIVE HEALTH BEHAVIORS

Represented below is the percentage of LIBERTY HOSPITAL PSA/SSA households that have had the following preventive healthcare services or tests in the last 12 months. Comparison benchmarks are given for the MSA, state and national. More detailed results are available in Appendix A.
Represented below is the percentage of LIBERTY HOSPITAL PSA/SSA households in lower income categories that have had the following preventive healthcare services or tests in the last 12 months, compared to the market average. More detailed results are available in Appendix A.
Liberty Hospital works closely with a number of community and public health organizations, taking their input into consideration regarding services provided and providing input to these organizations. Some of these important relationships include:

- **Carolyn Wells, Liberty Hospital Trauma Manager**, works with Wenne Tarama, the Emergency Preparedness planner at the Clay County Public Health Center, regarding the hospital’s disaster preparedness planning so that it will be equipped to meet citizens’ medical needs in the event of a manmade or natural disaster.

- **Julie Simpson, Director of Marketing and Public Relations for Liberty Hospital**, serves on a Public Information Officer committee with several community members. The committee develops and recommends standards for communication regarding a wide range of issues of public interest. This includes the release of information related to public health issues and emergencies.

- **David Feess, Liberty Hospital President and CEO**, and **Rick Boswell, Board of Trustees Chair**, both serve on a committee to design a new community center in Liberty, Mo. The community center is an important facility in area residents’ lives and encourages physical activity and wellness.

Participation in these types of activities allows for collaboration and cooperation as the hospital assesses and develops programs to meet the community’s specific healthcare concerns.

**Clay County Public Health Center**

Several major challenges are recognized by the Clay County Public Health Center as affecting the ability to measurably impact chronic disease outcomes in the community. The first is the impact of local, state, and national resources having been significantly reduced over the last 12 years.

A second challenge is creating and implementing programs that have a measurable impact on chronic disease must be approached from the long-term perspective. For example, the challenge is not to eliminate cancer or other chronic diseases in Clay County. Rather the strategies should focus on reducing the incidence of disease, delaying the onset of disease and disability, alleviating the severity of disease, and improving the health-related quality and duration of the individual’s life.

Third, prevention and control of chronic disease is a daunting task that requires a multipronged approach. Understanding the interrelationship among various chronic diseases, modifiable risk factors, and the social determinants of health is critical in the development of successful impact strategies. Additionally mental illnesses — most specifically, depressive disorders — were associated with increased prevalence of chronic diseases. A review of the chronic diseases adversely affecting the health of Northland residents share recognized common risk factors such as tobacco use, unhealthy diet, lack of physical activity, alcohol/substance abuse, and overweight/obesity.
Finally it is also important to note that although the data identified the specific chronic diseases affecting the Northland population, it was clear that community-specific and not county-wide strategies were necessary in order to improve health outcomes of the entire county.\textsuperscript{41}

According to the 2011 Chronic Disease Assessment for Clay County, the health status of the county population in general is comparable to or better than that of the entire State of Missouri. However, there are a few health disparities. Compared with Missouri:

- The death rates of chronic lower respiratory diseases and breast cancer in Clay County are 25 percent and 27 percent higher, respectively. Death rates of cardiovascular disease (stroke) and Alzheimer’s disease also show higher rates in the county population.

- Adults in the county are 38 percent more likely to be obese than all adults statewide. Though, some improvement had occurred since 2007 when the State of Missouri put out this report.

- According to the Robert Woods Johnson Foundation (RWJF) report in the 2011 County Health Rankings, the percentage of adult obesity in Clay County is the same as the State of Missouri at 30 percent of the adult population, which is higher when compared to the nation at 25 percent.

- The 2007 data showed that 31 percent of the children in Missouri ages 10-17 years are overweight or obese. Obesity increases the risk of developing conditions such as diabetes and heart disease. The national statistics also show that without big change, that one in three babies born today will develop diabetes in their lifetime.

- In 2008, six out of the 10 leading causes of deaths in Clay County were due to chronic disease. From 1999 through 2008, deaths due to chronic diseases accounted for 76 percent of all deaths in the county, while heart disease (23.5 percent) and cancer (24.3 percent) alone accounted for 48 percent of deaths from chronic conditions.\textsuperscript{42}

\textsuperscript{41} Clay County 2013-2015 Community Health Improvement Plan
\textsuperscript{42} 2011 Chronic Disease Assessment for Clay County
Interviewing key informants (community stakeholders) is a technique employed to assess public perceptions of the county’s health status and unmet needs. These interviews are intended to ascertain opinions among individuals likely to be knowledgeable about the community and influential over the opinions of others about health concerns in the community.

**METHODOLOGY**

Interviews with 14 key informants were conducted in February, March and April 2013. Interviewees were determined based on their specialized knowledge or expertise in public health, their affiliation with local government, schools and industry or their involvement with underserved and minority populations.

A representative from Liberty Hospital contacted all individuals interviewed. The interviews were conducted by phone. A summary of their opinions is included in this report. Below are the questions and issues addressed with each interviewee.

**KEY INFORMANT QUESTIONS:**

- Can you tell me briefly about the work that you and your organization do in the community?
- In general how would you rate the health and quality of life in Clay County?
- In your opinion, has health and quality of life in Clay County improved, stayed the same, or declined over the past few years?
- Why do you think it has (based on answer from previous question: improved, declined, or stayed the same)?
- What other factors have contributed to the (based on answer to previous question: improvement, declines, or to health and quality of life staying the same)?
- Are there people or groups of people in Clay County whose health or quality of life may not be as good as others?
  a. Who are these persons or groups (whose health or quality of life is not as good as others)?
  b. Why do you think their health/quality of life is not as good as others?
- What barriers, if any, exist to improving health and quality of life in Clay County?
- In your opinion, what are the most critical health and quality of life issues in Clay County?
- What needs to be done to address these issues?
- In your opinion, what else will improve health and quality of life in Clay County?
- Is there someone (who) you would recommend as a “key informant” for this assessment?
- Is there anything you would like to add?
KEY INFORMANT PROFILES

- **Stacie Bratcher, Director of Development, Immacolata Manor, Liberty, Mo.** The Manor is a not-for-profit agency providing habilitative services for persons with a developmental disability. Bratcher has lived in Clay County for 42 years, and has been in her current position for five years. She is involved in fundraising, volunteer management, marketing, public relations and grantwriting for the Manor.

- **Sara Cooke, Communications Manager with the City of Liberty.** Cooke has lived and worked in Liberty for many years. In her role with the city, she is responsible for all communications efforts for the city, but primarily general public and media relations.

- **Jack DeWees, Pastor, Liberty United Methodist Church.** Pastor DeWees serves a large and diverse congregation in Liberty, Mo. As a pastor, he is involved in church activities that include collecting and distributing food to the homeless and hungry in the community, as well as preparing and providing meals at area shelters. The church also supplies snacks for children’s snack sacks at area schools. He has lived in Clay County for nearly 40 years and worked as a pastor for 13 years.

- **Karen Dolt, CEO, Northland Healthcare Access.** This is an agency focused on creating and providing programs for the uninsured population of the Northland. It coordinates quality healthcare for people without access through community collaboration and advocacy. The agency funds MetroCare; Samuel U. Rodgers Health Center Northland Family Medicine; and Heartland Women’s Healthcare.

- **Kathy Ellermeier, RN, MSN, Director of Health Services for the Liberty School District.** Ellermeier directs all student health services for the Liberty School District’s 11,500 students, managing staffing needs, supporting nursing staff and all clinical aspects of the school’s health programs.

- **Scott Falke, Ph.D., Associate Biology Professor, William Jewell College.** Dr. Falke teaches microbiology, protein structure and function, the ethics of reproductive technologies and infectious diseases at William Jewell College, a liberal arts college located in Liberty, Mo. He has lived in Clay County for eight years and has worked at William Jewell College for nine years.

- **Jim Hampton, Executive Director, Clay County Economic Development Council.** Hampton has lived in Clay County for 20-plus years and has been in his current position for 13 years. The Clay County Economic Development Council is responsible for business retention, attraction, finance and workforce development. Hampton oversees the organization’s activities.

- **Rachel Hollinberger, Case Manager, Hillcrest Transitional Housing.** Hillcrest Transitional Housing offers homeless families, singles and youth a disciplined educational program designed to move clients from homelessness to self-sufficiency within 90 days by addressing the total life situation of the homeless families they serve. Hollinberger works directly with individuals in the program. She has lived in Clay County for 26 years and has been in her current position for four years.

- **Clay McQuerry, Executive Director, Rebuilding Together Clay County.** McQuerry oversees the activities of Rebuilding Together Clay County, a non-profit organization dedicated to providing safe and healthy homes for every person in Clay County, and helping older adults age in place. The organization works with all ages, but often works with individuals with limited incomes who are older.

- **Gayle Potter, President, Liberty Chamber of Commerce.** Potter identifies, evaluates and recommends activities that promote the individual business members of the Liberty Chamber of Commerce, which has about 400 business members. She has lived in Clay County for 42 years and has been in her current position for eight years.

- **Jim Simpson, Liberty Chief of Police.** Chief Simpson manages the City of Liberty Police Department, providing for the safety and security of the city’s residents. He has lived in Clay County 28 years, and has served as the chief of police for two years.
- **Mike Snider, Liberty Fire Chief.** Chief Snider oversees the activities of the Liberty Fire Department, which includes fire, ambulance and emergency response management for the community’s 30,000 residents. He has lived in Clay County for 17 years and has been in his current position for two and one-half years.

- **Janet Snook, Parks and Recreation Director for the City of Liberty.** Snook is responsible for all aspects of the parks system in Liberty, including all recreational areas and the community center, which offers opportunities for indoor recreation and wellness to area residents.

- **Gary Zaborac, Director Public Health, Clay County Public Health Center.** The Center is responsible for assessing community needs; developing programs to improve the community; implementing programs to meet the needs of the community; gaining community input as well as providing community input into programs such as Vision North; and researching, developing and implementing new initiatives to help improve the health of the community.
KEY FINDINGS

After reviewing the comments from interviews with the key informants, as well as demographic and socioeconomic indicators, there are several key findings for Liberty Hospital’s service area:

- **Quality of life:** Most respondents agreed that the health and quality of life in Clay County is very good to excellent (ranging from 7 to 10 on a scale of 1 to 10). In general, they attribute this to a good school system, an improving economy and better access to health services than in other parts of the area. Most respondents agreed that the quality of life has improved in recent years, and many cited the economic downturn in 2008 as the bottom of the cycle, but said that the economy is beginning to improve, and with it, they are seeing more jobs, better access to services, etc.

- **Other factors which have contributed to improvements in the health and quality of life in the community are a good health department which strives to offer quality services and communicate those services to area residents; access to conveniences, including more nutritional food sources such as farmer’s markets; and pedestrian-friendly sidewalks, paths, green spaces and a community center which all encourage physical activity.**

- **Factors cited which have kept health and quality of life from improving include lack of resources for individuals who are uninsured/underinsured; education regarding the need for prevention and the importance of routine medical care and establishing a relationship with a healthcare provider; jobs and better jobs; and the need for funding for services that enhance health and quality of life for all residents.**

- **People or groups whose health or quality of life is not as good as others centered on low-income older adults who lack both the financial assets and the transportation to be able to access healthcare, and therefore may not have as good a quality of life. Other groups included low-income individuals of all ages, including children, individuals with disabilities, the uninsured/underinsured, individuals with chronic diseases such as obesity or diabetes, and the mentally ill.**

- **Why these individuals don’t have as good of health/quality of life was generally cited as because of income (lower income), and therefore lack of insurance. Other issues include lack of transportation and funding for programs to serve specific needs, such as aging in place.**

- **Barriers to improving health and quality of life in Clay County included: employment, lack of transportation, lack of education, lack of awareness of services available, lack of insurance, unhealthy lifestyle choices and health-care reform.**

- **The most critical health and quality of life issues in Clay County included: chronic diseases such as heart disease, cancer, asthma, diabetes, obesity, diseases of aging (Alzheimer’s and dementia), smoking/use of tobacco products, and disabilities. Lack of mental health services also was identified by several interviewees as an important issue facing the county, with few services available in the community, especially for low-income individuals.**

- **To address these issues, most interviewees agreed there needs to be better education regarding healthcare choices, better quality jobs, better access to health insurance, better eating options (less fast food, and more healthy options such as farmer’s markets); more sidewalks and crosswalks that encourage walking/activity; more healthy activity options, including feasible rates for the community center; and programs, housing and services specifically for older adults that would allow them to “age in place” and have better access to transportation and health services.**

- **Other suggestions to improve health and quality of life included developing a plan to communicate to county residents about all of the services that are already available; and any efforts that encourage a collaborative working relationship among the various city and county agencies and services.**
Based on the 2013-2016 Liberty Hospital Strategic Plan, the mission of the hospital is to work in partnership with the community to improve the health and well-being of those they serve. These needs and priorities were reviewed and identified at a strategic planning session of the hospital leadership in November 2012.

The hospital is patient-centered and exists to provide excellent healthcare services. Its plans and services focus on the healthcare needs of the communities that are served. High quality is a commitment that Liberty Hospital makes to the communities served. Each person in the organization has an obligation to strive for excellence in his/her own work and areas of responsibility. It is important that excellence at Liberty Hospital be recognized, through promotion and engagement as well as acknowledged by constituents. In an era of rapid change, planning and strategic thinking must be flexible. Liberty Hospital will continue to be responsive and able to adjust to changing conditions and emerging opportunities in healthcare. Specific strategies from the plan related to the community and the services the hospital delivers include:

- Be a resource to the community related to current healthcare topics and wellness.
- Identify, enhance and support clinical focus areas that could benefit the community.

Based on the 2013-2015 Community Health Improvement Plan for Clay County, the following health problems have been identified as the top five chronic health problems for the county:

- Cancer
- Heart Disease
- COPD
- Diabetes
- Accidents/Non-Intentional Injuries

Liberty Hospital supports and provides treatment for the problems identified in the 2013-2015 Community Health Improvement Plan for Clay County. Based on primary and secondary research, the hospital has strategically identified the focus areas and services where it has the most opportunity to have an impact on the community’s health; and the services where the hospital has the widest range of expertise, technology and resources to benefit the community. These clinical focus areas identified through Liberty Hospital’s strategic planning process are:

- Cardiology (Heart Disease)
- Orthopedics (Accidents/Non-Intentional Injuries)
- Endocrinology (Diabetes)
- Diagnostic Imaging (Used to Diagnose Most Chronic and Acute Illnesses)
- Women’s Health (Breast Cancer)
<table>
<thead>
<tr>
<th>CLAY COUNTY PRIORITY</th>
<th>LIBERTY HOSPITAL SERVICE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancer</td>
<td>Cancer Center, Breast Center, Diagnostic Imaging, Women’s Health, Lung Cancer Clinic, Surgical Services, Home Health, Hospice, Pain Management, Palliative Care</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>Heart and Vascular Center, Diagnostic Imaging, Interventional Radiology, Cardiac Rehabilitation</td>
</tr>
<tr>
<td>COPD</td>
<td>Diagnostic Imaging, Pulmonary Rehabilitation, Lung Cancer Clinic, Sleep Laboratory</td>
</tr>
<tr>
<td>Diabetes</td>
<td>Endocrinology, Diabetes Education Program</td>
</tr>
<tr>
<td>Accidents/Non-Intentional Injuries</td>
<td>Emergency Services, State-designated Level II Trauma Center, Diagnostic Imaging, Surgical Services, Rehabilitation Services, Intensive Care, Orthopedics</td>
</tr>
</tbody>
</table>

Liberty Hospital also offers the community a wide range of educational courses designed to address many of the needs identified by the county as chronic health priorities. These classes and support groups are offered at a reduced rate or are free to the public and include:

- Heartsaver CPR
- Heartsaver First Aid
- Look Good, Feel Better
- Diabetes Class
- Pre-Diabetes Management
- Total Joint Replacement
- Alzheimer’s Support Group
- Diabetes Support Group
- Stroke Support Group

A complete list of classes, support groups and events is available at the hospital's Web site, www.libertyhospital.org.

In addition to the community health issues identified above, based on data reviewed for this report, other health problems/issues that impact area residents include: mental health, chronic obstructive pulmonary disease, obesity and general lack of access to care/lack of insurance. Though these are important community health needs, Liberty Hospital does not have the services or resources to impact community health as it relates to these issues, and therefore will focus on the needs identified in this next section.
Liberty Hospital has further refined the planning process to identify three major community needs that the hospital supports through healthcare services, as well as educational classes and support groups. This information is not meant to be exhaustive, nor does it imply that these are the defined strategies of the hospital. This will be addressed in a separate Implementation Plan. Generally, these three healthcare needs are:

- Cancer
- Heart Disease
- Diabetes

**CANCER**

**National:** According to Healthy People 2020, cancer is the second leading cause of death in the United States. The initiative’s goal is to reduce cancer deaths by 10 percent. Recommendations include screenings for some of the more common cancers seen, including breast, colon, and rectal/anal cancers.\(^{43}\)

**State:** Based on statistics from the American Cancer Society, nearly 34,000 new cases of cancer will be diagnosed in the state of Missouri in 2013, and 12,730 individuals will lose their lives to the disease. In the state, lung, breast and prostate cancers are the most frequently reported.\(^{44}\)

**Local:** In Clay County, cancer consistently ranks as the leading cause of death. Highlights of local cancer findings from the Clay County Chronic Disease Report for 2011 include:

- Rates remained consistently higher in the male population.
- Prostate cancer showed an increase in number of new cancer cases.
- In 2008, deaths from cancer caused 3,754 years of potential life lost among Clay County residents.
- Top three leading causes of cancer deaths in Clay County by sex in 2008:

**Possible Ways to Address This Priority:**

- Enhanced educational efforts encouraging the community to be screened for cancer.
- Liberty Hospital specific screenings offered to community members at a reduced fee or free as appropriate, such as prostate and breast cancer screenings.
- Cooperation with community health entities, such as the Clay County Health Department, to promote early detection and treatment for cancer.

---

\(^{43}\)Healthy People 2020  
\(^{44}\)Cancer Facts and Figures, 2013  
\(^{45}\)Chronic Disease Assessment, Clay County, 2011
HEART DISEASE

National: According to Healthy People 2020, heart disease is the leading cause of death in the United States. The leading controllable risk factors for heart disease are: high blood pressure, high cholesterol, cigarette smoking, diabetes, poor diet and physical inactivity, overweight and obesity.  

State: Based on statistics from the American Heart Association, there were between 133.5 to 159.5 cardiovascular deaths per 100,000 in the State of Missouri in 2012. 

Local: In Clay County, heart disease consistently ranks as the second leading cause of death. Highlights of local heart disease findings from the Clay County Chronic Disease Report for 2011 include:

- Adult males 65 years old and over were most often affected.
- The years of potential life lost from heart disease among Clay County residents in 2008 was estimated at 3,189 years.

The top three specific causes of death grouped under heart disease were:

- Chronic ischemic heart disease
- Acute myocardial infarction
- Heart failure

Possible Ways to Address This Priority:

- Enhanced educational efforts encouraging the community to be screened for heart disease.
- Liberty Hospital specific screenings offered to community members at a reduced fee as appropriate, such as low-cost cardiac scoring or free cholesterol testing.
- Cooperation with community health entities, such as the Clay County Health Department, to promote early detection and treatment for heart disease.

---

46Healthy People 2020
47AHA Statistical Update, 2012
48Chronic Disease Assessment, Clay County, 2011
DIABETES

National: According to Healthy People 2020, diabetes affects an estimated 23.6 million people in the United States and is the seventh leading cause of death. It lowers life expectancy by up to 15 years; increases the risk of heart disease by two to four times; and is the leading cause of kidney failure, lower limb amputations and adult-onset blindness.49

State: Based on statistics from the Missouri Department of Health, 387,247 adults were living with diabetes in the state in 2007, with a prevalence of 8.7 percent. Clay County’s prevalence in this report was 9.2 percent. Prevalence was higher in older adults, African-Americans, males, people with health insurance, less education and lower income.50

Local: Diabetes was the fifth leading cause of death in Clay County from 1999-2002, and the sixth from 2003 through 2008.

- Over the 10-year period (1999-2008), county rates were comparable to the state rates, except for 2000 and 2004.
- Death rates were consistently higher in the county male population compared to females except for the year 2007.
- In the male population, the rate in 2008 almost doubled from 2007, but a slight decrease was seen in the female population over the same time period.
- The death trend (1999-2008) in the female population followed the state trend. The trend in the male population was slightly different from the state rate.51

Possible Ways to Address This Priority:

- Enhanced educational efforts encouraging the community to be screened for diabetes.
- Liberty Hospital specific screenings offered to community members at a reduced fee as appropriate, such as blood glucose screenings at community health fairs.
- Cooperation with community health entities, such as the Clay County Health Department, to promote early detection and treatment for diabetes.

49 Healthy People 2020
50 Missouri Department of Health and Senior Services, Prevalence of Diabetes, Missouri Counties, 2007
51 Chronic Disease Assessment, Clay County, 2011
In this CHNA, the health needs of Liberty Hospital’s primary service area, Clay County, have been identified through data analysis and discussions with community leaders and stakeholders. The three focus areas for Liberty Hospital are cancer, heart disease and diabetes. A separate Implementation Strategy addresses these focus areas and describes the steps Liberty Hospital will take over the next three years to improve the health needs of the community.