

# Community Health Needs Assessment

Mercy Hospital Jefferson

Fiscal Year 2025





# Our Mission

As the Sisters of Mercy before us,  
we bring to life the healing ministry of Jesus  
through our compassionate care  
and exceptional service.

# Our Values

Dignity  
Excellence  
Justice  
Service  
Stewardship

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# FY22-24 Impact

## Prioritized Needs for 2022 CHNA



Access to Care



Substance Use



Behavioral Health



Financial Literacy

In response to the priority health needs identified in the 2022 Community Health Needs Assessment (CHNA), Mercy Hospital Jefferson developed a comprehensive Community Health Improvement Plan. This plan encompassed a diverse array of programs and initiatives, strategically designed to address the most pressing health challenges facing the community. Through these efforts, Mercy Hospital Jefferson committed to fostering a healthier, more vibrant community for all.



# FY22-24 Impact

## Access to Care – Community Health Worker Program

The **Community Health Worker (CHW) Program**, launched in 2018, has been key in improving access to care for underserved populations. At Mercy Hospital Jefferson, the program expanded into the Emergency Department (ED) in 2020, where CHWs connect patients to social resources and assist with applications for Medicaid, Marketplace insurance, or hospital charity programs, reducing barriers to care.

In 2024, the program grew further into inpatient care and the health equity space. CHWs now help patients with post-hospitalization planning, addressing social needs such as housing, transportation, food insecurity, and mental health support, ensuring a smoother transition to community care.

The CHW program has made a significant impact by connecting patients to critical resources, guiding them through insurance options, and addressing social determinants of health. These efforts have improved access to care, reduced health disparities, and enhanced overall health outcomes for vulnerable populations.



# FY22-24 Impact

## Access to Care – Community Health Worker Program

In FY23, Community Health Workers (CHWs) connected with 1,523 patients through 3,911 encounters. In FY24, this increased to 2,332 patients and 5,711 encounters.

The most common requests from Mercy Hospital Jefferson's patients were for healthcare access, financial assistance (including Medicaid and charity care), and medication support. CHWs also helped patients with resources for food, transportation, and utilities, demonstrating their broad role in supporting community health needs.





# FY22-24 Impact

## Access to Care – Dispensary of Hope, Health Leads & Crisis Nursery

**Dispensary of Hope (DOH)** – The Dispensary of Hope program at Mercy Hospital Jefferson provides uninsured patients below the Federal Poverty Line with life-saving medications at no cost for up to one year. In the previous cycle, the program assisted 1,493 patients, dispensing 3,225 prescriptions through our retail pharmacy. The program is estimated to have saved patients \$349,650.56. Patients who qualified for DOH were able to pick up their prescriptions or have them mailed, further increasing access to medications.

**Health Leads** – Health Leads is a national organization that connects low-income patients with critical resources. Mercy Clinic staff use the Health Leads platform to screen patients for social needs. Over the last three years, 142,890 patients were screened, with 15.5% identifying needs, and 1,491 needs successfully addressed.

**Crisis Nursery** – The Crisis Nursery’s Family Support Specialist at Mercy Hospital Jefferson provides crisis counseling, referrals, home visits, parent education, and basic needs items to families with children under 12, helping to prevent child abuse and neglect. In the past three years, the Crisis Nursery processed 2,163 community referrals and distributed 5,330 basic needs items.



# FY22-24 Impact

## Substance Use

The previous Community Health Needs Assessment (CHNA) identified substance use as a priority need, and Mercy Hospital Jefferson, in partnership with Behavioral Health Network, has made significant progress through its **EPICC (Engaging Patients in Care and Coordination) program**. This program connects Emergency Department patients who have overdosed on opioids with Recovery Coaches—peers with lived experience—to ensure immediate access to treatment, including medication-assisted treatment.

In the previous cycle, EPICC has shown impressive results. In 2022, it received 51 referrals and connected 40 individuals to treatment. In 2023, 51 referrals led to 34 connections, and in 2024, 11 referrals resulted in 10 successful linkages to care. These outcomes highlight the program's effectiveness in addressing substance use and providing critical support to individuals in need.



# FY22-24 Impact

## Behavioral Health

**Virtual Behavioral Health (vBH)**- vBH is a Ministry-wide program that provides integrated support for patients with behavioral health needs in the outpatient and inpatient setting. vBH coworkers provide virtual and telephonic behavioral health assessments to establish patients' level of care, and facilitate referrals for inpatient, intensive outpatient (IOP), and outpatient services, as well as for basic social needs in their home communities. vBH also provides virtual psychiatric consults to help with medication stabilization related to the exacerbation of behavioral health conditions.

**Concert Health Collaborative Care**- This partnership commenced in 2022 to support Primary Care providers (PCP) in providing their patients with mental/behavioral health support. The program helps provide a behavioral health care manager who interacts directly with the patient, performs an assessment, as well as initiates treatment, all in collaboration with their PCP. This collaboration strives to enhance support to PCPs by providing comprehensive mental and behavioral healthcare to patients while allowing the patient to obtain care in the same setting. In FY24, 105 patients were referred to the Concert Health Program.



# FY22-24 Impact

## Financial Literacy

In the previous Community Health Needs Assessment (CHNA), Financial Literacy was identified as a priority need within the community. However, despite exploring various program options, the initiative never gained significant traction. A robust, validated program did not emerge, particularly when considering challenges such as literacy concerns, transportation barriers, and the availability of qualified facilitators. Financial Literacy was defined as the ability to understand and apply financial skills like budgeting and investing, but it became clear that this is a complex, systemic issue. Beyond financial education, it is closely tied to broader challenges such as access to affordable housing, nutritious food, and other essential resources.

While progress on a comprehensive financial literacy program has been limited, Mercy Hospital Jefferson remains deeply committed to helping patients navigate financial concerns, especially as they relate to access to healthcare. We continue to explore ways to support patients in managing the financial challenges they face, ensuring they have the resources and assistance needed to receive the care they deserve. Addressing these interconnected barriers requires a holistic approach, and Mercy remains dedicated to finding meaningful solutions for the community.

# Executive Summary

Mercy Hospital Jefferson, a 251-bed acute care facility in Festus, Missouri, is a vital healthcare resource for Jefferson County and part of Mercy's East Community. The hospital offers 24-hour emergency care, along with a full spectrum of diagnostic, preventive, and restorative services. Originally founded as Jefferson Memorial Hospital in 1957, it joined the Mercy health system in 2013. Mercy Hospital Jefferson has since expanded its services through Mercy Clinic physician offices, outpatient services, and Mercy-GoHealth Urgent Care centers across the county.

In 2015, Mercy launched the world's first virtual care center in St. Louis County, designed to address challenges like transportation barriers and provider shortages, particularly in rural areas.

In 2024, Mercy Hospital Jefferson became a regional campus for the Lake Erie College of Osteopathic Medicine (LECOM), offering medical students clinical rotations at the hospital. This partnership aims to alleviate the rural doctor shortage by training the next generation of healthcare professionals. Medical students will complete their first two years at LECOM's Pennsylvania campus, followed by hands-on training at Mercy Hospital Jefferson, where they will be mentored by our dedicated physicians.



# Executive Summary *(continued)*

Mercy's mission is to provide "compassionate care and exceptional service" to every individual, which guides our efforts in addressing the health needs identified in this assessment. This cycle, Mercy partnered with local organizations such as COMPASS Health, Jefferson County Community Partnership, the Jefferson County Health Department, and Jefferson Franklin Community Action Corps to survey residents for the 2025 CHNA. The report highlights the health priorities of Jefferson County, aiming to help residents and organizations understand community health needs and inform future strategies for improving health outcomes.

This Community Health Needs Assessment (CHNA) fulfills a requirement for non-profit hospitals under the Patient Protection and Affordable Care Act (PPACA) and is essential for Mercy Hospital Jefferson as a non-profit healthcare provider. The CHNA provides a comprehensive analysis of local health needs, with input from community members, public health experts, and underserved populations. It draws from both quantitative and qualitative data, focusing on the health challenges faced by economically disadvantaged communities.



# Executive Summary *(continued)*

The CHNA identified eleven key health priorities, with four selected as focus areas for Mercy Hospital Jefferson over the next three years:

- Access to Care
- Mental Health and Substance Use
- Cancer
- Aging Services

These priorities will guide Mercy Hospital Jefferson's community benefit planning and implementation strategies. For more information about Mercy Hospital Jefferson and to access the full report, please visit <https://www.mercy.net/about/community-benefits/>. We welcome ongoing collaboration and feedback as we work together to build a healthier community.



A handwritten signature in black ink that reads "Dan Eckenfels".

Dan Eckenfels  
President  
Mercy Hospital Jefferson

# Community Profile

## Jefferson County, Missouri

In 2022 the population estimate was 229,336

In 2022, the largest racial or ethnic group was White, reporting at 93%

Since 2019, there has been a 1.7% increase in population

In 2022 the median household income was \$77,217

Source: Census Bureau



# Community Profile

## Jefferson County

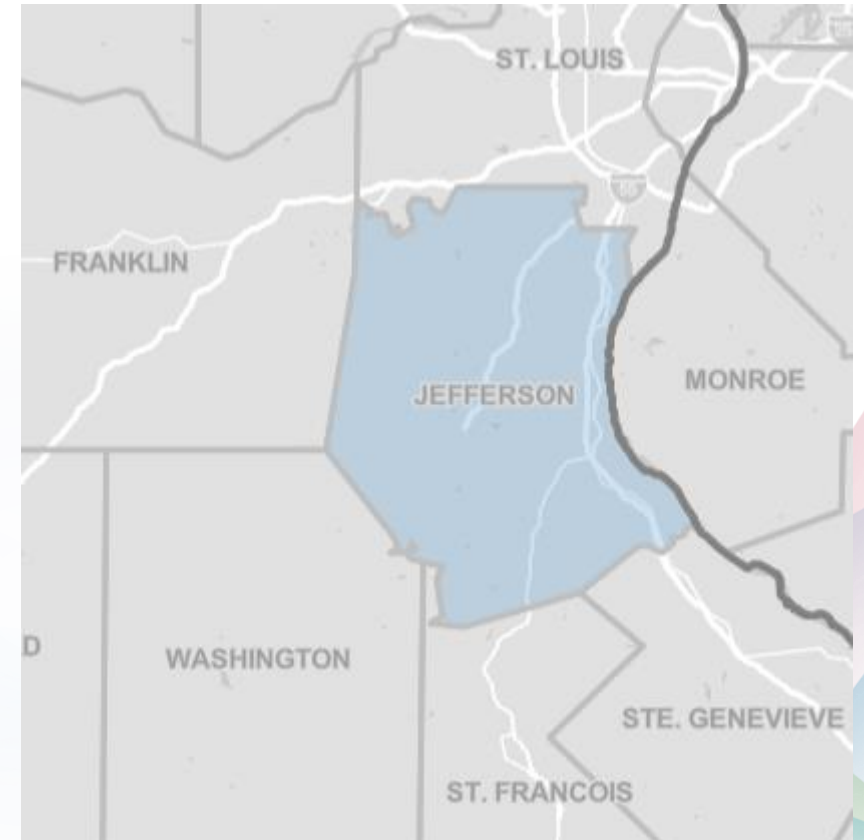
For the purpose of this CHNA, Mercy Jefferson defines its primary service area as Jefferson County, Missouri, although it also cares for patients from neighboring counties.

Jefferson County is in the eastern part of Missouri, covering 664 square miles, and is the 6<sup>th</sup> most populous county in the state. There are 20 municipalities (29 zip codes) located in Jefferson County, and Hillsboro is the county seat.

As of the 2020 census, there were 88,836 households, out of which 32.6% had children under the age of 18 living with them. There were 26,635 households (30.0%) with one of more people 65 years and over.

In 2020 the average household size was 2.58. The overwhelming majority of households (96.9%) report English is the only language spoken in their home.

Source: Census Bureau



# Community Profile

## Jefferson County (continued)

Jefferson County is also home to:

- A count-wide health department
- Several mobile units for primary, dental and mental health care
- 11 public school districts, 14 private schools, and 1 two-year community college
- 12 public parks run by the Jefferson County Parks Department, totaling 283 acres
- 17 fire protection districts and 5 ambulance/EMS districts
- Numerous places of worship and multiple food pantries
- Many other organizations who collaborate to help keep the Jefferson County community safe and healthy



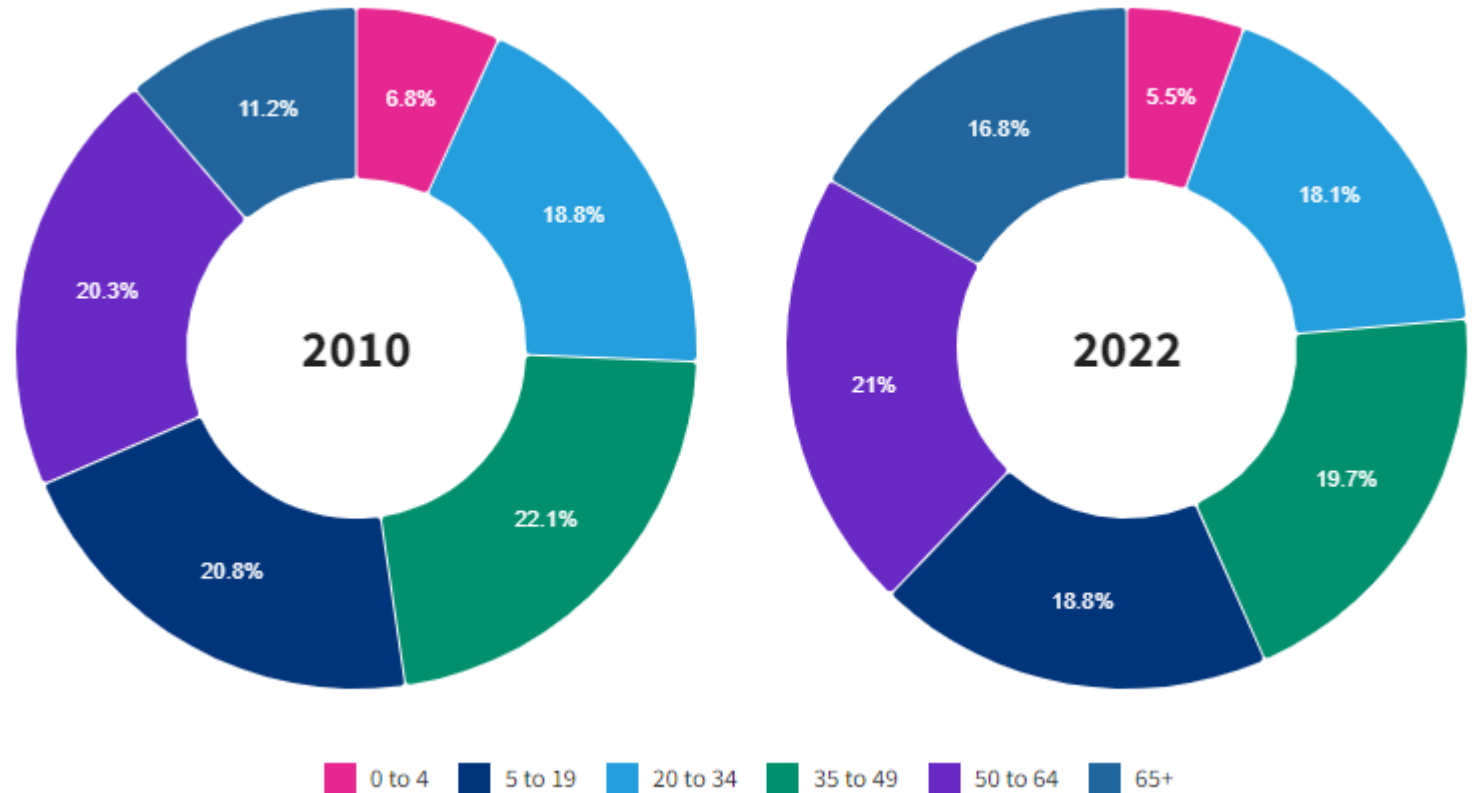
# Community Profile

## Age Distribution

The share of the population that is 0 to 4 years old **decreased** from **6.8%** in **2010** to **5.5%** in **2022**.

The share of the population that is 65 and older **increased** from **11.2%** in **2010** to **16.8%** in **2022**.

Source: Census Bureau



# Community Profile

## Education

Level	Jefferson	Missouri
Less than High School	2.1%	2.6%
Some High School	5.9%	5.3%
High School Degree	29.9%	29.4%
Some College Assoc. Degree	36.6%	29.4%
Bachelor's Degree or Greater	25.8%	33.2%

Source: Census Bureau,  
2023 American Community Survey



# Community Profile

## Median Household Income



Source: Census Bureau,  
American Community Survey 2018-22



# Community Profile

## Insurance Coverage

### Mercy Hospital Jefferson Primary Service Area Payor Mix, July 2024

Commercial – 49.2%

Medicare Traditional – 7.1%

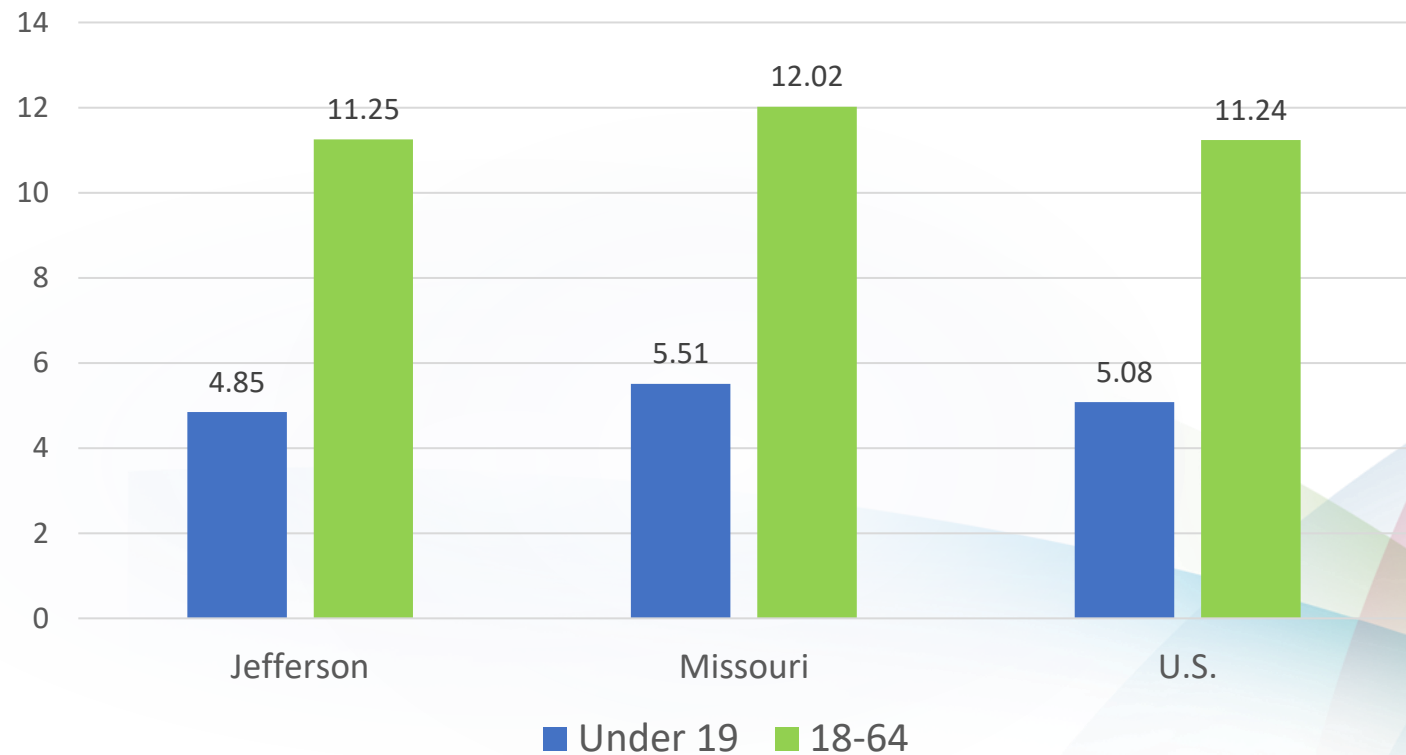
Medicare Advantage – 12.9%

Medicaid – 21.6%

Uninsured – 9.2%

Source: EDAO, Market Intelligence/Clarivate

### Adult and Child Uninsured Rates, 2022



Source: Census Bureau,  
Small Area Health Insurance Estimates. 2022

# Community Profile

## Access to Care

	Jefferson	Missouri	U.S.
Primary Care Physicians	3,930:1	1,420:1	1,330:1
Dentists	2,360:1	1,600:1	1,360:1
Mental Health Providers	960:1	410:1	230:1

Source: Census Bureau,  
2024 County Health Rankings



# Our Assessment Process

## Needs Assessment Survey

In late 2023, the St. Louis Regional Hospital Collaborative began coordinating efforts for the 2024 Community Health Needs Assessment (CHNA), aiming to streamline community input by consolidating several earlier surveys into one unified survey.

In summer 2024, Mercy, together with SSM Health, BJC Healthcare, St. Luke's, and Shriners's Hospital, distributed an online survey across the St. Louis region. The survey, available in both Spanish and English, ran from April to June and took roughly five minutes to complete. It asked 15 questions about health challenges, healthcare access, and social determinants of health such as income, neighborhood conditions, and social networks. Although the survey was mostly online, paper copies were available upon request. Open to all residents of the St. Louis area, including Jefferson County, the survey was promoted through outreach to local stakeholders, participation in community events, and social media campaigns. A copy of the survey is included in Appendix A of this report.

In total, 1270 surveys were submitted by individuals who work and/or live in Jefferson County.



**Jefferson County  
Community Health  
Needs Assessment**

*Share what is  
important to you!*

- 1 TAKE THE SURVEY**  
Visit <https://bit.ly/2024HealthNeedsSurvey> or scan the QR code. The survey takes approximately 5 minutes to complete and all responses are kept completely anonymous.
- 2 SHARE IT WITH YOUR FRIENDS & FAMILY**  
Your feedback will help inform future health care programming and services in Jefferson County. It is important we hear back from you by 05/17/24.
- 3 PARTICIPATE IN UPCOMING FOCUS GROUPS**  
Focus groups will take place at the end of the summer! Watch for dates to be shared in the upcoming months.





*Make your voice heard!*

**Every voice matters, and the health of our communities will benefit.**

# Our Assessment Process

## Needs Assessment Survey – Jefferson Results

The full analysis of Jefferson County responses, analyzed by the Jefferson County Health Department, is included in Appendix B of this report. Key findings from the survey include:

- **Scarce resources:** Public transportation, high-paying jobs, and services for aging populations were identified as the most needed resources in the county.
- **Available resources:** Access to places for physical activity, quality schools, and healthcare services were considered the most readily available resources.
- **Top health concerns for adults:** Age-related illnesses, cancers, and mental health were the primary health concerns reported.
- **Top health concerns for children:** Abuse and neglect, intellectual and developmental disabilities, and mental health were the most significant health concerns for children.
- **Barriers to healthcare:** Cost, lack of health insurance, and transportation issues were the main barriers to accessing healthcare services.
- **Mental health and substance abuse concerns for adults:** Anxiety, alcohol use, and depression were the top concerns in this area.
- **Mental health and substance abuse concerns for children:** Anxiety, bullying, and alcohol use were the primary concerns for children.

These highlights provide a snapshot of the health challenges and resource gaps in Jefferson County, helping to inform future health improvement strategies.

# Our Assessment Process

## Secondary Data for CHNA

To enhance our understanding of the communities we serve and identify key health priorities and needs, the Community Health Needs Assessment (CHNA) process incorporates secondary data sources. These data provide valuable context and insights, helping to identify disparities in health and social outcomes within the communities served by Mercy Jefferson.

Secondary data sources used throughout the CHNA process include, but are not limited to, the following:

- **County Health Rankings & Roadmaps:** Provides county-level health data and insights into social, economic, and environmental factors that influence health.
- **Missouri Department of Health and Senior Services:** Offers state-level health data, including statistics on diseases, health behaviors, and social determinants of health.
- **Explore MO Health:** Provides data on health outcomes, behaviors, and community health resources within Missouri.
- **U.S. Census Bureau:** Offers demographic data, including population statistics, income levels, and other social factors critical for understanding community health needs.
- **All Things Missouri Health Rankings Report:** Offers a comprehensive look at health data across Missouri, providing insights into key health indicators.
- **Missouri State Health Improvement Plan:** Details the state's health priorities and strategies goals for improving health outcomes in Missouri.

These secondary data sources play a crucial role in painting a comprehensive picture of the health landscape in the communities we serve, helping us to address key health disparities and inform strategic planning for health improvement.

# Our Assessment Process

## Community Partner Collaboration Day

As part of our ongoing commitment to center community voice in the development of our Community Health Needs Assessment (CHNA), the community collaborative hosted a pivotal event—the Community Partner Collaboration Day. This event marked an important step in the collective effort to deepen our understanding of the current state of our county’s resources and health needs.

During the event, over 50 participants from 29 different organizations gathered to engage in a thoughtful review of community data (Appendix B), and to share valuable insights into our county’s strengths and areas of opportunity. These discussions helped to identify both the existing assets within the community and the key challenges that must be addressed to improve the overall health and well-being of residents.

Attendees represented a wide range of sectors, including public health, education, public safety, government, and various community-based organizations. This diversity of perspectives was crucial in creating a comprehensive view of the county's needs. The day featured a combination of small group conversations and larger group discussions, focusing on critical issues such as mental health, substance use, physical health, childhood challenges, and barriers to accessing healthcare. Scribes and facilitators were used to capture community input, concerns, ideas and suggestions (Appendix C).

# Prioritized Needs

## Prioritizing Identified Health Needs

The process for selecting the prioritized health needs for the new Community Health Needs Assessment (CHNA) involved analyzing both primary and secondary data, which led to the identification of eleven key health needs. These needs were selected based on their high ranking in surveys, their recognition as health disparities in public health data, and their prioritization in previous CHNAs.

In November 2024, Mercy Hospital Jefferson's Executive Leadership Team convened to prioritize the eleven health needs. The team reviewed the collected data, assessed the strengths and resources available in the community, and aligned the priorities with the hospital's strategic plan. A strategy grid was used to narrow down the list, evaluating each need based on two criteria: Severity of the Need and Availability of Resources to address it.

The eleven identified health needs were: Access to Care, Financial Literacy, Substance Use, Behavioral Health, Affordable Housing, Transportation, Aging Services, Obesity/Healthy Lifestyles, Intellectual/Developmental Disabilities, Cancers, and Maternal and Infant Health.

Strategy Grid Results

		Magnitude of Need	
		High	Low
Availability of Resources	High	Access to Care Substance use Behavioral Health Aging/Age Related Illness Cancers	Maternal and Infant Health
	Medium	Obesity/Healthy Lifestyles	
	Low	Financial Literacy Affordable Housing Transportation Intellectual/DD	

# Prioritized Needs

## Prioritizing Identified Health Needs (continued)

To prioritize the top six health needs, Mercy Hospital Jefferson used a Nominal Group Technique. Each team member ranked the needs based on five factors: how serious the need is, how feasible it is to make changes, how well it aligns with the hospital's mission and goals, the resources available, and its importance to the community. After adding up the scores from all participants, the final priorities were determined.

For the 2025 Community Health Needs Assessment, Mercy Hospital Jefferson has focused on four key health needs: 1) Access to Care, 2) Behavioral Health and Substance Abuse, 3) Cancers, and 4) Aging Services. Access to Care and Behavioral Health and Substance Abuse are being carried over from the 2022 CHNA, while Cancers and Aging Services are newly identified priorities. The hospital will continue to build on existing strategies that have shown positive results, while also exploring new programs, interventions, and partnerships to address all the prioritized needs.

### Nominal Group Ranking Results

Identified Health Need	Total Score	Chosen as Priority Need (Y/N)
Access to Care	191	Yes
Substance Abuse	116	Yes
Behavioral Health	167	Yes
Aging Services	118	Yes
Cancers	134	Yes
Obesity/Healthy Lifestyle	79	No

# Prioritized Needs

## Prioritized Needs for 2025 CHNA



Access to Care



Behavioral Health  
Substance Use



Cancer



Aging Services

# Prioritized Needs

## Access to Care

Access to Care has consistently been a priority in Mercy Jefferson's Community Health Needs Assessments (CHNAs) from 2016 to 2022, reflecting the ongoing challenges faced by Jefferson County residents in accessing the healthcare they need. One of the most pressing concerns is the shortage of primary care physicians, which leaves many residents without a consistent source of care. Barriers identified in the most recent CHNA include high out-of-pocket costs, lack of health insurance, transportation difficulties, and a shortage of healthcare providers, all of which disproportionately affect vulnerable and at-risk populations.

Mercy Jefferson remains steadfast in its commitment to addressing these challenges and improving access to care for all residents of Jefferson County. This commitment extends especially to the uninsured, economically disadvantaged, and other vulnerable populations who are most affected by these barriers. While significant progress has been made, Mercy Hospital Jefferson continues to prioritize innovative and impactful programs and initiatives designed to further enhance access to healthcare services. Through these efforts, Mercy Hospital Jefferson aims to ensure that every individual in Jefferson County, regardless of socioeconomic status, has the opportunity to receive the care they deserve.





# Prioritized Needs

## Mental Health and Substance Use

Mental Health and Substance Use have been identified as priority needs in Jefferson County, where these issues, though distinct, are often interconnected. The county's population of nearly 230,000 continues to face significant mental health challenges and substance use disorders, highlighting the need for comprehensive care and resources.

The latest CHNA identified anxiety, alcohol use, and depression as top concerns for adults, while anxiety, bullying, and alcohol use were major issues for children. Drug use was also a concern across both populations.

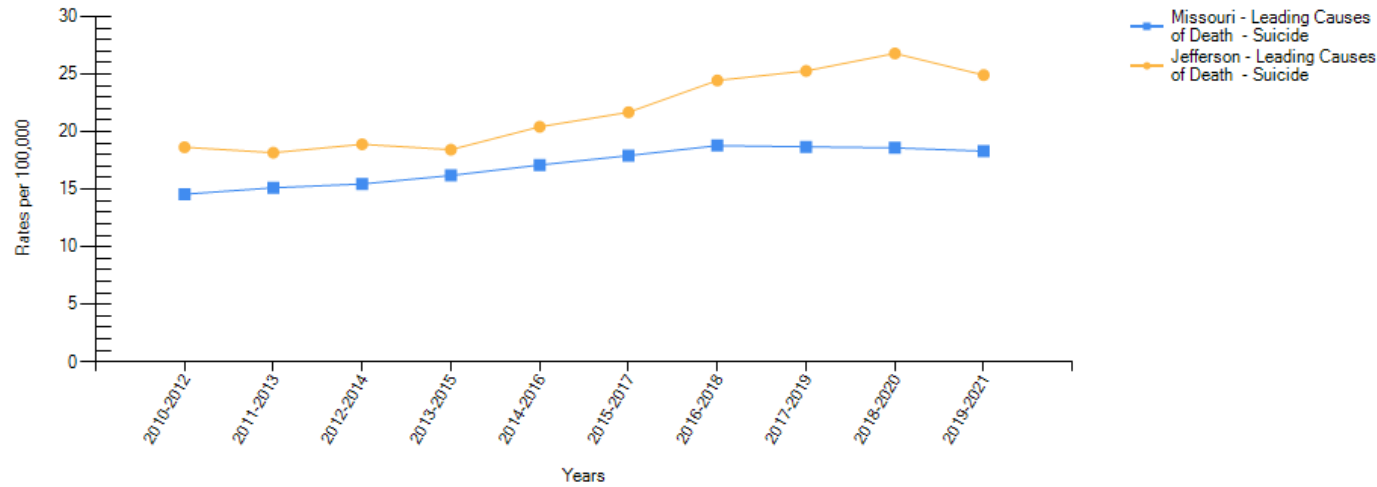
These priorities have been consistently addressed in previous CHNAs, and while progress has been made, continued work is needed. Mercy Hospital Jefferson remains committed to reducing the stigma surrounding mental health, increasing access to care, and offering resources for those struggling with substance use, particularly among vulnerable populations. Mercy Hospital Jefferson will continue to drive impactful change to improve the well-being of the community.

# Prioritized Needs

## Mental Health and Substance Use (Continued)

Three Year Moving Average Rates - Missouri Resident Death - Leading Causes Profile

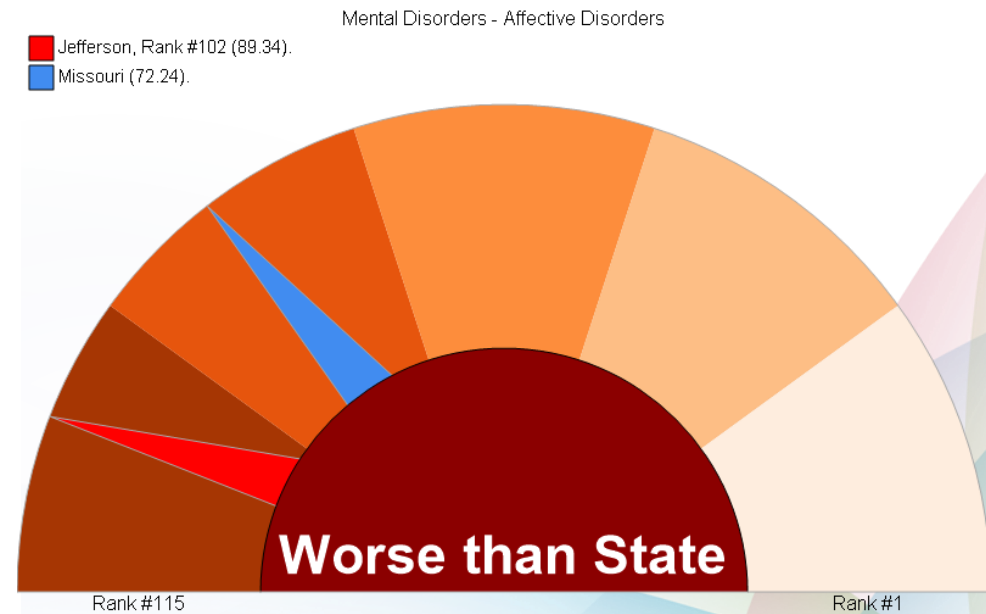
Geography: Missouri and Jefferson County, Demographic: All  
Indicator: Leading Causes of Death - Suicide



Rates are considered unreliable when based on less than 20 events. Please check corresponding event counts before interpreting the rates shown here.  
\* Fewer than 20 events in numerator; rate is unreliable.  
Trends are available only if each 3-year period of the moving average has an average of 20 or more events.  
Causes of death at the left margin are listed in order from most to least prevalent statewide, except the seven grouped at the bottom. They are of lower rank or are non-rankable groups which include other causes, but are included due to special interest.

Source: DHSS-MOPHIMS Community Data Profiles - Death - Leading Causes  
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## Missouri Resident Inpatient Hospitalizations Profile Jefferson County, Missouri



Ranks are based on the 115 counties in Missouri (including St. Louis City).  
Data Year: 2011-2021

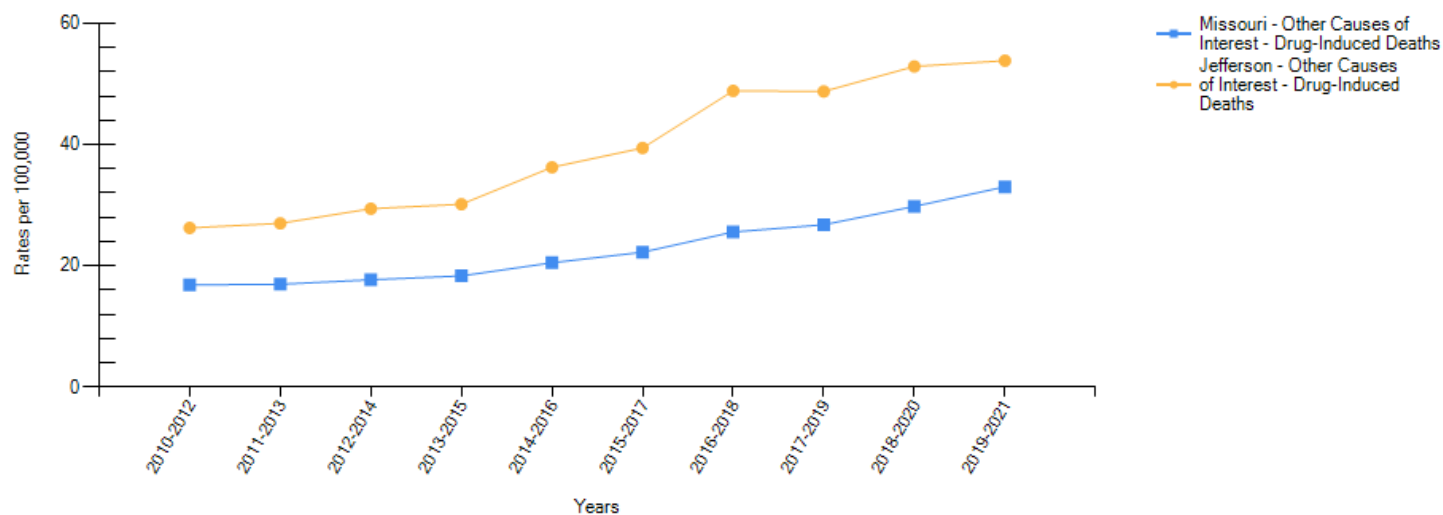
Source: Missouri Department of Health and Senior Services

# Prioritized Needs

## Mental Health and Substance Use (Continued)

Three Year Moving Average Rates - Missouri Resident Death - Leading Causes Profile

Geography: Missouri and Jefferson County, Demographic: All  
Indicator: Other Causes of Interest - Drug-Induced Deaths



Rates are considered unreliable when based on less than 20 events. Please check corresponding event counts before interpreting the rates shown here.  
\* Fewer than 20 events in numerator; rate is unreliable.  
Trends are available only if each 3-year period of the moving average has an average of 20 or more events.  
Causes of death at the left margin are listed in order from most to least prevalent statewide, except the seven grouped at the bottom. They are of lower rank or are non-rankable groups which include other causes, but are included due to special interest.

Source: DHSS-MOPHIMS Community Data Profiles - Death - Leading Causes  
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### 2023 Status Report on Missouri's Substance Use and Mental Health Jefferson County, Missouri

<i>IMPAIRED DRIVING</i>	2022	2021	2020
Alcohol Involved Fatal Crashes	4	10	8
Alcohol Involved Injury Crashes	74	59	73
Alcohol Involved Property Damage Crashes	123	121	110
Killed in Alcohol Involved Crashes	4	12	8
Injured in Alcohol Involved Crashes	95	82	106
Drug Involved Fatal Crashes	0	7	9
Drug Involved Injury Crashes	20	24	30
Drug Involved Property Damage Crashes	34	33	38
Killed in Drug Involved Crashes	0	7	10
Injured in Drug Involved Crashes	23	39	51

Source: Missouri Department of Public Safety, Missouri State Highway Patrol.

# Prioritized Needs

## Cancer

Cancer has been identified as a priority need in this CHNA. According to the most recent CDC data, from 2017-2021, Jefferson County reported 6,670 new cancer cases, with an incidence rate of 480 cases per 100,000 people. Additionally, from 2018-2022, there were 2,383 cancer-related deaths, translating to 172 deaths per 100,000 people. These troubling statistics highlight the urgent need for focused efforts on cancer care and prevention in the community, with an emphasis on increased awareness and interventions for both prevention and treatment.

Mercy Hospital Jefferson is deeply committed to supporting the whole person through the challenges of cancer. Through its local Cancer Center, Mercy Jefferson provides comprehensive, compassionate care from diagnosis to treatment, prioritizing both the physical and emotional well-being of patients.

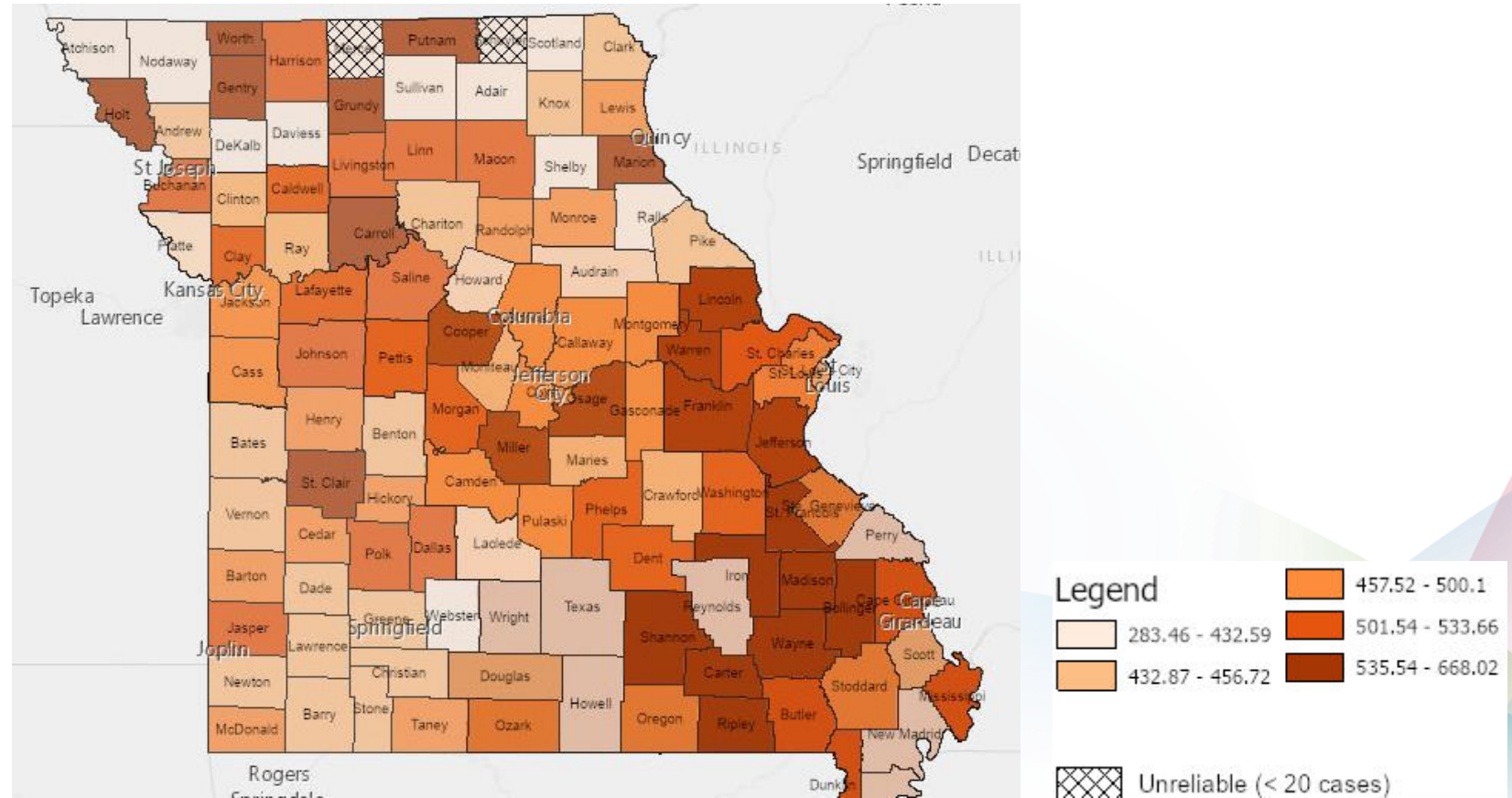
While cancer has not been a priority in previous CHNAs, it is now recognized as a critical issue. Mercy Jefferson is dedicated to strengthening its response and is actively pursuing new partnerships and collaboration opportunities to expand cancer care services and enhance prevention efforts.



# Prioritized Needs

## Cancer (Continued)

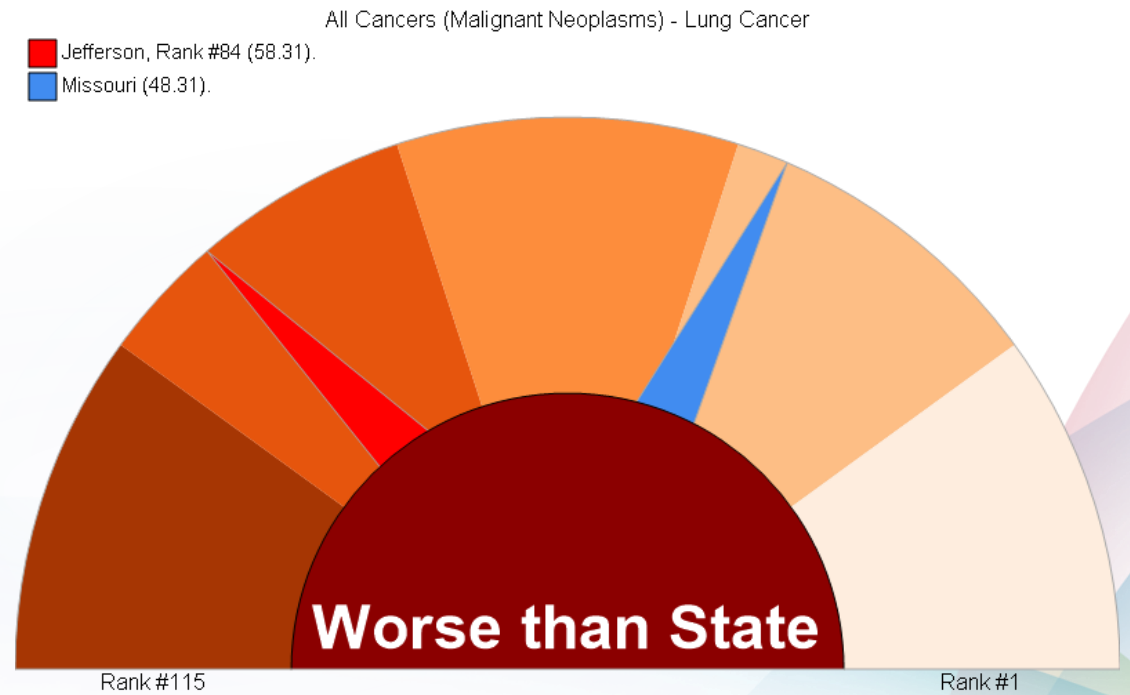
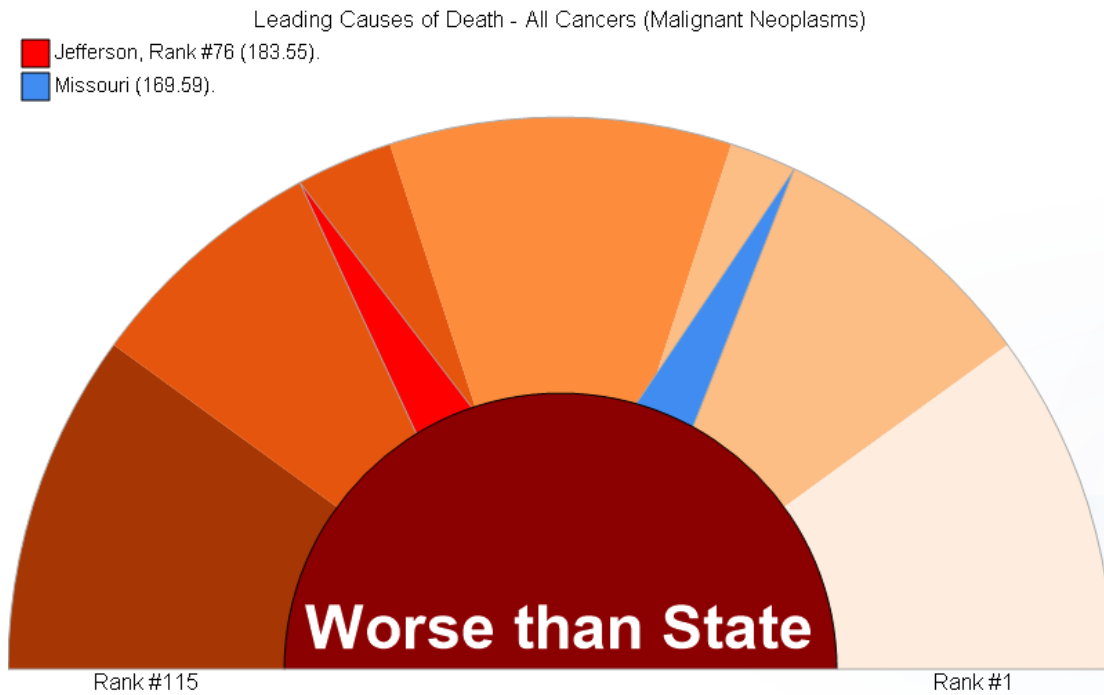
**Missouri Resident Cancer Incidence**  
Single Year: 2021; Annualized per 100,000 Residents



Source: Missouri Department of Health and Senior Services

# Prioritized Needs

## Cancer (Continued)



Ranks are based on the 115 counties in Missouri (including St. Louis City).  
Data Year: 2011-2021

Source: Missouri Department of Health and Senior Services

# Prioritized Needs

## Aging Services

Aging Services has been identified as a priority need in Jefferson County, reflecting the growing concern for the county's increasing aging population. According to the latest community health survey, age-related illnesses are the top health concern among adults in the area. Despite this, a significant number of respondents expressed concerns about the availability of resources for aging individuals. Only 5.39% of respondents believe resources are always available, while 15.92% believe they are often available. In contrast, 32.8% and 19.98% feel that resources are only sometimes or rarely accessible.

Mercy Hospital Jefferson is committed to compassionately caring for our aging patients, ensuring they receive the highest quality care tailored to their needs. The hospital is dedicated to not only treating aging individuals but also providing essential support for their families and caregivers. To further address these needs, Mercy Hospital Jefferson is actively partnering with local organizations to strengthen resources and ensure that aging adults in the community have access to the care, services, and support they need to maintain their quality of life. Through these efforts, Mercy Hospital Jefferson aims to foster a community where aging individuals are treated with dignity, and their health and well-being are prioritized.



# Prioritized Needs

## Needs Not Addressed

### **Obesity/Maintaining a Healthy Lifestyle**

While Mercy Hospital Jefferson has not selected Obesity and Maintaining a Healthy Lifestyle as a specific priority for the 2025 CHNA, we remain committed to improving health behaviors and supporting the community in addressing this critical need. We recognize that access to healthy food and physical activity are key components of overall health, and although this issue is not a designated priority this year, we are dedicated to making a difference in these areas.

Mercy Hospital Jefferson will work closely with community partners to promote healthy behaviors, including increasing access to nutritious food, supporting physical activity initiatives, and providing education to help individuals make healthier choices. Through outreach programs and collaboration with local schools, businesses, and health organizations, we aim to build a culture of wellness that encourages sustainable health improvements for the community. While not a formal priority in this cycle, we remain deeply invested in fostering long-term wellness and supporting the community's efforts toward healthier living.



*Your life is our life's work.*

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# Appendix A

## Jefferson County 2024 Community Survey



### St. Louis Community Health Needs Assessment

Your community is where you live, learn, work, worship, and play. You have an important perspective on the needs in your community, and we would like to learn from you. The hospital systems in the St. Louis region are working together to learn from community members and identify the top health concerns and health related needs. Your input is very important and will be used to help identify priorities and develop solutions.

The survey will take about 5 minutes. All responses are confidential and anonymous. You will not be asked for your name, and we will only share combined results. Once you complete the survey, please return it to the survey distributor. You can also take the survey online at <https://bit.ly/2024HealthNeedsSurvey> or using the QR code in the top right corner of this page. Share the link with your family, friends, and neighbors!

#### Tell Us About Your Community

##### 1. What is your home ZIP code?

Enter the five-digit ZIP code of the address where you live:

The next question asks about the resources that help you and your neighbors be healthy.

##### 2. Thinking about the community where you live, how available are the following resources?

For each resource below, choose a number from 1 to 5, where 1 means *Never available*, and 5 means *Always available*. If you do not know, choose *Not sure*.

	1	2	3	4	5	
	Never	Rarely	Sometimes	Often	Always	Not sure
Safe childcare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable healthy foods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health and substance use services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Places to be physically active, such as community parks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Services that support people as they age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clean outdoor environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good paying jobs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safe community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The next few questions ask about the health needs in your community.

##### 3. Thinking about adults in the community where you live, what are the top three health problems?

Choose three items from the list that are a concern for adults in your community.

- Age-related illnesses (such as memory issues, movement issues, and falls)
- Cancers
- Chronic pain and pain management
- Diabetes and high blood sugar
- Heart conditions (such as heart diseases, high blood pressure, and stroke)
- Infectious diseases (such as Covid-19, Influenza, pneumonia, and measles)
- Maternal and infant health (such as preterm births and adequate care for birthing people and their babies)
- Not listed here or prefer to describe: \_\_\_\_\_
- Not sure
- Mental health (such as anxiety, depression, loneliness, and suicide)
- Motor vehicle accidents and injuries
- Obesity and maintaining healthy weight
- Oral (mouth) and dental health
- Reproductive and sexual health, including sexually transmitted infections (STIs and STDs)
- Respiratory and lung diseases (such as allergies, asthma, and COPD)
- Substance use (such as alcohol, drug, and tobacco use)
- Violence (such as assaults, domestic violence, and gun violence)

##### 4. Thinking about children in the community where you live, what are the top three health problems?

Choose three items from the list that are a concern for children in your community.

- Abuse and neglect
- Blood diseases (such as lead poisoning, anemia, and sickle cell)
- Cancers
- Diabetes and high blood sugar
- Infectious diseases (such as Covid-19, RSV, Influenza, pneumonia, and measles)
- Injuries (such as motor vehicle accidents and injuries, poisonings, drownings, and burns)
- Intellectual / developmental disabilities (such as autism, Down Syndrome, ADHD)
- Infant / baby health (such as low birth weight, health problems, and death before the age of one)
- Not listed here or prefer to describe: \_\_\_\_\_
- Not sure
- Mental health (such as anxiety, depression, loneliness, suicide, and bullying)
- Obesity and maintaining healthy weight
- Oral (mouth) and dental health
- Reproductive and sexual health, including teen pregnancy and sexually transmitted infections (STIs and STDs)
- Respiratory diseases (such as allergies and asthma)
- Substance use (such as alcohol, drug, and tobacco use)
- Violence (such as assaults, domestic violence, gun violence, and school shootings)

5. Thinking about the community where you live, which barriers prevent access to health care?

Select all that apply.

<input type="checkbox"/> Cultural / religious beliefs	<input type="checkbox"/> Health insurance is not accepted
<input type="checkbox"/> Language barriers	<input type="checkbox"/> Transportation (getting to and from doctor's visits and appointments)
<input type="checkbox"/> Fear (such as fear of doctors or not ready to discuss a health problem)	<input type="checkbox"/> Don't know how to find healthcare services or providers
<input type="checkbox"/> Don't feel welcome or respected	<input type="checkbox"/> Not enough health care services or providers
<input type="checkbox"/> No health insurance	<input type="checkbox"/> Scheduling problems (such as health services not open when available)
<input type="checkbox"/> Costs associated with getting healthcare	
<input type="checkbox"/> Not listed here or prefer to describe: _____	
<input type="checkbox"/> None	

For many communities, mental health and substance use needs are at a crisis level. The following questions ask about specific needs in your community.

6. Thinking about adults in the community where you live, what are the top three mental health and substance use problems?

Choose three items from the list that are a concern for adults in your community.

<input type="checkbox"/> Alcohol use	<input type="checkbox"/> Eating disorders
<input type="checkbox"/> Anxiety	<input type="checkbox"/> Loneliness
<input type="checkbox"/> Depression	<input type="checkbox"/> Post Traumatic Stress Disorder (PTSD)
<input type="checkbox"/> Domestic violence	<input type="checkbox"/> Serious mental illnesses (schizophrenia, major depressive disorders, bipolar disorder)
<input type="checkbox"/> Drug use	<input type="checkbox"/> Suicide
<input type="checkbox"/> Not listed here or prefer to describe: _____	
<input type="checkbox"/> Not sure	

7. Thinking about children in the community where you live, what are the top three mental health and substance use problems?

Choose three items from the list that are a concern for children in your community.

<input type="checkbox"/> Alcohol use	<input type="checkbox"/> Eating disorders
<input type="checkbox"/> Anxiety	<input type="checkbox"/> Loneliness
<input type="checkbox"/> Bullying	<input type="checkbox"/> Post Traumatic Stress Disorder (PTSD)
<input type="checkbox"/> Depression	<input type="checkbox"/> Serious mental illnesses (schizophrenia, major depressive disorders, bipolar disorder)
<input type="checkbox"/> Drug use	<input type="checkbox"/> Suicide
<input type="checkbox"/> Not listed here or prefer to describe: _____	
<input type="checkbox"/> Not sure	

Tell Us About You

We strive to create programs and services that represent the full diversity of our community. We ask the following questions about you to ensure that we meet this goal. You may skip any questions that you prefer not to answer. All responses are confidential and anonymous.

8. What is your age group?

Choose one answer.

- Under 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75+
- Prefer not to disclose

9. Which of the following best describes you?

Choose all that apply.

- Woman
- Man
- Genderqueer
- Transgender/Trans woman
- Transgender/Trans man
- Non-binary
- Other or prefer to self-describe: \_\_\_\_\_
- Prefer not to disclose

10. Which of the following best describes you?

Listed in alphabetical order. Choose all that apply.

- American Indian or Alaska Native
- Asian
- Black or African American
- Middle Eastern or North African
- Native Hawaiian or Other Pacific Islander
- White
- Other or prefer to self-describe: \_\_\_\_\_
- Prefer not to disclose

**11. Which of the following best describes you?**

Choose one answer.

- Hispanic
- Non-Hispanic
- Prefer not to disclose

**12. What is the highest level of education you have completed?**

Choose one answer.

- Less than high school
- High school diploma/GED
- Some college credit, no degree
- 2-year college / Vocational training
- 4-year college / Bachelor's degree
- Master's, Professional, or Doctorate degree
- Other or prefer to self-describe: \_\_\_\_\_
- Prefer not to disclose

**13. Which languages do you speak at home?**

Choose all that apply.

- English
- Albanian
- Arabic
- Bosnian
- Farsi/Dari (Persian)
- French
- Hindi
- Korean
- Nepali
- Pashto
- Mandarin
- Sign Language (ASL)
- Spanish
- Swahili
- Vietnamese
- Other or prefer to self-describe: \_\_\_\_\_
- Prefer not to disclose

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**14. What best describes your employment status?**

Choose one answer.

- Full-time
- Disabled
- Not Employed
- On Active Military Duty
- Part-time
- Retired
- Self Employed
- Student Full-time
- Student Part-time
- Other or prefer to self-describe: \_\_\_\_\_
- Prefer not to disclose

**15. What is your total household income for the year?**

Choose one answer.

- Less than \$10,000
- \$10,000 to \$24,999
- \$25,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 to \$149,999
- \$150,000 to \$199,999
- \$200,000 or more
- Prefer not to disclose

You have answered the final question of the survey. Please return the survey to the survey distributor.

Thank you for your time and input!

Version: English

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# Appendix B

## Jefferson County 2024 CHNA Results

Presented at the Community Collaboration Day

# Jefferson County 2024 Community Health Needs Assessment Results



# Community Health Needs Assessment - 2024

## Respondent Demographics

### Who responded to the survey?

Age group	Count	%	Education	Count	%	Employment	Count	%	Household Income	Count	%
0-17	1	0.08%	2-year college/Vocational training	202	15.91%	Active Military Duty	1	0.08%	\$0-\$9,999	68	5.35%
18-24	18	1.42%	4-year college/Bachelor's degree	251	19.76%	Disabled	117	9.21%	\$10,000 to \$24,999	143	11.26%
25-34	115	9.06%	High school diploma/GED	118	9.29%	Full-time	574	45.20%	\$100,000 to \$149,999	176	13.86%
35-44	230	18.11%	Less than high school	28	2.20%	Not Employed	43	3.39%	\$150,000 to \$199,999	88	6.93%
45-54	223	17.56%	Master's, Professional, or Doctorate degree	211	16.61%	Part-time	73	5.75%	\$200,000 or more	43	3.39%
55-64	232	18.27%	Other	12	0.94%	Prefer not to Disclose	254	20.00%	\$25,000 to \$49,999	167	13.15%
65-74	158	12.44%	Prefer not to Disclose	267	21.02%	Retired	175	13.78%	\$50,000 to \$74,999	127	10.00%
75+	37	2.91%	Some college, no degree	181	14.25%	Self Employed	29	2.28%	\$75,000 to \$99,999	90	7.09%
Prefer not to Disclose	256	20.16%	<b>Total</b>	<b>1270</b>	<b>100.00%</b>	Student Full-time	3	0.24%	Prefer not to Disclose	368	28.98%
<b>Total</b>	<b>1270</b>	<b>100.00%</b>				Student Part-time	1	0.08%	<b>Total</b>	<b>1270</b>	<b>100.00%</b>
						<b>Total</b>	<b>1270</b>	<b>100.00%</b>			
Gender	Count	%	Race	Count	%	Ethnicity	Count	%	Language	Count	%
Genderqueer	5	0.39%	American Indian or Alaska Native	20	1.57%	Hispanic	17	1.34%	English	993	78.19%
Man	149	11.73%	Asian	1	0.08%	Non-Hispanic	824	64.88%	English,ASL	4	0.31%
Non-binary	1	0.08%	Black or African American	19	1.50%	Prefer not to Disclose	429	33.78%	English,ASL,Spanish	1	0.08%
Other	5	0.39%	Other	8	0.63%	<b>Total</b>	<b>1270</b>	<b>100.00%</b>	English,Bosnian	3	0.24%
Prefer not to Disclose	258	20.31%	Prefer not to Disclose	281	22.13%				English,French	2	0.16%
Trans man	2	0.16%	White	941	74.09%				English,French,ASL,Spanish	1	0.08%
Trans woman	1	0.08%	<b>Total</b>	<b>1270</b>	<b>100.00%</b>				,Other		
Woman	849	66.85%							English,French,Spanish	1	0.08%
<b>Total</b>	<b>1270</b>	<b>100.00%</b>							English,Other	3	0.24%
									English,Spanish	5	0.39%
									English,Spanish,Other	1	0.08%
									Other	2	0.16%
									Prefer not to Disclose	254	20.00%
									<b>Total</b>	<b>1270</b>	<b>100.00%</b>

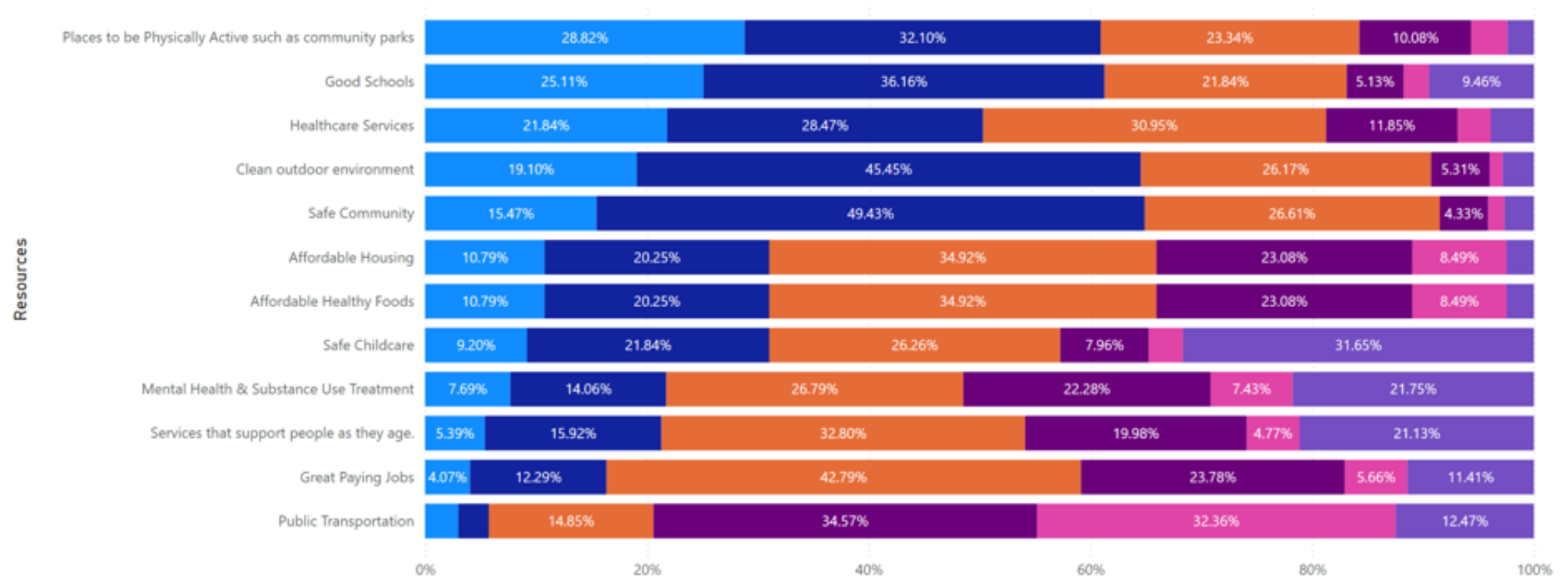
# Community Health Needs Assessment - 2024

## Community Conditions

Thinking about the community where you live, how available are the following resources?

### Resources

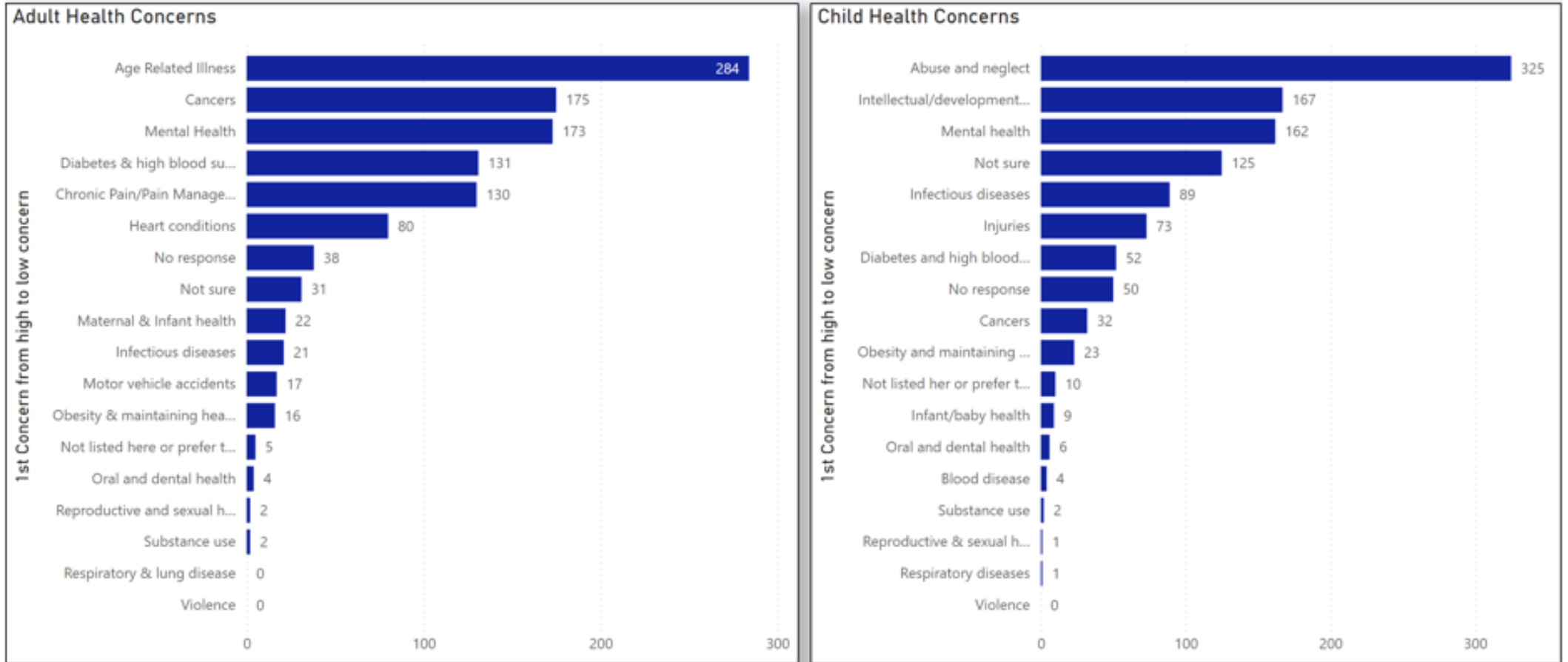
Always Often Sometimes Rarely Never/Not Sure No Response



# Community Health Needs Assessment - 2024

## Health Concerns

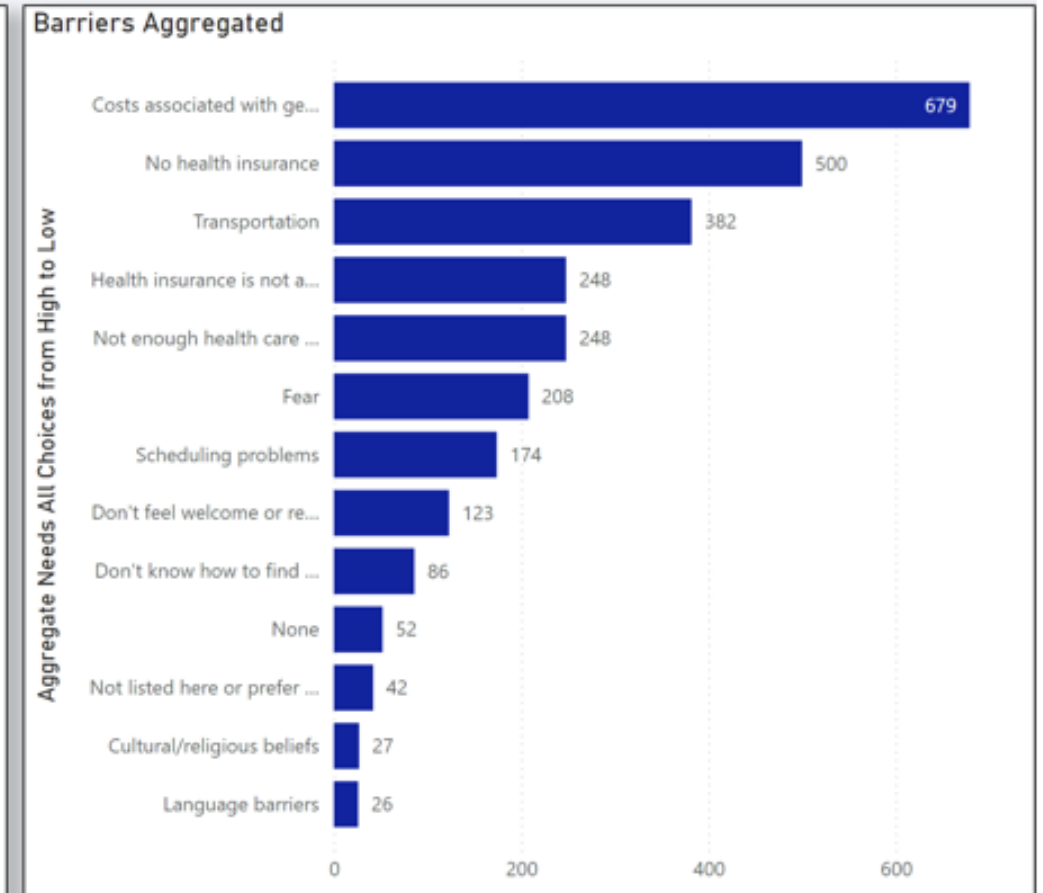
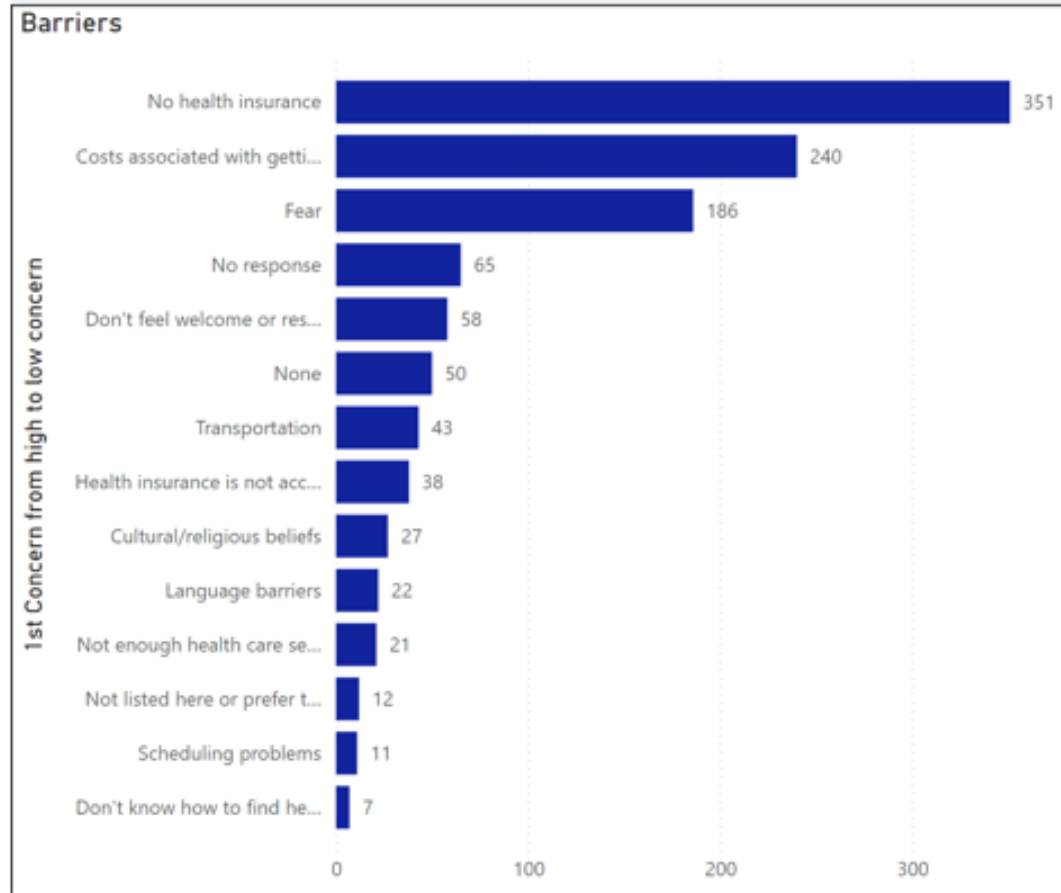
Thinking about the community where you live, what are the top health concerns?



# Community Health Needs Assessment - 2024

## Barriers to Health Care

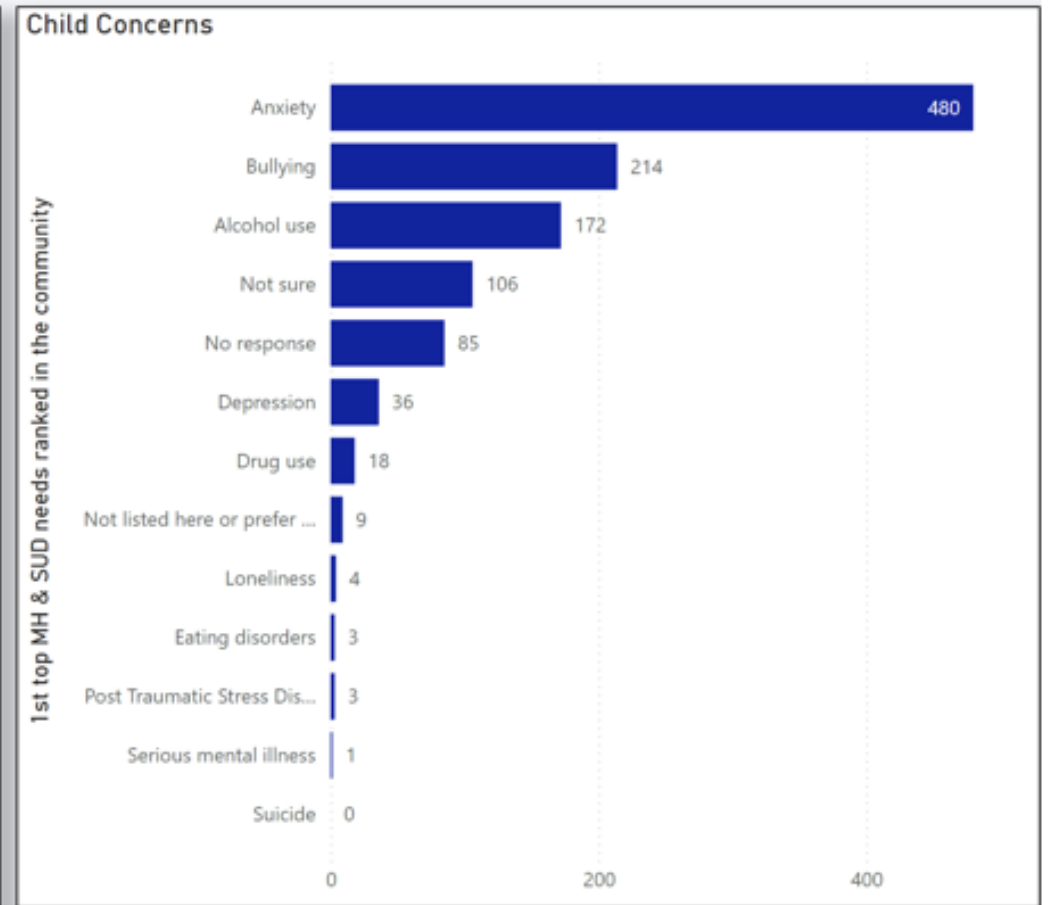
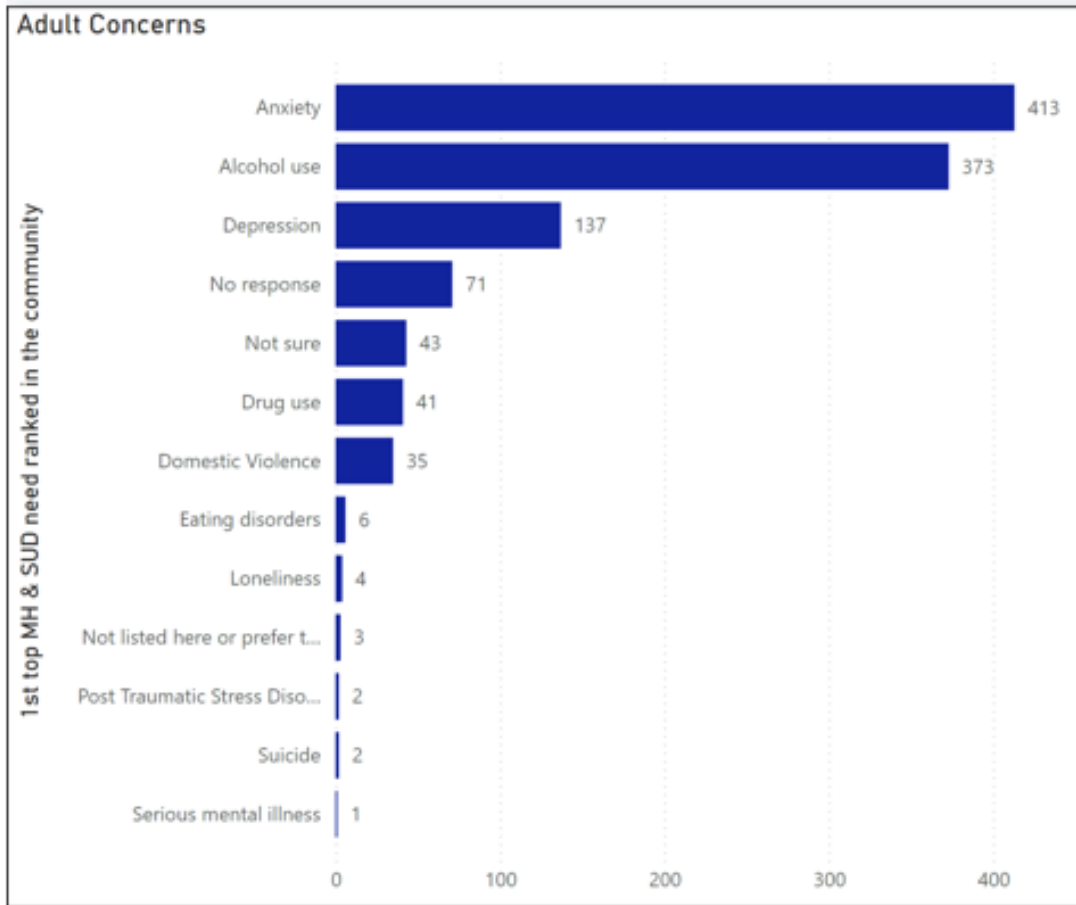
Thinking about the community where you live, what barriers prevent access to health care?



# Community Health Needs Assessment - 2024

## Mental Health & Substance Abuse

Thinking about the community where you live, what are the top mental health and substance abuse concerns?



## Data Discussion

Does anything about the data surprise you?

Does it resonate with your experiences and awareness?

Based on the community you serve, is the survey data aligned with the identified needs of the community?

## Breakout Groups

- **Mental Health** (anxiety, depression, loneliness, suicide)
- **Substance Use** (drug alcohol)
- **Physical Health** (obesity, weight mgt, diabetes, pain mgt)
- **Children** (mental health, abuse/neglect, obesity/weight)
- **Barriers to Healthcare Access** (access, cost, transportation, scheduling, fear)





## Guidance for Breakout Group Discussions

What is already happening in this issue?

What gaps do you notice in this issue?

What can we do to address this issue?



## Breakout Group Reflections

Based on today's conversations...

- What do you feel are the most critical needs in our community?
- What should our 'next steps' be?
- How would you and/or your organization like to be involved?
- What other ideas or suggestions do you have?



Thank you for your participation!



# Appendix C

## Community Partner Day Summary Report

# Community Health Needs Assessment Data Review & Collaboration Day

Friday, September 6, 2024 | 8:30a - 12:00p

8:30-8:45	<b>Welcome and Introductions</b>
8:45-9:00	<b>Overview:</b> Survey development, dissemination, and key findings.
9:00-9:45	<b>Data Review and Table Group Discussions:</b> <ul style="list-style-type: none"> <li>• Does anything about the data surprise you?</li> <li>• Does it resonate with your experiences and awareness?</li> <li>• Based on the community you serve, is the survey data aligned with the identified needs of the community?</li> </ul>
9:30-9:45	<b>Overview of Breakout Sessions:</b> Goals and Objectives
9:45-9:55	Move into Breakout Sessions
9:55-10:40	<b>Breakout Session 1:</b> <ul style="list-style-type: none"> <li>• Health Concerns: Mental Health (Anxiety, Depression, Loneliness, Suicide)</li> <li>• Health Concerns: Substance Use (Drug, Alcohol)</li> <li>• Health Concerns: Physical Health (Obesity, Weight Mgt, Diabetes, Pain Mgt.)</li> <li>• Health Concerns: Children (Mental Health, Abuse/Neglect, Obesity/Weight)</li> <li>• Barriers to Healthcare: Access, Cost, Transportation, Scheduling, Fear</li> </ul>
10:40-10:50	Move into Breakout Sessions
10:50-11:35	<b>Breakout Session 2:</b> <ul style="list-style-type: none"> <li>• Health Concerns: Mental Health (Anxiety, Depression, Loneliness, Suicide)</li> <li>• Health Concerns: Substance Use (Drug, Alcohol)</li> <li>• Health Concerns: Physical Health (Obesity, Weight Mgt, Diabetes, Pain Mgt.)</li> <li>• Health Concerns: Children (Mental Health, Abuse/Neglect, Obesity/Weight)</li> <li>• Barriers to Healthcare: Access, Cost, Transportation, Scheduling, Fear</li> </ul>
11:35-11:50	<b>Table Group Reflections:</b> <ul style="list-style-type: none"> <li>• Based on today's conversations, what do you feel are the most critical needs in our community and what should our "next steps" be?</li> <li>• How would you and/or your organization like to be involved?</li> <li>• What other ideas or suggestions do you have?</li> </ul>
11:50-12:00	<b>Closing Remarks:</b> Recap, next steps and adjournment

*Thank you for your participation and expertise!*



# Our Assessment Process

## Partner Collaboration Day

### Mental Health – Identified Themes

#### Opportunities/Concerns:

- Provider hours don't always work best for working families (3:00 and 4:00 pm sessions fill quickly)
- We need a human element (instead of just call a number or visit a website)
- Money and financial burdens cause difficulties
- People are afraid to seek help because they don't want to be stuck in inpatient care
- Medications are provided, but sometimes getting refills are difficult
- We need legislators and people in power involved in key conversations
- Lack of providers (psychiatrists specifically and youth focused)
- Long wait times
- Youth specific interventions are needed

#### Highlights:

- Community Health Workers and helping to remove barriers
- Telehealth has added additional access opportunities
- Social workers have integrated into our schools
- 988 and Behavioral Health Crisis Center



# Our Assessment Process

## Partner Collaboration Day

### **Substance Use – Identified Themes**

#### Opportunities/Concerns:

- Alcohol abuse is not being adequately addressed (and therefore limited resources)
- Lack of inpatient treatment centers in Jefferson County
- Transportation makes it difficult to access services and support
- Lack of reentry services in our community (related to sobriety)
- We have seen an increase in xylazine abuse
- Vaping among students (new gateway)
- You often need insurance to access services
- The community isn't aware of all the resources that are available

#### Highlights:

- Jefferson County Drug Prevention Coalition
- Opioid Settlement Funds
- Jefferson County Treatment Court
- Increased availability of Narcan
- Mercy's StepOne Program

# Our Assessment Process

## Partner Collaboration Day

### Physical Health – Identified Themes

#### Opportunities/Concerns:

- We need to be more proactive (education is needed)
- Access to healthy (non-processed) foods is difficult for those that rely on food pantries
- We lack “physical activity community events” (fun runs, health fairs, etc.)
- People don’t always understand the benefits they have (insurance, Medicaid, etc.)
- We have a lack of PCPs and chiropractors in our communities
- Obesity, diabetes, and pain management need a holistic approach
- We need additional mobile services (to increase access)
- It’s difficult to get involved (finances and transportation)
- Physical health issues are leading to mental health and substance use concerns

#### Highlights:

- Farmers Markets are more prevalent
- Senior Expos
- New pain management clinic
- JCHD has a registered dietician on staff



# Our Assessment Process

## Partner Collaboration Day

### Children – Identified Themes

#### Opportunities/Concerns:

- We need to be more FREE parent education (mental health, nutrition education)
- We lack qualified/quality foster parents in Jefferson County
- We need safe, affordable childcare (current 2–4-year waitlists)
- We need programs that promote healthy lifestyles for children (exercise, food, etc.)
- We have a lack adequate pediatric care
- Autism services and support decline as kids age (much harder after age 12)
- Serious mental illness in young kids is an increasing concern in our schools
- Lack of individual and family therapy options in our county
- Severe shortage of early childhood programs

#### Highlights:

- Churches and community centers are stepping up
- School districts are getting creative (Jefferson R7, Hillsboro, Northwest)
- Family Services is increasing their efforts and taking a more proactive approach

# Our Assessment Process

## Partner Collaboration Day

### Barriers to Healthcare – Identified Themes

#### Opportunities/Concerns:

- Transportation, cost of healthcare and scheduling
- There are a lot of people in crisis (who need seen quickly)
- Resource navigators are needed (overwhelming for patients)
- Our county needs adequate housing/shelter options
- Providers limit the insurance they accept (especially Marketplace)
- Copays (fear what they need to pay upfront)
- Patients are reluctant to complete “new patient paperwork”
  - Literacy concerns, embarrassment, intimidation

#### Highlights:

- Compass has expanded services in our county
- Medicaid Expansion
- Telehealth options
- Community Health Workers and Resource Navigators (we still need more)
- EZMO

# A special thank you to the organizations that participated in the Community Partner Collaboration Day event

ASPEN Network Inc

Atlas Youth Outreach

Catholic Charities Archdiocese of  
St. Louis

Chestnut Health Systems

Compass Health Network

Developmental Disability  
Advocates

Disability Resource Association

Dunklin R-V School District

Family Forward

Heroes Care

Hillsboro R-3 School District

Jefferson College

Jefferson County Community  
Partnership

Jefferson County Health  
Department

Jefferson County Library

Jefferson County Office of  
Emergency Management

Jefferson Franklin Community  
Action Corporation

Jefferson R-VII School District

Mercy Hospital Jefferson

Mercy StepOne Service

Midwest Wellness Center

Northwest R-I School District

Nurses for Newborns

Parents as Teachers (De Soto,  
Grandview, Hillsboro & Sunrise)

PreventEd

Rock Community Fire Protection  
District

Salvation Army

St. Louis Crisis Nursery