



Cox Medical  
Center  
Branson

# Community Health Needs Assessment 2015 - 2018 IMPLEMENTATION PLAN



## Overall Goal and Approach to Implementation Plan

Cox Medical Center Branson is a community hospital motivated by its respect of the people that it serves and its commitment to the CoxHealth system. The hospital seeks to provide leadership through its mission, “To improve the health of the communities we serve through quality health care, education and research,” and by offering a continuum of health services in its primary service area of Stone and Taney Counties. Cox Medical Center Branson’s approach to providing community benefit is to target the intersection of documented unmet community health needs and combine it with our organization’s key strengths and mission commitment.

## Community Partners

Cox Medical Center Branson believes that it is extremely important to work with other mission focused agencies, organizations and institutions to truly make a difference. By linking together and effectively using limited resources, the hospital can address identified unmet community health needs, as well as assist in improving the broader health needs of the community. The hospital does not believe it can effectively address all health needs without committed partners.

Cox Medical Center Branson is actively involved with several local coalitions and organizations that focus on improving the health and wellness of residents in Stone and Taney Counties. Currently, the Hospital works closely with **Faith Community Health**, which seeks to serve people in need of affordable and accessible health services. Other key organizations include:

- **Tri-Lakes Clean Air Alliance** – Dedicated to advocating for and promoting smoke free air.
- **Ozarks Wellness Network** – Health and wellness network dedicated to aligning local health and wellness initiatives that promote a healthy community.
- **Healthy Families Task Force** – Collaborating to provide resources and vision to leaders to address the needs of families.
- **Ozarks Health Commission** – Works collectively to systematically identify and meet health needs
- **Stone County Community Health Coalition** – Dedicated to working collaboratively to identify and address health priorities to promote accessible health opportunities within a safe environment for all those who live, work, and play in Stone County.

Cox Medical Center Branson will collaborate with the agencies involved with the coalitions listed above, as well as with other agencies across a variety of sectors to ensure a unified front in accomplishing the desired outcomes for the health needs selected for this implementation plan. Strategic resource allocation will benefit our community, visitors and employers by aligning health and wellness services to make the greatest impact and improve the overall health of the Tri-Lakes area.

## Results of Needs Assessment

The 2015 Community Health Needs Assessment revealed many of the same results of the 2012 Community Health Needs Assessment. The priority areas that were identified in the previous assessment were similar to that in 2015. In prioritizing health needs for the 2015 Community Health

Needs Assessment, the Hospital wanted to expand upon the focus areas that continue to pose a problem and would have the greatest impact on improving overall community health. Changes in the previously documented health priorities were assessed to identify improvements in statistics for key health indicators. This data revealed the following for each priority area:

- **Affordable care/uninsured residents** – There has been essentially no improvements in the percentage of adults who are insured. Stone County experienced a decrease in the percentage of adults who are insured (81% to 79%), while Taney County experienced no change (78%) in the percentage of insured adults.
- **Diseases of the heart** – A positive improvement experienced with a decrease in death rates due to heart disease in Taney (237.9 to 224.3) and Stone (216.9 to 198.1) counties, but still occurring at a higher rate than the national benchmark. For adult obesity percentage, Taney County experienced a decrease (32% to 31%), while Stone County experienced an increase (30% to 33%).
- **Access to specialists/shortage of physicians** – Both Taney (1,433:1 to 1,127:1) and Stone (3,499:1 to 3,157:1) counties experienced a positive improvement in the ratio of population to primary care physicians in the community.
- **Access to recreational facilities** – In 2012, both Taney (12) and Stone (6) counties had low rates of recreational facilities per 100,000 population compared to the national benchmark (16). However, there is no data collected on this health indicator for the current year.
- **Adult smoking** – Both Taney (26% to 31%) and Stone (22% to 25%) counties experienced an increase in the percentage of adults smoking.
- **Transportation** – While the need for this was identified through interviews with key stakeholders, data from the U.S. Census Bureau’s American Community Survey reveals the lack of transportation options in Stone and Taney Counties. The Stone and Taney county averages of the percentage of people that carpool to work are 15.0% and 16.3%, respectfully, and are both higher than the state (9.4%) and national (9.6%) averages. Also, in Stone County, 0.0% reported taking public transportation to work, while 1.0% of Taney County residents reported the same.

It is important to note that although some of these health priorities experienced an improvement, they are still performing poorer compared to state and national benchmarks. We utilized these statistics and the results of the community key informant interviews to determine that CMCB community resources would be best utilized on a few key health priorities that continue to be an issue and have the potential for greatest impact on community health. These selected four health priorities include:

- ***Affordable care/uninsured residents***
- ***Access to specialists/shortage of physicians***
- ***Adult smoking***
- ***Transportation***

## Health Needs Not Addressed:

There were other areas of need identified through the assessment that are clearly important to improving the health of the community. While they are deemed to have a less immediate impact, if opportunity arises, they will be integrated into this plan as sub-objective activity.

Unfortunately, as with most of rural America, Cox Medical Center Branson is without the necessary resources to adequately address the socioeconomic issues caused by poverty including mental health and substance abuse issues.

## PRIORITY: Affordable care/uninsured residents

- **Objective 1 – Increase patient education regarding affordable healthcare options.**
  - *Strategies*
    - Provide financial counseling for uninsured and underinsured patients.
    - Identify and enroll 300 individuals for coverage through the Health Insurance Marketplace, Medicaid and Medicare.
    - Continue to help uninsured patients apply for hospital charity care sliding fee scale.
    - Refer eligible patients to Federally Qualified Health Centers and other sliding-scale fee-based community clinics.
- **Objective 2 – Support local community health initiatives that provide education and/or accessible and affordable care.**
  - *Strategies*
    - Build multi-county consortium to educate local businesses about the Health Insurance Marketplace.
    - Educate local employers and key stakeholders about affordable healthcare options.
    - Support pharmacy and lab costs at local community based health clinics.
- **Objective 3 – Educate and assist newly enrolled in using and maintaining coverage.**
  - *Strategies*
    - Educate 2,400 newly insured individuals in rural Southwest Missouri about their health insurance benefits and help 50% retain their health insurance coverage.
- **Objective 4 – Identify patients inappropriately utilizing the Emergency Department for non-emergent care and direct to more appropriate level of care.**
  - *Strategies*
    - Refer uninsured patients to financial counselors and Human Arc to establish payor.

- Connect high utilizers to Social Worker and/or Case Manager.
- Social Workers and/or Case Management refer high-utilizers to a Community Health Aid to connect them to more appropriate places for care.

## **PRIORITY: Access to specialists/shortage of physicians**

- **Objective 1 – Increase recruitment strategies for physicians and mid-levels in specialty areas of high need and shortages.**
  - *Strategies*
    - Build relationship with new Springfield-based University of Missouri Medical School.
    - Create specialty rotations for medical students.
    - Create new incentives for providers.
    - Cultivate interest in healthcare careers among local elementary and high school students through Little Medical School and Medical Explorers.

## **PRIORITY: Adult smoking**

- **Objective 1 – Decrease adults 18+ who smoke cigarettes or use smokeless tobacco.**
  - *Strategies*
    - Increase availability and access to cessation resources for adults.
    - Increase the number of businesses that offer no cost and low cost cessation services to their employees.
    - Promote community tobacco cessation resources
    - Utilize Baby and Me Tobacco Free to reduce tobacco use among pregnant patient population.
- **Objective 2 – Educate providers and support staff about successful cessation counseling techniques.**
  - *Strategies*
    - Provide education opportunities including Lunch and Learns and CME credits.
    - Provide resources for providers to give to patients.
- **Objective 3 – Increase awareness about tobacco free policies to business leaders, and city and county officials.**
  - *Strategies*
    - Increase awareness by creating resource documents and educational packets.
    - Increase community education regarding the benefits of tobacco free policy.

- Partner with Tri-Lakes Clean Air Alliance to advocate for smoke-free policies in cities across Stone and Taney Counties.

## **PRIORITY: Transportation**

- **Objective 1 – Educate patients regarding accessible transportation**
  - *Strategies*
    - Identify and refer patients in need of transportation to HealthTran or other public transportation options.
- **Objective 2 – Research new opportunities for transportation programs**
  - *Strategies*
    - Study models implemented successfully in other communities.
    - Evaluate the need for an internal transportation program.
- **Objective 3 – Create accessible healthcare opportunities throughout service area**
  - *Strategies*
    - Utilize DirectConnect Telemedicine services.
    - Coordinate with local FQHC’s Mobile Care Unit to provide services to rural populations.

## Sources

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