

Community Health Needs Assessment 2021



Webster County Memorial Hospital

ABOUT US

Webster County Memorial Hospital is a family hospital that holds your well being, health, and confidentiality in the highest regard. Our professional staff will treat you with the utmost respect, and our doctors take the time to really listen. Our hospital strives around every corner to maintain the best health of your entire family. Our doctors are fantastic when it comes to treating patients of all ages. They can even make a trip to the doctor fun for the little ones. We offer a wide range of medical treatments, 24-hour services, and will do everything we can to ensure your optimal health.

Mission

Our mission is to provide excellent, high quality care in a compassionate and cost-effective manner.

Values

- Quality
- Integrity
- Service
- Pride
- Compassion
- Teamwork

Services

- Primary Care
- Rural Health Clinic
- Inpatient and Observation Services
- Swing Bed
- 24/7 Emergency Department
- Diabetic Education
- Outpatient Nursing Services
- Population Health
- Nuclear Medicine
- Laboratory Services
- Physical, Respiratory Therapy
- Radiology, CT, MRI, Ultrasound
- Pulmonary/Cardiac Rehabilitation
- Social Services
- Pharmacy Services
- Chronic Care Management

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I. INTRODUCTION

The Community Health Needs Assessment (CHNA) of Webster County Memorial Hospital (Webster or Hospital) was conducted to identify health issues and community needs as well as provide information to key decision makers to have a positive impact on the residents of the Hospital's service area. The results of the CHNA will enable Webster as well as other community providers to collaborate their efforts to provide the necessary resources for the community.

To assist with the CHNA completion, Webster County Memorial Hospital retained Arnett Carbis Toothman LLP, a regional accounting firm with offices in West Virginia, Ohio, and Pennsylvania. The assessment was designed to ensure compliance with current Internal Revenue Service (IRS) guidelines for charitable 501(c)(3) tax-exempt hospitals which require tax-exempt hospitals to conduct a CHNA every three years to identify the community's health needs and adopt an implementation strategy to meet those needs. In addition, community benefits must be reported on IRS Form 990, Schedule H. As described in the instructions to Schedule H, community benefit activities or programs "seek to achieve a community benefit objective, including improving access to health service, enhancing public knowledge, and relief of a government burden to improve health."

The study considered services offered by health care providers in the area, population trends, socio-economic demographics, and the region's overall sufficiency of mental health care providers in the community. Data was obtained from numerous health organizations as well as community leaders and hospital staff. This information was used to determine the community's future health needs.

The assessment identified key risk factors based upon the population's medical history. Additionally, the assessment used socio-economic and demographic data to determine whether area health care providers adequately assess the community's key risk factors. As part of this assessment and as prescribed by IRS section 501(r), this determination will be used in developing a forthcoming strategy to meet the community's health needs. Furthermore, and as mandated by IRS section 501(r)(3)(B)(ii), the assessment, as well as the Hospital's strategy to meet the community's health needs, will be made widely available to the public on the Hospital's website.

The significant components of the CHNA include:

- Service Area Definition, Population, and Vital Statistics
- Socio-economic Characteristics of the Service Area
- Health Status Indicators
- Access to Care
- Results of Community Participation

Research Process

- Statistical data profile of Webster County, West Virginia, and surrounding areas
- Online survey results collected from hospital employees, residents, and community stakeholders

Key Areas of Opportunity

- Access to Care
- Behavioral Health
- Drug & Alcohol Abuse
- Physical Activity & Nutrition
- Public Health Education

Methodology

The purpose of the study was to gather current statistics and qualitative feedback on the key health issues facing service area residents. This CHNA included both quantitative and qualitative research components including data profile and stakeholder interviews.

The data collection process utilized the following sources:

- Bureau of Business and Economic Research, College of Business and Economics, West Virginia University
- West Virginia Bureau for Public Health
- West Virginia Department of Health and Human Resources
- West Virginia Vital Statistics
- Centers for Disease Control and Prevention (CDC)
- County Health Rankings & Roadmaps (CHR&R)
- Health Resources and Services Administration (HRSA)
- U.S. Department of Health and Human Resources
- The Robert Wood Johnson Foundation: County Health Rankings System
- U.S. Census Bureau
- United States Department of Agriculture, Economic Research Service
- Substance Abuse and Mental Health Services Administration (SAMHSA)

Quantitative Data

- Statistical Data Profile was compiled to depict the population, household, economic, education, income, vital, and other health care statistics.
- An online survey was conducted anonymously. Hard copy surveys were also distributed to those without internet access. The survey collected demographic information and health related information to assess the health status, health care access, and other needs of the community.

Qualitative Data

- The online and hard copy surveys were distributed to hospital employees, residents, and community leaders.

II. COMMUNITY HEALTH NEEDS ASSESSMENT OVERVIEW

HOSPITAL & COMMUNITY PROFILE

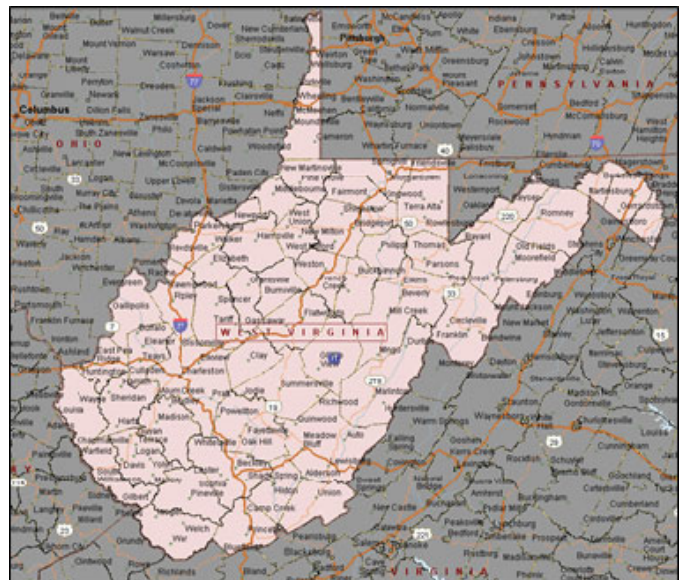
Hospital Profile

Webster County Memorial Hospital is a 25-bed critical access hospital located in Webster Springs, Webster County, West Virginia. The Hospital has provided quality health care since 1951.



Community Profile

Located in the rural, central part of West Virginia, the Hospital is in Webster Springs, Webster County, West Virginia. Webster Springs is less than two hours east of Charleston, West Virginia, about five hours west of Washington, D.C., and over three hours south of Pittsburgh, Pennsylvania.



III. SERVICE AREA

Defined Service Area

Webster County Memorial Hospital defined their service area based upon the geographical area in which a majority of their patients reside. As shown in Exhibit 1, 82.7% of Webster’s patients reside in Webster County, Webster’s location. For purposes of the needs assessment, Webster’s primary service area consists of the following West Virginia Counties: Webster, Nicholas, and Braxton.

County	% of Total Patients
Webster	82.7%
Nicholas	7.6%
Braxton	3.0%
All other areas	6.7%

Population Demographics

Understanding the population demographics of the community served is necessary for Webster to evaluate characteristics unique to its community and can impact the identification of health needs. Notable for the service area when compared with West Virginia overall is a greater percentage of persons 65 years and over, as well as a steadily declining population based on trends from 2010 – 2019.

	<i>Community Metric</i>	<i>Webster County</i>	<i>Nicholas County</i>	<i>Braxton County</i>	<i>West Virginia</i>
Population	Population, 2019 Estimate	8,114	24,496	13,957	1,792,147
	Population, Percent Change: April 1, 2010 to July 1, 2019	-11.3%	-6.6%	-3.9%	-3.3%
Age	Persons Under 5 Years	4.5%	5.1%	4.8%	5.2%
	Person Under 18 Years	19.4%	20.6%	19.2%	20.1%
	Persons 65 Years and Over	24.0%	22.9%	23.7%	20.5%
Gender	Female Persons	49.7%	50.7%	49.6%	50.5%
Race	White (alone)	97.8%	97.5%	97.3%	93.5%
	Black or African American (alone)	0.5%	0.6%	0.7%	3.6%
	American Indian and Alaska Native (alone)	0.1%	0.4%	0.4%	0.3%
	Asian (alone)	0.2%	0.4%	0.2%	0.8%
	Native Hawaiian and Other Pacific Islander (alone)	0.0%	0.0%	0.0%	0.0%
	Two or More Races	1.4%	1.2%	1.3%	1.8%
	Hispanic or Latino	0.7%	0.8%	0.9%	1.7%

Source: U.S. Census Bureau: State and County QuickFacts (2019)

Population Projections

As shown in Exhibit 3, the population of the total service area is projected to decrease through 2030. Of the three service area counties, Webster is projected to experience the largest decrease in population. Braxton County is projected to remain stable through 2030.

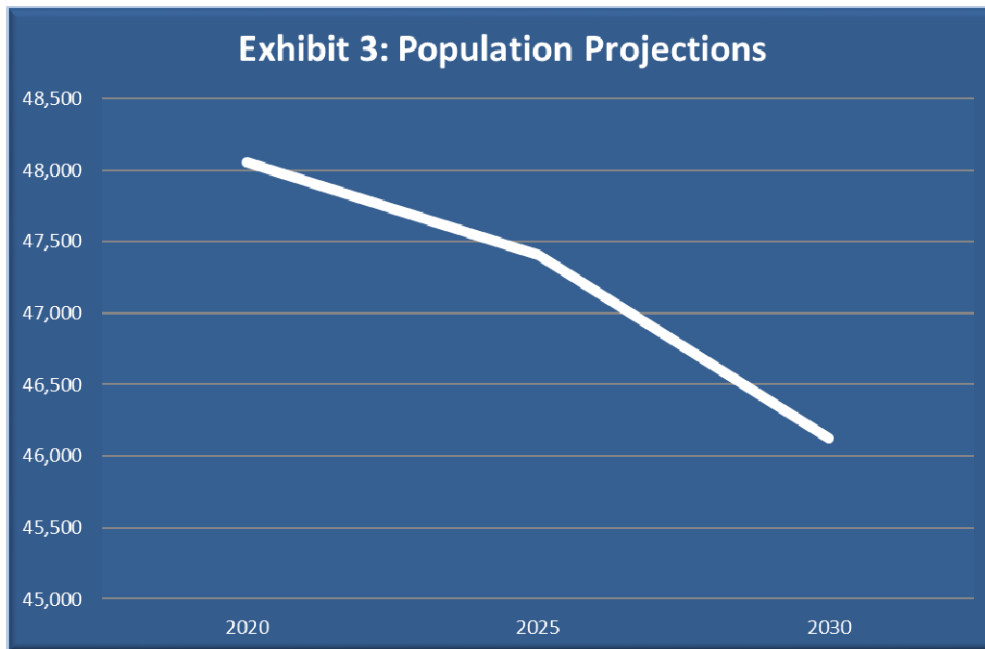


Exhibit 3 includes the detailed population projections for the counties in the service area.

County	2020	2025	2030
Webster	8,469	8,241	7,820
Nicholas	25,106	24,734	24,022
Braxton	14,481	14,432	14,282
Total Service Area Population	48,056	47,407	46,124

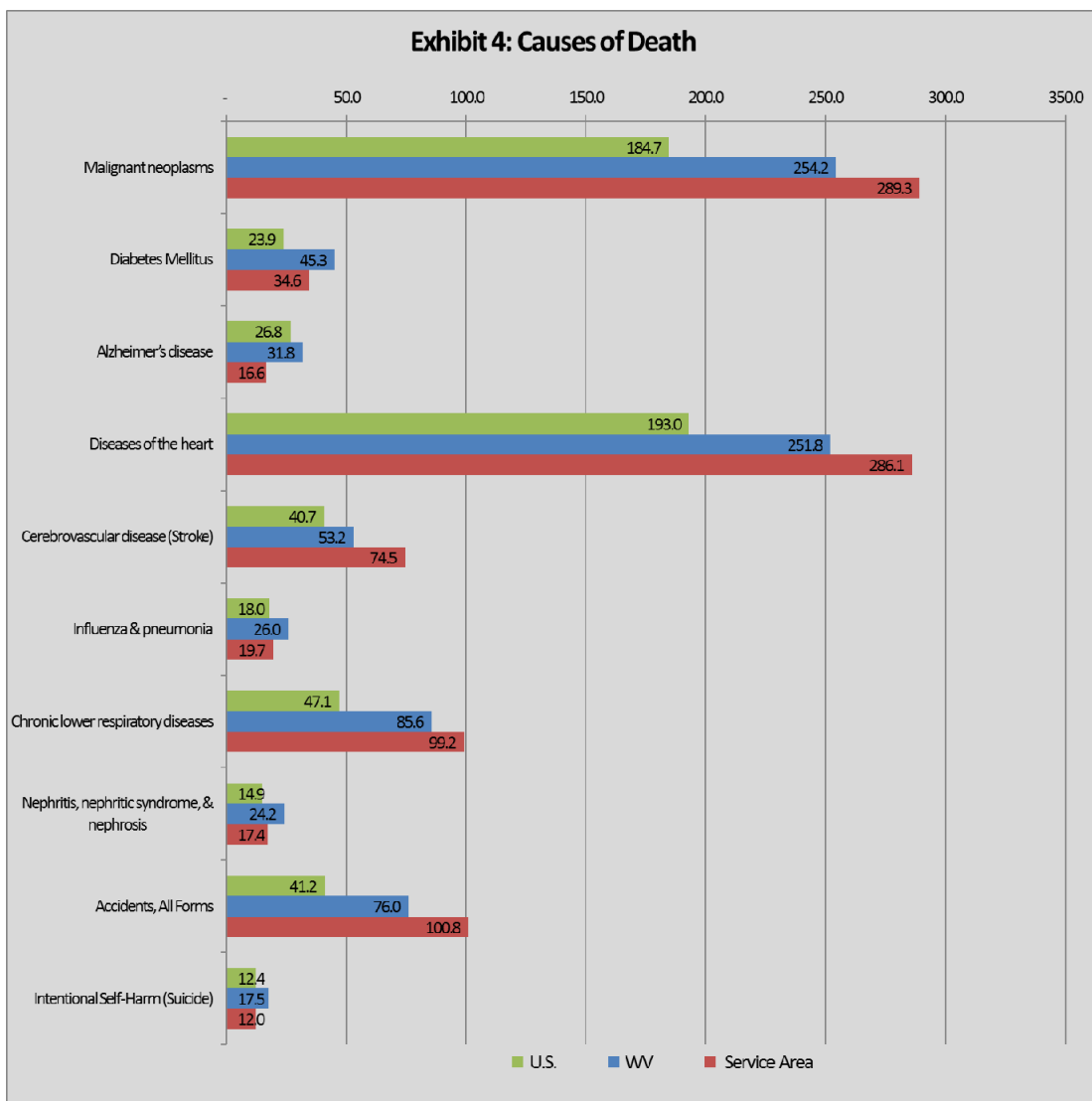
Source: Population Trends in West Virginia through 2030. Christiadi, Ph.D, West Virginia University College of Business and Economics, Bureau of Business and Economic Research.

IV. HEALTH DATA FOR SERVICE AREA RESIDENTS

Health Outcomes

Leading Causes of Death

The 2015 leading causes of death data for the community shows that cancer (malignant neoplasms) and diseases of the heart are the major causes of death in the service area. These outweigh the third leading cause of mortality by more than 5 times as many deaths. Webster County had the single highest 5 year average mortality rate for cancer at 364.9 per 100,000 residents.



Rate per 100,000 population

Source: West Virginia Vital Statistics 2015.

Suicide Rate

As shown in Exhibit 5, the highest suicide rate of 21.3 was reported in Nicholas County while the lowest of 12.5 was reported in Webster County. The state rate of 16.5 was within the range of the service area rates.

Exhibit 5: Suicide Rate

County	Deaths	Suicide Crude Rate per 100,000
Webster County	24	12.5
Nicholas County	116	21.3
Braxton County	46	15.1
West Virginia	6,338	16.5

Source: CDC, Underlying Cause of Death, 1999-2019

Premature Death

Premature death reflects attention on preventable deaths by reviewing the years of potential life lost before age 75 (YPLL-75). For example, a death at age 50 contributes 25 years of life lost. The most recent data available for this measure is 2017 – 2019 and is expressed as a rate per 100,000 service area residents. The service area rate shows that the three counties included in the service area average more years of life lost when compared with the state of West Virginia and, significantly, more years of life lost when compared with the top U.S. performers.

Exhibit 6: Premature Death			
Years of Life Lost Before Age 75 Per 100,000 Residents (Data from 2017 - 2019)	Service Area	West Virginia Average	Top U.S. Performers
	11,000	10,800	5,400
Source: County Health Rankings and Roadmaps (2021)			

Health Factors

Health factors influence the health of a community and are measured by four different factors: health behaviors, clinical care, the physical environment, and social and economic factors. Each of these factors encompasses several measures, all adding up to what is known as the social determinants of health. The World Health Organization defines social determinants of health as “the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.”

Health Behaviors

Health behaviors describe the individual choices community members make that impact their overall health. Behaviors related to tobacco use, diet and exercise, alcohol and drug use, and sexual activity are measures against West Virginia and national rates. Notable for the service area are high rates of adult smoking, drug overdose deaths, teen births, physical inactivity, and adult obesity when compared with top U.S. performers. Rates within the service area are generally on par with rates in the state of West Virginia as a whole.

Exhibit 7: Health Factors: Health Behaviors					
Health Behaviors	Webster County	Nicholas County	Braxton County	West Virginia	Top U.S. Performers
Health Behaviors Related to Alcohol and Drug Use					
Adult Smoking Rate	31%	28%	29%	27%	16%
Excessive Drinking Rate	14%	14%	14%	14%	15%
Drug Overdose Deaths Per 100,000 Residents	40	23	28	50	9
Health Behaviors Related to Sexual Activity					
Sexually Transmitted Infections Per 100,000 Residents	119	60	84	198	161
Teen Births Per 100,000 Residents	44	38	31	31	12
Health Behaviors Related to Diet and Exercise					
Physical Inactivity Rate	34%	31%	27%	28%	19%
Adult Obesity Rate	37%	41%	37%	38%	26%
Sources: County Health Rankings and Roadmaps (2021)					

In addition to overall health behaviors of the residents of the service area, health behavior of youth within the service area are indicative of potential future health needs of the community. The Centers for Disease Control and Prevention (CDC) Youth Risk Behavior Surveillance System (YRBSS) monitors a wide range of priority health risk behaviors among representative samples of high school students at the national, state, and local levels. National, state, and large urban school district surveys are conducted every two years among students throughout the United States. High School was defined as 9th-12th grade and Middle School was defined as 6th-8th grade.

Exhibit 8: West Virginia, High School Youth Risk Behavior Survey

Alcohol and Other Drug Use	Percentage		Percentage Increase/Decrease
	2019	2017	
Had their first drink of alcohol before age 13 years (other than a few sips)	15.9	19.4	-18.0%
Currently drank alcohol (at least one drink of alcohol, on at least 1 day during the 30 days before the survey)	30.0	27.9	7.5%
Usually got the alcohol they drank by someone giving it to them (during the 30 days before the survey, among students who currently drank alcohol)	35.5	39.8	-10.8%
Reported 10 or more as the largest number of drinks they had in a row (within a couple of hours, during the 30 days before the survey)	5.0	6.9	-27.5%
Ever used marijuana (also called grass, pot, or weed, one or more times during their life)	37.7	35.1	7.4%
Tried marijuana for the first time before age 13 years (also called grass, pot, or weed)	7.5	8.8	-14.8%
Currently used marijuana (also called grass, pot, or weed, one or more times during the 30 days before the survey)	18.9	18.5	2.2%
Ever used synthetic marijuana (also called "K2," "Spice," "fake weed," "King Kong," "Yucatan Fire," "Skunk," or "Moon Rocks," one or more times during their life)	10.4	8.3	25.3%
Ever used cocaine (any form of cocaine, such as powder, crack, or freebase, one or more times during their life)	4.6	6	-23.3%
Ever used inhalants (sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high, one or more times during their life)	7.3	7	4.3%
Ever used heroin (also called "smack," "junk," or "China White," one or more times during their life)	2.8	3.4	-17.6%
Ever used methamphetamines (also called "speed," "crystal," "crank," or "ice," one or more times during their life)	3.5	4.6	-23.9%
Ever used ecstasy (also called "MDMA," one or more times during their life)	5.0	4.3	16.3%
Ever took steroids without a doctor's prescription (pills or shots, one or more times during their life)	3.8	3.7	2.7%
Ever injected any illegal drug (used a needle to inject any illegal drug into their body, one or more times during their life)	2.7	2.5	8.0%
Were offered, sold, or given an illegal drug on school property (during the 12 months before the survey)	23.9	24	-0.4%

Source: CDC Youth Risk Behavior Surveillance System

Exhibit 9: West Virginia, Middle School Youth Risk Behavior Survey

Alcohol and Other Drug Use	Percentage		Percentage Increase/Decrease
	2019	2017	
Ever drank alcohol (other than a few sips)	29.1	23.4	24.4%
Drank alcohol for the first time before age 11 years (other than a few sips)	11.4	9.5	20.0%
Ever tried cigarette smoking (even one or two puffs)	15.7	14.6	7.5%
Tried cigarette smoking for the first time before age 11 years (even one or two puffs)	5.4	5.5	-1.8%
Currently smoked cigarettes (on at least 1 day during the 30 days before the survey)	3.5	3.5	0.0%
Ever used marijuana (also called grass, pot, or weed, one or more times during their life)	10.4	8.3	25.3%
Tried marijuana for the first time before age 11 years	3.3	2.3	43.5%
Ever took prescription pain medicine without a doctor's prescription or differently than how a doctor told them to use it (counting drugs such as codeine, Vicodin, Oxycontin, hydrocodone, and Percocet)	6.3	3.6	75.0%
Ever used cocaine (any form of cocaine, such as powder, crack, or freebase, one or more times during their life)	1.9	2.2	-13.6%
Ever used inhalants (sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high, one or more times during their life)	7.5	6.6	13.6%
Ever took steroids without a doctor's prescription (pills or shots, one or more times during their life)	1.2	1.6	-25.0%
Ever seriously thought about killing themselves	24.7	20.7	19.3%
Ever made a plan about how they would kill themselves	16.2	13.9	16.5%
Ever tried to kill themselves	10.0	8.8	13.6%
Did not participate in at least 60 minutes of physical activity on at least 1 day (in any kind of physical activity that increased their heart rate and made them breathe hard some of the time, during the 7 days before the survey)	7.1	9.9	-28.3%
Were not physically active at least 60 minutes per day on 5 or more days (in any kind of physical activity that increased their heart rate and made them breathe hard some of the time during the 7 days before the survey)	34.6	35.6	-2.8%

Source: CDC Youth Risk Behavior Surveillance System

Clinical Care

Clinical care refers to access to care (measured by the uninsured rate and the ratio of community residents to providers) and the quality of care (measured by preventable hospital stays). Notable for Webster County is a larger ratio of residents to one primary care physician and ratio of residents to one mental health provider when compared with the state of West Virginia and top U.S. performers.

Exhibit 10: Health Factors: Clinical Care					
Clinical Care Measures	Webster County	Nicholas County	Braxton County	West Virginia	Top U.S. Performers
Uninsured Rate	8%	8%	9%	8%	6%
Preventable Hospital Stays Per 100,000 Medicare Enrollees	6,550	5,531	3,481	5,748	2,565
Ratio of Residents to One Primary Care Physician	2,760:1	1,080:1	2,350:1	1,280:1	1,030:1
Ratio of Residents to One Mental Health Provider	4,060:1	1,630:1	1,990:1	730:1	270:1
Sources: County Health Rankings and Roadmaps (2021)					

Physical Environment

Physical environment factors include air and water quality, as well as housing and transit. Transportation is often considered when measuring housing affordability, so it is included here to better understand the overall affordability of life in the counties making up the service area. The service area reports lower levels of air pollution when compared with the state of West Virginia as a whole, however remains higher than the top U.S. performers. Service area residents spend significantly more of their household income on housing and transportation when compared with the top U.S. performers.

Exhibit 11: Health Factors: Physical Environment					
Physical Environmental Measures	Webster County	Nicholas County	Braxton County	West Virginia	Top U.S. Performers
Air Pollution - Particulate Matter	6.8	7.5	7.3	7.8	5.2
Drinking Water Violations	None Noted	Yes	Yes	N/A	N/A
% of Residents with Severe Housing Problems	12%	9%	11%	11%	9%
% of Household Income Spent on Housing and Transportation	70%	57%	66%	N/A	Less than 45%
Transit Ridership % of Workers	1%	0%	1%	N/A	N/A
Transit Access	0.0	0.0	0.0	N/A	10
Source: County Health Rankings and Roadmaps (2021) Housing and Transportation Affordability Index (2021)					

Social and Economic Factors

Social and economic factors encompass education, employment, income, family and social support, and community safety. Notable for the service area are higher rates of income inequality when compared with top U.S. performers, as well as lower percentages of residents having attended college. Unemployment rates in the service area are also higher on average than the average for the state of West Virginia and significantly higher than the top U.S. performers.

Exhibit 12: Social and Economic Factors					
Social and Economic Measures	Webster County	Nicholas County	Braxton County	West Virginia	Top U.S. Performers
High School Completion	79%	87%	80%	87%	94%
Some College	37%	50%	37%	56%	73%
Unemployment	6.3%	6.3%	7.4%	4.9%	2.6%
Income Inequality (the ratio of household income at the 80th percentile to that at the 20th percentile)	5.1	4.4	4.8	5.0	3.7
Social Associations (number of associations per 10,000 residents)	7.2	11.3	9.2	13.0	18.2
Violent Crimes Per 100,000 Residents	Zero Listed	725	262	330	63

Source: County Health Rankings and Roadmaps (2021)

All counties of the service area, along with the state of West Virginia, saw increasing income per capita from 2016 through 2018. Per capita income in the service area is significantly less than the per capita income for the state of West Virginia as a whole.

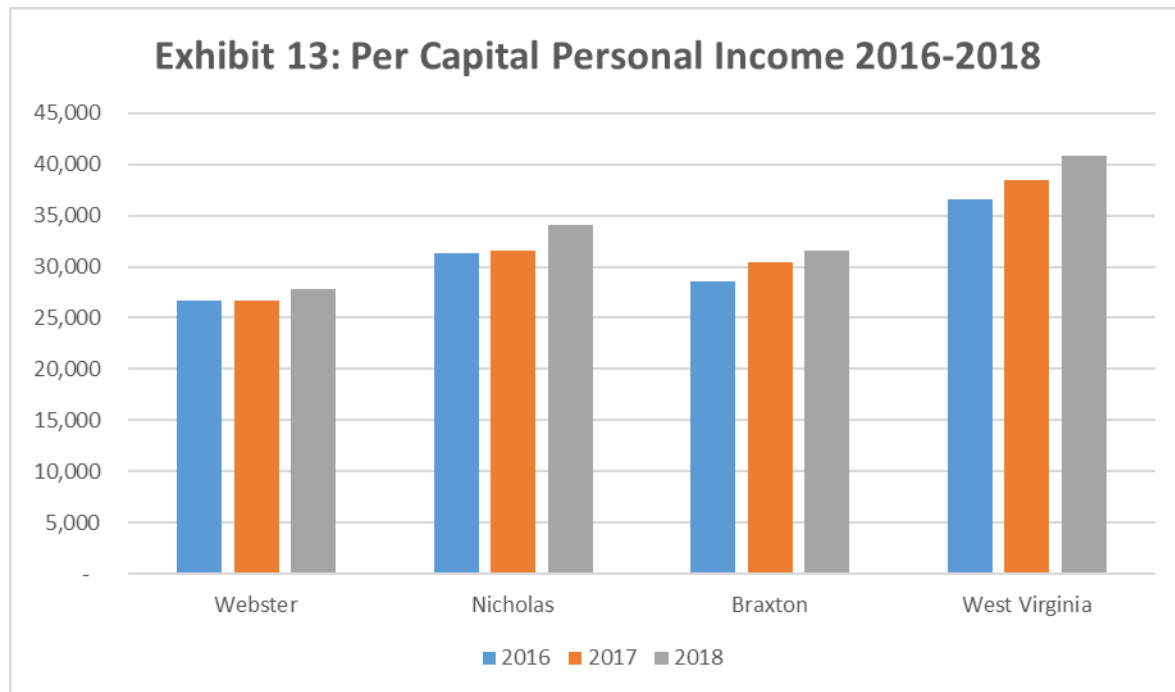


Exhibit 14 presents the percentage of adults living in poverty in 2019 for the service area counties and the state of West Virginia. As Exhibit 14 illustrates, Webster County had the highest percentage of adults living in poverty at 22.00%. The lowest percentage was the state of West Virginia at 16.20%.

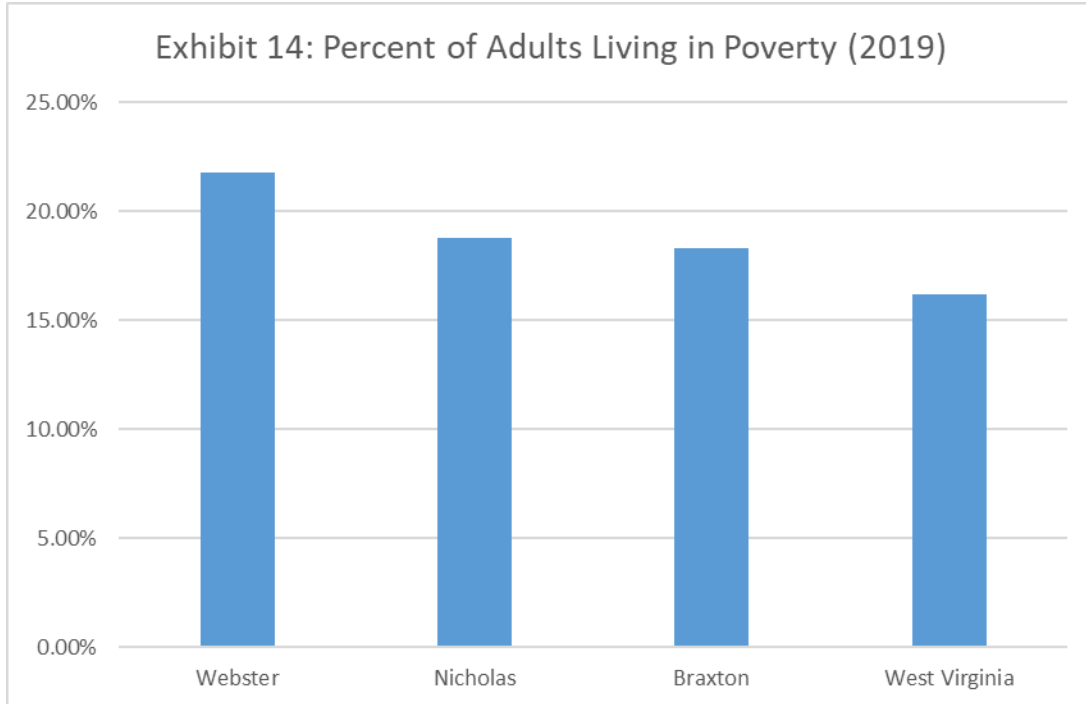


Exhibit 15 presents the median household income for the service area counties and the state of West Virginia. All counties in the service area were below the state of West Virginia for Median Household Income. The service area county with the highest Median Household Income was Nicholas County, while the lowest was Webster County.

Exhibit 15: Median Household Income

Location	Median Household Income
Webster County	\$34,385
Nicholas County	\$40,023
Braxton County	\$39,651
State of West Virginia	\$48,659

Source: U.S. Census Bureau, 2019 American Community Survey

V. ACCESS TO CARE

Federally Designated Areas

The federal government recognizes the vulnerability of populations with limited access to health care professionals. To counter the potential effects of a shortage of professionals providing primary care and dental services, special designations have been developed to recognize health care shortage areas and provide enhancements in patient service reimbursement and other incentives. The following is a brief description of these designations:

- **Health Professional Shortage Area (HPSA):** HPSA designations are based on general HPSA designation criteria, plus additional guidelines specific to each of the three types of designations: primary care, dental, and mental health services.
- **Medically Underserved Area (MUA):** MUAs consider several health and welfare statistics of a population, including poverty, age, and infant mortality, in addition to the number of physicians serving the area.
- **Medically Underserved Populations (MUP):** Areas that do not meet the qualifications of MUA designation can qualify for MUP status if there are unusual local conditions that are barriers to access for health care services.

As shifts occur in the population and practicing locations of health care professionals, the criteria used for initial federal shortage designations is periodically reevaluated. Some areas previously designated as a shortage area may have seen an influx of health care professionals and no longer meet the requirements for designation. Conversely, if an area sees an out-migration of health care professionals, this area may qualify for a health shortage designation. As shown in Exhibit 16, all counties in the service area qualify as shortage designations.

**Exhibit 16
Federal Shortage Designations
As of May 7, 2021**

County	Health Professional Service Area			Medically Underserved Area / Medically Underserved Population
	Primary Care	Dental	Mental Health	
Nicholas County	Yes	Yes	Yes	Yes
Webster County	Yes	Yes	Yes	Yes
Braxton County	Yes	Yes	Yes	Yes

SOURCE: HRSA Health Workforce, Shortage Designation

VI. COUNTY HEALTH DEPARTMENTS

County health departments provide a broad range of preventive care and primary care services designed to improve the overall health and wellness of residents by providing or assuring the provision of community-based health services. Through planning and direct service delivery, these departments focus on health promotion, disease prevention, and direct intervention. Exhibit 17 provides a summary of the services provided by the county health department resources available in the service area:

Exhibit 17: County Health Departments

Health Department Service:	Webster County	Braxton County	Nicholas County
Breast and cervical cancer screenings	X	X	
Cancer Information Specialist			
Community education	X	X	X
Dental services	X		
Environmental services			X
Epidemiology		X	
Family planning	X	X	
General Health	X		X
HIV / Aids	X	X	X
Immunizations	X	X	X
Lab screening			
Right from the Start			
Sexually transmitted diseases	X	X	X
Threat Preparedness			X
Tuberculosis	X	X	X
Wise Woman Program			
Women, Infants, and Children	X		X

VII. RESULTS OF COMMUNITY PARTICIPATION

SURVEY RESULTS

Input was solicited from those representing the broad interests of the community through interviews and an online survey. This input encompassed the needs of the community, barriers to health care access, opportunities for improvement, perception of Webster County Memorial Hospital, and feedback on initiatives.

Respondent Zip Codes

The online survey results were received primarily from residents in the following zip codes:

26288	26222	26266
26206	26208	26298

Respondent Age Groups

The survey requested that participants provide various demographic data. The ages of participants who responded were 18-24 (11.11%), 25-45 (61.11%), 46-65 (24.07%), and over 65 (3.71%).

Marital Status and Race

The survey respondents indicated the following information with regard to their gender, marital status, and race:

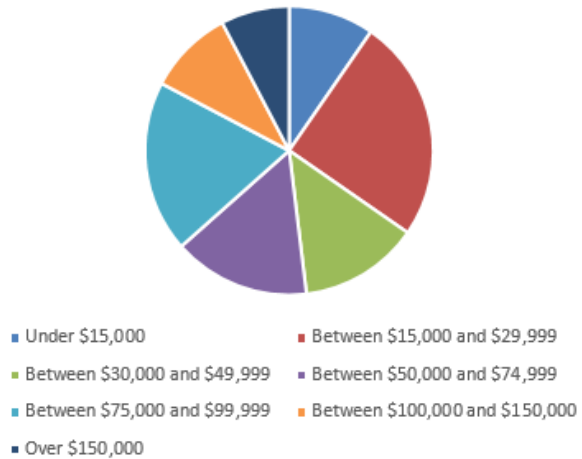
- Marital Status: 20.75%-Single, 67.92%-Married, 11.33%-Divorced
- Race: 100% indicated White (Caucasian)

Income

As shown in the adjacent chart, the majority of respondents reported annual household income of less than \$75,000.

\$0-\$15,000:	10%
\$15,000-\$29,999:	25%
\$30,000-\$49,999:	13%
\$50,000-\$74,999:	15%
\$75,000-\$99,999:	19%
\$100,000-\$149,999:	10%
\$150,000 and up:	8%

Annual Income

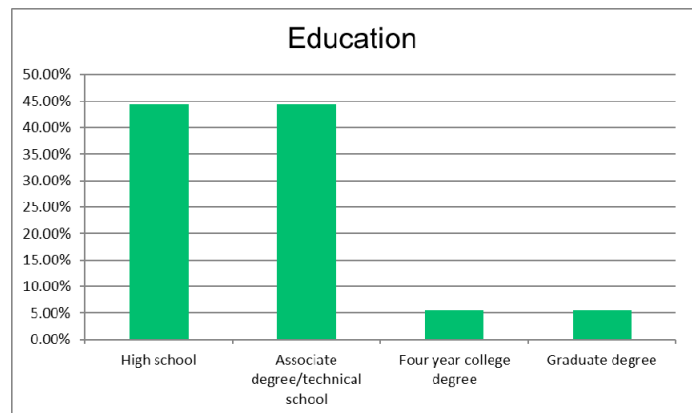


Education

Respondents were asked:

“What is the highest level of education you have completed?”

Over 55% of all respondents indicated an education level of two-year associate degree or above.

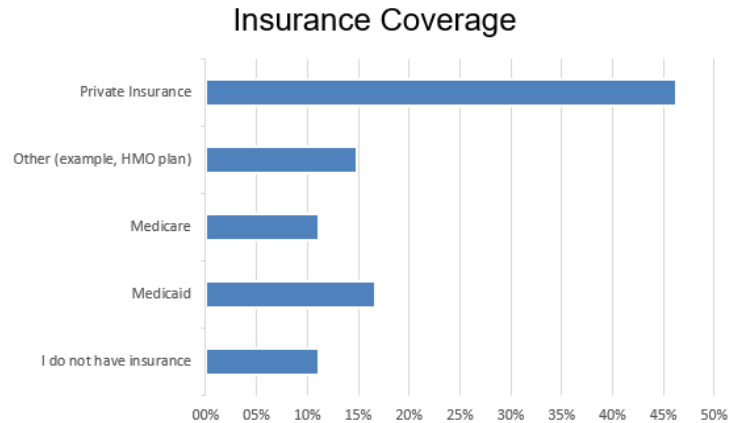


Employment

Employment status was requested in the survey. Over 80% indicated they are working full time while 7% are working part time.

Insurance Carriers

To evaluate the potential barriers to health care from an insurance coverage perspective, participants were asked to identify their insurance carrier. Approximately 39% of the respondents report having Medicaid, Medicare, or no insurance coverage, while 61% had private insurance and other insurance.



52% of respondents indicated that they, or someone in their household, had delayed health care due to lack of money and/or insurance.

Routine Health Care



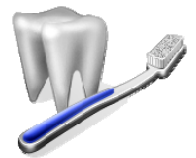
Respondents were asked:

“Do you have a family or personal doctor?” 94% indicated “Yes” while 6% indicated “No.” For those not having a family or personal doctor, respondents indicated they use a walk-in clinic, hospital emergency room, and an urgent care center.

For those having a family or personal doctor, 88% responded they were able to get an appointment when needed and 12% indicated they could not.

Dental Health Care

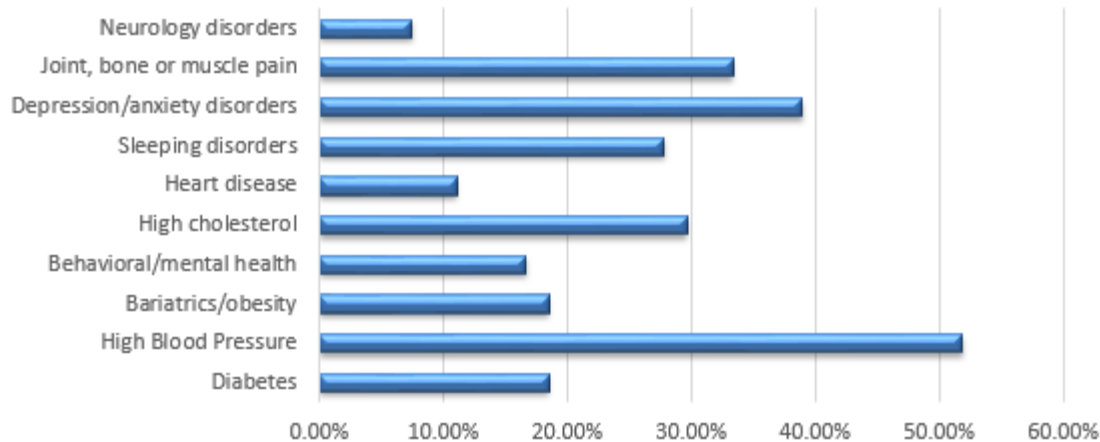
- 46% of respondents have not received dental care in the past 12 months and 42% of respondents indicated that the cost and lack of insurance for dental care was a barrier to care.



Health Issues

Respondents were asked the biggest health issues they face. The highest percentage was high blood pressure followed by depression/anxiety, arthritis, and high cholesterol.

What are the health issues you and/or your family members face?



Hospital Satisfaction

On a scale of 1-Extremely Dissatisfied to 5-Extremely Satisfied, respondents were asked to rank their satisfaction with care received at Webster County Memorial Hospital. Nearly 79% rated their satisfaction as a “4” or above.

VIII. CONCLUSION

The goal of the needs assessment was to identify health issues and community needs as well as provide information to key decision makers to make a positive impact on the health of the Hospital's service area. Statistical data was compiled to depict demographic and economic profiles while the surveys provided additional feedback regarding community perception of Webster, and availability of resources and challenges as they relate to their health care needs.

In addition to the evaluation of community data, Webster evaluated the status and progress on the results of the previous CHNA. Initiatives were aggregated among two main categories, increased education and promotion of community resources and promotion of healthier lifestyle choices.

Increased Education and Promotion of Community Resources

1. Promote awareness of available resources.
2. Provide community services, including blood pressure and cholesterol screenings.
3. Provide shadowing opportunities to local high school students to encourage the pursuit of careers in health care.

Healthier Lifestyle Choices

1. Maintain tobacco free policy at all facilities.
2. Offer tobacco cessation classes for employees as well as community education on smoking cessation.
3. Distribution of materials promoting good nutrition and physical activity through health fairs and distribution of educational materials.
4. Sponsored community projects that promote activities that encourage physical fitness and exercise for the family.

While health care services are available in Webster Springs, many service area residents are limited financially, and may defer treatment. In addition, the culture has contributed to unhealthy lifestyles, physical inactivity, and increased abuse of tobacco, alcohol, and prescription medication as well as illegal substances.

Based upon the results of the Community Health Needs Assessment, Webster County Memorial Hospital will develop a three-year implementation strategy to address the following significant community health related needs:

- Increased education and promotion of community resources
- Utilize existing affiliations to promote healthier lifestyle choices
- Chronic disease maintenance and prevention (Diabetes, Cardiovascular, Respiratory)
- Improve overall health status

The CHNA, approved on June 30, 2021, has provided valuable insight to the contributing factors of health related issues faced by the residents of Webster County and the surrounding communities. It will assist Webster County Memorial Hospital as well as other community providers to collaborate their efforts to provide the necessary resources for the community.