



Community Health Needs Assessment Yazoo County, Mississippi

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2016 Community Health Needs Assessment

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I. Introduction and Purpose

Healthy communities require reliable and convenient access to high-quality healthcare services. Yazoo County, Mississippi is a great place to live and work. Like all communities, Yazoo County has unique opportunities and challenges when it comes to meeting the healthcare needs of our citizens. Yazoo County enjoyed a long history of caring for its citizens with local physicians as well as other providers located in the community; however, financial constraints and the loss of long-term providers in recent years have brought change to the market. Yazoo County's relative proximity to the Jackson metro area and long-term partnership with Mississippi Baptist Health System offers better access to specialty services and more tertiary hospital services than many similar communities enjoy. The county also offers a fairly wide array of outpatient diagnostic and therapeutic services.

As a rural community in one of the poorest states in the nation, Yazoo County faces unique challenges when it comes to meeting the health care needs of its citizens. Some of these include an older population; higher incidence of certain preventable health conditions like heart disease, diabetes, cancer and obesity; and limited availability of specialty care within the community.

The purpose of this assessment is to gather information required to produce change beneficial to the community's overall health. For this project, multiple perspectives on health needs may lead to re-conceptualizing problems or a prospective interventions, or may indicate the advisability of continuing current programs and services, adding new ones and/or changing or discontinuing services which are duplicative, unnecessary or unsustainable.

II. About Baptist Medical Center Yazoo

Formerly King's Daughters Hospital (KDH), Baptist Medical Center Yazoo owes its existence to an organization of women called the Mary Brickell Circle of King's Daughters. This group, an order of women whose purpose is the desire of doing greater service for humanity in the name of Christ the KING, was established in Yazoo City in 1887. The Mary Brickell Circle is one of 3,000 that exist in the United States, Canada, and several other foreign countries.

The original hospital was built in 1922 on Fifth Street, and was operated by the doctors and local citizens. The hospital was offered to the Mary Brickell Circle of King's Daughters and took over the operation of the hospital on January 2, 1930.

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The current hospital was built in 1955 and the first patient was admitted on November 1, 1955. The hospital was licensed for 88 beds, provided general medicine and surgical care and was staffed by approximately 180 employees.

On February 1, 2015, King's Daughters Hospital officially became part of Baptist Health Systems and is now Baptist Medical Center Yazoo. As the only hospital in a county with over twenty-eight thousand residents, Baptist Medical Center Yazoo is a twenty-five bed critical access hospital which provides twenty-four hour emergency department, swing bed services, wound care, three primary care clinics, outpatient surgery center, satellite specialty clinics, intensive outpatient program, physical therapy, as well as outpatient ancillary services.

Since January 2015, the system has acquired two prominent medical practices in Yazoo City. Yazoo Family Healthcare which is now Baptist Medical Clinic - Yazoo, was founded by the late Marion Sigrest, MD, who practiced for nearly fifty years in Yazoo City. Baptist Yazoo Family Doctors includes Walter Burnett, MD, who has been part of this medical community for over twenty-five years. Another addition to Baptist Primary Care Clinic located inside the hospital, has been the return of David Gilder, DO.

III. About Mississippi Baptist Health System

Baptist Health Systems is the parent company of Baptist Medical Center, The Mississippi Hospital for Restorative Care, Baptist Medical Center Attala, Baptist Medical Center Leake, Baptist Medical Center Yazoo and a number of related healthcare services and programs. From its beginnings in 1908 as Jackson's first hospital, Baptist has continuously provided quality, compassionate, Christian-based medical care. A 15-member Board of Trustees, consisting of local business leaders, physicians and clergy, governs Baptist. Our medical staff includes approximately 450 board certified physicians representing more than 50 medical specialties.

IV. About Yazoo County

The area which is now Yazoo County was acquired by the State of Mississippi from the Choctaw Indians in 1820. Yazoo County was established on January 21, 1823. It was the 19th county established in the State of Mississippi, and remains the largest in area. The first county seat was at Beatties Bluff. In 1829, the county seat was moved to Benton. In 1849 the county seat was moved once again, to Yazoo City where it remains.

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Yazoo County was a battlefield in 1863 and 1864 during the American Civil War. The famous railroad disaster which killed engineer Casey Jones took place in Yazoo County, just north of Vaughan, in 1900. The Great Mississippi Flood of 1927 did much damage in Yazoo County.

The county is named for the Yazoo River, whose name, legend has it, comes from an Indian word meaning "River of Death." Yazoo County is included in the Jackson-Vicksburg-Brookhaven, MS Combined Statistical Area. It is located in the Mississippi Delta region. Farming and lumber are the predominant industries.

Yazoo City, the only city in Yazoo County bears the name "Gateway to the Delta." The term is descriptive. In more agrarian days, Yazoo City served as a major thoroughfare for cotton and other crops traveling to Jackson to the port of Vicksburg or Jackson, the capitol city.

For purposes of healthcare, Yazoo County is deemed rural qualifying for both the Centers for Medicare (CMS) Rural Health Clinics and Federal Office of Rural Health Policy Grant programs. (See Appendix E - Supplements)

A more detailed description of the hospital services area is provided in Section XI of this report.

V. Executive Summary –

Yazoo County is a diverse rural community located in central Mississippi. Baptist Medical Center Yazoo (BMCY) recognizes that rural communities have unique challenges in meeting health needs, and is committed to serving the citizens of this community by engaging the local community and leveraging the community's resources with those of Mississippi Baptist Health System to provide improvements in the health and longevity of the citizens we serve. BMCY recognizes that truly measurable and sustainable improvements to the overall health of the community requires a partnership of all key stakeholders including the local hospital, elected and lay civic leaders, Mississippi Baptist Health System as we assist and encourage local citizens to assume greater responsibility for managing their health, living healthy lifestyles and making better healthcare decisions. We are also committed to provide resources dedicated to this goal within the limits of the community and its various stakeholders, to be good stewards of the resources with which we are entrusted and to leverage those resources for maximum health impact.

BMCY has conducted this Community Health Needs Assessment for the purposes of identifying opportunities to improve health and services within the community. The survey was made

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available to all members of the community with efforts to reach diverse and underserved groups in order to ensure their needs were considered and addressed. Numerous strengths were identified as well as opportunities to either offer new services or expand existing ones.

Results of this survey will be used by leaders and stakeholders to develop action plans designed to address the needs identified.

VI. Oversight

This study was commissioned by the Baptist Medical Center Yazoo Board of Trustees. Members include: John Kane Ditto, Chris Anderson, William Grete, Kurt W. Metzner, Bobbie K. Ware, Michael K. Stevens, William F. Thompson, Van Ray, Kenneth Smith, Julie Hoffman

Development and implementation of the study was delegated to the Hospital Chief Executive Officer, Robert Sean Johnson.

VII. Methodology

Baptist Medical Center Yazoo employed a multi-stepped approach to gathering information and soliciting feedback from publically available data, internal data sources and public opinion.

- A. Steps of the process included:
 1. Identification of the Community Served
 2. Collection and Review of Demographic and Community Data
 3. Development of a Survey Tool
 4. Invitation for Community Member to Participate in Survey
 5. Analysis of Survey Findings
 6. Development of a Mitigation Plan to Address Key Issues

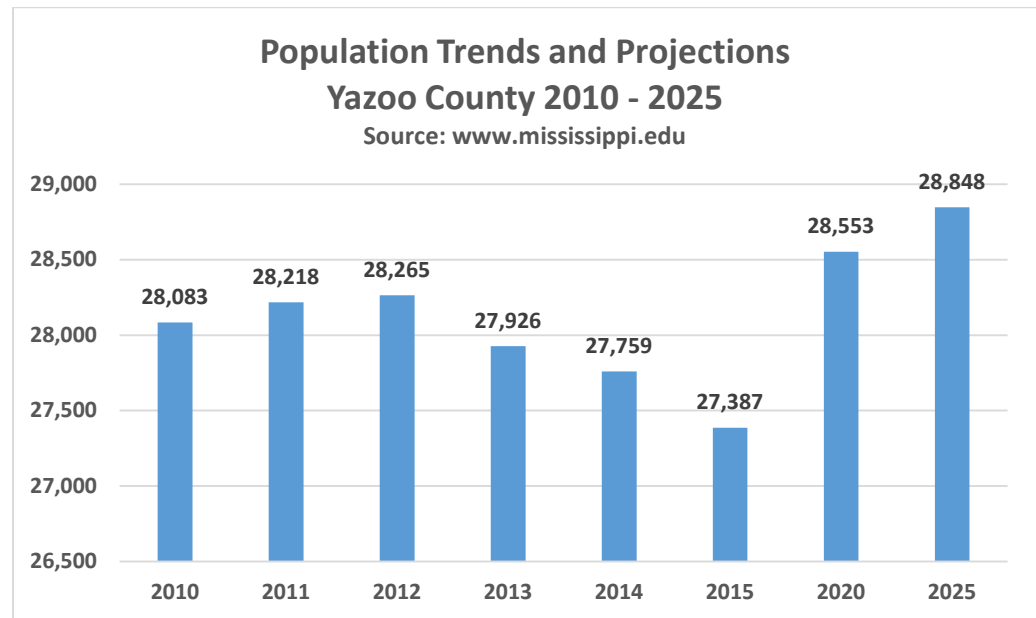
- B. Information Gaps – Baptist Medical Center Yazoo made efforts to obtain the best and most timely information available for purposes of this study. Certain limitations are inherent in this type of analysis due to a number of factors including, but not limited to: availability of data, timeliness of data and limitations of sample size as well as personal biases of participants who chose to participate in the study.

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VIII. Quantitative Analysis

A. Community Demographics

1. Population – As of the 2010 U.S. Census, the total population of Yazoo County, Mississippi was 28,083. In spite of population decreases from 2010 through 2015, the census projections, the population is projected to increase in the out years 2020 and 2025.



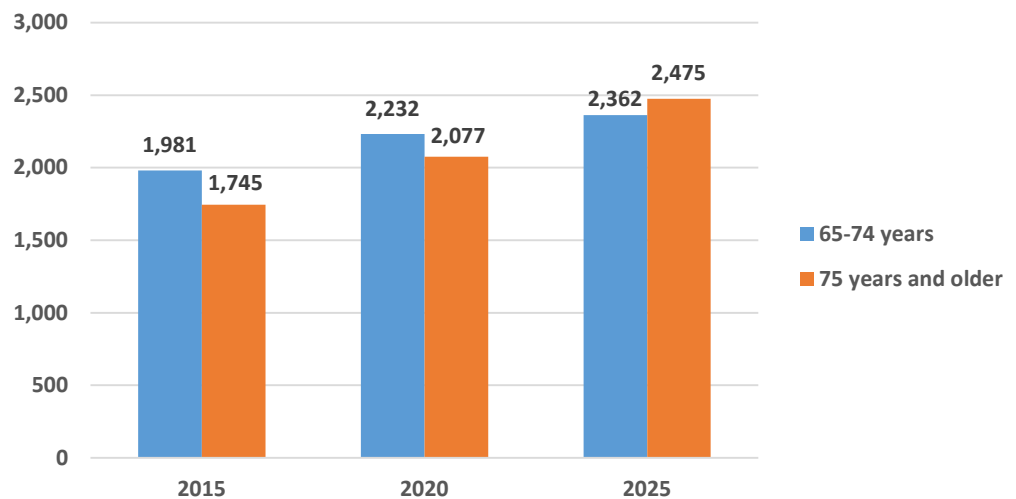
Driving forces driving the population decreases include urbanization trends (i.e. younger people moving to cities based on lifestyle choices) as has been the trend since the industrial revolution, loss of industrial base and jobs in the county, and challenges with primary and secondary education. Studies by the USDA consistently document a decrease in family farms and farm-related jobs due to industry consolidation and increased mechanization.

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Statistical projections show the percentage of senior adult population (defined as individuals 65 years or older) on the rise from 13% for 2015 rising to 17% by 2025. Moreover, the number of seniors over 75 is expected rise sharply from 45% of the total over-65 group today to 51% by 2025. This impacts the need for both acute and chronic healthcare services for the county as older adults invariably live greater incidence of disability and disease – especially chronic disease.

Population Projections - Age 65 and Over Yazoo County

Source: www.mississippi.edu

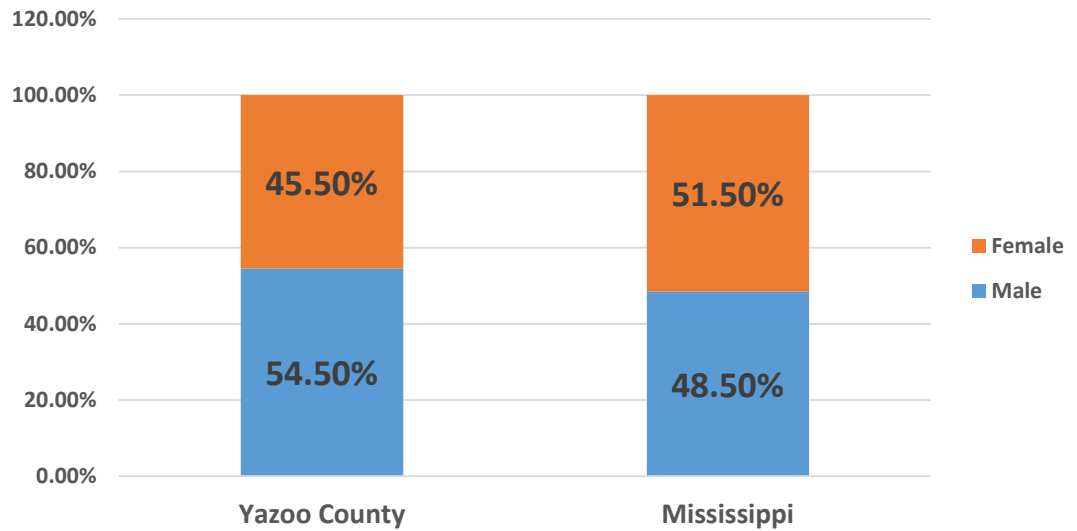


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- Gender – The gender composition of Yazoo County is estimated to be slightly more male (51.7%) than female (48.3%). This varies from the state which is estimated to be slightly more female than male.

Yazoo County Gender Mix vs. Mississippi 2015

Source: www.mississippi.edu



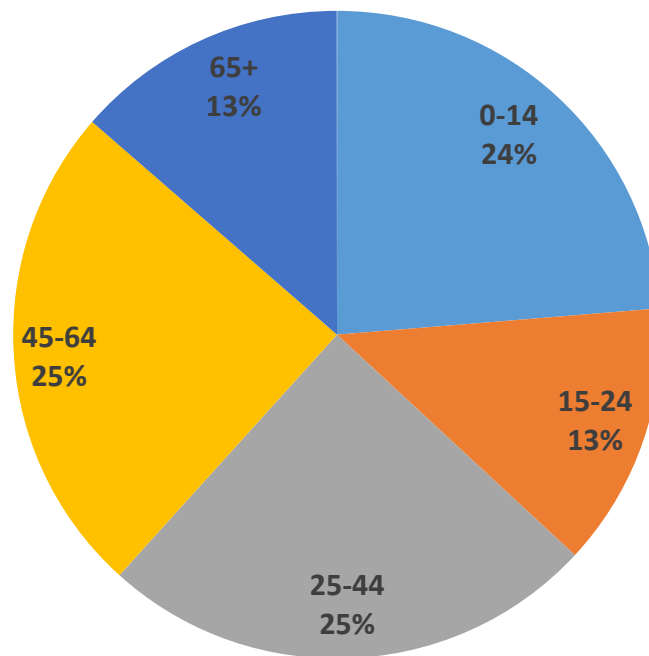
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- Age – As noted previously, while only 13% of Yazoo County residents are currently in the over-65 age category, this is expected to increase significantly by 2020. It is interesting to note that half of the county population is made up of working-age adults. Many of these individuals travel to neighboring counties for employment, and increasingly areas of Yazoo County including Benton and Bentonia are identified as “bedroom communities” due to relative proximity to the Jackson and Vicksburg metro areas.

Age Distribution, Yazoo County, 2015

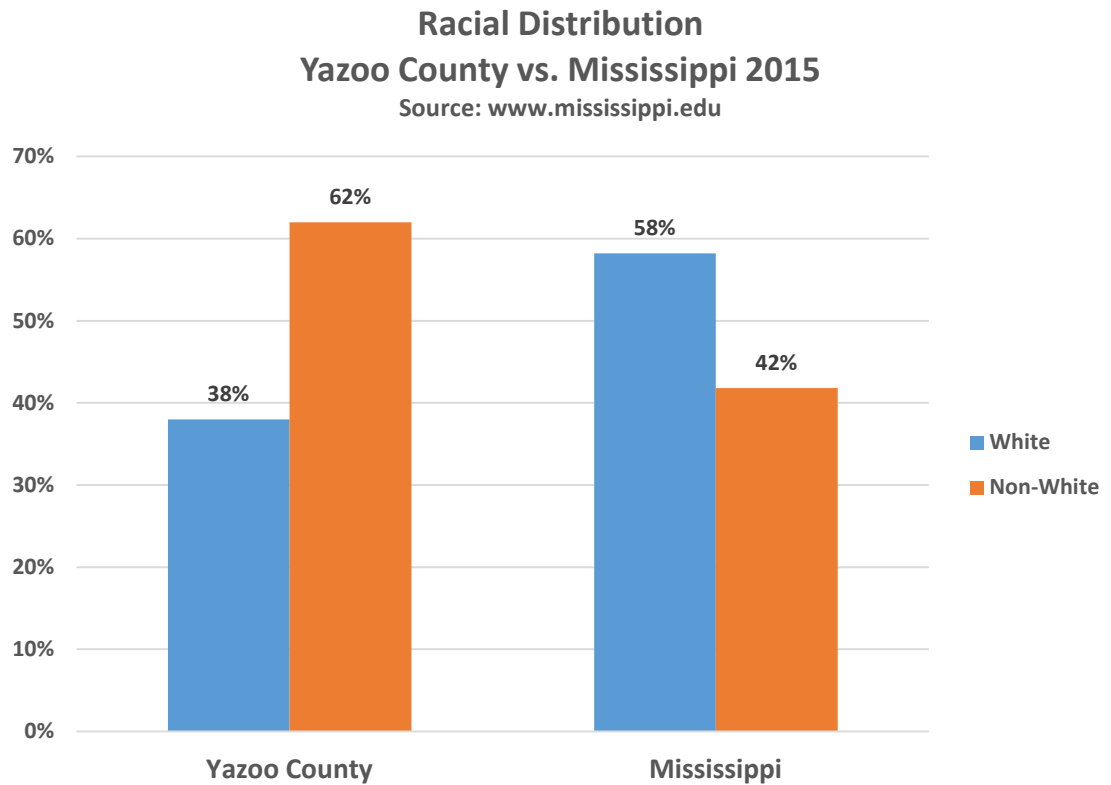
Source: <https://suburbanstats.org>

Note: Detail may not total 100% due to rounding



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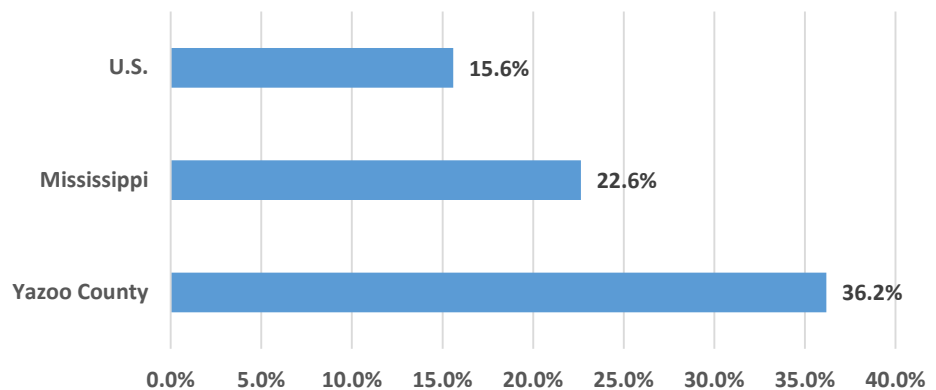
4. Racial Demographics – The racial demographics of Yazoo County vary significantly from the state overall. It is estimated that the county population is 62 percent non-white compared to 42 percent for the state at-large. This is consistent with the overall-all larger Mississippi Delta area which tends to be more largely represented by African-Americans than other regions of the state.



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- Poverty and Unemployment – The relationships between poverty and healthcare have been well documented. Research from the Morgridge Center for Public Service at the University of Wisconsin – Madison found in their study Poverty Fact Sheet: Poor and in Poor Health that (Appendix E – Supplemental) “In the United States, discussion about how to improve health often turns to either access to care or health behaviors like smoking or diet. These things matter, but there are also many social and economic factors that compromise health and impair the ability to make healthful choices in the first place that should be considered.” Beyond access to care, their study found that factors limiting access to health information and access to nutritious food also impact an individual’s prospects for healthy living beginning in childhood and progressing with age.

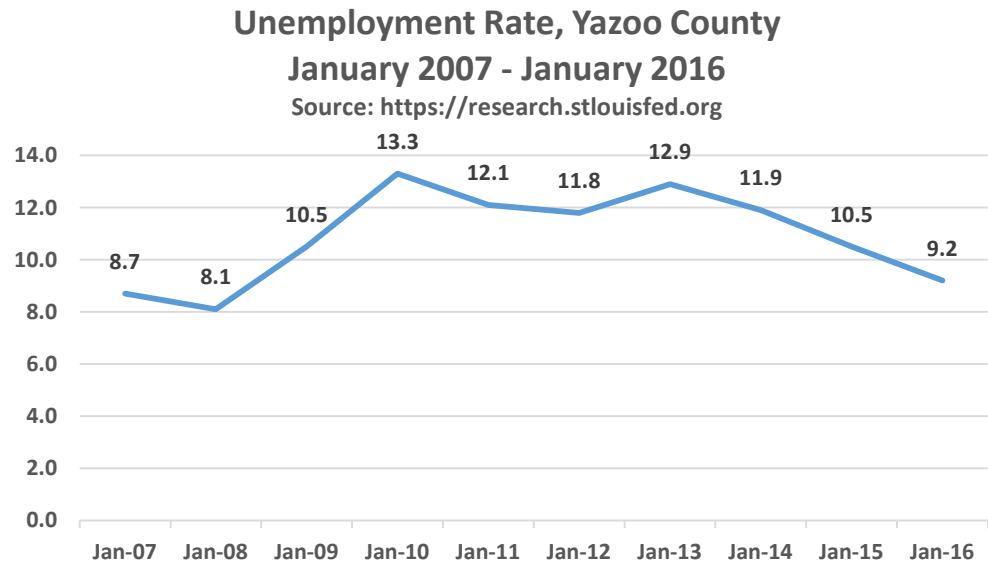
**Population % Living in Poverty
 Yazoo County, Mississippi, and U.S. 2014**
 Source: www.cividdashboards.com



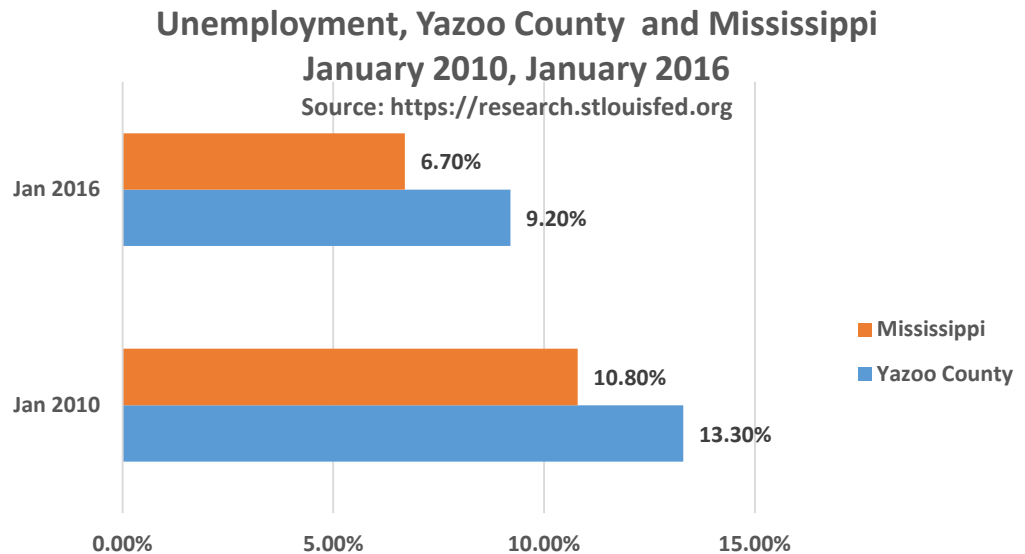
It is estimated that over 36.2% of Yazoo County’s population meets the definition of “living in poverty.” This compares to 22.6% for the state of Mississippi and more than 12 percentage points above the national average of 15.6%.

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Unemployment – Yazoo County has seen improvement in unemployment statistics over the course of the national recovery from what has been termed “The Great Recession” of the past decade by policy makers.



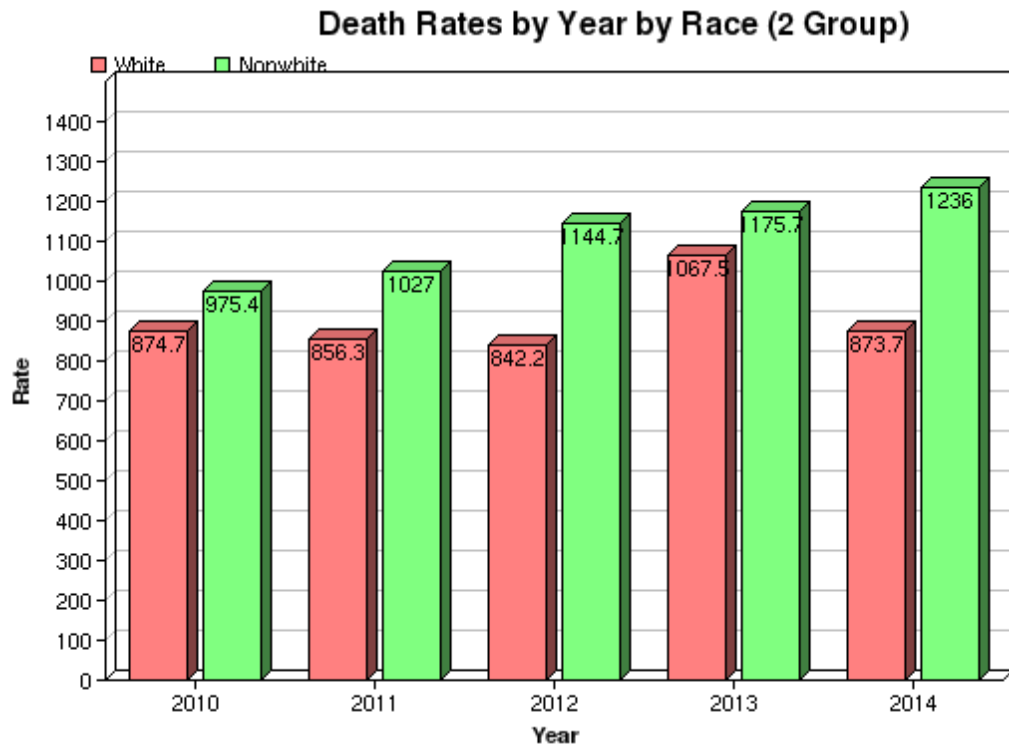
While improvement has been noted, Yazoo County’s recovery has been slightly less robust than the state. In 2010, Yazoo County’s unemployment rate (13.3%) was higher than the state average of 10.8%. As of 2016, that number remains higher at 9.2% compared to a state average of 6.7%.



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6. Health Status

- a) Mortality – Age-adjusted mortality rates for Yazoo County consistently demonstrate disparities in age-adjusted death rates between whites and non-whites.



Source: MS Dept. of Health/MSTAHRs

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Major causes of death for Yazoo County in age-adjusted frequency are: heart disease, cancer, other/non-specified conditions, injury, COPD, and stroke for the Caucasian population. While the first three are consistent for non-whites (predominantly African-American), the top two (heart disease and cancer), occur at higher rates for non-whites. The fourth leading cause for death among non-whites is diabetes, compared to “unintentional injury” for

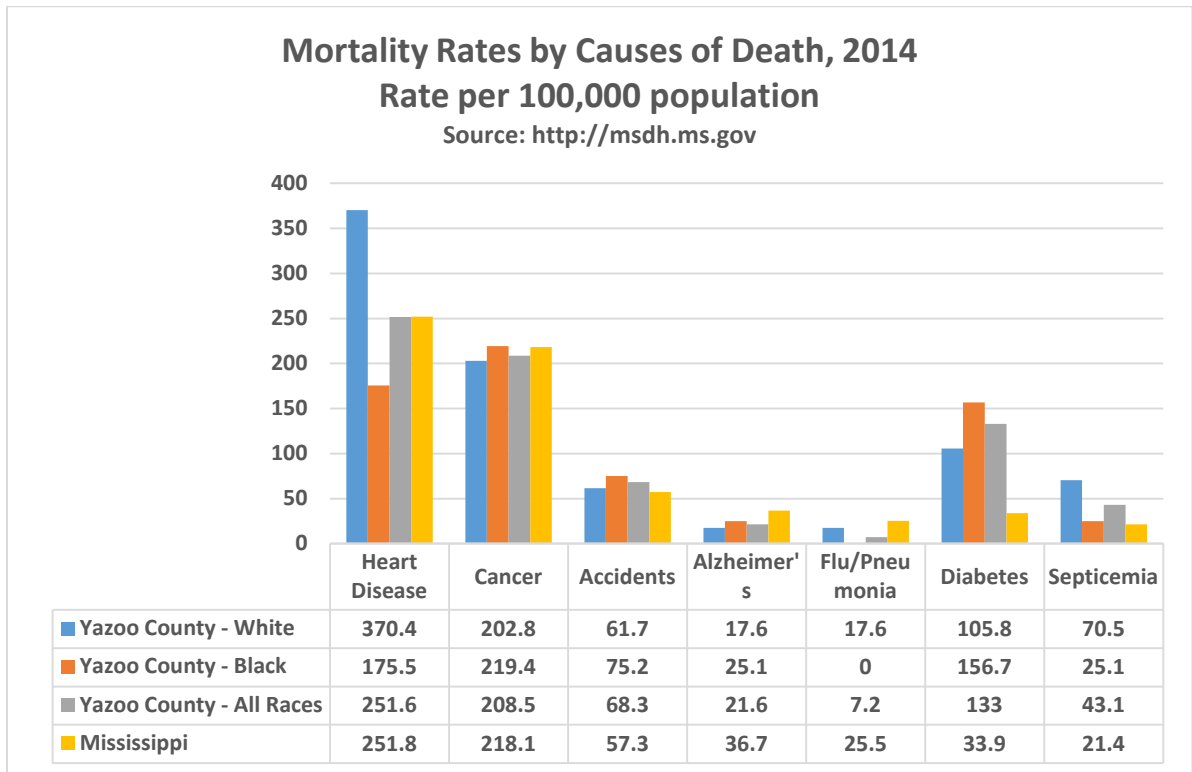
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Yazoo County Mississippi
2010-2015 Age Adjusted Mortality Rates

Cause	White		Non-White		Total	
	Number	Rate	Number	Rate	Number	Rate
Heart disease	25,614	227.2	11,768	258.4	37,382	238.1
Malignant Neoplasms (cancer)	21,550	187.8	10,495	218.6	32,045	197.3
Other diseases and conditions	16,817	152.2	6,983	154.4	23,800	154.3
Unintentional Injury	5,990	62.9	2,360	42.7	8,350	55.5
Chronic obstructive pulmonary disease	7,169	62.3	1,399	31.4	8,568	54.2
Cerebrovascular diseases (Stroke)	4,976	44.3	2,678	60	7,654	49.3
Alzheimer's disease	3,888	34.8	957	25.4	4,845	32.4
Diabetes mellitus	2,510	22.2	2,533	54.8	5,043	31.5
Nephritis, nephrotic syndrome and nephrosis	1,964	17.4	1,590	35.5	3,554	22.7
Pneumonia & influenza	2,378	21.2	887	20.3	3,265	21.1
Septicemia	1,885	16.8	1,159	25.5	3,044	19.3
Hypertension	1,362	12.1	1,166	26.1	2,528	16.1
Suicide	1,668	18	272	4.8	1,940	13
Homicide and legal intervention - >	442	5	1,095	18.1	1,537	10.6
Chronic Liver disease & cirrhosis	1,224	11.1	385	6.9	1,609	9.8
Certain conditions originating in perinatal period	400	5.1	694	9.8	1,094	7.4
Other Infections and parasites	682	6.1	279	5.6	961	6
HIV/AIDS	109	1.2	504	9	613	4.2
Other external causes	369	3.7	168	3.2	537	3.5
Birth defects	179	2.1	142	2.1	321	2.1
Ulcer of stomach and duodenum	71	0.6	27	0.6	98	0.6
Atherosclerosis	51	0.5	25	0.6	76	0.5
Maternal causes	30	0.4	35	0.6	65	0.5
Tuberculosis	15	0.1	21	0.4	36	0.2
Syphilis	0	0	3	0	3	0
Total	101,343	915.4	47,625	1,014.50	148,968	950.4

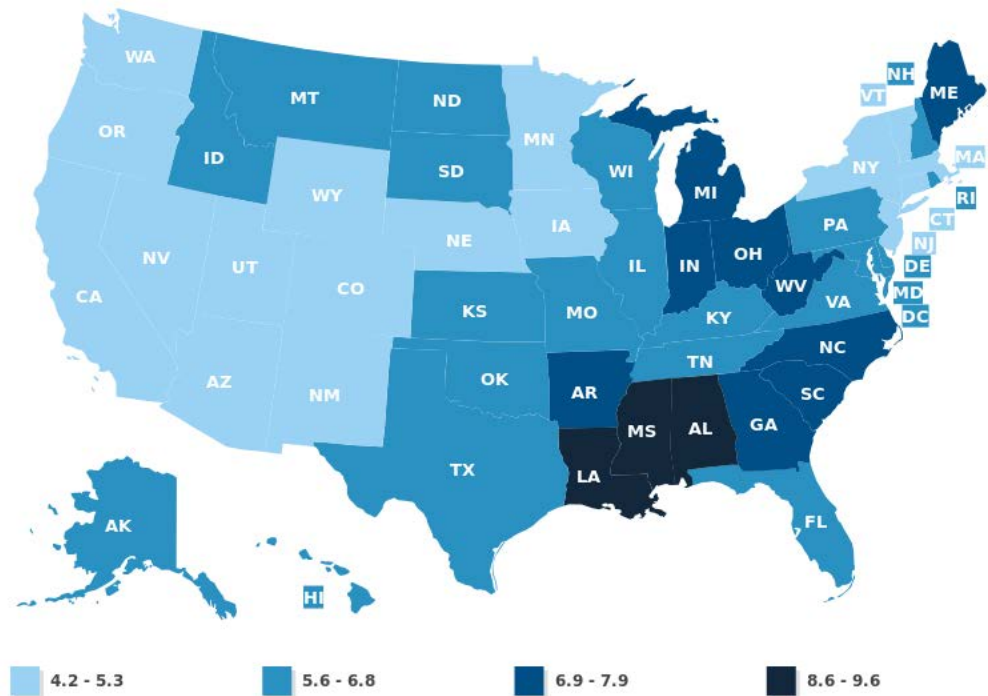
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- b) Causes of Death – For all racial groups, heart disease and cancer account for a disproportionate number of deaths, particularly among the Caucasian population.



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- c) Infant Mortality/Low Birth Weight – Mississippi continues to lead the country in infant mortality and low-birth-weight babies.



Infant mortality, likewise remains high according to 2013 data from the Kaiser Family Foundation:

Infant Mortality for the Southern U.S.	
Location	Infant Deaths per 1,000 Live Births
United States	6
Alabama	8.6
Arkansas	7.9
Georgia	7
Louisiana	8.7
Mississippi	9.6

Source: Kaiser Family Foundation 2013

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- d) Cancer Incidence – Incidence of cancer of all types is higher for Yazoo County than the state-side average.

Cancer Rates for Yazoo County Mississippi

Source: Mississippi Cancer Registry

Year		2009	2010	2011	2012	2013	2009-2013
Population at Risk		23790	23779	23305	23253	23309	117436
Total Cases		118	113	115	134	141	621
Crude Rate		496.01	475.21	493.46	576.27	604.92	528.8
Age-Adjusted Rate		483.18	454.92	443.07	535.91	537.09	492.22
95% Confidence Interval	Lower	399.22	374.05	364.89	447.49	450.71	453.76
	Upper	579.67	548.26	533.49	636.89	635.65	533.12
Statewide Age-Adjusted Rate		482.23	485.81	474.56	465.32	459.95	473.37
Statewide 95% Confidence Interval	Lower	474.46	478.07	466.96	457.86	452.6	469.97
	Upper	490.1	493.64	482.25	472.88	467.39	476.78

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B. Availability of Health Care Services

Baptist Medical Center Yazoo (BMCY) is the only hospital in Yazoo County. BMCY, a 25 bed hospital, provides 5 types or level of care and services: inpatient admissions averaging 4 days or less; Swingbed; Observation; Emergency Care; and, Outpatient diagnostic and treatment services. Those levels of care and services are described in more detail below.

Inpatient Care is provided to patients whose condition warrants placement in the hospital for several days of diagnosis and treatment. Inpatients are cared for by Active Staff physician and/or the BMCY hospitalist. Typically the stay is 4 days or less.

Swingbed/ Inpatient Rehabilitation Services are offered at Baptist Medical Center Yazoo. This service offers sub-acute care services focused on care immediately following an acute condition, such as a serious illness or surgery that required hospitalization. Qualified patients need only follow-up care such that patient no longer medically needs to remain in the hospital for high-tech monitoring or complex diagnostic procedures. But, the patient is still not appropriate or ready for home-based care and recovery. The goal of the swing bed program is to return the patient to a permanent living situation as soon as possible. Although the patient under the swing bed program is in the hospital, the emphasis is on moving the patient to home or other living situation. Any of BMCY's 25 beds, if available, may be used for this purpose on a given day such that the total hospital census never exceeds 25 total patients. Swingbed stays are generally 10 days.

Observation services are provided in the inpatient setting when a physician needs some time to make a definitive diagnosis of a patient's condition and determine a plan of care. Observation placements can be made to any of the hospital's 25 beds based on availability. Patients in observation are typically discharge or converted to inpatient status within 48 hours.

Emergency Care provided at Baptist Medical Center Yazoo offers the only hospital-based emergency service in Yazoo County and operates 24 hours, seven days per week and is staffed by a qualified physician at all times. BMCY participates in the Mississippi state-wide trauma system as a Level IV provider. Level IV trauma centers are generally licensed, small rural facilities with a commitment to the resuscitation of the trauma patient and written transfer protocols in place to assure those patients who require a higher level of care are appropriately transferred. Major trauma patients are stabilized and transferred to facilities offering higher levels of care. This categorization does not contemplate that

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Level IV hospitals will have resources available for emergency surgery for the trauma patient.

Outpatient Services offered by Baptist Medical Center Yazoo include:

- Laboratory services include routine testing on-site such as chemistry and blood bank services plus a wide array of bedside or “point of care” testing. The lab is CLIA certified. Testing for non-routine, non-urgent testing is collected on-site and transported to reference laboratories via courier.
- Diagnostic Imaging – BMCY offers routine x-rays, CT services, diagnostic mammography, nuclear medicine and ultrasound services.
- BMCY also offers outpatient respiratory services as well as EKGs, cardiac stress testing and pulmonary function testing.
- In addition to the above diagnostic services, BMCY offers outpatient treatment in the areas of outpatient surgery, gastroenterology/GI lab, and wound care. Several medical and surgical subspecialists provide patient consults and office visits through arrangement with the hospital on a regular basis as well. These include: general surgery and urology services.
- Ambulatory Infusion services are provided to patients needing periodic and/or long-term injectable or intravenous (IV) medications, as well as blood transfusions.
- BMCY offers an Intensive Outpatient geriatrics program for senior adults 5 days a week including group therapy activities, individual and family therapy when indicated, as well as psychiatric care. Transportation to/from the program is provided.

The Hospital offers Yazoo Primary Care Clinic which is an on-site outpatient clinic with extended hours to include late week day hours and including weekend hours. Two hospital owned off-site clinics are available during regular business hours.

Other healthcare resources available in Yazoo County are shown on the following pages.

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DENTISTS

Dental Clinic PA
1615 Easy St
Yazoo City, MS 39194
662-746-1432

Family Dental Clinic
15415 Hwy 49
Yazoo City, MS 39194
662-746-6433

Dr. William Nelson Jr.
332 E Jefferson St
Yazoo City, MS 39194
662-746-8140

Paul Family Dental
410 N. Jerry Clower Blvd.
Yazoo City, MS 39194
662-746-3491

DIALYSIS AND RENAL CARE

Central Dialysis of Yazoo
716 Grand Avenue
Yazoo City, MS 39194
662.746-4712

MENTAL HEALTH

Warren Yazoo Mental Health
Center
2303 Gordon Ave
Yazoo City, MS 39194
662-746-5712

HOME CARE AGENCIES & HOSPICE

Continue Care Home Health
701 Grand Avenue
Yazoo City, MS 39194
662-746-7939

First Choice Homecare
823 Calhoun Avenue
Yazoo City, MS 39194
662-746-5436

Mid-Delta Home Health
522 Grand Avenue
Yazoo City, MS 39194
662-746-9068

Kare-In-Home Hospice
Yazoo City, MS 39194
601-605-3881

Mississippi Home Care
East 15th Street
Yazoo City, MS 39194
662-746-1232

Our Adult Time Daycare
Benton, MS
662-755-8333

Sta-Home
324 S Main St.
Yazoo City, MS 39194
662-746-5800

PHYSICIANS & PRIMARY CARE

Baptist Primary Care Clinic
823 Grand Avenue
Yazoo City, MS 39194
662.746-8289

Baptist Medical Clinic /
Yazoo Family Doctors
748 E 15th Street
Yazoo City, MS 39194
662-746-9818

Baptist Medical Clinic /Yazoo
Family Healthcare
307 E 15th Street
Yazoo City, MS 39194
662-746-2113

GA Carmichael Family Health
Center
110 N Jerry Clower BLVD
Yazoo City, MS 39194
662-746 6532

Sunshine Medical
110 N Jerry Clower Blvd
Yazoo City, MS 39194
662-746-8962

Dr. Parvesh Goel
1435 Grand Avenue
Yazoo City, MS 39194
662-746-3555

Yazoo City Medical Clinic
805 E 15th St
Yazoo City, MS 39194
662-746-6083

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Long-Term Care

Oasis Health & Rehab
925 Calhoun Avenue
Yazoo City, MS 39194
662-746-7770

Martha Coker Green Houses
2041 Grand Avenue
Yazoo City, MS 39194
662-746-4621

Optometry

David Parker Jr.
110 N Jerry Clower Blvd
Yazoo City, MS 39194
662-746-1623

Professional Eye Care Associates
728 E 15th St
Yazoo City, MS 39194
662-746-4312

Pharmacies

CVS
800 E 15th St
Yazoo City, MS 39194
662-746-8580

Rite Aid Pharmacies
1200 N Jerry Clower Blvd
Yazoo City, MS 39194
662-746-9926

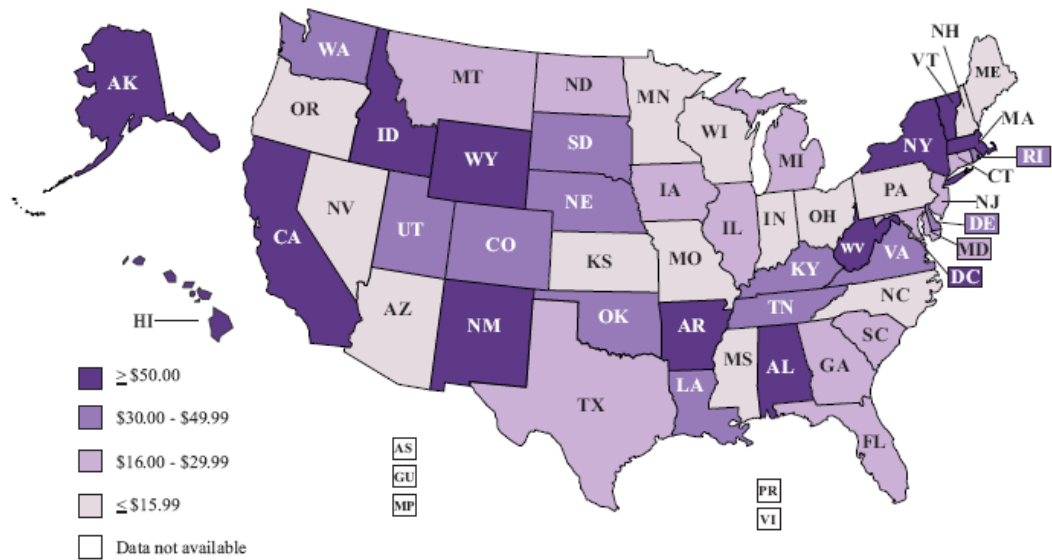
Vanjon's Pharmacy
320 E 15th Street
Yazoo City, MS 39194
662-746-3562

Webb's Pharmacy
216 S Main St
Yazoo City, MS 39194
662-746-3253

Yazoo Drug Company
15th Street
Yazoo City, MS 39194
662-746-7423

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Public Health Funding – In spite of ranking 1st among the fifty states for poverty and 8th for uninsured, Mississippi still ranks among the lowest states for public health spending per capita at less than \$15.99/day according to data provided by the National Conference of State Legislatures.

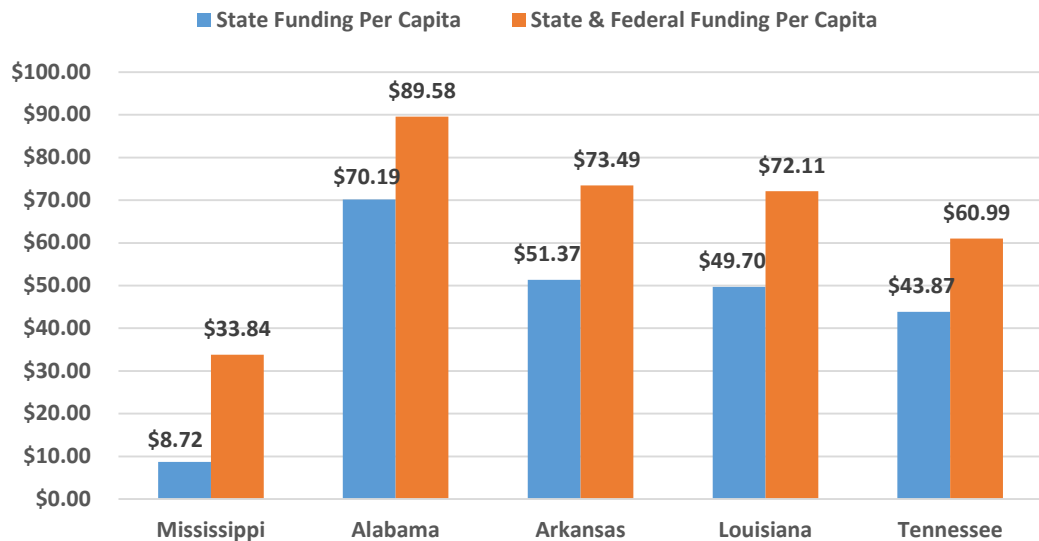


Even when compared to other states in our region, Mississippi falls far short of our relative peers.

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**Public Health Funding Per Capita
FY2011 - FY2012**

Source: <http://www.mspha.org> and <http://healthyamericans.org>



These numbers represent the stark reality of the health care challenges facing Mississippians.

Impact of the Affordable Care Act – In a December 2014 *POLITICO* article entitled “Mississippi Burned, How the Poorest, Sickest State Got Left Behind by Obamacare,” (See Appendix E – Supplements) author Sarah Varney wrote,

“The first year of the Affordable Care Act was, by almost every measure, an unmitigated disaster in Mississippi. In a state stricken by diabetes, heart disease, obesity and the highest mortality rate in the nation, President Barack Obama’s landmark health care law has barely registered, leaving the country’s poorest and most segregated state trapped in a severe and intractable health care crisis.

“There are wide swaths of Mississippi where the Affordable Care Act is not a reality,” Conner Reeves, who led Obamacare enrollment at the University of Mississippi Medical Center, told me when we met in the state capital of Jackson. Of the nearly 300,000 people who could have gained coverage in

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Mississippi in the first year of enrollment, just 61,494—some 20 percent—did so. When all was said and done, Mississippi would be the only state in the union where the percentage of uninsured residents has gone up, not down.”

As of this publication, there is only 1 plan in Mississippi offering coverage under the “Patient Protection and Affordable Care Act” also known as “Obamacare.” And, there are currently no providers in Yazoo County accepting patient under this plan.

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IX. Qualitative Analysis

Baptist Medical Center Yazoo conducted a Community Health Needs Survey to assist leaders in:

1. Ascertaining views of the community related to perceived health, healthcare and the quality and accessibility to related services,
 2. Identifying gaps in service, and
 3. Formulating plans to address these shortcomings within the resources available to the organization.
- A. Data Gathering / Survey Tools – A survey tool was developed based those data points felt to be most significant in determining the public’s perceptions related to participants perceptions and experiences related to 1) their overall health 2) awareness of available services and 3) perceived needs for new and additional health services within the community. The survey was limited to 25 questions in order to maximize interest in participation. A Copy of the survey instrument is provided in Appendix A

Survey Participation / Access to Survey – Baptist Medical Center Yazoo made every attempt to solicit feedback from anyone in the community who wished to participate. The online survey was distributed via email, website, social media, local Main Street/Chamber, and other means of electronic communication. Instructions for accessing the online survey were distributed in highly trafficked areas by patients and visitors throughout clinics, Baptist Medical Center Yazoo, local civic and community meetings, local library with free online access is available, local businesses as well as other local media outlets.

A hardcopy survey was also made available to receive a diverse response in order to not exclude those who might not have internet access. Paper surveys were distributed at local civic and community meetings and events, local businesses, Baptist Medical Center Yazoo lobby and clinics. The completed hardcopy surveys were collected and entered to the online data for analysis.

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Focus Group Methodology - A critical component in gathering relevant community health needs data is conducting focus group interviews with community members who are interested in and represent the broader interests of the community, including those with special knowledge of or expertise in public health. A copy of the Focus Group Presentation is provided in Appendix B.

Two focus groups were conducted inviting participants across Yazoo County to attend. Information regarding the focus group that included the date, time, and location was disseminated by email, newspaper, the local Main Street Chamber, and local civic organization and community meetings. A series of questions were presented to the focus group serving as a guide for the meeting in which the attendees were asked to share their responses. The responses were in turn documented by a designated scribe.

- B.** Soliciting Participation - In order to maximize participation, the hospital conducted focus groups with various civic groups and organizations. Outreach was provided via the hospital website, social media, print and radio announcements, local civic organizations and major employers as well as internal hospital resources (employees and volunteers). A full list of outreach efforts is provided in Appendix B.
- C.** Participation Results – In all, 251 individuals participated in the survey either through one of our public forums or via the internet survey tool.

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X. Survey Results

- A. About the Survey Respondents – In total, 251 individuals from the community participated in the survey. There was a wide representation of age groups as follows:

Age Range of Survey Respondents	
18 to 24	5.6%
25 to 34	21.5%
35 to 44	18.3%
45 to 54	20.7%
55 to 64	17.5%
65 to 74	10.0%
75 or older	6.4%

Eighty percent of the participants were female. While this number differs from the overall population statistics (roughly equal male-to-female population) it is consistent with the U.S. Department of Labor’s published that women make 80% of the healthcare decisions for the family.

There was diverse ethnic representation in the responses with 73.7% identifying as Caucasian and 25.1% African-American. Numerous attempts were made to engage all ethnicities in the survey; however, Hispanic and American Indian participation was lower than hoped.

All educational levels were fairly well represented with college-educated adults making up the largest group of respondents at 51.4%. 76.5% reported being employed full-time. 12.4% were retired. All income ranges were represented; although, 23.5% preferred not to respond to the question.

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Income Range of Survey Respondents	
0 - \$24,999	15.5%
b. \$25,000 - \$49,999	16.3%
c. \$50,000 – \$74,999	21.1%
d. \$75,000 - \$99,999	10.4%
e. \$100,000 or more	13.1%
f. Prefer not to answer	23.5%

Over half of the survey respondents reported having some number of children living in their home below the age of eighteen.

When asked about insurance coverage, 82.1% of respondents said they have “commercial health insurance.” 12% had Medicare. 2% had Medicaid and 4% said they had no coverage at all.

- B. Perception of Health Status and Healthy Lifestyles –** Over 90 percent of respondents reporting perceiving their general health as “good” to “excellent” with the largest percentage (44.2%) choosing the rating of “good.”

Personal Health Choices and Behavior	
I exercise at least 3 times a per week	34.7%
I eat at least 5 servings of fruits and vegetables each day.	14.7%
I eat fast food more than once per week	47.4%
I smoke cigarettes	15.1%
I chew tobacco	2.4%
I use illegal drugs	0.0%
I abuse or overuse prescription drugs	0.4%
I consume more than 4 alcoholic drinks per day	2.0%
I use sunscreen or protective clothing for planned time in the sun	36.3%
I receive a flu shot each year	72.5%
I have access to a wellness program through my employer	45.4%
None of the above apply to me	3.6%

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Many respondents acknowledged practicing healthy activities and lifestyle choices: 72.5% receive a flu shot annually. 45% report having access to a wellness program and 34.7% reported exercising at least 3 times per week. Sunscreen use was also high at 36.3%. Unsurprisingly, 47% report eating "fast food" at least once per week and 15.1% reported using cigarettes.

Of the respondents, almost all (96%) reported at least 1 preventive health measure taken in the past 12 months. The most common were blood pressure checks (77.7%), flu shots (68.5%), dental cleanings w/ x-rays and pap smears (women) at 50.6% each. 46.2% reported having an annual physical exam.

- C. Awareness of Local Health Offerings – Of 11 various health services offered by Baptist Medical Center Yazoo, 9 had at least a 50% awareness rating with survey respondents. The highest was "family medicine" with over 92% of respondents indicating awareness that these services were available. 74.5% were aware of the "wound care" services (although this question might have been interpreted by some as episodic care provided in the emergency department or primary clinic related to an acute injury). The lowest rated awareness scores were
- D. Health Challenges – Survey respondents were provided with a list of 13 health challenges (including a choice of "no health challenges" and "other") and asked to select the top 3 affecting them personally. 37.5 percent of respondents denied having health challenges, the most frequently listed challenges were overweight/obesity (32.7%), high blood pressure (30.7%), joint and back pain (24.3%) and diabetes (17.1%).
- E. Access and Barriers to Health Care Services – When asked "Where do you go for routine healthcare?", 221 respondents (90.6%) listed "physician office." 4.5% said they do not receive routine healthcare. 1.6% listed the health department, and less than 1% cited the emergency department. 85.5% responded affirmatively that they had someone they considered to be their "personal doctor."

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94% of respondents said they are able to “visit a doctor when needed,” and 77.7% of respondents reported seeing a doctor within the past year. A similar number 75.7% said they receive their healthcare services in Yazoo County. For those respondents who say they cannot see a physician when needed 18% said they “cannot afford it.” 12% listed appointment availability as a barrier and another 12% cited “cannot take time off from work.”

When asked if they had changed doctors within the past 12 months, 85% have not. 4% said they had changed due to a change in health care coverage. 3.2% were dissatisfied with their prior provider and 2.4% said their provider had retired.

When asked about distance and travel time to a provider, almost 90% rated travel and convenience as “good,” “very good” or “excellent” with “excellent” being the most frequently cited response at 35.9%.

For emergency care, 27.5% of respondents said they had visited the emergency room at least once within the past year.

When asked, “What might prevent you from seeing a doctor if you were sick, injured or needed some type of health care?” 156 respondents (62.2%) said nothing would prevent them from seeking care. 22.7% cited “cost.” “Time off of work,” “convenient hours” and “lack of appointment times” were also cited but far less frequency.

What might prevent you from seeing a doctor if you were sick, injured, or needed some type of health care? Select all that apply.		
Answer Options	Response Percent	Response Count
a. Cost	22.7%	57
b. Frightened of the procedure	4.8%	12
c. Worried they might find something wrong	7.6%	19
d. Cannot get time off from work	9.6%	24
e. Hours not convenient	6.8%	17
f. Difficult to get appointment	7.2%	18
g. Do not trust or believe doctors	0.4%	1
h. No transportation or difficult to find transportation	0.8%	2
Nothing would prevent me from seeing a doctor at this time	62.2%	156

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XI. Summary of Findings and Conclusions

Based on the findings of both the quantitative and qualitative data gathered, Baptist Medical Center Yazoo has identified gaps in healthcare services within the community. While acknowledging its important role in meeting the healthcare needs of the community, BMCY also recognizes that truly “moving the needle” on healthcare for the community (i.e. improving the overall health of the community) implies shared responsibility and coordination of resources on the part of all stakeholders including the hospital, other healthcare providers, elected and non-elected officials as well the citizens, who are the ultimate consumers of healthcare services.

In analysis of both the quantitative and qualitative data gathered, Baptist Medical Center Yazoo identified opportunities to expand or improve services in three broad categories. These included: At-Risk Populations, Disease-Specific Needs and areas of Social Concern that impact the community’s short-term and long-health.

The recommendations and action plans which follow in Appendix D are grouped into four types in interventions:

1. Education – Those activities and resources that BMCY can provide, both internally and externally to assist individuals and/or partner organizations in addressing health-related issues.
2. Advocacy – Opportunities to engage with officials (both elected and appointed) who make or administer policies which directly or indirectly impact the health of the community.
3. Partnerships – BMCY will seek to work collaboratively with individuals, stakeholders, and outside organizations toward the overall goal of improving community health.
4. Provision of Services – Those services which BMCY plans to provide directly and independently to patients

A plan will be developed to address each gap in services or opportunity to provide new or expanded service with recommendations in one or more of these categories. The plan will be approved by the Board of Trustees and updated annually.

APPENDIX A
SURVEY INSTRUMENT

APPENDIX B
FOCUS GROUP PRESENTATION

APPENDIX C
SURVEY RESULTS

APPENDIX D
OPPORTUNITIES FOR IMPROVEMENT
AND ACTION PLAN

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 Opportunities for Improvement and Action Plan



A. At-Risk Populations - Children / Pediatrics

Educate	Advocate	Collaborate	Provide
	Promote Medicaid expansion alternatives to MS legislature.	Work with Yazoo County Board of Education to develop grade-specific health education goals and resources. Partner with school nurses to develop a strategic plan and/or provide materials related to age-specific health concerns.	Provide access to all Yazoo County K-6 Teachers with Access to GoNoodle education resources Provide instructors to area schools on health-related matters.

B. At-Risk Populations – Senior Adults / Geriatric

Educate	Advocate	Collaborate	Provide
Host public educational meetings (at least semiannually) on health topics of interest to senior adults.	Support critical-access status for rural facilities as the primary means to the continuation of vital health services to rural communities.	Host and annual meeting with administrators for area homes for the aged (nursing homes and assisted living facilities) to identify key health service needs for their residents.	Expand and promote BMCY’s Hospital Auxiliary/Volunteer Program as a key point of contact with the senior-adult population.

C. At-Risk Populations - Women

Educate	Advocate	Collaborate	Provide
	Advocate state elected officials for expansion of Medicaid		

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Opportunities for Improvement and Action Plan



D. Disease/Condition-Specific – Accidental Injury / Trauma

Educate	Advocate	Collaborate	Provide
Provide, at least annually, public information related to injury prevention and treatment.	Support additional funding of the state-wide trauma system.	Participate in the MS state-wide trauma system as a level and the Central Trauma Region as a means to continually improve trauma services to citizens of Yazoo County.	Facilitate timely and appropriate transfer of Emergency patients area tertiary referral hospitals through review and analysis of performance metrics

E. Disease/Condition-Specific – Cancer

Educate	Advocate	Collaborate	Provide
Continue to sponsor annual “Pink Affair” in Yazoo City as a means to raise awareness of breast cancer.	Advocate State elected officials for Medicaid expansion.	Participate / sponsor in MS Baptist Health Foundation’s Cycle for a Cure event annually.	Expand GI screenings for colorectal cancer.

F. Disease/Condition-Specific – COPD / Pulmonary

Educate	Advocate	Collaborate	Provide
Conduct in-services annually to local employers such as CF Industries regarding vaccinations		Provide flu shots free or at reduced cost to area employers.	Promote flu vaccination in all our BMCY Rural Health Clinics. Continue requirement for all eligible employees to receive annual flu vaccination as a condition of employment.

G. Disease/Condition-Specific – Diabetes

Educate	Advocate	Collaborate	Provide
Provide glucose screenings at area health fairs and local church programs free of charge.		Work with area schools to provide information on nutrition, exercise and healthy lifestyles to students on a grade-appropriate basis	Provide access to an endocrine specialist at a weekly basis on the BMCY campus

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Opportunities for Improvement and Action Plan



H. Disease/Condition-Specific – Stroke/CVA

Educate	Advocate	Collaborate	Provide
Provide public education, at least annually on stroke awareness, signs of stroke and early intervention “golden hour.”	Advocate for increased funding for the state-wide stroke network.	Participate in the state-wide stroke network as a primary stroke hospital.	Provide “golden hour” interventions on a 24-hour basis including CT with STAT interpretation and thrombolytic therapy available on-site

I. Heart Disease

Educate	Advocate	Collaborate	Provide
	Advocate state elected officials for ongoing support of the MS STEMI network.	<p>Provide basic CPR instruction at all area high school for juniors and seniors in collaboration with state-wide graduation requirements.</p> <p>Partner with Baptist Health Foundation and American Heart Association to underwrite/provide CPR training materials including demonstration dummies for area high schools.</p>	<p>Expand services to provide access to a board-certified cardiologist at an on-site clinic at BMCY campus of a weekly basis (currently twice a month)</p> <p>All employees to receive on-site CPR certification.</p> <p>Provide ACLS certification for nursing staff</p>

J. Disease/Condition-Specific - Hypertension / Blood Pressure

Educate	Advocate	Collaborate	Provide
			Provide free blood pressure checks via hospital ED, rural health clinics as well as areas health fairs.

K. Disease/Condition-Specific – Mental Health

Educate	Advocate	Collaborate	Provide
	Actively advocate state elected officials	Work with Warren Yazoo Mental Health Center to serve the needs to this local population.	Provide outpatient geripsych services to Yazoo County

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Opportunities for Improvement and Action Plan



L. Social Challenges Affecting Health – Poverty

Educate	Advocate	Collaborate	Provide
Educate the public regarding BMCY's charity care program	Advocate for some form of expansion of Medicaid or other expanded coverage for the poor.	Utilize HPE Presumptive eligibility Program to assist those who may qualify for Medicaid.	Provide services upon ER registration and clinic registration with credentialed personnel.

APPENDIX E
SUPPLEMENTAL INFORMATION