

A vibrant rainbow arches across the top half of the page. Below the rainbow, a large number of diverse hands are reaching upwards, symbolizing community and hope. The hands are of various skin tones and are wearing different patterned sleeves. The background is a solid blue color.

# ✝ St. Luke's

**St. Luke's Des Peres Hospital**  
**Community Health Needs Assessment**

# 2025

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# Message to Our Community

St. Luke's is dedicated to providing exceptional care to every patient, every time and has served our community for many generations. We continue to advance our mission through our ONE St. Luke's strategic plan to create a more seamless and even higher quality healthcare experience for our patients. Every three years, we also further our mission through an intentional process to identify the greatest current health and related social needs in our community.

We are proud to present St. Luke's Des Peres Hospital's 2025 Community Health Needs Assessment. It is the culmination of a systematic approach incorporating data analysis, community input and our team's collaboration with other St. Louis area health systems and additional community partners. In this report, we present our community's priority health and social needs in which St. Luke's is positioned to make a meaningful impact and support equitable access to care.



As we develop initiatives to address these priorities, we will continue to focus on providing exceptional care to improve the health and well-being of each patient and the community. We are One Team with One Purpose and One Passion. **We are ONE St. Luke's!**

Sincerely,

A handwritten signature in black ink, appearing to read 'Andrew J. Bagnall'.

Andrew J. Bagnall, MHA, FACHE  
President and Chief Executive Officer



# Executive Summary

The Community Health Needs Assessment (CHNA) is a systematic process to identify gaps in access to care and the unmet needs in our community so that we can develop a plan to meet those needs with our resources, mission, and partners in the community. The CHNA includes assessment of not only health needs, but also the social and economic drivers that impact the ability to access and understand health that are often the root causes of health disparities. It is through this multi-faceted assessment that we uncover opportunities to collaborate as a community to address the most pressing challenges that have potential to allow all to achieve a healthy and productive life.

Data is the primary tool that guides the CHNA process. The St. Luke's Des Peres Hospital CHNA included assessment of public health data, community surveys, and feedback from stakeholder focus groups from which the data were analyzed by zip code and in aggregate, compared to the St. Louis County benchmark. When combined, the inputs from all data sources allow St. Luke's to meaningfully incorporate findings with organizational strategy to impact the overall care and health of the community.

The magnitude of public health priorities requires a unified effort for meaningful impact. During the CHNA process, St. Luke's continued to collaborate with other

regional hospitals and health systems as part of the St. Louis Regional Hospital CHNA Collaborative to listen to our community, allowing opportunities for input and feedback. Focusing on the strengths of our community to address identified needs and recognizing that the greatest impact will be realized together, it is important that this collaboration continues through implementation to improve the health and well-being of the communities we serve.

The development of the St. Luke's Des Peres Hospital CHNA was guided by an internal Steering Committee comprised of St. Luke's leaders to align community health assessment and initiative development with organizational priorities. The Steering Committee is responsible for the guidance and review of the CHNA and the subsequent Community Health Implementation Plan (CHIP).

In June 2025, the St. Luke's Board provided final approval to develop and implement community health initiatives intended to impact the following priority needs:

- Older Adults and Age-Related Illnesses
- Weight Management and Heart Health
- Cancer







# Introduction

St. Luke's is a faith-based, nonprofit regional healthcare provider committed to improving the quality of life for patients and the community. Founded over 150 years ago to meet the expanding needs of a growing St. Louis, St. Luke's has remained true to its Episcopal-Presbyterian heritage and its mission. This is evident not only in the breadth of services St. Luke's offers, but also in the many ways we reach out to help the community every year.

St. Luke's offers an advanced network of care, with physicians and healthcare experts in over 60 specialty areas across our 493-bed hospital in Chesterfield, Missouri, 143-bed St. Luke's Des Peres Hospital and nearly 30 other locations of care in the greater St. Louis area.

St. Luke's Des Peres Hospital is recognized as a Best Hospital by U.S. News & World Report, 2022-2025. In 2024-2025, the hospital received "High Performing" ratings in the specialty area of Spinal Fusion. The annual Best Hospitals rankings and ratings are designed to assist patients and their doctors in making informed decisions about where to receive quality care for challenging health conditions and elective procedures. St. Luke's Des Peres Hospital is also the recipient of the 2025 Specialty Excellence Award™ in Coronary Intervention, placing it in the nation's top 10% for Coronary Interventional Procedures. St. Luke's Des Peres Hospital is also a Five-Star Recipient for Coronary Interventional Procedures.

St. Luke's Des Peres received the 2025 Healthgrades Outstanding Patient Experience Award, placing it among the top 10% of hospitals nationwide for patient satisfaction, applying a scoring methodology to ten patient experience measures. These focus on patients' perceptions of their hospital care — including staff communication, medication explanations, and cleanliness. St. Luke's award is a direct result of positive patient feedback in these critical areas.

St. Luke's is proud to provide health education, screenings and outreach programs that engage our community members to take action for better health for themselves and the health of their families. In addition, St. Luke's partners with area employers to help identify, address and decrease health risks before they result in chronic disease, illness and costly healthcare claims, lowering costs and improving quality of life for all.

## Community Served

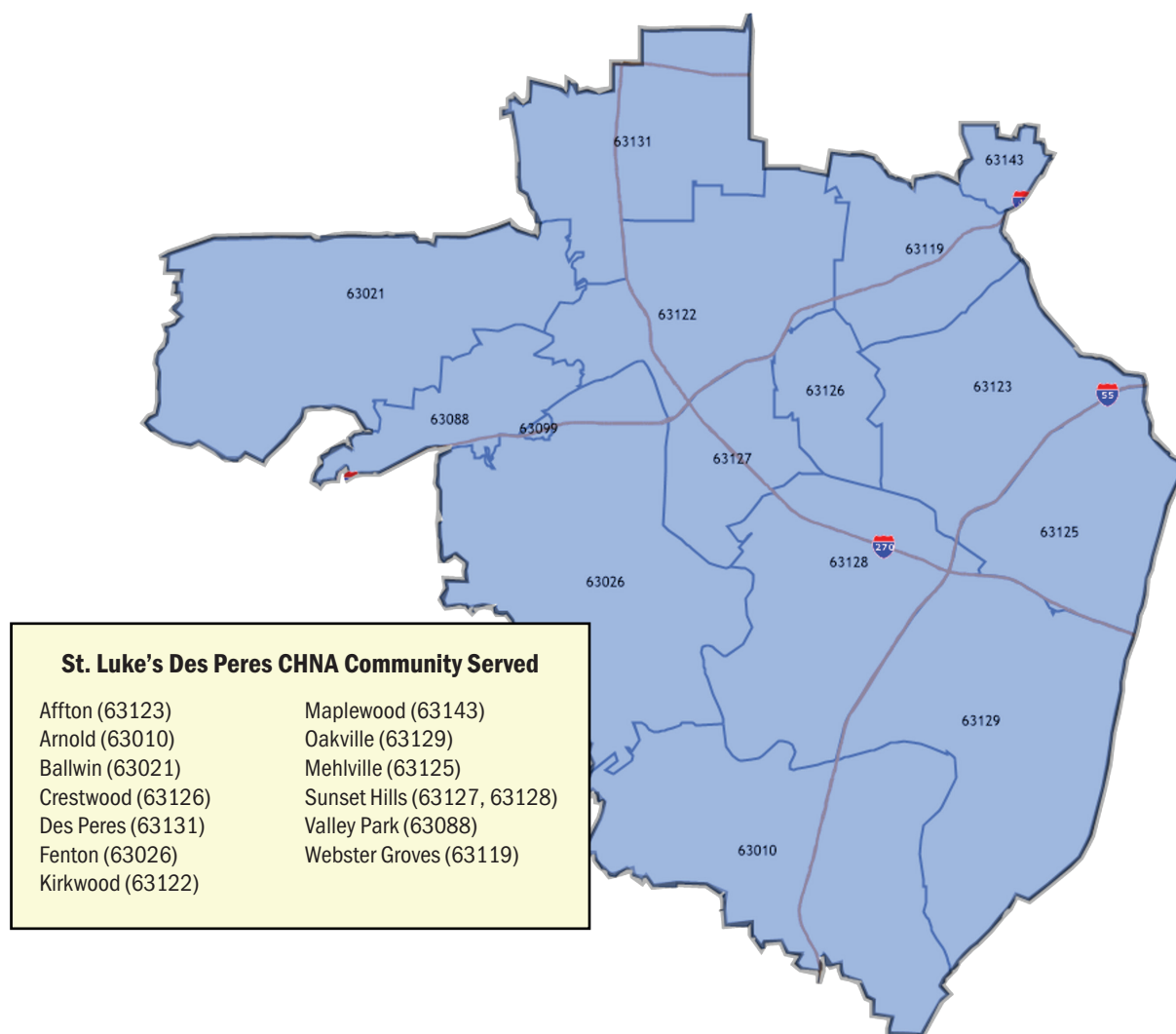
The St. Luke's Des Peres Hospital CHNA defines its community served based on a geographic area of zip codes where patients who rely on St. Luke's Des Peres Hospital for care reside, including populations with greater needs and disparities that may lead to poor health outcomes.

Review of St. Luke's Des Peres Hospital inpatient volume by zip code identified the zip codes from which the greatest volume of patients relies on St. Luke's Des Peres Hospital for care.

To ensure that St. Luke's does not exclude from the assessment those who are medically underserved, low-income, or minority populations, an assessment of socioeconomic status by zip code was also included in the process to define community served. The socioeconomic status rank, provided through ExploreMOHealth, highlights nearby populations who are more likely to experience health disparities and may not receive medical care due to insurance status, geographic, language, or financial barriers.

Defining the St. Luke's Des Peres Hospital CHNA geographic area based on zip code-level volume and socioeconomic status allows for a focused assessment to impact areas most significant to our organization.

Based on review of all data elements related to the St. Luke's Des Peres Hospital CHNA community, the St. Luke's CHNA Steering Committee approved a CHNA geography comprised of 14 zip codes.



## Data Collection and Methods

St. Luke's Des Peres Hospital CHNA was developed through analysis of primary and secondary data from a variety of sources including public health data, community survey input, and feedback from stakeholder focus groups.

Data analysis of secondary data was the primary method of assessment of community health needs. Secondary data was analyzed at the zip-code level and benchmarked against St. Louis County. Indicators included demographics; health behaviors, conditions, and outcomes; access and utilization; and socioeconomic factors. For a detailed list of data and sources, refer to Appendix A.

St. Luke's continues to collaborate with other regional health systems in the CHNA process with the goal of assessing and potentially addressing community health needs together. Because all local health systems serve the same populations, partner with the same community organizations, and strive to address the most prevalent needs in the area, it is appropriate to collaborate in the assessment process when community members are engaged. The St. Louis Regional Hospital CHNA Collaborative is comprised of community health leaders from St. Luke's, Mercy, SSM Health, BJC HealthCare, and Shriners Hospitals for Children.

Primary data was collected through a St. Louis regional community survey and a stakeholder focus group. Between March and June 2024, the St. Louis Regional Hospital CHNA Collaborative disseminated a web-based community survey throughout the St. Louis area. The survey was available to all residents of the St. Louis metropolitan area. Survey promotions included a press release to local media outlets, hospital news stories, social media promotions, flyer distribution throughout the community at hospital-sponsored activities, and through community-based partner organizations including those with internet availability for individuals without access to internet at home. 1,061 respondents in the St. Luke's Des Peres Hospital CHNA geography completed the survey. For a list of survey questions and responses for the St. Luke's Des Peres Hospital CHNA area, refer to Appendix B.

After survey data were summarized, the Regional Hospital CHNA Collaborative hosted six regional stakeholder conversations (focus groups) with community partners from a wide variety of community-

facing organizations who represent broad interests of the community. The goal of hosting stakeholder conversations was to present the survey outcomes and gather additional detail about the data from experts in the field, in addition to discussing how we might collaboratively build on the results so that we can address the most pressing needs. For a summary of the South St. Louis County stakeholder conversation and a list of organizations participating in the stakeholder conversation, refer to Appendix C.

The St. Luke's CHNA Steering Committee reviewed high scoring data indicators that were identified through primary and secondary data assessment in comparison to St. Louis County benchmarks, magnitude of impact on the population, and community and stakeholder feedback. Each elevated indicator was prioritized by the Steering Committee based on internal criteria including alignment with St. Luke's strategic priorities, resources required to address the issue, partnership opportunities, and St. Luke's ability to readily impact the issue.

The individual prioritization criteria rankings of health needs were sorted by magnitude of total score and discussed by the Steering Committee to select the final list of prioritized needs.

## Data Limitations

The St. Luke's Des Peres Hospital CHNA incorporated multiple types and sources of data to ensure the most reliable and well-rounded data inputs to inform the assessment, however, we acknowledge that data availability and bias may impact outcomes of analysis. While the main goal of conducting a CHNA is to identify gaps to build strategies to address health equity, lack of detail in some public health data does not allow for stratification to identify populations and upstream root cause indicators in the community that could flag as cause for poor health outcomes. Additionally, qualitative survey responses and focus group feedback may introduce subjective responses and/or literacy limitations. While many methods were used to connect community members with the community survey, most survey respondents from the St. Luke's Des Peres Hospital CHNA community were highly educated, middle to older-aged, white women.



# Data Assessment

Data for the St. Luke's Des Peres Hospital 2025 CHNA was collected and analyzed in aggregate for the St. Luke's Des Peres Hospital CHNA geography and was also examined at the zip code level of the 14 zip codes that comprise the St. Luke's Des Peres Hospital CHNA geography to allow for more precise identification of issues for actionable insights to influence health outcomes.

## Demographics

Compared to its St. Louis County benchmark, the St. Luke's Des Peres Hospital CHNA population has grown more rapidly, includes a slightly higher proportion of older adults, and is much less racially diverse.

The St. Luke's Des Peres Hospital CHNA population increased between 2010 and 2020 by 2.5% compared to 0.52% growth in St. Louis County during the same period. The population change was greatest in Sunset Hills (63127) at 14.23% and was also well above benchmark in Des Peres (63131) at 8.8%, and Kirkwood (63122) at 7.3%.

Population by age group data shows the St. Luke's Des Peres Hospital CHNA population to be slightly older than the St. Louis County total population benchmark.

	SLDPH CHNA		STL County		Missouri	
	2022 Pop.	% of Total	2022 Pop.	% of Total	2022 Pop.	% of Total
Age 0-17	71,608	16.47%	155,684	15.68%	991,259	16.05%
Age 18-44	135,601	31.20%	332,404	33.49%	2,148,707	34.80%
Age 45-64	136,423	31.38%	309,381	31.17%	1,899,974	30.77%
Age 65+	91,046	20.95%	195,222	19.67%	1,134,771	18.38%
Total	434,678	100.00%	992,691	100.00%	6,174,711	100.00%

### 2022 Population, Hospital Industry Data Institute (HIDI)

*\*Orange shading indicates greater than 5% variance from benchmark.*

The St. Luke's Des Peres Hospital CHNA population is much less racially diverse than its St. Louis County benchmark, with the white population comprising nearly 88% of the total population compared to 63% in St. Louis County. The greatest proportion of the white St. Luke's Des Peres Hospital CHNA population lives in the southeastern portion of the region with proportionate rates per zip code ranging from 93-96% white.

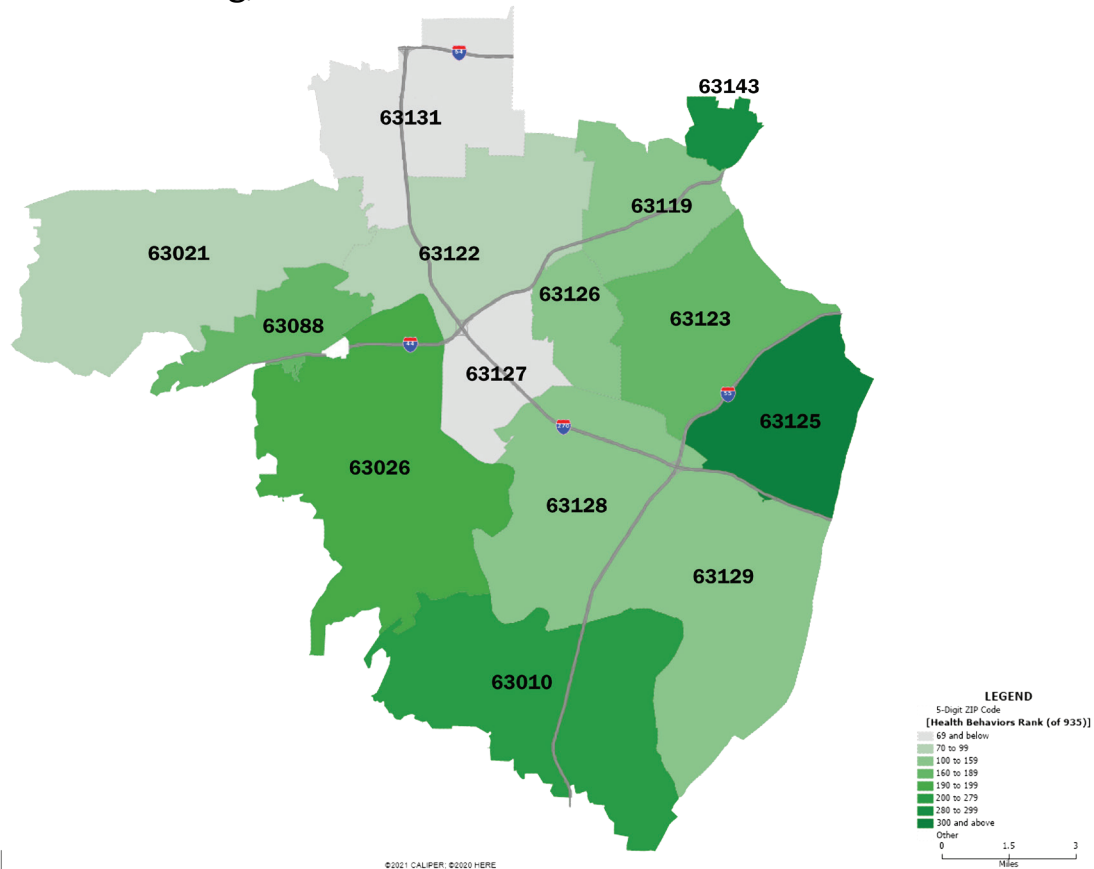
## Health Behaviors

Unhealthy behaviors and poor lifestyle choices will significantly impact an individual's overall health and are associated with an increased risk of developing some chronic diseases.

In aggregate, the health behaviors that influence health of the St. Luke's Des Peres Hospital CHNA population rank better than benchmark. However, as individual zip codes, Mehlville (63125) and Arnold (63010) rank lower than benchmark for nearly all health indicators, and while Maplewood (63143) ranks better than benchmark for most health behaviors, it is the zip code with the highest rate of substance abuse in the CHNA area.

### Health Behaviors Rank, by Zip Code

[www.exploreMOhealth.org](http://www.exploreMOhealth.org), 2022



## Health Conditions

Health conditions measured by rate of chronic disease can help to identify communities that are more likely to have adverse outcomes and can also inform how well programs and policies are managing chronic disease.

Chronic disease trends remain consistent with prior year assessments for the St. Luke's Des Peres Hospital CHNA geography, with all cumulative chronic disease rates and most individual disease rates (except cancer) being less than 5% variance or better than benchmark. Hypertension, arthritis and joint disease, and cancer continue to lead as most prevalent chronic diseases. Other than cancer, atherosclerosis and liver disease have the greatest variances of disease rate prevalence compared to benchmark in the cumulative St. Luke's Des Peres Hospital CHNA geography. Both chronic diseases are associated with some of the higher prevalence health behaviors of the less healthy zip codes in the CHNA area.

## Health Outcomes

Health outcomes can measure effectiveness as to how well the population's health and chronic disease are being managed and lend insight to patient quality of life.

In the assessment, health outcomes for the St. Luke's Des Peres Hospital CHNA geography are measured by mortality statistics. Heart disease and cancer remain the top causes of death, and while data reveals COVID-19 to be an additional driver, consideration should be granted to the timing of data assessed (2020). Suicide, chronic lower respiratory disease, and pneumonitis represent the highest variances of cause of death in the St. Luke's Des Peres Hospital CHNA geography over benchmark.

In the St. Luke's Des Peres Hospital CHNA geography, the mortality measure of Years of Potential Life Lost (YPLL) at 41.0 in Mehlville is highest among all zip codes and double the St. Luke's Des Peres Hospital cumulative YPLL of 20.6.

## Access to Care

Access to care reflects the ability to obtain healthcare services needed to meet the health needs of the community. The ability to access care that is available and affordable can directly impact chronic disease, health outcomes, and quality of life.

Utilization of health services in the St. Luke's Des Peres Hospital CHNA geography is better than benchmark, with lower inpatient, emergency, and preventable visits.

The "hospital utilization" statistic, sourced from ExploreMOHealth, is defined as inpatient, outpatient, and ED visits combined. This statistic reveals slightly lower than benchmark utilization for the CHNA geography. Because data shows that inpatient and emergency utilization are low, the lower "hospital utilization" statistic suggests lower than benchmark utilization for outpatient visits as well. Outpatient care often includes preventive health and maintenance, therefore lower outpatient utilization may indicate lower than benchmark management of health conditions through outpatient doctor visits and recommended screenings.

## Social and Economic Needs

According to the World Health Organization, social determinants of health (SDOH) are non-medical factors that influence health outcomes. SDOH are critical drivers of health disparities and patient outcomes. Unmet social needs such as housing instability, food insecurity, and transportation barriers impact a patient's ability to access preventive services and medical treatment to achieve optimal health.

With the exception of "community walkability," all evaluated social and economic needs of the aggregate St. Luke's Des Peres Hospital CHNA geography reflect overall better rates than benchmark. At the zip code level of the CHNA geography, Mehlville (63125), Arnold (63010), Valley Park (63088), and Maplewood (63143) consistently rank lowest for social and economic factors among all zip codes.





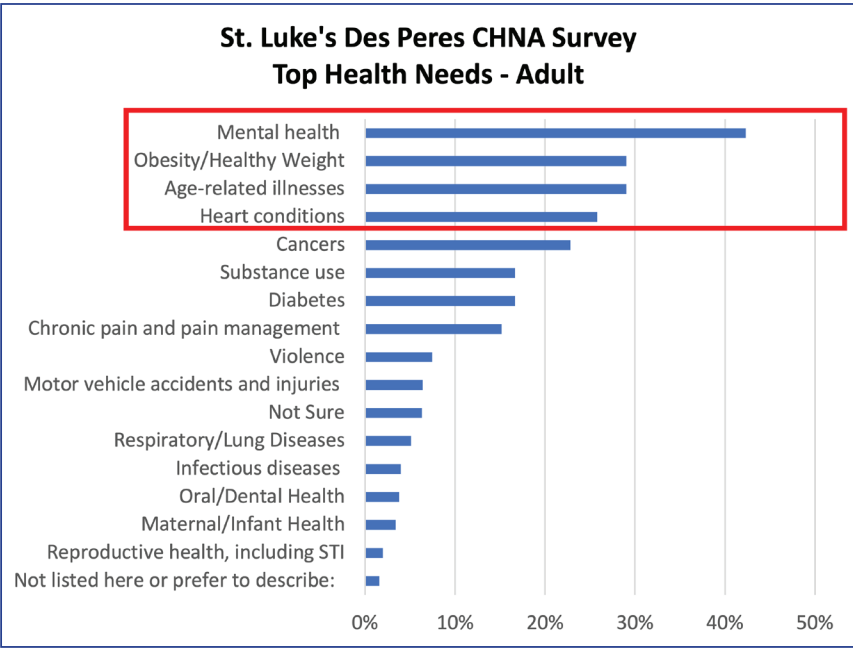
# Community Survey



St. Luke's continues to partner with St. Louis area regional health systems to collaboratively assess and potentially address community health needs. Because all local health systems serve the same populations, partner with the same community organizations, and ultimately address the most prevalent health and social needs in the area, it is important to come together in the process, not only in terms of efficiency, but also in terms of collaborative impact for the benefit of our community.

Between March and June 2024, the St. Louis Regional Hospital CHNA Collaborative disseminated and promoted a community survey with the goal of reaching a variety of community members and partners. A total of 6,458 surveys were collected throughout the St. Louis metropolitan area, of which 1,061 were from the St. Luke's Des Peres Hospital CHNA. Respondents of the survey were primarily highly educated, middle-to-older aged, white women.

Survey data from the St. Luke's Des Peres Hospital CHNA geography revealed the top health needs for adults are mental health, obesity, age-related illnesses, and heart conditions. Top health needs for children were identified as mental health, obesity, intellectual and developmental disabilities, and substance use.



## Stakeholder Conversations

After summarizing the community survey results, the St. Louis Regional Hospital CHNA Collaborative hosted six regional focus groups for stakeholder conversations with community partners who represented a wide variety of community organizations with the goal of presenting survey outcomes and gathering additional detail to further expand on the data and to identify how we might collaboratively build on the results to address the most pressing needs.

Mental health quickly emerged as the main topic of focus in the South St. Louis County stakeholder conversations. Access to mental health services, especially among low-income and uninsured populations is a growing need.

While mental health was identified as the most pressing need in South St. Louis County, substance abuse and food insecurity were also highlighted. Substance abuse is often a co-occurrence and driver of mental health issues, but care models to address both issues in conjunction are perceived as lacking. More comprehensive support systems for individuals with addiction are needed.

Access to nutritious food for vulnerable populations is limited in South St. Louis County. While food pantries provide essential services, the food is often of lower nutritional value that can contribute to long-term health issues. Education about healthy eating and nutrition are essential complements to food security.

Social drivers of health outcomes highlight obstacles to accessing healthcare in South St. Louis County and prominent barriers include:

- **Public transportation that has limited access points, is unreliable, costly, and inaccessible for those with mobility challenges**
- **Education about health and healthcare resources**
- **Access to culturally competent care for those who face language barriers or stigmas**

A holistic approach to improve the health and social needs of the St. Luke's Des Peres Hospital CHNA geography through regional partnership between healthcare providers and community partners will encourage sustained and realized improvement. Coordinating the services and resources of service providers would help community members more easily access the help that they need and ensure seamless referrals and support, while ultimately making substantial progress in improving the health outcomes for all residents.



# Health Needs Prioritization

The St. Luke's CHNA Steering Committee reviewed results of the data analysis and the significant health and social needs that emerged, prioritizing each considering St. Luke's organizational strengths and priorities, internal and partner resources available, and St. Luke's ability to impact and support the issue. After reviewing and discussing the priority rankings and available resources, the St. Luke's CHNA Steering Committee recommended focusing FY2026-FY2028 community health improvement strategies and resources to impact the following priority health needs:

- **Older Adults and Age-Related Illnesses**
- **Weight Management and Heart Health**
- **Cancer**

As the CHNA process continues forward into development of the Community Health Implementation Plan (CHIP), identification of the root causes of each of these priority health needs will inform which community health strategies and collaborations are most meaningful and impactful.

*For a list of community resources potentially available to address each significant health need, refer to Appendix D.*

## Older Adults & Age-Related Illnesses

Population by age group data shows the St. Luke's Des Peres Hospital CHNA population to be slightly older than the St. Louis County total population benchmark.

Demographic assessment of the St. Luke's Des Peres Hospital CHNA community by volume of age groups identifies the 45-64 age group to be the largest age group of the St. Luke's Des Peres Hospital CHNA compared to St. Louis County, where the 18-44 age group is the largest. In addition, the proportion of the age 65+ age group in St. Luke's Des Peres Hospital geography (21%) exceeds the proportion of age group 65+ in St. Louis County (20%). 25% of the Des Peres (63131) population, where St. Luke's Des Peres Hospital is located, is age 65+.

***30% of the community survey respondents included age-related illnesses as a top-rated health concern.***

The population of older adults in the St. Luke's Des Peres Hospital community allows for many opportunities to address the needs of this demographic, including but not limited to core preventive services, health literacy, physical activity, social isolation, and chronic disease management. Impacting the health and social needs of the older demographic has the potential to make a significant impact on health, well-being, and quality of life.

## Weight Management & Heart Health

Overweight and obesity-related health conditions including hypertension, heart disease, and diabetes represent some of the leading chronic conditions in the

St. Luke's Des Peres Hospital CHNA geography, and heart disease is the leading underlying cause of death. Aggregate responses from the CHNA community survey include obesity/healthy weight (30% of respondents) and heart conditions (26% of respondents) as top health concerns of the community.

Obesity and being overweight are linked to many serious health conditions, including heart disease. Initiatives intended to prevent obesity and maintain a healthy weight such as promotion of healthy eating and increasing physical activity will also reduce risk factors for heart disease, thereby also positively impacting rates of heart disease and related conditions.

## Cancer

Cancer is the third most prevalent chronic disease, but the second leading cause of death in the St. Luke's Des Peres Hospital CHNA community. Cancer is the only chronic disease in the St. Luke's Des Peres Hospital CHNA community to exceed benchmark, and prevalence rates of cancer exceed the St. Louis County benchmarks of most tumor types. The St. Luke's Des Peres Hospital CHNA community also reflects higher rates of cancer screenings (mammography, colorectal) compared to St. Louis County benchmarks.

Minimizing barriers to access or social determinants of health and promotion of screenings and risk factor reduction are effective strategies to connect patients to treatment and reduce cancer deaths. Cancer care is a service line strength at St. Luke's in Chesterfield, MO and we plan to continue to improve the health of our community through prevention and early detection.



## Additional Community Health Needs

The St. Luke's Des Peres Hospital CHNA process identified additional significant health needs, however limits require that focused CHNA-related initiatives align with St. Luke's Des Peres Hospital's ability to make an impact. The following community needs were identified in the CHNA process, however, were not selected as focus areas in St. Luke's Des Peres Hospital 2025 CHNA.

### **Mental Health, Suicide, & Substance Abuse:**

While community survey respondents and stakeholder partners ranked mental health as an under-resourced and elevated concern for our local community, St. Luke's will need to rely on partners to provide mental health and substance abuse services to effectively address the prevalent needs. St. Luke's will continue to partner with community-based organizations and mental health providers better suited to address the mental and behavioral health needs of our community for the most efficient and appropriate transfer of patients in need.

### **Geographic Vulnerabilities: Mehlville, Arnold, Maplewood:**

As an existing service provider, St. Luke's is committed to continuing to offer health care services to residents of Mehlville, Arnold, and Maplewood. These geographic areas with prevalent vulnerabilities will be considered for targeted interventions while planning for and implementing initiatives for the selected priority needs.

### **Respiratory Diseases:**

St. Luke's offers a wide range of pulmonary services to diagnose and treat patients with lung disease and will continue to focus on access and promotion of these services in the communities we serve.

### **Food Insecurity:**

St. Luke's will partner with community-based organizations, including food pantries, whose primary goals are to meet the needs of vulnerable populations

with limited access to healthy foods. Though existing partnerships, St. Luke's provides and will continue to offer health screenings and health education to food pantry patrons.

### **Liver Disease:**

St. Luke's offers gastroenterology and hepatology services to prevent, diagnose, and treat conditions to help patients find relief from digestive complications. St. Luke's will continue to focus on access and promotion of these services in the communities we serve.

### **Community Walkability:**

Community walkability is an area-wide issue that would require changes in infrastructure and policy. At this time, St. Luke's lacks resources to engage at the level of collaboration that would result in changes to local infrastructure to make meaningful improvements. Community walkability was not selected as a priority need for CHNA focused initiatives, however, development of initiatives to impact weight management will likely include opportunities for increased physical activity.

### **Public Transportation:**

St. Luke's lacks the expertise and competencies to effectively address improvements to public transportation in the community. However, consideration will be granted during development of community health initiatives to understand whether the transportation needs of related populations are substantial enough to evaluate options to improve access.



# Update to 2022 CHNA

In 2022, the St. Luke's CHNA Executive Team committed to focus community health improvement strategies and resources to impact three priority community health needs between FY2023 and FY2025. The three priority health needs included: **Obesity/Weight Management**, **Access in Priority Areas**, and **Smoking/Respiratory**. Following the approval of St. Luke's Des Peres Hospital 2022 CHNA, initiatives were developed, assessed, and implemented as appropriate for each of the priority needs. The following initiatives were implemented to address each priority health need between July 2022 and June 2025.

## Weight Management

To reduce the prevalence of at-risk, overweight, and obese individuals in the community, the Weight Management Action Team developed strategies to partner with community organizations to increase availability of healthy food and exercise options and improve knowledge and awareness about healthy habits, resources, and access. Since the approval of the 2022 CHNA, St. Luke's has implemented the following initiatives to work toward achieving these outcomes:

- Established monthly community walking group at St. Luke's walking trail to promote exercise and health education.
- Implemented quarterly "Let's Cook!" food demonstrations on each hospital campus and in the community, in collaboration with community partners, to encourage and educate about healthy food preparation and eating.
- Partnered with Schnucks Markets to offer Dietitian-guided supermarket tours to promote healthy shopping and food choices.

## Access in Priority Areas

To improve access to health services and resources in each priority area, the Priority Areas Action Team developed strategies to improve knowledge of health resources and navigation to access points of care, improve community partnerships for continuity and coordinated patient care, increase appropriate services extended from Des Peres campus to providers in each priority area, increase insurance enrollment, and increase employment. Since the approval of the 2022 CHNA, St. Luke's has implemented the following initiatives to work toward achieving these outcomes:

- St. Luke's Medical Residents partnered with Peace Pantry in Cedar Hill, MO and Circle of Concern food pantry in Valley Park, MO to provide health education, coaching, and health screenings.
- Established new St. Luke's Des Peres Hospital Care Management connections with Healing Grace Clinic and Compass Health.
- Developed and distributed career pathways document identifying entry-level job options and basic requirements to high school career counselors and students engaged with multiple career exploration programs through St. Luke's.

## Smoking/Respiratory

To reduce smoking diagnoses per 1,000 in each of the St. Luke's Des Peres Hospital community's zip codes that exceed the St. Louis County benchmark rate of 226.76 per 1,000 population, the Smoking/Respiratory Action Team developed strategies to increase the number of referrals to community partner cessation resources, identify and refer eligible patients to low-dose CT lung screenings, and increase outreach in the community for improved access to education and connection to resources. Since the approval of the 2022 CHNA, St. Luke's has implemented the following initiatives to work toward achieving these outcomes:

- Trained four St. Luke's staff as American Lung Association "Freedom from Smoking" facilitators and offered cessation classes in focused zip codes.
- Added Low-Dose CT lung screening eligibility and information to discharge notes of any patient with a smoking history.
- Developed and distributed Low-Dose CT lung screening eligibility cards for eligible community and patient interactions.

*No questions or comments about the St. Luke's 2022 CHNA have been received.*

# Appendix

## **Appendix A**

Secondary Data

## **Appendix B**

Community Survey Questions

Community Survey Responses

## **Appendix C**

South St. Louis County Stakeholder Conversation Summary

Participating Stakeholder Organizations

## **Appendix D**

Community Resources



# Appendix A: Secondary Data

## St. Luke's Des Peres Hospital 2025 Community Health Needs Assessment (CHNA) - Secondary Data

Orange shading indicates data with greater than 5% unfavorable variance from St. Louis County benchmark  
Demographic data variance shading indicates greater than 5% variance from St. Louis County benchmark

DEMOGRAPHICS - 2022 Population																	
Hospital Industry Data Institute (HIDI), <sup>iii</sup> American Community Survey (ACS), 2018-2022, <sup>iii</sup> Decennial Census																	
63010	63021	63026	63088	63119	63122	63123	63125	63126	63127	63128	63129	63131	63143	SLDPH	STL Co.	MO	
Arnold	Ballwin	Fenton	Valley Park	Webster Groves	Kirkwood	Afton	Mehlville	Crestwood	Sunset Hills	Sunset Hills	Oakville	Des Peres	Maplewood				
Age 0-17 <sup>i</sup>																	
5,597	9,366	7,535	1,450	9,623	6,615	7,020	4,781	2,171	688	3,455	7,680	2,367	3,260	71,608	155,684	991,259	
15.60%	16.39%	16.67%	16.35%	29.22%	16.79%	14.52%	15.24%	14.88%	13.16%	11.86%	14.20%	14.56%	20.06%	16.47%	15.68%	16.05%	
Age 18-44 <sup>i</sup>																	
12,114	18,448	14,495	3,329	7,782	11,650	16,263	10,347	4,445	1,311	8,476	17,821	4,560	4,560	135,601	332,404	2,148,707	
33.76%	32.29%	32.08%	37.54%	23.63%	29.56%	33.64%	32.98%	30.47%	25.09%	29.10%	32.95%	28.06%	28.06%	31.20%	33.49%	34.80%	
Age 45-64 <sup>i</sup>																	
11,962	19,354	15,527	2,693	8,124	12,741	14,980	9,639	4,494	1,499	8,601	17,324	5,189	4,296	136,423	309,381	1,899,974	
33.33%	33.88%	34.36%	30.36%	24.67%	32.33%	30.99%	30.72%	30.80%	28.68%	29.52%	32.03%	31.93%	26.43%	31.38%	31.17%	30.77%	
Age 65+ <sup>i</sup>																	
6,214	9,963	7,631	1,397	7,404	8,403	10,079	6,609	3,480	1,728	8,600	11,266	4,136	4,136	91,046	195,222	1,134,771	
17.32%	17.44%	16.89%	15.75%	22.48%	21.32%	20.85%	21.06%	23.85%	33.07%	29.52%	20.83%	25.45%	25.45%	20.95%	19.67%	18.38%	
35,887	57,131	45,188	8,869	32,933	39,409	48,342	31,376	14,590	5,226	29,132	54,091	16,252	16,252	434,678	992,691	6,174,711	
Birth Rate per 1,000 Women Ages 15-50 <sup>ii</sup>																	
42.12	53.27	29.48	60.52	70.77	43.96	42.71	72.86	24.30	29.94	49.22	49.52	48.65	4.00	47.47	50.45	52.75	
% Change in Population, 2010-2020 <sup>iii</sup>																	
-1.16%	0.74%	1.19%	-0.58%	2.43%	7.34%	3.41%	1.91%	4.89%	14.23%	1.27%	1.35%	8.78%	0.08%	2.52%	0.52%	2.77%	
DEMOGRAPHICS - Race																	
U.S. Census Bureau, 2017-2021 American Community Survey 5-Year Estimates																	
White																	
93.17%	81.86%	89.92%	85.93%	82.76%	87.38%	87.81%	87.95%	92.97%	95.78%	94.33%	92.82%	89.76%	74.51%	87.66%	62.80%	77.60%	
0.58%	2.25%	1.68%	7.14%	7.53%	4.52%	3.16%	4.90%	1.59%	1.52%	1.13%	2.03%	1.35%	13.11%	3.67%	23.60%	10.70%	
Black or African American																	
0.07%	0.24%	0.07%	0.00%	0.07%	0.02%	0.16%	0.30%	0.00%	0.00%	0.10%	0.03%	0.15%	0.00%	0.10%	0.10%	0.30%	
American Indian and Alaska Native																	
1.09%	8.33%	1.09%	3.37%	2.20%	1.92%	3.55%	2.53%	1.25%	1.48%	1.44%	1.53%	5.55%	2.31%	2.88%	5.00%	2.20%	
Asian																	
0.00%	0.02%	0.03%	0.00%	0.00%	0.01%	0.00%	0.01%	0.00%	0.00%	0.05%	0.00%	0.00%	0.00%	0.01%	0.00%	0.10%	
Native Hawaiian and Other Pacific Islander																	
4.92%	6.66%	6.88%	3.44%	6.82%	5.56%	4.35%	3.35%	2.71%	1.12%	2.81%	3.34%	2.48%	8.72%	5.08%	7.30%	7.30%	
Two or more races																	
0.18%	0.65%	0.34%	0.12%	0.62%	0.59%	0.97%	0.96%	1.48%	0.10%	0.14%	0.25%	0.71%	1.35%	0.60%	1.30%	1.80%	
Other																	
DEMOGRAPHICS - Other Variables																	
www.exploreMOhealth.org, 2022, <sup>iv</sup> American Community Survey (ACS), 2018-2022																	
% of Total Households w. Children <sup>i</sup>																	
31.50%	33.52%	35.60%	20.50%	26.89%	31.68%	24.28%	28.27%	31.18%	26.17%	22.82%	26.44%	36.51%	23.36%	28.57%	28.60%	28.85%	
% Foreign Born of Total Population <sup>i</sup>																	
5.04%	8.87%	2.78%	5.82%	4.11%	3.76%	10.58%	13.81%	4.25%	2.68%	4.63%	5.99%	6.96%	4.40%	6.86%	7.61%	4.18%	
% Limited English (age 5+) <sup>i</sup>																	
3.00%	3.00%	1.00%	2.00%	0.79%	1.00%	7.00%	8.00%	2.00%	1.00%	2.00%	2.00%	1.00%	1.74%	3.11%	2.95%	2.00%	
% Non-English Speakers (age 5+) <sup>i</sup>																	
1.43%	1.21%	0.34%	1.44%	4.35%	0.41%	3.03%	4.89%	0.55%	0.12%	0.80%	0.90%	0.79%	3.95%	NA	1.31%	1.03%	
% Pop Disability <sup>i</sup>																	
13.28%	8.44%	12.57%	8.82%	9.27%	7.38%	13.24%	15.71%	9.85%	11.60%	12.28%	10.93%	6.70%	8.73%	11.00%	11.63%	14.36%	
% Veterans (Age 18+) <sup>i</sup>																	
7.75%	5.65%	6.81%	6.44%	4.97%	6.09%	7.62%	8.07%	7.73%	6.75%	8.39%	7.03%	5.07%	5.43%	6.53%	6.64%	7.97%	
% Seniors Living Alone (Age 65+, excluding group home) <sup>ii</sup>																	
26.62%	27.49%	22.96%	46.93%	36.75%	32.19%	35.01%	29.37%	23.63%	29.52%	27.38%	24.20%	15.39%	52.56%	29.05%	28.63%	28.17%	

# Appendix A: Secondary Data

## St. Luke's Des Peres Hospital 2025 Community Health Needs Assessment (CHNA) - Secondary Data

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	63010	63021	63026	63088	63119	63122	63123	63125	63126	63127	63128	63129	63131	63143	SLDPH	STL Co.	MO
	Arnold	Baltwin	Fenton	Valley Park	Webster Groves	Kirkwood	Afton	Mehlville	Crestwood	Sunset Hills	Sunset Hills	Oakville	Des Peres	Maplewood			
HEALTH BEHAVIORS																	
<sup>i</sup> www.exploreMOhealth.org, 2022. <sup>ii</sup> PLACES, Behavioral Risk Factor Surveillance System (BRFSS), 2022																	
Health Behaviors Rank (of 935) <sup>i</sup>	222	75	199	178	110	78	167	375	124	50	133	126	49	285			
Obesity Diagnoses per 1,000 <sup>i</sup>	82.37	49.91	68.43	62.97	42.50	40.92	68.05	81.95	58.65	46.81	59.71	65.46	28.32	64.57	54.00	74.91	98.47
% No Exercise <sup>ii</sup>	25.10%	16.90%	22.40%	21.30%	17.00%	16.70%	22.30%	24.90%	18.80%	17.10%	20.60%	20.80%	15.80%	19.10%	20.20%	23.30%	24.80%
Opioid Use Diagnoses per 1,000 <sup>i</sup>	13.10	7.61	11.58	10.49	9.10	7.88	10.70	18.54	8.59	7.23	9.51	9.11	6.90	14.57	9.17	16.17	24.26
STI Diagnoses per 1,000 <sup>i</sup>	12.03	7.84	11.61	11.47	8.07	7.77	12.72	18.44	9.76	7.93	9.69	10.99	6.70	12.81	9.64	15.81	15.90
Smoking Diagnoses per 1,000 <sup>i</sup>	237.57	118.12	221.49	173.38	125.14	119.44	176.88	247.03	146.05	164.03	159.52	157.06	90.93	192.69	152.62	213.71	294.92
Substance Use Disorder Diagnoses per 1,000 <sup>i</sup>	2.13	1.25	1.60	1.91	1.25	0.95	1.62	2.95	1.54	0.63	1.11	1.14	0.76	3.06	1.35	1.74	1.43
Teen Pregnancy per 1,000 <sup>i</sup>	1.79	0.62	2.36	2.46	0.55	0.43	1.54	3.58	1.73	0.00	1.39	1.41	0.11	2.24	1.28	3.45	5.30
% Visit Doctor Routine Checkup <sup>ii</sup>	76.20%	78.20%	76.90%	76.40%	78.80%	79.80%	77.20%	77.10%	78.40%	82.40%	80.30%	78.20%	80.70%	75.00%	78.11%	76.80%	74.81%
% Visit Dentist <sup>ii</sup>	62.00%	72.70%	65.30%	64.80%	73.10%	74.40%	65.00%	61.30%	70.50%	76.30%	70.20%	67.90%	76.40%	65.00%	66.57%	62.20%	59.73%
% Sleep less than 7 Hours <sup>ii</sup>	36.10%	29.00%	33.20%	31.50%	28.60%	27.90%	31.50%	32.80%	29.50%	25.00%	28.80%	30.30%	26.70%	32.70%	30.58%	35.00%	37.54%
% Cholesterol Screening <sup>ii</sup>	82.60%	85.80%	83.50%	81.70%	86.70%	88.00%	83.60%	81.90%	87.00%	89.10%	87.70%	85.30%	90.40%	81.00%	85.20%	83.30%	81.02%
% Colorectal Cancer Screening <sup>ii</sup>	66.40%	71.10%	67.00%	67.80%	72.40%	72.70%	68.90%	65.90%	71.40%	73.40%	72.90%	71.20%	73.10%	68.50%	70.05%	60.80%	58.44%
% Mammography Use <sup>ii</sup>	75.00%	79.20%	76.80%	77.90%	79.90%	79.70%	77.20%	74.40%	78.10%	80.00%	78.40%	77.80%	80.90%	80.30%	77.94%	76.80%	74.20%
% Pap Smear Use <sup>ii</sup>	82.20%	85.20%	83.50%	82.50%	86.40%	87.10%	82.50%	81.10%	85.20%	85.40%	84.40%	84.30%	87.30%	83.00%	84.26%	84.40%	82.03%
% Seniors up-to-date Core Preventative Services <sup>ii</sup>	46.10%	47.70%	46.00%	41.90%	44.80%	48.10%	43.40%	40.80%	47.10%	44.70%	46.00%	46.60%	51.00%	44.90%	45.84%	45.00%	40.61%

# Appendix A: Secondary Data

## St. Luke's Des Peres Hospital 2025 Community Health Needs Assessment (CHNA) - Secondary Data

Orange shading indicates data with greater than 5% unfavorable variance from St. Louis County benchmark

Demographic data variance shading indicates greater than 5% variance from St. Louis County benchmark

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	Arnold	Ballwin	Fenton	Valley Park	Webster Groves	Kirkwood	Afton	Mehlville	Crestwood	Sunset Hills	Sunset Hills	Oakville	Des Peres	Maplewood			
HEALTH CONDITIONS																	
/PLACES, 2022, <sup>ii</sup> www.exploreMOhealth.org, 2022																	
% Poor Self-Reported Mental Health <sup>i</sup>	17.40%	13.20%	16.30%	16.50%	13.50%	12.50%	15.90%	17.40%	14.20%	10.60%	13.70%	15.10%	11.40%	16.80%	14.78%	17.10%	18.55%
% Poor Self-Reported Physical Health <sup>i</sup>	13.70%	10.40%	13.10%	12.70%	10.60%	10.70%	13.30%	15.10%	11.70%	10.60%	12.90%	12.90%	10.10%	11.30%	12.25%	13.10%	13.70%
Chronic Diseases per 1,000 <sup>ii</sup>	1167.16	959.50	1026.14	1037.84	897.42	948.55	1062.11	1203.86	1050.49	1351.41	1215.42	1105.65	927.33	829.72	1055.90	1196	1837
Heart Disease per 1,000 <sup>ii</sup>	119.62	78.55	93.00	98.94	81.89	81.24	100.90	120.78	90.16	149.76	124.99	105.89	74.08	67.59	99.10	102.19	175.62
Hypertension per 1,000 <sup>ii</sup>	256.12	209.69	230.84	231.00	190.54	195.71	237.96	269.36	226.42	315.00	262.89	242.99	185.62	190.35	231.75	281.07	434.01
Atherosclerosis Disease per 1,000 <sup>ii</sup>	82.21	58.84	67.85	69.02	56.23	56.88	69.16	81.26	63.79	106.06	88.72	75.79	55.74	45.00	69.75	67.85	129.75
Stroke per 1,000 <sup>ii</sup>	5.94	6.05	5.10	4.88	5.98	5.99	6.11	6.14	8.22	9.64	7.65	6.43	6.23	4.46	6.35	7.54	13.67
Asthma per 1,000 <sup>ii</sup>	40.62	31.40	38.37	39.17	32.17	32.19	37.22	45.00	35.59	29.94	31.21	33.03	26.91	44.21	35.50	65.31	51.75
COPD per 1,000 <sup>ii</sup>	65.04	23.99	46.33	41.86	28.18	27.14	43.08	65.81	33.55	45.48	42.45	40.42	18.36	42.12	40.27	45.50	114.30
Arthritis/Joint Disease per 1,000 <sup>ii</sup>	186.94	194.62	178.37	174.31	177.25	197.46	175.35	177.71	193.01	238.44	211.07	197.09	220.91	149.10	190.83	211.25	318.44
Diabetes per 1,000 <sup>ii</sup>	135.71	99.32	113.13	112.05	76.89	77.75	119.23	145.61	104.24	114.05	112.48	106.91	68.65	100.39	106.17	141.16	244.42
Kidney Disease per 1,000 <sup>ii</sup>	73.34	54.86	56.71	65.07	59.64	57.67	70.38	77.12	71.50	95.46	82.31	67.56	51.43	45.25	66.31	80.21	86.96
Low Birthweight per 1,000 <sup>ii</sup>	45.56	45.07	47.28	83.06	33.22	35.60	55.94	41.18	57.32	35.52	29.70	53.57	27.50	68.11	47.04	64	58
Mental Health Diagnosed per 1,000 <sup>ii</sup>	10.83	6.28	10.50	10.34	6.88	5.04	8.84	12.55	6.99	5.39	8.21	6.96	3.91	11.47	8.16	10.52	8.61
Liver Disease per 1,000 <sup>ii</sup>	32.54	26.80	29.01	30.66	22.53	23.49	32.67	35.98	28.58	27.72	32.03	29.66	24.12	27.12	28.78	27.62	37.57
Cancer per 1,000 <sup>ii</sup>	169.07	175.37	167.42	170.88	166.13	193.04	170.05	179.07	195.44	219.85	219.62	199.88	195.27	114.13	181.09	166.26	233.87
Breast Cancer per 1,000 <sup>ii</sup>	74.99	90.45	84.32	68.90	78.09	107.67	90.68	81.62	108.71	127.27	115.55	95.45	110.40	41.67	91.13	83.33	90.57
Colorectal Cancer per 1,000 <sup>ii</sup>	15.51	11.79	13.73	18.18	11.55	14.12	16.12	13.68	13.00	10.40	14.19	15.64	12.33	8.96	13.51	12.93	20.96
Female Genital Cancer per 1,000 <sup>ii</sup>	8.88	8.96	7.46	4.51	10.03	9.15	11.35	11.01	12.12	19.73	10.90	11.09	7.36	8.38	10.07	7.59	10.97
Gastrointestinal Cancer per 1,000 <sup>ii</sup>	19.52	16.04	16.11	18.06	14.88	14.74	19.17	18.10	14.91	9.64	20.56	19.09	14.69	10.54	16.15	14.94	24.95
Lung Cancer per 1,000 <sup>ii</sup>	23.27	15.38	20.96	24.23	12.80	13.47	21.10	27.02	24.13	16.81	24.41	22.52	15.14	10.54	19.41	16.32	29.61
Lymphatic Cancer per 1,000 <sup>ii</sup>	21.38	26.32	22.55	32.19	23.42	25.85	21.18	22.75	26.36	35.65	31.63	27.08	24.83	11.47	25.19	21.65	34.11
Male Genital Cancer per 1,000 <sup>ii</sup>	33.02	43.99	36.16	32.48	57.80	57.65	31.78	27.19	50.84	108.29	57.51	49.47	61.85	26.41	48.17	48.01	45.78
Nonspecified Cancer per 1,000 <sup>ii</sup>	1.53	1.11	1.41	1.17	0.98	0.52	1.03	1.43	0.72	0.82	1.68	1.03	0.91	0.29	1.04	0.87	1.78
Other Cancer per 1,000 <sup>ii</sup>	17.57	15.85	14.23	18.96	10.80	16.14	14.63	19.55	16.25	12.50	22.51	20.55	19.38	17.41	16.88	15.15	22.71
Secondary Malignancies per 1,000 <sup>ii</sup>	23.89	23.04	26.40	24.93	23.89	29.49	23.34	29.21	28.79	21.06	30.71	25.83	25.88	13.52	25.00	23.66	35.52
Skin Cancer per 1,000 <sup>ii</sup>	4.71	4.78	6.63	4.25	5.39	8.56	3.88	7.10	5.84	6.22	8.76	6.26	7.24	3.20	5.91	4.16	10.98
Urinary Cancer per 1,000 <sup>ii</sup>	8.37	7.91	8.00	6.28	6.83	8.63	8.78	9.79	10.20	7.61	9.80	12.21	8.55	7.88	8.63	7.61	12.45
Uterine/Cervical Cancer per 1,000 <sup>ii</sup>	11.56	7.78	5.01	12.24	7.85	9.58	10.19	9.35	13.37	4.63	8.73	10.57	9.32	5.70	8.99	8.08	11.42

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<b>HEALTH OUTCOMES- Mortality</b>																	
<sup>i</sup> <a href="https://www.exploreMHealth.org">www.exploreMHealth.org</a> , 2022																	
<sup>ii</sup> <a href="https://healthapps.dhss.mo.gov/MoPhims/MICAHome">Missouri Department of Health and Senior Services: Death MICA, 2020. https://healthapps.dhss.mo.gov/MoPhims/MICAHome</a>																	
Mortality Rank (of 935) <sup>i</sup>	467	120	199	215	158	84	381	557	162	97	194	276	58	341			
Premature Deaths per 1,000 <sup>i</sup>	2.47	1.12	1.50	1.44	1.32	0.89	2.02	2.70	1.26	1.08	1.47	1.73	0.72	1.80		1.36	2.23
Years of Potential Life Lost per 1,000 <sup>i</sup>	35.65	16.29	22.27	25.55	18	13.78	33.76	41.05	20.61	13.45	21.96	25.97	10.34	33		20.62	NA
Accidents (unintentional injuries) per 100,000 <sup>ii</sup>																62.11	75.96
Alzheimer's disease per 100,000 <sup>ii</sup>																61.65	62.26
Aortic aneurysm & dissection per 100,000 <sup>ii</sup>																4.37	4.13
Benign/In situ neoplasms and neoplasms of uncertain behavior per 100,000 <sup>ii</sup>																7.59	6.95
Cancer per 100,000 <sup>ii</sup>																213.03	205.30
Chronic liver disease & cirrhosis per 100,000 <sup>ii</sup>																12.42	11.18
Chronic lower respiratory diseases per 100,000 <sup>ii</sup>																48.31	37.78
COVID-19 per 100,000 <sup>ii</sup>																112.50	137.51
Diabetes per 100,000 <sup>ii</sup>																23.24	26.19
Essential hypertension per 100,000 <sup>ii</sup>																8.51	8.76
Heart disease per 100,000 <sup>ii</sup>																255.82	274.41
Homicide per 100,000 <sup>ii</sup>																3.91	19.04
Influenza and pneumonia per 100,000 <sup>ii</sup>																18.40	20.45
Kidney disease(nephritis, nephrotic syndrome and nephrosis) per 100,000 <sup>ii</sup>																28.76	28.91
Other digestive diseases per 100,000 <sup>ii</sup>																22.55	24.88
Other diseases/conditions per 100,000 <sup>ii</sup>																137.80	146.97
Other Infections-Parasites per 100,000 <sup>ii</sup>																5.75	6.95
Other major cardiovascular diseases per 100,000 <sup>ii</sup>																5.52	4.94
Other respiratory diseases per 100,000 <sup>ii</sup>																26.23	25.49
Parkinson's disease per 100,000 <sup>ii</sup>																22.09	18.94
Pneumonitis due to solids and liquids per 100,000 <sup>ii</sup>																10.58	8.46
Septicemia per 100,000 <sup>ii</sup>																12.42	14.61
Stroke (cerebrovascular diseases) per 100,000 <sup>ii</sup>																58.43	65.48
Suicide per 100,000 <sup>ii</sup>																20.01	14.41



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	Arnold	Ballwin	Fenton	Valley Park	Webster Groves	Kirkwood	Afton	Mehlville	Crestwood	Sunset Hills	Sunset Hills	Oakville	Des Peres	Maplewood			
ACCESS TO CARE																	
www.exploreMOhealth.org, 2022																	
Hospital Utilization includes hospital inpatient, emergency department, and outpatient visits																	
Clinical Care Rank (of 935)	407	96	151	213	123	107	300	547	91	411	242	165	47	98			
Inpatient Utilization per 1,000	122	89	105	119	96	90	114	134	101	125	114	107	76	106	107	120	124
Hospital Utilization per 1,000	1,907	1,792	1,843	1,649	1,553	1,755	1,675	1,745	1,807	2,000	1,867	1,799	1,838	1,395	1,759	1,854	2,729
ED Utilization per 1,000	517	250	432	322	240	236	299	419	257	313	289	267	208	334	315	432	411
Preventable ED Visits per 1,000	234	92	185	121	88	84	110	166	90	96	99	105	68	139	120	177	161
Preventable Hospitalizations per 1,000	10	6	7	10	7	6	9	12	7	11	10	8	4	9	8	10	11
SOCIAL & ECONOMIC FACTORS																	
www.exploreMOhealth.org, 2022																	
ADi: ranking of socioeconomic disadvantage, including factors for income, education, employment, and housing quality. Higher values represent more disadvantage. Source: Neighborhood Atlas, 2022																	
www.211counts.org, December 2022-December 2023																	
www.211counts.org, December 2022-December 2023																	
*SLDPH CHNA totals exclude Fenton population in per 1,000 calculation, as 211 counts data excludes zip code 63026																	
Socioeconomic Status Rank (of 935) <sup>i</sup>	221	33	80	211	34	13	208	390	51	9	47	74	3	187			
Area Deprivation Index <sup>ii</sup>	58.32	36.48	48.69	62.03	36.82	28.56	62.57	74.75	42.88	20.47	40.31	46.01	10.55	59.60	46.04	52.73	64.14
United Way 211 Requests per 1,000 <sup>iii</sup>	22.38	8.40		18.15	19.2	9.54	22.42	49.05	16.11	12.25	11.95	13.57	16.24	37.1	18.80	57.07	42.24
United Way 211 Child Care & Parenting per 1,000 <sup>iii</sup>	0.03	0.00		0.00	0.1	0.03	0.04	0.10	0.00	0.19	0.03	0.06	0.00	0.1	0.05	0.15	0.11
United Way 211 Clothing & Household per 1,000 <sup>iii</sup>	0.50	0.30		0.56	0.2	0.36	1.41	2.87	0.27	0.19	0.10	0.48	0.74	1.1	0.73	2.90	1.74
United Way 211 Disaster per 1,000 <sup>iii</sup>	0.14	0.04		0.00	0.0	0.08	1.28	1.02	0.00	0.00	0.00	0.00	0.12	0.0	0.27	0.35	0.19
United Way 211 Education per 1,000 <sup>iii</sup>	0.03	0.02		0.00	0.0	0.00	0.06	0.03	0.00	0.00	0.03	0.06	0.00	0.1	0.03	0.09	0.09
United Way 211 Employment & Income per 1,000 <sup>iii</sup>	0.53	0.23		0.90	0.5	0.25	0.48	1.15	0.21	0.00	0.31	0.54	0.00	0.7	0.45	1.07	1.54
United Way 211 Food per 1,000 <sup>iii</sup>	0.72	0.42		0.34	0.8	0.25	0.72	2.04	0.75	0.00	0.45	0.48	0.49	1.2	0.68	1.93	1.84
United Way 211 Government & Legal per 1,000 <sup>iii</sup>	0.25	0.26		0.34	0.5	0.13	0.56	1.05	0.48	0.38	0.41	0.35	0.00	0.2	0.39	1.02	1.74
United Way 211 Healthcare & COVID per 1,000 <sup>iii</sup>	0.39	0.18		1.01	0.9	0.33	0.50	1.08	0.48	0.19	0.69	0.22	0.62	0.6	0.50	0.94	1.00
United Way 211 Housing & Shelter per 1,000 <sup>iii</sup>	14.60	3.90		10.26	11.4	4.36	10.01	22.88	8.57	7.85	6.59	6.54	9.60	21.4	9.76	29.91	19.47
United Way 211 Mental Health per 1,000 <sup>iii</sup>	0.25	0.26		0.23	0.4	0.20	0.68	0.80	0.69	0.38	0.17	0.17	1.48	0.2	0.41	0.68	0.55
United Way 211 Other per 1,000 <sup>iii</sup>	0.70	0.46		0.90	0.5	0.53	0.70	1.34	0.96	0.38	0.55	0.68	1.11	1.4	0.73	1.55	1.99
United Way 211 Transportation per 1,000 <sup>iii</sup>	0.53	0.37		1.24	0.6	0.46	0.72	1.18	0.69	0.57	0.31	0.54	0.00	1.4	0.60	1.20	1.47
United Way 211 Utilities per 1,000 <sup>iii</sup>	3.71	1.98		2.37	3.3	2.56	5.25	13.51	3.02	2.10	2.30	3.46	2.09	8.7	4.21	15.27	11.28
SOCIAL & ECONOMIC FACTORS - Insurance Status																	
www.exploreMOhealth.org, 2022																	
Population Receiving Medicaid %	9.66%	4.72%	9.44%	8.13%	4.79%	3.24%	9.35%	19.98%	4.27%	1.08%	5.18%	6.66%	1.79%	12.10%	7.48%	11.25%	14.56%
Insured (less Medicaid) %	82.52%	90.41%	84.60%	82.05%	93.05%	94.70%	84.91%	71.94%	91.28%	97.59%	92.21%	89.27%	96.72%	80.62%	87.74%	82.74%	75.91%
Total Uninsured Population %	7.82%	4.87%	5.95%	9.82%	2.16%	2.06%	5.74%	8.09%	4.45%	1.33%	2.61%	4.07%	1.49%	7.28%	4.78%	6.01%	9.53%
SOCIAL & ECONOMIC FACTORS - Food Security																	
www.exploreMOhealth.org, 2022																	
Students Eligible for FRPL	32.70%	11.90%	23.30%	24.40%	8.50%	8.00%	20.70%	61.10%	9.40%	9.70%	9.00%	14.80%	8.40%	41.40%	18.30%	36.90%	44.20%
Households Receiving SNAP	6.34%	1.87%	8.43%	4.50%	2.62%	1.81%	5.78%	7.92%	2.56%	0.90%	1.52%	4.18%	0.51%	9.35%	4.27%	7.96%	10.15%

# Appendix A: Secondary Data

## St. Luke's Des Peres Hospital 2025 Community Health Needs Assessment (CHNA) - Secondary Data

Orange shading indicates data with greater than 5% unfavorable variance from St. Louis County benchmark

Demographic data variance shading indicates greater than 5% variance from St. Louis County benchmark

	63010	63021	63026	63088	63119	63122	63123	63125	63126	63127	63128	63129	63131	63143	SLDPH	STL Co.	MO
	Arnold	Baltwin	Fenton	Valley Park	Webster Groves	Kirkwood	Afton	Mehlville	Crestwood	Sunset Hills	Sunset Hills	Oakville	Des Peres	Maplewood			
SOCIAL & ECONOMIC FACTORS - Education																	
www.exploreMOhealth.org, 2022																	
Age 25+ No High School Diploma	8.26%	2.80%	8.07%	5.91%	2.62%	1.69%	7.42%	12.16%	4.06%	2.47%	3.52%	4.82%	1.66%	3.36%	5.21%	5.9%	9.0%
On-Time High School Graduation Rate	93.06%	93.04%	83.10%	88.98%	88.30%	102.59%	90.23%	82.23%	94.55%	94.57%	91.52%	88.68%	97.63%	85.60%	93.60%	88.4%	83.1%
Age 25+ with Associate's Degree or Higher	35.32%	66.74%	38.88%	57.23%	72.27%	73.51%	45.17%	30.07%	61.03%	65.50%	54.06%	48.97%	81.47%	55.32%	55.62%	53.0%	38.9%
Age 25+ with Bachelor's Degree or Higher	23.21%	59.57%	30.69%	49.19%	65.33%	68.22%	34.70%	20.95%	54.14%	59.04%	45.95%	40.03%	78.42%	49.06%	47.28%	45.3%	30.7%
SOCIAL & ECONOMIC FACTORS - Employment and Income																	
www.exploreMOhealth.org, 2022																	
American Community Survey (ACS), 2018-2022																	
Median Household Income <sup>e</sup>	\$65,420	\$98,804	\$85,145	\$56,366	\$90,256	\$114,470	\$65,693	\$54,821	\$91,730	\$104,657	\$83,919	\$80,294	\$182,000	\$52,235	NA	\$72,562	\$61,043
Per Capita Income <sup>f</sup>	\$32,422	\$49,203	\$39,443	\$41,564	\$52,796	\$61,254	\$35,950	\$28,116	\$46,195	\$65,613	\$46,718	\$43,726	\$99,002	\$36,843	\$50,586	\$45,307	\$33,770
Poverty Rate <sup>g</sup>	7.05%	4.21%	5.85%	12.70%	5.52%	3.98%	6.98%	11.08%	5.41%	2.86%	4.34%	6.21%	2.77%	11.39%	6.07%	10.4%	13.2%
Unemployment <sup>h</sup>	3.48%	3.32%	2.70%	7.04%	3.27%	2.39%	3.06%	4.48%	2.29%	3.43%	4.49%	3.57%	2.28%	1.83%	3.30%	3.91%	3.72%
SOCIAL & ECONOMIC FACTORS - Housing and Households																	
www.exploreMOhealth.org, 2022																	
Median Home Value	170,800	274,800	229,100	191,700	\$283,800	375,800	166,300	136,400	240,700	517,300	261,600	233,000	635,100	\$184,400			
Renter Occupied Housing %	21.77%	18.93%	20.60%	45.97%	27.63%	18.37%	27.29%	28.05%	13.46%	23.70%	21.83%	19.78%	7.20%	49.93%			
Single Parent Households %	7.76%	5.12%	5.55%	7.63%	3.73%	4.39%	4.36%	7.99%	5.47%	2.84%	5.41%	5.27%	2.81%	9.33%			
Cost Burdened Households (Housing Costs Exceed 30% of Income) %	20.87%	21.59%	19.20%	35.04%	24.51%	19.48%	21.71%	21.21%	15.79%	32.21%	25.23%	19.42%	22.79%	26.71%	21.78%	26.7%	25.0%
SOCIAL & ECONOMIC FACTORS - Transportation																	
www.exploreMOhealth.org, 2022																	
Agency for Toxic Substances and Disease Registry - Environmental Justice Index (values range 1-20, higher value is more walkable), 2022																	
Households with No Motor Vehicle %	3.28%	2.86%	4.05%	7.63%	10.07%	2.96%	3.87%	8.16%	1.79%	9.55%	3.81%	4.02%	0.86%	11.12%	4.57%	6.2%	6.5%
Walkability Index <sup>ii</sup>	9.11	8.26	8.13	7.03	13.45	11.51	10.47	12.13	11.63	12.01	8.71	8.20	9.10	15.79	9.96	10.77	8.28

## Appendix B: Community Survey Questions

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

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

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

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

Thinking about **yourself or other 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 **yourself or other adults** in your community.

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

## Appendix B: Community Survey Questions

Thinking about **your or other 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 **your or other children** in your community.

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

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



## Appendix B: Community Survey Questions

The following questions ask about the specific mental health and substance use needs in your community.

---

Thinking about **yourself or other 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 **yourself or other adults** in your community.

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

Thinking about **your or other 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 **your or other children** in your community.

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

## Appendix B: Community Survey Questions

**We strive to create programs and services that represent the full diversity of our community.**

**We are asking the following questions about you to ensure that we are meeting this goal. You may skip any questions that you prefer not to answer. All responses are confidential and anonymous.**

What is your age group? Choose one answer.

<input type="radio"/>	Under 18
<input type="radio"/>	18-24
<input type="radio"/>	25-34
<input type="radio"/>	35-44
<input type="radio"/>	45-54
<input type="radio"/>	55-64
<input type="radio"/>	65-74
<input type="radio"/>	75+
<input type="radio"/>	Prefer not to disclose

Which of the following best describes you? Choose all that apply.

<input type="radio"/>	Woman
<input type="radio"/>	Man
<input type="radio"/>	Genderqueer
<input type="radio"/>	Transgender/Trans woman
<input type="radio"/>	Transgender/Trans man
<input type="radio"/>	Non-binary
<input type="radio"/>	Other or prefer to self-describe:
<input type="radio"/>	Prefer not to disclose

Which of the following best describes you? Listed in alphabetical order. Choose all that apply.

<input type="radio"/>	American Indian or Alaska Native
<input type="radio"/>	Asian
<input type="radio"/>	Black or African American
<input type="radio"/>	Middle Eastern or North African
<input type="radio"/>	Native Hawaiian or Other Pacific Islander
<input type="radio"/>	White
<input type="radio"/>	Other or prefer to self-describe:
<input type="radio"/>	Prefer not to disclose

Which of the following best describes you? Choose one answer.

<input type="radio"/>	Hispanic
<input type="radio"/>	Non-Hispanic
<input type="radio"/>	Prefer not to disclose

## Appendix B: Community Survey Questions

What is the highest level of education you have completed? Choose one answer.

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

Which languages do you speak at home? Choose all that apply.

<input type="radio"/>	English
<input type="radio"/>	Albanian
<input type="radio"/>	Arabic
<input type="radio"/>	Bosnian
<input type="radio"/>	Farsi/Dari (Persian)
<input type="radio"/>	French
<input type="radio"/>	Hindi
<input type="radio"/>	Korean
<input type="radio"/>	Nepali
<input type="radio"/>	Pashto
<input type="radio"/>	Mandarin
<input type="radio"/>	Sign Language (ASL)
<input type="radio"/>	Spanish
<input type="radio"/>	Swahili
<input type="radio"/>	Vietnamese
<input type="radio"/>	Other or prefer to self-describe:
<input type="radio"/>	Prefer not to disclose

What best describes your employment status? Choose one answer.

<input type="radio"/>	Full-time
<input type="radio"/>	Disabled
<input type="radio"/>	Not Employed
<input type="radio"/>	On Active Military Duty
<input type="radio"/>	Part-time
<input type="radio"/>	Retired
<input type="radio"/>	Self Employed
<input type="radio"/>	Student Full-time
<input type="radio"/>	Student Part-time
<input type="radio"/>	Other or prefer to self-describe:
<input type="radio"/>	Prefer not to disclose

What is your total household income for the year? Choose one answer.

<input type="radio"/>	Less than \$10,000
<input type="radio"/>	\$10,000 to \$24,999
<input type="radio"/>	\$25,000 to \$49,999
<input type="radio"/>	\$50,000 to \$74,999
<input type="radio"/>	\$75,000 to \$99,999
<input type="radio"/>	\$100,000 to \$149,999
<input type="radio"/>	\$150,000 to \$199,999
<input type="radio"/>	\$200,000 or more
<input type="radio"/>	Prefer not to disclose

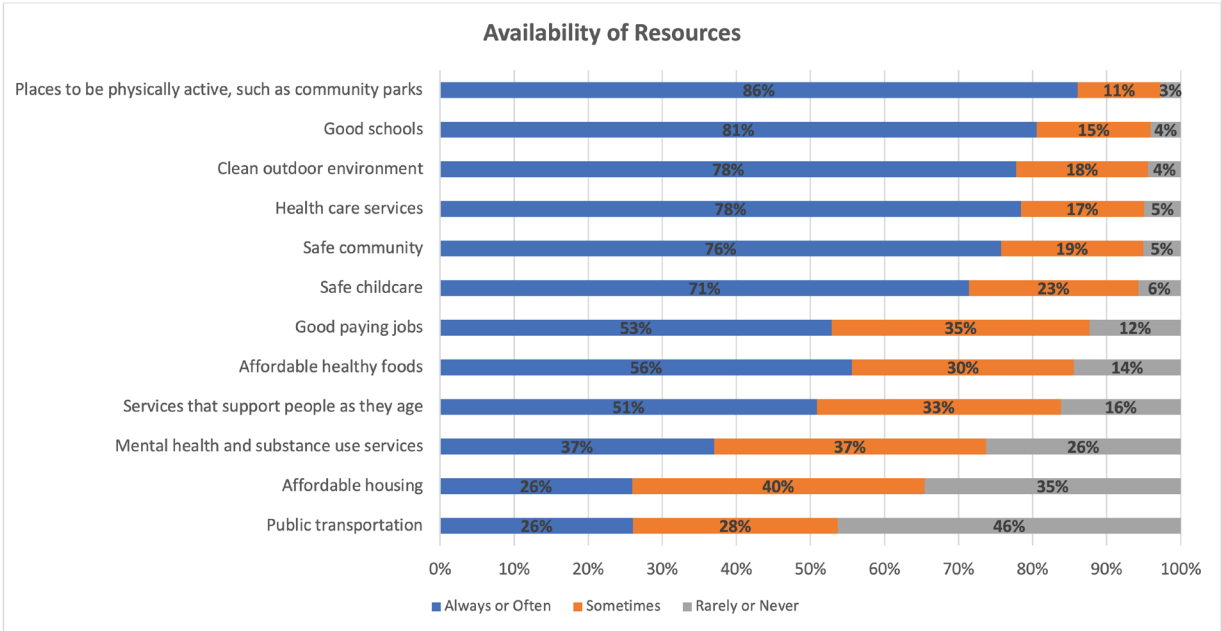
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You have answered the final question of the survey. If you need to change any of your responses, please take a moment to return to previous pages. Otherwise, click "Next page".

# Appendix B: Community Survey Responses

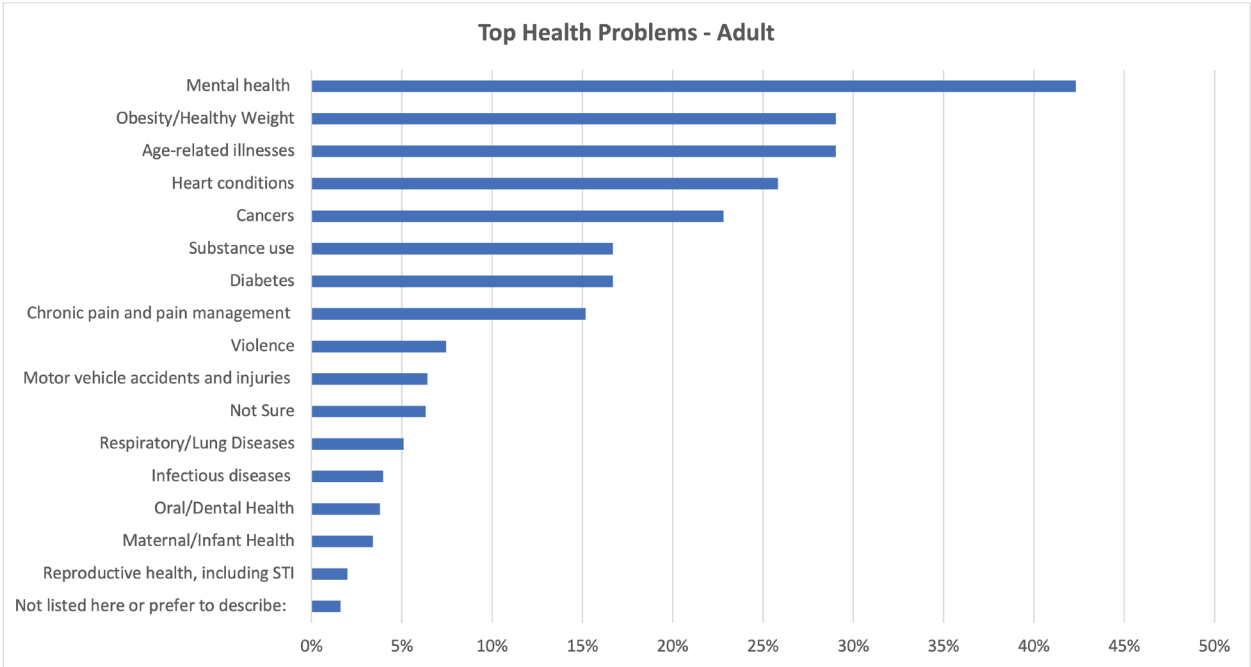
Thinking about the community where you live, how available are the following resources?

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*.



Thinking about **yourself or other 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 **yourself or other adults** in your community.

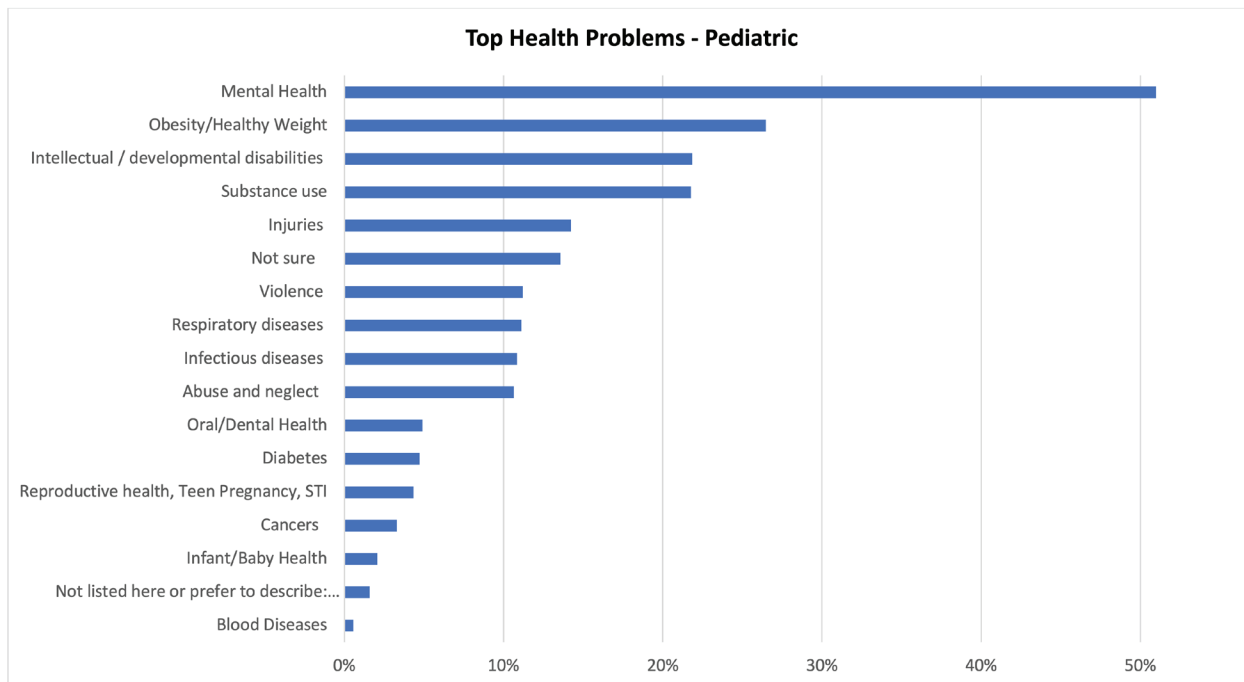




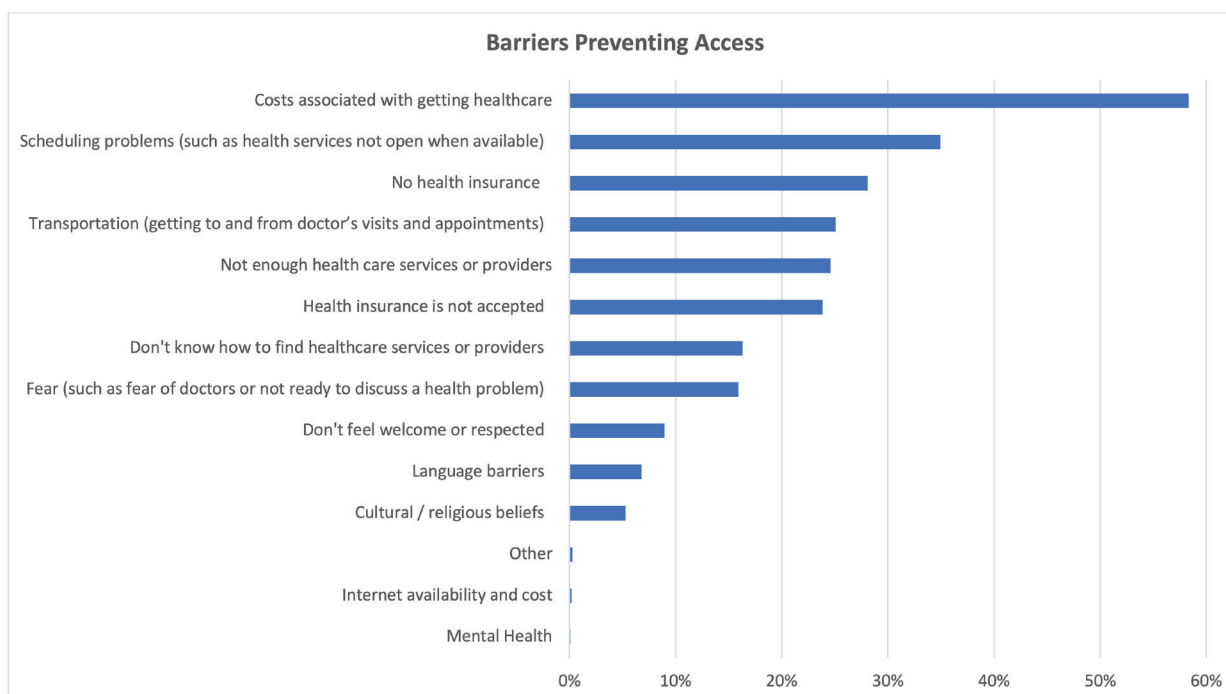
## Appendix B: Community Survey Responses

Thinking about **your or other 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 **your or other children** in your community.



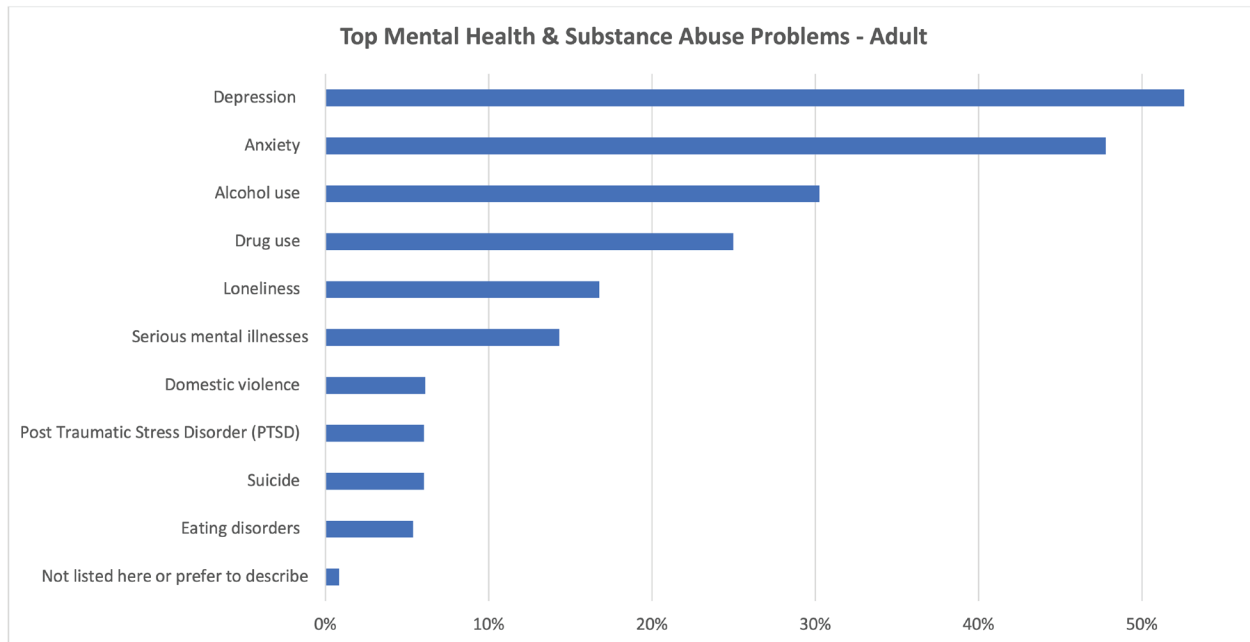
Thinking about the community where you live, which barriers prevent access to health care? Select all that apply.



## Appendix B: Community Survey Responses

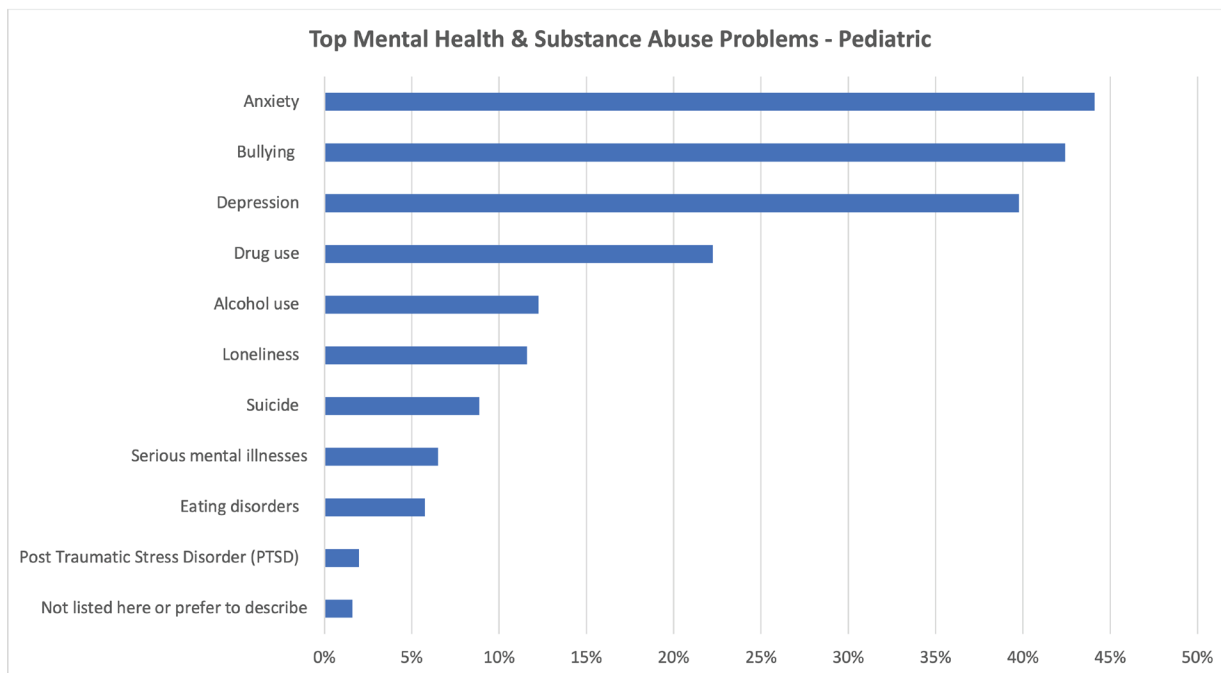
Thinking about **yourself or other adults** in the community where you live, what are the **top three** mental health and substance use problems?

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



Thinking about **your or other 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 **your or other children** in your community.



## Appendix B: Community Survey Responses

What is your age group? Choose one answer.

Age Group	Age Group Count	Age Group %
Under 18	1	0.12%
18-24	11	1.32%
25-34	103	12.38%
35-44	196	23.56%
45-54	175	21.03%
55-64	168	20.19%
65-74	114	13.70%
75+	44	5.29%
Prefer not to disclose	20	2.40%
<b>Grand Total</b>	<b>832</b>	<b>100.00%</b>

Which of the following best describes you? Choose all that apply.

Gender	Gender Count	Gender %
Man	148	17.64%
Woman	651	77.59%
Non-binary	2	0.24%
Genderqueer	5	0.60%
Other or prefer to self-describe	7	0.83%
Prefer not to disclose	26	3.10%
<b>Grand Total</b>	<b>839</b>	<b>100.00%</b>

Which of the following best describes you? Listed in alphabetical order. Choose all that apply.

Race	Race Count	Race %
American Indian or Alaska Native	8	1.01%
Asian	19	2.39%
Black or African American	21	2.64%
Other or prefer to self-describe	8	1.01%
White	739	92.96%
<b>Grand Total</b>	<b>795</b>	<b>100.00%</b>

## Appendix B: Community Survey Responses

Which of the following best describes you? Choose one answer.

Ethnicity	Ethnicity Count	Ethnicity %
Hispanic	15	2.08%
Non-Hispanic	665	92.36%
Prefer not to disclose	40	5.56%
<b>Grand Total</b>	<b>720</b>	<b>100.00%</b>

What is the highest level of education you have completed? Choose one answer.

Education	Education Count	Education %
Less than high school	4	0.49%
High school diploma/GED	46	5.69%
Some college credit, no degree	84	10.38%
2-year college/Vocational training	88	10.88%
4-year college/Bachelor's degree	243	30.04%
Master's, Professional, or Doctorate degree	337	41.66%
Other or prefer to self-describe	7	0.87%
<b>Grand Total</b>	<b>809</b>	<b>100.00%</b>

Which languages do you speak at home? Choose all that apply.

Language	Language Count	Language %
Arabic	2	0.23%
Bosnian	7	0.82%
English	808	94.39%
French	3	0.35%
Hindi	4	0.47%
Korean	1	0.12%
Mandarin	1	0.12%
Other or prefer to self-describe	13	1.52%
Sign Language (ASL)	2	0.23%
Spanish	14	1.64%
Vietnamese	1	0.12%
<b>Grand Total</b>	<b>856</b>	<b>100.00%</b>



## Appendix B: Community Survey Responses

What best describes your employment status? Choose one answer.

Employment	Employment Count	Employment %
Disabled	27	3.27%
Not Employed	15	1.82%
Student Part-time	3	0.36%
Student Full-time	2	0.24%
Part-time	65	7.87%
Full-time	552	66.83%
Self Employed	8	0.97%
Retired	121	14.65%
Other or prefer to self-describe	14	1.69%
Prefer not to disclose	19	2.30%
<b>Grand Total</b>	<b>826</b>	<b>100.00%</b>

What is your total household income for the year? Choose one answer.

Income	Income Count	Income %
Less than \$10,000	17	2.44%
\$10,000 to \$24,999	26	3.74%
\$25,000 to \$49,999	88	12.64%
\$50,000 to \$74,999	111	15.95%
\$75,000 to \$99,999	85	12.21%
\$100,000 to \$149,999	160	22.99%
\$150,000 to \$199,999	116	16.67%
\$200,000 or more	93	13.36%
<b>Grand Total</b>	<b>696</b>	<b>100.00%</b>

# Appendix C: South St. Louis County Stakeholder Conversation Summary

## Stakeholder Conversation Summary Report

*Geographic Region: South County*

*Location: SSM St. Clare Hospital*

*Date: July 9, 2024*

*Number of Participants: 18*

## Executive Summary

The St. Louis Regional Hospital Collaborative, with support from Key Strategic Group, hosted a series of six regional stakeholder conversations as part of the ongoing Community Health Needs Assessment (CHNA) process. These meetings brought together representatives from various community-based organizations, healthcare providers, and service organizations to discuss key health challenges across the St. Louis region. This report focuses on the insights gathered from the South County conversation held at SSM St. Clare Hospital.

Participants engaged in facilitated discussions around health priorities, social determinants of health, and the challenges and opportunities for improving health equity in their communities. Key themes emerged, particularly around the urgent need for expanded mental health services, addressing substance abuse, and tackling food insecurity. The conversation also emphasized the need for a more equitable and inclusive approach to future community engagement, ensuring that all voices, particularly those of vulnerable and underrepresented populations, are heard and considered in ongoing efforts.

## Introduction

On July 9, 2024, the Collaborative conducted a stakeholder conversation at SSM St. Clare Hospital, bringing together local community-based organizations, healthcare providers, and public health professionals. This conversation aimed to capture diverse perspectives on health disparities, service gaps, and community needs in South County. Trained moderators facilitated discussions, and scribes captured detailed notes, synthesizing key themes into this report. The goal of the meeting was to collaboratively identify strategies to address health disparities and improve community health outcomes.

## Survey Process and Participant Feedback

The Collaborative briefed participants on the survey methodology used for collecting data for the CHNA and invited them to provide feedback. Participants raised concerns regarding the survey's sample diversity, with several attendees noting that middle-aged, educated white women predominantly provided the responses, potentially skewing the results. Participants questioned

# Appendix C: South St. Louis County Stakeholder Conversation Summary

the geographical focus of the survey and discussed how certain underrepresented populations, particularly low-income individuals and older adults without reliable internet access, were not adequately reached. The group emphasized the need for broader outreach strategies to ensure more inclusive data collection in future assessments.

## Key Health Concerns Identified

Three primary health concerns consistently arose in all discussion groups:

1. **Mental Health:** There was a strong consensus that mental health is the most pressing health issue in South County. Participants highlighted a growing demand for mental health services, especially among low-income and uninsured individuals. They also pointed to significant gaps in service provision, particularly in culturally competent and trauma-informed care.
2. **Substance Abuse:** Frequent discussions included the co-occurrence of mental health issues and substance use disorders. Participants expressed concern about the lack of integrated care models that address both issues holistically and recommended more comprehensive support systems for individuals with addiction.
3. **Food Insecurity:** Discussions around food insecurity focused on access to food and nutrition quality. While food pantries provide essential services, many offer primarily non-perishable, unhealthy items that contribute to long-term health issues such as obesity and diabetes. Participants stressed the importance of shifting focus from food security to nutrition security, with educational programs on healthy eating and culturally relevant nutrition as central components.

## Social Determinants of Health (SDOH)

Several social determinants of health emerged as barriers to achieving optimal health outcomes in South County:

- **Transportation:** Participants cited transportation limitations as a significant obstacle to accessing healthcare, employment, and other essential services. Participants noted that while public transit exists, it is unreliable, costly, and not user-friendly, particularly for older adults or those with mobility challenges.
- **Education:** The group identified a lack of education around health, nutrition, and healthcare resources as a critical driver of poor health outcomes. Many individuals lack the knowledge or resources to make healthy choices, which exacerbates chronic diseases such as obesity, diabetes, and cardiovascular conditions.
- **Access to Culturally Competent Care:** Several participants highlighted the lack of culturally competent mental health and healthcare services, particularly for Communities of Color and immigrant populations. They noted that mistrust of healthcare systems, language barriers, and stigma hinder access to essential care.

# Appendix C: South St. Louis County Stakeholder Conversation Summary

## Prioritizing Community Health Needs

When tasked with prioritizing health needs, participants consistently identified mental health, substance abuse, and food insecurity as top priorities. Participants viewed these issues as interconnected and emphasized the need for a holistic, collaborative approach that involves healthcare providers, community organizations, and public health agencies to address them.

Participants also advocated for strengthening partnerships between hospitals and community-based organizations to ensure services are accessible and tailored to the specific needs of underserved populations. Recommendations included creating co-located services in accessible community settings, such as schools or churches, and expanding telehealth options to mitigate transportation barriers.

## Suggestions for Community Conversations and Engagement

To improve future community engagement, participants recommended:

- Meeting people where they are by holding conversations in trusted, accessible locations such as community centers, food pantries, and faith-based institutions.
- Utilizing traditional and digital outreach strategies to reach underrepresented groups, including low-income populations, Communities of Color, and older adults.
- Forming partnerships with local non-profits and community leaders to foster trust and ensure that outreach efforts are authentic and community-driven.

## Next Steps

As the conversation concluded, participants emphasized the importance of sustained action following the CHNA process and proposed the following immediate steps:

- **Pop-Up Clinics:** To increase access to healthcare, particularly for low-income and uninsured populations, participants suggested creating pop-up clinics in community spaces such as grocery store parking lots. These clinics could provide preventive care, mental health services, and social support resources.
- **Ongoing Collaboration:** Participants called for continued collaboration between hospitals, public health agencies, and community organizations. They stressed the need for hospitals to be more proactive in reaching out to vulnerable populations and creating long-term partnerships that foster trust and transparency.

## Acknowledgments

The St. Louis Regional Hospital Collaborative and Key Strategic Group would like to extend our gratitude to the participants of the South County stakeholder conversation for their time, expertise, and insights. We also thank SSM St. Clare Hospital for hosting the meeting and providing a welcoming space for this important dialogue.

## Appendix C: South St. Louis County Stakeholder Conversation Participating Organizations

### South St. Louis County Stakeholder Conversation Participating Stakeholder Organizations

BJC Behavioral Health  
Compass Health Network  
Feed My People  
Fenton Police  
iFM Community Medicine  
Lutheran Senior Services  
Mehlville Fire Protection  
Missouri SHIP  
Operation Food Search  
St. Louis County Dept. of Public Health  
St. Louis County Police Department  
United Way of Greater St. Louis  
Youth In Need

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# Appendix D: Community Resources

## Appendix D: Community Resources

### COMMUNITY RESOURCES POTENTIALLY AVAILABLE TO ADDRESS SIGNIFICANT HEALTH NEEDS

#### WEIGHT MANAGEMENT & HEART HEALTH

American Diabetes Association  
American Heart Association  
U.S. Department of Agriculture (USDA)  
U.S. Food & Drug Administration

#### EXERCISE

Gateway Region YMCA  
St. Louis Jewish Community Center (JCC)

#### GROCERY/FOOD PANTRIES

Dierberg's Markets  
Schnucks  
Circle of Concern

#### FARMERS' MARKETS

Kirkwood Farmers' Market  
Overland Farmers' Market

#### OLDER ADULTS & AGE-RELATED ILLNESSES

AARP  
Aging Ahead  
AmeriCorps Seniors  
Catholic Charities of St. Louis  
LifeWise STL  
Lutheran Senior Services  
Missouri SHIP  
Senior Living Facilities  
Seniors' Resource Guide  
St. Louis County Older Resident Programs (CORP)  
St. Louis Oasis

#### AGE-RELATED ILLNESS

Alzheimer's Association  
American Cancer Society  
American Diabetes Association  
American Heart Association  
American Lung Association  
American Parkinson's Disease Association  
Arthritis Foundation

#### ADULT DAY SERVICES

Family Partners

# Appendix D: Community Resources

## Appendix D: Community Resources

### COMMUNITY RESOURCES POTENTIALLY AVAILABLE TO ADDRESS SIGNIFICANT HEALTH NEEDS

#### OLDER ADULTS & AGE-RELATED ILLNESSES

##### ADULT FOOD SERVICES

Eat Right – Academy of Nutrition and Dietetics  
Senior Boxes – Commodity Supplemental Food Program  
Senior Farmers' Market Nutrition Program  
Supplemental Nutrition Assistance Program (SNAP)  
U.S. Department of Agriculture (USDA) MyPlate

##### TRANSPORTATION

Disabled American Veterans  
ITN Gateway  
Metro Call-A-Ride  
OATS, Inc

#### CANCER

American Cancer Society  
Cancer and Careers  
Cancer Hope Network  
Cancer Support Community  
CancerCare  
Food Outreach  
Imerman Angels  
Livestrong  
Peregrine Society

##### BLOOD CANCER RESOURCES

Leukemia & Lymphoma Society

##### BRAIN CANCER RESOURCES

American Brain Tumor Association

##### LUNG CANCER RESOURCES

American Lung Association  
Lung Cancer Connection

##### BREAST & GYNECOLOGIC CANCER RESOURCES

Faith Through Fire  
Gateway to Hope  
Komen Treatment Assistance Program  
Pink Ribbon Good  
St. Louis Ovarian Cancer Awareness  
TaTa Sisterhood  
The Breakfast Club  
The Pink Fund  
Valeda's Hope

## Appendix D: Community Resources

### COMMUNITY RESOURCES POTENTIALLY AVAILABLE TO ADDRESS SIGNIFICANT HEALTH NEEDS

#### GENERAL:

Gateway Region YMCA  
Lutheran Family and Children Services (LFCS)  
Missouri Department of Health and Senior Services  
Missouri Foundation for Health  
St. Louis County Department of Health  
St. Louis Integrated Health Network  
St. Vincent de Paul  
United Way, 211

#### COMMUNITY NETWORKS

City of Ballwin, Fire & Police  
City of Des Peres, Fire & Police  
City of Kirkwood, Fire & Police  
City of Valley Park, Fire & Police  
West County Chamber of Commerce

#### HEALTHCARE PROVIDERS

Barnes-Jewish West County Hospital  
Compass Health Network  
Healing Grace  
Missouri Baptist Medical Center  
Volunteers in Medicine – West County

#### SCHOOL DISTRICTS

Kirkwood School District  
Ladue School District  
Parkway School District  
Rockwood School District  
Valley Park School District





**St. Luke's Des Peres Hospital**  
**Community Health Needs Assessment**

**2025**

Questions, feedback, or requests for a paper copy of the St. Luke's Des Peres Hospital CHNA can be emailed to [SLHCommunityBenefit@stlukes-stl.com](mailto:SLHCommunityBenefit@stlukes-stl.com) or by writing:

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