

# Community Health Improvement Plan

Mercy Hospital St. Louis  
Fiscal Year 2026



*Your life is our life's work.*





# Our Mission

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

# Our Values

Dignity  
Excellence  
Justice  
Service  
Stewardship



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# Introduction

Mercy Hospital St. Louis (MHSTL) is an 859-bed, private room hospital located in St. Louis, Missouri. It is one of five hospitals in Mercy's East Community and the only Level 1 (highest level) trauma center in St. Louis County. MHSTL's campus includes Mercy JFK Clinic, which focuses on serving the health needs of individuals who are uninsured or underinsured; Mercy Heart and Vascular Hospital; the David C. Pratt Cancer Center; and Mercy Children's Hospital, the only full-service pediatric hospital in St. Louis County and one of only two hospitals in the state of Missouri to have a Level III (highest level) neonatal intensive care unit.

MHSTL's primary service area is St. Louis County. Throughout the county, Mercy operates Mercy Clinic physician offices, outpatient hospital services, 65Prime+, and Mercy-GoHealth Urgent Care centers. In 2015, Mercy also opened the world's first virtual care center, located in St. Louis County. It addresses critical community health needs such as transportation barriers to accessing care, which most often impact lower-income and non-ambulatory patients and provider shortages in the surrounding rural communities comprising MHSTL's extended service area.



# Introduction *(continued)*

The CHNA identified 12 priorities and of the 12, **four have been chosen as health needs for the Mercy Hospital St. Louis community.** We will strive diligently to address these needs with a Health Equity lens over the next three years:



# Improvement Plan by Prioritized Health Need



Community Health Improvement Plan | 2026







# Prioritized Need #1: Access to Care

**GOAL:**

Improve health care access for underserved communities





# Prioritized Need #1: Access to Care

## Program 1 of 3: Community Health Worker Program

### PROGRAM DESCRIPTION:

The Community Health Worker (CHW) Initiative is dedicated to improving health care access and outcomes for underserved communities by bridging gaps between healthcare systems, social services, and the individuals they serve. CHWs engage directly with underserved communities to identify barriers related to social drivers of health, such as transportation, housing, and financial instability, that impact access to care. By fostering trust and cultural humility, this initiative aims to reduce disparities, enhance patient advocacy, and ensure equitable access to comprehensive health care for all community members.

### ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Through personalized support, Mercy CHWs will help community members navigate healthcare services, assist with Medicaid and financial assistance enrollment, understanding health plan benefits, and connect individuals to vital community resources, including medication and social support programs.

### ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Reduce 72-hour return rate
- Reducing readmission rates for focused populations

### PROGRAMS AND RESOURCES MERCY PLANS TO COMMIT:

- Compensation and benefits for Community Health Workers.
- Mileage and travel expenses required for CHW work.
- Office space and indirect expenses dedicated to CHW work.
- CHW Training-Offered by Ministry (or through community partnership)

### COLLABORATIVE PARTNERS:

- Mercy Neighborhood Ministry





# Prioritized Need #1: Access to Care

## Program 2 of 3: Dispensary of Hope (DOH)

### PROGRAM DESCRIPTION:

The Dispensary of Hope is a charitable medication distributor that delivers critical medicine donated by pharmaceutical manufacturers for free to the people who need it the most but cannot afford it. By partnering with Dispensary of Hope, Mercy Pharmacy can get access to their charitable formulary, connecting self-pay patients with the direst financial need to essential medicines across a range of drug classes, including insulins, anti-infectives, and psychotropics.

### ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- In contract with the Dispensary of Hope, Mercy Pharmacy will manage charitable formularies within participating pharmacies, including maintaining inventory and making weekly orders. Mercy will use attestation form to enroll qualifying patients in the Dispensary of Hope program and will promote the formulary.

### ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Each year, will see a 10% reduction in ED visits
- Each year, will see a 10% reduction in total cost of care

### PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Annual contract fees to Dispensary of Hope for formulary access
- Pharmacist support for formulary management
- Marketing and communications support, in the form of flyers, rack cards, enrollment cards, etc.
- Training for caregivers to understand enrollment process for Dispensary of Hope

### COLLABORATIVE PARTNERS:

- Dispensary of Hope
- Mercy Pharmacy, Integrated Health and Social Care, Care Management, Hospitalists, Mercy Clinics
- FQHC Partners



# Prioritized Need #1: Access to Care

## Program 3 of 3: Congestive Heart Failure Meal Boxes

### **PROGRAM DESCRIPTION:**

The Healthy Hearts program is designed to identify patients with congestive heart failure (CHF) who screen positively for food insecurity. Mercy Hospital St. Louis has partnered with Food Outreach to provide 250 shelf stable, heart healthy food boxes and nutrition education to those with CHF.

### **ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:•**

- Distribute food boxes to CHF patients
- Provide nutrition counseling
- Tracking clinical data

### **ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):**

- Improved dietary adherence and Improved access to nutritious meals
- Increased blood-pressure control
- Reduction in 30-day readmission rates

### **PROGRAMS AND RESOURCES MERCY PLANS TO COMMIT:**

- Dedicated storage and logistical support for shelf-stable bag distribution
- Clinical and operational support for those with CHF

### **COLLABORATIVE PARTNERS:**

- Mercy Hospital St. Louis Cardiovascular Services
- Food Outreach
- Local and regional food pantries



## Prioritized Need #2: Behavioral Health

### GOAL –

Increase access to mental health care and substance use treatment for uninsured and at-risk persons.



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# Prioritized Need #2: Behavioral Health

## Program 1 of 4: Virtual Behavioral Health (vBH)

### PROGRAM DESCRIPTION:

Mercy's Virtual Behavioral Health (vBH) program provides integrated, regional support for patients with behavioral health needs. Based out of local and centralized Ministry locations, vBH co-workers provide virtual and telephonic behavioral health assessments to establish patients' level of care, and facilitate referrals for inpatient, intensive outpatient (IOP), and outpatient services, as well as for basic social needs in their home communities. vBH also provides virtual psychiatric consults to help with medication stabilization related to the exacerbation of behavioral health conditions.

### ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Operate a hub-based model of virtual care, where clinical vBH co-workers respond to incoming referrals, conduct telephonic behavioral health assessments, and facilitate outgoing referrals for ongoing diagnosis, treatment, and support. Collaborate with external partners and behavioral health service providers to ensure a strong regional network for care coordination and social service navigation.

### ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- 10% decrease in hospital readmissions and ED visits by FY28

### PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Cost of coworker and clinician time, including Regional Resource Behavioral Health RNs and LPNs and Patient RN Advocates.
- Operational budgeted support as appropriate.
- Indirect expenses related to EMR and clinic operations

### COLLABORATIVE PARTNERS:

- Mercy Behavioral Health Service Line Leadership
- Mercy Virtual Behavioral Health (vBH)
- Substance Abuse Recovery Program (SURP)



# Prioritized Need #2: Behavioral Health

## Program 2 of 4: Collaborative Care

### PROGRAM DESCRIPTION:

Concert Health provides a psychiatric consultant who meets with care managers regularly, reviews patient charts, and makes recommendations for medication and ongoing treatment. Supporting primary care providers (family medicine, internal medicine, obstetrics & gynecology, and pediatrics) in providing mental and behavioral health services to patients in need. The model provides a behavioral care manager to interact directly with patients, perform assessments, initiate treatment, and communicate and collaborate with primary care physicians.

### ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Mercy will continue training and educating providers on the use of the care approach, identify gaps in care, and refer patients to Concert Health.

### ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Increase patient referrals by 5% each year
- Increase patient satisfaction assessment participation by 10% from previous CHIP cycle

### PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Cost of coworker and clinician time, including Regional Resource Behavioral Health RNs and LPNs and Patient RN Advocates
- Operational budgeted support as appropriate
- Indirect expenses related to EMR and clinic operations

### COLLABORATIVE PARTNERS:

- Mercy Behavioral Health Service Line Leadership
- Mercy Virtual Behavioral Health (vBH)
- Substance Abuse Recovery Program (SURP)



# Prioritized Need #2: Substance Use

## Program 3 of 3: Substance Use Recovery Program (SURP)

### PROGRAM DESCRIPTION:

Mercy Substance Use Recovery Program (SURP) is an integrated, mission-driven, patient-centric approach to Opioid Use Disorder. SURP will ensure that any patient seeking care through Mercy will be connected to ongoing care for Opioid Use Disorder regardless of geography, clinical setting, or ability to pay. Through a virtual-first care experience, SURP provides Medication-Assisted Therapy (MAT), primarily through buprenorphine, for patients with Opioid Use Disorder. Patients who participate in SURP are also connected to support services, including counseling, behavioral therapies and general primary care, to implement a holistic harm-reduction care model. By offering proactive telephonic outreach and virtual treatment and support options, SURP can increase access to essential behavioral health services and facilitate continuity and ease of care for patients.

### ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- SURP LCSWs will outreach and engage with patients, providing necessary direct support as well as referrals and care coordination for treatment and primary care provision. SURP clinicians will facilitate MAT for patients, managing MAT medication prescription and adherence.

### ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Patients reached by SURP will demonstrate a 20% reduction in ED utilization over three years
- Patients reached by SURP will demonstrate a 10% reduction in inpatient readmission over three years

### PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- SURP staff: providers, psychiatric consultant, and Licensed Clinical Social Workers
- Support and education to identify and facilitate patient referrals
- Staff time and indirect costs necessary to maintain ongoing partnership with BHN

### COLLABORATIVE PARTNERS:

- Behavioral Health Network of Greater St. Louis (BHN) – EPICC Program
- Behavioral Health Response (BHR)
- Mercy Virtual Behavioral Health (vBH)





## Prioritized Need #3: Maternal and Child Health

### GOAL –

Prevent pregnancy complications and maternal deaths and improve women's health before, during, and after pregnancy while improving the health and safety of infants.





# Prioritized Need #2: Maternal and Child Health

## Program 1 of 3: Safe Sleep First

### PROGRAM DESCRIPTION:

The Safe Sleep First Project (SS1st) focuses on evidence-based frameworks to promote the practice of infant safe sleep, especially for communities of color, where systemic inequalities place babies at greater risk for illness, injury, and death. Most infant deaths can be avoided by practicing the ABCs of Safe Sleep: Babies sleep safest **A**lone, on their **B**ack and in their **C**rib, bassinet, or portable crib. Through a regional, multi-sector team, SS1st provides training and resources so that caregivers throughout St. Louis receive consistent information and messaging about safe sleep regardless of where they get their information.

### ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Mercy will work toward becoming a Cribs for Kids Certified Safe Sleep Hospital.
- Mercy will appoint a consistent representative for the SS1st to regularly attend SS1st meetings and deepen community partners.
- Mercy will assist with planning and implementing Safe Sleep City activities as requested.

### ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- By the end of Q2 FY26, Mercy will identify the appropriate internal stakeholders to become a Cribs for Kids certified Safe Sleep Hospital
- By the end of FY26, Mercy will begin certification process for Cribs for Kids

### PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

Staff time in program implementation, meeting attendance etc.

Sponsorship of events as requested

### COLLABORATIVE PARTNERS:

- Nurses for Newborns
- SSM Health and SSM Health Cardinal Glennon Children's Hospital
- BJC Healthcare
- Mercy Hospital St. Louis



# Prioritized Need #2: Maternal and Child Health

## Program 2 of 3: Milk Depot

### PROGRAM DESCRIPTION:

The Milk Bank, a non-profit based in Indiana, “provides pasteurized donor human milk (PDHM) by prescription or physician order to hospitals and outpatients throughout the United States,” including to Mercy Hospital St. Louis ([themilkbank.org](http://themilkbank.org)). By becoming a Milk Depot location, Mercy St. Louis can collect approved donations from area donors that can be stored and sent to The Milk Bank for bottling, pasteurization, testing, and reallocation to mothers in need across the Midwest, including those in the Greater St. Louis Region.

### ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Mercy Hospital St. Louis will manage an on-site collection facility for donor milk to be pumped or dropped off and stored and will arrange for shipments of donor milk to The Milk Depot.
- Mercy will market the Milk Depot to enroll new donors, through rack cards in hospital community spaces and OBGYN and Pediatric offices, as well as wall clings in all hospital pumping rooms and lactation suites.

### ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- By the end of FY26 Mercy Hospital St. Louis will collect a greater volume of donor milk than is used by Mercy patients from the Milk Bank
- Increase number of donated ounces of milk by 10% each year
- Increased awareness of Milk Depot by the creation of internal and external marketing materials

### PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Private, secure space for on-site collection facility
- Co-worker time for maintaining collection facility, gathering and shipping donations and tracking progress
- Funding for indirect expenses, such as marketing

### COLLABORATIVE PARTNERS:

- The Milk Bank
- SSM Health Cardinal Glennon Children’s Hospital





# Prioritized Need #2: Maternal and Child Health

## Program 3 of 3: Equity in Every Encounter

### **PROGRAM DESCRIPTION:**

Equity in Every Encounter utilizes the Notice of Pregnancy (NOP) and Risk Screening process to notify MO HealthNet and managed care health plans of a pregnancy and associates clinical and social risk factors. Mercy Hospital St. Louis aims to increase screening rates for all Medicaid mothers. A CHW will assist in resource sharing and navigation as well as providing a warm handoff to the MO HealthNet Case Manager.

### **ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:**

- MHSTL will conduct the (NOP) and positive screeners will trigger warm handoffs to local CBO's and internal assistance programs
- Bi-weekly follow-up calls or visits to assess resolution and update care plans in partnership with MOHealthNet social work team
- Provide educational materials and support as necessary

### **ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):**

- Increase percentage of pregnant women on Medicaid by 10% annually
- Increased rates of OBGYN visit adherence
- Improved birth outcomes

### **PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:**

- Staff time and indirect costs
- Educational materials as necessary
- Indirect expenses related to EMR and clinic operations

### **COLLABORATIVE PARTNERS:**

- Mercy Hospital St. Louis Women's and Children's
- Washington University in St. Louis – The Brown School
- MOHealthNet



## Prioritized Need #4: Health and Financial Literacy

### GOAL –

**Increase Health and Financial Literacy for our patient population to improve health outcomes and understanding.**





# Prioritized Need #4: Health and Financial Literacy

## Program 1 of 2: Education Enhancement Program for Community Health Workers

### PROGRAM DESCRIPTION:

Community Health workers are essential to our patient's education regarding access to social and clinical needs. By equipping the CHW's with educational toolkits to assist in their communication regarding chronic disease management, resource navigation, digital literacy and insurance navigation we intend to improve health outcomes and empower our patients.

### ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Creation and dissemination of educational materials to patients
- Creation of a Health Literacy Task force

### ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Increased patient confidence in navigating their care
- Improved health outcomes
- Improved care adherence

### PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Staff time and indirect costs
- Training for caregivers
- Educational materials for patients and caregivers as necessary

### COLLABORATIVE PARTNERS:

- Mercy Hospital St. Louis
- Family Medical Resident Program at Mercy
- Mercy Neighborhood Ministries





# Prioritized Need #4: Health and Financial Literacy

## Program 2 of 2: Birthing Education in Spanish

### **PROGRAM DESCRIPTION:**

Mercy will provide birthing education for Spanish speaking mothers in the JFK Clinic. This education is evidence-based and covers topics such as birth, breastfeeding and newborn care.

### **ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:**

- Mercy Hospital St. Louis will provide the InJoy education classes free of charge to Spanish speaking, first time mothers.
- Mercy clinic staff will be available for questions to assisting the mother's education
- JFK team to distribute a pre/post test for understanding the educations impact

### **ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):**

- Increased patient understanding of the birth encounter, benefits of breastfeeding and newborn care
- Increased number of first-time mothers that report breastfeeding from pre to post test
- Increased confidence in patients' ability to care for themselves and newborn

### **PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:**

- Educational materials and supplies as needed
- Annual program fees
- Full time staff to assist with continued patient education

### **COLLABORATIVE PARTNERS:**

- Mercy Hospital St. Louis
- Mercy JFK Clinic
- InJoy Birthing Education

# Other Community Health Programs

Mercy Hospital St. Louis conducts other community health programs not linked to a specific prioritized health need. These programs address a community health need and meet at least one of the following community benefit objectives: improve access to health care services, enhance the health of the community, advance medical or health care knowledge or relieve or reduce government burden to improve health. The need for these programs was identified through documentation of demonstrated community need, a request from a public health agency or community group, or the involvement of an unrelated, collaborative tax-exempt or government organization as partners in the activity or program carried out for the express purpose of improving community health.

# Significant Health Needs Not Being Addressed

In any case of prioritization, there will be some areas of needs that are identified that are not chosen as a priority. Because MHSTL has limited resources, not every community need will be addressed. Throughout the CHNA process, the following need arose as a community concern. However, it will not be addressed as a top priority because other organizations are more appropriate to address this need.

- **Chronic Disease**

While these needs listed will not be specifically addressed in our priorities, they will most likely be impacted indirectly through the work in our other community outreach priorities.

- **Food Insecurity**

While these needs listed will not be specifically addressed in our priorities, they will most likely be impacted indirectly through the work in our other community outreach priorities.



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