

# Community Health Improvement Plan

Mercy Hospital Washington  
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 Washington is a 140-bed acute-care hospital located in Washington, Missouri. It is one of eight hospitals in Mercy's East Region. Headquartered in St. Louis, Mercy, a large catholic health system, serves millions of people each year in multiple states across the central United States. Mercy Hospital Washington has 24-hour emergency room care and a full range of diagnostic, preventive and restorative health care services. Mercy Hospital Washington was founded in 1926 by the sisters of Mercy as St. Francis Hospital and changed to St. Johns Mercy in 1976 then becoming Mercy Hospital Washington in 2011.

Mercy Hospital Washington's primary service area is Franklin County however serves Crawford, Gasconade, Warren and surrounding Counties. Throughout these counties, Mercy Hospital Washington operates Mercy Clinic physician offices, outpatient hospital services and Mercy Convenient Care centers.



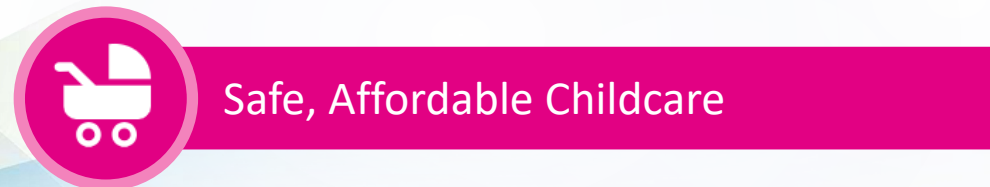
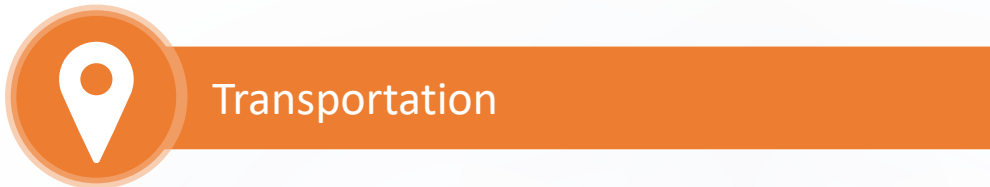
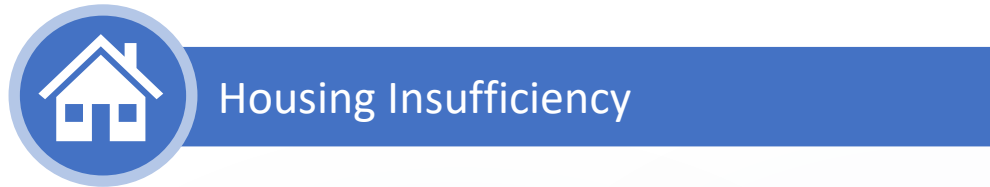
# Introduction *(continued)*

Mercy's mission is to deliver "compassionate care and exceptional service" to every community member. In dedication to this mission, our work included the development of a Community Health Needs Assessment (CHNA) during the last year, in cooperation with stakeholders throughout the community.



# Introduction *(continued)*

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



As always, we seek to develop a rich and rewarding network of partnerships with our neighbors. We welcome any thoughts you may have on ways to achieve our goal for a healthier community.

# Improvement Plan by Prioritized Health Need



Community Health Improvement Plan | 2026







## Prioritized Need #1: Housing Insufficiency

### GOAL 1

Identify and support community resources that increase access to low- income housing opportunities in Franklin County. With a focus for development of wrap around supportive programs and creation of emergency weather shelter for at-risk and unhoused populations.





# Prioritized Need #1: Housing Insufficiency

## Program 1 of 3: Life's River

### **PROGRAM DESCRIPTION:**

Improve partnership to support the expansion of Life's River Transitional Housing

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

Mercy CHL regularly attend board meetings with Life's River and Life's River leaders attend CCOB meetings at Mercy. Continue to collect and report data and metrics on dashboard for understanding of Life's River populations. Support exploration of alternative community partners that can increase effectiveness and efficiency of operations.

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

Life's River will increase number of families served and improve successful transition to exit homelessness

### **PLAN TO EVALUATE THE IMPACT:**

Monthly metrics collected from Life's River director to demonstrate achieved objectives

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

Professional development, continuing education programs for staff and volunteers. Leadership involvement at Board level and commitment of volunteers from Mercy utilizing VTO benefits

### **COLLABORATIVE PARTNERS:**

Head Start, Catholic Charities,



# Prioritized Need #1: Housing Insufficiency

## Program 2 of 3: United Way 211

### **PROGRAM DESCRIPTION:**

United Way reporting from 211 database

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

IHSC leader to drilldown into dashboard to determine number of calls received for relevant area (ie: Franklin, Gasconade, Crawford, Washington, Phelps, Maries, Osage and Warren Counties)

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

Collection of data from sources, shared on federal and regional accesses and partners to expand services and funding

### **PLAN TO EVALUATE THE IMPACT:**

*Utilize data to increase funding and or partnerships to meet this prioritized need*

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

Regular scheduled CCOB meetings, commitment to gather and share relevant data at FCSP meetings and Homeless Task Force subcommittee.

### **COLLABORATIVE PARTNERS:**

United Way, Homeless Task Force, Unity in Community, Life's River, FCCRB



# Prioritized Need #1: Housing Insufficiency

## Program 3 of 3: Coordinated Entry

### **PROGRAM DESCRIPTION:**

Coordinated Entry Council for the Homeless: serves as a centralized process that assesses and matches individuals and families experiencing homelessness to appropriate housing opportunities such as rapid re-housing and supportive housing.

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

IHSC will explore educational opportunities and evaluate access and implementation of Coordinated Entry services for the unhoused populations in Franklin County

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

Streamline access to shelters and housing resources for unsheltered populations. Locate and provide individuals with a single point of contact ensuring they receive the most suitable support as quickly and efficiently as possible.

### **PLAN TO EVALUATE THE IMPACT:**

Collect and utilize data provided by Coordinated entry council to increase housing accessibility for unsheltered populations in Franklin County.

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

Regular scheduled CCOB meetings, commitment to gather and share relevant data at FCSP meetings and Homeless Task Force subcommittee.

### **COLLABORATIVE PARTNERS:**

Compass Housing Supervisor, JFCAC HUD, Homeless Task Force



# Prioritized Need #2: Transportation

## GOAL 1

Identify transportation services to decrease non-emergent transportation barriers for Mercy Clinic patients with a focus on development of services to provide access to medical care and personal needs



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# Prioritized Need #2: Transportation

## Program 1 of 2: EZMO transportation services

### **PROGRAM DESCRIPTION:**

EZMO non-emergent transportation services for all our patient population to provide day to day needs

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

Promote community awareness, evaluate gap of resources for service area, and identify potential partners to address the need.

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

Decrease patients terminated from clinic and healthcare services due to transportation barriers, decrease missed appointment and decrease ED over-utilization

### **PLAN TO EVALUATE THE IMPACT:**

Gathering metrics from clinics Emergency Room to demonstrate the volume of patient need

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

Enrolling eligible patients in EZMO transportation services, promote volunteer drivers,

### **COLLABORATIVE PARTNERS:**

OATS, JFCAC EZMO transportation,



# Prioritized Need #2: Transportation

## Program 2 of 2: Discharge Transportation

### **PROGRAM DESCRIPTION:**

non-emergent transportation services provided for discharged patients from Mercy facility with identified transportation barriers. Utilization of Mercy funded cab vouchers.

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

CHWs or CM meet with and coordinate care for this identified patient population

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

Reduction of length of stay, reduction in ED overutilization,

### **PLAN TO EVALUATE THE IMPACT:**

Evaluate daily length of stay and ED utilization reports

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

House Supervisors, Care Managers and ED Social Workers

### **COLLABORATIVE PARTNERS:**

Motivecare, Local Cab Companies, OATS,



## Prioritized Need #3: Safe Affordable Childcare

### GOAL 1

Identify and steward programs that increase access to childcare for low-income and at-risk families.





# Prioritized Need #3: Safe, Affordable Childcare

## Program 1 of 2: Expansion of Life's River Services

### **PROGRAM DESCRIPTION:**

Head Start Early Childhood Education Program expansion

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

340B funding proposal and partnership, provide access to placement of children in the program for our lowest paid caregivers

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

Reduce turnover of Mercy caregivers due to lack of childcare, increase available childcare spots for identified low-income families including Life's River residents and Mercy caregivers, support the successful development of children in at risk families

### **PLAN TO EVALUATE THE IMPACT:**

HR reports for retention and turnover of Mercy caregivers citing childcare barriers, , Life's river success rates, track headstart enrollment rates

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

340B funding and support, Partnership with Headstart and Life's River

### **COLLABORATIVE PARTNERS:**

HeadStart, Life's River





# Prioritized Need #3: Safe, Affordable Childcare

## Program 2 of 2: YMCA “after school care”

### **PROGRAM DESCRIPTION:**

YMCA before and after school care program

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

Increase knowledge and promotion of available services and programming offered by YMCA in service area.

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

Reduce turnover of Mercy caregivers due to lack of childcare, increase available childcare spots for identified families including Mercy caregivers.

### **PLAN TO EVALUATE THE IMPACT:**

HR reports for retention and turnover of Mercy caregivers citing childcare barriers. Collection and evaluation of YMCA enrollment rates provided and reported at CCOB meetings

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

Engage YMCA administration, promotion of programming in conjunction with caregiver pantry and Mercy caregiver crisis committee

### **COLLABORATIVE PARTNERS:**

YMCA, School District of Washington, HR

# Other Community Health Programs

Mercy Hospital Washington 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. Although this is not an exhaustive list, many of these programs are listed on the next page.

Other Community Health Programs (Continued)

Community Benefit Category	Program	Outcomes Tracked
Community Health Improvement Services	Weigh-in Wednesdays/ lactation Specialist Car Seat Education and Safety Checks	Number of People served
	Head Safe Program	Number of people served
	Little Free Food Pantry	Cost of services
	Back to School Supply Drive	Cost of services and people served
	Weight and Wellness Support Group	People served
	New Moms Support Group	People served
	Narcan Trainings	People served
	Presentations in Community	People served



Other Community Health Programs (Continued)

Community Benefit Category	Program	Outcomes Tracked
Financial & In-Kind Contributions	Community Building -Cash/In-kind Contributions	Cost of services, number of people served
	Flu Shots	Cost of services
	Meals on Wheels Nutrition Services	Cost of services, number of people served
	Mercy Way Basket Raffle	Cost of services
Health Care Support Services	340B Program	Dollars contributed
	Cab Vouchers and Transportation Assistance	Cost of services, number of people served
Community Building	Coalition Building/Board Memberships	Cost of services
Health Professions Education	Health professions student education nursing, imaging, therapy, pharmacy, medical student, lab, emergency medical technician and advanced practice nursing	Number of students





# 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 MHW 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.

- Food Insecurity
- Mental/ Behavioral Health
- Chronic Disease Management
- Access to Primary and Specialty Care
- Cost of Prescriptions

# Now What

## Next Steps

After carefully reviewing the data and mapping existing resources, Mercy Hospital Washington is developing an implementation plan with evidence-based strategies. The plan will be submitted to a committee of executive leadership from Mercy Hospital Washington, for their approval.

The final version of the CHNA and Implementation Plan will be available to the public on the Mercy Hospital Washington website, **[www.mercy.net/communitybenefits](http://www.mercy.net/communitybenefits)**.



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