



2025 Community Health Needs Assessment

Mercy Health — Lourdes Hospital
PADUCAH, KY

2025 Community Health Needs Assessment

Mercy Health — Lourdes Hospital

Adopted by the Mercy Health — Lourdes Hospital Board of Directors
October 24, 2025

As part of Bon Secours Mercy Health, Mercy Health — Lourdes Hospital is honored to uphold nearly two centuries of dedication to the communities we serve. This commitment has continually evolved to address the most pressing needs in each community as identified by the input of residents, businesses and other community members.

Every three years, we conduct a comprehensive Community Health Needs Assessment (CHNA) to identify the most pressing needs in our community. The most recent assessment, completed by Mercy Health — Lourdes Hospital, incorporates robust quantitative and qualitative data. This process guides our strategic planning, community investment and community benefit initiatives. The following document provides a detailed CHNA specific to Mercy Health — Lourdes Hospital.

Guided by our Mission to extend the compassionate ministry of Jesus, Mercy Health remains steadfast in improving the health and well-being of our communities and bringing good help to those in need — especially people who are poor, underserved and dying.

Mercy Health — Lourdes Hospital has identified the greatest needs within our community by listening to its local voices. We gather input from our partners and neighbors through open forums, surveys and additional engagement strategies. This ensures that our outreach, prevention, education and wellness resources are strategically aligned to deliver the greatest impact.

To share feedback or request a printed CHNA copy, please email Leigh Ann Ballegeer, Director of Community Health at LABallegeer@mercy.com.

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Mercy Health CHNA
Short Link:
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Executive Summary

Market Summary

Mercy Health — Lourdes is a 359-bed regional hospital in Paducah, Kentucky. It serves as a regional referral center for a wide geographic region, including more than a dozen counties in western Kentucky, southern Illinois, southeast Missouri and northwest Tennessee. This assessment defines the CHNA service area as McCracken, Marshall and Graves Counties in western Kentucky.

Collaborating Partners

Mercy Health — Lourdes Hospital thanks the following organizations for their collaboration as part of the process of conducting the needs assessment:

- Purchase District Health Department
- Graves County Health Department
- Marshall County Health Department
- Paducah Area Transit System
- Camp Graves
- Heart USA
- Paducah-McCracken County NAACP
- Four Rivers Behavioral Health Regional Prevention Center
- McCracken County ASAP (Agency for Substance Abuse Policy) health coalition
- Baptist Health Paducah
- KentuckyCare
- Mercy Regional EMS
- Washington Street Baptist Church and Paducah's Warming Center
- Paducah Cooperative Ministry
- Paducah Public Schools
- Paducah-McCracken County Senior Center
- Healthy Paducah (McCracken County's health coalition)
- McCracken County Public Library
- Marshall County Public Library
- Provider Enrichment Services
- Turning Point Recovery Community Center

Overview

Mercy Health — Lourdes Hospital collaborated with the Purchase District Health Department and Baptist Health Paducah to develop and distribute a community health needs survey for the public. Survey results were analyzed, along with results from the Graves County Health Department and the Marshall County Health Department community surveys. Focus groups and key informant interviews were completed. Additional data analyzed included county-specific secondary data gathered to help examine specific health indicators and the social determinants of health. Throughout the process, input from populations (or those that serve them) who are often not engaged in conversations about their health needs or gaps in services was made a priority.

Primary and secondary data results were presented to the Community Steering Committee and Internal Workgroup. A prioritization process utilizing a multi-voting technique guided by the criteria from the American Hospital Association (AHA) and Association for Community Health Improvement (ACHI) was then used to identify the following significant health needs:

- Mental health and substance misuse
- Transportation
- Housing and homelessness
- Food access and food insecurity
- Poverty
- Lack of dental providers accepting Medicaid
- Lack of health care providers.

The Internal Workgroup of hospital leadership then voted on the needs to prioritize over the next three years.

Prioritized Health Needs

- Financial insecurity, including housing, homelessness, and food insecurity
- Transportation
- Mental health
- Chronic health issues, with an emphasis on obesity
- Substance misuse

Our Mission

Our mission is to extend the compassionate ministry of Jesus by improving the health and well-being of our communities and bring good help to those in need, especially people who are poor, dying and underserved.

Our Vision

Inspired by God's hope for the world, we will be a ministry where associates want to work, clinicians want to practice, people seek wellness and communities thrive.

Our Values

Human Dignity

We commit to upholding the sacredness of life and being respectful and inclusive of everyone.

Integrity

We commit to acting ethically and modeling right relationships in all of our individual and organizational encounters.

Compassion

We commit to accompanying those we serve with mercy and tenderness, recognizing that "being with" is as important as "doing for."

Stewardship

We commit to promoting the responsible use of all human and financial resources, including Earth itself.

Service

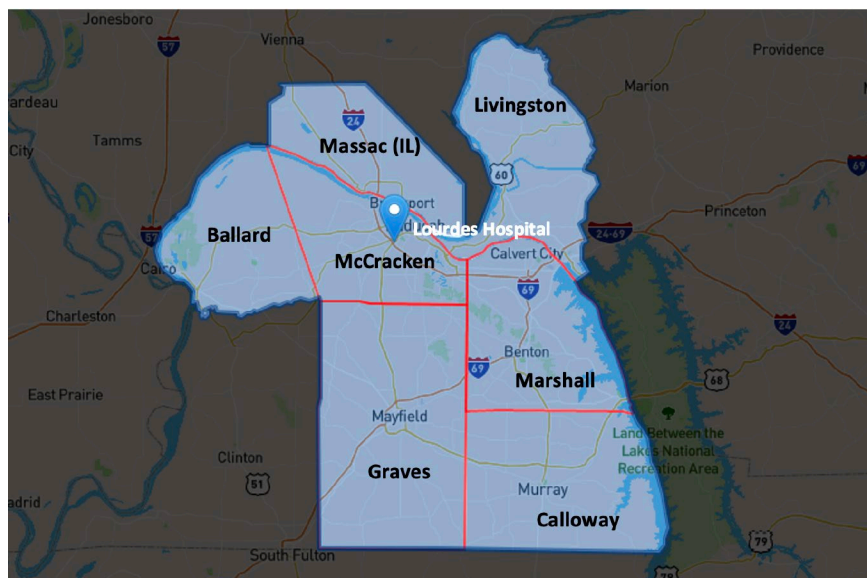
We commit to providing the highest quality in every dimension of our ministry.

Facilities Description

Mercy Health — Lourdes Hospital is a 359-bed facility accredited by The Joint Commission. Lourdes is home to the region's largest multi-specialty physician network. Mercy Health Physicians — Kentucky consists of more than 100 providers serving in over 30 locations throughout western Kentucky. It serves as a regional referral center for a wide geographic region, including more than a dozen counties in western Kentucky, southern Illinois, southeast Missouri and northwest Tennessee. Lourdes Hospital's Primary Service Area (PSA) is defined as the following seven counties:

State	PSA County	Population (2024 Claritas Population Estimates)	% of Total Inpatient Discharges (CY2024)	% of Total Unique Outpatient Physician Office Visits (CY2024)
KY	McCracken	68,969	40.7%	37.9%
KY	Marshall	31,447	14.0%	19.6%
KY	Graves	38,064	11.0%	11.3%
IL	Massac	13,627	4.9%	4.0%
KY	Livingston	9,178	4.2%	4.4%
KY	Calloway	37,529	3.1%	4.5%
KY	Ballard	5,287	3.5%	2.7%

For this assessment, the CHNA service area is focused on McCracken, Marshall and Graves Counties in western Kentucky.



Community Served by Hospital

Mercy Health defines the Lourdes Hospital CHNA service area as a three-county region that includes McCracken, Graves and Marshall Counties in Kentucky. This three-county region has a population of 138,480 (2024 Claritas Population Estimates), and residents from these three counties made almost 66% of all inpatient discharges from Mercy Health — Lourdes Hospital, and over 69% of all unique outpatient visits in Mercy Health Physicians' offices, in Calendar Year (CY) 2024.

Lourdes Hospital is in the city of Paducah in McCracken County, which serves as the urban hub to the more rural populations in Graves County (66.6% rural), Marshall County (85.2% rural) and other outlying rural counties within the hospital's service area. The three-county CHNA service area has a larger proportion of the population over 65 than the state average (17.8%). As the more urban county, slightly over 11% of the population in McCracken is Non-Hispanic Black, nearly 4% Hispanic and 1% Asian. Graves County has over 8% Hispanic and 4% Non-Hispanic Black populations. Marshall County has the least racial diversity of the region, with slightly over 2% of the population Hispanic and over 97% Non-Hispanic White (2024 Census Population Estimates).

Zip Codes and Cities for Identified CHNA Service Area:

McCracken County	Graves County	Marshall County
42001 Paducah	42027 Boaz	42025 Benton
42002 Paducah	42038 Fancy Farm	42029 Calvert City
42003 Paducah	42040 Farmington	42044 Gilbertsville
42053 Kevil	42051 Hickory	42048 Hardin
42086 West Paducah	42061 Lowes	42082 Symsonia
	42063 Lynnville	42085 Water Valley
	42066 Mayfield	42088 Wingo
	42069 Melber	
	42079 Sedalia	

Process and Methods

Process and Methods to Conduct the Community Health Needs Assessment

Mercy Health — Lourdes Hospital's CHNA was prepared in consultation with Blueprint Kentucky (formerly Community Economic Development Initiative of Kentucky — CEDIK) at the University of Kentucky Martin-Gatton College of Agriculture, Food and Environment. Blueprint Kentucky facilitated the primary data collection process by conducting focus groups and key informant interviews and analyzing the results of three community health needs surveys.

The CHNA process that Blueprint Kentucky uses considers all IRS requirements for completing a CHNA. Blueprint Kentucky met with Mercy Health — Lourdes Hospital Director of Community Health to discuss the process and timeline. Blueprint Kentucky provided a list of potential agencies and organizations to the hospital to aid in their recruitment of members to a Community Steering Committee. The Community Steering Committee plays a vital role in the CHNA process to ensure broad community input and to facilitate representation from all counties identified in the hospital service area. Blueprint Kentucky guided the hospital to include individuals who have knowledge of vulnerable and diverse populations to ensure inclusion and representation of medically underserved individuals within the service area. The Community Steering Committee assisted in collecting primary data for this assessment by disseminating community health needs surveys (three health departments), providing recommendations for focus group participants and participating in a facilitated focus group.

The Community Steering Committee met twice during the process. The initial Community Steering Committee meeting was held Jan. 23, 2025, where the Blueprint Kentucky team introduced the CHNA process, roles and responsibilities of the Committee, and completed a focus group with thirteen attendees. In addition, input was gathered from the Community Steering Committee for other potential focus groups or interviews. The Community Steering Committee met for a final time March 17, 2025, to review primary and secondary data and to identify significant health needs to recommend to the Internal Workgroup, comprised of hospital leadership.

The Internal Workgroup of Mercy Health — Lourdes Hospital administration and clinical/provider representation met on March 18, 2025. This committee reviewed the primary and secondary data and identified significant needs. Then, the Workgroup reviewed the recommendations from the Community Steering Committee. After discussing and completing a multi-vote process for prioritizing the needs, the Workgroup confirmed that the hospital will create an implementation plan to address the priority health needs. The remaining health concerns identified through the community assessment process are

currently being addressed by multiple community partners or will be best addressed individually by the focused efforts of community organizations and partnerships.

The Blueprint Kentucky team presented the following criteria from the Association for Community Health Improvement (ACHI) for prioritizing community health needs utilizing a structured process to both the Community Steering Committee and the Internal Workgroup:

1. Magnitude of the problem
2. Severity of the problem
3. Need among vulnerable populations
4. Community's capacity and willingness to act on an issue
5. Availability of hospital and community resources
6. Whether the issue is a root cause of other problems

Data Analyzed

Data analyzed included the following:

- Mercy Health's 2024 Community Health Needs survey, conducted in collaboration with the Purchase District Health Department (PDHD) and Baptist Health Paducah. Dates of survey collection were April 2024 to July 2024. Both online and paper formats were available, which resulted in a total of 533 responses.
- Graves County Health Department (GCHD) 2023 Community Health Needs survey. Dates of survey collection were March 2023 to June 2023, with online and paper formats available, which resulted in 1,142 survey responses.
- Marshall County Health Department (MCHD) 2022 Community Health Needs survey. Dates of survey collection were March 2022 to April 2022, with online and paper formats available, which resulted in 589 survey responses.
- Three focused conversations from May 2024 to Jan. 2025 with a total of 86 participants. This included Mercy Health's Community Steering Committee on Jan. 23, 2025 (13), as well as two conversations of which Mercy Health served as a collaborative planning partner: a facilitated discussion on "Paducah's Health and Well-Being Challenges Today" with the Healthy Paducah health coalition on Oct. 28, 2024 (25), and a "Community Leaders Forum on Health Needs in Western Kentucky" on May 2, 2024 (48).
- Six key informant interviews conducted by Mercy Health and completed from Jan. 2025-Mar. 2025.

A complete analysis of survey results, focus groups and key informant data summaries is in the appendix of this report.

External Sources

Blueprint team members collected and analyzed health data from a variety of sources, including:

- County Health Rankings
- Kentucky Cancer Registry
- Kentucky Hospital Association
- Kentucky Injury Prevention and Research Center
- University of Kentucky Cooperative Extension Community Needs Assessment (2024)
- U.S. Census Bureau

Community Input

Community surveys from the Purchase District Health Department, the Graves County Health Department and the Marshall County Health Department were analyzed. The community surveys revealed the top health challenges of the respondents as mental health, overweight/obesity, cancer, substance misuse/overdose, stress, and heart disease and stroke. Factors that affect the survey respondent's health include substance misuse, poor eating habits, tobacco/nicotine use, low income, lack of exercise and housing insecurity.

Additionally, the respondents identified cost, lack of specialty providers, lack of information and lack of convenient appointment times as the main barriers to receiving health care.

Three focus groups and six key informant interviews were conducted with representatives from Graves, Marshall and McCracken Counties. The purpose of each was to identify community strengths, current unmet health needs and any barriers to accessing health care or basic needs for a healthy life.

- The need for additional housing options and shelter for the unhoused population emerged in discussions. Areas in all three counties have limited access to food and lack of fresh, healthy foods. This can impact obesity, diabetes, cardiovascular health and some cancers. In addition to the difficulty meeting basic needs, participants highlight unhealthy behaviors that can have a negative impact on health, including tobacco use, vaping and substance misuse.

- Areas of opportunity for growth or change in the current health care system include additional health care specialties in the region, such as psychiatrists, endocrinologists, orthopedists, dermatologists, dentists (specifically for Medicaid population) and mental health providers. Increased employment of Community Health Workers was mentioned as an effective tool to connect people to existing services, arrange for transportation that can be a barrier to care and to access food and essential services to maintain a livable quality of life.
- Overall, the greatest barriers to health or health care were transportation, affordable and quality housing, poverty and the stigma related to mental health, and substance use disorder treatment.

County Health Rankings (CHR) data was gathered for Graves, Marshall and McCracken Counties. This data brings together several data sources and is considered representative of the county/state population at large, due to the way in which the data was collected. Overall, all three counties fare better than the Kentucky average for health outcomes. However, Graves County has a higher number of physically unhealthy days than Kentucky (4.5) and both Graves and McCracken exceed Kentucky's average (5.5) for the number of mentally unhealthy days. Smoking percentages for the three counties are at or above Kentucky (20%), which is significantly higher than the national average of 15%. McCracken and Marshall Counties have a lower percentage of adults with obesity, while Graves County has the same percentage as the state average (41%).

A review of data from the CDC and Kentucky Cancer Registry reveals that the highest cancer death rates in the state are lung and bronchus, prostate (males), colon and rectum, breast, pancreas and liver. All three counties have higher overall cancer death rates than the state for prostate and lung and bronchus death rates. However, Graves County is lower than the state for colon and rectum, breast and liver cancer death rates. McCracken is below the state for colon and liver cancer death rates and Marshall is lower in pancreas cancer death rates.

No written comments were received regarding the 2022 Community Health Needs Assessment.

Collaborating Partners

The Mercy Health — Lourdes Hospital thanks the following organizations for their collaboration as part of the process of conducting the needs assessment:

- Purchase District Health Department
- Graves County Health Department
- Marshall County Health Department
- Paducah Area Transit System
- Camp Graves

- Heart USA
- Paducah-McCracken County NAACP
- Four Rivers Behavioral Health Regional Prevention Center
- McCracken County ASAP (Agency for Substance Abuse Policy) health coalition
- Baptist Health Paducah
- KentuckyCare
- Mercy Regional EMS
- Washington Street Baptist Church and Paducah's Warming Center
- Paducah Cooperative Ministry
- Paducah Public Schools
- Paducah-McCracken County Senior Center
- Healthy Paducah (McCracken County's health coalition)
- McCracken County Public Library
- Marshall County Public Library
- Provider Enrichment Services
- Turning Point Recovery Community Center

Information and Data Considered in Identifying Potential Need

Public health departments	Date of data/information
Graves County Health Department (GCHD)	<ul style="list-style-type: none"> • Shared Graves County Community Health Assessment survey results (2023) • Jan. 23, 2025 — Steering Committee and Focus Group • March 17, 2025 — Steering Committee Prioritization
Marshall County Health Department (MCHD)	<ul style="list-style-type: none"> • Shared Marshall County Community Health Assessment survey results (2022) • Jan. 23, 2025 — Steering Committee and Focus Group • March 17, 2025 — Steering Committee Prioritization
Purchase District Health Department (PDHD)	<ul style="list-style-type: none"> • Collaborated with Mercy Health — Lourdes Hospital and Baptist Health Paducah on Community Health Assessment survey (2024) • March 17, 2025 — Steering Committee Prioritization

Community, Organization and Stakeholder Input*	Date of Data/ Information	Nature and Extent of Input	At Risk, Medically Underserved, Low-Income or Minority Populations Represented by Organization
McCracken County Public Library	March 10, 2025	Key Informant interview	At Risk, Medically Underserved, Low-Income, Minority
Marshall County Public Library	Feb. 5, 2025 March 17, 2025	Key Informant interview Steering Committee - prioritization of needs	At Risk, Medically Underserved, Low-Income, Minority
Baptist Health Paducah	Feb. 17, 2025	Key Informant interview	At Risk, Medically Underserved, Low-Income, Minority
Provider Enrichment Services	Feb. 13, 2025	Key Informant interview	At Risk, Low-Income, Minority
Paducah Public Schools	Jan. 23, 2025	Steering Committee and Focus Group	At Risk, Medically Underserved, Low-Income, Minority
Mercy Regional Emergency Medical Services (EMS)	March 17, 2025	Steering Committee - prioritization of needs	At Risk, Medically Underserved, Low-Income, Minority
Paducah Area Transit System (PATS)	Jan. 23, 2025 Feb. 23, 2025	Steering Committee and Focus Group Key Informant interview	At Risk, Medically Underserved, Low-Income, Minority
Heart USA	Jan. 23, 2025	Steering Committee and Focus Group	At Risk, Medically Underserved, Low-Income, Minority
Camp Graves	Jan. 23, 2025 March 17, 2025	Steering Committee and Focus Group Steering Committee - prioritization of needs	At Risk, Low-Income, Minority
Paducah-McCracken County Senior Center	Jan. 23, 2025 March 17, 2025	Steering Committee and Focus Group Steering Committee - prioritization of needs	At Risk, Medically Underserved, Low-Income, Minority
Paducah-McCracken County NAACP	Jan. 23, 2025 March 17, 2025	Steering Committee and Focus Group Steering Committee - prioritization of needs	At Risk, Minority

Community, Organization and Stakeholder Input*	Date of Data/ Information	Nature and Extent of Input	At Risk, Medically Underserved, Low-Income or Minority Populations Represented by Organization
Four Rivers Behavioral Health Regional Prevention Center	Jan. 23, 2025 March 17, 2025	Steering Committee and Focus Group Steering Committee – prioritization of needs	At Risk, Medically Underserved, Low-Income, Minority
Turning Point Recovery Community Center	Jan. 23, 2025 March 17, 2025	Steering Committee and Focus Group Steering Committee – prioritization of needs	At Risk, Medically Underserved, Low-Income, Minority
KentuckyCare (Federally Qualified Health Center)	Jan. 23, 2025 March 17, 2025	Steering Committee and Focus Group Steering Committee – prioritization of needs	At Risk, Medically Underserved, Low-Income, Minority
Washington Street Baptist Church (operates Paducah’s Warming Center)	Jan. 23, 2025 March 17, 2025	Steering Committee and Focus Group Steering Committee – prioritization of needs	At Risk, Low-Income, Minority
Paducah Cooperative Ministry	Jan. 23, 2025 March 17, 2025	Steering Committee and Focus Group Steering Committee – prioritization of needs	At Risk, Low-Income, Minority
Healthy Paducah (Paducah-McCracken County’s health coalition)	Jan. 23, 2025 Feb. 17, 2025 March 17, 2025	Steering Committee and Focus Group Key Informant interview Steering Committee prioritization of needs	At Risk, Medically Underserved, Low-Income, Minority
McCracken County ASAP (Agency for Substance Abuse Policy) health coalition	Jan. 23, 2025 March 17, 2025	Steering Committee and Focus Group Steering Committee – prioritization of needs	At Risk, Medically Underserved, Low-Income, Minority
City of Paducah	Jan. 23, 2025 March 17, 2025	Steering Committee and Focus Group Steering Committee prioritization of needs	At Risk, Medically Underserved, Low-Income, Minority

*Individuals or organizations staffed by fewer than five people may not be named to protect anonymity.

Significant Community Identified Health Needs

The Community Steering Committee met for two hours on March 17, 2025. The Blueprint Kentucky consultant presented the primary and secondary data, facilitated a discussion on the findings, and led a process to identify significant health needs to recommend for consideration to the Internal Workgroup comprised of hospital leadership. After discussion and using ACHI criteria to complete a multi-vote process for prioritizing the needs, the Committee confirmed with consensus on the final significant health needs.

Ranked in order based on number of votes received:

1. Mental health and substance misuse
2. Transportation
3. Housing and homelessness
4. Food access and food insecurity
5. Poverty
6. Lack of health care providers
 - Dental providers for adults with Medicaid
 - Specialists
7. Chronic health issues — obesity, cancer, high blood pressure



Social Determinants of Health Needs — Community Level Needs that Impact Health and Well-being

Financial insecurity, including:

- Food access and food insecurity
- Housing and homelessness
- Poverty

Capacity and adequacy of service levels

- Per 2024 County Health Rankings, McCracken County is slightly above the state average, with 22% of children in poverty. Children in poverty in both Marshall (17%) and Graves (20%) Counties are below the state average of 21%. McCracken County (14%) is also above the state average (13%) for the percentage of people reporting severe housing problems, while Marshall (9%) and Graves (12%) are lower than the state average.
- Both Graves and McCracken Counties are higher than the state average for food insecurity (13%) and limited access to healthy foods (6%).
- In all three community surveys, respondents have identified cost as the largest barrier to accessing health care. Respondents identified homelessness and lack of a living wage as top risk factors.
- Key informants noted that quality of life is significantly impacted by issues surrounding housing, job opportunities, the absence of quality childcare, transportation barriers to health care, and lack of fresh and healthy foods.
- When asked for ways to better meet health needs in the community, both focus group participants and key informants cited improving both the availability and quality of housing and addressing basic needs such as food and shelter would improve health.
- Focus groups listed poverty as one of the greatest community needs, noting the rising costs of food and housing and no opportunity to build wealth. Educational opportunities for upward mobility and job training were recognized as approaches to better meet health needs.
- Although poverty is an issue in the community, focus groups noted that a strength of the current health care system is the availability of services for at-risk populations.
- One focus group identified the following social determinants of health that could make a difference in health outcomes in the future: availability to make a behavior change (healthy food options, education, food deserts), parental support and education, transportation and affordable housing.

Social Health Needs – Individual Level Non-Clinical Needs

Transportation

Capacity and adequacy of service levels

- Participants in the PDHD and GCHD community surveys identified transportation as one of the top unmet needs in the past year.
- Key informants and focus groups consistently listed transportation as a barrier to care and a challenge for community members. Key informants reported instances of clients missing medical or dental appointments due to a lack of transportation or public transportation schedules that did not align with their appointment times, directly impacting quality of life by blocking access to health care.
- According to focus group participants and key informant interviews, travel to specialty care, including some dental appointments, is difficult to access due to a lack of transportation.
- Access to food, either shopping in a grocery store or food distribution sites, can be difficult for seniors and those without transportation.

Significant Clinical Health Needs

Chronic health issues, including:

- **Obesity**
- **Cancer**
- **High blood pressure**

Capacity and adequacy of service levels

- Participants in the community surveys identified overweight/obesity as one of the main health issues.
- Secondary data from all three counties shows the community either at or below the state average (41%) for adult obesity
- Secondary data also shows the CHNA service area is higher for most of the top cancer death rates than the state.
- Focus groups noted access to cancer care as a way to better meet community health needs.
- One interviewee noted that the region has resources to address chronic health issues, but a lack of knowledge on the part of patients and health care providers on the available resources can make it difficult to connect patients to services and make the best decisions for care.

Substance misuse

Capacity and adequacy of service levels

- Per 2024 County Health Ranking data, McCracken (18), Marshall (15) and Graves (11) Counties are all significantly below the state average (43) for drug overdose deaths. However, substance misuse was identified as a top risk factor in both PDHD and GCHD community surveys.
- Substance misuse, including drugs, tobacco, vaping and alcohol, was listed as an unmet health need and unhealthy behavior by focus groups and key informant interviews.
- In the 2024 PDHD community survey, participants identified mental health and overdose in the top four most common health concerns.

Mental health

Capacity and adequacy of service levels

- Mental health is one of the top health issues identified through community surveys. In addition, secondary data depict that Graves (5.8) and McCracken (5.8) Counties are above the Kentucky average (5.3), while Marshall County (5.3) is slightly below the state average for the number of poor mental health days.
- In the 2024 PDHD community survey, participants identified mental health and overdose as the top two most common health concerns.
- In McCracken County, CDC reports 34.4% of adults feel socially isolated and 18.4% experience frequent mental distress.
- Key informants mentioned the need for more mental health professionals, including psychiatrists.
- In one focus group, 29% of the participants named mental health as the greatest health need for the communities they serve.

Lack of health care providers

Capacity and adequacy of service levels

- Participants in the community surveys for PDHD, GCHD and MCHD reported lack of providers (including specialists) as one of the main barriers to receiving health care.
- Respondents to the community surveys have also identified access to health care and health service providers as one of the strengths that can help the community become healthier.

- Key informant interviews mentioned some specialties require travel outside of the community for care, which is a barrier for many. Informants also mentioned the need for more mental health providers and the difficulty in accessing primary care services (including capacity issues).
- Key informants stated that transportation barriers directly impact quality of life by blocking access to health care.
- Community Health Workers were identified as a strategy to better meet health needs by focus group participants.
- Focus groups identified several health care providers and services that could be increased:
 - Primary care
 - Psychiatry
 - Endocrinology
 - Neurology
 - Orthopedics
 - Dermatology
 - Dentists, specifically providers who accept adult Medicaid patients
 - Urgent Care Centers

Resources Available

Due to the considerable and complex nature of the community-identified significant health needs, several organizations within the community may be available to address one or more of the needs identified in this report:

Health Care Facilities & Services

- Baptist Health Paducah
 - Mental health, obesity, substance misuse, specialty providers
- Marshall County Hospital
 - Chronic health issues, substance misuse, specialty providers
- Jackson Purchase Medical Center
 - Chronic health issues, substance misuse, specialty providers
- KentuckyCare
 - Poverty, transportation, mental health, substance misuse, chronic health issues
- Independent primary care and specialty providers
 - Chronic health issues, substance misuse, mental health, specialty providers

- Four Rivers Behavioral Health and its associated programs
 - Mental health, substance misuse
- Mercy Regional EMS
 - Chronic health issues, substance misuse, mental health, transportation
- Independent alcohol and drug treatment facilities
 - Substance misuse, mental health

Health Departments:

- Purchase District Health Department
 - Mental health, obesity, cancer, substance misuse
- Marshall County Health Department
 - Mental health, obesity, diabetes, substance misuse
- Graves County Health Department
 - Mental health, overweight/obesity, overdoses, cancer, diabetes

Other Local and National Resources:

- American Cancer Society
 - Cancer
- Camp Graves
 - Transportation, housing and homelessness, food access and food insecurity, poverty
- Child Watch Counseling & Advocacy Center
 - Mental health
- County public libraries
 - Mental health, substance misuse, housing and homelessness, poverty
- Family Service Society
 - Housing and homelessness, food access and food insecurity, poverty
- Gilda's Club
 - Cancer
- Heart USA, part of KPAP (KY Prescription Assistance Program)
 - Transportation, housing and homelessness, food access and food insecurity, poverty
- Kentucky Cancer Program
 - Cancer
- LivWell Community Health Services
 - Lack of specialists, mental health, substance misuse, chronic health issues

- Local churches
 - Transportation, housing and homelessness, food access and food insecurity, poverty
- Local health coalitions and community workgroups
 - Mental health, substance misuse, housing and homelessness, poverty, lack of health care providers, chronic health issues
- Local housing authorities
 - Housing and homelessness, poverty, mental health
- Local law enforcement
 - Mental health, substance misuse, housing and homelessness
- Marcella's Kitchen
 - Housing and homelessness, food access and food insecurity, poverty
- Marshall County Caring Needline
 - Housing and homelessness, food access and food insecurity, poverty
- Mayfield Graves County Needline and Food Pantry
 - Housing and homelessness, food access and food insecurity, poverty
- Merryman House
 - Mental health, substance misuse, housing and homelessness, poverty, transportation
- Paducah Community Kitchen
 - Housing and homelessness, food access and food insecurity, poverty
- Paducah Cooperative Ministry
 - Housing and homelessness, food access and food insecurity, poverty
- Paducah-McCracken County Senior Center
 - Transportation, housing and homelessness, food access and food insecurity, poverty, chronic health issues
- PATS (Paducah Area Transit System)
 - Transportation, poverty
- Provider Enrichment Services
 - Mental health, poverty
- Public schools systems (including family resources centers)
 - Mental health, housing and homelessness, poverty
- Purchase Area Development District
 - Transportation, housing and homelessness, food access and food insecurity, poverty

- River City Mission
 - Housing and homelessness, food access and food insecurity, poverty
- Saint Vincent de Paul
 - Housing and homelessness, food access and food insecurity, poverty
- The Salvation Army
 - Housing and homelessness, food access and food insecurity, poverty
- University of Kentucky Dental Program
 - Lack of dental providers for Medicaid
- Washington Street Baptist Church (Paducah's Warming Center)
 - Housing and homelessness, food access and food insecurity, poverty, lack of dental providers for Medicaid
- WKCTC / University of Louisville Dental Program
 - Lack of dental providers for Medicaid

Prioritization of Health Needs

The Internal Workgroup, comprised of Mercy Health — Lourdes Hospital administration and clinical/provider representation, met for 90 minutes on March 18, 2025. The Blueprint Kentucky consultant presented the primary and secondary data, facilitated a discussion on the findings, and led a process to identify significant health needs recommendations before reviewing recommendations from the Community Steering Committee. After discussion and using ACHI criteria to complete a multi-vote process for prioritizing the needs, the Workgroup confirmed the priority health needs that the hospital will create an implementation plan to address. The remaining health concerns identified through the community assessment process are currently being addressed by multiple community partners or will be best addressed individually by additional focused efforts of community organizations and partnerships.

Prioritized Social Determinants of Health Needs

Financial insecurity, including housing, homelessness and food insecurity

Following the facilitated discussion of the results of the vote on health needs, it was decided, like in 2022, similar needs could be grouped into the larger root issue of financial insecurity. Similar needs include, but are not limited to, the economy and the impact of inflation on housing and food costs, increased homelessness and the lack of availability and affordability of housing, and the need for jobs with living wages. The lack of nutritious food impacts multiple chronic conditions, including diabetes and obesity. Housing and homelessness, along with food insecurity, remain the greatest of the financial issues impacting the community.

Prioritized Social Health Needs

Transportation

Transportation issues were highlighted in community surveys, focus group discussions, key informant interviews as well as both committee meetings. Transportation barriers impact access to health care (primary care and specialty care), food and groceries, and medications from pharmacies. The Community Steering Committee and the Internal Workgroup reached consensus on this as a prioritized need.

Prioritized Clinical Health Needs

Mental health

Mental health needs were discussed in depth in focus groups, interviews and with the two committees tasked with identifying significant and priority needs. In addition, the three health departments and the neighboring regional hospital prioritized mental health as an identified health need in the service area. The need for additional providers, especially psychiatrists, and increased appointments for senior population, children and youth assessments were the top issues. Wait times for appointments have seen some improvements since the last assessment but remain a concern for many. Both the Internal Workgroup and the Community Steering Committee prioritized mental health as a clinical health need.

Chronic health issues, with an emphasis on obesity

Chronic health issues and overweight/obesity were both highlighted in secondary data and through focus groups, interviews and survey responses. Obesity was emphasized among the chronic health issues due to its specific prevalence in all primary and secondary data collection. Cancer and high blood pressure were also noted as significant chronic health issues in the service area. Additionally, as a strategy, the hospital can address the lack of primary care and specialty providers identified as a significant need within this category, through ongoing provider recruitment and efforts to increase access.. The Community Steering Committee and the Internal Workgroup agreed that continued work on chronic health issues, with a specific focus on obesity, will move toward better health outcomes in the communities served.

Substance misuse

One of the highest risk factors identified in the community surveys that affects respondents' personal health is substance misuse. Substance misuse was also listed as an unmet health need and unhealthy behavior by focus groups and key informant interviews. According to CHR, all three CHNA counties have higher than the state average (20%) of adult smokers. Graves and Marshall Counties (14%) were slightly below the state average (15%) for excessive drinking, with McCracken County (16%) higher than the state average. The Community Steering Committee and the Internal Workgroup agreed that continued work on substance use, including smoking, should be prioritized as a health need.

Significant Health Needs Not Prioritized

All significant health needs were prioritized in this CHNA.

Progress and Impact

Financial insecurity, including housing, homelessness and food insecurity

Strategies	Progress
Expand access to free health care screenings and health education resources to populations facing financial insecurity, access barriers and other social insecurities	From January 2023 through June 2025, 2,059 community members received a free health screening from Mercy Health through community-based events and programs. Screenings included clinical breast exams, fall risk assessment, A1C screenings, blood pressure checks, sports physicals, skin cancer screenings, foot assessments, PAD screenings and more.
In collaboration with community partners, explore the implementation of a fresh food program to provide fresh produce to those facing food and financial insecurities	<p>In January 2025, Lourdes Hospital received funding through the BSMH Community Health Fund to support a Client Choice Food Pantry at Paducah Cooperative Ministry (PCM), providing fresh food options to community members in need. This partnership will be the first of its kind in the region and will address the increased need for food assistance while also providing healthier food options to improve overall health and well-being. It will restore dignity to the food pantry experience, promoting positive self-esteem and mental health for clients. PCM currently serves 800 families with food each month.</p> <p>Also in 2025, Mercy Health sponsored the Southside Community Garden in Paducah, in partnership with the City of Paducah. This garden will help alleviate food insecurities by providing fresh produce to residents.</p>
Continue support of community efforts to address homelessness and provide housing options to at-risk populations	Mercy Health provides annual financial support of the regional Warming Center, operated by Washington Street Baptist Church. During the four months it was open during the 2023-24 season and 2024-2025 season, 310 people utilized the Warming Center. Mercy Health also supports other community organizations that assist with housing needs and shelter, including PCM, Community Kitchen, Housing Authority of Paducah, Family Service Society and more.
Provide at-risk patients and visitors with resources to meet their basic social needs, such as food, toiletries and clothing	In 2023, Mercy Health installed five blessing boxes on Mercy Health campuses throughout the region and implemented a centralized hospital-wide Patient Mission Closet to store food, clothing and toiletries to assist those in need. During the 2023 and 2024 holiday season, Lourdes employees collected 10,500 food and toiletry items through a hospital-wide Food Drive to help keep the Blessing Boxes and Closet stocked.
Continue hospital-based programs assisting patients in addressing financial needs, including HELP department	From January 2023 through July 2025, the HELP department served 9,314 patients. The HELP department assists Mercy Health patients with financial counseling.

Strategies	Progress
Identify patients experiencing insecurities by conducting routine screenings for health-related social needs in clinical care settings and provide identified patients with information about community resources and support services	<p>Mercy Health primary care practices screen eligible patients for various social determinants of health. In 2023, 70.8% of eligible patients were screened and in 2024, 89.5% were screened. Patients who screen positive are connected to resources. In 2024, Mercy Health Physicians added a Social Determinants of Health (SDOH) Advocate position to help connect patients who screen positive directly with community resources to address their needs.</p> <p>Additionally, in 2024, through funding from the BSMH Mission Outreach Program, Mercy Health installed 11 new digital community resource kiosks across seven counties in the region. The kiosks are located in various public health departments and other community-accessible locations, providing easy access to vital resources such as food, housing, medical assistance, financial and legal help, and more. From September 2024 through February 2025 (first six months), the 11 kiosks were utilized a total of 990 times.</p>
Expand partnerships with local Community Health Worker Programs to provide additional resources to at-risk patients	<p>Mercy Health continues to support Heart USA through providing free in-kind rental space on its campus and financial support. One of Heart USA's many programs is its Community Health Worker program, assisting clients in need. Heart USA has served 3,383 total clients through all its programs from January 2023 through March 2025. They are no longer able to track their specific CHW clients.</p>
Expand prescription assistance program partnerships to connect at-risk patients with additional medication resources	<p>Heart USA is a nonprofit organization assisting community members with navigating various prescription programs to see if they qualify to receive medications for free or at reduced cost. From January 2023 through March 2025, Heart USA has provided clients a total of \$23.7 million in prescription savings.</p>



Transportation

Strategies	Progress
Begin regular internal collaborative meetings with relevant hospital departments to create efficiencies in handling patient transportation needs	An initial workgroup meeting was held in March 2024, where it was determined it would be more efficient to meet on an as-needed basis by initiative. Internal collaborative meetings have continued to take place in 2024 and 2025 as process improvement initiatives and new community transportation resources arise.
Explore implementation of a mobile health program to bring free health care education, outreach and screenings to underserved communities	Through funding from the BSMH Mission Outreach Program in 2023, Mercy Health was able to purchase an Outreach Van, making it easier to provide free health outreach outside the walls of the hospital. From January 2023 through June 2025, 2,059 community members received a free health screening from Mercy Health at 58 events throughout the region, including free health fairs and other health-related community events.
Develop new programs to address patient and community-level medical transportation needs	<p>In January 2024, Lourdes Hospital received funding through the BSMH Community Health Fund to address transportation needs through community partnerships. This supported the installation of a new bus shelter on Mercy Health's campus, providing better access to public transit's fixed line route, and the creation of a transportation fund within Paducah Area Transit to address timely medical transportation needs for patients. From June 2024 through April 2025, 17 patients received rides.</p> <p>The funding also allowed Heart USA to start a new medical transportation program, providing free transportation to medical appointments for those without other options. From July 2024 (program launch) through March 2025, Heart USA provided medical transportation to 93 clients.</p>



Mental health, with an emphasis on pediatrics

Strategies	Progress
Increase access to mental health services through recruitment of mental health providers	From January 2023 through June 2025, Mercy Health's behavioral health team onboarded four new providers.
Offer emotional support and encourage positive coping skills through free community-based programs such as mental health-focused support groups and Camp Robin, a grief camp for children experiencing the loss of a loved one	<p>Each year, Mercy Health hosts Camp Robin, a free one-day camp for grieving children and their parents or guardians. It provides mental health support as attendees gain skills, make connections and discover inner strength while they cope with their grief from losing a loved one. In 2023 and 2024, a total of 150 children participated in Camp Robin.</p> <p>Additionally, Mercy Health's hospice chaplains host Grief Support Groups throughout the region. In 2024, Mercy Health provided free meeting space for a new community support group for survivors of suicide loss.</p>
Support school-based strategies to help improve mental well-being in schools, in collaboration with regional health coalitions and community partners	From January 2023 through June 2025, Mercy Health has supported 16 initiatives focused on youth mental health in the region, including leading efforts for McCracken County ASAP (Agency for Substance Abuse Policy)'s Drug Free Community application. If awarded, this program would fund a full-time staff member to work inside two high schools and programming for a Youth Council, directly working with students on mental health and substance use prevention.
Increase depression screenings in primary care to identify patients with mental health concerns and connect them to follow up care	In 2023, 95.8% of Mercy Health primary care patients were screened for depression. In 2024, 95.6% were screened.
Increase access to pediatric mental health services through telehealth pediatric psychiatry services available in the Emergency Department	In September 2023, Mercy Health launched telehealth pediatric psychiatry services for pediatric patients in the Emergency Department (ED) experiencing a mental health crisis. This service performs 24-hour reassessments for any pediatric patient in the ED waiting for placement, dramatically decreasing the amount of time pediatric patients spend in the ED. In 2023, 96% of consults were fielded by a provider within 8 hours. In 2024, 98% of consults were fielded by a provider within 6 hours. January through June 2025, 99% of consults were fielded by a provider within 6 hours.

Strategies	Progress
Increase training and educational opportunities for hospital employees in topics such as mental health first aid, suicide prevention and stigma reduction	In honor of Mental Health Awareness Month in May, Mercy Health provides mental health trainings for employees and the community, including Adult Mental Health First Aid, Youth Mental Health First Aid and QPR (Question, Persuade, Refer). Mental Health First Aid trainings educate on how to deal with mental health crises and substance misuse, targeted for individuals who work with either adults or youth. QPR aims to enhance suicide prevention knowledge and reduce mental health stigma. From 2023-2025, 70 were trained in Adult and/or Youth Mental Health First Aid and 76 were trained in QPR.
Participate in mental health-focused community events, providing mental health education and resources	From January 2023 through June 2025, Mercy Health's behavioral health team provided free mental health education and resources at 20 community events.
Continue to support regional health coalition work focused on creating positive conversations about mental health and its correlation with substance use	Mercy Health is an active participant in the West Kentucky Mental Health Workgroup and multiple other community coalitions focused on the correlation between mental health and substance use. From January 2023 through June 2025, Mercy Health has partnered on 14 mental health events and initiatives, including the Out of the Darkness Walk, Survivors of Suicide Loss Day event, Guess Anti-Bullying Foundation's Mental Health Murals, Behavioral Health Summit, Child Watch support, and more.



Chronic health issues

Strategies	Progress
Participate in cancer outreach and awareness efforts to encourage early detection and to increase the number of free cancer screenings offered through programs for underinsured and uninsured populations	From January 2023 through June 2025, Mercy Health's oncology team participated in 39 community events, providing free cancer education and resources. Some of those events included or linked attendees to free cancer screenings. Over that same time period, 223 people received a free skin cancer screening, 10 people received a free colonoscopy through Kentucky CancerLink and 30 women received a free clinical breast exam.
Continue partnership with Purchase Area Diabetes Connection and other community organizations, offering additional access to resources addressing chronic health conditions and promoting healthy living	<p>From 2023–2025, Mercy Health participated and served on the planning committee for the Purchase Area Health Expo, hosted by the Purchase Area Diabetes Connection health coalition. This annual health fair features free health screenings, healthy recipes, activities for all ages and educational information from community partners. In 2023, 64 people attended the Expo. In 2024, the Expo moved to a new location (The Salvation Army) to provide more walkability and reach vulnerable populations. As a result, 121 people attended in 2024.</p> <p>Additionally, Mercy Health participates and helps plan a variety of other free health fairs in the region each year, including Get Fit Graves Health Fair, Heartland Church Community Health Fair, Alpha Cares Community Health and Wellness Fair, Marshall County Health Coalition Health Fair and more.</p>
Identify health care disparities in patient population by stratifying clinical data using sociodemographic characteristics and develop written action plan to address specific disparity identified	In 2023, Mercy Health developed an action plan and workgroup to address health care disparities in its patient population. The hospital-wide workplan addresses the disproportionate burden of peripheral artery disease (PAD) and its health consequences among vulnerable, high-risk populations in rural western Kentucky. In February 2024, Mercy Health hosted a no-cost PAD screening event held at the Paducah Community Kitchen, with 53 community members screened. In 2025, Lourdes received Mission Outreach Program funding from the Foundation to purchase ankle-brachial index (ABI) machines, a noninvasive method for identifying individuals with PAD, to increase early detection and screening opportunities. ABI screenings were first available at an event in June 2025, where 11 no-cost screenings were conducted. Additional screening events are scheduled through the rest of 2025.
Begin regular internal collaborative meetings between care coordination functions across the continuum to keep patients connected to the health system and ensure their chronic disease is managed appropriately	<p>Since 2023, monthly meetings were held between the Ambulatory Care Team, Population Health Medical Director, Inpatient Case Management and Director of Network Operations to discuss needs of patients who frequently seek care at the ED or have high instances of admissions due to chronic illness. Mercy Health identifies patients to enroll in remote patient monitoring for managing chronic conditions.</p> <p>Additionally, the Virtualist Program launched in March 2025, enabling Mercy Health to connect recently discharged patients with Virtualists for follow-up care when in-person primary care visits aren't feasible. Primary care providers can also refer patients with transportation barriers to Virtualists for continued care.</p>

Strategies	Progress
Expand access to the influenza vaccine to protect vulnerable populations, decreasing flu-related hospitalizations and other negative health outcomes	Each fall, Lourdes provides the flu shot throughout the region without charge, specifically targeting populations facing access barriers and challenges, such as lack of insurance or limited financial resources. In 2023 and 2024, nine events were held in three counties and doses were donated to three local nonprofit health care organizations. A total of 1,080 community members were able to receive a free flu vaccine in those two years.
Participate in the American Red Cross blood drives to help with blood supply	Mercy Health hosts quarterly blood drives in collaboration with the American Red Cross. From January 2023 through June 2025, 500 total pints of blood were collected over the course of 10 blood drives.
Offer Congestive Heart Failure (CHF) Program to help patients manage CHF at home	In 2023, 110 patients enrolled in Mercy Health's CHF Program, with 70 patients completing the program. As of 2024, data is no longer available for this program.
Participate in the Kentucky Department of Public Health's Prediabetes Collaborative, connecting prediabetic patients to Diabetes Prevention Programs (DPP)	Mercy Health's primary care practice in Marshall County ended its partnership with this program in 2023, therefore, data is no longer available for this program and it was removed as a CHIP strategy.



Substance Use Disorder

Strategies	Progress
Encourage safe opioid disposal and prevent drug misuse by providing Deterra bags to patients receiving an opioid prescription from the hospital pharmacy and through Home Care and Hospice program	From January 2023 through June 2025, 5,400 free Deterra bags were provided to Mercy Health patients receiving an opioid prescription from its retail pharmacy.
Offer DEA Drug Take Back Days to encourage proper prescription disposal and prevent drug misuse	Mercy Health partners with community organizations to host two DEA Drug Take Back Days each year and provides a drug disposal box in the hospital's Emergency Department lobby available 24/7. Through five events (Spring and Fall 2023, Spring and Fall 2024, Spring 2025), 461.6 pounds of unused, expired, or unwanted prescription medications were collected and returned to the DEA for proper disposal. From January 2023 through March 2025, 161.2 pounds of medications were collected and properly disposed of through the take back box available in the Emergency Department.
Expand access to overdose prevention medication by enhancing Narcan To-Go Program to provide free Narcan nasal spray to at-risk patients discharged from the hospital	From January 2023 through June 2025, 1,583 free Narcan nasal spray kits were dispensed to Mercy Health patients receiving an opioid prescription or after an overdose.
Continue to support regional health coalition work focused on substance misuse	Mercy Health is an active participant in the Western Kentucky Opioid Taskforce, McCracken County ASAP (Agency of Substance Abuse Policy), Marshall County ASAP and Graves County ASAP. From January 2023 through June 2025, Mercy Health has partnered on 15 coalition initiatives, including the Recovery Walk, DAT (Drug, Alcohol, Tobacco) Conference, "SPARK" (Substance Prevention and Recovery Knowledge) Summit, Safe Ride Home Campaign, Regional Youth Tobacco Summit, Overdose Awareness Day, Drug Free Community grant application, Recovery Ready Community designation and more.
Launch Peer Support Programs with Care Management and the Emergency Department to connect patients with substance misuse with community Peer Support resources	Mercy Health partners with two Peer Support Programs to connect patients struggling with substance misuse to a Peer Support Specialist (PSS). PSS have personal experience with substance use and can offer guidance and support from a unique, empathetic perspective. In October 2023, Mercy Health joined Turning Point Recovery Community Center's Quick Response Team (QRT) for peer support services. In April 2024, Mercy Health added an additional in-house PSS through StepWorks and the Kentucky Hospital Association's ED Bridge Program. From October 2023 through June 2025, 333 total referrals have been made to both programs.

Strategies	Progress
Support local, county, and state-wide smoking and tobacco use bans to reduce the use of tobacco products in public places	Mercy Health has been an active supporter of community-organized petitions for city and county smoke-free bans across the region. From 2023-2025, Mercy Health supported two smoke-free ordinance campaigns (McCracken County and Marshall County).
Offer free smoking cessation classes through the American Lung Association's Freedom from Smoking program to provide the community with a structured, systematic approach to quitting nicotine and tobacco use	Mercy Health's Oncology team is trained as smoking cessation counselors through the American Lung Association's Freedom from Smoking program, which offers a structured, systematic approach to quitting in an eight-session, seven-week series. From January 2023 through June 2025, 8 sessions were held with 17 attendees.





Appendix

- 2025 CHNA Internal Workgroup Committee — Internal Stakeholders
- 2025 CHNA Community Steering Committee — External Stakeholders
- 2024 County Health Rankings Data
- Community Survey Results
- Focus Group and Key Informant Interviews
- Hospital Usage Data
- Blueprint Kentucky CHNA Consulting Team

CHNA Internal Workgroup – Internal Stakeholders

Rick Goins, *Chief Operating Officer*

Brett Bechtel, MD, *Chief Clinical Officer, Emergency Medicine Physician, Medical Director of Mercy Regional EMS*

Robert Doering, *Vice President of Mission Services*

Lee Ann Maloney, *Nursing Director*

Marissa Stewart-Jaynes, MD, *Primary Care and Family Medicine Physician*

Karen Purvis, *Director of Network Operations*

Sarah Forthman, *Director of Pharmacy*

John Montville, *Executive Director of Oncology*

Debbie Willoughby, *Nursing Director of Behavioral Health Services*

Jessica Toren, *Foundation President*

Tennille Rushing, *Chief Operating Officer, Mercy Health Physicians*

Missie Freburg, *Director of Care Management*

Polly Bechtold, *Director of Quality*

Jesse Morrison, *Director of Heart and Vascular Institute*

Leigh Ann Ballegeer, *Director of Community Health*

CHNA Community Steering Committee – External Stakeholders

Purchase District Health Department

Graves County Health Department

Marshall County Health Department

Paducah Public Schools

Paducah Area Transit System

Heart USA

Camp Graves

Paducah - McCracken County Senior Center

Paducah - McCracken County NAACP

Paducah Convention & Visitors Bureau

Four Rivers Behavioral Health Regional Prevention Center

McCracken County ASAP (Agency on Substance Abuse Policy)

Healthy Paducah (McCracken County's health coalition)

Turning Point Recovery Community Center

KentuckyCare

Washington Street Baptist Church (operates Paducah's Warming Center)

Paducah Cooperative Ministry

Marshall County Public Library

Mercy Regional EMS

City of Paducah

2024 County Health Rankings Data (countyhealthrankings.org)

Demographics	Kentucky	McCracken County	Graves County	Marshall County
2022 Population	4,512,310	67,490	36,412	31,777
% Less than 18 Years of Age	22.3%	21.5%	24.0%	19.9%
% 65 and Over	17.6%	21.1%	18.9%	22.7%
% Black	8.4%	10.9%	4.0%	0.6%
% American Indian & Alaska Native	0.3%	0.4%	0.6%	0.3%
% Asian	1.8%	1.0%	0.6%	0.5%
% Native Hawaiian/ Other Pacific Islander	0.1%	0.1%	0.1%	0.0%
% Hispanic	4.3%	3.0%	7.8%	1.9%
% Non-Hispanic White	83.2%	82.4%	85.0%	95.8%
% Not Proficient in English	1.1%	0%	1%	0%
% Female	50.3%	51.5%	50.5%	50.1%
% Rural	41.3%	26.8%	66.6%	85.2%

Health Outcomes	Kentucky	McCracken County	Graves County	Marshall County
Premature Death	11,100	10,500	10,500	10,100
% Fair or Poor Health	21%	20%	22%	19%
Average Number of Physically Unhealthy Days	4.5	4.4	4.8	4.3
Average Number of Mentally Unhealthy Days	5.5	5.8	5.8	5.3
% Low Birthweight	9%	9%	8%	8%

2024 County Health Rankings Data (countyhealthrankings.org)

Health Behaviors	Kentucky	McCracken County	Graves County	Marshall County
% Adult Smokers	20%	21%	23%	20%
% Adults with Obesity	41%	34%	41%	37%
Food Environment Index	6.8	6.8	7.3	8.2
% Physically Inactive	30%	28%	30%	27%
% With Access to Exercise Opportunities	70%	86%	32%	52%
% Excessive Drinking	15%	14%	14%	16%
% Driving Deaths with Alcohol Involvement	26%	21%	12%	24%
Chlamydia Rate	410.3	501.1	335.9	207.9
Teen Birth Rate	26	30	36	24
Food Insecurity	13%	12%	13%	11%
Limited Access to Healthy Foods	6%	15%	8%	3%
Drug Overdose Deaths	43	18	11	15
Insufficient Sleep	39%	38%	41%	38%

Access to Care	Kentucky	McCracken County	Graves County	Marshall County
Uninsured	7%	6%	7%	6%
Primary Care Physicians	1,600:1	990:1	3,660:1	2,440:1
Dentists	1,500:1	1,070:1	2,430:1	2,890:1
Mental Health Providers	340:1	390:1	960:1	2,650:1
Preventable Hospital Stays	3,457	3,054	6,045	2,821
Mammography Screening	42%	53%	41%	46%
Flu Vaccinations	44%	51%	42%	45%
Other Primary Care Providers	550:1	250:1	1,210:1	1,320:1

2024 County Health Rankings Data (countyhealthrankings.org)

Social & Economic Factors	Kentucky	McCracken County	Graves County	Marshall County
High School Completion	88%	93%	90%	92%
Some College Credit	63%	65%	58%	66%
Unemployment	3.9%	4.0%	4.5%	4.1%
Children in Poverty	21%	22%	20%	17%
Income Inequality	4.9	5.0	5.2	4.8
Children in Single-Parent Households	25%	29%	13%	20%
Social Associations	10.2	16.3	9.3	17.6
Injury Deaths	106	91	103	89

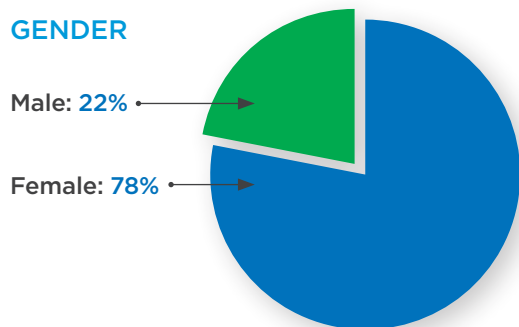
Physical Environment	Kentucky	McCracken County	Graves County	Marshall County
Air Pollution-Particulate Matter	8.2	9.5	8.6	9.0
Drinking Water Violations	No	No	No	No
Severe Housing Problems	13%	14%	12%	9%
Driving Alone to Work	79%	84%	84%	80%
Long Commute-Driving Alone	31%	13%	25%	28%



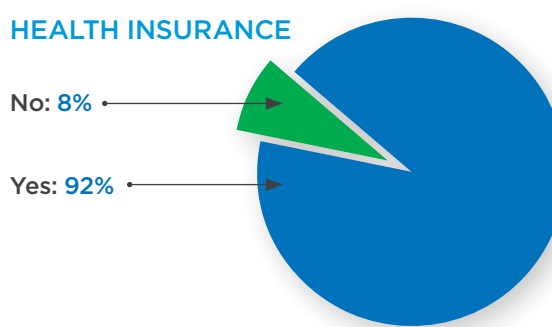
Community Survey Results

Purchase District Health Department 2024

GENDER



HEALTH INSURANCE



Where most respondents live

McCracken	56.5%
Marshall	8.9%
Hickman	5.3%
Ballard	4.2%
Calloway	3.5%

Marital status

Married	388
Divorced	112
Widowed	52
Separated	29
Never been married	117
Living with a partner	37

Educational attainment

Never attended school	1
Grades 1 through 8	10
Some high school	25
High school graduate	94
GED	31
Some college credit	125
Associates degree	137
Bachelor's degree	168
Master's degree	122
Doctoral degree	23

Employment status

Homemaker	40
Student	37
Employed for wages	521
Unemployed - looking for work	26
Unemployed - not looking for work	17
Retired	81
Self-employed	29
Unable to work	48

Race (top three categories)

White	82%
Black or African American	15%
Hispanic or Latino(a)	2%

Age (top three categories)

26-39 years old	23%
40-54 years old	35%
55-64 years old	19%

Community Survey Results

Purchase District Health Department 2024

Risk factors with greatest impact on health	
Substance misuse	71%
Lack of a livable wage	42%
Poor eating habits	39%
Homelessness or housing insecurity	35%
Lack of exercise	30%
Access to healthcare	29%
Limited access to healthy foods	23%
E-cigarette use	21%
Tobacco use	21%
Child, adult or senior abuse or neglect	18%

Community strengths that can improve health	
Good place to raise children	44%
Good schools	39%
Religious or spiritual values	36%
Access to health care (e.g. family doctor)	36%
Low crime/safe neighborhoods	33%
Parks and recreation	30%
Strong family life	22%
Affordable housing	20%
Clean environment	20%
Arts and cultural events	19%

Unmet needs in the past year	
Mental health care services	37%
Employment	31%
Housing	30%
Health care	26%
Transportation	26%
Food	26%
Child care	22%
Utilities	15%
Addiction services	14%
Elder care	12%

Most important health problems	
Mental health problems	58%
Overweight/obesity	51%
Cancers	45%
Overdose	40%
Heart disease and stroke	30%
Diabetes	29%
Suicide	15%
Respiratory/lung disease	9%
Sexually Transmitted Diseases (STDs)	8%
Teenage pregnancy	8%

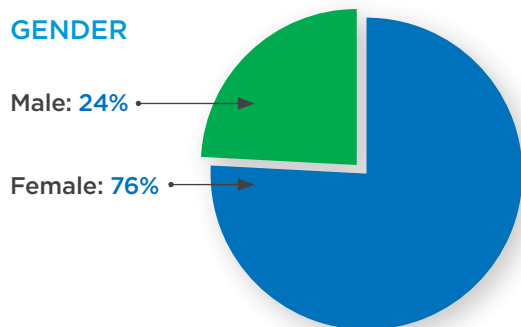
Top barriers to receiving health care	
Out of pocket costs	41.6%
No barriers exist	39.3%
Unable to take time off work	19.6%
Lack of providers (including specialists)	18.1%
Lack of convenient appointment times	15%
Lack of information	13.4%

Respondents financial well-being	
Living comfortably	35%
Getting by	40%
Finding it difficult to get by	14%
Finding it very difficult to get by	8%
Prefer not to answer	2%

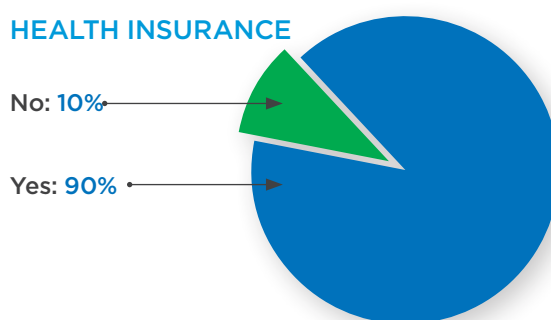
Community Survey Results

Graves County Health Department 2023

GENDER



HEALTH INSURANCE



Where most respondents live

Graves	904
McCracken	33
Calloway	26
Marshall	17
Hickman	12

Marital status

Married	519
Divorced	79
Widowed	48
Separated	25
Single	239
Living with a partner	75
Prefer not to answer	25

Educational attainment

Never attended school	4
Grades K through 8	41
Some high school	95
High school graduate	180
GED	24
Some college credit	191
Associates degree	135
Bachelor's degree	176
Master's degree	109
Doctoral degree	21
Prefer not to answer	33

Employment status

Homemaker	114
Student	158
Employed for wages	603
Unemployed - looking for work	44
Unemployed - not looking for work	23
Retired	89
Self-employed	50
Unable to work	38
Prefer not to answer	27

Race (top three categories)

White	881
Black or African American	93
American Indian or Alaska Native	11

Respondents financial well-being

Living comfortably	409
Getting by	396
Finding it difficult to get by	116
Finding it very difficult to get by	51
Prefer not to answer	33

Community Survey Results

Graves County Health Department 2023

Riskfactors with greatest impact on health	
Substance misuse	1,648
E-cigarette use	493
Lack of a livable wage	487
Poor eating habits	468
Lack of exercise	379
Access to health care	275
Child abuse or neglect	258
Bullying	246
Homelessness or housing insecurity	243
Distracted driving	237

Community strengths that can improve health	
Religious or spiritual values	757
Good schools	754
Good place to raise children	558
Access to healthcare (e.g., family doctor)	548
Strong family life	478
Low crime/safe neighborhoods	383
Parks and recreation	351
Sense of community belonging	333
Affordable housing	295
Clean environment	218

Unmet needs in the past year	
Food	113
Mental health care services	77
Health care	75
Employment	73
Utilities	70
Child care	69
Transportation	66
Housing	61
Prefer not to answer	56
Clothing	48

Most important health problems	
Mental health problems	1,025
Overweight/obesity	806
Overdose	691
Cancers	669
Diabetes	433
Heart disease and stroke	337
Suicide	291
Access to health care	237
Dental problems	214
High blood pressure	214

Top barriers to receiving health care	
Out of pocket cost	185
Lack of providers (including specialists)	85
Unable to take time off work	81
Lack of convenient appointment times	80
Lack of information about where to obtain	44
Fear of judgement or discrimination	40
Access to transportation	27
Disability (mental/physical)	15

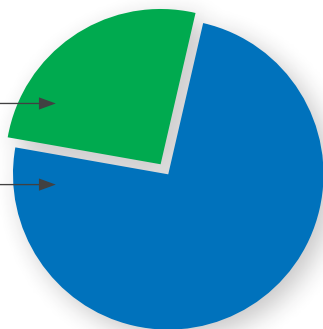
Community Survey Results

Marshall County Health Department 2022

GENDER

Male: 26%

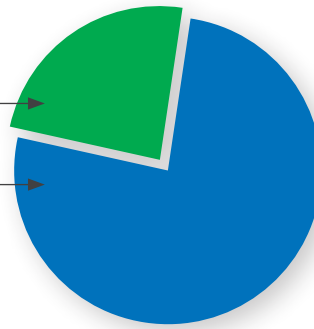
Female: 74%



ACCESS TO RESOURCES

No: 24%

Yes: 76%



Where most respondents live

Benton	60.7%
Calvert City	23.6%
Hardin	6.2%
I work in Marshall County	9.5%

Race (top three categories)

White/Non-Hispanic	90%
White/Hispanic	8%

Age group

Under 18	130
19-25	33
26-35	60
36-45	77
46-55	60
55 or older	131

Riskfactors with greatest impact on health

Substance misuse	71%
Lack of livable wage	42%
Poor eating habits	39%
Homelessness or housing insecurity	35%
Lack of exercise	30%
Access to health care	29%
Limited access to healthy foods	23%
E-cigarette use	21%
Tobacco use	21%
Child, adult or senior abuse or neglect	18%

Most important health problems

Stress	245
Obesity	159
Diabetes	150
Mental health and/or suicide	145
Economic challenges	130
Tobacco	119
Financial well being	100
Family issues	87
Access to healthy choices	79
Cancer	77

Community Survey Results

Marshall County Health Department 2022

Community strengths that can improve health	
Opportunities for physical activity	386
Marshall County Health Deptment	311
Marshall County Library System	284
Marshall County Hospital	261
Faith-based organizations	232
Law enforcement agencies	211
Mental health counseling Opportunities	198
Caring Community/Collaboration	188
Financial institutions	163
Extension office	134

Top barriers to receiving health care	
Cost	141
Lack of specialty providers	104
Lack of information	88
Lack of convenient appointment times	73
Lack of providers	68
Wait time to access care	57
Procedures not covered by insurance	48
Providers do not accept my insurance	46
Transportation	42
Fear of judgement	41

Respondents financial well-being	
Living comfortably	254
Getting by	178
Finding it difficult to get by	38
Finding it very difficult to get by	19



Mercy Health — Lourdes Hospital

Focus Group and Key Informant Interviews

Focus Group and Key Informant Questions

What are your community's strengths and assets? (Tell me what makes you proud of your community/county, including your available health care system.)

What are the most pressing issues/problems that affect health and quality of life in the county? (Identify ages that are most impacted if appropriate)

What are the barriers to addressing these issues?

Perception of the current greater health care system (including hospitals, health departments, clinics, EMS, essential services). What is working well? What could be improved or added?

What can be done to address the identified or current health needs/issues over the next three years?

Focus Group and Key Informant Interview Findings

Community Strengths

Community

- Engaged and collaborative community partners
- Resilient — find local solutions to local problems
- Community Kitchen
- Housing — rebuilding in Mayfield, revitalization in Paducah
- Arts community and opportunities

Healthy Lifestyle opportunities

- Great and improving park systems in Graves, Marshall and McCracken
- Greenway Trail in Paducah
- Increased youth sports

Access to Care

- Mercy Health Lourdes and Baptist Health — strong regional presence and “get out” and work in the community
- Kentucky Care — “boots on the ground health care”
- Harm reduction efforts

Quality of Life — Key Informant responses

Positives

- Education system — schools, community college and Murray State University
- Health care hub for the region
- Friendly area, supports neighbors and sense of pride
- Community resources — many available for the size and population of the area
- Vibrant parks departments in the area

Challenges

- Housing — options and affordability
- Unhoused population
- Poverty
- Need for more employment opportunities
- Lack of quality childcare
- Access to health care — transportation barriers
- Food deserts — lack of fresh, healthy foods

Greatest Health Needs

Chronic Diseases

- Obesity — diabetes, cardiovascular disease, arthritis
- Cancer
- High Blood Pressure

Basic Needs

- Food access and insecurity
- Housing and unhoused
- Poverty (lack of upward mobility)

Substance Use

- Drugs (including prescription misuse)
- Tobacco
- Vaping
- Alcohol

Mental Health

- Children – specialists to evaluate for ADHD
- Senior adult needs
- Additional MH providers

Barriers to Health and Health Care

- Transportation
- Education
- Access
- Dental Care
- Housing
- Poverty
- Stigma re: mental health and SUD treatment

Perceptions of Current Health Care System

Strengths/What is working well?

- Hospitals present in McCracken (2), Marshall and Graves Counties
- Specialty care available at MH Lourdes and Baptist Health
- Community partners working to streamline services, such as Paducah Cooperative Ministry
- Excellent EMS response time in Paducah/McCracken
- Successful collaborative partnerships exist with hospitals and other community partners
- Increased access to Kentucky Care FQHC
- PT/OT/SPT available
- Services available for at-risk populations
- Strong community health coalitions in counties – developed comprehensive resource guides for their counties

Opportunities for Improvement

- Additional health care providers
- Primary care physicians
- Psychiatrists
- Endocrinologists
- Neurologists
- Orthopedists
- Dermatologists
- Dentists (Medicaid needs to cover adults)
- Urgent Care Centers
- Mental health providers — psychologists
- Social workers education
- Specialized services for senior care and health
- Food access — lack of grocery stores, lack of unprocessed and fresh foods or healthier options in fast food
- “No Wrong Door” Policy — streamlined services for families
- Create an Office of Early Relational Health — coordinates early learning services and supports families

How to Better Meet Health Needs

Health care

- Community Health Workers — hospitals and clinics add to CHW staff to reduce barriers
- Address basic needs — meet food and shelter needs to improve health
- Promote health literacy and prevention
- Access to mental health treatment
- Access to cancer treatment
- Expand health care workforce — ex. ULSOM and MSU medical school

Community

- Improve housing — quality and availability
- Address basic needs — meet food and shelter needs to improve health
- Strengthen community partnerships and collaboration
- Educational opportunities for upward mobility and job training
- Parental support and education



**Blueprint
Kentucky**

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Board Approval

The Mercy Health — Lourdes Hospital 2025 Community Health Needs Assessment was approved by the Mercy Health — Lourdes Hospital Board of Directors on October 24, 2025.

Board Signature: Dr. Charles Balle

Date: Oct 24, 2025

For further information or to obtain a hard copy of this Community Health Needs Assessment (CHNA), please contact Leigh Ann Ballegeer, Director of Community Health, Mercy Health — Lourdes Hospital at LABallegeer@mercy.com.

Mercy Health CHNA Website: <https://www.mercy.com/about-us/mission/giving-back/community-health-needs-assessment>

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