Johnson Regional Medical Center

Community Health Needs Assessment 2025



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Introduction

Johnson Regional Medical Center (Medical Center) is a nonprofit organization located in Clarksville, Arkansas. A seven-member board of directors governs the Medical Center and ensures that the strategic direction of the hospital consistently meets the healthcare needs of the people which it serves. The Medical Center strives to provide high-quality outpatient and inpatient healthcare services to the community it serves.

About Community Health Needs Assessments

As a result of the *Patient Protection and Affordable Care Act*, tax-exempt hospitals are required to assess the health needs of their communities and adopt implementation strategies to address significant identified needs. Compliance with section 501(r) of the Internal Revenue Code (IRC) requires that a tax-exempt hospital facility:

- Conduct a community health needs assessment every three years.
- Adopt an implementation strategy to meet the significant community health needs identified through the assessment.
- In each subsequent assessment, evaluate the impact of previous implementation strategies on identified needs.

The community health needs assessment must take into account input from persons who represent the broad interest of the community served by the hospital facility, including those with special knowledge of or expertise in public health. The hospital facility must make the community health needs assessment widely available to the public.

This community health needs assessment is intended to document the Medical Center's compliance with IRC Section 501(r). Significant health needs of the community have been identified and prioritized so that the Medical Center may adopt an implementation strategy to address specific needs of the community.

The process involved:

- A comprehensive evaluation of the implantation strategy that was developed as a result of the community health needs assessment completed in 2022.
- Collection and analysis of a large range of data, including demographic, socioeconomic and health statistics, healthcare resources, and patient use rates.
- Interviews with key interviewees who represent a) broad interests of the community, b) populations of need, and c) persons with specialized knowledge in public health.

This document is a summary of all the available evidence collected during the community health needs assessment required by the IRS. It will serve as a compliance document, an assessment of the impact of the previous implementation strategy, and a resource until the next assessment cycle.

Acknowledgments

The community health needs assessment research team would like to thank all those who contributed to the community health needs assessment described herein. We are grateful for the individuals who gave their time and expertise to inform both the direction and outcomes of the study. We greatly appreciate the contribution of their stories.

Summary of Community Health Needs Assessment Process

The purpose of the community health needs assessment is to help the Medical Center's understanding of the health needs of the community and to document compliance with the federal laws outlined above.



The Medical Center engaged Forvis Mazars, LLP (Forvis Mazars) to assist in conducting a formal community health needs assessment. Forvis Mazars is ranked among the largest public accounting firms in the United States, with approximately 7,000 dedicated team members who serve clients in all 50 states and internationally through the global network. The community health needs assessment was conducted from July 2025 through December 2025.

Based on current regulations and other guidance from the U.S. Treasury Department and the IRS, the following steps were conducted as part of the Medical Center's community health needs assessment:

- An evaluation of the impact of actions taken to address the significant health needs identified in the 2022 community health needs assessment was completed to understand the effectiveness of the Medical Center's current strategies and programs.
- Population demographics and socioeconomic characteristics of the community were gathered and reported utilizing various third parties. The health status of the community was then assessed. Information on various metrics of population health and well-being and community conditions reported for the community by countyhealthrankings.org was analyzed. Health factors with significant opportunity for improvement were noted.
- An inventory of healthcare facilities and resources was prepared.
- Community input was provided through interviews of key interviewees. Results and findings are described in the Key Interviewees section of this report.
- Information gathered in the steps above was analyzed and reviewed to identify health issues of
 uninsured persons, low-income persons, and minority groups and the community as a whole. Health
 needs were then prioritized taking into account the perceived degree of influence the Medical Center
 has to impact the need and the health needs impact on overall health for the community. Any
 information gaps identified during the prioritization process would have been reported.

Community Served by the Medical Center

The Medical Center is located in the city of Clarksville, Arkansas, in Johnson County. Clarksville is located approximately one hour east of Fort Smith, Arkansas, and is accessible by interstate highways.

Defined Community

A community is defined as the geographic area from which a significant number of the patients utilizing hospital services reside. In preparing the 2025 Community Health Needs Assessment, management determined Johnson County to be the primary service area. In the three years since the last community health needs assessment was conducted, there have not been significant changes in the population of the area, nor have any new hospitals been opened. Therefore, Medical Center management believes that their community has remained unchanged from the previous community health needs assessment. For this needs assessment, the community will be defined as Johnson County.

Community Characteristics

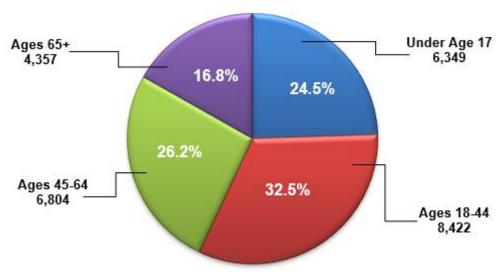
Community Population and Demographics

The community served by the Medical Center is a primarily rural area in northwest Arkansas. According to the most recent U.S. Census Bureau estimates, approximately 25,900 people live in Johnson County.



The chart below shows the breakdown of the community's population by age group. According to the U.S. Census Bureau, approximately 43% of the community's population is age 45 or older, compared with 42% in Arkansas and in the United States as a whole. These age groups use more health services than any other; consequently, the Medical Center could experience an increase in patient volume in the future.

Community Population by Age Group



Source: CARES Engagement Network

Socioeconomic Characteristics of the Community

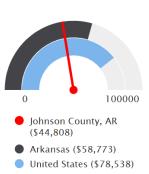
The socioeconomic characteristics of a geographic area influence the way residents access healthcare services and perceive the need for healthcare services. Factors such as educational attainment, poverty levels, unemployment rates, and insurance coverage levels contribute significantly to the health status of the community.

Socioeconomically, the community served by the Medical Center is similar to many other parts of rural Arkansas. About 18% of the population age 25 or older has obtained a bachelor's degree or higher, compared to about 35% of the U.S. and 25% of Arkansas. About 16% of the population aged 25 or older does not have a high school diploma, compared to about 11% in the country as a whole and in Arkansas. Lower levels of education have been linked to negative health outcomes, so the educational attainment of the community is relevant to the consideration of the health needs of the community.



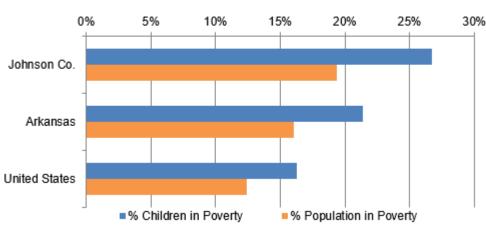
The income levels of individuals within the community also have a significant effect on their ability to access health services. The average median household income in the Medical Center's community is \$44,808, compared with \$58,773 for the state of Arkansas and \$78,538 for the United States. Lower-than-average median household income suggests that many members of the community may have difficulty obtaining healthcare, especially preventive care. The chart below shows the percentage of the community's population living below the federal poverty line, with the percentage of children under age 18 shown separately. The specific health needs of low-income members of the community should be considered carefully throughout the preparation of this assessment.

Median Household Income



Source: CARES Engagement Network

Population in Poverty

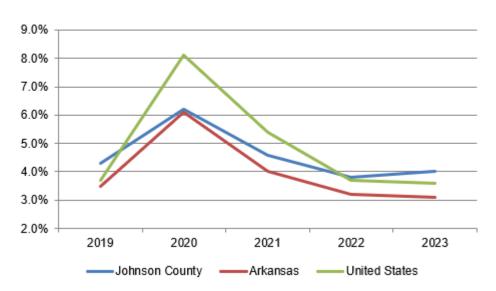


Source: CARES Engagement Network



One socioeconomic measure that has been improving steadily over the past several years is the unemployment rate. The graph below reflects a spike in 2020, due to the impacts of the COVID-19 pandemic. Since then, the unemployment rate of the community has been decreasing and returned to pre-pandemic levels, along with those of the state of Arkansas and the United States. As the economy improves and more people find employment, the socioeconomic status of the community should be strengthened and access to healthcare improved.

Unemployment Rates, 2019-2023



Source: CARES Engagement Network

Health Status of the Community

This section of the assessment reviews the health status of Johnson County residents. As in the previous section, comparisons are provided with the state of Arkansas and the United States as a whole. This assessment of the various metrics of population health and well-being and community conditions will enable the Medical Center to identify priority health issues related to the health status of its community's residents.

Good health can be defined as a state of physical, mental and social well-being, rather than the absence of disease or infirmity. According to *Healthy People 2030*, the national health objectives released by the U.S. Department of Health and Human Services, individual health is closely linked to community health. Community health, which includes both the physical and social environment in which individuals live, work and play, is profoundly affected by the collective behaviors, attitudes and beliefs of everyone who lives in the community. Healthy people are among a community's most essential resources.

Numerous factors have a significant impact on an individual's health status: lifestyle and behavior, human biology, environmental and socioeconomic conditions, as well as access to adequate and appropriate healthcare and medical services.

Persons who do not smoke, who drink in moderation (if at all), use automobile seat belts (car seats for infants and small children), maintain a nutritious low-fat, high-fiber diet, reduce excess stress in daily living and exercise regularly have a significantly greater potential of avoiding debilitating diseases, infirmities, and premature death.



The interrelationship among lifestyle and behavior, personal health attitude, and poor health status is gaining recognition and acceptance by both the general public and healthcare providers. Some examples of lifestyle and behavior and related healthcare problems include the following:

Lifestyle	Impact on Health
Smoking	Lung cancer Cardiovascular disease Emphysema Chronic bronchitis
Alcohol/drug abuse	Cirrhosis of liver Motor vehicle accidents Unintentional injuries Malnutrition Suicide Homicide Mental illness
Poor nutrition	Obesity Digestive disease Depression
Lack of exercise	Obesity Cardiovascular disease Depression Diabetes
Overstressed	Mental illness Alcohol/drug abuse Cardiovascular disease

Population Health and Well-Being and Community Conditions

An analysis of various measures of population health and well-being and community conditions for a particular community can, if improved, help make that community a healthier place to live, learn, work, and play. A better understanding of the factors that affect the health of the community will assist with how to improve the community's habits, culture, and environment. This portion of the community health needs assessment utilizes information from County Health Rankings, a key component of the Mobilizing Action Toward Community Health (MATCH) project, a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute.

Counties in each of the 50 states are assigned a health group rank ranging from 1 to 10 according to summaries of a variety of health measures. Those having high health group ranks, e.g., 1 or 2, are considered to be the "healthiest in the United States" and those with a health group rank of 10 being the "least healthy in the United States." Health group ranks are assigned based on the following summary measures:

- Population Health and Well-Being health group rankings are based on an equal weighting of one length of life measure and four qualities of life measures.
- Community Conditions health group rankings are based on weighted scores of three types of factors:
 - Health infrastructure (nine measures)
 - Physical environment (seven measures)
 - Social and economic factors (eight measures)



A more detailed discussion about the ranking system, data sources and measures, data quality, and calculating scores and ranks can be found at the website for County Health Rankings (www.countyhealthrankings.org).

As part of the analysis of the needs assessment for the community, Johnson County will be used to compare the relative health status of the community to the state of Arkansas as well as to a national benchmark, if available. A better understanding of the factors that affect the health of the community will assist with how to improve the community's habits, culture, and environment.

The following table, from County Health Rankings, summarizes the 2025 population health and well-being and community conditions metrics for Johnson County, which comprises the community for the Medical Center. Measures underperforming the state average are highlighted in red.



	Johnson County Metric Rank		National Benchmark
Population Health and Well-Being	7		
Length of Life			
Premature death – Years of potential life lost before age 75 per 100,000 population (age			
adjusted)	11,800	11,400	8,400
Quality of Life			
Poor physical health days – Average number of physically unhealthy days reported in past			
30 days (age adjusted)	6.0	5.2	3.9
Low birth weight – Percent of live births with low birth weight (<2,500 grams)	8%	9%	8%
Poor mental health days – Average number of mentally unhealthy days reported in past 30			
days (age adjusted)	6.6	6.4	5.1
Poor or fair health – Percent of adults reporting fair or poor health (age adjusted)	29%	23%	17%
Community Conditions	7		
Health Infrastructure			
Flu vaccinations – Percent of fee-for-service Medicare enrollees that had an annual flu			
vaccination	48%	46%	48%
Access to exercise opportunities – Percentage of population with adequate access to			
locations for physical activity	50%	63%	84%
Food environment index – Index of factors that contribute to a healthy food environment,			
from 0 (worst) to 10 (best)	5.5	4.4	7.4
Primary care physicians – Ratio of population to primary care physicians	1,850:1	1.480:1	1,330:1
Mental health providers – Ratio of population to mental health providers	400:1	370:1	300:1
Dentists – Ratio of population to dentists	3,710:1	2,040:1	1,360:1
Preventable hospital stays – Rate of hospital stays for ambulatory-care sensitive		,	,
conditions per 100,000 Medicare enrollees	3,040	3,014	2,666
Mammography screening – Percent of female Medicare enrollees age 65–74 that received		- , -	,
an annual mammography screening	33%	41%	44%
Uninsured – Percent of population under age 65 without health insurance	11%	10%	10%
Physical Environment			
Severe housing problems – Percentage of households with at least 1 of 4 housing			
problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing			
facilities	15%	13%	17%
Driving alone to work – Percentage of the workforce that drives alone to work	84%	80%	70%
Long commute - driving alone – Among workers who commute in their car alone, the			
percentage that commute more than 30 minutes	18%	28%	37%
Air pollution: particulate matter – Average daily density of fine particulate matter in	-		
micrograms per cubic meter (PM2.5)	7.9	8.3	7.3
Drinking water violations – Indicator of the presence of health-related drinking water	-		
violations. 'Yes' indicates the presence of a violation, 'No' indicates no violation	No		
Broadband access – Percentage of households with broadband internet connection	70%	85%	90%
Library access – Library visits per person living within the library service area per year	1	2	2
Social and economic factors			
Some college – Percentage of adults ages 25–44 with some post-secondary education	44%	59%	68%
High school completion – Percentage of adults ages 25 and over with a high school	,.	0070	0070
diploma or equivalent	84%	89%	89%
Unemployment – Percentage of population ages 16 and older unemployed but seeking	0.70	0070	0070
work	4.4%	3.3%	3.6%
Income inequality – Ratio of household income at the 80th percentile to income at the 20th	22.270	0.070	2.270
percentile	4.5	4.8	4.9
Children in poverty – Percent of people under age 18 in poverty	20%	20%	
Injury deaths – Number of deaths due to injury per 100,000 population	87	91	84
Social associations – Number of membership associations per 10,000 population	8.1	11.7	9.1
Child care cost burden – Child care costs for a household with two children as a percent	V.1	11.7	U.1
of median household income	29%	30%	28%
eea.aeaconord income	2070	0070	2070

Above information shows that there are opportunities for the Medical Center to take positive steps toward improving the community's health.



Healthcare Resources

The availability of health resources is a critical component to the health of a county's residents and a measure of the soundness of the area's healthcare delivery system. An adequate number of healthcare facilities and healthcare providers are vital for sustaining a community's health status. Fewer healthcare facilities and healthcare providers can impact the timely delivery of services.

A limited supply of health resources, especially providers, results in the limited capacity of the healthcare delivery system to absorb charity and indigent care, as there are fewer providers upon which to distribute the burden of such care. This section will address the availability of healthcare resources to the residents of the Medical Center's community.

Hospitals and Health Centers

The Medical Center has 59 acute beds and is the only hospital in the community. However, there are several other hospitals that receive a significant share of the community's patients. The following chart summarizes hospital services available to the residents of Johnson County:

Summary of Area Hospitals					
		Facility	Miles from	Bed	Annual
		Туре	the Medical Center	Size	Discharges
Johnson Regional Medical Center	1100 E. Poplar Ave., Clarksville, AR 72830	Short-term Acute Care	-	59	1,794
St. Mary's Regional Medical Center	1808 W. Main St., Russellville, AR 72801	Short-term Acute Care	24	137	5,003
Mercy Hospital Fort Smith	7301 Rogers Ave., Fort Smith, AR 72903	Short-term Acute Care	62	256	20,819
Baptist Health Medical Center - Fort Smith	1001 Towson Ave., Fort Smith, AR 72901	Short-term Acute Care	62	279	10,636
Baptist Health Medical Center - Little Rock	9601 Baptist Health Drive, Little Rock, AR 72205	Short-term Acute Care	97	809	27,275
Arkansas Heart Hospital	1701 S. Shackelford Road, Little Rock, AR 72211	Short-term Acute Care	97	112	4,680
UAMS Medical Center	4301 West Markham, Little Rock, AR 72205	Short-term Acute Care	100	545	23,241
Source: Costreportdata.com					

The following is a brief description of the healthcare services available at each of these facilities:

St. Mary's Regional Medical Center – Located in Russellville, Arkansas, St. Mary's is approximately 30 minutes southeast of the Medical Center. It offers a full range of medical services and diagnostic facilities.

Mercy Hospital Fort Smith – Located in Fort Smith, Arkansas, Mercy Hospital is approximately one hour west of the Medical Center. The hospital is an acute care facility offering a full range of inpatient and outpatient services, including neonatology, cancer treatment, home care, and wound care.

Baptist Health Medical Center – Fort Smith – Located in Fort Smith, Arkansas, Baptist Health Medical Center Fort Smith is approximately one hour west of the Medical Center. It is an acute care facility offering a full range of inpatient and outpatient services, including cancer treatment, cardiac rehabilitation services, women's services, and stroke care services.

Baptist Health Medical Center – Little Rock – Located in Little Rock, Arkansas, Baptist Health Medical Center Little Rock is approximately one and a half hours southeast of the Medical Center. It is an acute care facility offering a full range of inpatient and outpatient services.

Arkansas Heart Hospital – Located in Little Rock, Arkansas, Arkansas Heart Hospital is approximately one and a half hours southeast of the Medical Center. Arkansas Heart Hospital is an acute care facility dedicated to prevention, diagnosis, and treatment of cardiovascular disease.

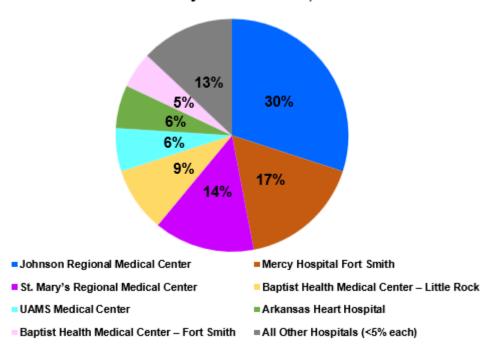
UAMS Medical Center – Located in Little Rock, Arkansas, UAMS Medical Center is approximately one and a half hours southeast of the Medical Center. It is an acute care facility offering a full range of inpatient and outpatient services.



Medical Center Market Share

The market share of a hospital relative to that of its competitors may be based largely on the services required by patients and the availability of those services at each facility. For this study, the market share of the Medical Center was considered based on the type of services required by those patients in the community. The ability to attain a certain relative market share (percentage) of the community varies based on a number of factors, including the services provided, geographical location, and accessibility of each competing facility. The following chart presents the relative market share of each hospital that had discharges of residents from the community. This table presents an analysis of data for the most currently available year, showing the percentage of total Medicare discharges from each hospital. This information provides an idea of summary market share, as well as the outmigration of patients from the community. For 2024, the Medical Center maintained approximately 30% of all discharges from the community, with Mercy Hospital Forth Smith capturing around 17%, St. Mary's Regional Medical Center capturing around 14%, Baptist Health Medical Center — Little Rock capturing around 9%, UAMS Medical Center capturing around 6%, Arkansas Heart Hospital capturing around 6%, and Baptist Health Medical Center — Fort Smith capturing around 5%. The remaining 13% of discharges are made up of numerous hospitals, each with less than 5% of the total community discharges.

Community Market Share, 2024



Because Arkansas law prohibits the Arkansas Department of Health from providing hospital-specific discharge information, the data in the chart above was estimated based on Medicare discharges by ZIP code and hospital, which is available from the Centers for Medicare & Medicaid Services.

Other Healthcare Facilities and Providers

In addition to the hospitals above, Johnson County has some other resources for residents seeking healthcare, including the following:

Johnson County Health Unit – The Johnson County Health Unit exists to promote and protect the public's health. The local health unit provides services including Women, Infants, and Children (WIC), family planning, prenatal care, immunizations, communicable disease follow-up, sexually transmitted disease and HIV testing, tuberculosis testing and treatment, breast care and cervical cytology follow-up, and environmental services.



Johnson County Health and Rehabilitation – This long-term care skilled nursing facility offers long-term care, respite care, and hospice. It also offers short-term rehabilitation, physical therapy, occupational therapy, and speech therapy to its patients.

Key Interviewees

Speaking with key interviewees (community stakeholders who represent the broad interest of the community with knowledge of or expertise in public health) is a technique employed to assess public perceptions of the county's health status and unmet needs. These interviews are intended to ascertain opinions among individuals likely to be knowledgeable about the community and influential over the opinions of others about health concerns in the community. Key interviewees include Johnson County Health Department administrator, as well as individuals who are knowledgeable about populations within the community whose health and quality of life may not be as good as others, such as representatives of organizations serving the ethnic minorities, low-income individuals, and the elderly.

Methodology

Interviews were conducted from August 2025 through November 2025. Interviewees were determined based on their specialized knowledge or expertise in public health or their involvement with underserved and minority populations.

All interviews were conducted by Medical Center personnel using a standard questionnaire. A copy of the interview instrument is included in the appendices. A summary of the interviewees' opinions is reported without judging the truthfulness or accuracy of their remarks. Interviewees provided comments on the following issues:

- Health and quality of life for residents of the primary community
- Barriers to improving health and quality of life for residents of the primary community
- Opinions regarding the important health issues that affect community residents and the types of services that are important for addressing these issues
- Delineation of the most important healthcare issues or services discussed and actions necessary for addressing those issues

Interview data was initially recorded in narrative form. Interviewees were assured that personal identifiers such as name or organizational affiliations would not be connected in any way to the information presented in this report. This technique does not provide a quantitative analysis of the leaders' opinions, but reveals community input for some of the factors affecting the views and sentiments about overall health and quality of life within the community.

Key Interview Results

As stated earlier, the interview questions for each key interviewee were identical. The questions on the interview instrument are grouped into four major categories for discussion:

- 1. General opinions regarding health and quality of life in the community
- 2. Underserved populations and communities of need
- 3. Barriers to improving health and quality of life
- 4. Most important health and quality of life issues



While many issues were raised during the interviews, a few items stood out as being particularly important. These issues are summarized below:

- Majority of the interviewees noted improvements in health and quality of life in the community over the past few years. Factors that were mentioned as contributing to these improvements included more resources in the community for substance abuse counseling and recovery options, physician availability, opening of an urgent care clinic, available healthcare and health education resources, as well as increased access to exercise opportunities, such as addition of walking and bicycle trails, additional sidewalks, parks, swimming areas, and inclusive playgrounds.
- Interviewees noted several barriers to continued improvement of health and quality of life in Johnson County, such as continued need for health education, including preventive healthcare and healthy habits, need for access to resources such as fresh produce, access to affordable transportation, and need for more free health screenings.
- Interviewees stated that access to affordable healthcare continues to be a crucial need in the community.
- Declining mental health, substance abuse, obesity, and lack of health literacy were mentioned as negatively impacting health and quality of life in the community.
- Low-income individuals, minorities, mentally ill, and individuals with substance addictions were
 mentioned as having a more difficult time obtaining necessary/preventive medical services. Elderly
 individuals in rural areas experience less availability for transportation to access healthcare services.

Evaluation of Response to 2022 CHNA

The Medical Center prepared an implementation strategy in response to the needs identified in its 2022 needs assessment. A listing of those needs, along with the steps taken by the Medical Center to address them, is below:

- Recruitment of additional primary care providers
 - The Medical Center actively pursued recruitment initiatives by partnering with the Rural Health Association of Arkansas to host primary care medical students from the University of Arkansas for Medical Sciences (UAMS). Through this collaboration, students were provided the opportunity to tour the Medical Center's facility and engage in a panel discussion with primary care providers. This initiative aimed to promote interest in rural healthcare and increase visibility of rural hospitals across the state.
 - Additionally, the Medical Center established a partnership with Conway Regional Health System to host residents during their rural health rotation. This collaboration allows residents to gain hands-on experience in the Medical Center's facility, further supporting recruitment efforts and fostering interest in rural primary care practice.
- Health and wellness education
 - The Medical Center actively supports community health through multiple educational outreach initiatives across Johnson County. The Paramedic Director and Emergency Department Director have delivered health education to both community members and students at the University of the Ozarks in Clarksville, promoting awareness and preventive care.



- Mental health, including substance abuse treatment and prevention
 - Staff from the Behavioral Health Unit have conducted educational sessions for local colleges and inmates at the county jail, addressing mental health awareness, coping strategies, and access to support services. These efforts reflect the Medical Center's commitment to improving overall community wellness through education and engagement.

Because population health data takes time to become publicly available, it is difficult to quantitatively assess the impact of actions taken by the Medical Center in response to the previous needs assessment. However, there are indications that the Medical Center's efforts are having a positive effect on the health of the community. The Medical Center believes that as it continues to work to meet the health needs of the community, further gains will be made in these and other areas where a need has been identified.

Identification and Prioritization of Health Needs

Based on a review of the data gathered during this assessment, including leading causes of death, rankings of health outcomes and factors as well as surveys and interviews, numerous health needs were identified. These needs were prioritized and evaluated to determine which were significant to the community.

The criteria included the numbers of persons affected; the seriousness of the issue; whether the health need particularly affected persons living in poverty or members of an underserved population; and availability of community resources to address the need.

As a result, the following list of significant needs was identified:

- 1. Health and wellness education
- 2. Access to affordable healthcare, including primary care and specialty care
- 3. Mental healthcare, including substance abuse treatment and prevention

The Medical Center will develop an updated implementation strategy to address the needs identified during the community health needs assessment. This assessment will be made publicly available on the Medical Center's website. Public comments on this assessment may be directed to the Medical Center's administration at 1100 East Poplar Street, Clarksville, Arkansas 72830.



APPENDICES



KEY INTERVIEW PROTOCOL



KEY INTERVIEW

Community Health Needs Assessme	nt for: Johnsor	n Regional Medical	Center	
Interviewer's Initials:				
Date:	Start Time:		End Time:	
Name:		Title:		
Agency/Organization:				
# of years living in Johnson County:_	# c	of years in current p	osition:	
Email address:	_			

<u>Introduction</u>: Good morning/afternoon. My name is **[interviewer's name]**. Thank you for taking time out of your busy day to speak with me. I'll try to keep our time to approximately 40 minutes, but we may find that we run over—up to 50 minutes total—once we get into the interview.

Johnson Regional Medical Center is gathering local data as part of developing a plan to improve health and quality of life in Johnson County. Community input is essential to this process. A combination of surveys and key interviews are being used to engage community members. You have been selected for a key interview because of your knowledge, insight, and familiarity with the community. The themes that emerge from these interviews will be summarized and made available to the public; however, individual interviews will be kept strictly confidential.

To get us started, can you tell me briefly about the work that you and your organization do in the community?

Thank you. Next, I'll be asking you a series of questions about health and quality of life in Johnson County.

As you consider these questions, keep in mind the broad definition of health adopted by the World Health Organization: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity," while sharing the local perspectives you have from your current position and from experiences in this community.



Questions:

- 1. In general, how would you rate health and quality of life in Johnson County?
- 2. In your opinion, has health and quality of life in Johnson County improved, stayed the same, or declined over the past few years?
- 3. Why do you think it has (based on answer from previous question: improved, declined, or stayed the same)?
- 4. What other factors have contributed to the (based on answer to question 2: improvement, decline, or to health and quality of life staying the same)?
- 5. What barriers, if any, exist to improving health and quality of life in Johnson County?
- 6. In your opinion, what are the most critical health and quality of life issues in Johnson County?
- 7. What needs to be done to address these issues?
- 8. The prior CHNA indicated the following as the most significant health needs. Is there anything that is not on the list that should be?
 - Recruitment of additional primary care providers
 - Health and wellness education
 - Mental health, including substance abuse treatment and prevention
- 9. What do you think is most critical health need included on the list above or other of the community?
- 10. Do you think any of the above have improved over the last 3 years? Why or why not? What needs to be done to continue to improve in these areas?
- 11. In your opinion, are any the following areas in which the Medical Center should be addressing? Why or why not?
 - Economic Development
 - Affordable Housing
 - Poverty
 - Education
 - Healthy Nutrition
 - Physical Activity
 - Drug and Alcohol Abuse
- 12. Are you aware of the available health screenings at JRMC? If not, where would you look to obtain information of the available screenings? What can JRMC do to increase awareness?
- 13. Are there people or groups of people in Johnson County whose health or quality of life may not be as good as others? Who are these persons or groups?



- 14. Are there people or groups of people who have a more difficult time obtaining necessary/preventive medical services? If so, who are these persons or groups? Why do you think they have a more difficult time? What can be done to improve the situation?
- 15. How would you rate the Medical Center's efforts on communicating how they are addressing the identified health needs? How have you received communication regarding the Medical Center's efforts?
- 16. What do you think is the hospital's role in addressing the identified health needs of the community?

<u>Close:</u> Thanks so much for sharing your concerns and perspectives on these issues. The information you have provided will contribute to develop a better understanding about factors impacting health and quality of life in Johnson County. Before we conclude the interview,

Is there anything you would like to add?



SOURCES



Sources

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