Harris Regional Hospital 2025

Community Health Needs Assessment

-Jackson County, North Carolina-



Adopted by Board of Trustees: 09/09/2025



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Letter to the Community

Dear Community,

The mission of Harris Regional Hospital is simple: *making communities healthier*. Patients can expect high-quality health care delivered with a personal touch, while we continue expanding services to meet the needs of individuals and families across our region.

Every three years, we conduct a community health needs assessment to gather feedback and insight from those we serve. This process helps us understand the impact of our efforts and identify changes needed to advance the health of our community.

The 2025 assessment not only highlights key local health needs but also lays out an action plan for how Harris Regional Hospital will respond. Our priority is ensuring that people can access as much care as possible close to home. Through expanded services, telemedicine, and strong partnerships with other organizations, we are committed to being the hub for health care in Jackson and surrounding counties. The accompanying implementation strategy defines the needs, outlines how we will address them, and establishes measures for success.

We also recognize that good health depends on more than medical care alone. Harris works closely with local government, nonprofits, and other partners to address broader issues—such as affordable housing, access to childcare, and other social factors—that directly affect health and well-being.

As a diverse facility, Harris strives to be a place where patients choose to receive care, physicians and providers want to practice, and employees are proud to work. I remain committed to leading our health system in continuous improvement and growth to meet your needs. Together, as part of this wonderful community, we can make our region healthier for all.

Sincerely,

Ashley Hindman

CEO | Harris Regional Hospital & Swain Community Hospital

Community Health Needs Assessment (CHNA) Overview

In 2025, Harris Regional Hospital ("HRH") performed a Community Health Needs Assessment (CHNA) in partnership with Strata Decision Technology ("Strata") to determine the health needs of the local community and develop an accompanying implementation plan to address the identified health needs of the community.

CHNA Purpose

A CHNA is part of the required hospital documentation of "Community Benefit" under the Affordable Care Act for 501(c)(3) hospitals. It uses systematic, comprehensive data collection and analysis to provide information about the community including health status, needs, and disparities. The CHNA also offers a targeted action plan to address areas of need and allows the hospital to truly understand the health needs of the community it serves.

CHNA Facility Benefits



- Identify health disparities and social determinants to inform future initiatives, programs, and outreach strategies
- Identify gaps in healthcare
- Develop an understanding of perceptions and ideas among community members
- Form collaborations with community organizations to address local health needs

The core elements of a CHNA include:

- > a definition and description of the community served
- a description of the process and methods used to conduct the CHNA
- a description of how the hospital facility solicited and took into account input received from community members
- a description of the identified significant health needs of the community, including selection process and criteria
- > a description of resources available to address the significant health needs
- > an evaluation of the impact of any actions that were taken to address the significant health needs identified in the immediately preceding CHNA

Community Health Needs Assessment (CHNA) Overview

The CHNA Process

The process to conduct the CHNA included the following:

Community Health Analysis

Definition and description of the community served by the organization, including analysis of population trends and health outcomes.

Community Input

Survey of local experts and community members to gain insight on local health needs, perceptions, and improvement progression.

Community Summit

Community gathering of local experts and leaders to discuss significant health issues and ideas to improve the health of the community served.

Implementation Planning

Collaborative plan to prioritize and address community health needs in a published CHNA report.

Harris Regional Hospital's health priorities identified through the 2025 process are:

- (1) Children's Health
 - 2 Heart Disease
- (3) Stroke
- 4 Women's Health

This report was approved by the Board of Trustees on 09/09/2025.

Process and Methods used to Conduct the Assessment

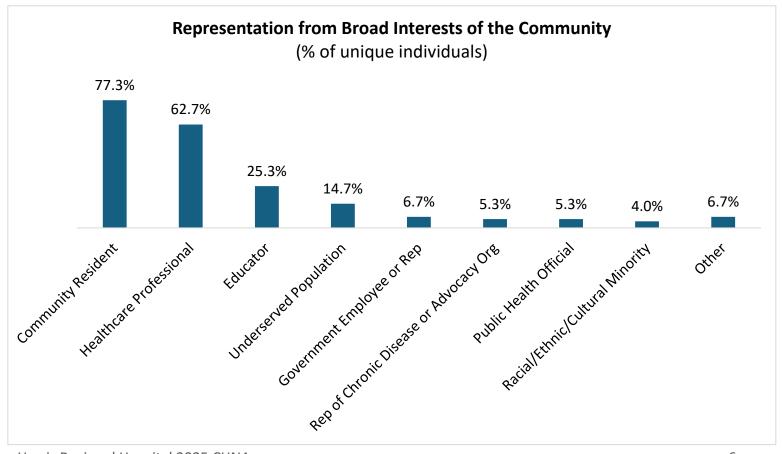
To assess the health needs of the community, a comprehensive approach was utilized. This included collecting community health data via secondary sources and a survey of community members to assess healthcare needs. A community summit was then held to review these inputs with community stakeholders to prioritize the health needs of the community and create action plans.

Community Health Data Collection and Analysis

Harris Regional Hospital relied on secondary source data to define and assess the community. This data was sourced at the county level from available public sources, including www.countyhealthrankings.org and ESRI.

A community survey was deployed by Harris Regional Hospital to gain input on local health needs, including those of priority populations such as the medically underserved, low-income, and minority populations. The survey received feedback from 54 community members. The survey was open from April 16, 2025 to May 23, 2025 and distributed digitally. The Community Summit was held on June 25, 2025 and had 21 participants.

Survey respondents and summit participants represented the stakeholder groups below:



About Harris Regional Hospital

Harris Regional Hospital and Swain Community Hospital serve the healthcare needs of four of the westernmost counties of North Carolina. Our longstanding reputation for quality, service, and compassion is what makes us stand out as the place for visitors, seasonal residents, and lifelong community members to receive outstanding healthcare.

Our number one goal is to provide a world-class patient experience. No matter how long your stay in our hospital, the quality of care you receive is our number one priority, each and every day. Not only is the quality of the clinical care you receive important, but so is how you feel when you're in our care.

We sincerely hope your health does not require a visit with us, but should you or your loved ones need care, you can trust that you're in good hands with us.

Harris Regional Hospital and Swain Community Hospital partnered in 1997 to serve Jackson, Swain, Macon and Graham counties with primary and subspecialty care, outpatient facilities, and urgent care.

Harris Regional Hospital is an 86-bed acute care facility located in Sylva, NC. With a long-standing reputation for excellent care, this fully-accredited hospital has been providing care to western North Carolina residents since 1925. Harris offers five major service lines, including orthopedics, cardiology, general surgery, women's care, and emergency medicine, as well as sports medicine, physical therapy, imaging and laboratory services, and many other areas of subspecialty care.

Swain Community Hospital is a 48-bed, fully-accredited critical access hospital located in Bryson City, NC, which has been serving the residents of Swain and Graham counties since 1948. The hospital, along with an outpatient physician practice, offers primary and inpatient care, as well as emergency, laboratory, imaging, rehabilitation, urology, cardiopulmonary, geriatric outpatient, pediatric and gastroenterology services, and a pain clinic.

The Medical Park of Franklin is an outpatient facility serving residents of Macon county and surrounding communities with a full range of services including primary care, imaging, and rehabilitation services, as well as other specialty services like orthopaedics and pediatric and women's care.

Mission

Making communities healthier®

Vision

We want to create places where people choose to come for healthcare, physicians and providers want to practice, and employees want to work.

Values







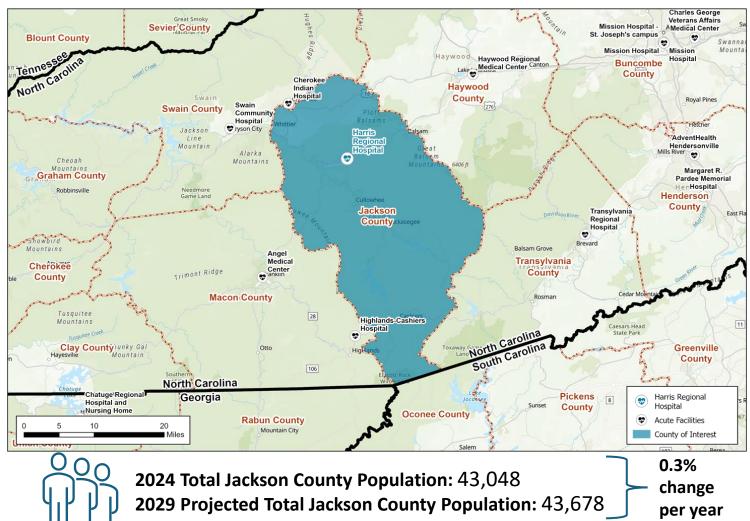




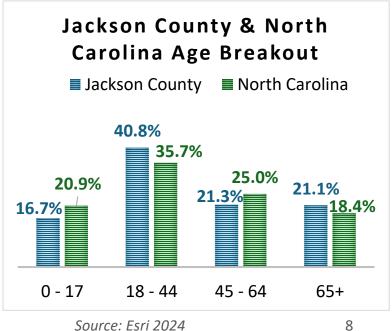


Community Served

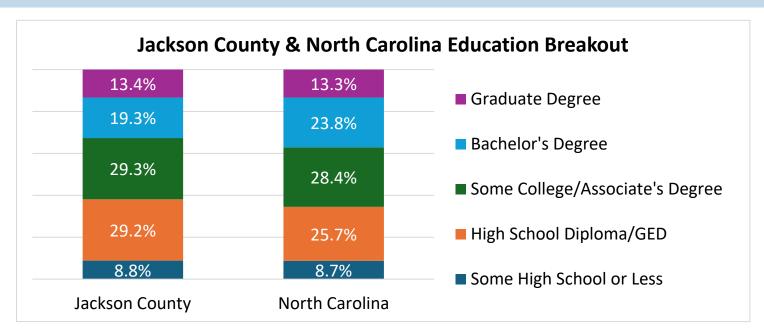
For the purpose of this study, Harris Regional Hospital defines its service area as Jackson County, North Carolina.



Race & Ethnicity				
	Jackson Co.	North Carolina		
White	76.7%	60.9%		
Black	2.1%	20.6%		
American Indian	9.5%	1.3%		
Asian/Pacific Islander	1.2%	3.7%		
Other Race	4.2%	6.3%		
Two or More Races	6.2%	7.3%		
Hispanic Origin	8.3%	11.5%		

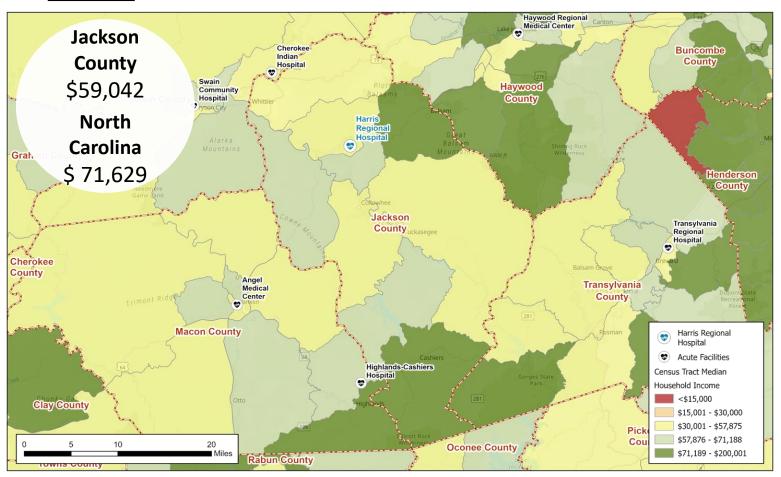


Community Served





2024 Median Household Income {by Census Tract}



Census Tract: small, relatively permanent statistical subdivisions of a county uniquely numbered; average about 4,000 inhabitants

Jackson County Community Health Characteristics

The data below provides an overview of Jackson County's community health including health behaviors, quality of life, socioeconomic factors, access to health and physical environment. For detailed descriptions and dates for each measure, please visit https://www.countyhealthrankings.org/app/north-carolina/2025/overview. Each indicator impacts the health of the entire community.

Health Status Indicators

Health Behaviors



Teen Births per 1,000

> 11 NC: 17

Adult **Smoking**

16%

NC: 15%



Adult Obesity

32%

NC: 34%



Food Insecurity

17%

NC: 14%



Sexually **Transmitted** Infections*

549.4

NC: 603.1

*New cases of chlamydia diagnoses per 100,000

Quality of Life



76.3 NC: 75.9



Poor or Fair Health



NC: 18%



Diabetes Prevalence

10%

NC: 11%

Suicide Rate per 100,000



NC: 13

Average number of physically and mentally unhealth days in the last 30 days

Poor Physical

4.3

Health Days

NC: 4.1

Poor Mental

5.3

NC: 4.9 **Health Days**

Excessive

Drinking

20%

NC: 20%

Jackson County Community Health Characteristics

Socioeconomic Factors





3.6%

NC: 3.5%





\$39.22

NC: \$45.60



Child Care
Cost Burden

27%

NC: 25%



Children in Poverty

21%

NC: 18%



Injury Deaths per 100,000

105

NC: 93



High School Graduation

89%

NC: 86%

Access to Health

Uninsured

16%

NC: 11%

Preventable Hospital Stays

per 100,000

1,923

NC: 2,670

Access to Exercise Opportunities

98%

NC: 78%

Number of people per 1 provider



Primary Care Provider

1,400

NC: 1,410



Dentist

2,260

NC: 1,630



Mental Health Provider

210

NC: 300

Physical Environment



Severe Housing Problems**

16%

NC: 14%



Severe Housing Cost Burden***

13%

NC: 13%



Drinking Water Violations

Yes



Broadband Access

76%

NC: 89%

^{*}The hourly wage needed to cover basic household expenses plus all relevant taxes for a household of one adult and two children.

^{**%} of households with at least 1/4 of problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities

^{***%} of households that spend 50% or more of their household income on housing

Impact Since Last CHNA

The IRS requires there to be an evaluation of the impact of any actions that were taken to address the significant health needs identified in the immediately preceding CHNA. The health priorities identified in the 2022 CHNA are listed below.



Written comments and insights were gained from community members through the Harris Regional Hospital Community Survey regarding the 2022 identified health priorities and implementation plan. Details of the comments and actions Harris Regional Hospital has taken to address the identified health priorities can be found on the next two pages.

Impact Since Last CHNA

Obesity/Physical Activity/Nutrition

- Implement community-based programs by working to develop programs that leverage available outdoor recreational spaces and promote community-wide physical activities
- Collaborate for healthy food access to address the lack of healthy food options and reliance on fast food
- 3. Educational workshops by partnering with and hosting other community agencies at the hospital

Themes from Community Survey Comments (11 responses)*:

- Lunch and learns (2)
 - One mentioned these were held on diet and nutrition
- Educational workshops (2)
 - o One mentioned workshops for orthopedic needs
- Not aware/don't utilize (2)

Substance Abuse Prevention

- Expand access to treatment to address the increase in opioid-related ED visits and deaths
- 2. Develop educational resources, materials, and programs
- 3. Stigma reduction by helping to address the stigma associated with substance abuse and providing community education and support programs

Themes from Community Survey Comments (7 responses)*:

- Community education (2)
 - Community education on treatment options
 - Working with partners for education

Impact Since Last CHNA

Behavioral Health

- 1. Increase access to mental health services
- 2. Stigma reduction by developing campaigns to reduce the stigma associated with mental health issues
- 3. Support for older adults by providing specialized programs and services tailored to the aging population

Themes from Community Survey Comments (8 responses)*:

- Not aware of Harris Regional's efforts (2)
 - I think 3rd party programs provide behavioral health services way more than Harris.
 - o I am aware of other behavioral health assistance in our community.

Methods of Identifying Health Needs

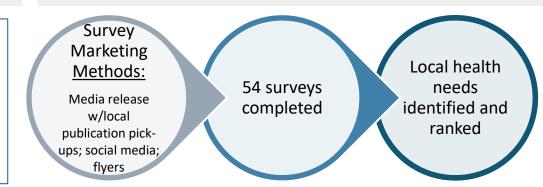
Analysis of existing data

Utilization of secondary data sources to gain analytical insights of the community

Data source: County Health

Rankings

Collection of new data



Evaluate indicators and responses on below criteria

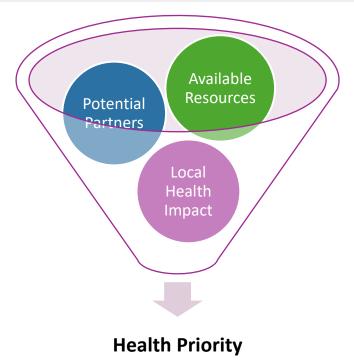
Severity or urgency of health need

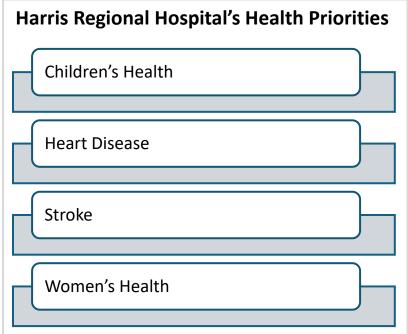
Feasibility and effectiveness

Impact on health disparities

Importance identified by community

Select priority health needs for implementation plan



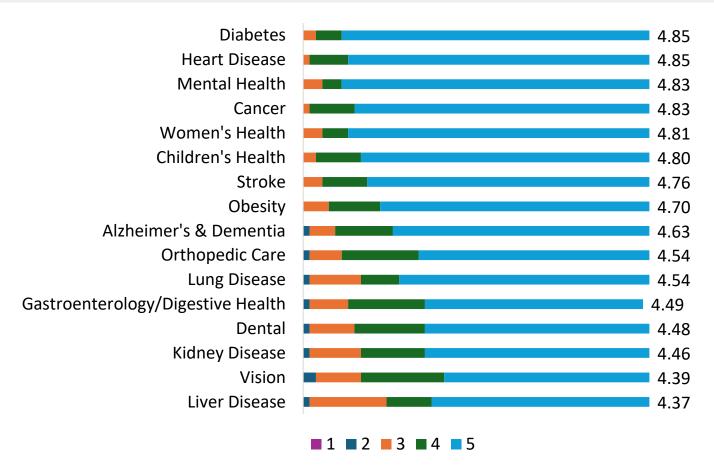


The health needs of the community include requisites for the improvement and maintenance of health status both in the community at large and in particular parts of the community, such as particular neighborhoods or populations experiencing health disparities. The community survey asked questions regarding health factors, lifestyle and personal factors, and community and healthcare services factors to better understand the local needs for the health status including groups with the highest health needs.

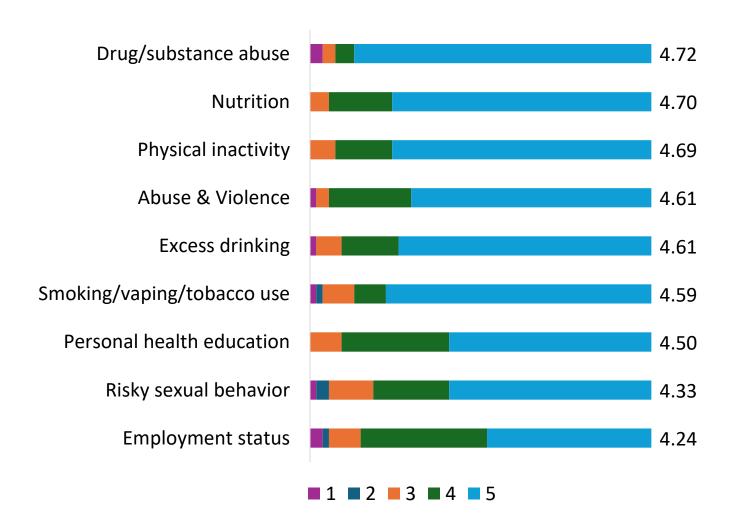
Health factors addressed areas such as chronic conditions, health conditions, and physical health. Lifestyle and personal factors addressed areas that affect the individual's health outcomes such as physical inactivity and substance abuse. Community and healthcare services factors addressed social determinants that influence community health, such as access to care, safety, and affordability.

In our community survey, respondents had the opportunity to rate the importance of addressing different components of each factor. Results of the rankings are below.

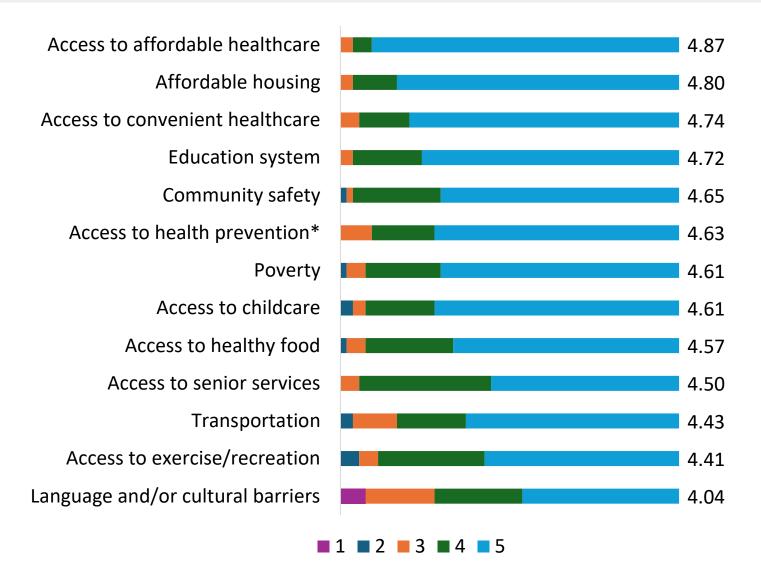
Survey Question: Please rate the importance of addressing each Health Factor on a scale of 1 (not important) to 5 (very important).



Survey Question: Please rate the importance of addressing each Lifestyle & Personal Factor on a scale of 1 (not important) to 5 (very important).

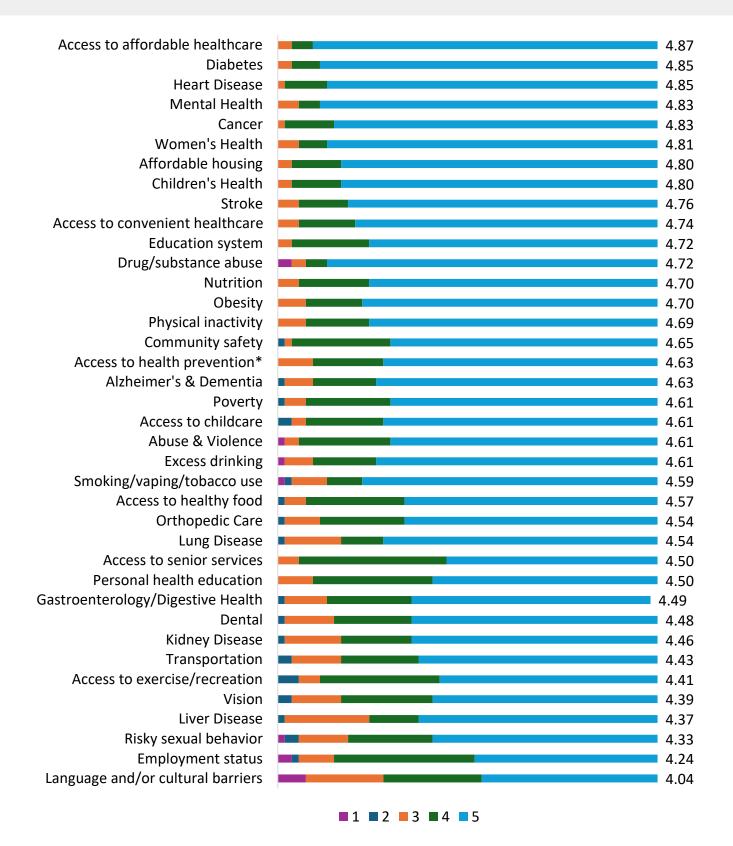


Survey Question: Please rate the importance of addressing each Community & Healthcare Services Factor on a scale of 1 (not important) to 5 (very important).



^{*}Access to health prevention & education services

Overall Health Priority Ranking (includes all three factor categories)



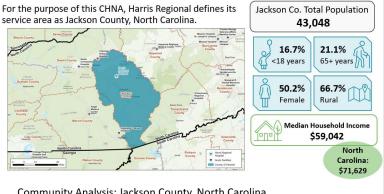
Community Summit

Harris Regional Hospital held a Community Summit on June 25, 2025.

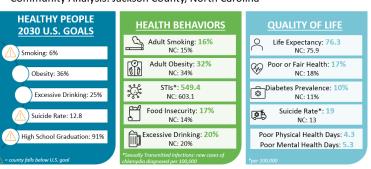
Below are topics of discussion and key takeaways.

Demographics*

Slide examples

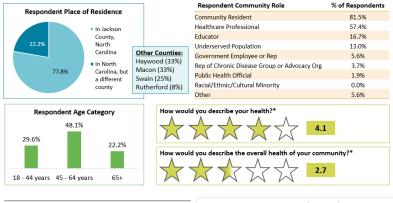


Community Analysis: Jackson County, North Carolina

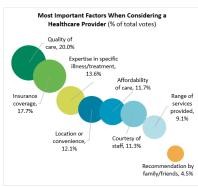


Survey Analysis**

Slide examples



Services Utilized for Basic Health Needs	% of Total Votes
My primary care or family physician	34.2%
Urgent care center	18.1%
Hospital (including ER)	13.4%
Alternative healthcare providers (chiropractors, etc.)	10.7%
Retail clinic (CVS, Walgreens. etc.)	8.1%
Health department	7.4%
School/university nurse	3.4%
Free clinic	2.0%
I do not have a healthcare provider	1.3%
Other*	1.3%



Prioritizing Health Needs

Focus areas for identified health needs

Health Need
Heart Disease
Mental Health
Women's Health
Children's Health
Stroke

Addressing Health Needs

Participant created goals

- ☐ **Heart Disease:** No breakout group
- ☐ Mental Health: Improve number of "good" or "great" mental health days. Overall improvement in mental health.
- ☐ Women's Health: Increase awareness and access of resources for women-reproductive health, maternity, primary care, perimenopausal care/specialty care
- □ Children's Health: Increase utilization of annual well-child visits (ages 4-17)
- □ Stroke: Provide education/community awareness on early stroke detection (signs + symptoms) and action to take (EMS) for prompt evaluation

^{*}Demographics can be seen on pages 8-11

Community Summit: Participants

During the community summit, prioritized health needs were assigned to breakout groups. Each group was tasked with developing action plans to address their assigned health issue. Participants were able to draw on their existing knowledge of the community as well as the information presented during the summit, including impacts from the prior CHNA, community demographics and social determinants of health data, and community survey results.

Participation in the community summit included:

Organization	Population(s) Represented	
EMS	Community Resident, Healthcare Professional, Educator	
Four Seasons Hospice	Community Resident, Healthcare Professional, Educator	
Jackson County Department of Public Health	Healthcare Professional, Racial/Ethnic/Cultural Minority, Underserved Population, Public Health Official	
Harris Regional Hospital & Swain Community Hospital	Community Resident, Healthcare Professional, Educator	
West Carolina University	Community Resident, Healthcare Professional, Educator	
Great Smokies Health Foundation	Community Resident	
Jackson County Public Schools	Community Resident, Educator, Rep. of Chronic Disease Group or Advocacy Org.	
Department on Aging	Community Resident, Government Employee or Rep., Underserved Population	
Swain County Health Department	Community Resident, Healthcare Professional, Government Employee or Rep., Educator, Racial/Ethnic/Cultural Minority, Underserved Population, Public Health Official, Rep. of Chronic Disease Group or Advocacy Org.	

Input of medically underserved, low-income, and minority populations was received through both the community survey and summit.

Evaluation & Selection Process

Severity or urgency of health need

Health need has a higher severity, urgency, or burden and if addressed, could be positively impacted

Feasibility and effectiveness

Pressing health needs where hospital interventions are feasible and impactful Impact on health disparities

Priority population health needs that have the ability to be positively impacted if addressed Importance identified by community

Health needs with online survey higher rankings or frequently mentioned by community members

Harris Regional Hospital Health Need Evaluation

	Severity or urgency	Feasibility and effectiveness	Impact on health disparities	Importance identified by community
Access to Affordable Healthcare	~		/	~
Heart Disease	~	V	~	/
Diabetes		/	/	/
Cancer	/	~	/	/
Mental Health	/		/	/
Women's Health	/	/	/	/
Children's Health	/	/	/	/
Affordable Housing			/	/
Stroke	V	~	/	/
Access to Convenient Healthcare			\	~

Overview of Priorities

Children's Health

Children's Health was the seventh highest ranked health need in the community with a ranking of 4.80.

The following data points provide insight regarding children's health in North Carolina.

- The child mortality rate in North Carolina was 33.4 deaths per 100,000 children ages 1-19 (2024 Annual Health of Women and Children Report).
- 30.9% of youth ages 10-17 in North Carolina are considered overweight or obese (2024) Annual Health of Women and Children Report).

Heart Disease

Heart disease was the second highest ranked health need in the community with a ranking of 4.85.

The following data point provides insight regarding heart disease in North Carolina.

The 2022 mortality rate for heart disease in North Carolina was 165.8 deaths per 100,000 people (21,763 deaths), which was the 24th highest rate in the United States.

Stroke

Stroke was the ninth highest ranked health need in the community with a ranking of 4.76.

The following data points provide insight regarding stroke in North Carolina.

The 2022 mortality rate for stroke in North Carolina was 47.7 deaths per 100,000 people (6,189 deaths), which was the 5th highest rate in the United States.

Women's Health

Women's Health was the sixth highest ranked health need in the community with a ranking of 4.81.

The following data points provide insight regarding women's health in North Carolina.

- North Carolina ranked 27th in the United States for overall women's health in 2024 (2024 Annual Health of Women and Children Report).
- Maternal mortality was 26.7 deaths per 100,000 live births making North Carolina 29th in the United States (2024 Annual Health of Women and Children Report).

Overview of Priorities

Not Selected Health Priorities

Harris Regional Hospital understands the need to address all health needs and is committed to making impacts across the community where possible. For the purpose of this CHNA, Harris Regional Hospital has decided to focus efforts toward the previous four health priorities.

Th	e health priorities not selected are:
	Access to Affordable Healthcare - While we recognize the importance of this need, it is outside the scope of services the facility provides.
	Diabetes – A lack of identified effective interventions to address the need.
	Cancer – This is not addressed directly but has the potential to be indirectly impacted by the efforts of our other initiatives.
	Mental Health - While we recognize the importance of this need, Harris Regional Hospital faces resource constraints to effectively address.
	Affordable Housing - While we recognize the importance of this need, it is outside the scope of services the facility provides.
	Access to Convenient Healthcare - This is not addressed directly but has the potential to be indirectly impacted by the efforts of our other initiatives.

Implementation Plan Framework

Executive leadership at Harris Regional Hospital gathered to discuss plans to address the identified health priorities. The leaders selected four of the identified significant health needs to create action plans to make positive community impacts. The next four pages outline the implementation plan for each identified health need seen below.

Each quarter the Healthy Horizons committee will meet to discuss the needs and their associated action plan to track improvement efforts and community impacts.

Harris Regional Hospital Health Need Evaluation

	Severity or urgency	Feasibility and effectiveness	Impact on health disparities	Importance identified by community
Children's Health	V	/	/	~
Heart Disease	/	/	/	/
Stroke	/	/	/	/
Women's Health	/	/	/	/

Implementation Plan: Children's Health

Initiative: Education and Access Improvement

Goal: Maintain, educate, and improve access to pediatric care

Strategies Actions facility plans to implement	Goal Completion Date	Accountable Organization/Team	Community Resources & Partnerships
Strategy 1: Market and share back-to-school pediatric wellness checklist	Annual 2026-2028	Harris MarketingTeam	➤ Local school system
Strategy 2: Market Harris outpatient pediatric services	Ongoing	Harris MarketingTeam	
Strategy 3: Community lunch and learns including provider presence	Annually 2026-2028	Harris Marketing and Pediatric Team	
Strategy 4: Market all elements of New Generations Birthing Center including level II special care nursery and neonatal transport capabilities	Ongoing	 Harris Marketing and Labor & Delivery Team 	> Western Carolina University
Strategy 5: Host annual sports physical event	Annually Quarter 2	 Harris Marketing, Medical Staff, and Haywood Fitness Staff Team 	

Anticipated Impact:

> Improved access and knowledge of pediatric services in the community

Implementation Plan: Heart Disease

Initiative: Education and Access Improvement

Goal: Maintain, educate, and improve access to cardiology care

Strategies Actions facility plans to implement	Goal Completion Date	Accountable Organization/Team	Community Resources & Partnerships
Strategy 1: Maintain Chest Pain Accreditation	Ongoing	Harris DiseaseSpecific CareCoordination Team	
Strategy 2: Market outpatient cardiology clinic and inpatient cardiology coverage	Ongoing	Harris MarketingTeam	> Area Agency on Aging
Strategy 3: Community lunch and learns including provider presence	Annually 2026-2028	Harris Marketing and Cardiology Team	
Strategy 4: Provider and referral source education	Annually 2026-2028	Harris Growth & Outreach Team	

Anticipated Impact:

> Improved access and knowledge of cardiology services in the community

Implementation Plan: Stroke

Initiative: Education and Access Improvement

Goal: Maintain, educate, and improve access to stroke care

Strategies Actions facility plans to implement	Goal Completion Date	Accountable Organization/Team	Community Resources & Partnerships
Strategy 1: Maintain Acute Stroke Ready Hospital Accreditation	Ongoing	Harris DiseaseSpecific CareCoordination Team	
Strategy 2: Market the accreditation including stroke symptoms and response	Ongoing	 Harris Marketing and Disease Specific Care Coordination Team 	> Area Agency on Aging
Strategy 3: Community lunch and learns including provider presence	Annually 2026-2028	Harris Marketing and Emergency Medicine Team	
Strategy 4: Provider and referral source education	Annually 2026-2028	Harris Growth & Outreach Team	

Anticipated Impact:

> Improved access and knowledge of stroke services in the community

Implementation Plan: Women's Health

Initiative: Education and Access Improvement

Goal: Maintain, educate, and improve access to women's health services

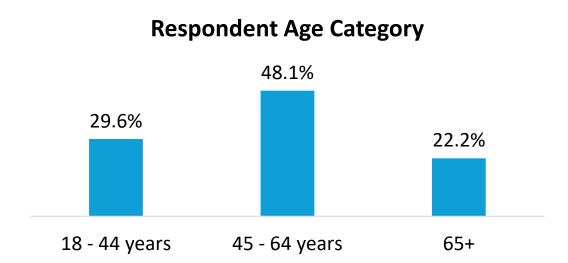
Strategies Actions facility plans to implement	Goal Completion Date	Accountable Organization/Team	Community Resources & Partnerships
Strategy 1: Market all elements of New Generations Birthing Center including level II special care nursery and neonatal transport capabilities	Ongoing	Harris Marketing and Labor & Delivery Team	> Western Carolina University
Strategy 2: Provider and referral source education	Ongoing	Harris Growth & Outreach Team	
Strategy 3: Community lunch and learns	Annually 2026-2028	Harris Marketing,Women's Health, andPediatric Team	
Strategy 4: Market Women's Health clinic expansion including provider recruitment	Ongoing	Harris Growth & Outreach and Marketing Team	

Anticipated Impact:

> Improved access and knowledge of women's health services in the community



Survey Question 1: Please provide your age.



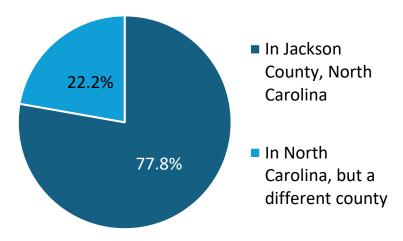
Survey Question 2: Please select which roles apply to you. [Check all that apply]

Respondent Community Role	% of Respondents
Community Resident	81.5%
Healthcare Professional	57.4%
Educator	16.7%
Underserved Population	13.0%
Government Employee or Rep	5.6%
Rep of Chronic Disease Group or Advocacy Org	3.7%
Public Health Official	1.9%
Racial/Ethnic/Cultural Minority	0.0%
Other	5.6%

Survey Question 3: Where is your primary residence?

Survey Question 4: If you live in North Carolina, but in a different county, what county do you live in?

Respondent Place of Residence



Other Counties: Haywood (33%) Macon (33%) Swain (25%)

Rutherford (8%)

Survey Question 5: How would you describe your health? (1 star = Poor; 5 stars = Excellent)



Survey Question 6: How would you describe the overall health of your community? (1 star = Poor; 5 stars = Excellent)



Survey Question 7: Please rate the importance of addressing each Health Factor on a scale of 1 (not important) to 5 (very important).

Weighted average of votes		
Heart Disease	4.85	
Diabetes	4.85	
Cancer	4.83	
Mental Health	4.83	
Women's Health	4.81	
Children's Health	4.80	
Stroke	4.76	
Obesity	4.70	
Alzheimer's & Dementia	4.63	
Lung Disease	4.54	
Orthopedic Care	4.54	
Gastroenterology/Digestive Health	4.49	
Dental	4.48	
Kidney Disease	4.46	
Vision	4.39	
Liver Disease	4.37	

Factor is in the overall top 10

Survey Question 8: If there is another Health Factor that needs addressing, please specify

- Access to care
- Drug use/addiction
- Endocrine
- Fitness program
- Hearing impairments and communication
- Injury
- Living with disability and caregiver stress
- Nutritionist
- Postpartum care

Survey Question 9: Please rate the importance of addressing each Lifestyle & Personal Factor on a scale of 1 (not important) to 5 (very important).

Weighted average of votes		
Drug/substance abuse	4.72	
Nutrition	4.70	
Physical inactivity	4.69	
Excess drinking	4.61	
Abuse & Violence	4.61	
Smoking/vaping/tobacco use	4.59	
Personal health education	4.50	
Risky sexual behavior	4.33	
Employment status	4.24	

Factor is in the overall top 10

Survey Question 10: If there is another Lifestyle & Personal Factor that needs addressing, please specify

- Fitness/recreation programs and facilities for everyone (2)
- Access to sage and accessible outdoor spaces, especially areas to walk
- Access to clean drinking water and sanitation
- Addressing loneliness and isolation through social prescribing and other means
- Poor quality food sources across rural areas
 - Mobile produce markets/pop-up food banks might be helpful
- Poor transportation
- Teaching emotional regulation
- Trafficking of children and adults

Survey Question 11: Please rate the importance of addressing each Community & Healthcare Services Factor on a scale of 1 (not important) to 5 (very important).

Weighted average of votes		
Access to affordable healthcare	4.87	
Affordable housing	4.80	
Access to convenient healthcare	4.74	
Education system	4.72	
Community safety	4.65	
Access to health prevention & education services	4.63	
Access to childcare	4.61	
Poverty	4.61	
Access to healthy food	4.57	
Access to senior services	4.50	
Transportation	4.43	
Access to exercise/recreation	4.41	
Language and/or cultural barriers	4.04	

Factor is in the overall top 10

Survey Question 12: If there is another Community & Healthcare Services Factor that needs addressing, please specify

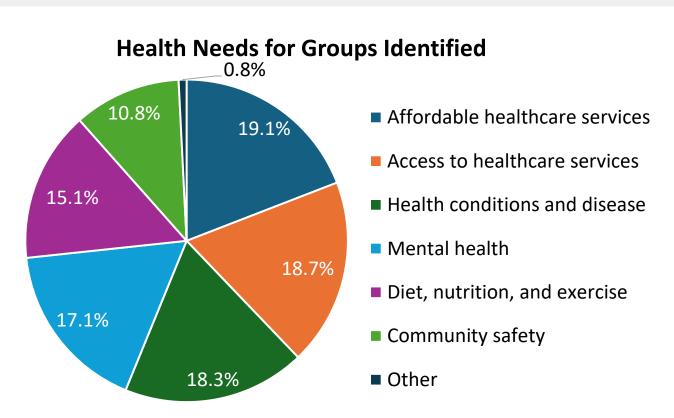
- Access to recreational therapy as a treatment modality in health and human service systems to address holistic health factors
- Community college needs to work with FQHC & HD to develop a clinic for students to improve retention
- Having providers and facilities that are in network. At this time, the labs are not in network so
 preventive services are not covered adequately
- Limited recreational space and the ones we do have are small and outdated
- Minimal childcare facilities

Survey Question 13: Which groups have the highest health needs in your community? (Select all that apply)

Groups with Highest Health Needs	% of Total Votes
Low-income groups	21.3%
Older adults	19.4%
Women	13.9%
Individuals requiring additional health support	13.4%
Children	13.4%
Racial and ethnic minority groups	9.7%
LGBTQIA+	7.9%
Other^	0.9%

[^]Other- immigrants and mental health

Survey Question 14: What are the health needs, if any, for the group(s) selected above? (Select all that apply)



Survey Question 15: How would you rate the quality of healthcare services in your community? (1 star = Poor; 5 stars = Excellent)



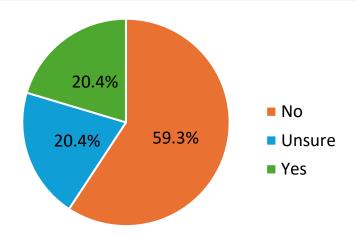
Survey Question 16: How would you rate the convenience of healthcare services in your community? (1 star = Poor; 5 stars = Excellent)



Survey Question 17: How would you rate the affordability of healthcare services in your community? (1 star = Poor; 5 stars = Excellent)



Survey Question 18: Are you aware of efforts to address Obesity/Physical Activity/Nutrition in your community in the last 3 years?



Survey Question 19: If yes, please share comments or observations about the positive changes you have seen in the community.

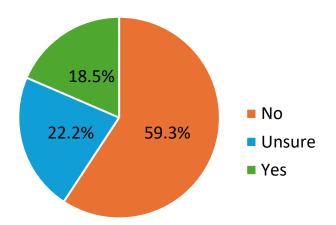
Themes from Comments (11 responses):

- 1. Lunch and learns (2)
 - One mentioned these were held on diet and nutrition
- 2. Educational workshops (2)
 - One mentioned workshops for orthopedic needs
- 3. Not aware/don't utilize (2)

Additional Comments:

- Geriatric wellness programs
- o Have not participated in initiatives stated, but have observed and volunteer in different areas
- Health department
- o Insurance coverage issues with weight loss medications
- o Physicals for the high schoolers
- Some vital sign monitoring programs or pop ups
- Under advertised and limited access

Survey Question 20: Are you aware of efforts to address Substance Abuse Prevention in your community in the last 3 years?



Survey Question 21: If yes, please share comments or observations about the positive changes you have seen in the community.

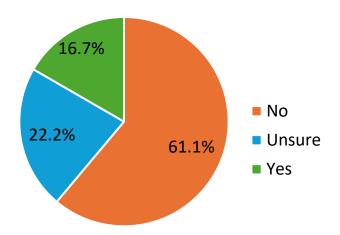
Themes from Comments (7 responses):

- 1. Community education (2)
 - ☐ Community education on treatment options
 - Working with partners for education

Additional Comments:

- o Educating the medical community to not over prescribe
- o Feel like Jackson County Public Health does the heavy lifting
- Honestly, I've only seen legal actions taken against dealers; I haven't seen much advertisement about any of the
 other factors. I would like to have seen more about treatment, education, and especially stigma reduction to
 encourage people to get the help needed.
- o Local, state communications
- Not aware
- Not sure initiatives in place have been effective

Survey Question 22: Are you aware of efforts to address Behavioral Health in your community in the last 3 years?



Survey Question 23: If yes, please share comments or observations about the positive changes you have seen in the community.

Themes from Comments (8 responses):

- 1. Not aware of Harris Regional's efforts (2)
 - ☐ I think 3rd party programs provide behavioral health services way more than Harris.
 - ☐ I am aware of other behavioral health assistance in our community.

Additional Comments:

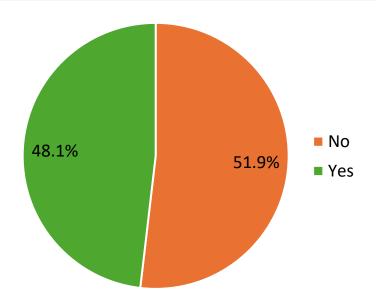
- Cost and access
- o Harris Regional needs a behavioral health unit
- Local and state educational systems
- Not sure Macon County Golf's see Harris as the resource
- o Offering more services by telehealth
- Wish I had seen more of these efforts, especially in reducing stigma. It's desperately important for people to seek care

Survey Question 24: Which services do you use for basic health needs? (Select all that apply)

Services Utilized for Basic Health Needs	% of Total Votes
My primary care or family physician	34.2%
Urgent care center	18.1%
Hospital (including ER)	13.4%
Alternative healthcare providers (chiropractors, etc.)	10.7%
Retail clinic (CVS, Walgreens. etc.)	8.1%
Health department	7.4%
School/university nurse	3.4%
Free clinic	2.0%
I do not have a healthcare provider	1.3%
Other*	1.3%

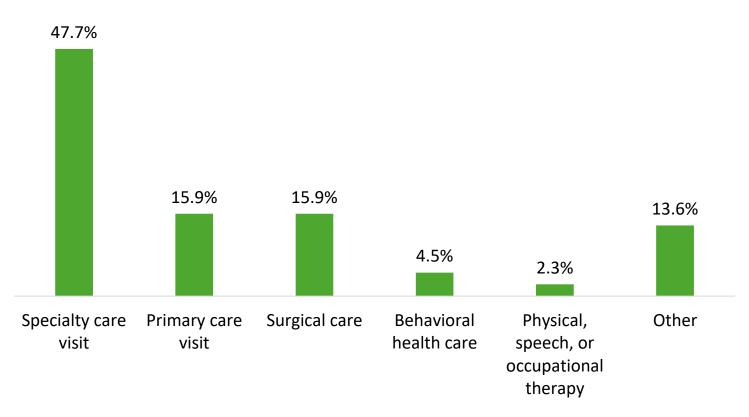
^{*}Other – oncologists and telehealth

Survey Question 25: In the last 12 months, have you received healthcare outside of your community?



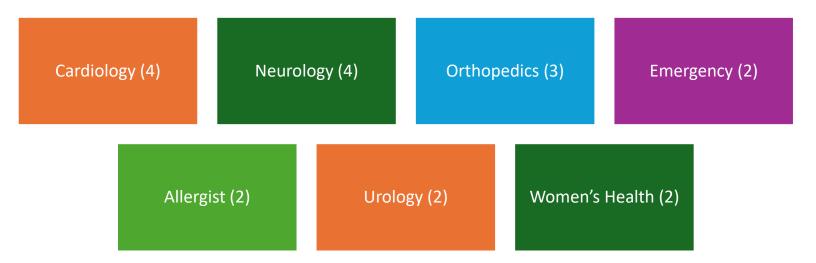
Survey Question 26: Which of the following services did you receive outside the community? (Select all that apply)





Survey Question 27: If you selected yes to seeking specialty care outside the community, please specify what services you are seeking.

Specialty Care:



- Breast Cancer
- Counseling
- Dermatology
- Endocrinology
- ENT

- Fertility Clinic
- Gastroenterology
- Imaging
- Main physician is the VA.
 Family uses local resources
- Neurosurgery
- Ophthalmology
- Podiatry
- Rheumatology
- Specialized Gynecology

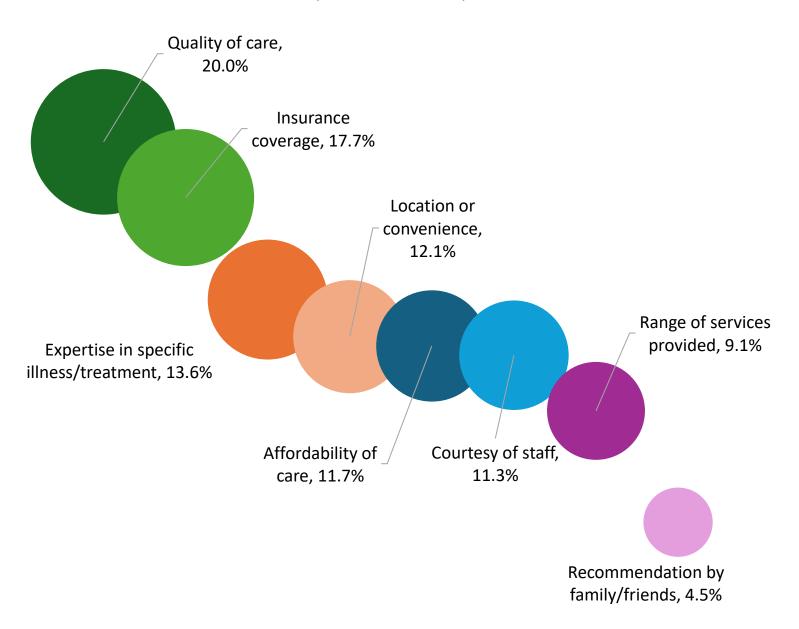
Survey Question 28: If you selected yes to seeking surgical care outside the community, please specify what services you are seeking.

Surgical Care:



Survey Question 29: What do you consider to be the most important when considering a healthcare provider? (Select all that apply)

(% of total votes)



Survey Question 30: Which of the following public health services should Harris Regional Hosp and its community partners focus on improving? (Select all that apply)

% of respondents

