

This Community Health Needs Assessment (CHNA) report was prepared for Monroe County Medical Center by the Community and Economic Development Initiative of Kentucky (CEDIK) at the University of Kentucky. CEDIK staff Melody Nall, Mercedes Fraser, Simona Balazs, Joe Kerksmar, Sarah Bowker and Alison Davis contributed to the information in this final report.

CEDIK works with stakeholders to build engaged communities and vibrant economies. If you have questions about the assessment process, contact Melody Nall, CEDIK Extension Specialist Administrator: melody.nall@uky.edu or (859) 218-5949.

 **College of Agriculture,
Food and Environment**
Community and Economic Development Initiative of Kentucky
cedik.ca.uky.edu





Dear Community Member:

Monroe County Medical Center, a non-profit hospital, is proud to have served Monroe county and the surrounding communities for over 40 years in our present location. Our hospital partnered with the Monroe County Health Department and other community partners to form a steering committee to better understand the communities' health concerns, to measure the impact of current health initiatives, and to guide the appropriate use of our resources through our Community Health Needs Assessment.

Primary data was obtained via focus groups with key stakeholders from the local communities and via individual questionnaires. Data obtained from these two tools was combined with local, state, and national data sources for presentation in this report. This information will assist Monroe County Medical Center to identify priority areas where we may better serve our community to provide greater accessibility to healthcare services, to provide information about the risk and symptoms of prevalent diseases, and to begin formulating potential solutions to meet identified needs.

While we may not have the resources to address all identified needs, we will use this plan to prioritize the health needs identified in this document and will work in conjunction with our community partners to address those needs. We look forward to working together to improve the overall health of our communities. The Board, Medical Staff, and employees of Monroe County Medical Center feel that it is our mission to protect, provide for, and improve the health of the residents of Monroe county and the surrounding counties.

Sincerely,

Andrea McLerran
CEO

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Introduction

Monroe County Medical Center is a rural, acute-care hospital located in Tompkinsville, Kentucky. Tompkinsville is the county seat of Monroe County, which is located in South Central Kentucky. The facility is staffed by approximately 240 licensed and non-licensed personnel, which makes the Monroe County Medical Center one of the county's major employers.

The facility has 49 licensed beds and offers numerous outpatient services. Monroe County Medical Center operates the general acute-care Hospital, Adult Day Care, and EMS/911 Center. The Monroe County Medical Center is accredited by The Joint Commission (TJC).

MISSION

The Monroe County Medical Center is a rural healthcare organization which values compassion, respect and confidentiality. Monroe County Medical Center provides quality, safe primary and specialty services for the citizens of Monroe County and surrounding areas through detection, prevention, and treatment of illness.

VISION

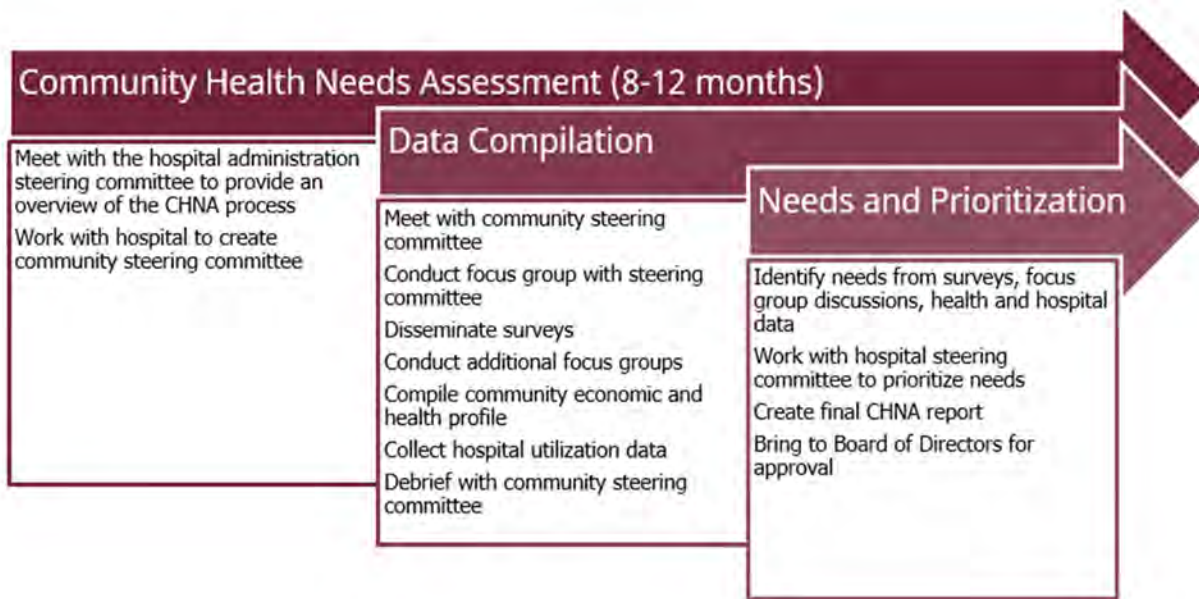
Monroe County Medical Center will be recognized as an outstanding leader in the provision of quality, safe healthcare services. The Medical Center strives through continuous quality improvement to meet the needs of its customers by providing primary patient care in an environment which offers specialty services and focuses on prevention of illness, thereby improving the quality of life.

CHNA Process

Monroe County Medical Center contracted with the Community and Economic Development Initiative of Kentucky (CEDIK) in the fall of 2022 to conduct a Community Health Needs Assessment (CHNA) in accordance with the Affordable Care Act. The Affordable Care Act, enacted March 23, 2010, added new requirements that hospital organizations must satisfy in order to be described in section 501(c)(3), as well as new reporting and excise taxes.

The IRS requires hospital organizations to complete a CHNA and adopt an implementation strategy at least once every three years. This CHNA was the second prepared by CEDIK for this location; a prior report was completed in 2020.

Here is an overview of the CHNA process that CEDIK uses based on the IRS guidelines:



Monroe County Medical Center



2019 community health needs... addressed!

✓ Goal: Address obesity and diabetes.

Monroe County Medical Center (MCMC) was selected as the only KY hospital in the 2020 – 2021 Diabetes Learning Collaborative. The facility completed the year-long process and was awarded an award for Outstanding Achievement in Diabetes Improvement.

The hospital also completed a Healthy Living with Diabetes program in conjunction with community partners, and offered one-on-one educational opportunities. Other events were on hold due to the Public Health Emergency (PHE) that began in 2020.

✓ Goal: Address respiratory illnesses.

Hospital staff participated in local radio programs to educate the community on respiratory illness.

MCMC is still seeking physicians to address respiratory illness needs in the service area.

✓ Goal: Education on community resources.

A comprehensive list of current community resources was developed and posted on the facility website. This list continues to be updated as needed.

From our CEO...

Monroe County Medical Center was honored to have been selected as the only hospital to participate in the 2020-2021 KY Diabetes Learning Collaborative. Using knowledge gained from this initiative, the facility has begun working closely with our local primary care providers to assist in monitoring patients with an elevated A1c score for compliance with routine glucose testing, eye exams, foot exams, and medication compliance to help in improving the overall health of diabetic patients.

✓ Goal: Expand specialty medical services offered locally.

Monroe County Medical Center implemented a teleneurology agreement with TriStar for a planned start date of February 2023. The facility is also coordinating with the Medical Center Bowling Green to offer infectious disease telehealth services.

All cardiologists that were previously hosting outreach clinics have continued to do so. The hospital is also in routine communication with area tertiary facilities to discuss addition of pulmonary, wound care, and other specialty services.



Our facility conducts a Community Health Needs Assessment every three years. We are excited to share our progress from the last assessment, as we prioritize our next goals based on recent community input.

Thank you for your continued support of Monroe County Medical Center.

Andrea McLerran
Monroe County Medical Center CEO

Community Served by Monroe County Medical Center

Monroe County Medical Center determined its defined service area for this Community Health Needs Assessment by reviewing 2021 discharge data by county of residence. In 2021, 76% of Monroe County Medical Center inpatients originated from Monroe County. As for outpatient origination, 78% were residents from Monroe County (78%). These percentages determine the community defined for this CHNA includes Monroe County.

In this section publicly available data are presented for Monroe County. These data come from the *County Health Rankings & Roadmaps* website (<https://www.countyhealthrankings.org/>), *Kentucky Health Facts* website (<https://www.kentuckyhealthfacts.org/>). These data sites provide social, economic, and health data that is intended for use by communities to understand the multiple factors that influence a population’s health. These data were accessed in October 2022.

Next, to provide more context to the ongoing health of the community, we present five year data trends (2016-2020) for Monroe County alongside the state average. These data come from the *County Health Rankings & Roadmaps* website and include selected health outcomes, health behaviors, and access to care as well as social, economic, and environmental factors that impact the health of Monroe County residents.

Last, we present recent data on invasive cancer incidence from the Kentucky Cancer Registry.

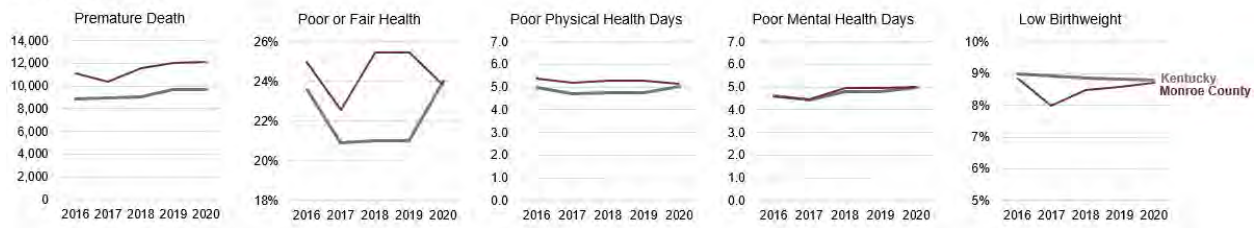
Population	Monroe County	Kentucky	US Overall
2020 Estimate of Total Population	10,650	4,477,251	331,449,281
Percent of Population under 18 years	22.7%	22.4%	22.2%
Percent of Population 65 year and older	19.2%	17.2%	16.8%
Percent of Population Black	2.2%	8.3%	13.6%
Percent of Population American Indian & Alaska Native	0.2%	0.3%	1.3%
Percent of Population Asian	0.3%	1.7%	6.1%
Percent of Population Native Hawaiian/Other Pacific Islander	0.0%	0.1%	0.3%
Percent of Population Hispanic	3.1%	4.0%	18.9%
Percent of Population Non-Hispanic White	93.2%	83.9%	59.3%
Percent of Population not Proficient in English	0%	1.0%	8.3%
Percent of Population Female	50.2%	50.7%	50.5%
Percent of Population Rural	100%	41.6%	14%

Health Outcomes	Monroe County	Kentucky	US Overall
Years of Potential Life Lost Rate	12604	9993	7300
Percent Fair or Poor Health	28%	22%	17%
Average Number of Physically Unhealthy Days	5.9	5.0	3.9
Average Number of Mentally Unhealthy Days	5.6	5.5	4.5
Percent Low Birthweight	9%	9%	8%
Health Behaviors			
Percent Adults that are Diabetic	4.4%	13%	13%
Percent Adults with Hypertension	41%	41%	47%
Percent Adults with Tooth Loss	39%	23%	-
Percent Adults Consuming Recommended Fruit & Vegetable Intake	12.1%	10%	12.3%
Percent Smokers	28%	25%	16%
Percent Adults with Obesity	35%	36%	32%
Food Environment Index	7.3	6.6	7.8
Percent Physically Inactive	33%	32%	26%
Percent with Access to Exercise Opportunities	46%	66%	80%
Percent Excessive Drinking	15%	18%	20%
Percent Driving Deaths with Alcohol Involvement	20%	25%	27%
Chlamydia Rate	215.8	468.1	551
Teen Birth Rate	43	29	19
Access to Care			
Percent Uninsured	8%	8%	11%
Number of Primary Care Physicians	5	2,908	-
Primary Care Physicians Rate	47	65	-
Primary Care Physicians Ratio	2144:1	1536:1	1310:1
Number of Dentists	6	2,948	-
Dentist Rate	56	66	-
Dentist Ratio	1775:1	1519:1	1400:1
Number of Mental Health Providers	8	11,544	-
Mental Health Provider Rate	75	258	-
Mental Health Provider Ratio	1331:1	388:1	350:1

Social & Economic Factors	Monroe County	Kentucky	US Overall
Percent Completed High School	75%	87%	89%
Percent with Some College Education	46%	63%	67%
Number Unemployed	184	134,249	-
Number in Labor Force	4,700	2,019,899	-
Percent Unemployed	3.9%	6.6%	8.1%
80th Percentile Income	\$84,875	\$104,503	-
20th Percentile Income	\$13,875	\$21,076	-
Percent of Children in Poverty	31%	19%	16%
Number of Children in Single-Parent Households	400	263,236	-
Number of Children in Households	2,388	1,003,381	-
Percent of Children in Single-Parent Households	17%	26%	25%
Number of Associations	9	4,722	-
Social Association Rate	8.4	10.6	9.2
Annual Average Violent Crimes	3	9,824	-
Violent Crime Rate	29	222	386
Number of Injury Deaths	51	22,424	-
Injury Death Rate	96	101	76
Physical Environment			
Average Daily PM2.5	8.7	8.7	7.5
Presence of Water Violation	Yes	n/a	n/a
Percent with Severe Housing Problems	11%	14%	17%
Percent with Severe Housing Cost Burden	9%	11%	-
Percent with Overcrowding	1%	2%	-
Percent with Inadequate Facilities	1%	1%	-
Percent that Drive Alone to Work	78%	81%	75%
Number of Workers who Drive Alone	4,273	1,962,584	-
Percent with Long Commute - Drives Alone	36%	30%	37%

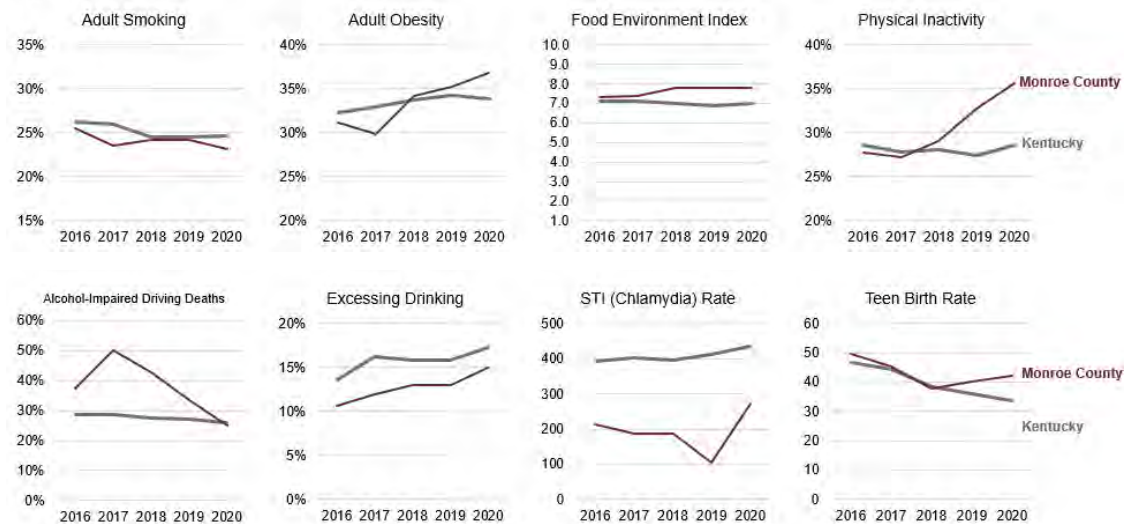
2016-2020 County Health Rankings Data Trends

Health Outcomes



- The middle three variables are based on self-reported data from BRFSS (Behavioral Risk Factor Surveillance System). The County trends for poor physical and mental health days trend similar to the state average. Self reports of poor or fair health are on an overall downward trend for the County.
- The County’s low birthweight is on an overall downward trend.

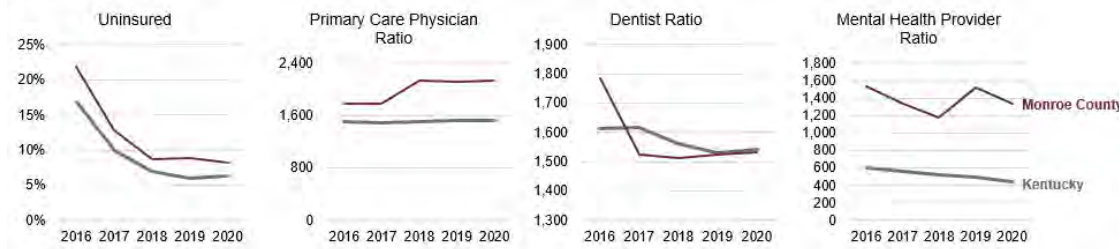
Health Behaviors



- Adult smoking in the County is lower than the state and on a downward trend.
- Adult obesity and physical inactivity in the County is trending upward.
- The higher the number on the USDA Food Environment Index (0-10) the better the Food Environment. The County has a higher score than the state average.
- There is an overall downward trend in alcohol-impaired driving deaths.
- There is an upward trend of excessive drinking in the County.
- The County’s STI rate is on an upward trend, but overall lower than the state average.
- The County’s teen birth rates are trending downward overall.

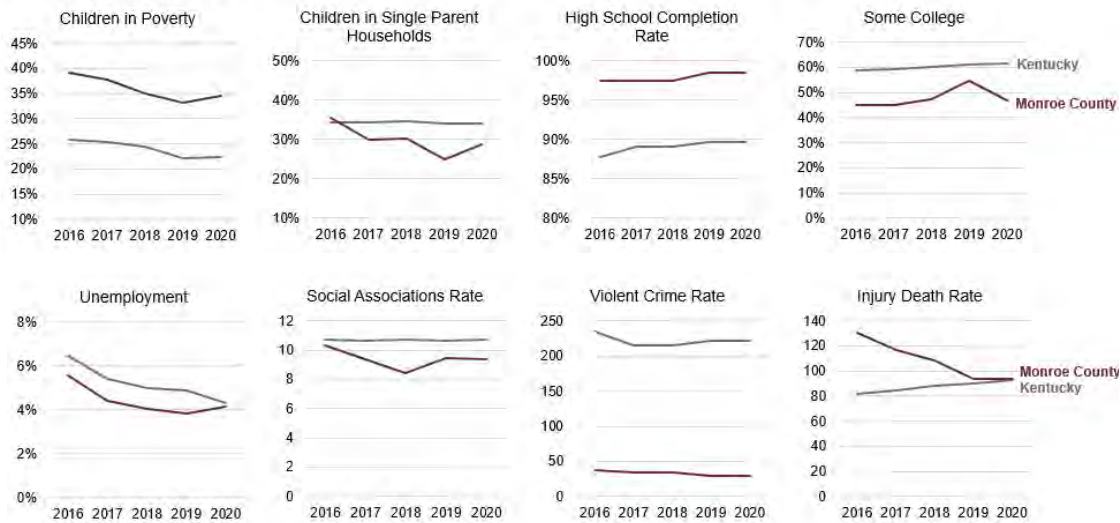
2016-2020 County Health Rankings Data Trends, continued

Access to Care



- The County’s ratio of primary care physicians and mental health providers is higher (less providers for population) compared to the state average.
- The County’s ratio of dentists is now on par with the state average.
- The County uninsured rate is slightly higher, but trends similar to the state average.

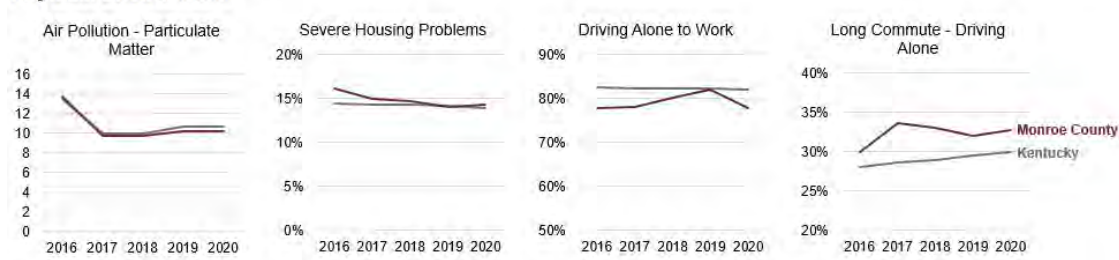
Social & Economic Factors



- The County has a higher percentage of children in poverty compared to the state and appears to be on a downward trend.
- The County has an overall downward trend in the percent of children in single parent households.
- County high school completion rates are above the state average, and percent of the County population with some college education is trending upwards overall.
- The County’s unemployment rate is lower than the state average, the trend is on par with the state.
- The County’s rate of social associations is on a downward trend (again, pre-pandemic).
- The County’s injury death rate is trending downward.
- The violent crime rate in the County is much lower than the state average.

2016-2020 County Health Rankings Data Trends, continued

Physical Environment



- Air pollution in the County mirrors the state’s five year trend.
- The County’s severe housing problems has an overall downward trend.
- The County population driving alone to work has an overall steady trend.
- The County population making long commutes driving alone has an overall upward trend.

Top 10 Invasive Cancer Incidence Rates

<i>All Genders, All Races</i>	Monroe County	Crude Rate	Age-adjusted Rate
Total all sites over 5 years (2015-2019)	432	812.9	595.2
Lung and Bronchus	90	169.3	113.7
Prostate (males only)	47	177.2	134.2
Colon & Rectum	45	84.7	60.6
Breast	44	82.8	61.8
Melanoma of the Skin	23	43.3	37.6
In Situ Breast	17	32	25.1
Kidney and Renal Pelvis	16	37.5	30.7
Miscellaneous	16	30.1	23.1
Urinary Bladder, invasive and in situ	16	30.1	19.1
Pancreas	15	28.2	18.9

Note: All rates are per 100,000 population. All rates are age-adjusted to 2000 US Standard Million Population.

Hospital Utilization Data

The Tables below provide an overview of Monroe County Medical Center's patients and in particular how they pay, and why they visited.

Hospital Usage, 1/1/2021 - 12/31/2021

Patient Status	Total
Inpatient Discharges	1,117
Outpatient Visits	28,589

Hospital Inpatient Payer Mix, 1/1/2021 - 12/31/2021

Payer	
Medicare (Excluding Medicare Managed Care)	500
Medicare Managed Care	268
WellCare of Kentucky Medicaid Managed Care	94
Commercial - Anthem Health Plans of KY PPO Plan	75
In State Medicaid	37
Aetna Better Health of KY Medicaid Managed Care	29
Humana Medicaid Managed Care	23
Commercial - Other	19
Passport Medicaid Managed Care	17
Anthem Medicaid Managed Care	12
Out of State Medicaid	9
Self Pay	8
Commercial - United Healthcare PPO Plan	6
Commercial - Humana PPO Plan	5
Other	3
United Healthcare Medicaid Managed Care	3

Hospital Outpatient Payer Mix, 1/1/2021 - 12/31/2021

Payer	Visits
Medicare (Excluding Medicare Managed Care)	7,539
Commercial - Anthem Health Plans of KY PPO Plan	5,244
Medicare Managed Care	4,768
WellCare of Kentucky Medicaid Managed Care	3,566
Aetna Better Health of KY Medicaid Managed Care	1,436
Anthem Medicaid Managed Care	867
Humana Medicaid Managed Care	729
Passport Medicaid Managed Care	666
Self Pay	616
Commercial - Humana PPO Plan	598
Commercial - Other	597
Commercial - United Healthcare PPO Plan	378
Out of State Medicaid	264
Commercial - Cigna Health & Life PPO Plan	259
In State Medicaid	250
Commercial - Humana POS Plan	185
Tricare (Champus)	175
United Healthcare Medicaid Managed Care	174
Workers Compensation	146
Auto Insurance	118
ChampVA	14

Hospital Inpatient Diagnosis Related Group, 1/1/2021 - 12/31/2021

DRG Description	Discharges
Respiratory infections & inflammations	172
Simple pneumonia & pleurisy	112
Chronic obstructive pulmonary disease	111
Esophagitis, gastroenteritis & misc digest disorders	90
Kidney & urinary tract infections	80
Heart failure & shock	79
Signs & symptoms	43
Cellulitis	38
Nutritional & misc metabolic disorders	33
Heart failure & shock	10

Community Steering Committee

The Community Steering Committee plays a vital role to the CHNA process. CEDIK provides a list of community leaders, agencies, and organizations to the hospital to assist them in the recruitment of members that facilitates broad community input.

These committee members represent organizations and agencies that serve the Monroe County population in a variety of areas that relate to the health of the population. By volunteering their time, the committee members enable the hospital to acquire input from residents that are often not engaged in conversations about their health needs. The steering committee provides both an expert view of the needs they see while working with the people and clients they serve and in extensive distribution of the community survey.

Monroe County Medical Center leadership recruited members of the community to serve on the steering committee. CEDIK representatives scheduled and completed the first meeting October 11th, 2022 to introduce the assessment process, share the role of a committee member and to lead a focus group. A final steering committee meeting was held February 3rd, 2023, for the report of survey and focus group results along with selected secondary health data to inform and guide the prioritization process of the identified health needs. This resulted in the community steering committee making recommendations on the priority health needs for Monroe County Medical Center to address over the next three years.

Monroe County Medical Center Community Steering Committee

Name	Role and Representing Organization	
Amanda Isenberg, RN	Executive Director	Lifeline Home Health of Tompkinsville
Andrea McLerran	Chief Executive Officer	Monroe County Medical Center
Cathey Owens	Director	Helping Monroe
Chelsea Spears, LPCA	Counselor	LifeSkills, Inc.
Jill Ford, MSN, RN	Public Health Director	Monroe County Health Department
Laura Bowe	Compliance/PI Officer	Monroe County Medical Center
Lorie Stinson	Office Manager	Gamaliel Family Medical Center
Phyllis Reagan	EMS Director	Monroe County EMS
Polly Baker	Board Member	Monroe County Cooperative Extension
Sarah West, BSN, RN, CLC	HANDS Program	Monroe County Health Department
Stacy Murphy	Office Manager	Monroe Family Medical Center, Inc
Yvonne Fields	Representative	Community Outreach Shelter

Community Feedback

The first meeting of the community steering committee was held October 11th, 2022, and members of the MCMC Community Health Needs Assessment steering committee participated in a focus group to discuss health needs, strengths of the current health care system and opportunities for improving health care services as well as additional community health related activities. The committee membership includes representation from the Monroe County Health Department, area healthcare services, as well as several non-profits and Cooperative Extension. The members bring knowledge and expertise to the populations they serve. Four additional focus groups were conducted with Monroe County Area Technology Center health science students, Monroe County Senior Center, MC CARES coalition, and Monroe County Economic Development. A total of forty individuals participated in five focus groups. What follows is a summary of the responses that highlight the results of the conversations that identify strengths of the community and the healthcare system, challenges/barriers in the broader healthcare system and opportunities for improving the health of the community.



Focus Group Findings

This summary identifies strengths of the community and the healthcare system, challenges/barriers in the broader healthcare system and opportunities for improving the health of the community.

Community input was obtained through five facilitated focus groups with a total of 40 participants. The participating groups are as follows:

- Monroe County Medical Center Steering Committee
- Monroe County CARES
- Monroe County Economic Development Council
- Monroe County Area Technology Center – Health Track Students
- Monroe County Senior Center

The key findings from each of the 5 questions posed to the focus groups are listed below:

- The community's vision for a healthy Monroe County involves healthy living and access to healthcare.
- The greatest health needs in Monroe County include access to care & resources, chronic diseases, community vitality, mental health, and substance use. The social determinants of health (SDoH) particular to Monroe County heavily impact the community's view of the greatest health needs.
- Concerning the community's perception of the current healthcare system, there is a stable system in place with a variety of services and great collaborations between all types of providers, however, there is a need for expanding specialty services and increasing access to services.
- To better meet health needs in Monroe County, there should be a healthcare approach and a community approach.

Finding 1: The community's vision for a healthy Monroe County involves healthy living and access to healthcare.

Focus group responses that contributed to this finding are listed below.

- | | | |
|--|---|---|
| <p>Healthy Living</p> <ul style="list-style-type: none"> • Public infrastructure that supports health living • Sidewalks, bike paths, walking trails • Utilization of wellness center • Increased activities at Senior Center • Internet Access • Improved and accessible playgrounds | <ul style="list-style-type: none"> • Connect local farmers to schools • Increase healthy food options in community • Smoke/vape free community • Drug free community • Transition housing for addiction recovery <p>Access to healthcare</p> <ul style="list-style-type: none"> • Increase marketing of current services | <ul style="list-style-type: none"> • Interpretation services for patient appointments • Increased health services • Increase locations for EMS vehicles to have a decreased response time • Expanded urgent care services • Expanded clinic hours • More awareness among providers of patient needs |
|--|---|---|

Finding 2: The greatest health needs in Monroe County include access to care & resources chronic diseases, community vitality, mental health, substance use, and access to care and resources. The social determinants of health (SDoH) particular to Monroe County heavily impact the community's view of the greatest health needs.

Focus group responses that contributed to this finding are listed below.

Chronic Diseases

- Diabetes
- Obesity
- Cancer
- COPD
- Dementia

Community Vitality

- Jobs
- Support groups
- Become a recovery ready community
- Natural disasters (planning and response)

Mental Health

- Youth
- Adults
- Lack of providers

Substance Use

- Drug use
 - Prescription misuse
 - Illegal substances
 - No local recovery facilities
- Tobacco use
 - Vaping
 - Cigarettes
 - Leads to lung disease & COPD

Access to Care & Resources

- Staff shortages
 - Nursing
 - EMS
 - Aging providers
- Transportation

- Broadband access
- Long wait times for care
- Housing
 - Underhoused and homeless
 - Inadequate/unclean rental properties
- Nutrition education
- Opportunities for exercise
- Health literacy
- Food access
 - Access to healthy foods
 - High costs
 - Increased food prices impacting population

Social determinants of health particular to Monroe County that impact the greatest health needs in the community are:

Access to Care

Specialty care needs to be expanded in the county to reduce the barrier of transportation to this level of care for residents.

Housing

There is a need for quality, affordable, and safe housing for lower to mid income families/ individuals in Monroe County. There are unmet needs with the current housing options.

Social and Community Connections

Community members of all ages are looking for ways to connect with and support one another.

Health Education

Community members would benefit from increased health literacy and health education as well as understanding the current health and community resources available to them to live healthier lives.

Transportation

Transportation to and from essential services, including specialty healthcare is a barrier for people.

Finding 3: Concerning the community's perception of the current healthcare system, there is a stable system in place with a variety of services and great collaborations between all types of providers, however, there is a need for expanding specialty services and increasing access to services.

Focus group responses that contributed to this finding are listed below.

Opportunities for System

- Community programming
 - Greater participation in current community events
 - Programs/opportunities for youth
 - Increase volunteer opportunities
 - Mentorships – education and to gain trust
 - Law enforcement
 - Healthcare
- Market current resources
- Transportation
- Economic development
 - Jobs with living wage
- Housing
 - Services for homeless
 - Affordable housing

- Dentists that accept Medicaid
- Specialty services
 - OB/GYN
 - Pediatrics
 - Orthopedics
 - Pulmonary
 - Cardiology
 - Neurology
- Telehealth services
- Nutrition education
- Substance use resources
 - Recovery centers
 - Support groups
- Reduce EMS response times in rural areas
- Emergency preparedness

Strengths of System

- Dry county
- Parks system
- Health Department
 - Active and strong partner
 - HANDS program
 - Helpful services and education
- Long term care facility and home care
- Hospital
 - Caring employees
 - ER staff
 - Number of providers
 - Specialty clinics
 - Discounted billing at hospital
- Strong primary care network
- Excellent first responders
- Adult day care available
- Several dental practices available
- Senior center – meals and programming
- Extension Office – education for youth and adults
- RTEC transportation available
- Programs addressing food insecurity
 - Blessing boxes
 - Backpack program

Finding 4: To better meet health needs in Monroe County, there should be a healthcare approach and a community approach.

Focus group responses that contributed to this finding are listed below.

Healthcare Approach

- Transportation
- Extended clinic hours
- Telehealth opportunities
 - Partnership with Tri-Star
- Expansion of specialty services
- Translation services for patient appointments
- EMS plans for remote areas
- Health fairs with preventative care and free screenings

Community Approach

- Transportation
- Education about resources
 - Resource guide
 - In school services
 - Utilization of social media
- Public services such as veteran care and legal aid
- Improved internet access
- Increased Food pantry storage
- Improved Housing
- Improved social connections
 - Senior population
 - Youth

Monroe County Medical Center Survey Results

WINTER 2023

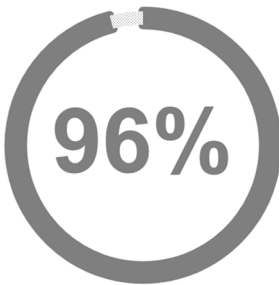
Respondent Demographics

399
Respondents



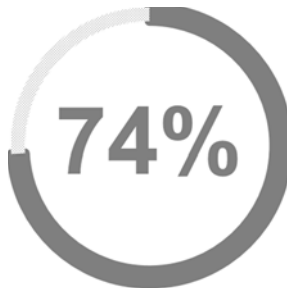
Respondents are female.

Additional responses: Male (16%), Other/prefer not to say (2%).



Respondents are white.

Additional responses: African American (1%), Hispanic/Latino (1%), Other (2%).



Respondents are living in their own home/apartment.

Additional responses: Living with family (parent(s), guardian, grandparents or other relatives) (25%), Staying with someone I know (1%).

Respondents by age group:

18-24	4%
25-39	18%
40-54	31%
55-64	24%
65-69	11%
70 or older	12%

Respondents by educational attainment:

College or above	50%
High School	37%
Technical school	11%
Other	3%

Income level of respondents:

\$0-\$24,999	20%
\$25,000-\$49,999	21%
\$50,000-\$74,999	20%
\$75,000-\$99,999	13%
\$100,000 or more	12%
Prefer not to answer	13%

Respondents by employment status:

Employed full-time	55%
Retired	25%
Unemployed	7%
Employed part-time	8%
Student	2%
Other	4%

Where respondents go for routine healthcare:



Regularly visit their primary care provider.

Respondents also use these options:

Emergency Room	8%
Urgent Care	4%
Health Department	5%
Do not receive routine healthcare*	3%
Other	2%

**Barriers to receiving healthcare identified: lack of providers, cannot take off work, cannot afford it, no appointment available*

Barriers that keep respondents from receiving routine healthcare:



Do not have barriers that keep them from receiving routine healthcare.

Respondents identified these barriers:

Only visit doctor when something is seriously wrong	27%
Inconvenient Physician hours	11%
Cannot take off work	7%
Cannot afford it	9%
Fear/anxiety	3%
Poor Physician attitude/communication	3%

Other responses: No insurance (5%), No transportation (3%), Lack of childcare (1%)

Travel to healthcare:



Travel 20 miles or more to see a specialist.

Respondents chose from these options:

Less than 20 miles	18%
20-49 miles	19%
50-100 miles	57%
Do not receive routine healthcare	3%

93% of respondents use their own vehicle, while 7% travel in a friend/family vehicle.

The top three health challenges respondent households face:

High blood pressure	24%
Overweight/obesity	20%
Diabetes	14%
Heart disease and stroke	14%
Mental health issues	10%
Cancer	9%
Respiratory/lung disease	6%
HIV/AIDS/STDs	0.25%
Other	3%

The top three most important factors for a healthy community:

Easy to access healthcare	15%
Good school systems	14%
Good place to raise children	14%
Good jobs/healthy economy	14%
Low crime/safe neighborhood	13%
Religious/spiritual values	8%
Affordable housing	7%
Personal responsibility	5%
Community activities and events	3%
Low disease rate	3%
Transportation	2%
Parks and recreation	2%
Excellent race relationships	1%
Diverse community	1%

Respondent household eligibility:

Medicare	35%
Medicaid	18%
Public housing assistance	3%
SNAP (Food stamp program)	10%
VA	4%
Commercial/private insurance	31%

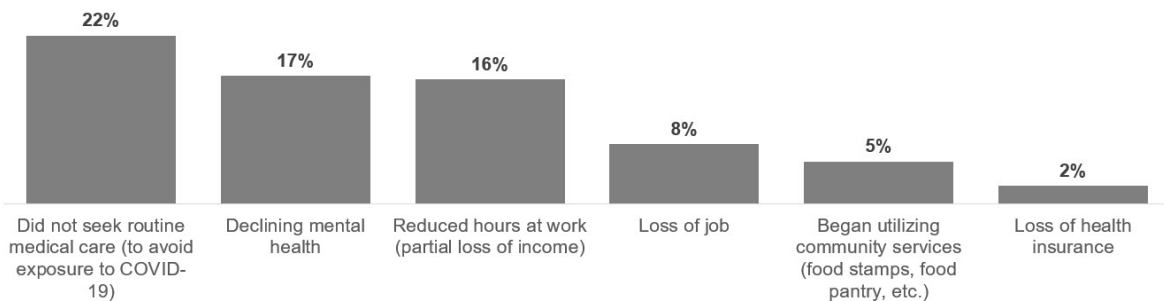


Respondent households have delayed healthcare because of lack of money and/or insurance.



Respondents think Monroe County meets the above factors for a healthy community.

Respondent household impacts due to COVID-19 pandemic:



Respondents identified another 5% of impacts due to COVID-19. And 25% reported that they did not experience the survey identified impacts.



Respondent households have used the services of a hospital in the last 12 months.



Respondent households that used the services of Monroe County Medical Center.



Respondent households that would recommend Monroe County Medical Center to friends and family.

Respondents who used hospital services at other locations:

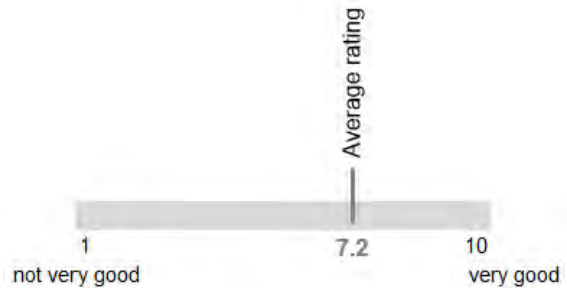
Where they went for services:

TJ Samson Community Hospital	16%
The Medical Center at Bowling Green	14%
Greenview Hospital	5%
Cumberland County Hospital	1%
Other	12%

Why they used a different hospital:

My doctor referred me to another hospital	41%
Service I needed was not available	34%
I prefer larger hospitals	6%
My insurance required me to go somewhere else	5%
Other	14%

Respondent rating of Monroe County Medical Center:



Which health related topics would you be interested in learning more about? Select all that apply.

Eating healthy	20%
Weight loss	20%
Mental health/Depression	12%
Cancer prevention	11%
Heart disease	10%
High blood pressure	9%
Emergency preparedness	7%
Substance use disorder (alcohol and/or drugs)	6%
Tobacco cessation	3%
Using my medications correctly	3%
Other	1%

Specialty care services respondents are willing to use telemedicine:

Mental/Behavioral Health	18%
Dermatology	15%
Cardiology	11%
Gastroenterology	11%
Endocrinology	9%
Pediatrics	9%
Urology	7%
Pulmonology	7%
Oncology	7%
Nephrology	5%

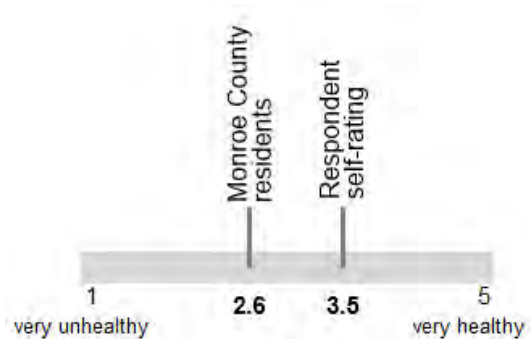
In the following list, what respondents think are the FIVE greatest health problems that should be addressed in Monroe County (those concerns which have the greatest impact on overall community health).

Alcohol/drugs	15%
Overweight/obesity	12%
Diabetes	11%
Heart disease and stroke	11%
Mental health issues	10%
Cancer	9%
Tobacco use	7%
High blood pressure	6%
Child abuse/neglect	5%
Dental problems	3%
Aging problems	3%
Lack of family planning	3%
Teenage pregnancy	2%
Respiratory/lung disease	2%
Infectious disease	1%
Environmental issues	1%
HIV/AIDS/STDs	1%

Please select the most important thing Monroe County can do to have a positive effect on the opioid crisis:

Provide more court-appointed treatment	23%
Education/services	21%
Open more treatment facilities	19%
Provide more substance abuse prevention	15%
Provide transportation to treatment	5%
Provide more naloxone (to treat overdoses)	2%
Other	16%

Respondents rate their own health, and the overall health of their community:



Prioritization of Identified Health Needs

CEDIK reviewed findings from the community surveys, focus groups, key informant interviews and county specific secondary health data.

The process of priority selection followed the Association for Community Health Improvement (ACHI) recommendations to consider:

1. Magnitude and severity of the problem
2. Need among vulnerable populations
3. Community's capacity and willingness to act on the issue
4. Ability to have a measurable impact on the issue
5. Availability of hospital and community resources
6. Existing interventions focused on the issue
7. Whether the issue is a root cause of other problems
8. Trending health concerns in the community

Additional prioritization criteria can include: the importance of each problem to community members, evidence that an intervention can change the problem, and alignment with an organization.

CEDIK staff led a facilitated discussion with members of the steering committee after the data presentation and completed the process of prioritizing the identified health needs. The following represent the recommendations of the steering committee to Monroe County Medical Center for addressing health needs in Monroe County and the hospital service area for the next three years.

Prioritized Needs

1. Mental Health
2. Substance Use/Addiction
3. Nutrition education/food access
4. Increased health access
5. Diabetes (Obesity/physical inactivity)

Next Steps

Over the next four months, hospital administration and staff, along with community partners will develop an implementation plan that includes measurable goals, objectives, and action plan to address each identified priority health need in this community health needs assessment.

This Implementation Strategy will be rolled out over the next three years, from Fiscal Year 2023 through the end of Fiscal Year 2025.

Monroe County Medical Center will kick off the implementation strategy by initiating collaborative efforts with community leaders to address each health priority identified through the assessment process.

Periodic evaluation of goals/objectives for each identified priority will be conducted to assure that we are on track to complete our plan as described.

At the end of Fiscal Year 2025, Monroe County Medical Center will review the implementation strategy and report on the success experienced through the collaborative efforts of improving the health of the community.



Appendix

- A. Secondary Data Sources
- B. Monroe County Medical Center CHNA Survey
- C. Board Approval

2022 Secondary Data Sources

Population	Source	Years of Data
Total Population	Census Population Estimates	2019
Under 18 years	Census Population Estimates	2019
65 years and older	Census Population Estimates	2019
Non-Hispanic Black	Census Population Estimates	2019
American Indian & Alaska Native	Census Population Estimates	2019
Asian	Census Population Estimates	2019
Native Hawaiian/Other Pacific Islander	Census Population Estimates	2019
Hispanic	Census Population Estimates	2019
Non-Hispanic White	Census Population Estimates	2019
Not Proficient in English	American Community Survey, 5-year estimates	2015-2019
Female	Census Population Estimates	2019
Rural	Census Population Estimates	2010
Health Outcomes		
Premature death	National Center for Health Statistics - Mortality Files	2018-2020
Poor or fair health	Behavioral Risk Factor Surveillance System	2019
Poor physical health days	Behavioral Risk Factor Surveillance System	2019
Poor mental health days	Behavioral Risk Factor Surveillance System	2019
Low birthweight	National Center for Health Statistics - Natality files	2014-2020

2022 Secondary Data Sources, continued

Health Behaviors	Source	Years of Data
Adult diabetes	Behavioral Risk Factor Surveillance System	2018-2020
Adult hypertension	Behavioral Risk Factor Surveillance System	2017-2019
Adult dental health	Behavioral Risk Factor Surveillance System	2016-2018
Food consumption	Behavioral Risk Factor Surveillance System	2017-2019
Adult smoking	Behavioral Risk Factor Surveillance System	2019
Adult obesity	United States Diabetes Surveillance System	2019
Food environment index	USDA Food Environment Atlas, Map the Meal Gap from Feeding America	2019
Physical inactivity	United States Diabetes Surveillance System	2019
Percent with Access to Exercise Opportunities	Business Analyst, Delorme map data, ESRI, & US Census Tigerline Files	2010 & 2021
Excessive drinking	Behavioral Risk Factor Surveillance System	2019
Alcohol-impaired driving deaths	Fatality Analysis Reporting System	2016-2020
Sexually transmitted infections	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention	2019
Teen births	National Center for Health Statistics - Natality files	2014-2020
Access to Care		
Uninsured	Small Area Health Insurance Estimates	2019
Primary Care Physicians	Area Health Resource File/American Medical Association	2019
Dentists	Area Health Resource File/National Provider Identification file	2020
Mental health providers	CMS, National Provider Identification	2021

2022 Secondary Data Sources, continued

Social & Economic Factors	Source	Years of Data
Percentage of adults ages 25 and over with a high school diploma or equivalent.	American Community Survey, 5-year estimates	2016-2020
High school completion	American Community Survey, 5-year estimates	2016-2020
Some college	American Community Survey, 5-year estimates	2016-2020
Unemployment	Bureau of Labor Statistics	2020
Children in poverty	Small Area Income and Poverty Estimates	2020
Income inequality	American Community Survey, 5-year estimates	2016-2020
Ratio of household income at the 80th percentile to income at the 20th percentile.		
Children in single-parent households	American Community Survey, 5-year estimates	2016-2020
Percentage of children that live in a household headed by a single parent.		
Social associations	County Business Patterns	2019
Number of membership associations per 10,000 population.		
Violent crime	Uniform Crime Reporting - FBI	2014 & 2016
Number of reported violent crime offenses per 100,000 population.		
Injury deaths	National Center for Health Statistics - Mortality Files	2016-2020
Number of deaths due to injury per 100,000 population.		
Physical Environment		
Air pollution - particulate matter	Environmental Public Health Tracking Network	2018
Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5).		
Drinking water violations	Safe Drinking Water Information System	2020
Indicator of the presence of health-related drinking water violations. 'Yes' indicates the presence of a violation, 'No' indicates no violation.		
Severe housing problems	Comprehensive Housing Affordability Strategy (CHAS) data	2014-2018
Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities.		
Driving alone to work	American Community Survey, 5-year estimates	2016-2020
Percentage of the workforce that drives alone to work.		
Long commute - driving alone	American Community Survey, 5-year estimates	2016-2020
Among workers who commute in their car alone, the percentage that commute more than 30 minutes.		

2016-2020 County Health Rankings Data Sources

Health Outcomes	Source	2016 Data	2020 Data
Premature death	National Center for Health Statistics - Mortality Files	2011-2013	2016-2018
Poor or fair health	Behavioral Risk Factor Surveillance System	2014	2017
Poor physical health days	Behavioral Risk Factor Surveillance System	2014	2017
Poor mental health days	Behavioral Risk Factor Surveillance System	2014	2017
Low birthweight	National Center for Health Statistics - Natality files	2007-2013	2012-2018
Health Behaviors			
Adult smoking	Behavioral Risk Factor Surveillance System	2014	2017
Adult obesity	CDC Diabetes Interactive Atlas, United States Diabetes Surveillance System	2012	2016
Food environment index	USDA Food Environment Atlas, Map the Meal Gap from Feeding America	2013	2015 & 2017
Physical inactivity	CDC Diabetes Interactive Atlas, United States Diabetes Surveillance System	2012	2016
Excessive drinking	Behavioral Risk Factor Surveillance System	2014	2017
Alcohol-impaired driving deaths	Fatality Analysis Reporting System	2010-2014	2014-2018
Sexually transmitted infections	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention	2013	2017
Teen births	National Center for Health Statistics - Natality files	2007-2013	2012-2018

2016-2020 County Health Rankings Data Sources, continued

Access to Care	Source	2016 Data	2020 Data
Uninsured	Small Area Health Insurance Estimates	2013	2017
Primary care physicians	Area Health Resource File/American Medical Association	2013	2017
Dentists	Area Health Resource File/National Provider Identification file	2014	2018
Mental health providers	CMS, National Provider Identification	2015	2019
Social & Economic Factors			
High school completion	EDFacts, KY & WV Departments of Education	2012-2013	2016-2017
Some college	American Community Survey, 5-year estimates	2010-2014	2014-2018
Unemployment	Bureau of Labor Statistics	2014	2018
Children in poverty	Small Area Income and Poverty Estimates	2014	2018
Children in single-parent households	American Community Survey, 5-year estimates	2010-2014	2014-2018
Social associations	County Business Patterns	2013	2017
Violent crime	Uniform Crime Reporting - FBI	2010 & 2012	2014 & 2016
Injury deaths	CDC WONDER Mortality data, National Center for Health Statistics - Mortality Files	2009-2013	2014-2018
Physical Environment			
Air pollution - particulate matter	CDC WONDER Environmental data, Environmental Public Health Tracking Network	2011	2014
Severe housing problems	Comprehensive Housing Affordability Strategy (CHAS) data	2008-2012	2012-2016
Driving alone to work	American Community Survey, 5-year estimates	2010-2014	2014-2018
Long commute - driving alone	American Community Survey, 5-year estimates	2010-2014	2014-2018

Monroe County Medical Center

2022 CHNA Survey

We want to better understand your health needs and how the hospital and its partners can better meet those needs. Please take 5-10 minutes to fill out this survey. Please do not include your name anywhere.

All responses will remain anonymous.

Q1. Please tell us your zip code:

Q2. Are you or anyone in your household satisfied with the ability to access healthcare services in Monroe County?

- Yes
- No

Q3. Where do you go to receive routine healthcare? Select all that apply.

- Physician's office/My family doctor
- Emergency room
- Health department
- Urgent care
- Other. Please specify:

- I do not receive routine healthcare

Q4. Are there barriers that keep you from receiving routine healthcare? Select all that apply.

- No insurance
- Lack of child care
- Physician hours of operation (inconvenient times)
- Fear/anxiety
- Poor physician attitudes or communication
- I only visit the doctor when something is seriously wrong
- No transportation
- Cannot take off work
- Cannot afford it
- Other. Please specify:

- No barriers

Q5. How far do you or anyone in your household travel to see a specialist?

- Less than 20 miles
- 20 - 49 miles
- 50 - 100 miles
- Other. Please specify:

- I do not receive routine healthcare

Q6. What specialty care services would you be willing to see using video calls (telemedicine)? Select all that apply.

- Cardiology
- Dermatology
- Oncology
- Urology
- Nephrology
- Gastroenterology
- Pulmonology
- Endocrinology
- Pediatrics
- Mental/Behavioral Health

Q7. Have you or someone in your household used the services of a hospital in the past 24 months?

- Yes
- No

Q8. If Yes, where did you visit a hospital?

- TJ Samson Community Hospital
- The Medical Center at Bowling Green
- The Medical Center at Scottsville
- Greenview Hospital
- Cumberland County Hospital
- Other. Please specify:

Q9. If you went to a hospital other than Monroe County Medical Center, why? Select all that apply.

- My doctor referred me to another hospital
- My insurance requires me to go somewhere else
- I prefer larger hospitals
- Other. Please specify:

Q10. How would you rank Monroe County Medical Center on a scale of 1 to 10, where 1 is *not very good* and 10 is *very good*? Please circle a number below.

1 2 3 4 5 6 7 8 9 10

Q11. Would you recommend Monroe County Medical Center to friends and family?

- Yes
- No

Q12. How would you rate **own personal health**?

- Very healthy
- Healthy
- Neither healthy nor unhealthy
- Unhealthy
- Very unhealthy

Q13. How would you rate the overall **health of Monroe County**?

- Very healthy
- Healthy
- Neither healthy nor unhealthy
- Unhealthy
- Very unhealthy

Q14. Please select the TOP THREE **health challenges** you or anyone in your household face. Select only three.

- Cancer
- Diabetes
- Mental health issues
- Heart disease and stroke
- High blood pressure
- HIV/AIDS/STDs
- Overweight/obesity
- Respiratory/lung disease
- Other. Please specify:

Q15. Please select the TOP THREE most important factors for a **healthy community**. Select only three:

- Good place to raise children
- Low crime/safe neighborhood
- Good school systems
- Easy to access healthcare
- Community activities and events
- Affordable housing
- Low disease rate
- Personal responsibility
- Excellent race relationships
- Diverse community
- Good jobs/healthy economy
- Religious/spiritual values
- Transportation
- Parks and recreation
- Other. Please specify below:

Q16. Do you think Monroe County meets those factors (in Q15)?

- Yes
- No

Q17. What could be done in Monroe County to better meet your health needs?

Q18. In the following list, what do you think are the FIVE greatest health problems that should be addressed in Monroe County (**those concerns which have the greatest impact on overall community health**). Select only five.

- Diabetes
- Mental health issues
- High blood pressure
- Heart disease and stroke
- HIV/AIDS/STDs
- Tobacco use
- Overweight/obesity
- Dental problems
- Alcohol/drugs
- Child abuse/neglect
- Respiratory/lung disease
- Aging problems
- Teenage pregnancy
- Environmental issues
- Infectious disease
- Lack of family planning
- Other. Please specify below:

Q19. Which health related topics would you be interested in learning more about? Select all that apply.

- Eating healthy
- Weight loss
- Heart disease
- Cancer prevention
- Emergency preparedness
- Tobacco cessation
- Substance use disorder (alcohol and/or drugs)
- Mental health/Depression
- High blood pressure
- Using my medications correctly
- Other. Please specify:

Q20. Please select the most important thing Monroe County can do to have a positive effect on the opioid crisis.

- Open more treatment facilities
- Provide more transportation to treatment
- Provide more court-appointed treatment
- Provide more substance abuse prevention
- Education/services
- Provide more naloxone (to treat overdoses)
- Other. Please specify:

Q21. In what ways were you or your family affected by the COVID-19 pandemic? Select all that apply.

- Loss of job
 - Loss of health insurance
 - Declining mental health
 - Reduced hours at work (partial loss of income)
 - Began utilizing community services (food stamps, food pantry, etc.)
 - Did not seek routine medical care (to avoid exposure to COVID-19)
 - Other. Please specify:
-

- None of the above

Q22. What is your current employment status?

- Unemployed
- Employed part-time
- Employed full-time
- Retired
- Student
- Other. Please specify:

Q23. What is your age?

- 18 - 24
- 25 - 39
- 40 - 54
- 55 - 64
- 65 - 69
- 70 or older

Q24. What is your gender?

- Male
- Female
- Other

- Prefer not to answer

Q25. What is the highest level of education you have completed?

- High School/GED
- Technical school
- College or above
- Other. Please specify:

Q26. What ethnic group do you identify with?

- African American/Black
- Asian/Pacific Islander
- Hispanic/Latino
- Native American
- White/Caucasian
- Other. Please specify:

Q27. What is your annual household income?

- \$0 - \$24,999
- \$25,000 - \$49,999
- \$50,000 - \$74,999
- \$75,000 - \$99,999
- \$100,000 or more
- Prefer not to answer

Q28. Are you or members of your household currently eligible for any of the following services? Select all that apply.

- Medicare
- Medicaid
- Public Housing Assistance
- SNAP (Food stamp program)
- VA
- Commercial/private insurance

Q29. What is your current living situation?

- Living with family (parent(s), guardian, grandparents, or other relatives)
- Living on your own (apartment or house)
- Living in a place not meant to be a residence (outside, tent, car, homeless camp, abandoned building)
- Living in recovery housing
- Living in a recovery treatment facility
- Staying in an emergency shelter or transitional living program
- Living in a hotel or motel
- Staying with someone I know

Q30. Have you or someone in your household delayed healthcare because of lack of money and/or insurance?

- Yes
- No

Thank you for taking the time to participate in this survey.

Approval

This Community Health Needs Assessment was approved by the Monroe County Medical Center Board on February 20, 2023.

Polly Baker

SIGNATURE

2-20-2023

DATE